

# 1 Mitigating *Mazuku* Hazards: Implementation and Effectiveness of Local Dry-Gas 2 Degassing Measures in the Goma Area (Virunga Volcanic Province)

3 Blaise Mafuko-Nyandwi\*

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5 Ecole Supérieure de Volcanologie, de Gestion des Risques et des Catastrophes, Université de Goma  
6 (Campus du Lac, Rue Eugène Serufuli 43, Quartier Katindo, Goma, North Kivu province, Congo)  
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8 \*Corresponding authors: BMN, [blaise.mafuko.nyandwi@unigom.ac.cd](mailto:blaise.mafuko.nyandwi@unigom.ac.cd) or [tbmafuko@gmail.com](mailto:tbmafuko@gmail.com)

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## 10 1. Abstract

11 Mitigation of carbon dioxide diffuse degassing hazards remains underexplored in comparison to  
12 other volcanic hazards such as eruptions, despite their persistent and deadly impacts on  
13 communities living in active volcanic regions. This study uses a mixed-methods approach—  
14 combining quantitative surveys and qualitative interviews—to assess household perceptions of  
15 the implementation and effectiveness of risk mitigation measures against *mazuku*, a locally  
16 known hazard caused by emissions of carbon dioxide in the western part of Goma, Virunga  
17 Volcanic Province. Data were collected across three sampling zones, capturing demographic  
18 characteristics, eruption risk experiences, and perceptions regarding the implementation of  
19 *mazuku* risk mitigation measures.

20 Findings reveal three locally recognised categories of mitigation measures: (1) emission-limiting  
21 measures, such as blocking gas with waste materials; (2) adaptive measures, such as house  
22 ventilation or living on upper floors; and (3) awareness measures based on orally transmitted  
23 local knowledge such as avoiding *mazuku* zone early morning. Financial resources, gender and  
24 prior risk experience—often linked to length of residence—emerged as significant positive  
25 determinants of both motivation and perceived efficacy for the first two categories. Perceptions  
26 of awareness measures showed no significant variation across zones even between demographic  
27 profile groups. Spatial patterns in perceived implementation and perceived efficacy appear to  
28 reflect collective community mitigation implementation rather than based on individual risk  
29 mitigation assessment, with some measures perceived as effective despite limited physical  
30 evidence of reduced gas concentration.

31 The study supports the importance of co-creating mitigation strategies with local communities,  
32 adapting interventions to socio-economic realities and avoiding the importation of external  
33 mitigation measures that may lack contextual relevance. It also calls for complementary research  
34 measuring the actual effectiveness of these measures through physical monitoring of *mazuku*  
35 concentrations. These insights, grounded in a Global South context—characterised by rapid  
36 uncontrolled urbanisation, offer a valuable perspective for the development of inclusive and  
37 effective strategies of carbon dioxide diffuse degassing risk management ~~strategies~~.

## 38 2. Introduction

39 Volcanic hazards are the surface manifestations of Earth's internal activity. They can be short-  
40 lived, such as eruptions, or long-term, like carbon dioxide (CO<sub>2</sub>) diffuse degassing and  
41 hydrothermal activities (Loughlin et al., 2015). Despite the dangers posed by these hazards,  
42 numerous societies have settled near active volcanoes (Brown & Jenkins, 2017), including in  
43 areas with intense CO<sub>2</sub> diffuse degassing, such as the western part of the Goma region (Eastern  
44 DRC, Virunga Volcanic Province). Exposition to CO<sub>2</sub> diffuse degassing represents a significant  
45 threat to human health and safety (Edmonds et al., 2017; Hansell & Oppenheimer, 2004). The  
46 CO<sub>2</sub>, an odourless and colourless gas, acts as an inert asphyxiant and displace oxygen in the air  
47 down to dangerously low levels. Lethal concentrations—exceeding 10 vol.%— cause rapid loss  
48 of consciousness, asphyxiation, and death of human and nonhuman beings ~~humans and other~~  
49 ~~fauna~~ (Viveiros & Silva, 2024).

50 The short-term exposure limit for CO<sub>2</sub> is set at 3 vol%, while the permissible limit for an 8-hour  
51 exposure is 0.5 vol% (Hansell & Oppenheimer, 2004). When these thresholds are exceeded,  
52 specific symptoms may appear depending on the concentration level and duration of exposure.  
53 These include accelerated breathing and increased heart rate, followed by dyspnoea and  
54 headaches, and in more severe cases sweating, dizziness, ringing in the ears, vertigo, vomiting,  
55 and muscular weakness (Viveiros et al., 2016). Viveiros et al. (2024) note that although CO<sub>2</sub>  
56 diffuse degassing is often considered a neglected natural hazard, it has caused the deaths of more  
57 than 2,000 people over the past decades. Considering the potential impact of CO<sub>2</sub> on human  
58 health and its silent infiltration into buildings in diffuse degassing areas, studies on their  
59 mitigation measures are crucial to inform disaster risk mitigation programs.

60 Locally in Goma, *Mazuku* the term *mazuku* is derived from Swahili and translates as “evil wind”  
61 or “evil wind that spreads and kills during the night”. ~~is~~ *It is* used to refer both to the diffused  
62 CO<sub>2</sub>-rich gas and the areas where it is emitted. The hazardous gas accumulates in low-lying  
63 depressions where they become concentrated due to their heavier-than-air nature (Wauthier et al.,  
64 2018). CO<sub>2</sub> concentrations in Mazuku can largely exceed the minimum exposure limits for  
65 humans or fauna, reaching high concentration ranging from 45 to 80 vol%, with diurnal–  
66 nocturnal fluctuations of up to 80% (Balagizi et al., 2018a). The rapid growth of Goma as several  
67 cities in the Global South (Quesada-Román, 2022), driven by intense migration due mostly to  
68 recurring armed conflicts in the region and professional opportunities seeking (Pech et al., 2018;  
69 Pech & Lakes, 2017), has extended the city to the west part highly concentrated in *mazuku*,  
70 exposing a large population.

71 However, previous *mazuku* related studies in the region have focused primarily on hazard  
72 assessments, including its formation, vent locations, and the geographical distribution of its  
73 concentrations (M. M. Kasereka et al., 2017; Smets et al., 2010; Wauthier et al., 2018), or  
74 evaluating the changes in its magnitude following a volcanic eruption (Vaselli et al., 2003). To  
75 date, *mazuku* mitigation measures are poorly studied. In addition, it has been observed in the  
76 region that while awareness campaigns encourage people to avoid high-risk areas by installing  
77 warning panels that call people to avoid settling in *mazuku*, these signs are frequently removed.  
78 Residents continue to stay or others to come and settle in known hazardous zones and  
79 subsequently they develop their own local mitigation strategies.

80 In this perspective, this study aims at assessing the household implementation of local *mazuku*  
81 mitigation measures by Goma population, with a focus on their perceived efficacy, cost  
82 implications, level of implementation, and the individual motivation behind their adoption. To  
83 achieve this, the research employs a mixed-methods approach. Qualitative data were collected  
84 through 32 interviews and three focus group discussions, identifying, describing, and  
85 categorizing 12 principal local mitigation measures. Additionally, a large-scale survey of over  
86 500 households was conducted to evaluate quantitatively public perceptions regarding the  
87 implementation of these measures.

88 This study provides a new perspective on volcanic disaster risk management, highlighting that in  
89 a context of scarcity of risk information and mitigation strategies, exposed population developed  
90 their own mitigation measures. This makes individual mitigation an imperative if there are no  
91 other options for where to live. It means, for instance, when the necessity of settling in volcanic  
92 areas with high concentrations of mazuku outweighs the risks of living in regions around Goma  
93 affected by armed conflict, the local population seeks to work out practical strategies to mitigate  
94 the mazuku hazard and therefore resettle or remain in these high-risk zones. Consequently,  
95 hazard mitigation strategies that incorporate local practices prove more effective than those  
96 imported from outside (Lutete Landu et al., 2023).

97 After this introduction, this article provides a detailed overview of *Mazuku* in the volcanic  
98 context of Goma region. Then it presents the used methodology and the results followed by a  
99 discussion both on the challenges and successes in implementing local mazuku mitigation  
100 measures. The paper concludes with key insights and recommendations to strengthen volcanic  
101 risk mitigation measures among local communities, drawing on evidence from this case study of  
102 Goma.

### 103 3. Mazuku: formation and related risks

104 The Mazuku-affected area under study, which is now inhabited, was unoccupied three decades  
105 ago (Pech et al., 2018). At that time, the region was covered by an open woodland typical of the  
106 area. According to testimonies gathered from local elders, people used to cross it at dusk to reach  
107 the lake Kivu for fishing, or early in the morning when returning with their catch. It also served  
108 as a hunting ground for Gambian rats and as pastureland for livestock before it was settled.  
109 These activities mostly took place in the evening or early morning when the mazuku  
110 concentration is high. Therefore, many people, as well as livestock, lost their lives asphyxiated,  
111 which was then regarded as an evil wind—one that had neither a smell nor a visible form. Today,  
112 the area is inhabited by new residents and Internally Displaced Persons (IDP) with a more urban  
113 lifestyle than the earlier inhabitants and the term was kept (Pech et al., 2018; Vlassenroot &  
114 Büscher, 2009).

115 Mazuku denotes depressions into which dense CO<sub>2</sub>—heavier than air—emanates and  
116 accumulates (Fig.1). Such phenomena also occur in other volcanic areas around the globe,

117 including Mammoth Mountain (USA), Royat (France), and the Siena Graben (Italy); however,  
 118 they differ in terms of both gas origin mechanisms and patterns of human occupancy (Edmonds et  
 119 al., 2017; Hansell & Oppenheimer, 2004). Despite their long-standing recognition, the formation  
 120 mechanisms of these gases remain poorly understood and widely debated (Williams-Jones &  
 121 Rymer, 2015).



