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The Covid-19 Pandemic and its Impacts on Indigenous People Batwa of Mikeno Sector, around the Virunga National Park, Democratic Republic of Congo

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Abstract

This paper aims to determine the protective measures and the impact of COVID-19 on indigenous Batwa people of the Mikeno sector around the Virunga National Park. I draw on qualitative research focusing on observation, focus group discussions and household survey. This research targeted the indigenous people, the local leaders, the Civil Society Organisations and the Park authorities. The community of indigenous Batwa people expresses concerns over their lack of participation in the nomination, but also in the decision-making process, especially concerning the management of the SARS-COV2 virus. The results revealed that indigenous Batwa people are not spared from COVID-19 and have been physically, socially, spiritually, economically, and culturally impacted. They have been doubly consequenced compared to other communities. Batwa people live on begging and collecting leftovers in other communities' gardens. COVID-19 has not allowed moving freely to collect food and other items or to expose their culture and sell their products. The information about COVID is partially shared among the Batwa community, some are not completely knowledgeable to grab the message related to the Standards Operating Procedures (SOPs) to combat COVID-19. They have limited access to protective equipment. Thus, this study recommends the involvement of indigenous Batwa people in the decision-making and health management process.

Keywords: Impact of COVID-19, pandemic, Indigenous people Batwa.

Introduction

In the history of the human kind, especially since the colonial times, several diseases such as measles, smallpox, and influenza were imported into indigenous communities by colonizers that decimated thousands of indigenous people (UN DESA, 2020) [15]. The most striking case is of the Yanomami tribe of Brazil and South Venezuela (Pringle, 2015 quoted by UNDESA, 2020) [15].

Today, the interaction with remote communities by tourists could spread the novel COVID-19 posing a significant health risk in many countries. The coronavirus (COVID-19) is an infectious disease caused by severe acute respiratory syndrome coronavirus (SARS-CoV-2) that was first identified in December 2019 in Wuhan, China and has since spread globally, causing a pandemic (Josilene D. Alves, Abade *et al.*, 2021) [9].

The SARS-CoV-2 virus poses a particular threat to indigenous peoples living remotely or in voluntary isolation.

In the Amazon region alone, it is estimated that there could be up to 78 indigenous tribes living in isolation (UN DESA, 2020) [15]. Indigenous people are heterogeneous group with thousands of culturally distinct communities, and numbers approximating 370 million in over 90 countries (Goha A, 2020) [7]. These are mostly hunter-gatherers and nomadic pastoralist communities. In its conceptual Report of 2005, the African Commission concludes the indigenous peoples experience particular forms of systematic discrimination, subordination, and marginalization because of their particular cultures, the ways of life and mode of production. (Bakole, 2021) [3]. They are overrepresented amongst the poorest segments of the population and are mainly engaged in the informal economy (Indigenous Navigator, 2020) [8]. And as they have a lower educational attainment, indigenous people have generally experienced relatively higher unemployment rates and lower labor force participation throughout the pandemic (Gene Falk *et al.*, 2021) [6].

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The outbreak of the COVID-19 all over the world imposed nations to put in place strict measures including partial and total lockdowns, restrictions on domestic and international travel, border closures, bans on public gatherings including the prevention of the movement of people (ARISA, 2020)^[2]. This pandemic is changing the trajectory towards achieving the Sustainable Development Goals (Indigenous Navigator, 2020)^[8],

Adding to generalized stigma, discrimination as the lockdown keeps expanding, indigenous communities face inside and outside their settings, they live under a severe malnutrition, poor access to sanitation, lack of clean water, inappropriate healthcare services and livelihood in general (UN DESA, 2020)^[15] (ARISA, 2020)^[2]. The impacts of the pandemic are virulent, wide-ranging and continue to affect people and communities differently (Follent *et al.*, 2019)^[5]. It has severely impacted not only on indigenous people but also the most marginalized groups including people living with disabilities, elderly people, (ARISA, 2020)^[2].

