



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

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9 **Keyword:** Volcanic risk, risk mitigation, carbon dioxide, Nyiragongo

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, offer a valuable perspective
36 for the development of inclusive and effective carbon dioxide diffuse degassing risk management
37 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 (CO₂) 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 CO₂ diffuse degassing, such as the western part of the Goma region (Eastern
44 DRC, Virunga Volcanic Province). Exposition to CO₂ diffuse degassing represents a significant
45 threat to human health and safety (Edmonds et al., 2017; Hansell & Oppenheimer, 2004). The
46 CO₂, 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 **humans and other fauna** (Viveiros & Silva, 2024).

49 The short-term exposure limit for CO₂ is set at 3 vol%, while the permissible limit for an 8-hour
50 exposure is 0.5 vol% (Hansell & Oppenheimer, 2004). When these thresholds are exceeded,
51 specific symptoms may appear depending on the concentration level and duration of exposure.
52 These include accelerated breathing and increased heart rate, followed by dyspnoea and
53 headaches, and in more severe cases sweating, dizziness, ringing in the ears, vertigo, vomiting,
54 and muscular weakness (Viveiros et al., 2016). Viveiros et al. (2024) note that although CO₂
55 diffuse degassing is often considered a neglected natural hazard, it has caused the deaths of more
56 than 2,000 people over the past decades. Considering the potential impact of CO₂ on human
57 health and its silent infiltration into buildings in diffuse degassing areas, studies on their
58 mitigation measures are crucial to inform disaster risk mitigation programs.



59 Locally in Goma, *Mazuku* is used to refer both to the diffused CO₂-rich gas and the areas where it
60 is emitted. The hazardous gas accumulates in low-lying depressions where they become
61 concentrated due to their heavier-than-air nature (Wauthier et al., 2018). CO₂ concentrations in
62 Mazuku can largely exceed the minimum exposure limits for humans or fauna, reaching high
63 concentration ranging from 45 to 80 vol%, with diurnal–nocturnal fluctuations of up to 80%
64 (Balagizi et al., 2018a). The rapid growth of Goma, driven by intense migration due mostly to
65 recurring armed conflicts in the region and professional opportunities seeking (Pech et al., 2018;
66 Pech & Lakes, 2017), has extended the city to the west part highly concentrated in *mazuku*,
67 exposing a large population.

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

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

85 This study provides a new perspective on volcanic disaster risk management, highlighting that in
86 a context of scarcity of risk information and mitigation strategies, exposed population developed
87 their own mitigation measures. This makes individual mitigation an imperative if there are no



88 other options for where to live. It means, for instance, when the necessity of settling in volcanic
89 areas with high concentrations of mazuku outweighs the risks of living in regions around Goma
90 affected by armed conflict, the local population seeks to work out practical strategies to mitigate
91 the mazuku hazard and therefore resettle or remain in these high-risk zones. Consequently,
92 hazard mitigation strategies that incorporate local practices prove more effective than those
93 imported from outside (Lutete Landu et al., 2023).

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

100 **3. Mazuku: formation and related risks**

101 Locally, the term *mazuku* is derived from Swahili and translates as “evil wind” or “evil wind that
102 spreads and kills during the night” (Smets et al., 2010). It denotes depressions into which dense
103 CO₂—heavier than air—emanates and accumulates. Such phenomena also occur in other
104 volcanic areas around the globe, including Mammoth Mountain (USA), Royat (France), and the
105 Siena Graben (Italy); however, they differ in terms of both gas origin mechanisms and patterns
106 of human occupancy (Edmonds et al., 2017; Hansell & Oppenheimer, 2004). Despite their long-
107 standing recognition, the formation mechanisms of these gases remain poorly understood and
108 widely debated (Williams-Jones & Rymer, 2015). In the Virunga Volcanic Province (VPP) they
109 are common in the vicinity of Goma—particularly between Lake Kivu and the west part of lava
110 flow fields of Nyiragongo and Nyamuragira (Smets et al., 2010). Wauthier et al. (2018) explain
111 that these occur where a deep magmatic CO₂ source connects to the surface via a network of
112 fractures, and where topographical depressions enable the gas to settle. The expansion of Goma
113 has led to the occupation of lakeshore areas in the west of the city, along Lake Kivu (Büscher &
114 Vlassenroot, 2010; Pech et al., 2018), where theses mazuku are highly concentrated. The official
115 mitigation strategy involves mapping gas-emission zones and installing warning panels.



116 Nonetheless, these *mazuku* continue to cause fatalities over extended periods, and livestock
117 asphyxiation remains a frequent occurrence.

