



Ange Kasongo Perazzo
Stéphanie Gauthier Marchais
Christian Patrick Pole Pole
Milabyo Bazuzi Kyamusugulwa
Ann Laudati
Abass S. Kamara
Luisa Marie-Charlotte August
Enria Noël Mertens
25th, Cikuru 2021

Lockdown diaries: COVID-19 pandemic stories from the DRC and Sierra Leone

0 comments | 5 shares

Estimated reading time: 5 minutes



The global effects of the COVID-19 pandemic are diverse and far-reaching, exposing fault lines in long-standing socio-economic crises. In countries historically impacted by colonialism, conflict and previous epidemics, much has been revealed about how these legacies manifest in the present, as sense is made of rapid change. Our new series uses diaries from people living under lockdown during the pandemic in the DRC and Sierra Leone to present these experiences first-hand, putting into question the nature of the crisis or, indeed, crises.

Follow the series [COVID-19 pandemic stories from the DRC and Sierra Leone](#).

This blog series, funded by the SSRC Rapid Response Grant, aims to make visible the implications and everyday experiences of living during COVID-19 in the Democratic Republic of Congo (DRC) and Sierra Leone – countries with a history of colonialism, armed conflict and epidemics, in particular Ebola. The project is the result of an

international collaboration between five teams of two co-authors comprising a Congolese/Sierra Leonean researcher and a Western-based colleague. Between March and December 2020, the African partners carefully documented their personal experiences of the ongoing COVID-19 pandemic using 'lockdown diaries', which were then analysed and reworked through dynamic collective discussions into the blog series presented here.

Whose crisis?

In the series, Abass Kamara and Luisa Enria offer a synthesising statement that speaks to the collection of each diarist's experiences: 'Not only did people experience the pandemic very differently, but interpretations of the health emergency and its material effects highlighted a range of other contestations and fault lines in longer-standing societal crises'. The collection of blogs presented here articulates these various experiences and highlights four particular themes anchored in an analytical lens of 'whose crisis?': (1) distrust towards the virus and the source of its emergence; (2) implications of the disease mandates on and the creation of uncertainties in the job sector; (3) fear (personal/familial/relational) and fear management, and; (4) masks, police repression, and navigating the social landscape with a mask.

As Marie-Noël Cikuru, a Congolese researcher and practitioner, asserts, these different experiences during the period necessitate that we first interrogate the very policies ordered under the pandemic itself. 'The term '*confinement* (lockdown)', she argues, 'is impractical. In fact, it is hard to implement, if not impossible. Most people, especially in poorer neighbourhoods, live in small wooden cabins covered with sheet metal, which are very poorly lit and ventilated, and become very hot during the day. It is simply unthinkable to spend the day there'.

Where restrictions were enforced, the most immediate impacts were on both ordinary and marginalised people's capacity to gather revenues and support their families. Ange Kasongo, a Kinshasa journalist noted, 'how hundreds of thousands of impoverished and ordinary urbanites have been cut off from their main source of livelihood.' The government's first move to contain the spread of COVID-19 among Kinshasa's 14 million inhabitants was to put its high-end residential and administrative area, la Gombe, on lockdown. This had particularly negative implications for the city's impoverished dwellers who converged on Gombe daily in search of income. 'With no more opportunities to sell foods, phone credits and other basic items along Gombe's

busy roads ... one can only imagine the enormous loss of earnings for the general population’.

This response echoes Christian Pole Pole Bazuzi’s experiences, who, as a researcher located in Goma – over 1,500km East of Kinshasa – noted how ‘COVID-19 provoked a deep economic crisis in most sectors in eastern DRC’. This includes researchers like himself, whose work activities were suddenly suspended, and offices closed following project funder decisions. Patrick Milabyo Kyamusugulwa, the Director General of the Bukavu University Medical College, similarly recalls how those employed in the higher education sector were also negatively affected. For many college educators in the region, closing schools meant more than just the ceasing of teaching activities, but ‘this resulted in the immediate loss of local income for all teachers as well as administrative staff.’

Adding to these economic hardships, Christian Bazuzi and Gauthier’s post analyses the political and social impacts of COVID-19-related policies on ordinary citizens whose experiences of recurring police abuse and violence significantly worsened amidst the pandemic. Christian Bazuzi relates how in the case of the Congo, ‘the mask became a business for our security forces as the requirement to wear a mask opened the door to increased harassment of the population,’ whereby, ‘the mask turned into a form of ID card in the city, which had to be carried around day and night, more because for fear of being arrested than for health reasons.’ Abass, who works for the Kambia District Health Management Team in Sierra Leone, notes in his diaries that these everyday experiences demonstrate that most saw the socio-economic effects of COVID-19 regulations as being far more severe than the virus itself, whether by the loss of income, the shut-down of the educational sector, or repeated extortion by security forces.

Yet, despite the restrictive measures put in place by the government, Patrick suggests, ‘most did not believe in the existence of the virus’. As Marie-Noël and Charlotte write, ‘there is a general perception that COVID-19 is a disease of white rich people imported by Congolese elites and Westerners into the country. People distrust the government and see its orders of *confinement* a way to gain funds.’ In their post, Ange and Stéphanie similarly relate that ‘many city dwellers in the capital strongly believed that only those who have sufficient means to travel to Europe are likely to be contaminated.’ Distrust towards authorities extends to medical facilities, as it is believed health workers receive large sums of money to establish the existence of COVID-19 in the province. ‘Alongside reflections as to whether the pandemic was really

a crisis at all,' as Abass and Luisa note, 'the most prominent rumours centred on the assumption that those working on the frontlines of the response, public health officials like Abass, are inflating numbers or even inventing the disease entirely so as to profit: health workers want more positive cases so they can make money'. Paulin faced a similar situation when visiting a rural outpost in South Kivu to carry out research: 'the population thought that we had come with the virus to spread it around there!'

