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Alert note

DEMOCRATIC REPUBLIC OF THE CONGO, SUPPORT TO REDUCE THE PREVALENCE OF MPOX (MONKEYPOX) IN KASAI, 30 OCTOBER 2026

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Forum: ACT Forum DRC
Type of emergency: MPOX (monkeypox) epidemic in Kasai.
Date of emergency: The Kasai Provincial Red Cross identifies 5 September 2026 as the onset date of this rapid-onset emergency and reports 183 suspected cases and 36 deaths as of that date.

1. The nature of the emergency

In the Democratic Republic of the Congo, more than 37,000 cases of MPOX were recorded between 2024 and 2026. However, since the beginning of September 2026, the health situation has become increasingly alarming in Kasai Province in general, and particularly in the territories of Luebo, Tshikapa, Mweka, Ilebo and Dekese, which have a combined population of approximately 3,255,000.
The MPOX epidemic is taking a worrying turn in the above-mentioned localities.
Figures reported by some local media, including Ondes du Progrès (a partner of TOP CONGO), and the Kasai Provincial Red Cross Coordination indicated 183 suspected cases and 36 deaths as of 5 September 2026, which is extremely concerning. By 31 October of this year, in just 60 days, a dramatic increase had been observed: approximately 1,263 suspected cases and 38 deaths!
According to these sources, the 26 health areas of the Luebo Health Zone, in view of the rapid progression of the disease, are calling on provincial and national health authorities to act quickly to prevent the worst. In particular, they are requesting the deployment of response teams, the delivery of medicines and treatment kits, and increased awareness-raising and community mobilisation in affected communities.
The population is also being urged to strengthen the preventive measures established by the INSP (National Institute of Public Health) and the WHO, avoid physical contact with people showing suspected symptoms, and promptly seek care at health facilities if signs of MPOX appear.

Officially, on Wednesday, 16 September 2026, the Governor of Kasai Province declared that the province was severely affected by the disease, following confirmation by the INRB in Kinshasa.
The Governor called on the population not to panic but to remain vigilant and strictly observe preventive measures, particularly protective practices, to slow the spread of the virus.

2. The impact and scale of the emergency *(please include your source of information with links if possible*

-The situation appears bleak. Most health facilities in the affected health zones have significant shortages of equipment, supplies and even medicines, which could lead to a delayed and prolonged response as the number of affected health areas continues to rise. Given the poverty and vulnerability of many families already affected, this emergency should be considered large-scale and could soon become the subject of an ACT Alliance Appeal.
-Most of the affected areas, including Mushenge, Luebo, Dekese, Mweka and Ilebo, are located in equatorial forest areas where wild animals considered to be carriers of the virus are generally abundant. Tshikapa is an exception, being predominantly covered by wooded and grassy savannahs, gallery forests and open woodland.
-According to available statistics recently published by local media (ACP, Ondes du Progrès, Kasai 24, etc.), the Kasai Red Cross and the DPS (Provincial Health Division), 1,263 suspected cases and 31 deaths have been recorded across the province.
-The outbreak has already been officially declared by the health authorities, and people have been affected in different ways. All categories of people are affected, including adults, young people, children, men and women. In general, the vulnerable circumstances of most affected people leave them particularly fragile, while their food and nutritional situation continues to deteriorate.
It should be recognised that even after fully recovering from this disease, a person may need time to regain full strength. For this reason, we believe that nutritional support is essential alongside surveillance, treatment and health care. Put simply, food is urgently needed for vulnerable people who face socioeconomic hardship and have no means of subsistence.
-Furthermore, this epidemic is causing fear and trauma among people who no longer know where to turn. The future is very uncertain for everyone, while the region is in the midst of the main A/2026 agricultural season. Without appropriate measures, already chronic food insecurity could worsen.

