Africa Centres for Disease Control and Prevention (Africa CDC) and World Health Organization (WHO) call for urgent, community-led action to contain Ebola in the Democratic Republic of the Congo (DRC)

Ebola outbreak DRC

Community, religious, women and youth leaders have a critical role in building trust, addressing concerns and ensuring that response measures reflect local realities

The Africa Centres for Disease Control and Prevention (Africa CDC) (https://AfricaCDC.org/) and the World Health Organization (WHO) have called for an urgent scale-up of the community-led Ebola response in the Democratic Republic of the Congo (DRC), with stronger early detection, contact follow up, access to care, support for frontline health workers and faster delivery of resources to affected communities.

The call followed a joint high-level mission to Uganda and DRC on 4 and 5 August, which drew lessons from Uganda's successful containment of local transmission, assessed operational challenges in Bunia and brought the priorities of communities and frontline responders into high-level discussions with national leaderships in Kinshasa. The mission was led by Dr. Tedros Adhanom Ghebreyesus, WHO Director-General, H.E. Dr. Jean Kaseya, Director-General of Africa CDC, and Dr. Mohamed Janabi, WHO Regional Director for Africa.

With visits in Kampala, Bunia and Kinshasa, members of the delegation met national and provincial authorities, response coordinators, health workers, community representatives and partners. The mission assessed progress, identified critical operational gaps and brought the concerns of affected communities and frontline teams directly to national leadership.

Uganda shows that containment is possible

In Kampala, the delegation engaged with national authorities and response teams following Uganda's declaration of the end of its outbreak on 28 July 2026. Uganda recorded 20 confirmed cases and two deaths. All previously listed contacts completed follow-up.

Africa CDC and WHO commended Uganda's leadership and the work of health workers, communities and partners. The country's experience demonstrated the importance of early detection, rapid contact tracing, coordinated national action, trusted community

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engagement and strong cross-border surveillance.

The organizations stressed that preparedness must be maintained. Continued transmission in the DRC means neighbouring countries remain at risk and must sustain surveillance, laboratory readiness and cross-border coordination.

Communities at the centre in Bunia

The delegation then travelled to Bunia, in Ituri Province, the epicentre of the outbreak. It met provincial authorities, national and provincial response teams, frontline health workers, community representatives and partners supporting the response. The delegation also visited the Rwangole Ebola Treatment Centre and assessed its readiness to expand access to timely, quality care. The field visit reinforced a central conclusion of the mission: containing and stopping the outbreak will depend on communities.

People must receive clear information from voices they know and trust. They must be able to recognize symptoms, report alerts early and seek care without fear. Communities must be directly involved in surveillance, referrals, treatment, safe and dignified burials and decisions affecting their families.

Community, religious, women and youth leaders have a critical role in building trust, addressing concerns and ensuring that response measures reflect local realities.

The delegation recognized the courage of communities and health workers operating under extremely difficult conditions, including insecurity, population movement, poor road access, misinformation and severe pressure on health services.

It also heard directly about the barriers slowing the response, including delayed detection, limited access to care, resistance to some response activities, shortages of essential supplies and insufficient support for frontline teams.

Ituri accounts for nearly 90% of confirmed cases in the DRC, with Bunia, Rwampara and Mongbwalu health zones among the most affected. Response operations must match the pace of transmission

As of 4 August 2026, the DRC had reported 3973 confirmed cases, 1801 deaths and 776 recoveries across 51 health zones in five provinces.

In the latest 24-hour reporting period, the country recorded 99 new confirmed cases and 52 deaths.

Contact follow-up stood at 75%, below the operational target of at least 95% required to identify transmission chains rapidly and ensure that new cases are detected among known contacts.

A total of 674 people were under care. Treatment-centre occupancy in North Kivu had reached 139%, placing severe pressure on available beds, health workers and response operations.

Africa CDC and WHO called for immediate action to:

- identify cases earlier and raise daily contact follow-up to at least 95%;
- bring testing, referral, isolation and treatment services closer to affected communities;
- urgently expand treatment, laboratory, ambulance and safe and dignified burial capacity;
- protect, equip, support and pay frontline health workers on time;
- strengthen infection prevention and control in health facilities;
- maintain essential health services for affected communities;
- improve secure access to areas affected by insecurity and poor infrastructure;
- work through trusted community leaders at every stage of the response;
- sustain cross-border surveillance and regional preparedness; and
- ensure that committed financing reaches frontline operations without delay.

Field findings brought to national leadership in Kinshasa

The mission concluded in Kinshasa with meetings with the President of the Republic and members of Government. Dr. Tedros, Dr. Kaseya and Dr. Janabi, discussed the findings from Kampala and Bunia with national authorities and partners. The discussions focused on government leadership, stronger operational coordination, community engagement, support for health workers, access to affected areas, continuity of essential health services and the rapid deployment of additional capacity and financing. The principals reaffirmed their support for a government-led and nationally-coordinated response bringing together national and provincial authorities, Africa CDC, WHO, humanitarian and development partners, health workers and communities.

"In some areas of eastern DRC, the Ebola outbreak is outpacing our response, making it imperative that we rapidly scale up every aspect of our efforts to contain it," said Dr. Tedros. "We stand in solidarity with the Government, affected communities, and the courageous health workers serving under exceptionally difficult circumstances. But this must be backed by sustained commitment, greater resources, and stronger international support. Together, we must guarantee safe access for responders, protect civilians and health workers, and mobilize the support needed to end this outbreak and save lives."

"Containing and ultimately stopping this outbreak will come from communities," said Dr. Jean Kaseya, Director-General of Africa CDC. "When people have information they trust, can report symptoms early and seek care without fear, we can break every chain of transmission. Our responsibility is to bring the response closer to communities and give frontline teams the support they need."

Africa CDC and WHO reaffirmed their commitment to supporting the Government of the DRC and affected communities through one coordinated response.

Both organizations will continue to deploy technical expertise, strengthen regional preparedness and mobilize the resources required to interrupt transmission and protect lives.

Africa CDC and WHO continue to advise against unnecessary restrictions on travel or trade. Countries should instead strengthen surveillance, laboratory capacity, preparedness and cross-border coordination.