118 **4. Methodology**

119 **4.1. Data collection**

120 Our methodological approach for this study was mixed methods, combining both qualitative and
121 quantitative techniques. We began with 32 interviews conducted in areas previously identified by
122 the Goma Volcanological Observatory as emission zones for mazuku gases. These interviews
123 enabled us to identify 12 potential mitigation measures. Next, we organised three focus groups:
124 one with community representatives, another with local street leaders, and a third with local
125 manual septic-pit diggers. These discussions allowed us not only to describe and categorise the
126 12 measures into three distinct groups, but also to delineate the study area into three zones based
127 on their historical patterns of occupation (Fig. 1). With the insights gained from our qualitative
128 methods, we subsequently conducted a large-scale survey to capture public perceptions regarding
129 the implementation of these 12 mitigation measures.

130 **4.1.1. The interviews**

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

141 **4.1.2. Focus groups**

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



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

152 Finally, we brought together 9 street leaders to discuss the same themes, with a stronger focus on
153 local mechanisms for managing this risk. The FGDs concluded with a walk-through in the area
154 for observations involving 4 street leaders, 3 diggers, and 3 community members who were
155 available. This exercise allowed us to distinguish 3 types of land occupation according to the
156 nature of the houses and the period of settlement (Fig.01): a highly urbanised area occupied by
157 high-income residents; a transitional area undergoing urbanisation with sporadic permanent
158 constructions; and a rural area mainly inhabited by indigenous populations and IDPs.

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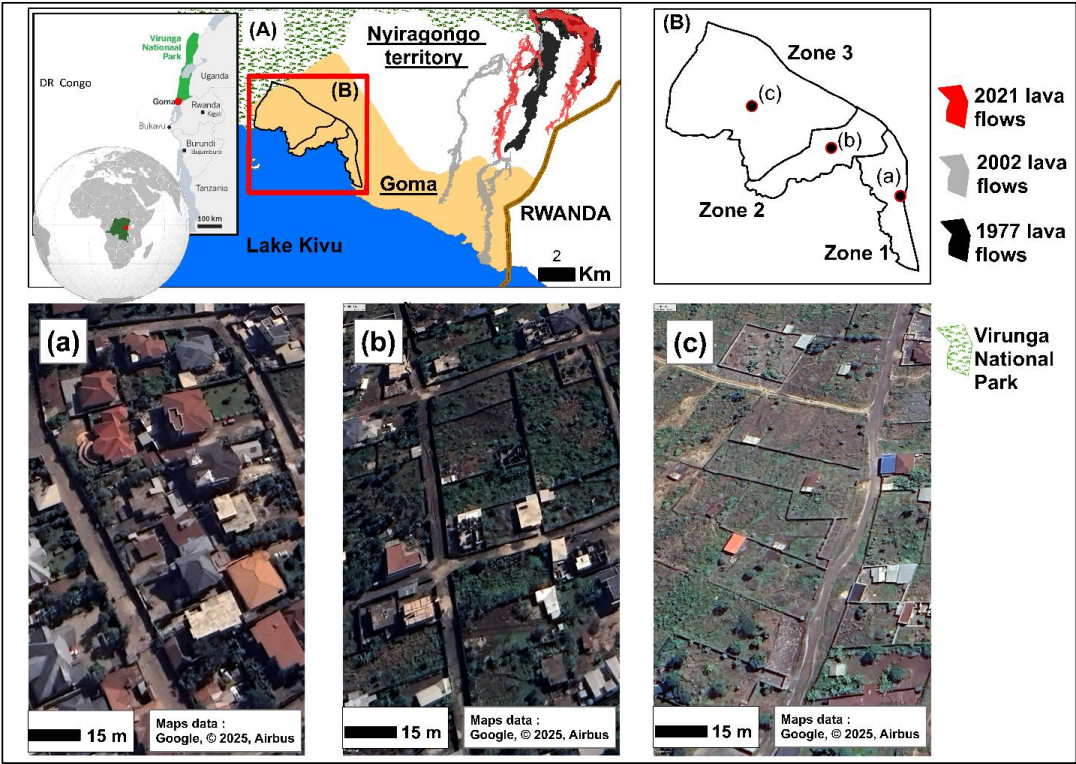


Figure 1: **Maps of the Study Area:** Map (A) shows the location of the city of Goma, and the lava flows from the last three eruptions of Nyiragongo. Map (B) indicates the three sampling zones and the pattern of housing structures, derived from © Google Earth.

4.1.3. Questionnaire survey

The data gathered from qualitative evaluations enabled us to describe and classify 12 risk mitigation measures. Subsequently, we conducted a large-scale survey—carried out by trained enumerators—to assess population perception regarding the implementation of these measures.

The questionnaire focused on:

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



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

175 The sample size was determined based on the population of the Goma targeted neighbourhoods
176 (Kyeshero and Lac Verts). With an estimated population of approximately 100,000—according
177 to data collected from the respective neighbourhoods offices during our survey—our sample of
178 573 individuals at a 95 % confidence level far exceeded the minimum required for statistical
179 representativeness (Morgan, 1970).

