

Aid Worker Insecurity

A case study of North Kivu, the Democratic Republic of Congo

Master Thesis

Student Judy Diekhorst

Student number 2313677

Date 28/07/2020

Supervisor E.T. Aloyo

Second reader E.E.A. Dijkhoorn

Leiden University – Campus the Hague
Faculty of Governance and Global Affairs



Universiteit
Leiden

Abstract

In response to the notion of shrinking humanitarian space, this thesis aims to explain the incidents of physical harm to aid workers in North Kivu, Democratic Republic of Congo in 2018-2019. The North Kivu province has served at the hotbed of armed conflict in the country for decades. It is here where profound challenges remain to reach security and stability. Violence and insecurity have posed grave risk of physical harm to aid workers operating in the DRC. By laying out what explains the incidents of harm done to aid workers, this thesis aspires to uncover which security issues from the past still persist today, and if new unknown threats have come about.

Keys words: Aid worker insecurity, violence against aid workers, humanitarian security

Table of contents

| | |
|--|----|
| <i>List of abbreviations and acronyms</i> | 1 |
| Introduction | 2 |
| 1. Conceptual framework | 5 |
| 1.1 Humanitarian space | 5 |
| 1.2 Security triangle | 7 |
| 2. Methodological framework | 9 |
| 2.1 Single Case Study | 9 |
| 2.2 Data Collection | 9 |
| 2.3 Limitations | 10 |
| 2.4 Hypotheses | 11 |
| 2.5 Indicators | 13 |
| 3. Overview of the Democratic Republic of Congo | 15 |
| 3.1 Key information | 15 |
| 3.2 Historical background | 16 |
| 3.3 North Kivu province | 18 |
| 3.4 Presence of international humanitarian actors | 19 |
| 3.5 Summary | 20 |
| 4. Armed actors, criminal violence, and anonymity | 21 |
| 4.1 Attacks by armed actors | 21 |
| 4.2 Rise of criminality | 27 |
| 4.3 Increasing insecurity? | 29 |
| 4.4 Summary | 31 |
| 5. Ebola outbreak, August 2018 | 33 |

| | |
|--|---------|
| 5.1 Attacks on Ebola responders |33 |
| 5.2 Community resistance |35 |
| 5.3 Summary |38 |
| 6. National and international staff members |39 |
| 6.1 The numbers |39 |
| 6.2 Summary |41 |
| Conclusion |43 |
| <i>Bibliography</i> |47 |

List of abbreviations and acronyms

| | |
|---------|---|
| ADF | Allied Democratic Forces |
| AWSD | Aid Worker Security Database |
| CNDP | National Congress for the Defence of the People |
| DRC | Democratic Republic of Congo |
| ECHO | European Civil Protection and Humanitarian Aid Operations |
| EISF | European Interagency Security Forum |
| FARDC | Armed Forces of the Democratic Republic of the Congo |
| FDLR | Rwandan Democratic Forces for the Liberation of Rwanda |
| GISF | Global Interagency Security Forum |
| ICRC | International Committee of the Red Cross |
| IHL | International Humanitarian Law |
| INSO | International NGO Safety Organisation |
| M23 | March 23 Movement |
| MONUC | United Nations Mission in the Democratic Republic of Congo |
| MONUSCO | United Nations Organisation Stabilisation Mission in the Democratic Republic of Congo |
| MSF | Médecins Sans Frontières |
| NCD-R | Nduma Defence of Congo-Rénové |
| OCHA | The Office for the Coordination of Humanitarian Affairs |
| ODI | Overseas Development Institute |
| SNPC | National Synergy for Peace and Concord |
| UN | United Nations |
| UNHCR | United Nations High Commissioner for Refugees |
| UNICEF | United Nations International Children's Emergency Fund |
| WHO | World Health Organisation |

Introduction

Humanitarian space is a concept indicating the operational environment for humanitarian aid workers to supply services and provide assistance following the humanitarian principles and international humanitarian law (IHL). In the past two decades implementing organisations and donors have been worried about the growing gap between the need for humanitarian aid in today's most pressing conflicts and the diminishment in access to those most in need – in other words, the *shrinking* of humanitarian space (Reichhold, Sagmeister and Steets 2012, p. 5). The number of attacks on aid workers in unsafe environments has been on the rise (OCHA 2018a), imposing countless barriers in aid worker's ability to provide assistance (Reichhold, Sagmeister and Steets 2012, p. 5). Since the recording of aid worker victims across the world in the Aid Worker Security Database (since 1997), the numbers have grown from 75 victims of attack in 1997, to 221 in 2007, and 313 in 2017 (Humanitarian Outcomes 2020, Aid Worker Security Database). This rise of harmful incidents against international and national aid workers indicates a larger threat than ever before to the physical well-being of aid workers across the world (Stoddard and Harmer 2007, p. 32). This assumption is confirmed by the 2019 Aid Workers Security Report, which stated that the second highest number of attacks on aid workers had been recorded in 2018 since 1997 (Stoddard 2019, p. 1). The Aid Worker Security Database currently presents 2019 with 483 aid worker victims as the year with the most aid worker casualties, surpassing the peak of 2013 with 475 victims (Humanitarian Outcomes 2020, Aid Worker Security Database).

In recent years the number of harmful incidents against humanitarian aid workers was most notably high in Syria, Afghanistan, and South Sudan (Stoddard, Harmer, Czwarno, and Breckenridge 2019, p. 2-4). In the past two years, a significant increase of harmful incidents involving aid workers occurred in the Democratic Republic of Congo (DRC) (*ibid.*). With the recurring violence against humanitarian aid workers in the DRC, security challenges in the space utilised by national and international aid workers (to provide assistance and protection) are once again an issue of great concern. With ongoing armed group activity, various disease outbreaks, population displacement, and continuous political, social and economic grievances the DRC has to endure many challenges. The field of humanitarian space has seen various changes throughout the last few decades, against the background of 9/11 and ever-increasing globalisation. Humanitarian space has therefore especially been under scrutiny, with evaluations and research done in war-torn countries, such as Afghanistan, Myanmar, Pakistan, Somalia, and Sudan (Reichhold, Sagmeister and Steets 2012, p. 5). In order to contribute to

the existing academic debate in crisis and security management regarding aid worker safety, it is highly relevant to analyse the humanitarian space in the DRC over the last two years, to understand the underlying drivers behind increasing insecurity for aid workers. The aim of this thesis is to provide a more profound insight into which factors have been of influence to incidents of harm, more specifically focussed on physical harm against humanitarian aid workers operating in North Kivu, DRC, in 2018-2019.

From a societal point of view, the increasing number of aid workers harmed emphasises the need to contribute to research regarding the safety and well-being of staff working in the humanitarian aid sector – more specifically concerning the notion of (shrinking) humanitarian space and operating within insecure environments. Focussing on the DRC is of importance due to the presence of various international and national humanitarian aid organisations in the country and to perceive what implications a shrinking humanitarian space can have for those working in the field. This research will more specifically focus on the DRC's North Kivu province, which has served at the hotbed of armed conflict in the country for decades. Furthermore, the largest United Nations (UN) peacekeeping mission in the world is actively present in the province, as well as a multitude of armed (non-state) actors. It is here where profound challenges remain to reach security and stability in the country (Stearns 2012, p. 7). Humanitarian organisations and other NGOs are exposed to existing, as well as possibly new security threats, in the province. By laying out what explains the incidents of harm done to aid workers, this thesis also aims to uncover which security issues from the past still persist today and if new unknown threats have come about which jeopardise the safe operation of aid workers in the field. In consequence it will help to understand the influence these factors can have on the provision of aid by humanitarian aid organisations.

In response to the globally shrinking humanitarian space, this thesis will focus on the following research question: *What explains the incidents of physical harm to aid workers in North Kivu, Democratic Republic of Congo in 2018-2019?* This introductory chapter is followed by the conceptual framework chapter in which the concept of humanitarian space and the general security-strategy framework are discussed, in order to understand the humanitarian operational environment. This is followed by the chapter on methodology, explaining the single-case study, as well as justifying the proposed hypotheses and indicators in support of answering the main research question. In the fourth chapter the historical context of North Kivu is briefly outlined, as well as the historical background of the UN and NGO presence in the province. In the subsequent chapters, the following sub-questions are

answered: (1) how have armed (non-state) actors in North Kivu contributed to the particular 2018-2019 increase in aid worker casualties?; (2) how can incidents of physical violence against aid workers be explained during the tenth Ebola outbreak?; and (3) how can the different number in attacks on national and international aid workers in North Kivu be explained? Finally, a concluding chapter will follow whereby the hypotheses are (dis)proven and the main research question is answered.

1. Conceptual framework

Before moving on to analysing and answering the main research question, certain obstacles need to be overcome. Firstly, the conceptual problem of what humanitarian space exactly entails is problematic, since numerous interpretations of the concept and its principles exist. It is important to define the term humanitarian space since the concept indicates the scope of the area in which humanitarian aid organisations operate. In addition, the definition of the term humanitarian aid worker used in this thesis is defined. Secondly, the so-called security triangle is briefly highlighted in order to get a better understanding of which strategies humanitarian aid organisations possibly use in order to create and maintain humanitarian space to operate in.

1.1 Humanitarian Space

The concept of humanitarian space has been put into use over three decades ago. The term allegedly stems from Central American conflicts during the Cold War, where it was used by the UN High Commissioner for Refugees (UNHCR) to generate space for open dialogue between various actors in conflict regarding humanitarian issues (Abild 2009, p.2).

Other sources claim the term humanitarian space originates from the International Committee of the Red Cross (ICRC) in 1992, wherefrom numerous definitions followed (Sida 2005, p. 5). Generally, the ICRC defines humanitarian space as respecting the principles of IHL in conflict situations, namely neutrality, impartiality, and independence (ICRC 2019, Statement). What is interesting to notice is that, for example, the ICRC has often worked in close proximity with governments and military personnel in order to maintain space for independent and neutral humanitarian action in the region – with a role for governments and military in assisting and protecting its own vulnerable population in times of crises (International Committee of the Red Cross 2005, Annual Report).

The aspect which seems to return in every definition is the notion of space to provide and receive humanitarian aid without any kind of physical hindrance, or political interference by either the government or antagonistic forces (Sida 2005, p. 5). However, what is important to note is that there is no mention of the concept of humanitarian space in the 1949 Geneva Conventions and the Additional Protocols. Therefore, IHL does not provide an explicit definition for the term (ICRC 2019, Statement). Consequently, the concept of humanitarian space has a different meaning within different organisations. Médecins Sans Frontières (MSF)

started to use this term in the early 1990s as well (MSF 2002, Project Update). Rony Brauman, former MSF president, defined the concept as creating an environment where humanitarian aid organisations can operate independently. More specifically, a space whereby aid workers can act freely in order to evaluate the needs, to monitor assistance, and to keep in dialogue with all parties involved. Within this definition a strong focus lies upon humanitarian action independent from any type of political influence (ibid.). The Office for the Coordination of Humanitarian Affairs (OCHA) takes an apolitical stance towards the term ‘humanitarian space’, often referred to as the humanitarian operating environment, wherein aid workers can provide assistance and services in accordance with the international humanitarian principles of neutrality and impartiality – with the emphasis on a sharp distinction between the different functions of humanitarian aid workers and those of military forces (OCHA 2003, p. 14).

Oxfam International defines humanitarian space by putting an emphasis on the rights of those in need to acquire protection and assistance, whereby humanitarian organisations can effectively provide aid in an impartial and independent manner. Furthermore, it highlights that political actors have the responsibility to respect and preserve an environment for humanitarian aid workers, without any political intervention (Oxfam International 2008, p. 2). The Commission’s European Civil Protection and Humanitarian Aid Operations (ECHO) has a more specific focus concerning access of humanitarian organisations to populations in need, and highlights that a clearer distinction needs to be made between international security forces and international aid providers (ECHO 2004, Annual Review).

Even though the many definitions provided by international humanitarian organisations throughout the years are similar to a certain extent, an all-encompassing definition of humanitarian space remains difficult to establish. The Overseas Development Institute (ODI) also acknowledges the numerous and often vague interpretations of humanitarian space, whereby definitions are often adjusted to organisations’ own mandates or are set as a priority of certain aspects of humanitarian aid (ODI 2010, p.1). According to ODI, the most frequent perceptions of humanitarian space include at least the following aspects:

- The physical access that humanitarian organisations have to those in need;
- The ability of humanitarian organisations to comply to the core principles of neutrality, impartiality, and independence;

- The environment in which international organisations operate, more specifically the security context;
- The capability of those in need to personally reach needed assistance and protection, in cases where it is impossible for aid workers to reach populations themselves (ibid.).

These four points encompass the aspirations of humanitarian aid organisations, the means utilised to respond to those in need, the space in which aid is being provided, and the capabilities of those in need to survive during crises (ODI 2010, p. 1).

Those working in the humanitarian space could include employees from all different kinds of national and international organisations. For clarity, the definition of aid workers is followed from Humanitarian Outcomes. Aid workers are defined as staff members and associated employees of national and international non-profit organisations providing technical and material support in the framework of humanitarian relief efforts (Humanitarian Outcomes 2020, p. 4).

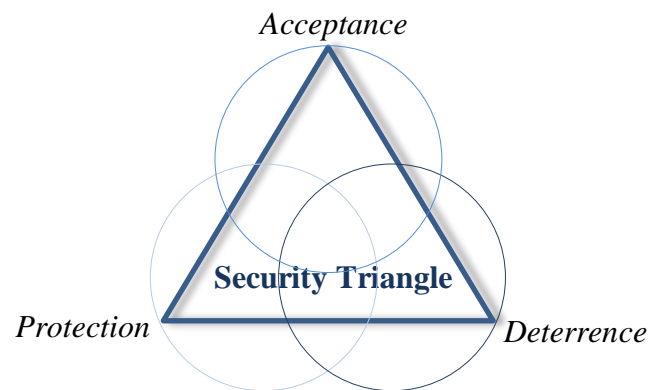
‘‘The aid worker definition includes various locally contracted staff (e.g., drivers, security guards, etc.), and does not include UN peacekeeping personnel, human rights workers, election monitors or purely political, religious, or advocacy organizations (ibid).’’

Humanitarian space and strategies to maintain security in insecure environments are intrinsically intertwined. Safe humanitarian access is fundamental in providing protection and to enhance safety for populations suffering in conflict. Therefore, a closer look at the security triangle is needed, in order to understand the three key security management strategies.

