



Ebola Virus Outbreak (Bundibugyo Strain), Ituri & South Kivu and North Kivu Provinces

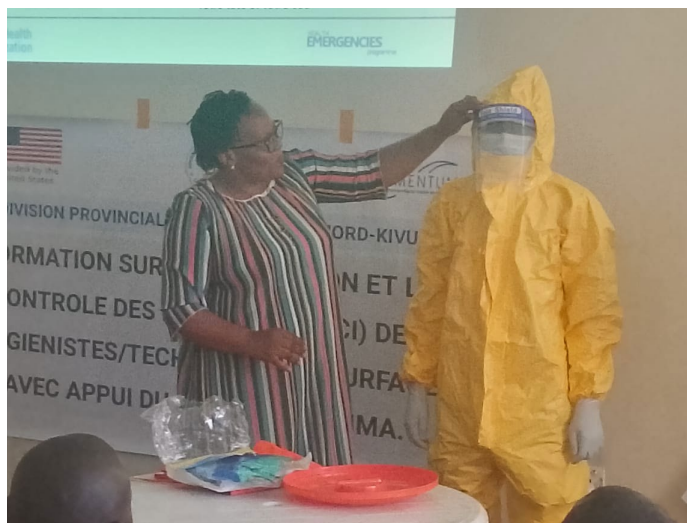
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Key Figures¹:

- 1,406 confirmed cases
- 438 deaths
- 208 recoveries
- 36 affected health zones across 3 provinces
- 82.5% contact follow-up rate

Highlights

- **Outbreak continues to expand rapidly:** One month after the DRC declared its 17th Ebola outbreak, confirmed cases have reached 1,406, with transmission now reported in three provinces.
- **Strengthening infection prevention in frontline health facilities:** IMA World Health has assessed 125 health facilities to identify critical infection prevention gaps and support targeted improvements that protect healthcare workers and maintain essential health services.
- **Community engagement expands:** IMA World Health is working with indigenous leaders, community members responsible for burials, and other trusted local voices to promote Ebola prevention, safe burial practices, early reporting of suspected cases and counter misinformation.



IPC training and demonstration for healthcare workers in Bunanga.

Situation Overview

The Ebola outbreak in the Democratic Republic of the Congo (DRC) continues to expand rapidly. In the past week alone, the number of affected health zones increased to 36 across Ituri, North Kivu and South Kivu provinces. While Ituri remains the epicenter, accounting for most confirmed cases, transmission is spreading into additional communities across eastern DRC.

The response continues to face significant operational challenges. Ongoing conflict restricts access to affected communities, while the national contact follow-up rate remains at 82.5%, which is well below the 95% target for effective outbreak control. At the same time, cases reported in overcrowded internally displaced persons (IDP) camps and widespread misinformation continue to increase the risk of further transmission.

IMA World Health Response

With funding from the U.S. Department of State, we are strengthening infection prevention in health facilities and supporting quarantine and case management.

- **Strengthening infection prevention:** 125 high-risk health facilities across 12 health zones in North Kivu and South Kivu were assessed for IPC compliance using the Ministry of Health's IPC Scorecard. The facilities achieved an average IPC score of 48.5%. The weakest areas identified were personal protective equipment (PPE) availability (22%), compliance with standard IPC practices (35%) and waste management (38%).
- **Supporting quarantine and case management:** Two quarantine facilities in South Kivu continue to receive support from IMA World Health to safely manage high-risk contacts. Assistance includes IPC and WASH supplies, contactless thermometers, food assistance and operational support for additional Ministry of Health medical and WASH personnel. To date, 48 high-risk contacts have been safely managed across the two facilities.

¹ World Health Organization <https://www.who.int/emergencies/alert-and-response> 30/06/2026

IMA World Health and Corus International have contributed additional funding to:

- **Equip frontline health facilities:** We supplied PPE to health facilities in Goma, Karisimbi, Nyiragongo, and the Bunagana border crossing with Uganda to help protect health workers and reduce the risk of transmission.
- **Strengthen community preparedness:** Indigenous leaders and community members responsible for burials near Virunga National Park have received targeted briefings on Ebola prevention, safe burial practices, early alert procedures, and how to address misinformation to help strengthen community-based surveillance and response.
- **Expand trusted public health messaging:** We are partnering with TikTok creators in Goma, whose combined audiences exceed 4 million regional views, to share accurate, locally relevant information on Ebola prevention and help counter misinformation.

Priority Funding Needs

With no approved vaccines or therapeutics available for the Bundibugyo strain, containing the outbreak depends on strong infection prevention, early case detection, and community trust. Key funding priorities include:

- **Expanding community-led engagement:** Additional resources are needed to support trusted local leaders to combat misinformation, encourage early reporting of suspected cases and strengthen community acceptance of response activities.
- **Strengthening surveillance in conflict-affected areas:** Ongoing insecurity continues to disrupt contact tracing in some of the hardest-hit communities. Additional support is needed for secure transportation, community-based surveillance teams, and assistance for quarantined households to improve adherence to isolation measures.
- **Supporting safe and dignified burials:** Additional funding is needed to recruit, equip and sustain local burial teams with specialized PPE and training to reduce the risk of transmission during funerals.
- **Improving infection prevention in health facilities:** Many frontline health facilities still lack adequate triage areas, reliable water and sanitation infrastructure, and essential IPC supplies needed to safely separate suspected Ebola patients and protect healthcare workers.
- **Addressing psychosocial needs:** Communities and frontline responders continue to experience significant psychological stress. Increased investment is needed for mental health and psychosocial support, alongside Prevention of Sexual Exploitation and Abuse (PSEA) training and monitoring in high-risk settings.

IMA World Health in the DR Congo

With more than 20 years of experience in the DRC, IMA World Health is well positioned to respond rapidly to disease outbreaks. Working alongside the Ministry of Health and trusted local partners, we help contain outbreaks while protecting essential health services and strengthening local response capacity.

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