In many countries, governments deployed police and the military to enforce the above measures and concomitantly, socioeconomic inequalities ramped up tremendously (ARISA, 2020)^[2]. Indigenous peoples who already face food insecurity, loss of their traditional lands and territories, now confront even graver challenges to access food (Pratima Gurung, 2021)^[13].

In the Virunga massive, tourism sector and conservation have been tempered yet they used to assist small and medium enterprises in the tourism and hospitality sector (Redrocks Initiatives, n.d.). The Rwandan Batwa community members are facing the prospect of living without an income since their traditional means of work (wandering and communal life) is no longer viable (UN DESA, 2020)^[15]. On the Ugandan side, despite the adherence of the Indigenous people Batwa to COVID-19 measures, including physical distancing, staying home, and avoiding trading centers, the timely government food aid has not adequately reached to them (Harper, 2019, quoted by (Zavaleta-Cortijo, 2020)^[18]. The extended lockdown in Uganda, particularly for border districts where many Indigenous populations live, has hampered their mobility to access forested areas for foraging, access to nearby communities to offer labour for food exchange, and access to agricultural fields for food production (Harper, 2019, quoted by (Zavaleta-Cortijo, 2020)^[18].

The pandemic has been disruptive, and community events and gatherings have been cancelled. However, this does seriously impact the community approach to health care, cultural practices (ARISA, 2020)^[2] and connections from place to place (Follent *et al.*, 2019)^[5].

Though they seem less worried about the impacts of COVID-19, indigenous people are most worried about the health of vulnerable people, finance and livelihoods (NWAC, 2020).

In response to COVID-19, Aboriginal organisations in Australia are coming together, more than ever, to create a movement that will continue to inform positive change to address Aboriginal health issues (Follent *et al.*, 2019)^[5].

Despite the protective measures, the impacts of the pandemic will be far from over (Undp, 2021)^[16].

The ILO report published in 2019 shows that indigenous peoples continue to experience inequalities despite progress made in terms of legal recognition of their rights (Indigenous Navigator, 2020)^[8]. These inequalities intensify the way indigenous peoples' lives and livelihoods are being affected by the COVID-19 pandemic (Indigenous Navigator, 2020)^[8].

In DR Congo, Indigenous people expressed frustration at their poor health conditions and limited access to health services (Anaya, 2011)^[11]. Their vulnerability to disease is unquestionable and evident (Leeuw *et al.*, 2020) The restrictions around movement due to COVID-19 have impacted the domestic economy, with the largely informal economy taking the biggest hit as in many other countries in Africa, such as Ethiopia, Angola, Mali. The informal sector has been highly affected (Undp, 2021)^[16]. Consequently, the COVID-19 pandemic has then disproportionately affected indigenous peoples and in response to the health crisis, they majorly lean on their traditional knowledge and practices.

At the time that the indigenous people bear the brunt of the pandemic worldwide (Goha A, 2020)^[7], in the Mikeno sector of the Virunga National Park, 81.6% of Batwa do not have access to healthcare and their living conditions are worsening daily (Bakole, 2021)^[3]. As their health rights were already at risk prior to the outbreak of the pandemic (Bakole, 2021)^[3], their communal way of life has highly exposed them to the danger of COVID-19.