1.2 The Security Triangle

According to van Brabant et al. (2010) the term *risk* indicates the level of *vulnerability* to surrounding *threats*. Risk illustrates the possibility and likelihood for harm occurring, and the magnitude of that harm if it does occur. Therefore the main concepts of the security triangle consist of risk, threat, vulnerability, and risk mitigation (van Brabant et al. 2010, p. 28). A threat constitutes anything which can lead to either harm or loss; vulnerability indicates the prospect or possibility of encountering a threat, and the possible consequences (ibid.). The mixture of the threat and the vulnerability to that specific threat forms risk. Thus, risk is about the likelihood of harm taking place, and the intensity of that harm if it does occur. Risk mitigation constitutes actions taken in order to diminish that risk. Broadly speaking there are three ways of mitigating risk: (1) eliminating or reducing the threat; (2) limiting possible

exposure to the threat; and (3) when encountering the threat, assuring minimal impact (ibid.). These three points broadly encompass the security triangle: acceptance-protection-deterrence. The strategies are not mutually exclusive, but are fluid and intrinsically intertwined as is seen in the figure below.



The acceptance approach tries to limit or eliminate the threat by developing acceptance of the organisation's presence and work within the community/ region. The protection approach attempts to limit the exposure to the threat, by utilising protective instruments and measures. However, it does not change the nature of the threat. The deterrence approach has a focus on the prevention a threat by posing a counter-threat. These measures can vary from political, legal or economic sanctions, to the use of force. The three approaches of the security triangle are often intertwined, and can differ on the basis of different security conditions and cultures (van Brabant et al. 2010, p. 55). Overall, an acceptance approach is the most preferred security management method within humanitarian aid organisations. However, acceptance of aid organisations in a foreign environment is not self-evident. Evidence has shown that, in various environments, acceptance has become more difficult to attain (van Brabant et al. 2010, p. 57). This will be further elaborated on in chapters 4, 5, and 6.

The focus of this thesis will remain to be on aid worker insecurity in the (shrinking) humanitarian space, and not on the different strategies. However, it is of relevance to have briefly discussed these different approaches in order to get a better understanding of strategies utilised in order to gain and maintain humanitarian access. This does not indicate that there are no other strategies used by organisations. It is a dynamic field whereby various different strategies exist and are possibly overlapping.

2. Methodological framework

The methodological framework of this thesis encompasses the single-case study and is of qualitative nature. In this chapter its relevance and importance to this research are discussed; the type of sources are explained and justified; the limitations regarding this methodological framework are highlighted; and several hypotheses and indicators are presented.

2.1 *The Single-Case Study*

The single-case study is the most appropriate methodological design for this thesis. As explained by Robert K. Yin, a single case study does not solely have to have a descriptive or exploratory objective, but can also aim to offer an explanatory analysis to the topic at hand. This research specifically encompasses a *common* single-case study (Yin 2018, p. 85-86). The objective of using the common method is to portray the continuous state of affairs in North Kivu in 2018-2019, while analysing various developments within this elongated timeframe, such as important turning points and changing conditions (e.g. the Ebola outbreak in August 2018, and eruption of anti-UN protests).

The single-case is used to conclude whether the hypotheses and indicators stated in the second part of this methodological chapter are correct or if alternate explanations prove to be more applicable. This single-case research includes an embedded case study design where the research is sub-divided into several *units*. This has been done by focussing on three main realities: attacks by armed actors, the Ebola outbreak, and the gap between national and international aid workers. By using this approach the aim is to perform a more comprehensive analysis, to uncover more in-depth drivers behind the aid worker insecurity in the region. The embedded case study has been chosen over the holistic framework in order to prevent a too abstract and general approach to the topic at hand.

2.2 *Data collection*

The data collected to depict the most relevant humanitarian space constraints include aid worker security databases, as well as 2018-2019 security updates. I have learned about these databases through the European Interagency Security Forum (EISF) (nowadays the Global Interagency Security Forum, GISF), and through the Good Practice Review 8 Revised published in 2018 (page 273-274). The difficulty lies in obtaining specific and reliable data and information from diverse sources and organisations. This is challenging since organisations often make use of their own criteria concerning the gathered data. Therefore,

data from similar datasets can deviate from one another. In this regard the data triangulation method is used to compare the data from various datasets when needed. These datasets provide overviews per year, per country and/ or region, national/ international staff members, and the number of casualties. These sources help to understand the changing trend in aid worker safety across the DRC, and more specifically North Kivu. The specific data collected is focussed on the number of aid worker *deaths* and *wounded*. When relevant, the data is combined into overlaying graphs, to be able to identify patterns, trends, or correlations between phenomena. Incident data is collected and filtered from public sources and different organisations, such as Humanitarian Outcomes (www.humanitarianoutcomes.org/), Aid Worker Security (www.aidworkersecurity.org), Insecurity Insight (www.insecurityinsight.org/), The Armed Conflict Location & Event Data Project (ACLED) (www.acleddata.com/), The Kivu Security Tracker (kivusecurity.org), The Uppsala Conflict Data Program (UCDP) (<https://ucdp.uu.se/>), and the International NGO Safety Organisation (INSO) (https://www.ngosafety.org/country/democratic_republic_of_the_congo). Furthermore, news sources as well as updates from various international organisations were observed. These include updates from ICRC, INSO, MSF, OCHA, UN, and the World Health Organisation (WHO). These sources are also used in a triangulating fashion in order to compare and verify the data collected. Security updates and news updates are specifically filtered for the years 2018 and 2019, with a profound focus on the indicators and sub-categories (discussed later in this chapter). Key words were used when collecting relevant data; these include ‘DRC’, ‘North Kivu’, ‘humanitarian space’, ‘aid worker security’ and ‘attacks on aid workers’ in conjunction with the specific indicator/ sub-category under research. By using the collected data in such a manner, opportunities are created to detect possible parallels between the sequence of events, surges in violence, and attacks on aid workers.

2.3 Limitations

There are limitations to using the single-case study as a methodological framework. Firstly, a common obstacle to the single-case is the danger of deviating too easily from the original starting point of the thesis. The wide-ranging nature of a single-case approach can shift the focus of the research unintentionally when new data and information is added. This limitation to the single-case study has been minimised by adding clearly structured hypotheses and various indicators to the research. However, the embedded single-case study often includes an abundant focus on the sub-units, failing to oversee the entire picture (Yin 2018, p. 88-89). The

original case of interest should not solely function as the *context* of the analysis done, but should maintain to be the *main* topic of research. Secondly, it is challenging to collect reliable data specifically focussed on North Kivu. The data needed can be inaccessible, different per data base, inaccurate, too wide-ranging, unavailable, or simply be inexistent. In order to overcome this crucial limitation, research has been done concerning the information and datasets available – to avoid the need for unavailable data. Finally, one of the most essential limitations contains the complexity of the historical background and the ongoing conflict in North Kivu. A profound risk exists in drawing too general conclusions, since conflict in North Kivu (and surrounding regions) can differ per day and per area. The bulk of research and information on aid worker security and humanitarian space is focussed in its entirety on the DRC, or on different regions within the country, and less specifically on North Kivu. Even though it is a difficult undertaking to grasp the underlying drivers of the topic at hand in such a complex and diverse province, the continuous and persistent debate surrounding aid worker insecurity is reason for undertaking this analysis.

2.4 Hypotheses

The main research question of this thesis will be answered by testing the following hypotheses.

Hypothesis 1: The more violence in North Kivu, DRC, the more aid workers get physically harmed.

In order to explain the incidents of physical harm to aid workers in 2018-2019, it is of importance to see whether there is a clear correlation between overall violence in North Kivu, and the number of aid workers physically harmed – these include those injured and killed. The level of violence in North Kivu is measured by the overall number of deaths by violence in the province, as well as by observable surges in attacks on civilians. The two categories (those wounded and killed) are based upon the Aid Worker Security Database (Humanitarian Outcomes 2020, Aid Worker Security Database). In this particular database the act of kidnapping has also been included. However this could fall under *physical* harm, as well as under *psychological* harm. The psychological impact on aid workers can be considered to be one of the most difficult aspects of harm to comprehend (OCHA 2018a). Every type of harm done to aid workers can have enormous impact on the psychological well-being of the individual – which can differ per situation and per individual. Therefore, the complexity of psychological impact will not be taken into account in this thesis. This does not mean that

types of psychological harm done are not recognised, but at this point in time it goes beyond the scope of this thesis.

Hypothesis 2: When violence in North Kivu increases it leads to more casualties among national staff (citizens of DRC nationality) in comparison to international staff.

In light of this thesis it is important to map whether and when national or international aid workers are harmed. In recent years harm done to aid workers were most notably high in warzones such as Syria and Afghanistan, as well as South Sudan. In these environments national staff members encompass the majority of casualties, and also encounter increasing levels of harmful incidents per capita relative to international staff members (Stoddard et al. 2019, p. 2-4). This could indicate an increase in remote management programming over the last years – shifting provision of aid to the local staff. This entails the decision whether to withdraw (international) staff members from the site who are possibly at risk; whether to transfer more responsibilities to local (national) staff who will remain on site; and whether to cooperate more with local organisations (e.g. NGOs/ local authorities) (van Brabant 2010, 94-95).

Hypothesis 3: During the tenth Ebola outbreak (which officially lasted from August 2018 until June 2020), more aid workers have been harmed than when there was no Ebola present in North Kivu.

The DRC has reportedly experienced numerous outbreaks of disease throughout the years. Amongst those is the August 2018 large-scale Ebola outbreak. Testing this hypothesis is significant, because it helps uncovering if additional insecurity in North Kivu (in the form of disease outbreak) could explain the incidents of physical harm to aid workers in 2018-2019. Due to the Ebola outbreak international aid has been sent to the DRC to provide additional assistance. With more health workers on site – international as well as national – it is of importance to assess if absolute numbers of aid workers physically harmed have risen during the Ebola outbreak in order to map the risk factor. During the 2014-2016 Ebola outbreak in West Africa, community resistance against response activities arose on various occasions (Devermont and Morrison 2018, p. 4).

Hypothesis 4: Less access means more harm.

Access to humanitarian space is of vital importance to aid workers. Restricted access limits the space to operate in, making it more difficult for aid workers to perform their task

optimally. It is of relevance to assess if less access leads to more harm against aid workers, since history has proven various times that access to those in need has been impeded before. Impeded access can have different faces, and could consequently lead to more incidents concerning aid organisations (ECHO 2004, p. 4). The amount of access to humanitarian space can be of influence to decisions taken and strategies utilised by organisations.

2.5 Indicators

Unfolding the dynamics of continuous insecurity in North Kivu is a complicated task, even more so in the past two years due to disease outbreaks, and the national general elections. To answer the main research question by means of the hypotheses stated above, the following indicators are researched:

1. Armed actors and criminal violence

The DRC knows a turbulent history of conflict and war, containing various phases and waves of differing intensity. The nature of conflict is complicated due to its often transnational and ethnic character. An additional complicating factor in conflict is that the DRC is one of the most fertile countries in the world regarding raw materials (Dobbins et al. 2013, p. 180). These have, together with a multitude of other causes, led to the development of self-defence militias, fragmentation of non-state armed groups, and consequently to numerous pacts and alliances between them (Geneva Call 2019, p. 11). Different types of violence must be analysed to perceive what the exact correlation is between active violence in North Kivu and aid worker insecurity in the specific timeframe of 2018-2019.

2. The 2018 Ebola outbreak

The DRC has experienced numerous disease outbreaks over the years, such as the measles, Cholera, Yellow Fever, and Ebola (WHO 2020, p. 1). The Ebola epidemic, which started in 2018, received large-scale international attention as the second biggest Ebola outbreak in history. The DRC has experienced a number of Ebola outbreaks thus far. Besides the WHO other international organisations also provided assistance to the government in the DRC and its national response operations. These include MSF, United Nations International Children's Emergency Fund (UNICEF), the US Centres for Disease Control and Prevention, and affiliated partners with expertise on matters such as outbreak investigation, contact tracing, risk communications, clinical care, mobile lab testing, social mobilisation, and safe burial (WHO 2014, p. 1). The 2018 Ebola outbreak is a critical point of analysis due to the

deployment of national and international Ebola response staff – in addition to the number of aid workers already present in North Kivu.

3. National and international staff members

Over the past decades, a gap has existed in the number of attacks on national and international staff members on a global scale, whereby national aid workers encompass the absolute majority of casualties (Stoddard et al. 2019, 2-4). It is of significance to analyse the existing gap in the DRC as well, and to see more specifically if this is the case in North Kivu province. It is of interest to research the different drivers behind attacks on national/ local and international aid works in order to explain the incidents of physical harm to aid workers.

3. Overview of the Democratic Republic of Congo

The country of focus in this research is the Democratic Republic of Congo, more specifically North Kivu province. In order to understand its security context and the possible ramifications it has for humanitarian aid organisations, it is important to first take a brief look at the complex history. However, it falls outside the scope of this thesis to elaborately delve into all facets of the DRC's complicated historical background.

3.1 Key information

The Democratic Republic of Congo, also known as the DRC, DR Congo, or Congo-Kinshasa is an almost completely land-locked country in central Africa. Its neighbouring countries include Angola, the Angolan exclave of Cabinda, Burundi, the Central African Republic, Congo-Brazzaville (or the Republic of Congo), Rwanda, South Sudan, Tanzania, Uganda, and Zambia. Geographically the country is similar in size compared to Western Europe, and is the biggest country in Sub-Saharan Africa (World Bank 2020) with a population of over 84 million people (in 2018) (UNDESA 2019). The three major cities in the country include Lubumbashi, Mbuji-Mayi, and the capital Kinshasa. Currently, the country consists of twenty-six provinces (UN 2019, p.1). French is the country's official language, together with four native languages: Kikongo, Lingala, Swahili, and Tshiluba (van Reybrouck 2010, p. 15). According to David van Reybrouck, ethnographers from the 20th century identified over four hundred different ethnic groups in the DRC – every society with distinct customs, traditions, social systems, and languages or dialects (van Reybrouck 2010, p. 13).

The DRC maintains to be a continual case of scattered conflict and violence, including (internally) displaced people, disease outbreaks, increase of food insecurity and malnutrition, continuous lack of sufficient infrastructure, and a lacking response of assisting and protecting the population (Obrecht 2018, p. 8). In 2018, 72% of the Congolese population lived below the poverty line (World Bank 2020, p.1). Furthermore, the country scores low on the socioeconomic and human development ranking: 179 out of 189 countries and territories on the 2019 Human Development Index (UNDP 2019, p. 2).

In 2019, the UN office for the Coordination of Humanitarian Affairs stated that 12.8 million people across the country are in need of protection and humanitarian assistance – most notably in Kasai, North Kivu, South Kivu, and Tanganyika provinces (OCHA 2018b).

However, the more stable regions in the country are also heavily affected and are therefore also encountering poor humanitarian environments (Obrecht 2018, p. 8-9).

After several postponements of the presidential elections, Félix Antoine Tshisekedi Tshilombo is the current president of the DRC after winning the December 2018 election. He has succeeded Joseph Kabila after 18 years in power (World Bank 2020).

