

# COVID-19 amidst Ebola's retreat

In April, the Democratic Republic of the Congo (DRC) was on the verge of good news—announcing an end to its tenth (and the world's second largest) Ebola outbreak. Unfortunately, since 10 April, new Ebola cases have been reported in Beni, the epicenter of the Ebola outbreak. Although the DRC has long struggled with political unrest, armed conflict, poverty, and infectious diseases, it must remain committed to ending the Ebola crisis while also applying the lessons learned in tackling this old viral enemy to combat a new one—severe acute respiratory syndrome-coronavirus 2 (SARS-CoV-2), the cause of coronavirus disease 2019 (COVID-19).

Reported cases of COVID-19 in the DRC so far (442 cases, 28 deaths) are probably underestimations given the lack of testing in a country whose weak health system serves 89 million people. The perception of COVID-19's impact among the DRC Congolese is likely to be dwarfed by their experience with the more lethal Ebola virus (2279 deaths among 3461 infected since August 2018). As less than 5% of the DRC's 59,000-km network of roads are usable, the expansion of COVID-19 to rural provinces may be slow. But once COVID-19 gains a strong foothold in the DRC, its elimination could take much longer.

A major lesson learned from the DRC's response to Ebola is that people's distrust of authorities and outsiders can delay responses to disease. Illegal poaching and lumber trade, mining, and war-related displacement

of people to Congo's rain forests likely damaged the forest in ways that increased contact between people and animal reservoirs of Ebola virus. The Congolese became increasingly wary of authorities and others who were stripping resources and stoking corruption, violence, and poverty. Health workers had to establish local trust through clear communication and transparency about the disease and treatments. Eventually, the Congolese were open to a vaccination campaign and other measures that brought the current outbreak under control.

But there is an air of optimism in and about the DRC. The near successful campaign against Ebola, the first peaceful democratic transition of power in 2019, economic growth over the past 2 years, and anticorruption reforms aimed at individuals and industries have been positive changes for the nation. The new government

must launch a strong response to COVID-19 without compromising the last leg of the Ebola response. Indeed, the system developed for managing Ebola is now being absorbed by the COVID-19 task force.

How can this be accomplished? Public-private partnerships such as the DRC's Investment Promotion fund can upgrade labs and test centers and pay for test kits. Existing internationally funded programs such as those from the World Bank, African Development Bank, and World Health Organization, could be leveraged until additional COVID-19 funds can be acquired. Last month, the government announced a new National Solidarity Fund against COVID-19 that includes representation by the religious sector, a welcome step that should be duplicated for other outbreaks. Hand-washing stations must be created and the importance of face covering

must be communicated by authorities and health workers. Only 4% of the 11 million residents of Kinshasa follow the latter recommendation. The DRC's Ebola contact tracing experts and field epidemiology graduates can train volunteer university students to carry out COVID-19 contact tracing. Similarly, surge capacity can be developed through intensive training of graduates of medical (>2000/year), nursing (>7000/year), and laboratory technical schools to boost testing and to triage patients. Increasing temporary bed capacity to isolate the ill (in school and university buildings) should be considered.

The DRC government must also address pandemic-induced economic

hardships—that is, the loss of daily wages for the 73% of the population who survive on less than \$1.90 a day, as businesses, farming, and other livelihoods begin to close. Private sector food banks have emerged, but they should be sustained by government engagement with the private sector and the United Nations World Food Programme. The United Nations Organization Stabilization Mission in the Democratic Republic of the Congo (MONUSCO) and DRC's defense infrastructure can jointly help facilitate distribution.

Difficult days are ahead for the DRC in its fight against Ebola and COVID-19, in addition to measles, malaria, and cholera. This is a time for national unity and optimism and partnerships with the global community to ensure that disease threats are faced head-on.

—John Ditekemena\*



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