122 Figure 1: Picture of warning panel. The Mazuku emission zone is outlined with red dotted lines, and in the middle stands a warning panel located within an IDP camp. The inscriptions on the warning panel are in French, with a Swahili translation, reading: “High-risk zone. Beware of gas. Watch over and prevent children from playing near gas areas.” Nearby, we can also observe (a) public latrines with uncemented septic pits, and (b) small tent shelters occupied by the IDPs (Photo Blaise Mafuko).

123  
 124 In the Virunga Volcanic Province (VPP) they are common in the vicinity of Goma—particularly  
 125 between Lake Kivu and the west part of lava flow fields of Nyiragongo and Nyamuragira (Smets  
 126 et al., 2010). (Wauthier et al., (2018) explain that these occur where a deep magmatic CO<sub>2</sub> source  
 127 connects to the surface via a network of fractures, and where topographical depressions enable  
 128 the gas to settle. The expansion of Goma has led to the occupation of lakeshore areas in the west  
 129 of the city, along Lake Kivu (Büscher & Vlassenroot, 2010; Pech et al., 2018), where these  
 130 mazuku are highly concentrated. The official mitigation strategy involves mapping gas-emission

131 zones and installing warning panels. Nonetheless, these *mazuku* continue to cause fatalities over  
132 extended periods, and livestock asphyxiation remains a frequent occurrence.

## 133 **4. Methodology**

### 134 **4.1. Data collection**

135 ~~Our~~The methodological approach for this study was mixed methods, combining both qualitative  
136 and quantitative techniques. We began with 32 interviews conducted in areas previously  
137 identified by the Goma Volcanological Observatory as emission zones for mazuku gases. These  
138 interviews enabled us to identify 12 potential mitigation measures. Next, we organised three  
139 focus groups: one with community representatives, another with local street leaders, and a third  
140 with local manual septic-pit diggers. These discussions allowed us not only to describe and  
141 categorise the 12 measures into three distinct groups, but also to delineate the study area into  
142 three zones based on their historical patterns of occupation (Fig. 21). With the insights gained  
143 from our qualitative methods, we subsequently conducted a large-scale survey to capture public  
144 perceptions regarding the implementation of these 12 mitigation measures.

#### 145 **4.1.1. The interviews**

146 The interviews were conducted between 1 October and 10 October 2024. We interviewed 32  
147 individuals—17 women and 15 men—focusing exclusively on adult household heads.  
148 Participants were selected at random, with an aim of interviewing three people per main street:  
149 one at the beginning, one in the middle, and one at the end. The entire area identified by the  
150 Goma Volcanological Observatory as a high-risk mazuku zone was covered. Verbal consent was  
151 obtained from all participants prior to the interviews. The interviews were structured and  
152 addressed the following themes: (1) the respondent's experience of volcanic risk in Goma; (2)  
153 their knowledge of the existence and formation of mazuku; (3) indicators used to identify areas  
154 with high mazuku concentrations; (4) impacts recorded as a result of mazuku exposure; and (5)  
155 mitigation measures against mazuku-related risks.

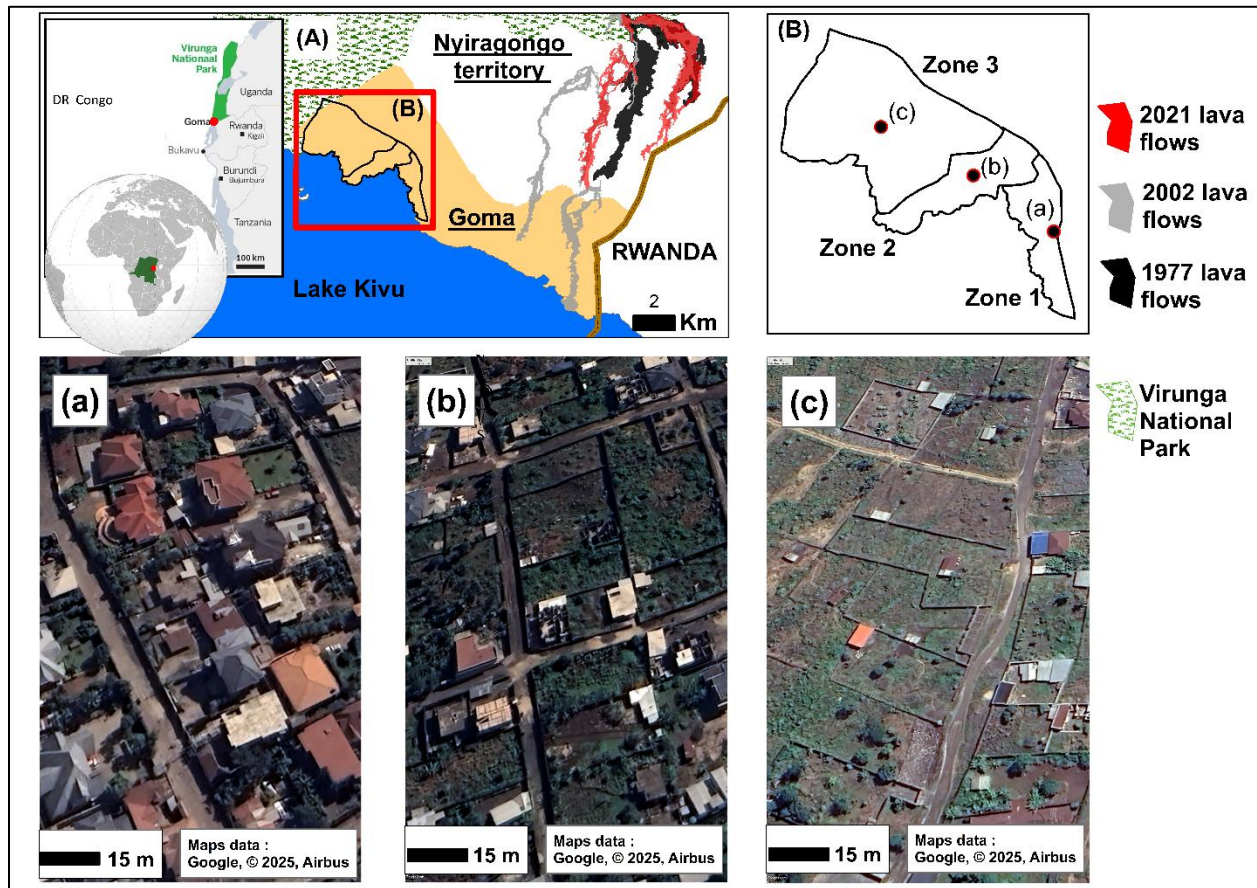
#### 156 **4.1.2. Focus groups**

157 In addition to the interviews, we organised three focus group discussions (FGD) towards the end  
158 of October 2024. The FGDs covered the same themes as the interviews but adopted a debate-

159 based approach among participants to identify the spatial and daily temporal variations in the  
160 occurrence of mazuku. The first FGD brought together 10 participants, including 5  
161 ~~IDPsinternally displaced persons (IDPs)~~ and local residents. The aim was to capture differences  
162 in perception between the various social groups living in the same area. The second FGD  
163 comprised 8 men who manually dig septic pits. They work in the area extracting stones for sale  
164 as well as digging toilet septic pits. They are familiar with the history of land occupation and are  
165 well aware of the areas with high gas concentrations, although without any scientific assessment  
166 of the levels. This discussion enabled the oral history of the area's occupation to be  
167 reconstructed.

168 Finally, we brought together 9 street leaders to discuss the same themes, with a stronger focus on  
169 local mechanisms for managing this risk. The FGDs concluded with a walk-through in the area  
170 for observations involving 4 street leaders, 3 diggers, and 3 community members who were  
171 available. This exercise allowed us to distinguish 3 types of land occupation according to the  
172 nature of the houses and the period of settlement (Fig. ~~021~~): a highly urbanised area occupied by  
173 high-income residents; a transitional area undergoing urbanisation with sporadic permanent  
174 constructions; and a rural area mainly inhabited by indigenous populations and IDPs.

175



176

Figure 24: **Maps of the Study Area:** Map (A) shows the location of the city of Goma, and the lava flows from the last three eruptions of Nyiragongo. Map (B) indicates the three sampling zones and the pattern of housing structures, derived from Google Earth.

177

#### 178 4.1.3. Questionnaire survey

179 The data gathered from qualitative evaluations enabled us to describe and classify 12 risk  
 180 mitigation measures\_ (Mafuko Nyandwi, 2025). Subsequently, we conducted a large-scale  
 181 survey—carried out by trained enumerators—to assess population perception regarding the  
 182 implementation of these measures.

183 The questionnaire focused on:

- 184 1. **Demographic profile:** including participants' age, gender, experience with risk, household  
 185 size, monthly household income, number of rooms in the house, duration of residence, and  
 186 residential status.



187 2. **Perceptions of measure implementation:** covering respondents' individual motivation to  
188 implement each mazuku mitigation measure over the next six months; the perceived  
189 efficacy of each measure in reducing risk across within their neighbourhood; the perceived  
190 cost of implementation; and finally, how they perceived the current level of  
191 implementation of each measure within their neighbourhood.

192 The sample size was determined based on the population of the Goma targeted neighbourhoods  
193 (Kyeshero and Lac Verts). With an estimated population of approximately 100,000—according  
194 to data collected from the respective neighbourhoods offices during our survey—our sample of  
195 573 individuals at a 95 % confidence level far exceeded the minimum required for statistical  
196 representativeness (Morgan, 1970).

197 We randomly distributed around 600 sampling points over a Landsat image from Google Earth,  
198 across the identified high-risk mazuku zone, maintaining an approximately equidistant spacing of  
199 40 m between points. Enumerators were instructed to survey the household closest to each  
200 sampling point, following a previous developed protocol (Mafuko Nyandwi, Kervyn,  
201 Habiyaemye, et al., 2023). We targeted only adult household heads as respondents.

