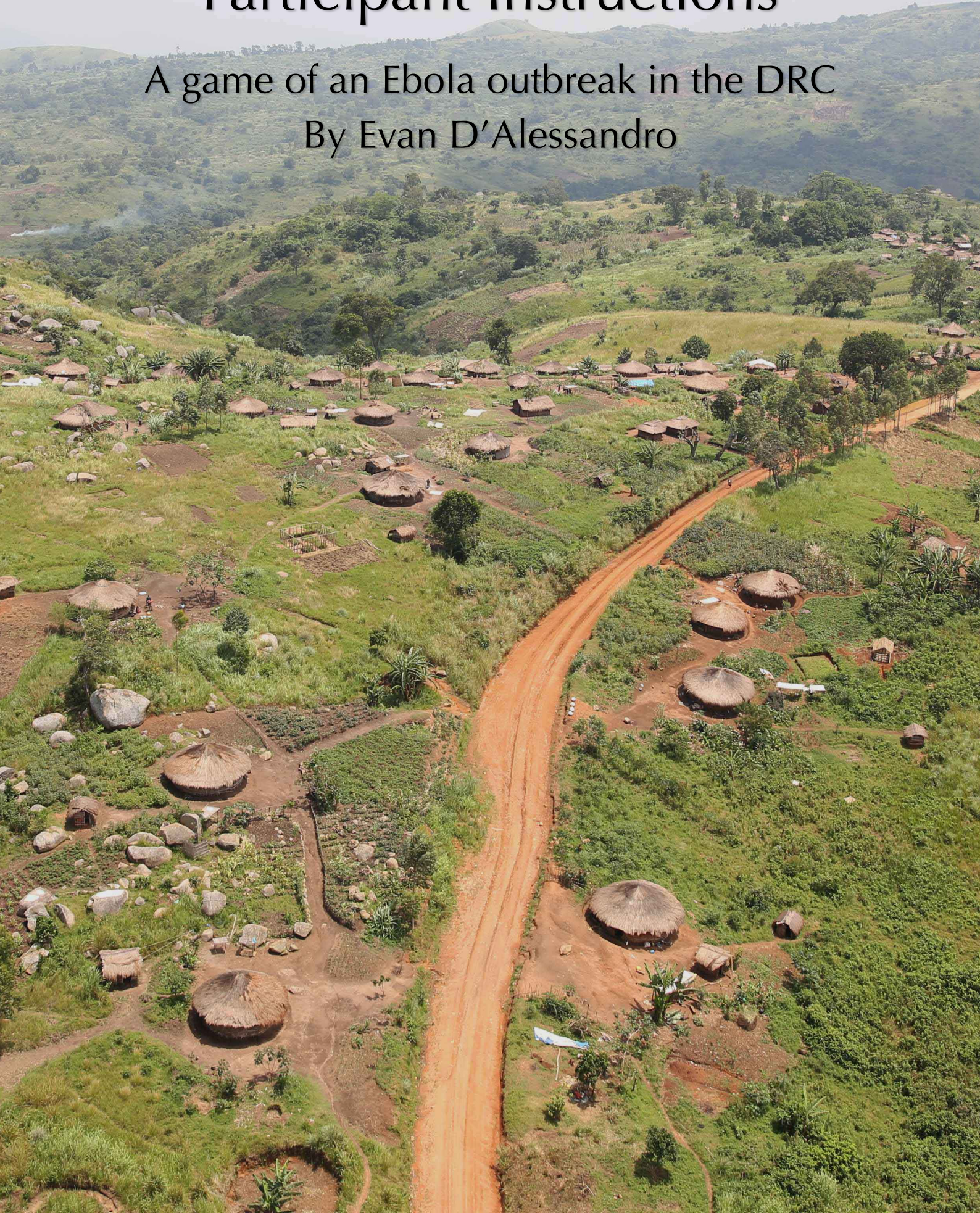


# EBOLA IN TOWN

## Participant Instructions

A game of an Ebola outbreak in the DRC

By Evan D'Alessandro





# EBOLA IN THE DRC

Evan D'Alessandro, 2022

PARTICIPANT INSTRUCTION DOCUMENT

## **TABLE OF CONTENTS**

The following document is designed to provide you with an overview of the structure of the webinar, and the purpose and format of the roleplaying game. It will provide you with the information you need to understand and participate in the game.