180 We randomly distributed around 600 sampling points over a Landsat image from Google Earth,
181 across the identified high-risk mazuku zone, maintaining an approximately equidistant spacing of
182 40 m between points. Enumerators were instructed to survey the household closest to each
183 sampling point, following a previous developed protocol (Mafuko Nyandwi et al., 2023). We
184 targeted only adult household heads as respondents.

185 **4.2. Data analysis**

186 The qualitative data were analysed using content analysis to list all mazuku mitigation measures,
187 followed by thematic analysis to identify recurring patterns and key themes related to their
188 implementation and categorisation. We then employed descriptive statistics to characterise the
189 measures by evaluating the proportion of the population at each level of perception. Cronbach's
190 alpha was used to measure internal consistency across the three categories of mitigation
191 measures, enabling us to aggregate motivation and perceived efficacy within each group.
192 Aggregation was performed using the mean when the coefficient of variation (CV) was less than
193 25 %, and the median when the CV was 25 % or higher — the CV, being the ratio of standard
194 deviation to the mean, provides a standardised measure of variability.

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



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

203 **5. Results**

204 **5.1. Demographic profile of participants**

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

216

Table 1: Demographic characteristics of respondents



Age (years)	18-30	31-45	46-55	56-65	Over 65
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%)

Income (USD)	0-151	151-300	301-450	451-600	Over 600
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%)

Household size (persons)	1-3	4-6	7-10	11-13	Over 15
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%)

Eruption experience	No	2021	2002	2002&2021	1977 2002&2021
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%)

Duration of residence	0 to 5 yrs	6 to 11 yrs	12 to 16 yrs	17 to 21 yrs	26 yrs and more
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%)

Residence status	IDP	Inhabitant
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%)

Gender	Female	Male
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%)

218

219 5.2. Description of mitigation measures

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



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

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

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

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

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

237 (27-year-old woman, born, raised, and now married in the same mazuku area)

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

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



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

251 **5.2.1. Blocking gas emission measures**

252 Measures aimed at blocking *mazuku* emissions that require greater financial resources—such as
253 cementing different parts of the household environment—were evaluated similarly by the
254 population (Fig.2). The majority perceive these measures as costly, although nearly all agree that
255 they are effective or very effective. Their perceived high cost may explain the mixed views when
256 it comes to households to evaluate their motivation for their implementation. Among this group
257 of measures, the highest proportion (53%) of respondents reporting a high or very high
258 motivation to implement relates to the use of household waste—a measure which, as expected, is
259 perceived by the majority (68%) as having low or very low cost and perceived to be largely
260 implemented in the zone

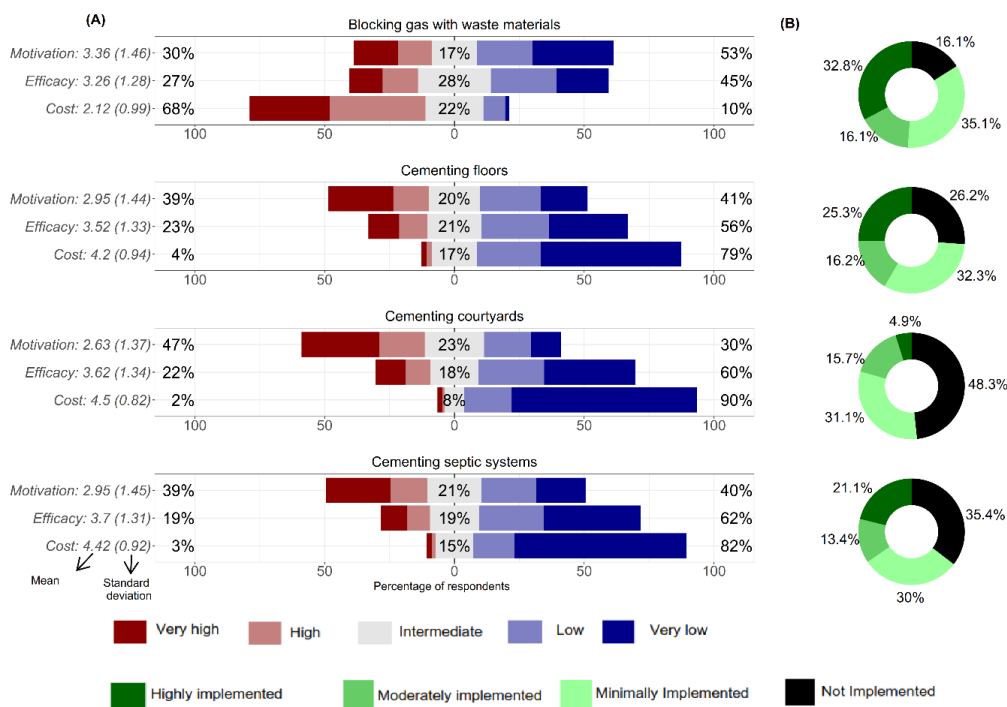


Figure 2: (A) Level of perceptions of different indicators for blocking gas mitigation measure. The percentages on the left indicate the proportion who perceived this likelihood as low or very low, while the middle percentages represent those with a moderate perception of likelihood. (B) The level of implementation