#### 202 **4.2. Data analysis**

203 The qualitative data were analysed using content analysis to list all mazuku mitigation measures,  
204 followed by thematic analysis to identify recurring patterns and key themes related to their  
205 implementation and categorisation. We then employed descriptive statistics to characterise the  
206 measures by evaluating the proportion of the population at each level of perception. Cronbach's  
207 alpha was used to measure internal consistency across the three categories of mitigation  
208 measures, enabling us to aggregate motivation and perceived efficacy within each group.  
209 Aggregation was performed using the mean when the coefficient of variation (CV) was less than  
210 25 %, and the median when the CV was 25 % or higher — the CV, being the ratio of standard  
211 deviation to the mean, provides a standardised measure of variability.

212 Non-parametric tests were applied to assess how motivation for implementation varied across  
213 demographic variables. Statistically significant variations were represented on boxplots. Pairwise  
214 Spearman's rank-order correlations were calculated to evaluate the strength and direction of  
215 monotonic relationships between ranked variables—motivation, perceived efficacy, and

216 perceived cost—and the results were visualised using bar charts that display the correlation  
217 coefficient for each pair. Finally, chi-square tests were conducted to evaluate spatial variations in  
218 aggregated efficacy and the level of implementation of each measure across the three sampling  
219 zones.

## 220 **5. Results**

### 221 **5.1. Demographic profile of participants**

222 Our survey targeted only adult household heads (Table 1). The majority of these heads were  
223 under 45 years of age (77.31%), with the majority of respondents being women (61.78%).  
224 Households are large. Over 80% have between 4 and 10 members. Despite this large household  
225 size, the average monthly income per household remains very low, with 58.12% of households  
226 living on around USD 150 per month and 28.97% on an income of between USD 151 and USD  
227 300. This situation is even more pronounced in zone 3, where almost all households (91.5%) live  
228 on less than USD 150 per month. Zone 3 is more unusual in that it is home to more displaced  
229 people from the wars than the other zones. Zone 1, which is located further east, i.e. on the city  
230 centre side, has the lowest proportion of war-displaced people (8.9%). Generally speaking, the  
231 western part of Goma that we surveyed had a high rate of new arrivals. 62.13% had lived there  
232 for less than 5 years and 22.16% for between 6 and 11 years.

233

Table 1: Demographic characteristics of respondents<sup>234</sup>

<b>Age (years)</b>	<b>18-30</b>	<b>31-45</b>	<b>46-55</b>	<b>56-65</b>	<b>Over 65</b>
Zone 1	46 (24%)	93 (48.4%)	40 (20.8%)	8 (4.2%)	5 (2.6%)
Zone 2	39 (20.3%)	109 (56.8%)	33 (17.2%)	9 (4.7%)	2 (1%)
Zonz 3	82 (43.4%)	74 (39.2%)	18 (9.5%)	11 (5.8%)	4 (2.1%)
Total per age group	167 (29.14%)	276 (48.17%)	91 (15.88%)	28 (4.89%)	11 (1.92%)

<b>Income (USD)</b>	<b>0-151</b>	<b>151-300</b>	<b>301-450</b>	<b>451-600</b>	<b>Over 600</b>
Zone 1	60 (31.2%)	73 (38%)	38 (19.8%)	17 (8.9%)	4 (2.1%)
Zone 2	100 (52.1%)	79 (41.1%)	11 (5.7%)	2 (1%)	0 (0%)
Zonz 3	173 (91.5%)	14 (7.4%)	2 (1.1%)	0 (0%)	0 (0%)
Total per income range	333 (58.12%)	166 (28.97%)	51 (8.90%)	19 (3.32%)	4 (0.70%)

<b>Household size (persons)</b>	<b>1-3</b>	<b>4-6</b>	<b>7-10</b>	<b>11-13</b>	<b>Over 15</b>
Zone 1	17 (8.9%)	63 (32.8%)	97 (50.5%)	12 (6.2%)	3 (1.6%)
Zone 2	17 (8.9%)	106 (55.2%)	64 (33.3%)	5 (2.6%)	0 (0%)
Zonz 3	17 (9%)	74 (39.2%)	88 (46.6%)	10 (5.3%)	0 (0%)
Total per size range	51 (8.90%)	243 (42.41%)	249 (43.46%)	27 (4.71%)	3 (0.52%)

<b>Eruption experience</b>	<b>No</b>	<b>2021</b>	<b>2002</b>	<b>2002&amp;2021</b>	<b>1977 2002&amp;2021</b>
Zone 1	20 (10.4%)	81 (42.2%)	2 (1%)	85 (44.3%)	4 (2.1%)
Zone 2	45 (23.4%)	52 (27.1%)	7 (3.6%)	80 (41.7%)	8 (4.2%)
Zonz 3	85 (45%)	65 (34.4%)	0 (0%)	38 (20.1%)	1 (0.5%)
Total per experience group	150 (26.18%)	198 (34.55%)	9 (1.57%)	203 (35.43%)	13 (2.27%)

<b>Duration of residence</b>	<b>0 to 5 yrs</b>	<b>6 to 11 yrs</b>	<b>12 to 16 yrs</b>	<b>17 to 21 yrs</b>	<b>26 yrs and more</b>
Zone 1	108 (56.2%)	47 (24.5%)	20 (10.4%)	11 (5.7%)	6 (3.1%)
Zone 2	115 (59.9%)	51 (26.6%)	20 (10.4%)	2 (1%)	4 (2.1%)
Zonz 3	133 (70.4%)	29 (15.3%)	11 (5.8%)	4 (2.1%)	12 (6.3%)
Total per duration	356 (62.13%)	127 (22.16%)	51 (8.90%)	17 (2.97%)	22 (3.48%)

<b>Residence status</b>	<b>IDP</b>	<b>Inhabitant</b>
Zone 1	17 (8.9%)	175 (91.1%)
Zone 2	64 (33.3%)	128 (66.7%)
Zonz 3	84 (44.4%)	105 (55.6%)
Total per status	165 (28.80%)	408 (71.20)

<b>Gender</b>	<b>Female</b>	<b>Male</b>
Zone 1	132 (68.8%)	60 (31.2%)
Zone 2	81 (42.2%)	111 (57.8%)
Zonz 3	141 (74.6%)	48 (25.4%)
Total per gender group	354 (61.78%)	219 (38.22%)

235

## 236 5.2. Description of mitigation measures

237 Through the analysis of interview discourse, we identified 12 key local strategies for mazuku  
 238 risk mitigation. Additionally, follow-up focus group discussions, held in a participatory manner,

239 enabled the classification of these measures into three categories based on whether they aim to  
240 prevent mazuku, reduce its impact, or inform the population of its occurrences.

241 For preventing mazuku emission, on the one hand, local residents explained that they use  
242 household waste mixed with mud to cover areas emitting mazuku, hoping to reduce gas  
243 emission. On the other hand, households with sufficient financial means tend to cement all  
244 potential emission points within their plots with concrete, such as house floors, courtyards, and  
245 septic systems.

246 *“We use household waste mixed with mud to cover the mazuku areas, hoping to reduce the*  
247 *emissions, especially when the mazuku is located in a public area ... These zones are already*  
248 *known to us, so we organise regularly community works to prevent or reduce the mazuku*  
249 *emissions.”*

250 (Elderly man, street leader, 16 years living in a mazuku zone)

251 *“Some houses have uncemented floors, so mazuku emissions can occur in bedrooms or living*  
252 *rooms... When households have the financial means, they cement all potential emission sources*  
253 *like septic tanks or backyards. But for public spaces, we mostly use household waste.”*

254 (27-year-old woman, born, raised, and now married in the same mazuku area)

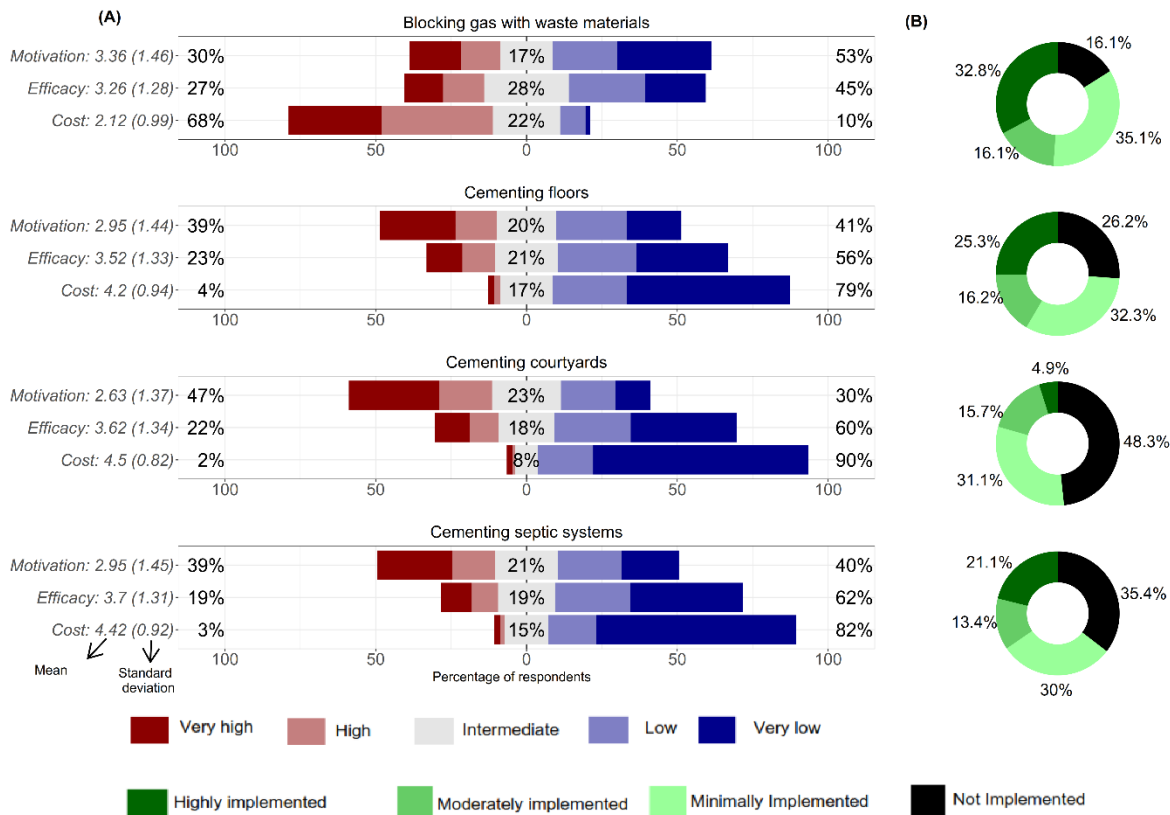
255 When it is not possible to prevent the emission of mazuku, local communities have developed  
256 adaptive strategies and or convey local knowledge—passed down orally from generation to  
257 generation and also between long-time residents to newcomers—to help avoid high-risk areas  
258 within neighbourhoods or in public areas.