### **1. Overviews**

- 1.1 Goal of the Game
- 1.2 Overview of the Game
- 1.3 Overview of the Webinar Structure / Gameplay

### **2. Stakeholder Roles**

- 2.1 Government of the DRC
- 2.2 Village Chief(s)
- 2.3 Armed Non-State Group
- 2.4 WHO Regional Office
- 2.5 MONUSCO
- 2.6 MSF

# 1 | OVERVIEWS

## 1.1 | Goal of the Game

*Ebola in the DRC* is an educational wargame intended to illustrate issues of securitization during epidemics. It uses the example of the 2019 Ebola outbreak in the Democratic Republic of the Congo (DRC). As with real life, the game does not have a simple or finite criterion for achieving victory or failure. Instead, it highlights the ways in which the actions of key stakeholders can influence health crises in both positive and negative ways.

## 1.2 | Overview of the Game

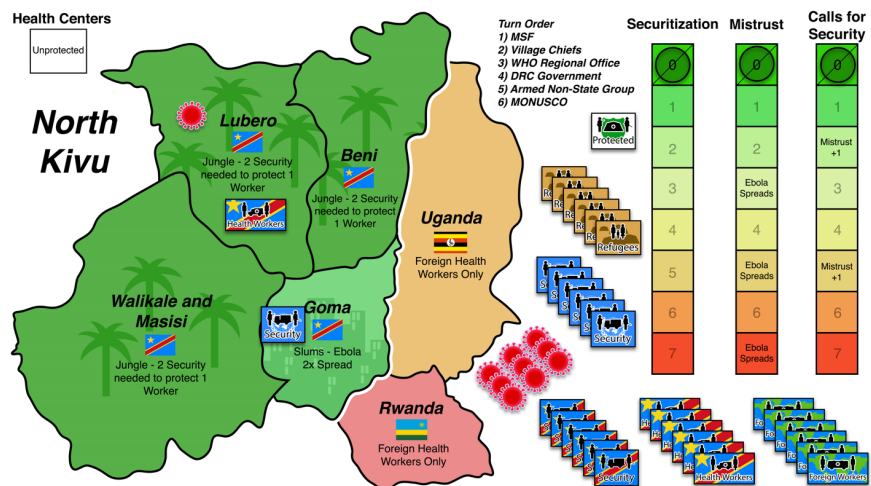
You are being tasked with representing the interests of one or more stakeholders involved in the 2019 Ebola outbreak. You will do so over the course of *up to* four rounds, each of which is ten minutes long. In each round, you will choose one action from a list of possible actions to further the interests of your assigned stakeholder(s). After all of the rounds, the webinar will end with some time for reflection.

There are six different stakeholders represented within the game:

- |                 |                                                                                                                                                                                                                                                                                            |
|-----------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| National Actors | <ul style="list-style-type: none"> <li>a. Government of the Democratic Republic of the Congo (DRC)</li> <li>b. Village Chief(s)</li> <li>c. Armed Non-State Group</li> </ul>                                                                                                               |
| External Actors | <ul style="list-style-type: none"> <li>d. World Health Organization (WHO) Regional Office</li> <li>e. United Nations Organization Stabilization Mission in the Democratic Republic of the Congo (MONUSCO)</li> <li>f. Médecins Sans Frontières (MSF) or Doctors Without Borders</li> </ul> |

Throughout the game, you will be able to view a ‘game board’ to aid your understanding of evolving events. The board contains a simplified map of the Democratic Republic of the Congo, as well as two of its neighboring countries (Uganda and Rwanda) comprising 6 regions. The

board also contains game pieces representing the Ebola virus and various resources (security, workers, refugees, etc), as well as three trackers to demonstrate shifting levels of securitization, mistrust and calls for security.





### 1.3 | Overview of the Webinar / Gameplay Structure

The webinar takes place in three parts:

<b>Webinar Set Up</b> (5-10 mins)	At the start of the webinar, the facilitator will set up the game board, allocate all students to specific 'roles', and give you time to refamiliarize yourself with your role.
<b>Main Rounds of the Game</b> (up to 4 rounds, each 10 mins long)	<p><b>Part 1 (5 mins)   Deciding on Stakeholder Actions</b></p> <p>You decide which actions you wish to take. Each team may take only one action per round.</p> <p><i>NB. If there is more than one student representing a stakeholder, you will be sent into breakout rooms during these 5 minutes, in order to discuss and decide your action as a team. You are then brought back into the main room for the second part of the round.</i></p> <p><b>Part 2 (4 mins)   Implementing Stakeholder Actions</b></p> <p>You state what action you have chosen. You do so in the following order:</p> <ol style="list-style-type: none"> <li>1. MSF</li> <li>2. Village Chief(s)</li> <li>3. WHO Regional Office</li> <li>4. DRC Government</li> <li>5. Armed Non-State Group</li> <li>6. MONUSCO</li> </ol> <p>After each 'stakeholder' states what their action will be, the facilitator adjudicates the outcome of this action immediately by moving the relevant game pieces on the board. Thus, the value of each stakeholder action will be impacted upon by the outcomes of the previous and following stakeholder actions.</p> <p><b>Part 3 (1 min)   Highlighting the Spread of Ebola</b></p> <p>After all stakeholders have had their action resolved, the facilitator undertakes four separate actions on the board to demonstrate how far Ebola has either been successfully treated or has spread further as a result of the actions undertaken within the round.</p> <p><b>Repeat Parts 1-3 again 3 Times</b></p>
<b>End of the Game</b> (10-15 mins)	At the end of the game, there will hopefully be 10-15 minutes available to reflect upon and discuss the impact of the game.

## 2 | STAKEHOLDER ROLES

National Actors	2.1   Government of the Democratic Republic of the Congo (DRC)
	2.2   Village Chief(s)
	2.3   Armed Non-State Group
External Actors	2.4   World Health Organization (WHO) Regional Office
	2.5   MONUSCO (UN Organization Stabilization Mission in the DRC)
	2.6   Médecins Sans Frontières (MSF) or Doctors Without Borders



## 2.1 | Government of the DRC

**Overview:** The Government of the DRC is typical of many African nations and tends to focus closer to the capital Kinshasa in the west than on the opposite side of the country in the North Kivu region in the east. Fights with rebels and Ebola have been ongoing for many years, hampered by the terrain, lack of focus, and corruption.

**Objective:** Curtail the spread of Ebola.

**Strategy:** The DRC has the broadest options to respond to the crisis. Use your flexibility to help cover the gaps missed by other more narrowly focused actors to prevent any one issue (Ebola outbreaks, rising mistrust, deteriorating security) from spiraling out of control.

**Each round you may choose ONE of the possible actions below:**

### **Move Assets**

- Move up to two Health Workers or Security in any combination from any areas to any others.

### **Resettle Refugees**

- Remove 1 Refugee marker from the map.

### **Counter Misinformation**

- Move the Mistrust tracker back 1 towards zero.

### **Bring in Health Workers**

- Add 1 Health Worker to the map in any DRC area.

### **Securitize [Requires Calls for Security to be 1 or higher]**

- Reduce the Calls for Security tracker by 1 and add 1 to the Securitization tracker.
- Add 1 to Mistrust tracker.
- Add a security marker to a Health Worker that protects it from attack.

### **Propose Public Health Emergency of International Concern (PHEIC)**

- If MSF, WHO, and DRC government all agree a PHEIC is declared.
- However, if Ebola is in Goma OR another country, only one of the above and the WHO need to agree for a PHEIC to be declared.
- Or if Ebola is in Goma AND another country, only the WHO needs to agree to declare a PHEIC.

## 2.2 | Village Chief(s)

**Overview:** Local leaders are extremely important as the state's influence often doesn't effectively extend as far as the government would like into North Kivu. Most importantly in the context of health, local leaders have the ability to convince people to follow the medical advice of experts or not. For Ebola traditional burials are a vector for transmission and preventing or not preventing such burial is a difficult topic given the micropolitics local leaders face.

**Objective:** Keep in the good graces of as many people as possible, but allow traditional burial at least once to maintain your standing. If the government does not listen to you, tell your people not to believe the government's lies (conversely if they help you, tell your people the truth).

**Strategy:** Your role allows you to be a spoiler for both sides, and key to any response. Watch closely for others' signaling.

**Each round you may choose ONE of the possible actions below:**

### **Spread Misinformation**

- Increase the Mistrust tracker by 2.

### **Counter Misinformation**

- Move the Mistrust tracker back 1 towards zero.

### **Allow Traditional Burial**

- Ebola spreads once.



## 2.3 | Armed Non-State Group

**Overview:** A number of constantly evolving armed non-state groups exist in North Kivu, typically fighting the government for political and/or ethnic differences. The rough terrain makes them difficult to bring to battle and their attacks can be indiscriminate, targeting civilians, military, and health workers alike.

**Objective:** Cause chaos to weaken the government's hold over the region.

**Strategy:** It is generally best to weaken the governments' hold by carrying out a series of smaller attacks and spreading misinformation to allow you to carry out larger attacks later on.