3.2 Historical background

On June 30, 1960, the Belgian Congo gained independence and was named the Republic of Congo (Reybrouck 2010, p. 57-100). Joseph Kasavubu was inaugurated as its first president with Patrice Lumumba as the prime minister. Lumumba was assassinated in 1961. In 1965 politician and military officer Sese Seko Mobutu launched a coup and seized power. He stayed on for thirty-two years (Vanthemsche 2012, p. 203-204). The country was renamed Zaïre in 1971. President Mobutu nationalised various companies which were previously under foreign control and compelled European financiers out of the DRC. International support for Mobutu ceased to exist after the end of the Cold War, and left Mobutu without the necessary (financial) assistance (ibid.).

The DRC has endured extreme violence and loss of life throughout its history. In 1996-1997 Tutsi and various other anti-Mobutu rebellions emerged – meaning the beginning of the First Congo War. Laurent-Désiré Kabila ousted President Mobutu in 1997, and renamed the country the Democratic Republic of Congo (Stearns 2012, p. 31-32). July 1998 marked the beginning of the Second Congo War which officially came to an end in 2003. Eight nations participated in the war, as well as dozens of (non-state) armed groups. Millions of people died from starvation, disease, and extreme violence. Despite support from several surrounding countries, rebels maintained a firm grip on the eastern part of the country (Stearns 2012, p. 32). The UN Security Council demanded a ceasefire and the departure of the foreign forces present in the country. The UN strongly urged foreign countries not to meddle in the DRC's internal affairs and conflicts. Consecutive to the signing of the 1999 Lusaka Ceasefire Agreement, the UN Security Council approved the United Nations Organisation Mission in the DRC (MONUC) – originally created to monitor agreement to the ceasefire and withdrawal of the armed forces. It is the biggest active UN mission in the world and has grown considerably over the past years (MONUSCO 2020, p. 1). To indicate the start of a new time-period in the country, the mission was renamed in 2010 as the UN Organisation Stabilisation

Mission in the DRC (MONUSCO) – in agreement with the Security Council Resolution 1925 of May 28, 2010 (ibid.).

President Laurent-Désiré Kabila was assassinated in 2001 and replaced by his son Joseph Kabila. The conflict lasted until 2002-2003, after the signing of several peace accords. The 2002 Sun City accord was signed by all major warring parties and served as the blueprint for development and transformation to an enduring national unity. Furthermore, the agreement also served as a foundation for an interim government, mandated national elections, and security services integration (Stearns 2012, p. 35). This peace accord was supplemented by bilateral agreements with neighbouring Rwanda and Uganda. Even though the road to peace generally appeared to be prosperous, the (re-)arising presence of dissidents and insurgencies once again stirred the pot of conflict (Stearns 2012, p. 35-36). After 45 years the first free elections were held in 2006. The son of Laurent-Désiré, Joseph Kabila, was elected as president (van Reybrouck 2010, p.11).

Even after the signing of various peace accords the end of conflict in the Kivu region had not been near. The UN has stated that belligerent parties are purposely extending the conflict for resources such as cassiterite, coltan, diamonds, gold, and timber (UN 2001, p. 1). Throughout the years, various armed groups have aimed to overthrow the government in Kinshasa. The first indication of arising problems in North Kivu, after the end of the Second Congo War, appeared in 2003. A quasi-political organisation was founded: the National Synergy for Peace and Concord (SNPC). This led to the emergence of two rebel groups with a strong and enduring influence on the security situation in North Kivu, namely the National Congress for the Defence of the People (CNDP) from 2006 until 2009, and the M23 in 2012-2013 (Stearns 2012, p. 36). In 2009 a peace agreement was reached with the CNDP. This resulted into a multitude of militias assenting to join the national military forces (Sweeney 2019). This decision obtained a great deal of public support, and strengthened Joseph Kabila's position as re-elected president in 2011. However, Kabila's decision in early 2012 to extradite the heads of the CNDP resulted into the withdrawal of thousands of soldiers from the national forces, back to their earlier ideal (ibid.). This led to the creation of the March 23 Movement: M23. The M23 has produced destabilisation and insecurity in eastern DRC since its founding – violating human rights on a wide scale. In 2013 the group was defeated by the UN and Congolese national forces. Even though successes were booked concerning the neutralisation of armed uprisings, a myriad of armed groups have emerged since and instability in the area remains to exist at a great scale (ibid.).

3.3 North Kivu Province

North Kivu is situated in the northeast of the DRC and borders the provinces, Ituri, Tshopo, Maniema, and South Kivu. In the east the province shares a border with Rwanda and Uganda. North Kivu is home to approximately seven million people. Over one million inhabit the provincial capital of Goma and around 800,000 the city of Butembo. North Kivu knows six territories, namely, Beni, Lubero, Masisi, Nyiragongo, Rutshuru, and Walikale (MSF 2020, p.1). Also within North Kivu great ethnic divisions exist, as well as social schisms and dynamic insecurities (Bedford 2018, p. 5).

It is the North Kivu province which has functioned as the hotbed of armed conflict in the country for decades. It is home to a myriad of (non-state) armed actors which have come about in this region, and it endures continuous presence of MONUSCO. MONUSCO is the largest UN peacekeeping mission worldwide and stationed in the DRC – with over 14,000 military staff. The mission has thus far been extended until December 20, 2020 (UNSC Resolution 2502 2019, p. 8). Over one hundred armed non-state groups are operational in the eastern part of the country – with diverse and often unclear incentives. This region functions, amongst other things, as the centre of inextricably connected crises derived from Belgian colonialism, over thirty years of disorder under president Mobutu, wide-scale ethnic discrimination, the spill-over and extension of the civil wars in Burundi, Rwanda, and Uganda, and is the site of an ongoing Ebola epidemic. It is the Kivu region where still the most challenging difficulties lie to reach stability and security in the DRC. The region suffers under the presence of military engagement of external parties, local warlords, as well as the exploitation of the country's national resources by a multitude of actors. All are trying to shape the region to their own advantage and strategic demands (Stearns 2012, p. 7).

Furthermore, decades long conflict has led to a significant displacement of the population. In North Kivu province alone there are currently around 2.5 million displaced individuals and refugees. These people are prone to fall victim to severe violence, forced conscription, crime, coercion, and sexual assault (Fairbanks 2020, p. 44). The Kivu Security Tracker states 1,519 people were killed in violence in North Kivu province from January 2018 to December 2019, in 707 separate incidents (Kivu Security Tracker 2020).

The following table indicates the total number of deaths recorded in the DRC from 2018 to 2019, according to the Uppsala Conflict Data Program (UCDP): department of peace and conflict research.

| | |
|-------------------------------|--------------|
| Total Number of Deaths | 5 449 |
| State-Based Violence | 1 632 |
| Non-State Violence | 2 457 |
| One-Sided Violence | 1 360 |

Table 1 – Number of deaths from violence in the DRC, in 2018-2019 (UCDP 2019).

These figures present the large number of casualties made in North Kivu in comparison to the entire DRC – consisting of 26 provinces. From the total number of deaths in DRC in 2018-2019, 28% took place in North Kivu. Containing almost 1/3 of those killed in the entire country by violent incidents.

Due to lacking law, order, and weak governance in the entire Kivu region, local communities depend on humanitarian aid and NGOs to assist them with basic services in, amongst others, the field of health and education (Fairbanks 2020, p. 44). Furthermore, corruption and bad infrastructure significantly influences employment and incomes. Generally the communities' trust in the government is very low. This communal feeling is intensified by the often vague division between armed non-state groups and the Congolese military (ibid.).

Those currently active in the Kivu region include the Congolese armed forces (FARDC), MONUSCO, and around 120 armed groups (HRW 2019, p.1).¹ The most notable ones include the Allied Democratic Forces (ADF), the Rwandan Democratic Forces for the Liberation of Rwanda (FDLR) and allied Congolese Nyatura groups, the Nduma Defence of Congo-Rénové (NDC-R), the Mazembe and the Mai-Mai Yakutumba groups, and various Burundian armed groups (ibid.). NDC-R currently belongs to one of the strongest armed groups of eastern DRC (CRG 2020, p. 2). Throughout the past decades inter-militia power struggles took place, as well as clashes with the FARCD and with MONUSCO.

3.4 Presence of international humanitarian actors

In the 1980s, the North Kivu province experienced a rise in NGOs and ethnic solidarity groups, which served as the foundation for mobilisation, assistance, and protection (Stearns 2012, p. 27). Before the 1990s few international humanitarian aid organisations were present

¹ The numbers of non-state armed groups mentioned in news outlet and literature differ from one another. The numbers vary between 100 and 140 different armed groups. Sometimes it includes solely North Kivu, but various times South Kivu as well – making it difficult to estimate the true number of armed groups present.

in the country, such as UNHCR, MSF, and Oxfam. However, throughout the years the number of international humanitarian organisations active in the DRC grew drastically (Obrecht 2018, p. 8). The need for humanitarian assistance has been continuous for decades. Humanitarian needs experienced a notable increase in the First Congo War (1996-1997) and the Second Congo War (1998-2003) (Geneva Call 2019, p. 11). In 2018, more than 200 humanitarian organisations were actively operating in the country, where Goma functioned as one of the most significant humanitarian hubs (Obrecht 2018, p. 8).

According to Geneva Call, NGOs in the North Kivu province have experienced decreasing amounts of funding in the last couple of years – while the humanitarian needs in the province have not vanished (Geneva Call 2019, 11). Part of the cause for this decline in funding from donor organisations entails the seemingly never-ending nature of the conflict in North Kivu. There seems to be no end in sight for providing humanitarian aid to those in need. After two decades of international aid present in the province, the situation hardly improved. This has resulted in disbelief amongst some local communities, questioning the willingness and ability of external actors to assist in ending the conflict (ibid.). This has become even more apparent in late November 2019 when enraged local residents set fire to the town hall as well as the UN compound in Beni, North Kivu province. These riots sprung from discontent concerning the lack of protection against armed groups. The weekend before the anti-UN riots arose, a deadly attack on civilians occurred - carried out by the ADF rebel group. MONUSCO stated that in November 2019 alone over 14 rebel attacks occurred, whereby approximately 80 people died. These violent attacks takes place a region where people are already enduring the worst Ebola outbreak in the country's history (UN News 2019, p. 1).

3.5 Summary

In short, throughout its history the DRC has known armed conflict, and a complicated crisis has endured for decades. Various stimuli have added to rivalry and conflict in the DRC. These include factors such as poor governance, continuous political and regional instability, rampant corruption, power conflict, rivalry over resources, ethnic conflict, a contracting economy, unemployment, and poverty. Even though peace deals were made, various armed actors resumed to generate insecurity – most notably in the east of the country. It is evident that the security context of the DRC, and more specifically North Kivu, encompasses a complex web involving numerous and diverse actors.

4. Armed actors, criminal violence, and anonymity

North Kivu is a province which maintains to be plagued by political, social, and economic crises. This insecurity is further supplemented by ongoing violent conflict, disease outbreak, and civil unrest. For aid workers, operational activities in the area are made even more difficult due to inadequate logistical frameworks, an extensive landscape of dense forests, and regulatory and administrative bottlenecks which enforce the level of complexity. In 2018, humanitarian aid workers have been able to provide protection and assistance to approximately three million people in the DRC (OCHA 2018b). Nevertheless, this only constitutes a part of the entire 10.5 million people objective laid out by the Humanitarian Response Plan of 2017-2019 – updated in 2018 (ibid.).

In the following chapters the factors contributing to incidents of physical harm to aid workers in North Kivu are uncovered, and the hypotheses presented in this thesis are tested. First the focus will be upon the ongoing conflict in the region, concentrating on attacks by armed non-state actors as well as criminality. This is followed by two chapters with a focus on the 2018 Ebola outbreak and the gap between the number of attacks on national and international aid workers.

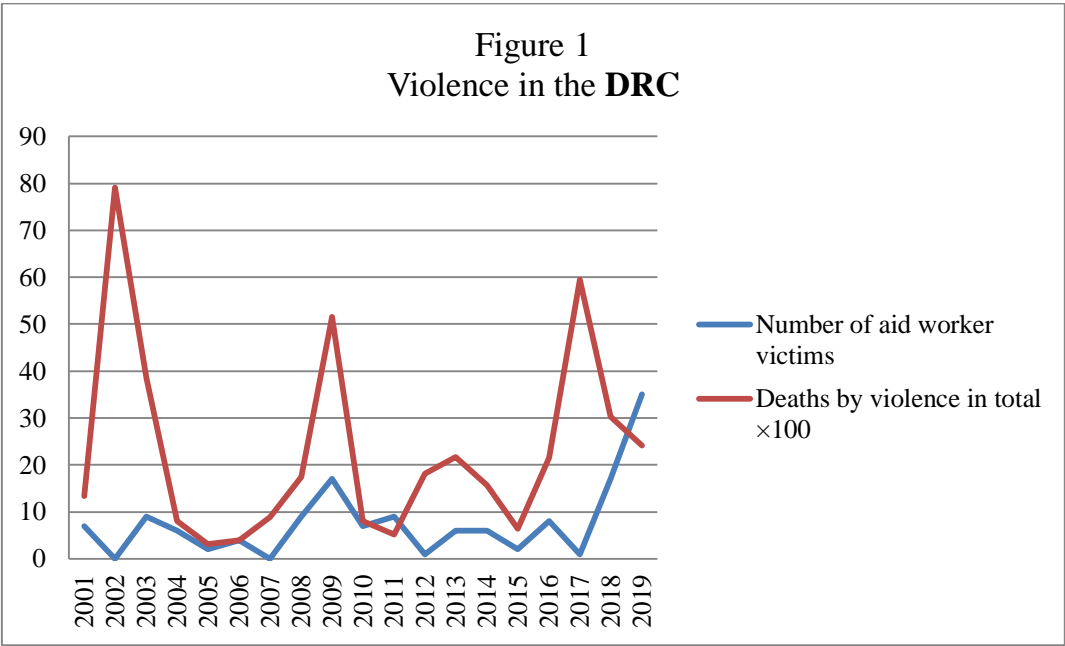
4.1 Attacks by armed actors

Over the years numerous news releases and security updates reported brutal attacks, killings, violence, wounded, and kidnappings of civilians, aid workers, and UN personnel. These violent acts are generally attributed to ongoing armed group activities in North Kivu. The purpose of the following paragraphs is not to explain the presence of conflict in North Kivu but to research the particular factors which link violence by armed (non-state) groups to harmful incidents against aid workers.