259 To cope with high concentrations of mazuku within their homes, residents elevate beds, live on  
260 upper floors when available, or improve ventilation by enlarging windows and keeping them  
261 open during the day or sometimes at night. In cold conditions, certain households reported  
262 heating courtyards or indoor areas to facilitate the dispersion of mazuku. In addition, to keep the  
263 wider community informed about mazuku occurrences, residents raise awareness about avoiding  
264 known mazuku zones, particularly in the early morning or after rainfall. For those raising  
265 livestock or poultry, it is recommended that animals be kept in very well-ventilated areas.

266 Descriptive statistics further characterise these measures by examining individual perceived  
267 motivation, response efficacy, associated costs, and levels of implementation.

### 268 **5.2.1. Blocking gas emission measures**

269 Measures aimed at blocking *mazuku* emissions that require greater financial resources—such as  
270 cementing different parts of the household environment—were evaluated similarly by the  
271 population (Fig. 32). The majority perceive these measures as costly, although nearly all agree  
272 that they are effective or very effective. Their perceived high cost may explain the mixed views  
273 when it comes to households to evaluate their motivation for their implementation. Among this  
274 group of measures, the highest proportion (53%) of respondents reporting a high or very high  
275 motivation to implement relates to the use of household waste—a measure which, as expected, is  
276 perceived by the majority (68%) as having low or very low cost and perceived to be largely  
277 implemented in the zone



278

Figure 32: (A) Level of perceptions of different indicators for blocking gas mitigation measure. The percentages on the left indicate the proportion who perceived this likelihood as low or very low, while the middle percentages represent those with a moderate perception of likelihood. (B) The level of implementation

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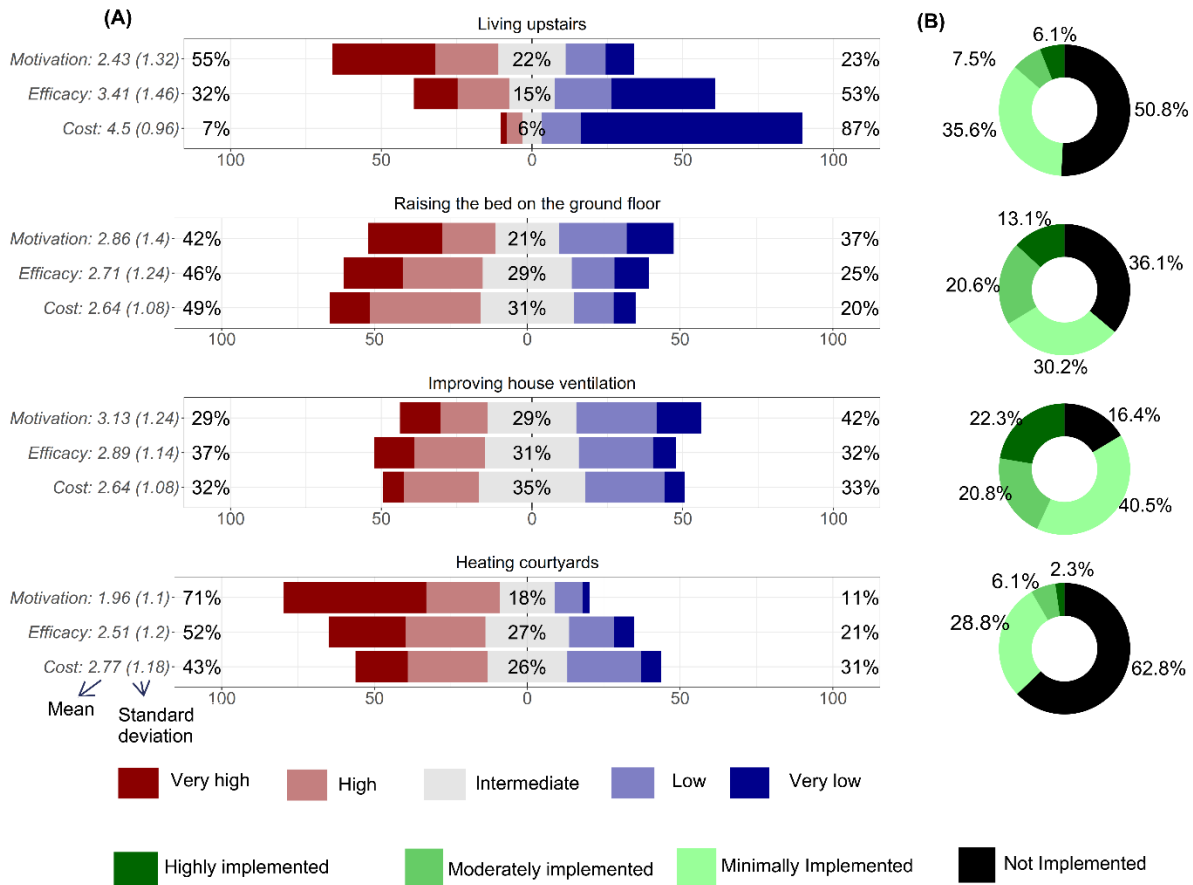
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### 5.2.2. Adaptive mitigation measures

281 Opinions are divided when it comes to evaluating the motivation, perceived efficacy, and even  
 282 the cost associated with measures such as raising the bed level or improving house ventilation  
 283 (Fig.43). Yet, among these adaptation strategies, these two are the most widely implemented in  
 284 the region. The least implemented are heating the courtyard or living upstairs. An elder from the  
 285 neighbourhood offers insight into why:

286 “We burn dry grass or sometimes cardboard boxes from nearby shops—especially when the cold  
 287 persists for over 24 hours—to help evaporate the mazuku. Living upstairs is certainly better, but  
 288 not everyone can afford it. My neighbour, who has an upper-floor dwelling, told me that all the

289 bedrooms are upstairs to avoid being caught unawares at night by a high mazuku concentration.  
 290 On particularly cold days, he said that his family decide outright not to stay on the ground floor  
 291 at all.”



292

Figure 43: (A) Level of perceptions of different indicators for adaptative mitigation measure (B) The level of perceived implementation within the neighbourhood

293

294 **5.2.3. Community based awareness measures**

295 Knowing which areas have high concentrations of mazuku—so as to avoid them in the early  
 296 morning, during rain, or simply when temperatures drop during the day—is among the most  
 297 widely implemented measures (Fig.54). Approximately 85 % of the population report that these  
 298 two measures are effective and they are motivated to implement them. As might be expected,

299 nearly everyone surveyed—around 90 %—perceive their implementation cost to be very low,  
300 which may explain why they are so frequently adopted.

301 *Mazuku incidents tend to be more concentrated in the evening or early morning, and when the*  
302 *temperature is low especially during the rainy seasons. You cannot see the mazuku or detect any*  
303 *odour, but sometimes, on a path, you suddenly feel suffocated as though someone were pressing*  
304 *on your chest, and you cannot breathe. At that moment you must act quickly and leave the area*  
305 *while you still have strength....*

306 *Just after the dry season — at the beginning of September when children return to school — the*  
307 *first critical period begins and lasts until December. It is followed by a second critical period*  
308 *during the second rainy season, from February to May every year. These periods are*  
309 *particularly hazardous because they coincide with the school term, when children have to leave*  
310 *home early for classes.*

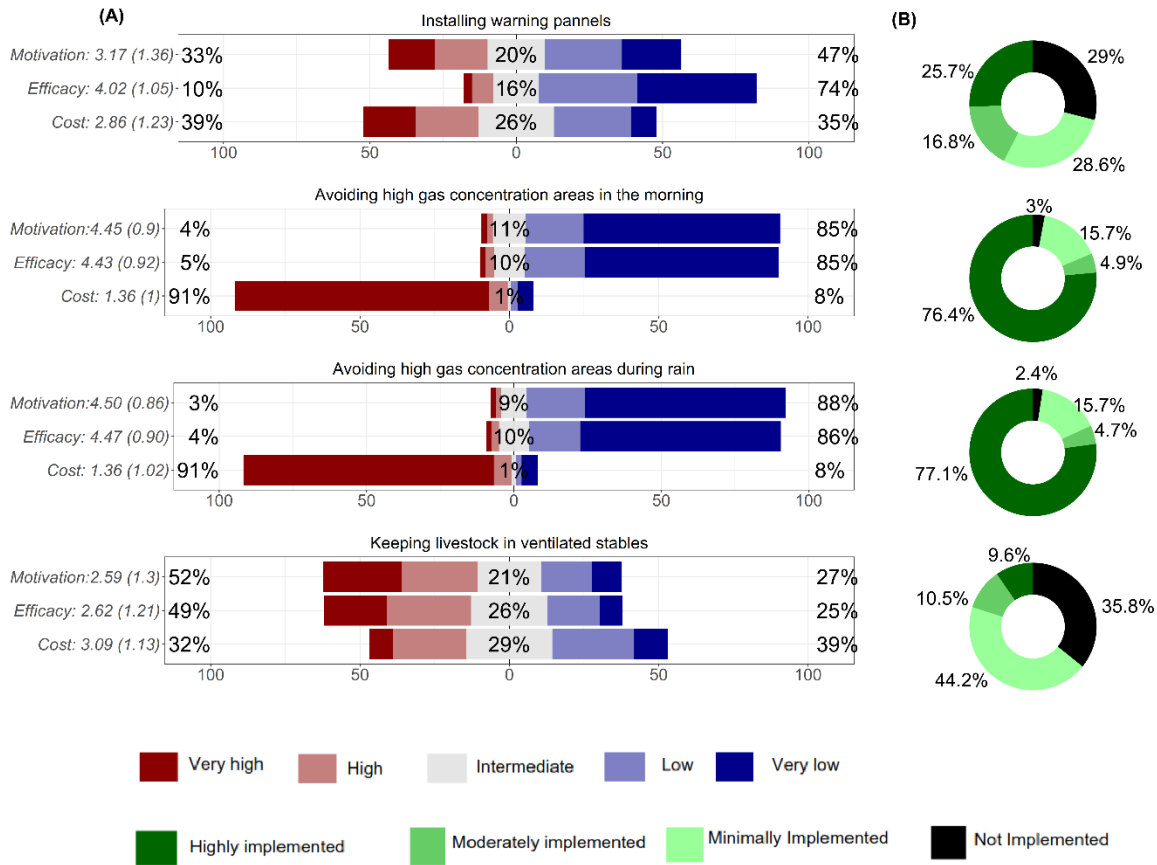
311 *In this context, we do our best to inform our children, newcomers or everyone in the*  
312 *neighbourhood, about the locations of these mazuku zones: we encourage them to identify them*  
313 *and to stay well away from them, especially when it is cold.*