**Each round you may choose ONE of the possible actions below:**

**Spread Misinformation**

- Increase the Mistrust tracker by 2

**Carry out Attack [Can only be used against unprotected workers]**

- Ebola immediately spreads once.
- Either remove 1 Health Worker from a region OR place 1 Refugee in Goma.
- Increase the Calls for Security tracker by 1.

**Attack on Ebola Facilities [Mistrust meter must be at -3 or more]**

- Ebola immediately spreads twice.
- Increase the Calls for Security tracker by 1.

**Death of Health Workers [Mistrust must be at -5 or more, this action can only be done once in a game]**

(This action is not prevented by Security)

- Ebola spreads once.
- Increase the Securitization tracker by 1.
- Remove all Foreign Health Workers in DRC areas (though not ones in Uganda or Rwanda).
- Increase the Calls for Security tracker by 1.

## 2.4 | WHO Regional Office

**Overview:** The WHO has been involved in combating several Ebola outbreaks in the DRC (and in North Kivu specifically) over time. The WHO is able to bring considerable assets to bear in combating outbreaks but is hampered by bureaucracy and politics both at country and international levels.

**Objective:** Curtail the spread of Ebola and avoid the declaration of a Public Health Emergency of International Concern (PHEIC) if possible.

**Strategy:** You have good flexibility to help deal with Ebola outbreaks, misinformation, and to call for a PHEIC and security if the situation deteriorates. You are well placed to help lead or support a health intervention should the need arise.

**Each round you may choose ONE of the possible actions below:**

### **Counter Misinformation**

- Move the Mistrust tracker back 1 towards zero.

### **Move Assets**

- Move up to two Health Workers from any areas to any others.

### **Ask for Protection**

- Increase the Calls for Security tracker by 1.

### **Bring in Foreign Health Workers [A PHEIC must be declared for this action to be taken]**

- Add 1 Foreign Health Worker to a region.

### **Propose PHEIC**

- If MSF, WHO, and DRC government all agree a PHEIC is declared.
- However, if Ebola is in Goma OR another country, only one of the above and the WHO need to agree for a PHEIC to be declared.
- Or if Ebola is in Goma AND another country, only the WHO needs to agree to declare a PHEIC.



## 2.5 | MONUSCO

### (United Nations Organization Stabilization Mission in the Democratic Republic of the Congo)

**Overview:** MONUSCO is the peacekeeping force deployed in the DRC, with most of that force deployed in the eastern provinces like North Kivu. MONUSCO is the only UN Peacekeeping mission with an authorized offensive element, the Force Intervention Brigade which is effective in offensives against rebel groups. Despite the presence of peacekeepers and an offensive mandate, the UN has had a difficult time stopping violence on a day to day basis due to the thick jungle.

**Objective:** Keep everyone safe.

**Strategy:** You are laser focused on combating the Armed Non-State Group's attempts to weaken government control. Protecting Health Centers is generally a priority as they are tempting targets.

**Each round you may choose ONE of the possible actions below:**

#### **Move Assets**

- Move up to two Security markers from any areas to any others.

**Securitize [Requires Calls for Security to be 1 or higher] If chosen all of the following occur**

- Reduce the Calls for Security tracker by 1 and add 1 to the Securitization tracker.
- Add 1 to Mistrust tracker.
- Add a Security marker to a Health Worker that protects it from attack.

**Protect Health Centers [Securitization must be 2 or more]**

- If an Attack on Ebola Facilities occurs, Ebola only spreads once, rather than the usual twice.

## 2.6 | MSF

### (Médecins Sans Frontières or Doctors Without Borders)

**Overview:** MSF is an international medical NGO which deploys medical assets to help combat disease in conflict zones. They have been active in the DRC since 1985 combating a number of diseases, including Ebola.

**Objective:** Curtail the spread of Ebola and limit securitization if possible.

**Strategy:** While initially there is little MSF can do at the start of the crisis, once a PHEIC has been declared you have free reign to bring in medical assets to focus on combating the outbreak.

**Each round you may choose ONE of the possible actions below:**

#### **Ask for Protection**

- Increase the Calls for Security tracker by 1.

#### **Bring in Foreign Health Workers [A Public Health Emergency of International Concern (PHEIC) must be declared for this action to be taken]**

- Add 1 Foreign Health Worker to a region.

#### **Propose PHEIC**

- If MSF, WHO, and DRC government all agree a PHEIC is declared.
- However, if Ebola is in Goma OR another country, only one of the above and the WHO need to agree for a PHEIC to be declared.
- Or if Ebola is in Goma AND another country, only the WHO needs to agree to declare a PHEIC.