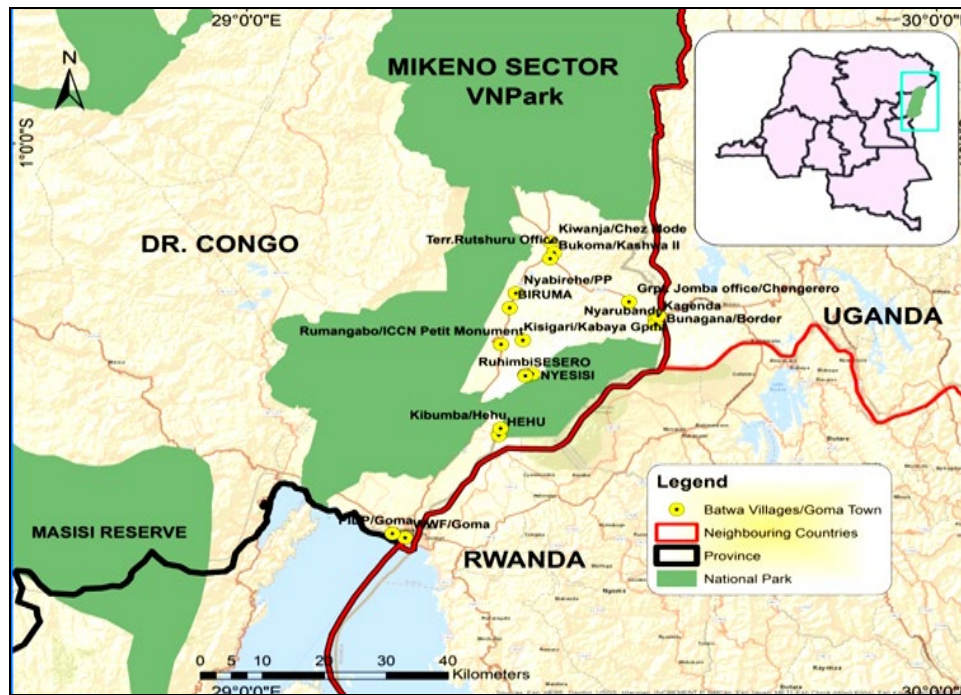
In accordance to the above, this paper aims to determine the protective measures and the impact of COVID-19 on indigenous Batwa people of the Mikeno sector around the Virunga National Park.

2. Study Site and Methods

a) Study Area

This research was conducted in the Mikeno sector which is part of the Southern sector of the Virunga National park (Mikeno and Nyamulagira Mountains), 29° 21' E-29°36' E and 1° 20' S-1° 31' S, and forms a set of the non-active Congo DR volcanoes. The Mikeno sector is contiguous to the Volcano National Park in Rwanda and the Mgahinga Gorilla National Park in Uganda. This sector corresponds to the Virunga Massif that shares borders with Rwanda and Uganda, three of which are listed as World Heritage sites with more vertebrates than any other single set of contiguous protected areas in Africa.

This sector is within the North Kivu Province in the East part of the Democratic Republic of Congo/DR Congo. It is the Greater Virunga Landscape (GVL) in Rutshuru and Nyiragongo territories; in the Bwisha and Bukumu chiefdoms. The 5 *Groupements* (counties) where the research was conducted are *Kibumba, Rugari, Kisigari, Bukoma, and Jomba* all in the Mikeno sector. These *Groupements* were the targets of this study because of the number of Batwa living in, their proximity to the Virunga National Park but also their appurtenance to the GVL.



Source: Primary data, 2020

Fig 1: Map of the Mikeno Sector of the Virunga National Park and Batwa villages

b) Methods

The study used the exploratory research designs. Four types of respondents were involved among which, the Indigenous Batwa households, and the key informants inter alia the Protected Area Authorities, the Civil Society Organizations (CSOs), and the local leaders. Data was collected from secondary and primary sources. The qualitative data analysis software assisted in clearing the findings (Atlas ti8). This software helped organize data by coding them for easy understanding and interpretation. It also helped determine the main themes, the sub-themes and the network between the themes. Purposively, 30 Batwa households were selected from the 11 villages including (Hehu, Nyesisi, Sesero, Kashwa II, Nyarubande, Maya, Biruma, Ruhimbi, Bunagana, Kagenda I, and Munanira) found within the 5 groupements/Countries (Kibumba, Bukoma, Kisigari, Rugari and Jomba). Seven local leaders were purposively selected because of the usefulness of the information they possess and their position in the community, and seven representatives of CSOs working with the Batwa. In the end, 3 Protected Area Authorities were purposively selected as key informants. The selection of these key informants was intended to be based on the gender differences; unfortunately, 16 keys informants out of 17 were found to be male. This shows the gaps that still exist between males and females in the decision making positions. The five groupments/counties were chosen because of their appurtenance to the Mikeno sector, their proximity to the Virunga National Park. The simple random sampling in which every member of the population aged 18 years and above had equal chance of being selected as participants in this research was utilized and including the focus group method. The study involved the ethnographic method, such as observation. Secondary data mainly drawn from existing research and other documents that include articles, websites and books, reports on Indigenous Peoples (IPs) were consulted. This research utilized 7 research field assistants who were selected based on the field experience and the appurtenance to research area, because of their advanced level of education for the reliability and accuracy of the data. The questionnaire was semi-structured and included open and