314 *(A mother of 4 children at primary school, 13 years of residence in the area)*

315 A significant proportion of respondents (75 %) believe that installing panels is effective in  
316 reducing the risk of mazuku exposure; however, opinions remain divided when it comes to  
317 motivation to implement or the cost of installation. Similarly, views are mixed regarding the  
318 measure of keeping livestock or poultry in well-ventilated spaces.

319





320

Figure 54: (A) Level of perceptions of different indicators for Community based awareness measures, (B) The level of perceived implementation within the neighbourhood

321

## 322 5.2. Factors of the motivation for implementing mitigation measures

323 Only the aggregated indicators for motivation to implement preventive mazuku emission  
 324 measures and adaptive strategies showed statistically significant variation across demographic  
 325 groups (Appendix 1). No significant differences were found in overall motivation levels based on  
 326 local awareness measures. Financial conditions—specifically household monthly income and the  
 327 number of rooms in a dwelling—were positively associated with motivation to implement both  
 328 types of measures.

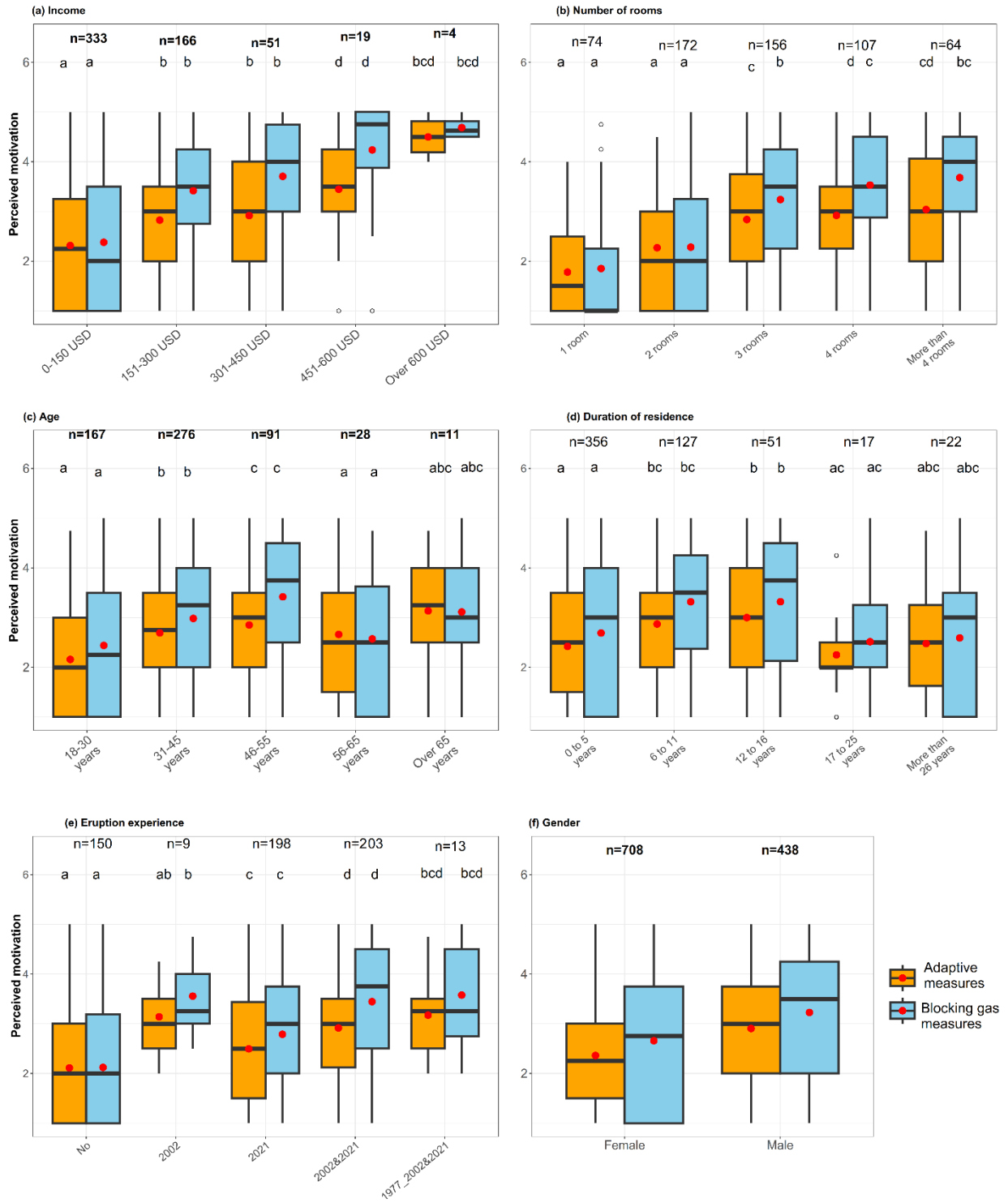


Figure 6-5: The level of perceptions of the aggregated indicator according to significant determining factors. Perceptions are expressed on a numerical scale from 1 (very low) to 5 (very high). In each boxplot, the horizontal bold line represents the median, the red dot indicates the mean, and the small circles represent outliers. The letter on top on boxplots represents the post-hoc test results between groups of the same aggregate indicator not between the same group between two indicators.

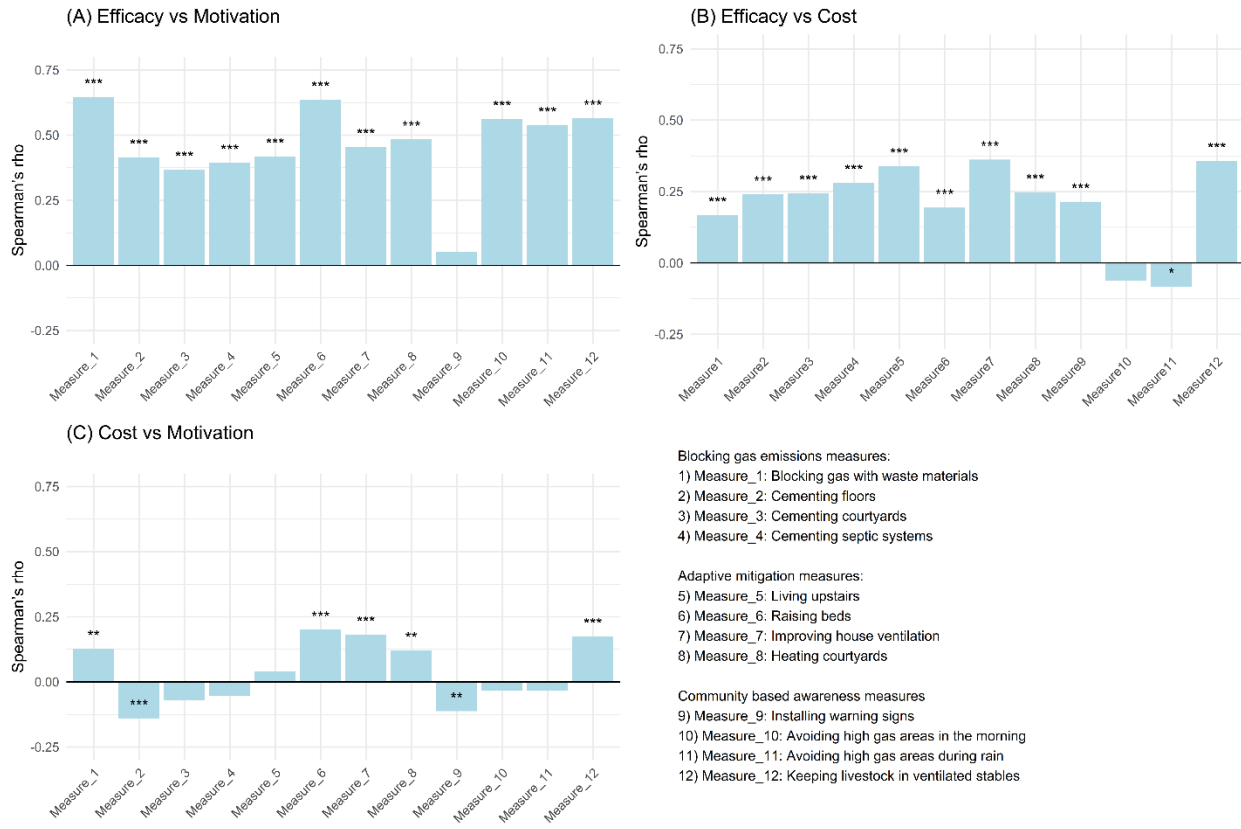
330

331 Motivation levels for both preventive and adaptive measure increased with age and length of  
332 residence, but only up to a certain point. Beyond approximately 46 years of age, or after more  
333 than 17 years living in the area, motivation declined and then plateaued. Men exhibited higher  
334 motivation to implement these measures than women. Furthermore, individuals who had not  
335 previously experienced volcanic risk showed lower implementation willingness; however, their  
336 willingness increased with the number of personal experiences of Nyiragongo eruption risk.