The correlation between violent conflict and attacks against national and international aid workers is not always clear-cut. A 2015 research from Peace Research Institute Oslo (PRIO) stated that countries experiencing violent conflict encounter more attacks against aid workers (Hoelscher, Miklian, and Nygård 2015, p. 1). Furthermore, the higher the intensity of the conflict, the more likely the attacks on aid workers are (Hoelscher et al. 2015, p. 3). However, according to the more recent Humanitarian Outcomes Aid Worker Security Report of 2017, attacks on aid operations encompass a small part of the violence in high conflict areas, whereby humanitarian aid workers are hardly the prime focal point of targeted attack. Often

they become part of collateral damage (Stoddard, Harmer, and Czwaro 2017, p. 4). However, it depends on the dynamics of conflict and the motives of the perpetrators (ibid.). Thus, how in particular has violence by armed (non-state) actors in North Kivu contributed to the 2018-2019 aid worker casualties?

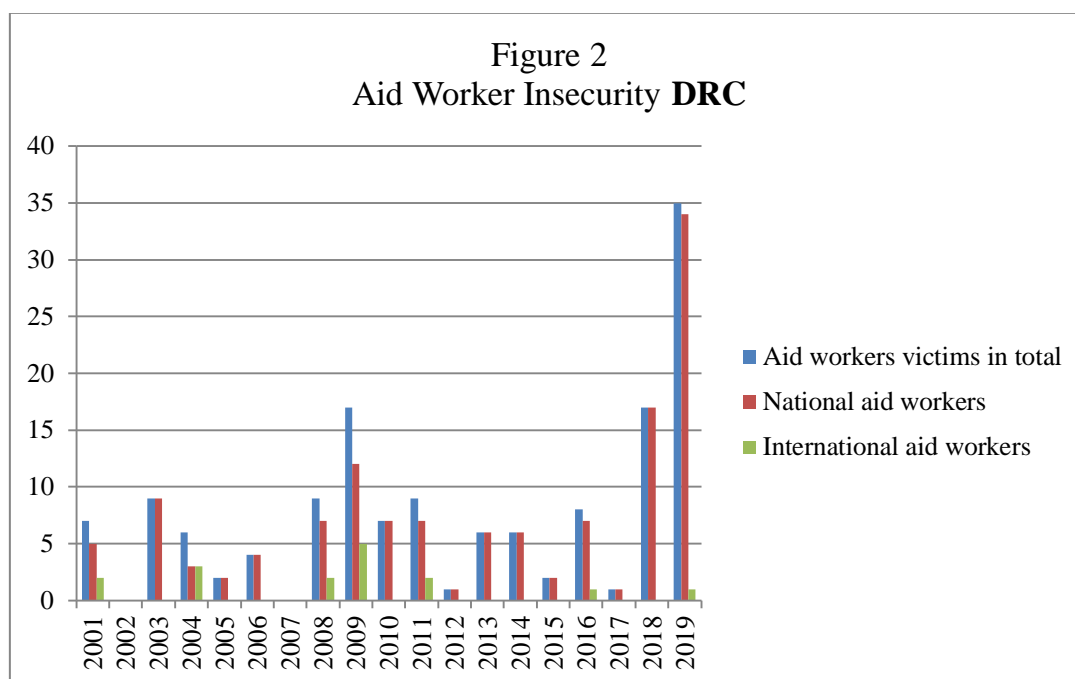
Before moving on to the causes and drivers behind violence against aid workers in North Kivu, the following figures help to paint the picture of aid worker insecurity. Figure 1 presents an overview of violence in the DRC. The graph shows the total number of deaths by violence and the number of aid worker victims across the DRC since 2001 – when the shrinking of humanitarian space became a concerning phenomenon on a global scale. Note, to be able to clearly observe the relation between violence and aid worker casualties in the country, the number of deaths by violence must be multiplied by 100 (to reach to true number), while the number of aid worker victims presents the real number. This is done in order to notice the peaks and drops in violence more precisely over time. The figure includes attacks on aid workers that have resulted in physical injuries and killings.



This graph includes information based on the Uppsala Conflict Data Program (UCDP 2019) and security incident data from Humanitarian Outcomes - Aid Worker Security Database (AWSDB). In the AWSDB the definition of aid workers include staff members and associated employees of national and international non-

profit organisations providing technical and material support in the framework of humanitarian relief efforts (Humanitarian Outcomes 2020, p. 4).²

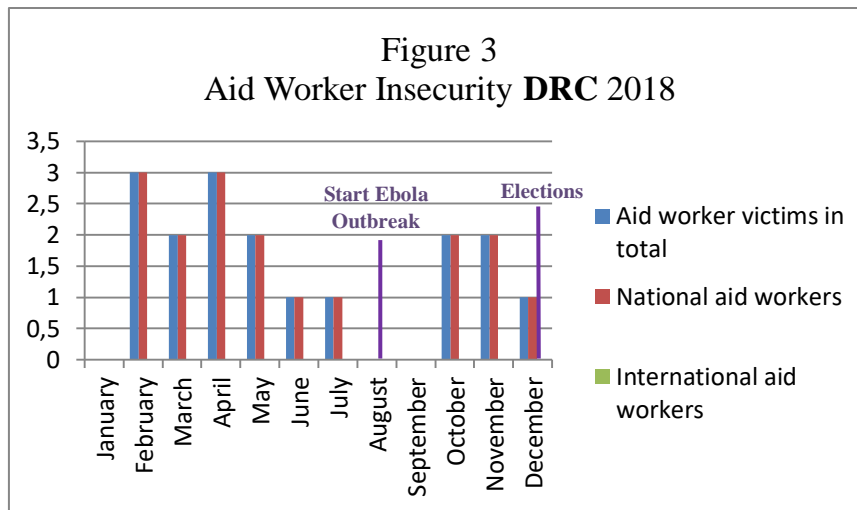
Figure 2 zooms in on the exact number of aid worker victims in the DRC with a distinction made between national aid workers and international aid workers.



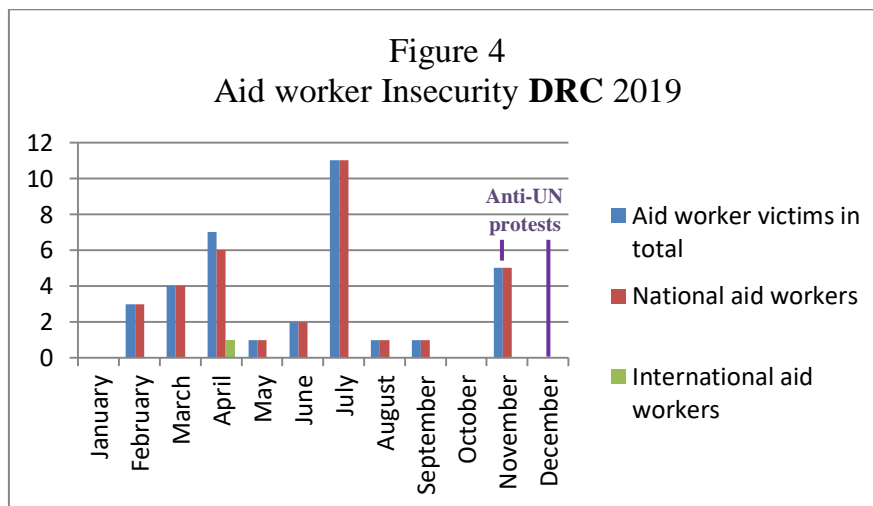
(Humanitarian Outcomes 2020, Aid Worker Security Database)

Looking at figure 2, it is apparent that the years 2018 and 2019 stand out since 2001, with an especially high peak in 2019. What is striking about this sudden increase in 2018-2019 is the large contrast with the years prior to it, containing very few casualties. The following two graphs zoom in more specifically on the years 2018 and 2019. These figures show the number of aid worker casualties across the DRC per month, and indicate three striking events.

² Humanitarian Outcomes defines the concept of aid workers further: “This includes both emergency relief and multi-mandated (relief and development) organisations: NGOs, the International Movement of the Red Cross/Red Crescent, donor agencies and the UN agencies belonging to the Inter-Agency Standing Committee on Humanitarian Affairs (FAO, OCHA, UNDP, UNFPA, UNHCR, UNICEF, UN-Habitat, WFP and WHO) plus IOM, UNRWA, UNMAS and when applicable, the World Bank. The aid worker definition includes various locally contracted staff (e.g., drivers, security guards, etc.), and does not include UN peacekeeping personnel, human rights workers, election monitors or purely political, religious, or advocacy organizations. Contracted workers and vendors of the humanitarian organisations, even though not considered staff, are included if affected by violence in the course of their work supporting the humanitarian mission (Humanitarian Outcomes 2020, p. 4-5).”



(Humanitarian Outcomes 2020, Aid Worker Security Database)



(Humanitarian Outcomes 2020, Aid Worker Security Database)

As can be seen in the figures, February and April 2018, and July 2019 contain the highest number of aid worker attacks – which at first glance do not present a clear correlation with the three emphasised events. According to ACLED, over 30 attacks on aid workers were recorded in 2019, of which 80% occurred in Ituri and North Kivu provinces (ACLED 2019a). After zooming in more closely on North Kivu, attacks on aid workers seem to have increased significantly. In 2016, eight aid workers were harmed, of which two were harmed in North Kivu (25%). In 2017, no incidents of physical harm against aid workers took place in North Kivu (0%).³ However, in 2018, the figure shows that 17 aid workers had fallen casualty to violence, of which seven victims (41%) were made in North Kivu in five different incidents.

³ No incidents of physical harm against aid workers occurred with North Kivu following the criteria set in this thesis. This does not indicate there have not been any threats, intimidation or other harmful incidents (e.g. kidnapping) involving aid workers.

However, 2019 shows an even bigger growth of aid worker victims. Of the 35 aid worker victims, 23 were attacked (66%) in 11 separate incidents in North Kivu.⁴ These numbers do not only present an increase of aid worker victims in the DRC, but also shows a steep growth of victims in the North Kivu province. Furthermore, what is striking is the growth in the number of attacks (resulting in physical harm against aid workers) in North Kivu from five (2018) to 11 (2019), a 120% increase from 2018 to 2019.

Causes for violence against aid workers in the DRC are generally attributed to increased non-state armed group activity (Stoddard et al. 2019, p. 2-4). However, after looking into the identity of the perpetrators behind the recorded aid worker victims in North Kivu – seven victims in 2018 and 23 victims in 2019 – only few aid worker-related attacks were specifically recorded to be carried out by armed groups, respectively ADF or Mai-Mai militia. Mostly the attackers were recorded as unknown, or reported as acts of criminal violence, mob violence, or community violence (Humanitarian Outcomes 2020, AWSD).

A myriad of armed groups (often formed along ethnic lines) are currently present in North Kivu. These groups pose a severe threat to the Congolese population, regional stability, and all those working and living in the area (International Crisis Group, 2019, p. 1). The local populations often function as tools of inter-militia power battles in the province (Aizenman 2019). This is no different in 2018-2019, whereby non-state armed groups have continued to carry out attacks on (unarmed) civilians leading to many deaths and injured (table 1). What has appeared to be a big caveat in the past is the absence of in-depth knowledge surrounding violent attacks carried out by armed actors in the region.

ACLED reported in April 2019, that approximately between November 2018 and April 2019 more violence by the ADF had occurred in North Kivu. Around half of the violence is aimed at the local populations, including periodic attacks and abductions. This has proven to be a significant change in the group's targeted attacks, which were often aimed at national security forces (ACLED 2019b). Late 2019, this surge of violence against citizens have sparked demonstrations, riots, and strikes across the province against the government, international involvement, and MONUSCO – most notably in the cities of Beni, Butembo and Goma, North Kivu. Civilians are accusing them of not contributing enough to protect and end the violence against civilians. This has led to a growing anti-UN and anti-foreigner sentiment, pushing for MONUSCO to leave (ACLED 2019a).

⁴ The calculations made are based on Aid Worker Security Database, Humanitarian Outcomes.

However, which drivers regarding armed actors are behind the upsurge of conflict violence? The underlying drivers are multitude and cannot be derived from a single event or occurrence. In the past years several trends can be observed in North Kivu concerning attacks by (non-state) armed groups. First of all, the fragmentation of armed groups. Evidently the scenery of North Kivu is shaped by armed (non-state) groups. However, in recent years a notable rise in the level of group-fragmentation has taken place. As has been mentioned, currently about 120 different armed groups exist in North Kivu. However, in January 2008 only 20 armed groups were present in the entire Kivu region (Stearns and Vogel 2017, p. 7). This number had grown to 70 armed groups in 2015 and to 120 armed groups in 2017 (CRG 2019, p. 3). Numerous of these groups are local power seekers, but several dominate substantial areas in the region. While fragmentation takes place, new coalitions are being formed – consequently leading to weak and unpredictable alliances (Stearns and Vogel 2017, p. 5). This could lead to more inter-militia clashes, and other perpetrators seeking to violently attack civilians or aid workers to create further instability, counteract the existing order, inflict harm upon different local communities, promote their visibility, emphasising political viewpoints, or to obtain cash and valuable belongings (Stoddard et al. 2017, p. 4). This apparent proliferation of armed actors has several possible causes. First, there is a profound absence of alternatives for ex-combatants, due to inexistent and failing efficient demobilisation projects (Stearns and Vogel 2015, p. 7). Therefore it can become an attractive alternative for former soldiers/ ex-combatants to join or start armed groups, or to operate individually. Second, political developments throughout the years, e.g. peace processes in 2002/2003 and 2009, led to the assembly of a big (instable) national army, resulting into unsuccessful endeavours of army integration (ibid.). Third, possibly growing internal dispute and rivalry within existing armed groups has led to the accelerating emergence of splinter groups.

Second of all, leaders of armed groups keep a sharp eye on or are involved in politics, and have used violence before as a means of local, regional, and national political leverage (Stearns and Vogel 2017, p. 4). It has therefore not been unexpected that violence in the country experienced a surge during the political turmoil surrounding the delayed elections in 2018. Elections were scheduled for 2016 but postponed to 2018, which added fire to the already political instable situation. It provoked violent protests in the entire country leading to dozens of injured and killed (UNHCR 2018, p. 7; Al Jazeera 2016). Late December 2018, the government announced the decision that parts of Butembo and Beni, North Kivu, were excluded from voting in national elections due to ongoing unrest and to prevent the further

transmission of Ebola (Paravincini 2018, p. 1). This exclusion of several areas in North Kivu from the elections – an opposition stronghold – caused discontent in the province. Consequently this has led to anti-government protests, in amongst others Beni and Butembo, which experienced an increase in violence (WHO 2019, p. 13; 15). The DRC is no stranger to tense elections, with attacks by armed groups (e.g. on polling stations), and violent clashes during protests. Political turmoil together with other elements of instability, such as budget crises and high inflation, negatively impacted the payment of wages and finances for the national armed forces, resulting into deteriorating morale (Stearns and Vogel 2017, p. 4). Therefore in certain cases the division line between the Congolese national army and armed non-state actors is often vague – making it a dynamic whole and is in its turn contributing to fragmentation of armed groups (ibid.).