close-ended questions applied to the Batwa. Limitations such as expectations to rewards from the researcher, limitations due to security aspect since Mikeno sector is one of the tumultuous regions in East of DR Congo, based on financial resources but also to the age of some secondary data in spite of their useful information concerning this topic. Before collecting data, the participants were requested voluntarily to agree with terms by signing the consent form. Confidentiality of data collected was guaranteed. The research applied integrity by avoiding research misconducts (falsification, fabrication and plagiarism). Through the consent form, the participants in this study were informed of their rights, the purpose of the research, the potential risks related to benefits of participation, the confidentiality of personal identification. The participants also were given the opportunity to ask questions related to the topic.

3. Results and Discussion

3.1. Results

1. Impacts of Covid-19 on the Batwa of Mikeno sector

Table 1: Impact of Covid-19 on Batwa

Impact of Covid-19 on Batwa	Frequency	Percentage
We no longer have casual works	8	26.6
We no longer leave home	2	6.6
Too much famine	11	36.7
We no longer receive visitors	4	13.4
We are fearing each other	1	3.3
I don't know because I have never heard of that,	4	13.4
Total	30	100.0

Source: Primary Data, 2020

The Covid-19 has physically, socially, spiritually, economically impacted on the lives of the entire humanity. Indigenous people Batwa were not spared. They have been doubly consequenced compared to other ethnic groups. As

results indicated earlier, Batwa live on begging and collecting leftovers in others communities' gardens.

Due to extreme threats that came with the pandemic, all the communities were keen and could not leave behind a single grain of crops in their gardens. This has affected the Batwa as it was revealed by 11(36.7%) of the respondents out of 30 in total. 8(26.6%) of the respondents stated that they are no longer called for casual works, 4(13.4%) declared that they no longer receive visitors and 4(13.4%) more declared that they have never heard of Covid-19. 2(6.6%) argued that they no longer leave their home and 1(3.3%) openly revealed that they are now fearing one another.

More light on the life of Batwa during the Covid-19 period was shed by one of the key informant. It is important to mention that even the transboundary movement of Batwa is severely affected by the Covid-19. The communication and exchange with other countries is cut. Many Batwa of Mikeno sector showed that they have relatives in Uganda, most specifically around the Bwindi impenetrable National Park. In this regards, a key informant stated the following:

The Batwa in Mikeno sector live at the borders with other countries and especially close to the areas affected by SARS-COV2. They have been afraid to approach their family members and even visit others in Uganda. Solidarity has dwindled and famine has increased.

Regarding job opportunity, a key informant from the Virunga National park showed that Batwa have lost many job opportunities. All the park's planning changed and Batwa should wait until the pandemic is contained. Also they should wait until the reopening of tourism.

Corona has negatively affected our programmes. As I told you before, there was a recruitment and we should have hired three Batwa to work with us. We should have hired them in tourism. Unfortunately, we stopped tourism. So, for me, the Batwa are also suffering the same consequences as other communities.

A number of Batwa stated that they know nothing about Corona virus. They have never heard of it or see someone dying of it. To back up the opinions collected in different households, the below statement was provided by a male key informant in Bukoma, precisely in Kashwa II village:

We all know that Covid is a disease which I can say is imaginary...things are slowing down under Covid, but to tell you the truth I have never seen even a neighbor saying that they have lost someone due to Covid.

The above statement clearly shows that some Batwa do not believe in the presence of Covid in their area. They undermine it. This shows that the information and sensitization about the spread of the Covid remains low despite the efforts that are being put in place by some local leaders, Civil Society organisations and other people of good will.

