

The role of recovered mpox patients in outbreak response

This mixed methods action research in Pakadjuma, Kinshasa's mpox epicentre, showed that recovered patients played a crucial role in supporting outbreak response: conveying public health messaging to marginalised people at risk of mpox, and leading community initiatives that supported livelihoods.

From disease recovery to collective action

During the mpox outbreak in Kinshasa, Democratic Republic of the Congo (DRC) in late 2024, this project, PAKAMPOX, demonstrated that recovered patients can become effective public health ambassadors when formally recognised, collectively organised, and supported by local health authorities. Findings show that community centred, recovered-patient-led approaches enhance outbreak response while enhancing patients' agency and resilience.



Mpox recovered patients in Pakadjuma (Kinshasa) gather and elect representatives under the guidance of community health workers, June 2025. Photo credit: Institut Pasteur

Background

The role of people directly affected with disease in strengthening outbreak response has been explored in previous Ebola and HIV epidemics. Yet, recovered patients were not integrated into the mpox response before this project. Pakadjuma is a densely populated informal settlement in Kinshasa, characterised by extreme poverty, high population mobility, and recurrent epidemics. Identified as the epicentre of the mpox outbreak in late 2024, the area faced significant challenges relating to stigma, mistrust, and access to care.

About the research

The project employed mixed methods and co-creation. Local community health workers identified recovered mpox patients. A survey (253 participants), and interviews (37 recovered patients) were conducted to examine mpox patients lived experiences, community perceptions, and life trajectories. Then, mpox recovered patients co-designed participatory interventions with local healthcare workers, intended to strengthen the mpox response and help patient recovery.

Key outcomes

Local recovered mpox patients contributed significantly to public health efforts by acting as trusted intermediaries between communities and health services. Their firsthand experience gave them credibility with local populations and the mpox response, helping to reduce mistrust and stigma, locating cases, referring them to adequate care structures, and supporting engagement with formal health care workers.

Some recovered patients had access to social networks often beyond the reach of health actors, including sex workers, men who have sex with men, and highly mobile populations.

Recovered patients formed The Ambassadors of the Limete Health Zone, a legally recognised association. Through co-designed initiatives, including income-generating activities such as chair rental and yogurt production, the association strengthened solidarity, autonomy and resilient livelihoods. The association sustained its role in community engagement and response support during a cholera outbreak in July 2025.

Implications for humanitarian practitioners and policymakers

The study underscores the value of local initiatives and participatory-action research in outbreak response, highlighting how community-based approaches can improve risk communication, enable faster identification of cases, and effectively fight stigma.

The formal institutionalisation of the Association was a key factor: providing recovered patients with collective identity, responsibilities, and purpose, providing organisational stability, and a platform to engage with health authorities. The involvement of recovered patients was particularly effective because they were already trusted members of the community.

The PAKAMPOX project illustrates how such individuals, when engaged meaningfully through participatory and co-created interventions and provided with a recognised, formalised role in a broader health system response, can deliver concrete outcomes: both for community resilience and to strengthen the reach and impact of response activities, with results that can be sustained for future outbreaks.

Recommendations for future research

Engaging the people affected by diseases has become an important feature of outbreak responses such as Ebola, HIV, and mpox, but more research is needed to understand which models of engagement most effectively improve patient and affected-community outcomes. Mpox recovered patients also raised key biomedical questions, particularly around their individual risk of mpox reinfection and long-term sequelae.

About the study team

The PAKAMPOX study was conducted by a multidisciplinary team led by Jules Villa, Tamara Giles-Vernick (Paris Pasteur Institute & Sonar-Global Association) and Dr. Devos Kabemba (Congolesse ministry of Health). The team combined expertise in medical anthropology, public health, and outbreak response, working through a co-development approach with local healthcare workers, community health workers, and recovered mpox patients throughout the research and implementation process.

Keywords

Mpox; community engagement; recovered patients; stigma; urban informal settlement; collective action

Articles and further reading

The project page on the Elrha website: [Marginalised voices, crucial expertise: mpox patient experiences in Kinshasa's poorest neighbourhood](#)



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This research was funded by Elrha's Research for Health in Humanitarian Crises Programme (R2HC), which aims to improve health outcomes for people affected by crises by strengthening the evidence base for public health interventions. The programme is funded by the UK Foreign, Commonwealth and Development Office (FCDO), Wellcome, and the UK National Institute for Health Research (NIHR). Elrha has developed this Research Snapshot in consultation and partnership with University of Victoria's Research Partnerships and Knowledge Mobilization unit, on behalf of Research Impact Canada – Réseau Impact Recherche Canada network.

<http://www.elrha.org/programme/research-for-health-in-humanitarian-crises/>