Fragmentation of groups also makes it increasingly difficult to pinpoint the identities and motives of perpetrators. For example, ADF remains to be an active group in Beni territory, North Kivu. The ADF has kept strong connections with local political and economic authorities, resource corporations, as well as other armed actors in Beni and Butembo over the years (Bedford 2018, p. 5). Besides the threat of the ADF itself, many armed groups and their allies hide under the name of ADF in order to cover up their true identities and illegitimate or violent acts – the so-called *Faux ADF* (ibid.). These groups and individuals include non-state actors, regional groups in organised crime, and members of the FARDC – who may disguise themselves as members or affiliates of the ADF when carrying out violent acts, kidnappings or (civilian) killings. Consequently, this blurs the difference between them and the true ADF (Bedford 2018, p. 4-5).

Besides the persisting ambiguity of the identities and motives of armed groups, it is also difficult to differentiate between attacks by specific armed groups and acts of criminal violence.

4.2 Rise of criminality

Besides non-state armed group activity, aid worker insecurity has also been attributed to increasing criminal activities (Stoddard et al. 2019, p. 2-4). Ambiguity exists regarding the identities of the perpetrators as well as their specific motivations, which could be linked to the involvement of criminal violence directed towards humanitarian aid organisations in the DRC. The data discussed is mostly focused on the DRC in its entirety, and less specifically

upon the North Kivu province. The aim is to provide a perception of the correlation between the rise of criminality during times of conflict and incidents of physical harm against aid workers.

Even though criminal violence has contributed to aid worker insecurity, the correlation between the rise in criminal violence and an increasing number of attacks on aid workers is, once again, not always clear-cut. In research done by PRIO in 2015, the risk of conflict to aid workers is significant, but criminal violence is not recognized as an influential factor to the number of attacks on aid workers (Hoelscher et. al. 2015, p. 3). However, besides the concerning continuous activity of armed (non-state) groups, the rise of criminality in the DRC does appear to have been a barrier for humanitarian access in the past. According to a study produced by Geneva Call between 2016 and 2018, incidents involving criminality were accountable for almost three times the number of harmful incidents concerning NGO staff than armed non-state actors or national security forces (Geneva Call 2019, p. 12). The study also showed that across the country, anonymous criminals had carried out 319 harmful incidents against NGOs during this period of time. Furthermore, reportedly national security services were involved in 74 incidents involving NGOs. Additionally, 46 incidents involved armed non-state groups (ibid.).

Even though the biggest number of harmful incidents were carried out by groups and individuals other than armed non-state groups (such as ADF), Geneva Call stated that the harmful incidents committed by (non-state) armed actors were often targeted specifically at NGOs: 31 out of 46, or 67%. The other 33% of harmful incidents involving armed non-state groups did not explicitly targeted NGOs but did affect them in some way. Less than 50% of reported criminal activities, and 42% of incidents linked to national security forces purposely targeted NGOs (Geneva Call 2019, p. 12). Anonymous criminal activities are regularly carried out by members of armed non-state groups or even by members of the national security forces functioning anonymous and alone. Therefore, the real figures are likely to differ from the above mentioned numbers.

Even though criminality is mentioned as one of the main causes for insecurity in the region for both civilians as NGOs, often armed non-state actors remain to be perceived as the greatest cause of harmful incidents. At first it was expected that armed group violence in the region primarily contributed to aid worker insecurity – which is undeniably true. However, it

shows that criminal activities in general have had a significant contribution to aid worker insecurity and therefore also on aid workers across the country.

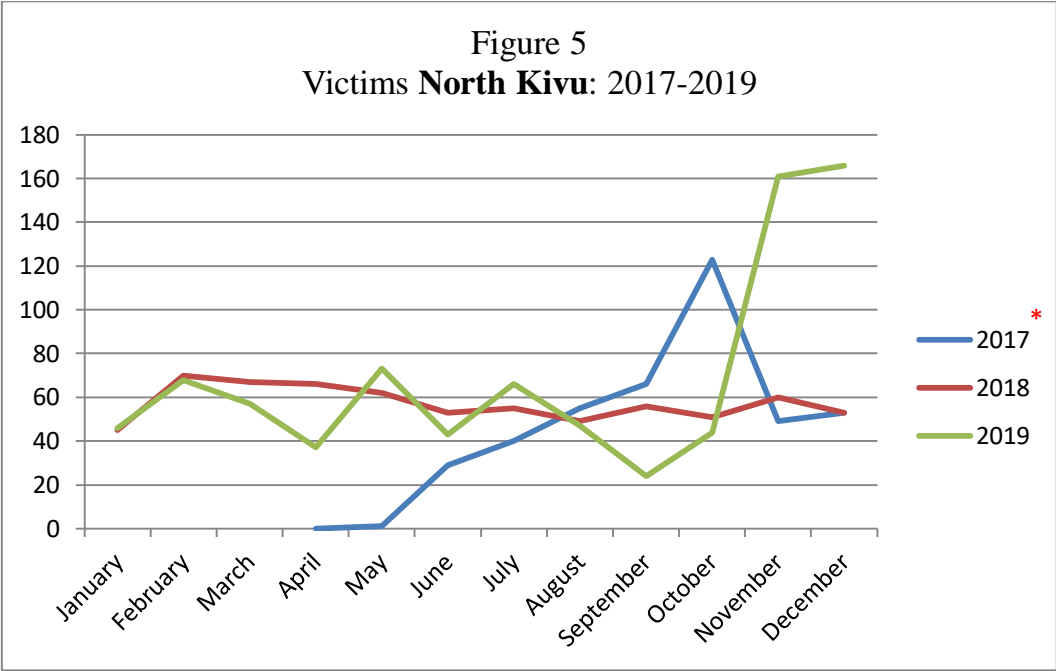
In the Kivu provinces, there has proven to be an upward trend in crime since the beginning of 2019, including acts of kidnappings, armed robberies, grenade attacks, and killings (KST 2019). Currently, caution for the growth in criminal activity targeting the international community in North Kivu has been reported by various foreign travel advisories (e.g. foreign travel advice DRC, GOV.UK 2020). These include criminal violence such as armed home invasion, armed robbery, assault and attack. Local police forces do not always have the proper capacity to effectively act upon violent crime (US Travel Advisories 2020). In some cases members of the police or the national armed forces are involved in criminal activities themselves. This rise in crime can be attributed to the growth in the number of ex-combatants (due to the absence of efficient demobilisation programs), the instability in the region (on various fronts), illegitimate local authorities, and the abundant circulation of (small) firearms and ammunition (KST 2019).

In short, even though violent incidents in 2016-2018 involving armed non-state groups depicted the most uncommon type of violence aimed at NGOs, the violent attacks that they did carry out had a higher rate of specifically targeting NGOs. It is most likely that this trend continued throughout 2019. However, it is important to keep in mind that criminal activities linked to armed non-state actors are not always carried out by them, since it is often vague and contested what the identity of the perpetrators is. It needs to be highlighted that even though non-state armed actors and state security services appear to have a clear identity – perpetrators of violent attacks and violent criminal activities are overlapping and can be extremely difficult to pin point (due to continuous fragmentation and unidentifiable perpetrators such as faux ADF). The often anonymous nature of the actors involved puts a strain on access-negotiation or acceptance strategies, since organisations could experience an absence in who to address and focus on in a specific area.

4.3 Increasing insecurity?

When looking at the level of violence in North Kivu in terms of the overall number of violent deaths, as presented in figure 5, 2019 experienced four months with higher levels of violence compared to 2018: May, July, November, and December. In May, July and November 2019 the number of aid worker casualties in North Kivu were higher than in 2018, but lower in December. In April, June, and September 2019 obvious lower levels of deaths by violence

were recorded compared to 2018. However, in April 2019 there were significant higher numbers of aid worker casualties, compared to 2018. In June and September there were no differences in the number of aid workers physically harmed. Therefore, the level of deaths by violence does not seem to have a strong correlation to the number of aid worker casualties. More specifically, as presented in figure 5 below, it is clear that there has been a large increase of attacks in North Kivu at the end of 2019. In November 2018 60 people died due to violent attacks, while there were 161 victims in 2019 – an increase of 168%. This gap widened even further in December with respectively 53 victims in 2018, and 166 in 2019 – an increase of 213%. When looking at the aid worker casualties in North Kivu, the same upsurge is not reflected. In November 2018 the total number of aid worker victims encompassed two, and five in 2019 – an increase of 150%. In December 2018 one person fell victim to violence, while none were reported in the same month in 2019.



*This graph includes information based on security incident data from the Kivu Security Tracker. The numbers mentioned include deaths by violence in North Kivu. Territories include Beni, Butembo, Goma, Lubero, Masisi, Nyiragongo, Rutshuru, Walikale. * Data availability since April 2017. Source: <https://kivusecurity.org/>.*

Following this incredible peak in attacks on civilians, anti-UN riots flared up at the end of November 2019 in North Kivu. Hereby demonstrators blocked roads and carried out attacks on UN buildings. Several clashes between protesters and security forces were reported, which resulted in several deaths (Al Jazeera 2019). This outburst of violence against civilians, as well as the violent protests that followed, resulted into the temporary withdrawal of

MONUSCO staff members and of Ebola responders from Beni, North Kivu (UN News 2019). Consequently the withdrawal of aid workers from the growing insecurity in the area may have resulted in less aid worker casualties in December.

4.4 Summary

In short, even though from the offset, the overall violence in the province might not have seen a visible change over the last two years until end 2019, the crisis in the region has both not changed and is changing every day. Violence in the area has a multitude of causes and has an effect on all those living and working in North Kivu. Contingent upon the dynamics and fluctuations of conflict and the strategic intentions of the aggressors, targeting aid workers is a means to achieve different ends. The objectives vary from destabilising and delegitimising ruling authorities, exercising power over civilians, obtaining (political) visibility and recognition, opposing foreign involvement, to financial gain, such as valuable possessions, cash, or ransoms.

How have armed (non-state) actors in North Kivu contributed to the 2018-2019 increase in aid worker casualties? The number of armed actors has grown significantly over the years. This can be attributed to fragmentation of armed groups – which also brings along the problem of anonymous perpetrators, such as Faux ADF. Second of all, violence as a response to the 2018 presidential elections (by armed groups as well as civilians) contributed to aid worker insecurity. Third of all, 2018-2019 have seen a rise in violent criminal activities. In 2016-2018 a clear correlation between criminal violence and harmful incidents against aid workers has come to the front. It is likely that this trend has continued in 2019. When drawing a brief comparison between the numbers of deaths by violence in North Kivu to the number of aid worker victims in 2019, no clear parallel has appeared. Thus, it can be stated that there is no clear correlation between a rise in violence and peaks in attacks against aid workers in North Kivu in 2018-2019. Therefore hypothesis 1 is not confirmed.

Even though criminality is mentioned as one of the main causes for insecurity in the region for both civilians and NGOs, armed (non-state) groups remain to be a great danger to aid workers. The number of armed groups has proliferated over the years, and in 2017 approximately 120 active armed groups were already active in the Kivu region. As figure 2 clearly shows – North Kivu did not experience a rising number of physical harm done to aid workers in 2017. However, the apparent rise in criminality, the political instability, and the surge in attacks on civilians have contributed significantly to aid worker insecurity. With

continued changing political collaborations, political scapegoating, and the abundance of different armed groups, the identities and motivations of the attackers often remain to be puzzling.

5. Ebola outbreak, August 2018

In August 2018, the DRC's Ministry of Health declared the tenth Ebola outbreak in the country, with North Kivu as its epicentre. It is the second largest Ebola outbreak ever recorded, after the 2014-2016 West Africa outbreak (CDC 2019, p. 1). This is the first time an Ebola outbreak takes place amidst an active conflict zone, consequently making the outbreak extremely challenging to control. Even though the magnitude of the outbreak in the region is smaller in size compared to the outbreak in West Africa, the relationship between response actors; affected communities; national, regional and local politics; and a myriad of armed (non-state) groups have proven to make the response considerably more complicated (WHO 2019, p. 15). In this context healthcare workers have to deal with the difficulties of operating across various areas and interacting with local populations with distinctive languages and customs, existing alongside the ongoing insecurities of present conflict in the country. The Ebola response in this highly insecure environment has been led by the World Health Organisation (WHO) and the National Ministry of Health, as well as key organisations such as MSF, ICRC, UNICEF, and various other international and local partners. In November 2018, a CSIS brief stated that international organisations have deployed over 500 employees in response to the Ebola outbreak (Morrison and Devermont 2018, p. 2). The response against Ebola has to tackle various external challenges, from myth-spreading to political influence.

Figure 2 evidently shows the notable increase of casualties amongst aid workers in the DRC in 2018 and 2019. The increase of casualties coincides with the tenth Ebola outbreak in North Kivu in August 2018. This raises the question to what extent factors related to the Ebola outbreak and the consequent response efforts, contributed to an upsurge in violence against aid workers. However, what is striking is that the country has suffered from large-scale disease outbreak before, such as other Ebola outbreaks, cholera, the measles, malaria, and currently the COVID-19 pandemic. The following paragraphs aim to uncover the security setting by examining the challenging factors related to the Ebola response, and it addresses the surge in attacks and insecurities in the North Kivu region. How can incidents of physical violence against aid workers be explained during the Ebola outbreak?

5.1 Attacks on Ebola responders

Between August 2018 and December 2019, numerous violent armed attacks were carried out against civilians, national and UN-forces, and aid workers – resulting into the temporary withdrawal of Ebola response activities on several occasions (WHO 2019, p. 12). Violence

includes well-coordinated attacks by armed non-state actors, criminal violence as well as community violence (protests, riots, looting). Since the Ebola outbreak was officially declared in August 2018, numerous attacks have taken place. For example, three attacks connected to the ADF in and around Beni, North Kivu, were reported between August 24 and November 16, 2018. These attacks led to numerous casualties amongst civilians, Congolese soldiers, and MONUSCO staff (WHO 2019, p. 13). Late September 2018, widespread turmoil and temporary withdrawal and suspension of response activities in Beni, Butembo, and Mabaleko took place due to protests (ibid.). In December 2018, UN forces became the target of violence, when a MONUSCO base near Beni was attacked, resulting into the death of 14 soldiers and injuring 40. This attack was also associated with the ADF (Kasali 2019, p. 1).