### 337 5.3. Correlations

338 Pairwise Spearman's rank-order correlations indicate that perceived efficacy is a stronger driver  
339 of motivation than cost perceptions, although cost can either reinforce or hinder motivation  
340 depending on the type of measure. Figure 6-A shows that most measures have a strong and  
341 statistically significant positive correlation between efficacy and motivation, particularly for  
342 measures such as blocking gas with waste materials or raising beds to adapt to gas emissions.  
343 This suggests that higher perceived effectiveness is consistently associated with a stronger  
344 willingness to implement these measures. However, there is no relationship between motivation  
345 and perceived efficacy for the measure of installing warning panels, which may be due to the fact  
346 that this intervention depends on disaster risk authorities rather than the community.

347 Figure 6-B also shows that there are mostly positive, though generally weak, relationships  
348 between perceived efficacy and cost. Notably, for the awareness measures of avoiding high gas  
349 areas in the early morning or after rainfall, there is no association between perceived efficacy and  
350 cost. Figure 6-C reveals a more mixed pattern between cost and motivation: while certain  
351 adaptive and awareness measures (Measures 5, 6, 7, and 12) display a significant positive  
352 association, some blocking measures (e.g., Measure 2) are negatively correlated, indicating that  
353 higher perceived costs may discourage willingness to implement those interventions.



354

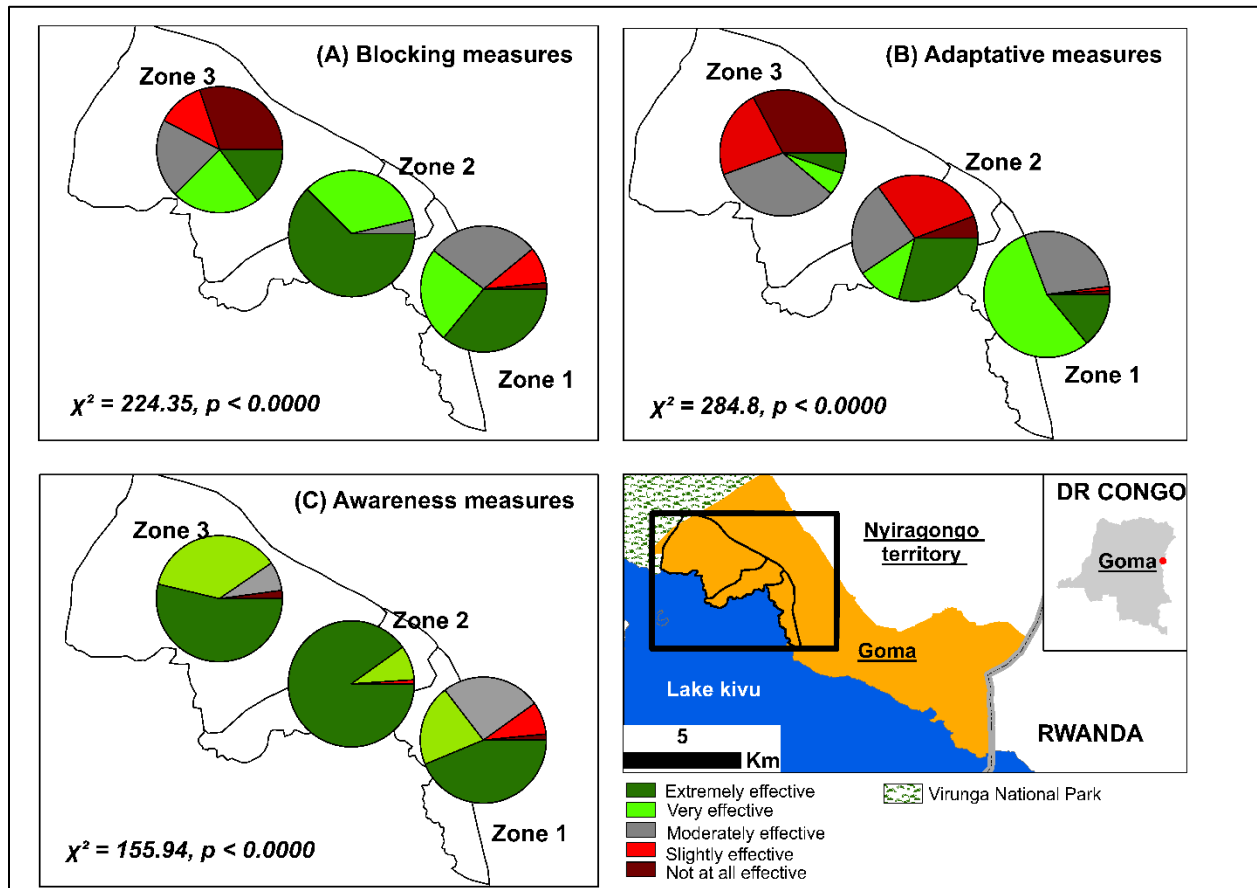
Figure 76: Pairwise Spearman's rank-order correlations. \*\*\* p value<0.001, \*\* pvalue<0.01 and \* p value<0.1.

355

#### 356 5.4. Spatial variation

357 The figure 87 presents the variation in the population's perceptions of efficacy across the  
 358 sampling zones. It shows that aggregated efficacy is perceived very differently across the three  
 359 sampling zones, with statistically significant differences. Zone 2 hosts a large proportion of the  
 360 population who consider both awareness measures and measures limiting mazuku emissions to  
 361 be effective or even very effective. In contrast, Zone 3 is home to the majority of people who  
 362 regard emission-limiting or adaptation measures as ineffective. When grouping together those  
 363 who perceive the measures as effective and those who consider them very effective, we find  
 364 almost the same proportion of the population in Zone 3 regardless of the type of measure.

365



366

Figure 87: Spatial variation of perceived efficacy across different sampling zones

368

369 We also assessed the variation in the perceived level of implementation for each measure within  
 370 each sampling zone (Annex B). It is evident that measures requiring substantial resources,  
 371 regardless of their category, are perceived as not implemented by a large proportion of the  
 372 population in Zone 3 (over 65% to 85%). This is the case, for example, for heating or cementing  
 373 courtyards, living on upper floors or raising bed heights. In contrast, for the measure involving  
 374 the use of waste materials to limit mazuku emissions, only 24% of the population in Zone 3  
 375 perceive it as not implemented. Awareness measures, such as identifying mazuku-prone areas for  
 376 avoiding them during cold periods (in the morning or after rainfall), are the most widely  
 377 perceived as implemented across all three zones, although the proportions of the population in  
 378 their perception category vary by zone.

379

## 380 6. Discussions

### 381 6.1. Passive Risk Acceptance: Motivation and Efficacy Constrained by Limited Living 382 Options and resources scarcity

383 By 2019, one billion people were already living within 100 km of active volcanoes, with the  
384 density of human activities continuing to increase (Brown et al., 2015; Freire et al., 2019). In  
385 CO<sub>2</sub> diffused degassing zones not restricted as parks or reserves(Williams-Jones & Rymer,  
386 2015), people may choose to reside in areas with CO<sub>2</sub> high-concentrations (Edmonds et al.,  
387 2017; Hansell & Oppenheimer, 2004a, 2004b), as in the present case study. This may reflect a  
388 risk acceptance. However, our findings indicate a more specific form of *passive* risk  
389 acceptance(Wachinger et al., 2013b, 2018). Indeed, people are well aware of the risk posed by  
390 mazuku and claim to know where they are located, yet many still choose to live close to, or even  
391 on them. This could suggest that they have no other options left. Indeed, in Goma—a city  
392 already extremely densely populated (Pech et al., 2018; Pech & Lakes, 2017) —people often  
393 settle in these risky areas because, despite the volcanic hazards, Goma is perceived as safer than  
394 the conflict-affected surrounding regions (Mafuko Nyandwi, Kervyn, Habiyaemye, et al., 2023;  
395 Mafuko Nyandwi, Kervyn, Muhashy Habiyaemye, et al., 2023).Therefore, people have  
396 developed local mitigation measures to compensate for the insufficiency of the official advice to  
397 simply ~~leave-avoiding~~ the area, as indicated on warning panels.

398 Wachinger et al., (2013a) describe this as the risk-mitigation paradox—a situation in which  
399 people consciously choose to live exposed to hazards, and the choices of mitigation measures  
400 being controlled by resource availability. In such contexts, most participants report being  
401 motivated to identify high-concentration areas in order to avoid them during critical times, such  
402 as early mornings or after rainfall, when mazuku concentration is high. Being less resource-  
403 intensive, awareness-based measures were widely considered effective by the majority,  
404 particularly among low-income households, who also felt these measures had been largely  
405 implemented. ThereforeIn addition, mazuku are perceived as a daily threat that can be controlled  
406 — through preventive measures, awareness of high-risk zones and times of day, or by adapting  
407 the environment (for example improved ventilation) to reduce its magnitude. It suggests that  
408 living in a zone prone to mazuku gives rise to a widespread, yet often unrecognised, acceptance  
409 of risk. Inhabitants develop everyday routines and coping practices in response to repeated

410 exposure (Walshe et al., 2023), and over time these behaviours become internalised and  
 411 incorporated into the community’s habitus—defined by Bourdieu (1990) as the set of structured  
 412 dispositions through which individuals perceive the hazardous environment and act in it. In  
 413 effect, what begins as a mitigation strategy gradually solidifies into a socialised readiness to ‘live  
 414 with’ the hazard rather than to challenge or transform it. (Vergara-Pinto & Marín, 2023; Walshe  
 415 et al., 2023). This suggests that mazuku becomes embedded in the routines of everyday life,  
 416 gradually normalised, and that the mitigation practices sustaining a perceived sense of “safe  
 417 exposure” are reproduced through habit rather than being critically questioned or scrutinised.