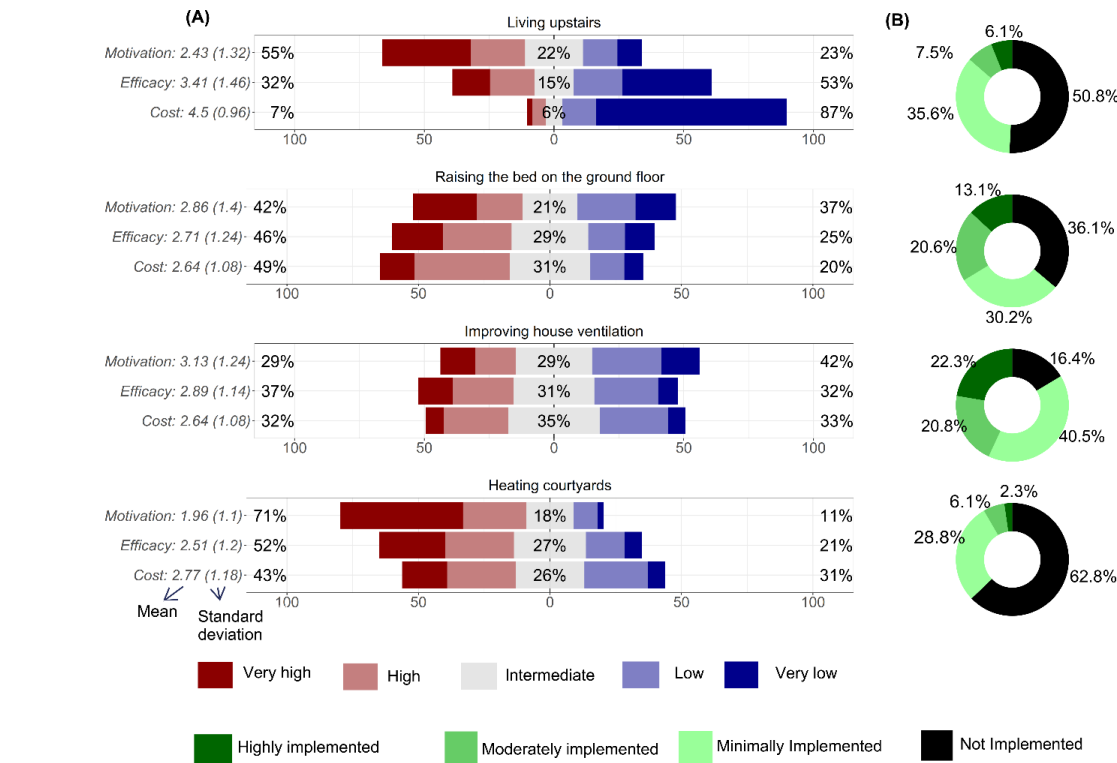
5.2.2. Adaptive mitigation measures

Opinions are divided when it comes to evaluating the motivation, perceived efficacy, and even the cost associated with measures such as raising the bed level or improving house ventilation (Fig.3). Yet, among these adaptation strategies, these two are the most widely implemented in the region. The least implemented are heating the courtyard or living upstairs. An elder from the neighbourhood offers insight into why:

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



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



275

Figure 3: (A) Level of perceptions of different indicators for adaptive mitigation measure (B) The level of perceived implementation within the neighbourhood

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277 5.2.3. Community based awareness measures