I tell them to have facemasks. They said they didn't have any. I also told them to avoid crowds and gatherings. Every two weeks I teach them that since we are less numerous we will be decimated if we all catch Covid, a male key informant said in Biruma.

Hunger and poverty are rampant in the Indigenous people Batwa villages around the Virunga National Park. This situation has raised despair and anger to the Batwa since they couldn't even visit the neighboring villages to sell the products they possess especially during the lockdown period:

We are forced to stay in our villages. At this time, we rarely pay visit to our brothers in Bunagana and Rutshuru because we are now fixed at this place. On the agricultural side, even

if a Mutwa has something to sell, there is no way to get to the big markets to sell their products, money is no longer seen [...]

Box 1. Observation of a key informant Local leader on the effects of COVID-19 on Batwa of Mikeno sector

"The covid-19 has terribly impacted the whole community, for example in the Mikeno sector there were tourism activities and one who says tourism says movement of money. Look, there is no more tourism and some activities have been slowed down and delayed, the activities are completely blocked and as the Batwa are dependent on other people and that these people were in situations in which they cannot help them, as I said for example, they live on begging, they are going to look for something to eat in other people's gardens, so they are now going to go beggar where while everyone has their pockets empty? People who are left unemployed find it complicated and hard and they suffer much more since their sources of supply are closed. They resource from others now these others have nothing. This means even during the harvesting time, the owners of gardens are careful and try to take whatever is in their gardens, and they cannot leave anything behind any more since they are also in difficult conditions."

(A Key Informant Local Leader Interviewed in Kisigari, August 2020)

Note that three Batwa have not been able to join their work in the park after the have successfully passed the test. This was due to the Corona virus outbreak.

So, how do Batwa of Mikeno sector protect themselves against Covid-19? This question has been broadly explained in the table below.

2. Batwa's protective Measures against Covid-19 Pandemic in Mikeno Sector

Table 2: Protective measures against Covid-19

Protective Measures against Covid-19	Frequency	Percentage
We use ashes and/or soap to wash hands	7	23.3
We put on facemasks when we go somewhere	2	6.7
I do nothing	18	60
I don't know because I have never heard of that,	3	10
Total	30	100.0

Source: Primary Data, 2020

The results indicate that 18(60%) of the Batwa do nothing to protect themselves against Covid. 7(23.3%) use ashes and/or soap to wash their hands, 3(10%) of participants in this study have declared that they have never heard of Covid and they don't practice any safety measure and 2(6.7%) always put on facemasks when they go to some places. The above results imply that the information about COVID is partially shared among the Batwa community, some are not completely knowledgeable to grab the message related to the Standards Operating Procedures (SOPs) to fight against COVID-19 but also they have a limited access to protective equipment (facemasks, sanitizers, soaps, water, etc.)

3.2. Discussion of the Results

Indigenous peoples have also turned to traditional practices to help them during the pandemic. For instance, the Karen people of Thailand revived their ancient ritual of "Kroh Yee" (village closure) to fight the spread COVID-19. This has also