418 However, Paton (2008) caution that if people overestimate the effectiveness of some mitigation  
 419 measures or their ability to respond to a hazard, they may be less inclined to recognise the need  
 420 for additional mitigation measures and less receptive to new awareness-raising initiatives. This is  
 421 evident here: residents are less motivated to comply with mazuku warning panels at all times of a  
 422 day because they believe they already know the “critical periods” (early mornings and after  
 423 rainfall). Yet, in this region, it has ~~already been~~ demonstrated that concentration levels can  
 424 change suddenly following abrupt magmatic activities or volcanic events or due to diurnal–  
 425 nocturnal fluctuations (Balagizi et al., 2018b; M. Kasereka, 2017; Smets et al., 2010). Therefore,  
 426 locally contextualised awareness initiatives that build upon people’s risk experiences,  
 427 knowledge, and available resources may prove more effective. ~~Therefore, locally contextualised~~  
 428 ~~awareness initiatives based on people risk experiences and knowledge are needed~~ (Mafuko-  
 429 Nyandwi et al., 2024).

## 430 6.2. The Influence of Risk Experience on Mazuku Mitigation

431 The literature indicates that risk experience influences the perceptions of people living in hazard-  
 432 prone areas, whether in terms of risk perception or views on the implementation of mitigation  
 433 measures (Mafuko Nyandwi, Kervyn, Habiyaremye, et al., 2023; Sattler et al., 2000; Townshend  
 434 et al., 2015). In this perspective, our results show that the number of times an individual has  
 435 experienced the risk of a volcanic eruption positively influences both the motivation to  
 436 implement, and the perceived effectiveness of local mazuku mitigation measures. Moreover,  
 437 there is evidence of spatial variation in perceptions of efficacy of mitigation measures, despite no  
 438 comprehensive knowledge of how mazuku concentrations vary across different zones. Instead,

439 variation in perception aligns more closely with historical patterns of land occupation and  
440 settlements.

441 This suggests that these patterns are more reflective of community-level perceptions and shared  
442 risk experiences than of an objective individual evaluation of risk mitigation (Becker et al.,  
443 2017). Before, the 2021 Nyiragongo eruption, we have observed already a spatial  
444 homogenisation in people's perception of volcanic risk across different neighbourhoods of Goma  
445 between old residents and newcomers (Mafuko Nyandwi, Kervyn, Habiyaemye, et al., 2023).  
446 This was partly because a long time had passed since the last eruption, and partly because  
447 Nyiragongo is an "open volcano" with a persistent reddish gas plume at its summit (Barrière et  
448 al., 2022), serving over the years as a continual reminder of the volcanic threat. Meanwhile, the  
449 mazuku hazard is silent, permanent, colourless and odourless (Smets et al., 2010). ~~In~~  
450 ~~contrast~~ Thus, spatial homogeneity in how people perceive the implementation of *mazuku*  
451 mitigation measures appears to depend heavily on demographic factors, especially monthly  
452 income, which segregate populations into different settlement zones. Interviews in the affected  
453 area have already revealed three distinct settlement zones: high-income zone, transitional zone  
454 with middle-income households, and low-income household zone with high proportion of IDPs.

455 The spatial homogenisation of risk perception is had been also documented in others context. In  
456 an editorial review, (Gaillard & Dibben, 2008) demonstrated that the spatial dimension of risk  
457 perception is closely linked to the memory of past events or previous experiences of fatalities in  
458 a given area. This collective memory can shape entire communities residing in hazardous areas,  
459 fostering a strong attachment to their environment—as observed among populations in the  
460 Southern Andes that have experienced seven eruptions in less than a century. (Vergara-Pinto &  
461 Marín, 2023; Walshe et al., 2023). This means that it is not individual experience that matters  
462 most, but rather the shared history of a community, in which the impacts of past fatalities remain  
463 visible (such as the skeletons of animals asphyxiated by mazuku) or are passed down orally from  
464 generation to generation, or from long-term residents to newcomers, or even from a neighbour to  
465 another one (Gaillard & Dibben, 2008). Moreover, within the same zone, households tend to  
466 implement only those measures that are affordable for them. This is the case with cementing  
467 house yards or septic pits, which are widely perceived implemented in Zone 1, where high-



468 income households live. Thus, the effective implementation of mitigation measures requires  
469 empowering local communities through a co-creation approach.

### 470 **6.3. The Need for Co-Creation with Local Communities and Empowering Them**

471 In a systematic review, Viveiros & Silva (2024) discuss both the environmental and health  
472 impacts of volcanic gases and highlight that mitigation strategies vary significantly between  
473 volcanic regions. In our study, we also identified mitigation measures that are specific to the  
474 Goma context, such as heating fires in courtyards to foster the dispersion of mazuku or using  
475 waste materials to block its emission. This highlights the importance of co-creating knowledge  
476 and mitigation measures with local communities (Pardo et al., 2015), rather than importing  
477 solutions that may not be suited to the local context (Bird et al., 2011). Therefore, understanding  
478 the incentives that drive these communities to mitigate mazuku-related risks is essential for  
479 effective risk management (Barclay et al., 2008, 2015).

480 In this perspective, our findings support Barclay et al. (2008), who noted that in many cases the  
481 risk is well known to the exposed population, yet they may fail to act due to competing life  
482 pressures such as resource constraints, rather than a lack of knowledge. We observed that both  
483 the perceived efficacy of risk mitigation measures and their perceived level of implementation  
484 vary across zones not because of differences in mazuku concentrations but because of resource  
485 limitations. People report being motivated to adopt a mitigation measure if they perceive it as  
486 effective and if it is affordable. In other words, even when a measure could be effective—such as  
487 cementing courtyards or septic pits—motivation to implement it declines sharply if resources are  
488 lacking and, paradoxically, our results indicate that the measure is then judged less effective.  
489 Therefore, mitigation measures that ~~address the needs~~align with capacity of specific social  
490 groups are likely to be more effective than collective, one-size-fits-all solutions, like the  
491 installation of warning panels that are now the only official mitigation measures implemented in  
492 Goma. Achieving this requires researchers, decision-makers, and all other stakeholders involved  
493 in risk management to learn from local communities practices and collaborate with them in  
494 designing mitigation strategies that are locally contextualised.

## 495 **7. Limitations**

496 This study did not assess the actual physical effectiveness of the 12 risk mitigation measures.  
497 Furthermore, data collection did not evaluate whether households had already been directly  
498 affected by Mazuku, given that the main impact—loss of human life—could raise ethical  
499 sensitivities. In addition, we did not assess whether households had individually implemented a  
500 given measure but rather enquired about the level of implementation within the neighbourhood  
501 as a whole. This approach was taken because, as highlighted during the interviews, the  
502 implementation of such measures was considered more as a collective matter at community  
503 level, since the sources of CO<sub>2</sub> emissions were dispersed across different locations.

## 504 8. Conclusion

505 This study employed a mixed-methods approach, combining qualitative and quantitative  
506 techniques, to assess perceptions of the implementation of risk mitigation measures related to  
507 emissions of magmatic dry gases—primarily carbon dioxide—locally known in the study area as  
508 mazuku. Research of this kind is essential, given that the number of people living in active  
509 volcanic zones has continued to rise over the centuries, and that cases of human fatalities and  
510 livestock asphyxiation are regularly recorded in such areas.

511 The study identified three categories of risk mitigation measures implemented in the western part  
512 of Goma, within the Virunga volcanic province: (1) measures aimed at limiting mazuku  
513 emissions; (2) adaptive measures to reduce exposure to mazuku; and (3) awareness-related  
514 measures based on local knowledge, transmitted orally from generation to generation or from  
515 long-term residents to newcomers. Financial resources, along with risk experience—often linked  
516 to length of residence—were found to positively influence both motivation and the perceived  
517 effectiveness of the first two categories of measures. Perceptions of awareness-related measures  
518 showed no significant variations. Moreover, the study highlights spatial variation in both the  
519 level of implementation and the perceived effectiveness of these measures, not necessarily based  
520 on individual evaluation but rather on community-level knowledge of the local environment.