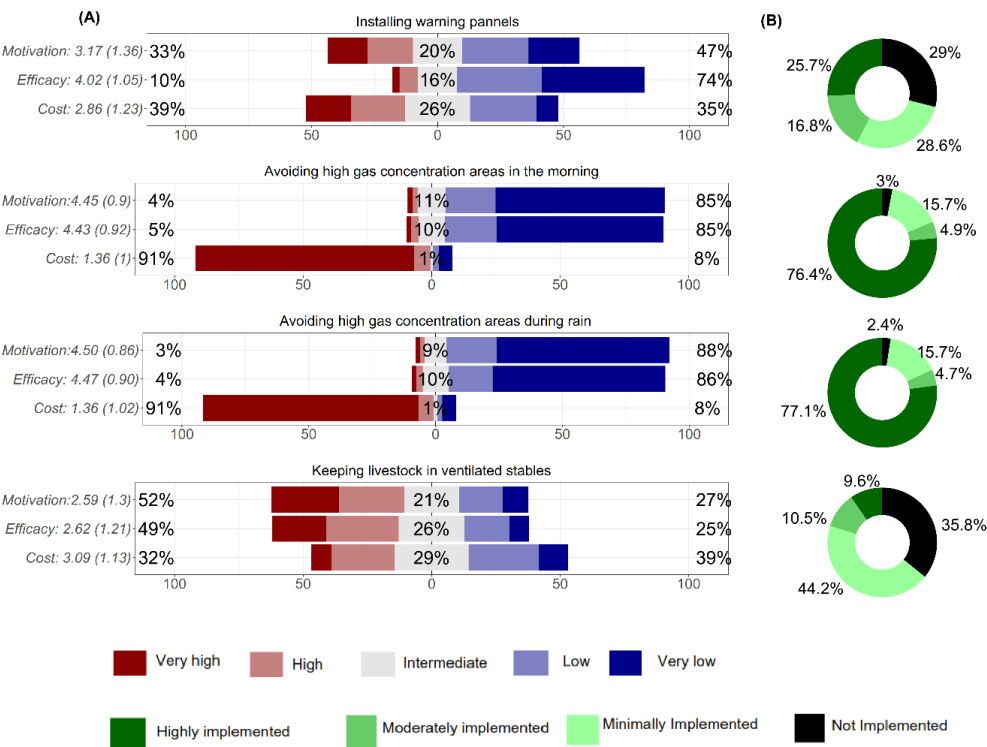
278 Knowing which areas have high concentrations of mazuku—so as to avoid them in the early
279 morning, during rain, or simply when temperatures drop during the day—is among the most
280 widely implemented measures (Fig.4). Approximately 85 % of the population report that these
281 two measures are effective and they are motivated to implement them. As might be expected,



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

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

288



289

Figure 4: (A) Level of perceptions of different indicators for Community based awareness measures, (B) The level of perceived implementation within the neighbourhood