Reportedly, in February 2019 one of the first direct armed attacks on an Ebola treatment centre took place in Katwa – killing one local healthcare worker. Shortly after, on February 27, another deadly armed attack aimed at an Ebola facility took place in Butembo – resulting in MSF to withdraw from the site (WHO 2019, p. 13). At the beginning of March 2019, another Ebola treatment centre in Butembo had been under attack, resulting into three health workers injured and the death of a Congolese policeman. On April 19, a University Hospital in Butembo was attacked injuring an Ebola responder and killing a WHO epidemiologist (ibid.). These are all examples of direct attacks targeting response workers, which have continued throughout 2019.

Insecurity Insight reported that there have been at least 424 threats and attacks against Ebola response actors between January and November 2019. These include harm done such as arson, attacks, threats, and kidnappings (Insecurity Insight 2019, p. 1-5). Furthermore, Insecurity Insight states that violence, threats and intimidation have been more frequently reported within the time-period of February-May and in the month October in 2019. This coexists with enhanced efforts of (international) assistance because of the growing number of recorded Ebola cases in Katwa and Butemo, North Kivu (Insecurity Insight 2019, p. 1). However, it did not lead to an increase of reported killings and physical injuries of aid workers when looked at figure 4. The Insecurity Insight database shows that in the January-November 2019 at least 20 Ebola responders have been killed in the DRC. Three quarters of these killings had taken place in the territories of Beni and Lubero – North Kivu (Insecurity Insight 2019, p. 4). However, the various numbers of attacks reported differ from one another. In January-November 2019 the WHO had recorded around 390 attacks on health facilities, with 83 Ebola response staff and patients injured and 11 killed (WHO 2019, p.1). MSF stated

that over 300 attacks on Ebola responders were reported in 2019, with six killed and 70 injured (MSF 2020, p. 5).⁵ ACLED recorded over 40 violent incidents against aid workers in North Kivu and Ituri provinces in the timeframe January-July 2019, of which half of the attacks have been carried out by anonymous actors or unidentifiably armed groups (ACLED 2019c, p. 1-2). Furthermore, according to Fairbanks, the UN had reported 178 security incidents following from opposing communities to the Ebola response between the start of the Ebola outbreak in August 2018 until May 2019 (Fairbanks 2020, p. 44). Even though numbers differ, it indicates the growing insecurity surrounding the Ebola response.

Furthermore, Insecurity Insight stated that armed groups have committed more than 550 attacks on civilians in the first six months of 2019. In a number of these attacks healthcare facilities have been affected, including fires at healthcare premises, killings, or kidnappings. Other violent attacks included entire towns whereby Ebola responders were reportedly amongst the civilians targeted, and the facilities and treatment centres were amidst the plundered buildings (Insecurity Insight 2019, p. 1). This indicates that not all attacks involving aid workers were specifically targeted against Ebola responders and healthcare facilities.

Even though the exact motives and identities of the perpetrators are often unclear, MSF has stated that the violent incidents coincide with the significantly increasing tensions regarding Ebola response activities (MSF 2019). The UN claimed that most of the security incidents related to Ebola responders were connected to civil unrest, community resistance, and armed conflict (Fairbanks 2020, p. 43). Even though the causes for violent incidents differ from one another, it is evident that resentments existing on social, political, and economic level are taking form around the Ebola response.

5.2 Community resistance

Insecurity, mistrust, and organised armed attacks have taken place during previous Ebola outbreaks. During the West Africa Ebola outbreak of 2014-2016 it has been observed that communities actively resisted response activities. This included, resentment, distrust, hostility, unwillingness in cooperation, misreporting, and active hindrance of response activities (Devermont and Morrison 2018, p. 4). The response in North Kivu contains similar

⁵ The incidents mentioned above include response workers and have therefore not solely taken place in North Kivu.

traits. Therefore, humanitarian security risk management strategies should be actively implemented, to assure safety, and to be able to adequately provide assistance during the epidemic. However, critics claim that strategic security risk management methods often seem to be non-existent in the response (Fairbanks 2020, p. 43).

Community resistance can contribute to violence against Ebola responders, and can come about in different ways. Firstly, suspicions of the true political purposes, intentions and motives behind the response (WHO 2019, p. 15). A clear example includes the exclusion of particular areas in North Kivu from the general elections, feeding the belief that the Ebola outbreak is used as a political ploy. Furthermore, the distrust of state institutions is intrinsically linked to the belief that the allocation of resources has been disproportionate in fields such as finance, staff division, healthcare, as well as the tackling of other disease outbreaks. On the local level the thought prevails that the response activities are a financial exploitative plot against the local inhabitants. The imbalance between the apparent visibility of the Ebola response and the high need for resources in other sections of humanitarian needs such as the necessities of food, security, hygiene, sanitation, and other life necessities, has caused even more suspicion regarding the response (ibid.). According to the WHO, these suspicions concerning the political motives behind the Ebola response, or resentment about the disproportionate distributing of humanitarian aid and health needs, are very difficult to deal with (ibid.).

Secondly, the pre-existing views of foreigners and humanitarians. Various local populations in the Ebola affected North Kivu province, amongst other regions, connect violent conflict and turmoil to those present at the time. A so-called local's fatigue with humanitarian presence has come about creating a negative perception of aid workers (Sweeney 2019). Throughout the years the local population has experienced disease outbreak, famine, conflict, and war, in conjunctions with actors, such as the UN, (international) medics, (international) aid workers, the police, the military, militias and (armed) rebel groups. As its consequence external involvement in the region can be associated with devastation and population displacement (ibid.). Therefore it is extremely challenging to change the existing correlation between the civilians living in the conflict zone and the re-occurring nature of humanitarians and other external actors, hence maintaining mistrust.

This lack of trust could have been strengthened by the fact that the National Health Ministry is collaborating with the WHO. For decades, local populations have not been able to rely on

the central government, and have encountered violence by the national security forces. Due to the involvement of a government body and an international organisation, the authority of the response can be perceived as lacking neutrality (ibid). Furthermore, halfway July 2019, president Tshisekedi declared he would be directly leading the Ebola response with the support of experts. This announcement motivated the departure of the DRC's minister of health, who has been critical regarding the pressures to make use of a second type of vaccine (ACLED 2019d). The apparent dispute of the Ebola response at the level of DRC's government as well as explicitly expressed concerns about an additional vaccination emphasises the complicated nature and difficulty of carrying out a clear and adequate response effort in a conflict-afflicted province with profound distrust towards the government (ibid.). The link between government bodies and humanitarian actors add to the complexity of creating trusting relationships with local communities in North Kivu.

In addition, the violent attacks specifically targeting Ebola facilities has resulted into increased security, with police presence around response activities and facilities. However, the use of armed forces and police to enforce people to follow the implemented health measures against Ebola has consequently contributed to further resistance and estrangement by local communities (Sweeney 2019). The presence of national police and military at Ebola response sites could strengthen the feeling of coercion and domination by the government. These forms of apprehension could damage the efforts of humanitarian actors to gain acceptance in the communities.

Thirdly, the spread of rumours and misinformation is of concern. In local communities in North Kivu, and respectively in other provinces, there is a general belief that the Ebola outbreak was manufactured in favour of local elites and to weaken North Kivu even more (Insecurity Insight 2019, p. 1). Furthermore, in some cases it leads to myth-spreading and conspiracy theories, resulting in distrust regarding vaccinations, treatments, and the general phenomenon of outsiders assisting. These beliefs range from witchcraft, to the claim that it is used as a biological weapon to destroy communities. In some cases people reject the entire existence of the disease (Sweeney 2019). In other cases people believe that Ebola does exist, but that the government and international health agencies are collaborating to spread the disease deliberately (Bedford and Sweet 2018, p. 1-4). Throughout history, local communities had resorted to self-medication or traditional medicine due to difficulties accessing public health facilities, consequently leading to suspicion and opposition of sudden and far-reaching government vaccination projects (Child 2019).

Finally, it is complicated to separate the Ebola outbreak from the ongoing conflict. According to reports by Bedford and Sweet from September 2018 (Bedford and Sweet 2018, p. 1-4), a belief circulates that Ebola responders would be linked to armed groups, resulting into fear and anger amongst the locals. This feeds the belief that the same actors who are behind the atrocious violence and attacks have now initiated and are spreading the disease (ibid.). The trend of those suffering from Ebola staying in their community, and therefore refraining from seeking medical aid (in some cases until death follows), reveals the bitter reality of the feeling of distrust towards response operations (Sweeney 2019).

5.3 Summary

How can incidents of physical harm against aid workers be explained during the tenth Ebola outbreak? In short, Ebola responders in North Kivu have to deal with various external factors, which most notably fall under two main security challenges: (1) attacks by armed groups; and (2) community resistance and mistrust. Community acceptances of the response operations seem difficult in various areas in North Kivu, due to a variety of factors such as negative and biased perceptions of (foreign) aid workers, as well as to the spread of rumours and misinformation. The above mentioned factors make it very apparent that underlying political, social and economic hardship lie at the cornerstone of distrust and scepticism which has folded around the Ebola response.

It seems that since the Ebola outbreak and consequently the response efforts, an increase in attacks on aid workers has occurred. However, the notable surges of aid worker casualties in February and April (before the official declaration of the Ebola outbreak in August) contained the highest number of victims in 2018 across the DRC (as can be seen in figure 3). When solely looking at 2018, the average number of aid worker victims is higher in the first half of 2018 (average of 1.8 casualty) compared to the second half of 2018 (average of 1 casualty) in the DRC. When zooming in on North Kivu, four aid workers were physically harmed in the first half of 2018, and three in the second half of the year. Therefore, when solely looked at 2018 and the official declaration of the Ebola outbreak in August, hypothesis 3 does not hold. However, when looked at figure 2, which present much lower numbers of aid worker casualties in previous years, the remarkable 2018-2019 surge of aid worker victims does coincide noticeably with the 2018 Ebola outbreak.

6. National and International staff members

Throughout the years national aid workers comprised the absolute majority of victims of violent attacks in the world, with international aid workers experiencing more attacks per capita. The following chapter highlights the difference between attacks on national and international aid workers in North Kivu. How can the difference in attacks on national and international aid workers in North Kivu be explained?

6.1 The numbers

Over the past two decades the humanitarian aid sector has experienced an enormous growth. Global aid funding by private actors and governments has grown 400% since 2000 – with a tripling of the number of international aid workers (Hoelscher et. al. 2015 p. 2). The trend continued since 2014 (even though in a slower pace) by an estimated rise in aid funding of 30% until 2018. However, growth has slowed down, with only an increase of 1% from 2017 to 2018 (Development Initiatives 2019). With this continuous growth, humanitarian organisations have had more resources at their disposal, and therefore more national and international aid workers on site who supply more assistance compared to previous decades (Reichhold, Sagmeister and Steets 2012, p. 5).

Historically, around the world most of the aid workers suffering from severe violence were nationals of the country where aid was provided. For example in 2016, 251 national aid workers fell victim to violent attacks worldwide, with 43 international aid worker victims. Even though international aid workers had a much lower absolute number of victims, these numbers still presented a higher rate of attacks in comparison to their national partners (Stoddard et al. 2017, p. 3). In 2017, 285 national aid workers and 28 international aid workers were victims of attack (Stoddard, Harmer, and Czwarno 2018, p. 1). Hereby the gap has already widened considerably within a year (in absolute numbers). In 2018, the national aid workers encompassed 376 victims and international aid workers 29 victims (Stoddard et al. 2019, p. 3). Once again, this shows a considerable absolute growth of national staff member victims in comparison to victims amongst international staff members.

When looking more specifically at the DRC in 2018-2019, the gap between national and international staff members physically harmed by violent incidents is significant. Out of the total amount of aid workers fallen casualty to violent attacks, 51 national aid workers were harmed and 1 international aid worker (figures 3 and 4). When looking more specifically at

North Kivu, from the 31 aid workers subjected to violent attacks in the province, 30 were national aid workers, and 1 was an international aid worker (Humanitarian Outcomes 2020, Aid Worker Security Database). This gap between national and international victims in absolute numbers could indicate humanitarian access impediments in the high-risk North Kivu province. This could also reflect a possible increasing level of remote management programming – or aid localisation in highly insecure areas (Stoddard et al. 2019, p. 2). Unfortunately, there are no numbers available of the exact amount of national and international staff present (or the exact number of Ebola responders) in North Kivu in 2018-2019. This makes it difficult to state whether a profound gap exists in relative numbers of aid worker victims in North Kivu.

In the research and literature dedicated to aid worker security, e.g. by Humanitarian Outcomes, it is often mentioned that national aid workers have to endure violent attacks more often (Stoddard et al. 2019, p. 6). This raises the question of why this gap between attacks on national aid workers and international aid workers exists in North Kivu. In the next paragraphs possible causes are discussed.

First of all, as has been discussed in chapter 5, distrust against foreign aid workers is prominently present. One can argue that national aid workers can have a visible or profound link to foreign aid organisations. Therefore, national aid workers have been perceived as foreign institutionalised, disloyal to their community, or as suspects of collaborating with the enemy before (Stoddard, Harmer, and Haver 2011, p. 4). Furthermore, Congolese nationals from other areas or provinces can be perceived as just as much of an outsider as a non-national, due to ethnic or religious backgrounds, affiliation with a certain clan or tribe, or economic entitlement (ibid.). Secondly, national aid workers often comprise the majority of those operating in the field – 80% for most international NGOs (Stoddard et al. 2019, p. 10). They are generally engaged in the majority of the work concerning assistance to populations in need (Stoddard et al. 2011, p. 3). The tremendous exposure of aid workers in the field, could have accounted steadfastly for the high number of national aid worker victims in the DRC throughout the years. Furthermore, national staff members could be more unprotected by living with no or less security precautions at their homes, as well as travelling by road alone or unprotected (Stoddard et al. 2011, p. 6). In addition, local aid workers experience different risks than national aid workers from different areas. Hereby one can think of threats to their families, or pressure by the local community to obey by the demands made by local leaders or other authoritative figures (Geneva Call 2019 p. 19-20). Furthermore, in some cases

national staff and local staff are perceived to be more prone to corruption (ibid.). International aid workers are generally recognised as being more impartial, because of being an outsider to the local community. Therefore one can argue that international staff would be better able to resist demands made by local authoritative figures as well as non-state armed groups, and are consequently less vulnerable to corruption (Geneva Call 2019, p. 28). This could translate into distrust against local/ national aid workers. In addition, withdrawal of international staff/ organisations (e.g. for safety reasons or lack of funding) could lead to more pressure on national staff members and could therefore result into increasing risk for national aid workers (ibid.).

This continuous large discrepancy between the risk for national and international staff has brought about critique throughout the years regarding organisation's security plans. As has been made evident is that national and international aid workers experience different kind of threats and bring about different levels of risk. This should also come to the fore in the organisation's security strategy (Stoddard et al. 2019, p. 16). The main critique throughout the years entails that (international) organisations are slow in providing additional off-hour security measures to national staff members who live in their own home in the area (ibid.). International organisations perceive their duty of care differently toward national staff members (ibid.). This can vary from starting when they leave their house in the morning, to when they set foot in the office. According to critics this is problematic because the insecure area they reside in (high-risk regions such as North Kivu), and visibly being part of an international organisation, or a national organisation collaborating with foreign organisations or the government, could possibly heighten their risk in the community (ibid.).