521 This study offers novel insights into the implementation of risk mitigation practices addressing  
522 volcanic gas emissions in active volcanic zones—such as heating courtyards or blocking gas  
523 with household waste—examined through a Global South perspective characterised by rapid and  
524 largely uncontrolled urbanisation. This research contributes new insights into the implementation

525 ~~of risk mitigation measures against volcanic gas emissions in active volcanic zones, from a~~  
526 ~~Global South perspective.~~ It reinforces the call, made by other scholars, for the co-creation of  
527 mitigation strategies with local communities, rather than the imposition of externally derived  
528 solutions that may not be effective in the local context. Future research could complement these  
529 findings by assessing the actual effectiveness of such mitigation measures through physical  
530 measurements of mazuku concentrations ~~—not only in public spaces but also within buildings—~~  
531 ~~and by further examining local risk perception. Moreover, volcano monitoring programmes in~~  
532 ~~Goma and the surrounding areas should diversify their focus to include systematic monitoring of~~  
533 ~~mazuku and recognise it as a significant public risk requiring sustained attention., as well as by~~  
534 ~~further examining local risk perception.~~

535 **Appendices**536 **Appendix A**537 **Table A1: Results of test of variations of motivations according to demographic**  
538 **characteristics**

539

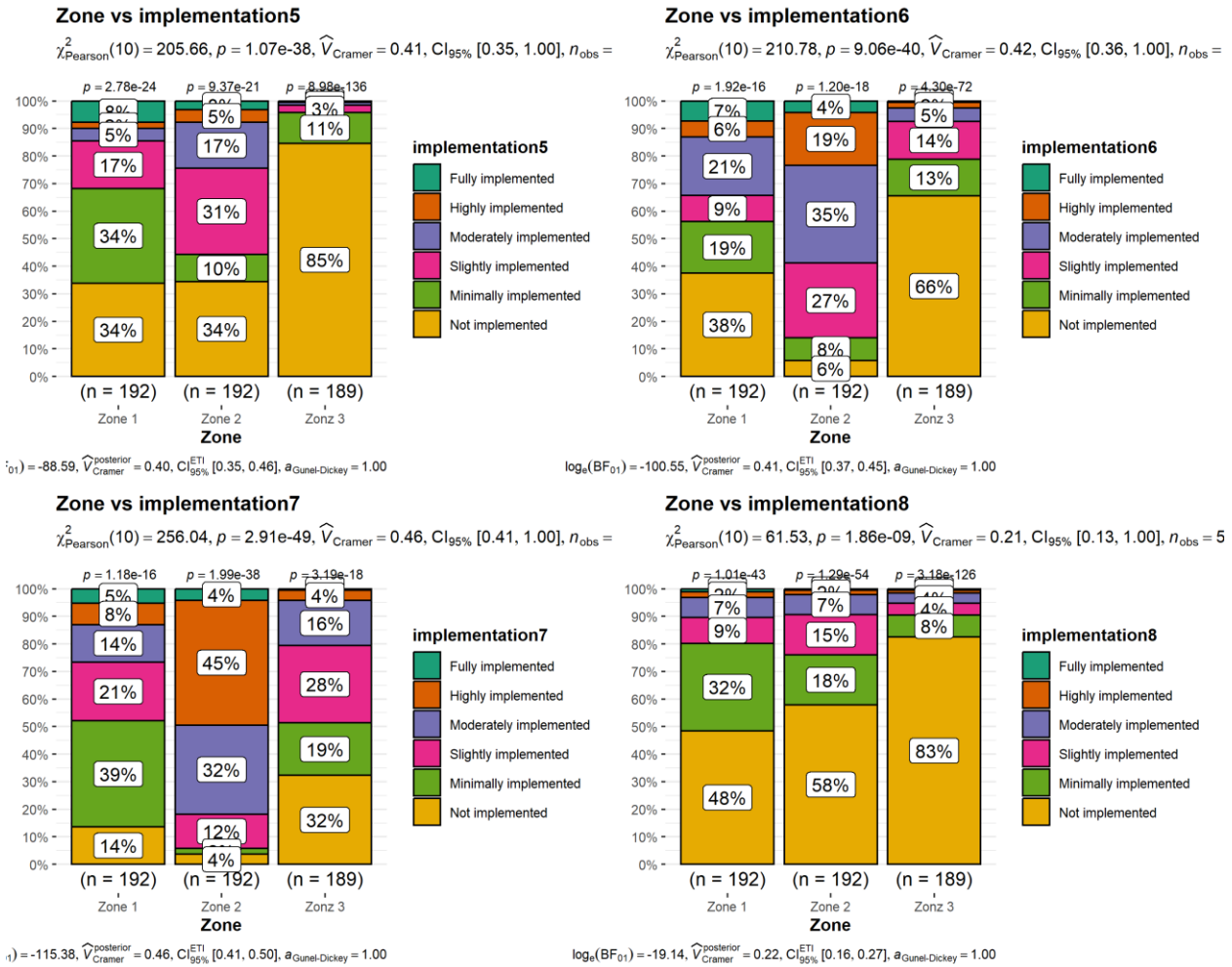
<b>1. Blocking gas measures</b>			
<b>Variable</b>	<b>Test</b>	<b>Statistic</b>	<b>P_Value</b>
Gender	Wilcoxon	29341	0.0000
Age	Kruskal-Wallis	36.26726631	0.0000
Income	Kruskal-Wallis	117.044502	0.0000
Household size	Kruskal-Wallis	1.642291024	0.8012
Room number	Kruskal-Wallis	130.0287962	0.0000
Eruption experience	Kruskal-Wallis	86.4399316	0.0000
Residence duration	Kruskal-Wallis	28.48813659	0.0000
<b>2. Adaptive mitigation measures</b>			
<b>Variable</b>	<b>Test</b>	<b>Statistic</b>	<b>P_Value</b>
Age	Wilcoxon	28238	0.00000
Income	Kruskal-Wallis	33.48868	0.00000
Household size	Kruskal-Wallis	49.02454	0.00000
Room number	Kruskal-Wallis	2.09096	0.71903
Eruption experience	Kruskal-Wallis	76.40373	0.00000
Residence duration	Kruskal-Wallis	51.00693	0.00000
<b>3. Community based awareness measures</b>			
<b>Variable</b>	<b>Test</b>	<b>Statistic</b>	<b>P_Value</b>
Age	Wilcoxon	35057.5	0.063461708
Income	Kruskal-Wallis	1.733625	0.78460089
Household size	Kruskal-Wallis	14.45435	0.059776304
Room number	Kruskal-Wallis	1.374521	0.848611036
Eruption experience	Kruskal-Wallis	8.608284	0.071672068
Residence duration	Kruskal-Wallis	3.911153	0.418163549

540

541 **Appendix B: The spatial variations of level of implementation per sampling zones**  
 542

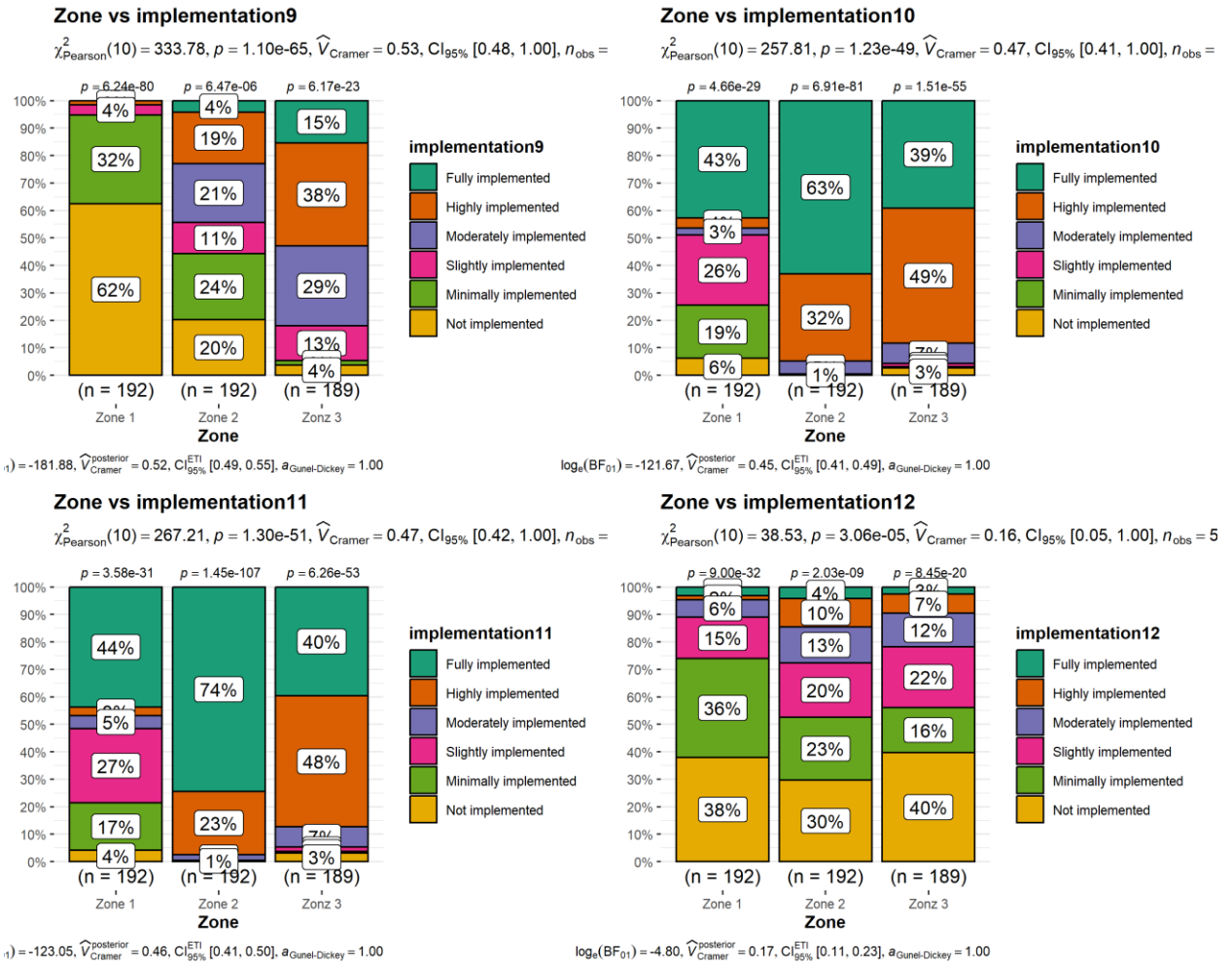


Figure B1: Variation of level of implementation of blocking gas measures



544

Figure B2: Variation of level of implementation of adaptive mitigation measures



545

Figure B3: Variation of level of implementation of community based mitigation measures

546

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552 field data for this study, as well as the dedicated support of the University of Goma team  
553 involved in the GDN project.

554 **Data availability**

555 The raw and processed data and research design as well as questionnaire design (in French) are  
556 available on request from the corresponding author.

557 **Ethical statement**

558 The survey questionnaire and protocol were approved by the academic office of the University of  
559 Goma and local authorities at the municipality and neighbourhood levels in Goma. Verbal  
560 informed consent was obtained from the survey participants for their anonymized information to  
561 be published in this article.

562 **Competing interests**

563 The author declares no conflict of interest

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