These deep-seated dynamics of mistrust, they indicate, not only pose challenges to efforts to contain the pandemic, but may also affect people's health more generally, as fearful citizens turn away from health centres. Across all the diaries **we found** that COVID-19 'offers a specific grammar to discuss long-standing concerns about how the powerful might profit from the suffering of average citizens'.

Amidst 'the inconsistent implementation of lockdown measures, heightened police controls and brutality, increasing numbers of COVID-19-related rumours and viral fake news, and growing sentiments of suspicion', Ange and Stéphanie detail that 'precariousness spiked in the streets of Kinshasa, [and] fear began to fester among its inhabitants.' 'The virus,' Patrick and Ann conclude, 'not only served to create additional uncertainties in people's lives but more so it exposed existing uncertainties and inequities already present.'

The collection of these diaries highlights that the effects of COVID-19 are multiple, far-reaching and long-lasting which makes 'clear that we cannot speak of a single crisis'. To understand what is happening 'requires a detour into history where 'mistrust and resentment towards colonial symbols – the doctor, the policeman etc – originated in the policing of colonised people in schools, health care, law and education.' A more fundamental question thus arises: what kind of crisis is this pandemic?

Read posts by:

[Abass S. Kamara & Luisa Enria](#)

[Christian Pole Pole Bazuzi & Gauthier Marchais](#)

[Patrick Milabyo & Ann Laudati](#)

[Ange Kasongo & Stephanie Perazzone](#)

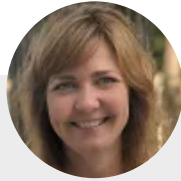
[Marie-Noël Cikuru & Charlotte Mertens](#)

Photo by Ono Kosuki from Pexels.

About the author

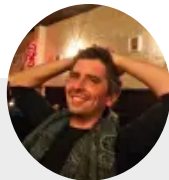


Ange is a journalist from and living in Kinshasa, the Democratic Republic of Congo. She is the author of two books recently published with the Editions du Net and specialises on covering societal and political issues, as well as debunking fake news circulating in the Congo.



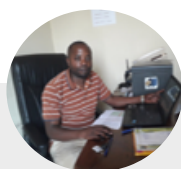
Stéphanie Perazzone

Stéphanie Perazzone is a postdoctoral researcher at the Department of Conflict and Development Studies and works with the Conflict Research Group at Ghent University. She holds a PhD in International Relations and Political Science. Her research agenda currently focuses on state formation theories, urban governance, violence and policy in parts of the DRC.



Gauthier Marchais

Gauthier Marchais is a Research Fellow at the Institute of Development Studies (IDS), University of Sussex. He works on social transformation in contexts of violent conflict. His current research focuses on education in contexts of protracted violence, with a focus on the provinces of South Kivu and Tanganyika, in the Democratic Republic of the Congo.



Christian Pole Pole Bazuzi

Christian Pole Pole Bazuzi is an expert on rural development. He has more than 10 years of experience in mixed methods academic research, across the

provinces of eastern DRC. He has expertise on monitoring and evaluation of humanitarian projects, and has worked in conflict-affected areas, including on non-state armed groups. He is currently a supervisor at Marakuja Kivu Research, and a trainer and supervisor of the Crisis Observatory Program of the World Bank.



Patrick Milabyo Kyamusugulwa

Patrick Milabyo Kyamusugulwa is Director General of the Bukavu University Medical College, Democratic Republic of Congo, where he leads an institution of 4000 students and 180 staff.



Ann Laudati

Ann Laudati is Instructor of Human-Environmental Geography at the University of California, Berkeley and Bayreuth Academy of Advanced African Studies Fellow.



Abass S. Kamara

Abass S. Kamara is District Surveillance Data Officer for the Sierra Leone Ministry of Health and Sanitation and Kambia District Health Management Team. He is also a Research Assistant for the Anthropology of Emergency Vaccine Deployment (AViD).



Luisa Enria

Luisa Enria is Assistant Professor at the London School of Hygiene & Tropical Medicine. She is the Sierra Leone case study lead for AViD and currently holds a UKRI Fellowship titled 'Crisis of Confidence: The Politics of Evidence and (Mis)trust in Epidemic Preparedness'.



Marie-Noël Cikuru

Marie-Noël Cikuru is director of Action d'Espoir, a national NGO based in South Kivu. She is completing a thesis at the Catholic University of Louvain. Her research explores the societal dynamics of conflicts and violence in the DRC and revisits the violence that bodies suffer over the long-term to detect changes in the mode of exploitation and accumulation.



Charlotte Mertens

Charlotte Mertens is a research associate at the University of Melbourne, where she examines responses to sexual violence in conflict settings, particularly in eastern DRC.

Posted In: COVID-19 | Health

Leave a Reply

Enter your comment here...

Read Next

Cutting aid will increase distrust in Africa's COVID-19 vaccine rollout