3. Local and national capacity

In its alert issued at the very beginning of September, the Provincial Red Cross Coordination declared that it was unable to cope with this emergency, undoubtedly because of its very limited resources. It therefore called on the

Provincial Government, civil society organisations and humanitarian organisations to mobilise and urgently join forces to contain the epidemic and save lives.
COPROMOR is a full member of the provincial emergency crisis committee in Kasai, a body established by the Provincial Governor in 2017, and is also the only national ACT Alliance member organisation in the wider Kasai area. COPROMOR, the provincial coordination of the National Council of Health NGOs, and Christian Aid's office in Tshikapa have all responded to this public health disaster. Alerts have circulated, particularly as only 8 of the 26 health areas in the Luebo Health Zone (30%) are supported by certain local organisations.

At its 43rd meeting, held on 11 September 2026, the Kasai Council of Ministers examined the MPOX situation, and the Provincial Minister of Health was assigned responsibility for the matter.
Another government action: The Provincial Government, in collaboration with the Ministry of Health and the COSP (Public Health Emergency Operations Centres), has rolled out an emergency action plan to halt the spread of the virus.
Teams from the Provincial Health Division (DPS) have been deployed to the Luebo Health Zone, the epicentre of the epidemic, to provide initial support for the response.

In addition, the Director-General of the INSP states in his report that the situation is being monitored nationally and that public health measures are already being implemented in Luebo, while the disease continues to spread in 18 other health areas of Luebo and some affected territories.

4. Key needs and gaps

-Effective treatment of patients requires health centres that are well equipped with essential medicines, adequately resourced laboratories and qualified staff to deliver appropriate, quality care.
Unfortunately, serious shortages in some health facilities in MPOX-affected areas mean that adequate supplies and even qualified health workers are lacking. This may require calling in teams from Tshikapa, the capital of Kasai Province. The poor condition of road infrastructure leads to major losses of time and financial resources when trying to reach affected or nearly abandoned sites.
-If the option of providing food to patients is adopted, food supplies could take much longer to reach their destinations. For this reason, this approach could only be implemented properly in health zones that are genuinely accessible.
Nevertheless, discussions are under way to identify feasible solutions to save lives urgently, even in difficult-to-reach areas.
Regarding the flow of information, there is unfortunately still considerable work to be done to meet generally required standards. Efforts are ongoing.
In such circumstances, stakeholders are called upon to meet regularly to exchange information. The sometimes conflicting case figures and statistics illustrate the need for this. Given the emergency, the amount of **150,000 USD**, the ceiling set by ACT Alliance for the RRF, could enable substantial action to halt the spread of the virus in certain health areas that have so far been neglected.

Please indicate whether you are considering:

	Indicate your intention with an **X** below
Rapid Response Fund *(intended for small and medium scale emergencies)*	**X**
Appeal *(intended for large scale emergencies)*	

If you indicate an intention to launch an appeal, the secretariat will activate an Emergency Steering Committee meeting within two working days on receipt of this alert.

5. Forum Capacity and members intention to respond

ACT Member	Geographical focus	Sectors of expertise and experience
COPROMOR (Ecumenical Centre for the Promotion of the Rural World)	Kasai Province/Tshikapa	Food Security, Protection, Humanitarian Emergencies, WASH and Nutrition.

6. Potential responses

Although these patients receive full medical care from the Provincial Government of Kasai, the lack of daily food causes serious hardship. This situation urgently needs to be addressed if the response is to succeed.
At our level, although the disease continues to spread at an alarming rate, and given the urgency, at this crucial stage we could focus on supporting approximately 250 people through food assistance or cash-based transfers (CBT).
COPROMOR, the ACT Forum member in Kasai, will need substantial financial resources to purchase food for in-kind distribution, facilitate the travel of MPOX awareness-raising teams, produce effective awareness-raising materials (musical spots in different local languages, leaflets, etc.), acquire banners and T-shirts, rent vehicles, purchase handwashing equipment and disinfectants, and cover service providers' allowances and field accommodation.
Finally, security conditions must also be taken into account. All aspects should be assessed to ensure the smooth implementation of planned activities and the achievement of the results of this RRF within 3 or 4 months.