290

291 **5.2. Factors of the motivation for implementing mitigation measures**



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

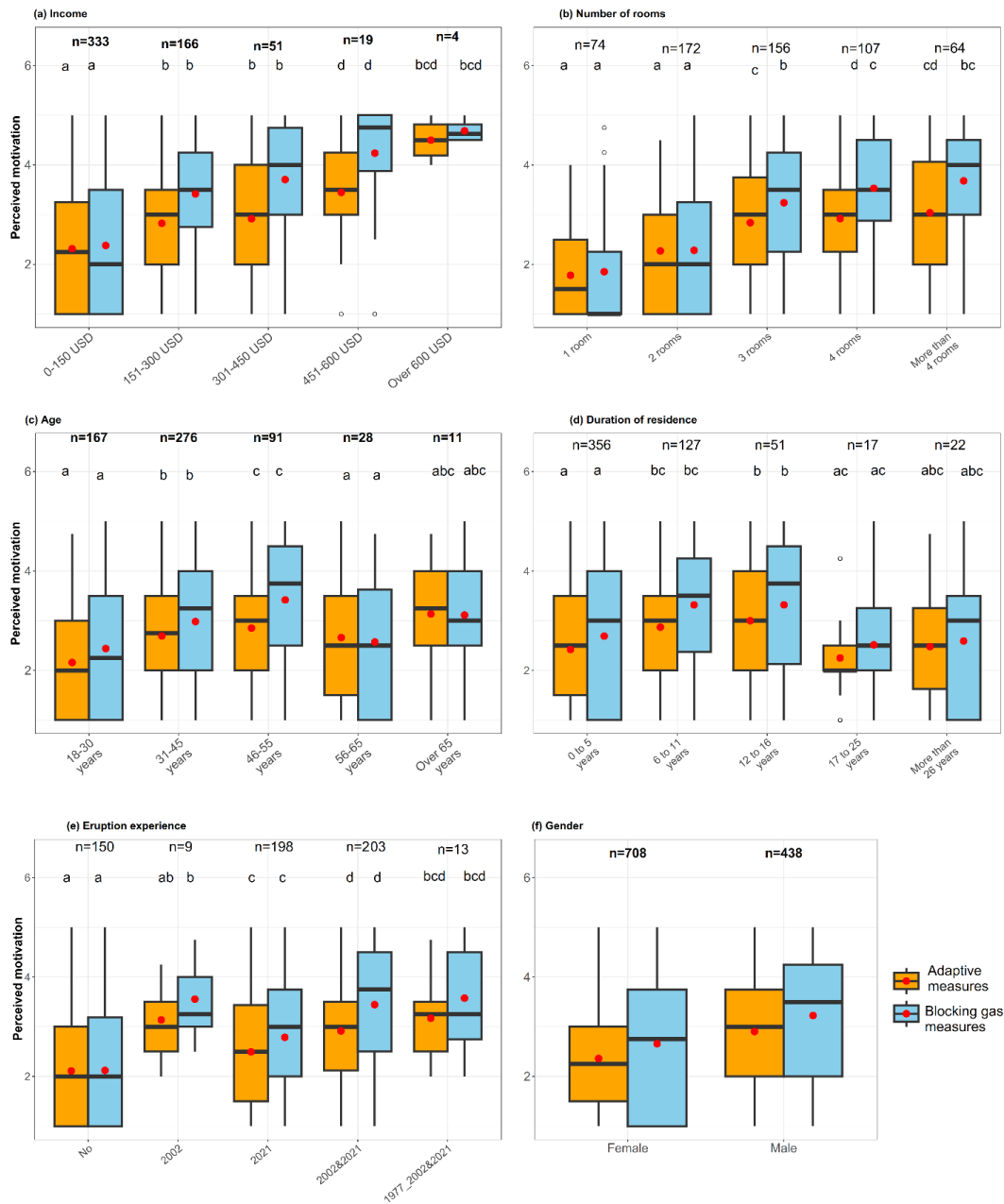




Figure 5: The level of perceptions of the aggregated indicator according to significant determining factors. Perceptions are expressed on a numerical scale from 1 (very low) to 5 (very high). In each boxplot, the horizontal bold line represents the median, the red dot indicates the mean, and the small 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.

299

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

306 **5.3. Correlations**

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

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

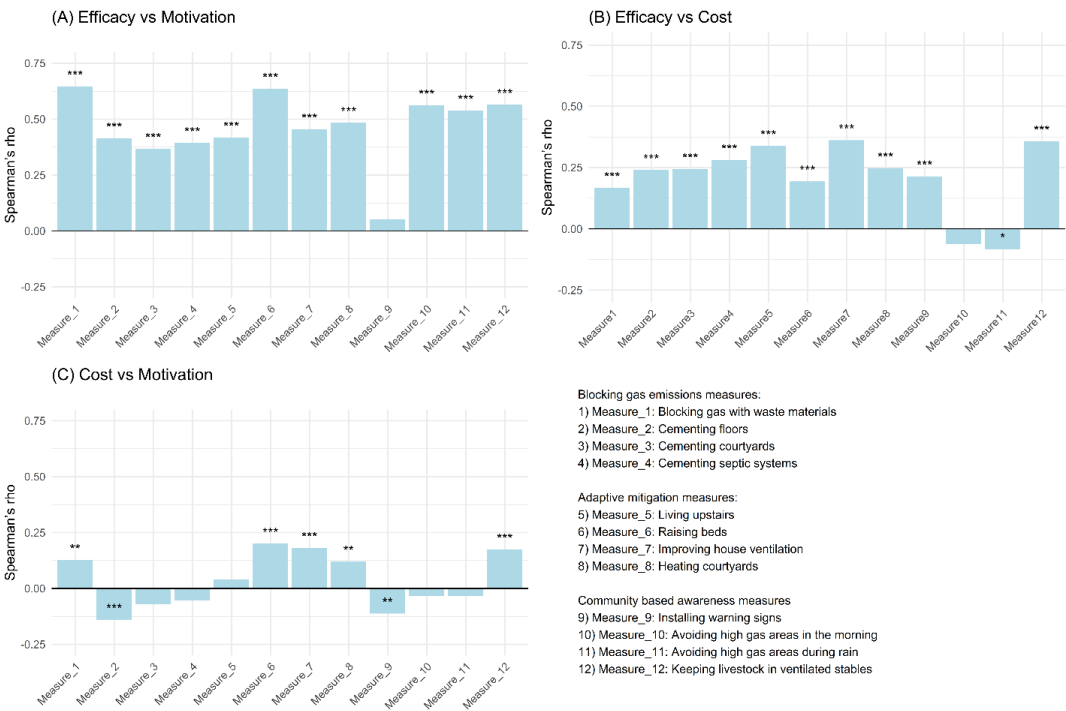


Figure 6: Pairwise Spearman's rank-order correlations. *** p value<0.001, ** pvalue<0.01 and * p value<0.1.

5.4. Spatial variation

The figure 7 presents the variation in the population's perceptions of efficacy across the sampling zones. It shows that aggregated efficacy is perceived very differently across the three sampling zones, with statistically significant differences. Zone 2 hosts a large proportion of the population who consider both awareness measures and measures limiting mazuku emissions to be effective or even very effective. In contrast, Zone 3 is home to the majority of people who regard emission-limiting or adaptation measures as ineffective. When grouping together those who perceive the measures as effective and those who consider them very effective, we find almost the same proportion of the population in Zone 3 regardless of the type of measure.

