BULLETIN 8: Democratic Republic of the Congo

INSIGHT: How rumours and allegations on social media affect aid agencies operating environment.

The June 16 attack on a COVID-19 treatment centre in South Kivu and efforts by youths to hinder ongoing Ebola vaccination campaigns in the Equateur region are two examples of events where violence, or threats of violence, affected the health response in the DRC. This bulletin analyses how misinformation on social media can contribute to community mistrust in the DRC.

Available data suggests that while 9% of all monitored DRC Facebook discussions of COVID-19 concerned humanitarian and medical aid, most was negative.

The connection between outbursts of violence and social media posts is not clear.

Concerned about social media, the health response or aid operations?
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The WHO's endorsement of the use of dexamethasone is accompanied by accusations of discrimination against ‘black people’ and ‘Africans’ and calls to ‘declare war’ on the WHO and Europe.

• News of the WHO’s endorsement of Dexamethasone as a potentially life-saving drug for patients critically ill with COVID-19 following clinic trials by UK researchers was met with widespread indignation and accusations of double standards and discrimination against “black people” and “Africans” as locals contrasted this development with the WHO’s previous refusal to endorse Madagascar’s COVID Organics, seen by locals as an “African” remedy.

• Since the public standoff with Madagascar’s president, misinformation targeting the WHO has increased and the international health effort is being equated with foreign and in particular European interests. Recent disinformation includes the widely circulated false claim that the Director General of the WHO chose Africa as a testing ground for COVID-19 vaccines. The statement that “Africans should be cooperative or otherwise be forced to take the test” are being falsely attributed to the WHO. In another post, the president of Madagascar is featured claiming that “we will fight against any white who comes here in Africa with this vaccine [...] we declare war against the WHO and Europe.”

• Bulletins 4 and 5 highlighted rumours accusing the WHO of seeking to use vaccines to harm Africans.

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Widespread corruption in the DRC affects the reputation of health responders as details of corrupt practices are shared on social media

- Corrupt practices within national and local institutions have been widely discussed in the traditional media in the wake of the procès des «100 jours», a high-level corruption trial. This has coincided with the uncovering by The New Humanitarian of a complex large-scale scam involving the diversion of millions of aid money from beneficiaries by corrupt aid workers, business owners, and community leaders. The scale of corrupt or lax practices, and the likelihood that these are of common knowledge to most locals, may be a factor why locals are susceptible to misinformation with regards to the Ebola and COVID-19 pandemics. The circulating stories resonate with personal experience and general community gossip shared in person, and increasingly on social media.

- Between 15-21 June, protests against Ebola response efforts in Mbandaka, Équateur province, which included vaccination campaigns, were driven by the belief among sections of the population that the government fabricated the outbreak to profit from international aid.

- Concerned citizens shared stories on social media that allege corrupt practices around the management of the COVID-19 crisis as well as the new Ebola response in Équateur. In one allegation, relatives of a deceased man claimed health workers tried to bribe them with thousands of US dollars into accepting that the deceased died of COVID-19 and into releasing their body to the government for burial. Another rumour alleges that Tanzanian truck drivers bribe border officials to be certified negative for COVID-19 to cross the border into Kenya.

- Concerns about corruption has reduced trust in health workers, impacting health operations: a recently published study commissioned by UNICEF sheds light on how perceived corruption was a major barrier to accessing health care in the Kivus during the 10th Ebola outbreak, due to the belief that health care workers were receiving payments for transferring patients to Ebola treatment centres.

- Individual stories of corruption in relation to the disease outbreaks, accompanied by a growing sentiment of widespread corruption, reinforce the already existing perception that the epidemics are used or invented for corrupt purposes by local authorities - in tandem with international aid organisations, politicians, churches and NGOs. Reports of corruption readily link up with misinformation about the intentions of international aid organisations.

Social media stories affected EU Commissioner Lenarcic’s, French Foreign Minister Le Drian’s and Belgian Foreign and Defence Minister Goffin’s visit to the DRC

- The arrival on 8 June of a European Union mission in Kinshasa with the aim to develop a “humanitarian air bridge” was accompanied by news that two local members of the EU Delegation tested positive for COVID-19. This development exposed the EU visit to disinformation: a popular page posing as a news outlet omitted that those who tested positive were Congolese, but instead gave their followers the impression that the visiting delegation was importing the virus. One follower commented: “their objective was to export COVID-19 here...and since we have weak leaders in the DRC their objective has well and truly succeeded”.

- Posts on social media that questioned the intentions of the visit circulated widely on social media. People queried why the EU would want to help the DRC when it failed to show solidarity with fellow European countries or other African countries with higher COVID-19 cases. Posts by the vigilante group Veranda Mutsanga in North Kivu called on locals to refuse testing or aid, and to “impede their presence within our villages and territories”.

- The misinformation from social media appears to have negatively impacted the visiting delegation’s reception in North Kivu. A video circulating on social media purports to show some of the EU visitors, escorted by armed police, being “pushed back” out of a local village by a mob of youths in Masisi territory.

The picture above shows a European health worker intending to inject a local with COVID-19 while pretending to be a vaccinator. It has been shared 1.5K times. It is an example of widely circulated misinformation targeting the EU in the run-up to the visit. Different versions of the image have been circulating for several months.
WHAT IS THE IMPACT OF DISINFORMATION ON PUBLIC OPINION?

- While it is difficult to directly link such disinformation to violent or threatening actions that affect the international health response, there is a growing body of evidence of a dynamic link between disinformation and community mistrust.
- Community distrust was one of the driving forces behind violence that affected the 10th Ebola response in the Kivus.

WHO IS BEHIND THE OPINIONS EXPRESSED ON SOCIAL MEDIA?

- Self-selected influencers are behind many of the opinions circulating on public social media platforms. It is not known to what extent such opinions are the influencers’ personal views, may represent the views expressed by people who live around them, or are copied ideas from social media that originated elsewhere. Some of these posts may also be pushed by groups pursuing an unclear agenda.
- The opinions expressed in closed, private, social media groups are mostly personal views. Some personal opinions are also published on public social media platforms but as they tend to say within a closed group of contacts, they usually receive fewer shares or likes than the posts by ‘influencers’ but may still be very important in shaping perceptions.

WHO IS INFLUENCED BY OPINIONS ON SOCIAL MEDIA?

- Some people follow social media platforms espousing information they tend to already agree with, creating ‘bubbles’ in which users reinforce or confirm their pre-existing views, notions, or suspicions, sometimes developed on the basis of rumours and allegations. In this way, social media may provide opportunities for radicalisation.
- Some people are critical users of social media and may read the information without agreeing, and do not incorporate what they read or see into their own thinking.
- Some people do not use social media. This may be due to no or poor connectivity or personal choice.
- While knowing which of these categories are the most prominent in the context of the DRC is challenging, mobile phone data use shows that the use of social media is more widespread and likely to have a greater influence in towns. Facebook - widely used across Africa, appears less used in Equateur than the Kivus - at least in relation to geolocated Facebook coverage of COVID-19.

This document is published by Insecurity Insight. It shares key trends and insights from media monitoring carried out by Novetta in the Democratic Republic of the Congo. It highlights the critical necessity of sustained community engagement. It has been funded by the H2H Fund, which is supported by UK aid from the UK government. It has been developed by Insecurity Insight and Novetta, using Novetta Mission Analytics to deliver near real-time pattern and behavioural analysis of social, print, and broadcast media (radio and television) content and incident data.