National aid worker security has been an ongoing topic of discussion for years, and remains to be a problematic issue. However, it maintains to be of utmost importance due to the increasing insecurity in North Kivu in the past two years, with a large number of aid worker victims and frequent withdrawals of health workers and Ebola responders as a clear example. It indicates the high-risk environment and it can possibly lead to a (further) increase in remote management programming with more dependence on national staff members and national partner organisations.

6.2 Summary

In short, throughout the years national staff members have carried the burden of the absolute majority of violent attacks in the DRC, and more specifically in North Kivu. The most

obvious statement could be that it has become increasingly dangerous in the past two years to be an aid worker in a conflict-ridden province such as North Kivu. However, insecurity for national or local aid workers can have various causes, such as (1) working for or having links to foreign aid organisations; (2) different background; (3) majority of national aid workers are situated in the field; (4) lacking security conditions; (5) communal pressures or threats; (6) and increasing remote management programming. Evidently various possible drivers behind national aid worker insecurity come to the front, but it remains to be rather abstract, since there is no clear cut answer to why national aid workers become the target of violent attacks more often. Hypothesis 2 is supported in this chapter in the sense that when violence against aid workers in North Kivu occurred, national staff members were more often the victim of attack compared to international staff members.

Furthermore, more in-depth research is needed concerning security plans and strategies. Aid workers – and in particular national aid workers – are experiencing an increase in targeted attacks, but this is not indicative for insufficiency of the measures and possible improvements taken over the years regarding national (and international) aid worker safety (*ibid.*). Possibly the measures taken have reduced the number of attacks, and it would have actually been a much higher number without the security measures currently in place. In addition, it is important to take into account that there are many diverse components to national aid worker security such as differences in risk perception of national and international aid workers, as well as gender and security.

Conclusion

This thesis aims to explain the incidents of physical harm to aid workers in North Kivu, Democratic Republic of Congo in 2018-2019. For decades insecurity and violence have posed grave risk of physical harm to aid workers active in North Kivu. The DRC has, as has become evident, experienced a large increase in aid worker casualties, in 2018-2019. A substantial part of the total number of aid workers attacked in 2018 and 2019 occurred in North Kivu. In these two turbulent years several occurrences stood out, namely the Ebola outbreak, the presidential elections, and the growing anti-UN and anti-foreigner sentiment. It can be stated that these three occurrences have functioned as drivers behind the increase of incidents of physical harm to aid workers in North Kivu.

Broadly speaking, several drivers can be perceived to be of influence to attacks against aid workers in North Kivu: violence by armed (non-state) groups, criminal violence, and community violence. First of all, the number of armed actors has grown significantly over the years. This is due to continuous fragmentation of armed (non-state) groups, blurring lines between national security forces and armed (non-state) actors, and anonymous perpetrators. Second of all, there has been an increase in criminal activity in relation to harmful incidents against aid workers, whereby the perpetrators are often unknown, or in some cases cover up their true identity (such as *faux* ADF). Therefore, it becomes increasingly difficult to identify the true perpetrators and the motives behind the attacks. However, even though 2018-2019 experienced a surge in aid worker victims compared to previous years, there seems to be no correlation between increasing violence (as measured by the number of deaths by violence) and the peak in attacks against aid workers in 2018-2019.

Furthermore, incidents of physical harm against aid workers in 2018-2019 during the tenth Ebola outbreak can be explained in several ways. Ebola responders in North Kivu have to endure a multitude of challenges, which can roughly be divided in: (1) attacks by armed (non-state) groups; and (2) community resistance and mistrust. This proves that underlying economic, political, and social grievances in North Kivu lie at the cornerstone of scepticism and distrust which has folded around the Ebola response operations.

In 2018-2019 national staff members have been the absolute majority of victims of physical harm in North Kivu. The risks for both national and international aid workers are different. There are multiple drivers behind risk for national aid workers, from having visible links to foreign aid organisations (read anti-foreigner sentiment), to increased remote management

programming – indicating the increasing level of danger in the province. There are many other components to aid worker security such as differences in risk perception of national and international aid workers, as well as risk regarding gender and security. Furthermore, in order to perceive whether the current safety and security measures in place concerning national aid workers are effective, in-depth research is needed in organisation's security plans with comparative case studies to observe effectiveness of the measures before and after implementation.

Hypothesis 1, *the more violence in North Kivu, the more aid workers get physically harmed*, does not hold when looking at the correlation between the overall number of deaths by violence in North Kivu and the number of aid worker casualties in 2018-2019. In certain cases months with less violence, as derived from figure 5, would have a higher number of aid workers physically harmed. However, armed group activity, criminal violence, as well as community violence have seen surges in 2018-2019, which have undeniably resulted into more attacks against aid workers. Furthermore, in case of the Ebola response operations in North Kivu, international organisations had deployed at least 500 Ebola responders to offer assistance (not only in North Kivu), in addition to the Ebola responders already present. This means that more aid workers were on site, in addition to the aid workers already active in North Kivu. This in its turn leads to a higher possibility of an aid worker being attacked. However, for example, surges in violence near or aimed at Ebola response activities has shown that frequent withdrawal or suspension of aid operations occurred. Thereby reducing the (additional) risk for aid workers, and therefore possibly minimising additional harmful incidents from occurring. Furthermore, *when violence in North Kivu increased it has led to more casualties among national staff in comparison to international staff* in absolute numbers. In absolute numbers it can be stated that of the violent attacks carried out against Ebola responders, national staff members were more often physically harmed. The gap between national and international aid workers is significant, respectively 30 to 1, in the past two years in North Kivu. However, there is no clear indication that when violence increased, national staff was also relatively more often the target of attack compared to international staff. At first glance this appears to have been the case.

During the tenth Ebola outbreak (which officially lasted from August 2018 until June 2020), more aid workers were harmed than when there was no Ebola present in North Kivu – has been a difficult hypothesis to test. As has been discussed, numerous attacks have been carried out targeting Ebola operations. With the profound increase in aid worker casualties in 2018-

2019, it is highly likely that in absolute numbers more aid workers have been harmed during the tenth Ebola outbreak. As figure 2 has clearly presented is that the number of aid worker casualties was significantly lower in the previous years in the entire DRC – while the country had endured various other disease outbreaks over the years as well. Furthermore, as has made evident, in North Kivu the number of aid workers physically harmed had risen significantly in both 2018 and 2019, in comparison to 2016, and 2017. However, it is difficult to state if less aid workers would have been harmed if there was no Ebola outbreak, due to response operations regarding other disease outbreaks (e.g. large-scale measles outbreak) and continuous insecurity in the region. It can be argued that the large scale of the tenth Ebola outbreak – the largest in the country itself and the second largest globally recorded – has been of influence to the number of aid workers harmed. Due to this large scale outbreak, the number of additional aid workers present in North Kivu in 2018-2019 has likely increased (at least with 500 additional Ebola responders) – indicating a possibly growing level of risk. Furthermore, the fact that this large-scale Ebola outbreak took place in conflict-zone North Kivu (amongst other provinces) could have contributed to additional resistance, not only by local populations, but also by armed (non-state) groups - rendering Ebola responders (and possibly other aid workers) more vulnerable.

The ongoing violence, clashes, and the increase in the number of attacks on civilians in North Kivu have restricted access to the humanitarian space for aid workers. However, even with the ongoing insecurity, Ebola responders (as the clearest example) have been active in North Kivu. It can therefore be stated that due to less access (e.g. because of increasing levels of violence) aid operations have been withdrawn on several occasions, which could possibly result into less (additional) harm (such as the previously mentioned withdrawal of Ebola response activities). However, challenges such as community mistrust, as well as criminality, in North Kivu can restrict access as well, but could be less likely to lead to suspension of aid activities. Therefore this could lead to more (unanticipated) harm. Furthermore, the increase in harm done to aid workers in 2018-2019 has in its turn limit the access for aid workers. Ebola responders were attacked on various occasions in North Kivu, which consequently led to withdrawal – meaning *more harm means less access*. In conclusion, in the light of this thesis the correlation between access and harm can be perceived as two-fold: *less access means more harm* and *more harm means less access*.

Evidently, the factors explaining the incidents of physical harm to aid workers in North Kivu, DRC in 2018-2019, are multitude and remain to be of extreme complexity. In order to better

understand the conflict dynamics, tackle response strategies, and comprehend the national and international aid worker security, more research is needed on different levels. This includes more in-depth research on a community level in North Kivu, in order to get a better understanding of community mistrust, community resistance, and the drivers behind it. This is needed in order to learn and derive lessons from it, for future response efforts to other disease outbreaks in the region. Furthermore, the years with few aid worker victims in North Kivu should be exposed to research. What are the underlying factors to a decrease in incidents of physical harm? What is, furthermore, of crucial importance is to expand on research regarding the acceptance strategy and development security strategies, to include the more anonymous identities of perpetrators which have come about with the increase in criminality, as well as the fragmentation of armed (non-state) groups. This raises questions such as: how to gain acceptance when new armed groups keep forming?

All these issues once again confirm the extremely dynamic humanitarian space in North Kivu. Even though this thesis specifically zoomed in on three main occurrences over the last two years, both catalysts and consequences of humanitarian crises have endured in the DRC for many decades.

Bibliography

Abild, E. (2009). Creating humanitarian space: a case study of Somalia. *Refugee Studies Centre* (184), 1-39. <https://www.unhcr.org/research/working/4b2a035e9/creating-humanitarian-space-case-study-somalia-erik-abild.html>

Aizenman, N. (2019, June 4). An Urgent Mystery: Who's Attacking Ebola Responders In Congo – And Why?. *National Public Radio*. Retrieved from <https://www.npr.org/>

Al Jazeera. (2016, October 17). DRC delays elections to 2018 despite opposition anger. Retrieved from <https://www.aljazeera.com/>

Al Jazeera. (2019, November 17). Protests spread in east DRC as fury against UN peacekeepers rises. Retrieved from <https://www.aljazeera.com/>

Armed Conflict Location & Event Data Project (ACLED). (2019a). *Regional Overview: Africa 1-7 December 2019*. Retrieved from <https://acleddata.com/2019/12/10/regional-overview-africa-1-7-december-2019/>

Armed Conflict Location & Event Data Project (ACLED). (2019b). *Regional Overview – Africa 23 April 2019*. Retrieved from <https://acleddata.com/2019/04/23/regional-overview-africa-23-april-2019/>

Armed Conflict Location & Event Data Project (ACLED). (2019c). *Fact Sheet: Conflict in the DRC*. Retrieved from <https://acleddata.com/2019/07/25/fact-sheet-conflict-in-the-drc/>

Armed Conflict Location & Event Data Project (ACLED). (2019d). *Regional Overview: Africa 23 July 2019*. Retrieved from <https://acleddata.com/2019/07/23/regional-overview-africa-23-july-2019/>

Bedford, J. & Sweet, R. (2018). WhatsApp and Local Media (Grand Nord). *Social Science in Humanitarian Action*, 1-4. Retrieved from <https://www.socialscienceinaction.org/resources/whatsapp-local-media-grand-nord-9-18-september-2018/>

Bedford, J. (2018). Key considerations: the context of North Kivu province, DRC. *Social Science in Humanitarian Actions*, 1-8. Retrieved from https://reliefweb.int/sites/reliefweb.int/files/resources/SSHAP_North_Kivu_context.pdf

Bollettino, V. (2008). Understanding the security management practices of humanitarian organisations. *Harvard Public Health*, 263-279. Retrieved from <https://onlinelibrary-wiley-com.ezproxy.leidenuniv.nl:2443/doi/epdf/10.1111/j.1467-7717.2008.01038.x>

Brabant van, K. (2010). Good Practice Review 8 Revised Edition: Operational security management in violent environments. *Humanitarian Practice Network, Overseas Development Institute*: 1-300. Retrieved from <https://www.eisf.eu/library/good-practice-review-8-revised-edition/>

Centers for Disease Control and Prevention (CDC). (2019). *Ebola (Ebola Virus Disease): overview*. Retrieved from <https://www.cdc.gov/vhf/ebola/outbreaks/drc/overview.html>

Child, D. (2019, March 7). 'Toxic' atmosphere undermining DRC Ebola outbreak response: MSF. Retrieved from <https://www.aljazeera.com/>

Congo Research Group (CRG). (2019). Congo, Forgotten: The Numbers Behind Africa's Longest Humanitarian Crisis. *Congo Research Group*, 1-18. Retrieved from <https://kivusecurity.nyc3.digitaloceanspaces.com/reports/28/KST%20biannual%20report%20August%2012%20%281%29.pdf>

CRG. (2020). For the army, with the army, like the army?, 1-70. Retrieved from <http://congoresearchgroup.org/report-nduma-defence-renove-guidon-for-the-army-with-the-army-like-the-army/>

Development Initiatives. (2019, June 25). Briefing: Key trends in global humanitarian assistance 2019. *Development Initiatives*, 1-5. <https://devinit.org/resources/briefing-key-trends-global-humanitarian-assistance-2019/#downloads>

Devermont, J. and Morrison J.S. (2018, November 1). North Kivu's Ebola Outbreak at Day 90: What Is to Be Done? *Center for Strategic & International Studies*, 1-8. Retrieved from <https://www.csis.org/analysis/north-kivu-ebola-outbreak-day-90-what-be-done>

Dobbins, J., Miller, L.E., Pezard, S., Chivvis, C.S., Taylor, J.E., Crane, K., Trenkov-Wermuth, C., and Mengistu, T. (2013). Democratic Republic of the Congo. In *Overcoming Obstacles to Peace: Local Factors in Nation-Building*. (pp. 179-204). RAND Corporation. <http://www.jstor.com/stable/10.7249/j.ctt3fgzrv.16>

Durieux, J. and Dhanapala, S. (2008). Carving out humanitarian space. *Forced Migration Review*, 1 (30), 13-15. Retrieved from <https://www.ebsco.com>

ECHO. (2004). Report on security of humanitarian personnel. *Commissioned by ECHO*, 1-108. Retrieved from https://reliefweb.int/sites/reliefweb.int/files/resources/14B8FB85F0FB1CDBC1256F510039BF2F-security_report_echo_2004.pdf

ECHO. (2019, February 15). ECHO Daily Flash, 15 February 2019. Retrieved from <https://erccportal.jrc.ec.europa.eu/ECHO-Flash/ECHO-Flash-List/yy/2019/mm/2>

European Civil Protection and Humanitarian Aid Operations (ECHO). (2004, April 28). *ECHO Annual Review 2003 – Commission appeals for respect of humanitarian principles in Darfur, Sudan and announces EUR 10 million in extra aid to victims of the conflict* [Press release]. Retrieved from https://europa.eu/rapid/press-release_IP-04-557_en.htm

Fairbanks, A. (2020). Security and access in the DRC: implementing an acceptance strategy in the Ebola response. *Humanitarian Exchange*, (77), 43-46. Retrieved from <https://gisf.ngo/resource/security-and-access-in-the-drc-implementing-an-acceptance-strategy-in-the-ebola-response/>

Geneva Call. (2019). Negotiation of Humanitarian access in North Kivu: the perception of armed non-state actors, communities, and humanitarians. *Geneva Call and the European Civil Protection and Humanitarian Aid Operations*, 1-40. Retrieved from <https://www.genevacall.org>

Hoelscher, K, Miklian, J. and Nygård, H.M. (2015). Understanding Attacks on Humanitarian Aid Workers. *Conflict Trends, Peace Research Institute Oslo* (6), 1-4. Retrieved from <https://www.prio.org/>

Human Rights Watch (HRW). (2019). Democratic Republic of Congo: Events of 2018. *Human Rights Watch*. Retrieved from <https://www.hrw.org/world-report/2019/country-chapters/democratic-republic-congo>

Humanitarian Outcomes (2020), Aid Worker Security Database. Retrieved from www.aidworkersecurity.org.