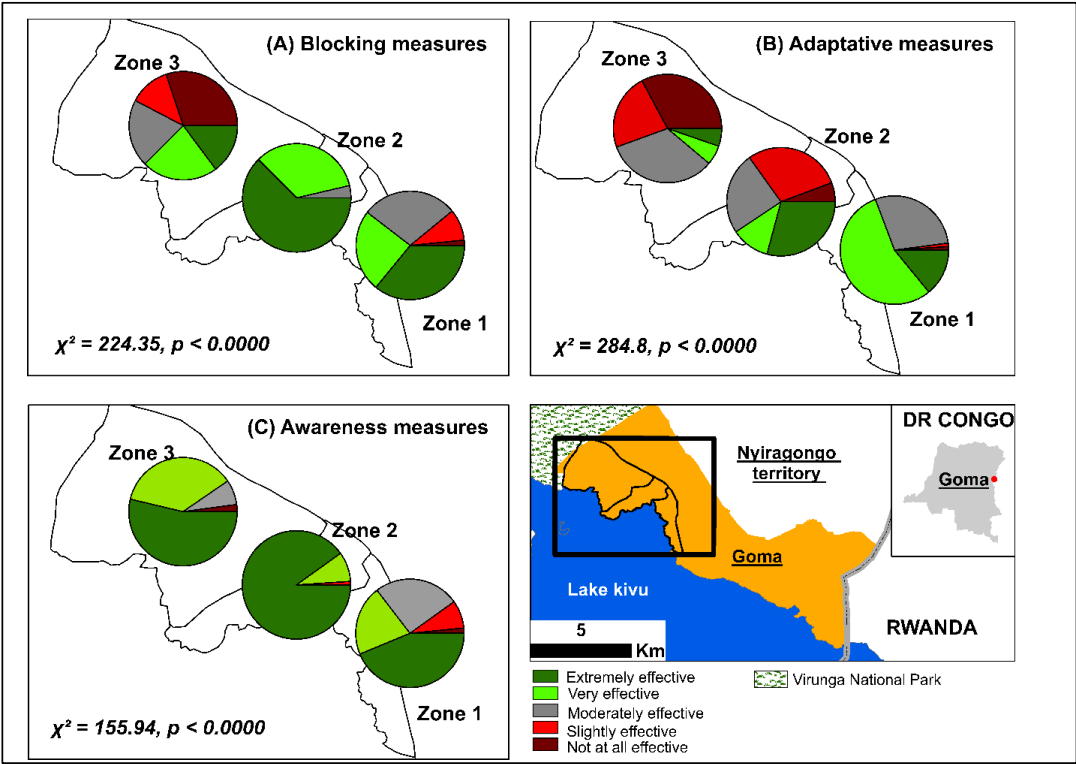


Figure 7: Spatial variation of perceived efficacy across different sampling zones

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



6. Discussions

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

By 2019, one billion people were already living within 100 km of active volcanoes, with the density of human activities continuing to increase (Brown et al., 2015; Freire et al., 2019). In CO₂ diffused degassing zones not restricted as parks or reserves (Williams-Jones & Rymer, 2015), people may choose to reside in areas with CO₂ high-concentrations (Edmonds et al., 2017; Hansell & Oppenheimer, 2004a, 2004b), as in the present case study. This may reflect a risk acceptance. However, our findings indicate a more specific form of *passive* risk acceptance (Wachinger et al., 2013b, 2018). Indeed, people are well aware of the risk posed by mazuku and claim to know where they are located, yet many still choose to live close to, or even on them. This could suggest that they have no other options left. Indeed, in Goma—a city already extremely densely populated (Pech et al., 2018; Pech & Lakes, 2017)—people often settle in these risky areas because, despite the volcanic hazards, Goma is perceived as safer than the conflict-affected surrounding regions (Mafuko Nyandwi et al., 2023). Therefore, people have developed local mitigation measures to compensate for the insufficiency of the official advice to simply leave the area, as indicated on warning panels.

Wachinger et al., (2013a) describe this as the risk-mitigation paradox—a situation in which people consciously choose to live exposed to hazards, and the choices of mitigation measures being controlled by resource availability. In such contexts, most participants report being motivated to identify high-concentration areas in order to avoid them *during critical times, such as early mornings or after rainfall*, when mazuku concentration is high. Being less resource-intensive, awareness-based measures were widely considered effective by the majority, particularly among low-income households, who also felt these measures had been largely implemented. However, Paton (2008) caution that if people overestimate the effectiveness of some mitigation measures, they may be less inclined to recognise the need for additional mitigation measures and less receptive to new awareness-raising initiatives. This is evident here: residents are less motivated to comply with mazuku warning panels at all times of a day because *they believe they already know the “critical periods” (early mornings and after rainfall)*. Yet, in this region, it has already been demonstrated that concentration levels can change suddenly



379 following abrupt magmatic activities or volcanic events or due to diurnal–nocturnal fluctuations
380 (Balagizi et al., 2018; Kasereka, 2017; Smets et al., 2010). Therefore, locally contextualised
381 awareness initiatives based on people risk experiences and knowledge are needed (Mafuko-
382 Nyandwi et al., 2024).

383 6.2. The Influence of Risk Experience on Mazuku Mitigation

384 The literature indicates that risk experience influences the perceptions of people living in hazard-
385 prone areas, whether in terms of risk perception or views on the implementation of mitigation
386 measures (Mafuko Nyandwi et al., 2023; Sattler et al., 2000; Townshend et al., 2015). In this
387 perspective, our results show that the number of times an individual has experienced the risk of a
388 volcanic eruption positively influences both the motivation to implement, and the perceived
389 effectiveness of local mazuku mitigation measures. Moreover, there is evidence of spatial
390 variation in perceptions of efficacy of mitigation measures, despite no comprehensive knowledge
391 of how mazuku concentrations vary across different zones. Instead, variation in perception aligns
392 more closely with historical patterns of land occupation and settlements.