been applied in Malaysia, Bangladesh and many countries in Latin America, with communities closing off entry to their areas (UN DESA, 2020) [15]. The case of Batwa of Mikeno sector seems more challenging. The majority of them do not take initiatives to protect themselves against Covid. Only a few numbers use ashes and/or soap to wash their hands. Doubt and uncertainties whether COVID-19 exist or not dwell in their mind. Tourism is a vital contributor and mechanism for poverty alleviation, job creation, socioeconomic growth and environmental protection in Southern Africa, particularly for indigenous peoples whose livelihoods are dependent on tourism in most cases. In Botswana, for example, thousands of tourists visit the Okavango Delta, transiting through Maunthe main point of entry to the Delta and a key town for replenishing supplies for indigenous communities. (ARISA, 2020) [2]. The COVID-19 pandemic has the potential for far reaching impacts on these communities (ARISA, 2020) [2]. Many jobs opportunities have been cancelled in the Mikeno sector due the pandemic. These could help indigenous Batwa to find means for their survival. Moreover, tourism has also been closed. Due to the remoteness of their settlements, indigenous communities already experience poor access to healthcare, significantly higher rates of communicable and non-communicable diseases, lack of access to essential services, sanitation, and other key preventive essentials, such as clean water, soap and disinfectants. COVID-19 has worsened these challenges (ARISA, 2020) [2], not only in the Mikeno sector but everywhere indigenous are located worldwide. Indigenous peoples also face exposure during traditional gatherings, a vital part of their cultural practices (ARISA, 2020) [2]. Traditional exposures to tourists was one of the means for survival of Batwa of Mikeno sector. This habit has completely disappeared since the outbreak of the COVID-19 and the insecurity in the area. People are fearful of going into large shopping centres, in some rural and remote areas, local shops are pushing up their prices, and people are left with no choice but to buy cheaper (and often less healthy) options to feed their families (Follent *et al.*, 2019) [5]. Despite the support towards indigenous organisation received from the governments; indigenous people are still bearing the brunt of the pandemic. For instance, the Australian government announces 45 flexible grants to help Indigenous communities protect themselves against COVID-19 (Keene, 2020) [10]. In March 2020, \$6.9 million was allocated to the National Aboriginal Community Controlled Health Organisation (Keene, 2020) [10]. Canada have created the Indigenous Community Support Fund to help Indigenous communities prevent, prepare and respond to coronavirus disease 2019 (COVID-19) and to address their unique priorities and needs such as support for elders, food insecurity, educational and other support for children, mental health assistance and emergency response services (Canada Indigenous Service, 2020) [4]. Indigenous peoples are also revitalizing traditional knowledge relating to the manufacture of local disinfectants, soaps and other sanitary products using locally sourced raw material. In Ethiopia, indigenous peoples are using various roots and tree-barks in combating COVID-19. In Nepal, they build on their knowledge and practice of using herbs and wild spices available in the forest (UNHROHC, 2020) [17]. In Mikeno sector, the lack of proper healthcare pushes them to resort to different alternatives among which, self-treatment using herbs, consultation of the traditional healers and herbalists. Sometimes they ignore some discomfort and ailments until they feel better (Bakole, 2021) [3]. Nevertheless, these indigenous people have not been invited to participate in

the management of health programmes (Indigenous Navigator, 2020) [8]. In Sweden for instance, no Sámi indigenous representatives have been invited to participate in decision making processes on COVID-measures affecting the their community.

Conclusion

The COVID-19 pandemic has brought to light all the hidden sides of inequalities most specifically on the indigenous communities. There have been social and economic disparities on all the communities but indigenous people seem to be the most vulnerable and exposed to the negative effects of COVID-19.

Social inequities faced by the indigenous people in Congo are rooted in historical patterns of social, economic, cultural and political discrimination (Anaya, 2011) [11]. The COVID-19 pandemic has consequently increased the vulnerability of indigenous people, men, women and most specifically the elders. This vulnerability is proven by the fact that indigenous Batwa people of Mikeno sector spend their time begging and picking leftovers in other communities' gardens.

Adding to many other diseases the Batwa are already exposed to such as malaria, skin diseases, intestinal worms, COVID-19 has not seemed to appear as the most dangerous disease but impacted the most on the social, economic and cultural right and worsened them. During the period of multiple lockdowns, hunger and poverty was revealed rampant in the Indigenous people Batwa villages around the Virunga National Park. This situation has raised despair and anger to the Batwa since they couldn't even visit the neighboring villages to sell the products they possess.

It is clear that a timely support, capacity building in health sector--in revenue generating activities--, the improvement of social and economic conditions of indigenous people Batwa would ensure they live in acceptable and respectful conditions. The inclusive and participatory approaches, in planning and all newly taken decisions should be emphasized and considered.

The outbreak of the COVID has therefore revealed that, urgently the long standing inequalities, lack of participation in decision-making process should be addressed to allow the indigenous Batwa people of the Mikeno sector to live in an environment where human rights are fully respected.

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