Humanitarian Outcomes. (2020, February). Aid Worker Security Database (AWSDB) Codebook, 1-16. Retrieved from <https://www.humanitarianoutcomes.org>

Insecurity Insight. (2019, December). Attacks on health care in the context of the Ebola emergency response in the Democratic Republic of the Congo: January-November 2019. *Switzerland: Insecurity Insight, Attacks on Ebola Response project*, 1-5. <http://bit.ly/38oNumi>

Insecurity Insight. (2019-2020). Security challenge: community distrust and resistance. *Switzerland: Insecurity Insight*, 1-4. Retrieved from <http://insecurityinsight.org/wp-content/uploads/2020/02/Community-Resistance-and-Mistrust-Security-Challenge-Recommendations.pdf>

Insecurity Insight. (2019-2020). Security Challenge: Non-state armed groups. *Switzerland: Insecurity Insight*, 1-4. Retrieved from <http://insecurityinsight.org/wp-content/uploads/2020/02/Non-State-Armed-Groups-Security-Challenge-Recommendations.pdf>

International Committee of the Red Cross (2005). *Annual Report 2004: press conference with President Kellenberger*. Retrieved from <https://www.icrc.org/en/doc/resources/documents/press-briefing/ar04-press-conference.htm>

International Committee of the Red Cross (ICRC). (2019, April 1). *ICRC president to UN Security Council: Space for impartial humanitarian action under threat*. Retrieved from <https://www.icrc.org/en/document/icrc-president-un-security-council-space-impartial-humanitarian-action-under-threat>

International Crisis Group. (2019). A New Approach for the UN to Stabilise the DR Congo. *Crisis Group Africa Briefing* (148), 1-16. Retrieved from <https://www.crisisgroup.org/africa/central-africa/democratic-republic-congo/b148-new-approach-un-stabilise-dr-congo>

Kasali, N. (2019). Community Responses to the Ebola Response: Beni, North Kivu. *Congo Initiative – Bethesda Counseling Center*, 1-9. Retrieved from <https://www.alnap.org/help-library/community-responses-to-the-ebola-response-beni-north-kivu>

Kivu Security Tracker (KST). (2020). Violent incidents North Kivu. Retrieved from <https://kivusecurity.org>

KST. (2019). What is behind the rise of crime in the Congo's cities?. Retrieved from <https://blog.kivusecurity.org/what-is-behind-the-rise-of-crime-in-the-congos-cities/>

MONUSCO. (2020). United Nations Organization Stabilization Mission in the DR Congo: Background. *United Nations*. Retrieved from <https://monusco.unmissions.org/en/background>

Morrison, J.S. & Devermont, J. (2018). North Kivu's Ebola Outbreak at Day 90. *Center for Strategic & International Studies*, 1-8. <https://www.csis.org/analysis/north-kivus-ebola-outbreak-day-90-what-be-done>

MSF. (2002, July 18). Humanitarian action must not be a tool of political interest. *Medecins Sans Frontieres Project Update*. Retrieved from <https://www.msf.org/humanitarian-action-must-not-be-tool-political-interests>

MSF. (2019, March 7). *Ebola response failing to gain the upper hand on the epidemic* [Press release] Retrieved from <https://www.msf.org/ebola-response-failing-gain-upper-hand-epidemic-democratic-republic-congo>

MSF. (2020, June 26). DRC Ebola Outbreaks: Crisis update – June 2020. *Medecins Sans Frontieres*. Retrieved from <https://www.msf.org/drc-ebola-outbreak-crisis-update>

Obrecht, A. (2018). Dynamic Gridlock: Adaptive Humanitarian Action in the Democratic Republic of Congo. *ALNAP Country Study*, 1-51. Retrieved from <https://www.alnap.org/help-library/dynamic-gridlock-adaptive-humanitarian-action-in-the-drc>

OCHA (2018a, August 16). Aid worker deaths: the numbers tell the story. *United Nations Office for the Coordination of Humanitarian Affairs*. Retrieved from <https://www.unocha.org/story/aid-worker-deaths-numbers-tell-story>

OCHA. (2003). Glossary of Humanitarian Terms - In relation to the Protection of Civilians in Armed Conflict. *United Nations Office for the Coordination of Humanitarian Affairs*. Retrieved from <https://www.humanitarianresponse.info/sites/www.humanitarianresponse.info/files/document/s/files/ocha%20glossary.pdf>

OCHA. (2018b). About OCHA DRC. *United Nations Office for the Coordination of Humanitarian Affairs*. Retrieved from <https://www.unocha.org/democratic-republic-congo-drc/about-ocha-drc>

ODI. (2010, October 20). *Humanitarian Space: concepts, definitions and uses*. Overseas Development Institute, 1-7. Retrieved from <https://www.odi.org/events/2655-humanitarian-space-concepts-definitions-and-uses>

Oxfam International. (2008). OI Police Compendium Note on UN Integrated Missions and Humanitarian Assistance, 1-6. Retrieved from <https://www.oxfam.org>

Paravicini, G. (2018, December 26). Three Congo opposition areas excluded from presidential election. *Reuters*. Retrieved from <https://www.reuters.com>

Reichhold, U., Sagmeister, E. & Steets, J. (2012). Evaluation and review of humanitarian access strategies in DG ECHO funded interventions. *Global Public Policy Institute*, 1-78. https://ec.europa.eu/echo/files/evaluation/2012/GPPI_Access-Report_July-2012.pdf

Roth, S. (2014). Aid work as edgework – voluntary risk-taking and security in humanitarian assistance, development and human rights work. *Journal of Risk Research*, 18 (2), 139-155. <https://doi.org/10.1080/13669877.2013.875934>

Sida, L. (2005). Challenges to humanitarian space. *Monitoring and Steering Group*, 1-27. Retrieved from <https://reliefweb.int/sites/reliefweb.int/files/resources/BC75B030FE472FF5C125700D004DBAA1-msg-lbr-30apr.pdf>

Stearns, J.K. & Vogel, C. (2015). The Landscape of Armed Groups in the Eastern Congo. *Congo Research Group and the Center on International Cooperation*, 1-12. Retrieved from <http://congoresearchgroup.org/wp-content/uploads/2015/11/CRG-Armed-Groups-in-the-Congo.pdf>

Stearns, J.K. & Vogel, C. (2017). The Landscape of Armed Groups in Eastern Congo. *Kivu Security Tracker*, 1-9. Retrieved from <https://reliefweb.int/sites/reliefweb.int/files/resources/Landscape%20of%20Armed%20Groups%20Essay%20KST.pdf>

Stearns, J.K. (2012). North Kivu: The background to conflict in North Kivu province of eastern Congo. *Rift valley Institute - Usalama Project*, 1-50. Retrieved from <https://www.riftvalley.net>

Stoddard, A. & Harmer, A. (2007). Little Room to Maneuver: The Challenges to Humanitarian Action in the New Global Security Environment. *Journal of Human Development* 7 (1), 23-41. <https://doi.org/10.1080/14649880500501146>

Stoddard, A. (2019). Figures at a glance 2019. *Humanitarian Outcomes*, 1. Retrieved from <https://www.humanitarianoutcomes.org>

Stoddard, A., Harmer, A. & Haver, K. (2011). Safety and security for national humanitarian workers. *Office for the Coordination of Humanitarian Affairs*, 1-22. Retrieved from <https://www.unocha.org/sites/unocha/files/Safety%20and%20Security%20for%20National%20Humanitarian%20Workers%2C%20PDSB%2C%202011%2C%20English.pdf>

Stoddard, A., Harmer, A., and Czwarno, M. (2017). Aid Worker Security Report 2017 - Behind the attacks: A look at the perpetrators of violence against aid workers. *Humanitarian Outcomes*, 1-24. Retrieved from <https://www.humanitarianoutcomes.org>

Stoddard, A., Harmer, A., and Czwarno, M. (2018). Aid Worker Security: Figures at a glance 2018. *Humanitarian Outcomes*, 1. Retrieved from <https://www.humanitarianoutcomes.org>

Stoddard, A., Harmer, A., Czwarno, M., and Breckenridge, M. (2019). Aid Worker Security Report 2019 – Updated: Addressing sexual violence and gender-based risk in humanitarian aid. *Humanitarian Outcomes*, 1-23. Retrieved from <https://www.humanitarianoutcomes.org>

Sweeney, A. (2019, July 9). Community Mistrust: why the DRC's Ebola epidemic is so distinctly complex. *Global Interagency Security Forum*. <https://gisf.ngo/blogs/community-mistrust-why-the-drcs-ebola-epidemic/>

UN High Commissioner for Refugees (UNHCR). (2018). Independent Evaluation of UNHCR's Response to the L3 Emergency in the Democratic Republic of Congo. *United Nations*, 1-94. Retrieved from <https://www.unhcr.org/5c5419fe4.pdf>

UN News. (2019, November 25). UN mission in DR Congo appeals for calm as violent protests continue. *United Nations*. Retrieved from <https://news.un.org/en/story/2019/11/1052151>

UN News. (2019, November 26). UN working to prevent attacks on civilians in eastern DR Congo. *United Nations*. Retrieved from <https://news.un.org/en/story/2019/11/1052281>

- UN. (2001, May 3). *Security Council Condemns Illegal Exploitation of Democratic Republic of Congo's Natural Resources* [Press release]. Retrieved from <https://www.un.org/press/en/2001/sc7057.doc.htm>
- UN. (2019, October). Democratic Republic of the Congo Map. *United Nations* (12), 1. <https://www.un.org/Depts/Cartographic/map/profile/drcongo.pdf>
- UNDESA. (2019). World Population Prospects 2019. *United Nations Department of Economic and Social Affairs*. <https://population.un.org/wpp/Download/Standard/Population/>
- United Nations Development Programme (UNDP). (2019). Inequalities in Human Development in the 21st Century. *Human Development Report*, 1-10. Retrieved from http://hdr.undp.org/sites/all/themes/hdr_theme/country-notes/COD.pdf
- UNSC Resolution 2502. (2019, December 19). *United Nations Security Council*, 1-17. Retrieved from [https://undocs.org/en/S/RES/2502\(2019\)](https://undocs.org/en/S/RES/2502(2019))
- Uppsala Conflict Data Program (UCDP). (2019). DR Congo (Zaire). <https://ucdp.uu.se/country/490>
- US Travel Advisories. (2020). Democratic Republic of the Congo Travel Advisory. *U.S. Department of State – Bureau of Consular Affairs*. Retrieved from <https://travel.state.gov/content/travel/en/traveladvisories/traveladvisories/democratic-republic-of-the-congo-travel-advisory.html>
- Van Reybrouck, D. (2010). *Congo: the epic history of a people*. Amsterdam: De Bezige Bij.
- Van Voorst, R. (2018). Praxis and paradigms of local and expatriate workers in 'Aidland'. *Third World Quarterly*, 40 (12), 2111-2128. <https://doi-org.ezproxy.leidenuniv.nl/2443/10.1080/01436597.2019.1630269>
- Vanthemische, G. (2012). Belgium and the Independent Congo. In G. Vanthemische, *Belgium and the Congo 1885-1980* (pp. 200-267). <https://doi.org/10.1017/CBO9781139043038.006>
- Wakabi, W. (2008). The Democratic Republic of the Congo in crisis. *ScienceDirect*, 372 (9655), 2011-2012. [https://doi.org/10.1016/S0140-6736\(08\)61854-1](https://doi.org/10.1016/S0140-6736(08)61854-1)

WHO Regional Office for Africa. (2020, January 12). Weekly Bulletin on Outbreaks and Other Emergencies. *WHO Health Emergencies Programme*, 1-15. Retrieved from <https://apps.who.int/iris/bitstream/handle/10665/330398/OEW02-0612012020.pdf>

WHO. (2014, December 2014). Democratic Republic of Congo: The country that knows how to beat Ebola. *World Health Organisation*. Retrieved from <https://www.who.int/features/2014/drc-beats-ebola/en/>

WHO. (2019). WHO's response to the 2018-2019 Ebola outbreak in North Kivu and Ituri, the Democratic Republic of the Congo, *World Health Organisation*, 1-46. Retrieved from https://www.who.int/docs/default-source/documents/emergencies/drc-ebola-response-srp-1-3-october2019.pdf?sfvrsn=41319fa1_2

WHO. (2019, December 1). WHO Director-General praises bravery of health workers during visit to eastern Democratic Republic of Congo following fatal attacks on Ebola responders. *World Health Organisation*. Retrieved from <https://www.who.int/news-room/detail/01-12-2019-who-director-general-praises-bravery-of-health-workers-during-visit-to-eastern-democratic-republic-of-congo-following-fatal-attacks-on-ebola-responders>

WHO. (2019, November 28). Dead and injured following attacks on Ebola responders in the Democratic Republic of the Congo. *World Health Organisation*. Retrieved from <https://www.who.int/news-room/detail/28-11-2019-dead-and-injured-following-attacks-on-ebola-responders-in-the-democratic-republic-of-the-congo>

WHO. (2020). Emergencies preparedness, response – Democratic Republic of Congo. *World Health Organisation*. Retrieved from <https://www.who.int/csr/don/archive/country/cod/en/>

World Bank. (2020). The World Bank in DRC. Retrieved from <https://www.worldbank.org/en/country/drc/overview>

Yin, R.K. (2018). *Case Study Research and Applications: Design and Methods (sixth edition)*. SAGE Publishing.