393 This suggests that these patterns are more reflective of community-level perceptions and shared
394 risk experiences than of an objective individual evaluation of risk mitigation (Becker et al.,
395 2017). Before, the 2021 Nyiragongo eruption, we have observed already a spatial
396 homogenisation in people’s perception of volcanic risk across different neighbourhoods of Goma
397 between old residents and newcomers (Mafuko Nyandwi et al., 2023). This was partly because a
398 long time had passed since the last eruption, and partly because Nyiragongo is an “open volcano”
399 with a persistent reddish gas plume at its summit (Barrière et al., 2022), serving over the years as
400 a continual reminder of the volcanic threat. Meanwhile, the mazuku hazard is silent, permanent,
401 colourless and odourless (Smets et al., 2010). In contrast, spatial homogeneity in how people
402 perceive the implementation of *mazuku* mitigation measures appears to depend heavily on
403 demographic factors, especially monthly income, which segregate populations into different
404 settlement zones. Interviews in the affected area have already revealed three distinct settlement
405 zones: high-income zone, transitional zone with middle-income households, and low-income
406 household zone with high proportion of IDPs.



407 The spatial homogenisation of risk perception is had been also documented in others context. In
408 an editorial review, Gaillard & Dibben (2008) demonstrated that the spatial dimension of risk
409 perception is closely linked to the memory of past events or previous experiences of fatalities in
410 a given area. This collective memory can shape entire communities living in that location
411 (Becker et al., 2017). This means that it is not individual experience that matters most, but rather
412 the shared history of a community, in which the impacts of past fatalities remain visible (such as
413 the skeletons of animals asphyxiated by mazuku) or are passed down orally from generation to
414 generation, or from long-term residents to newcomers, or even from a neighbour to another one
415 (Gaillard & Dibben, 2008). Moreover, within the same zone, households tend to implement only
416 those measures that are affordable for them. This is the case with cementing house yards or
417 septic pits, which are widely perceived implemented in Zone 1, where high-income households
418 live. Thus, the effective implementation of mitigation measures requires empowering local
419 communities through a co-creation approach.

420 **6.3. The Need for Co-Creation with Local Communities and Empowering Them**

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

430 In this perspective, our findings support Barclay et al. (2008), who noted that in many cases the
431 risk is well known to the exposed population, yet they may fail to act due to competing life
432 pressures such as resource constraints, rather than a lack of knowledge. We observed that both
433 the perceived efficacy of risk mitigation measures and their perceived level of implementation
434 vary across zones not because of differences in mazuku concentrations but because of resource
435 limitations. People report being motivated to adopt a mitigation measure if they perceive it as



effective and if it is affordable. In other words, even when a measure could be effective—such as cementing courtyards or septic pits—motivation to implement it declines sharply if resources are lacking and, paradoxically, our results indicate that the measure is then judged less effective. Therefore, mitigation measures that address the needs of specific social groups are likely to be more effective than collective, one-size-fits-all solutions, like the installation of warning panels that are now the only official mitigation measures implemented in Goma. Achieving this requires researchers, decision-makers, and all other stakeholders involved in risk management to learn from local communities practices and collaborate with them in designing mitigation strategies that are locally contextualised.

7. Limitations

This study did not assess the actual physical effectiveness of the 12 risk mitigation measures. Furthermore, data collection did not evaluate whether households had already been directly affected by Mazuku, given that the main impact—loss of human life—could raise ethical sensitivities. In addition, we did not assess whether households had individually implemented a given measure but rather enquired about the level of implementation within the neighbourhood as a whole. This approach was taken because, as highlighted during the interviews, the implementation of such measures was considered more as a collective matter at community level, since the sources of CO₂ emissions were dispersed across different locations.

8. Conclusion

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

The study identified three categories of risk mitigation measures implemented in the western part of Goma, within the Virunga volcanic province: (1) measures aimed at limiting mazuku emissions; (2) adaptive measures to reduce exposure to mazuku; and (3) awareness-related measures based on local knowledge, transmitted orally from generation to generation or from



465 long-term residents to newcomers. Financial resources, along with risk experience—often linked
466 to length of residence—were found to positively influence both motivation and the perceived
467 effectiveness of the first two categories of measures. Perceptions of awareness-related measures
468 showed no significant variations. Moreover, the study highlights spatial variation in both the
469 level of implementation and the perceived effectiveness of these measures, not necessarily based
470 on individual evaluation but rather on community-level knowledge of the local environment.

471 This research contributes new insights into the implementation of risk mitigation measures
472 against volcanic gas emissions in active volcanic zones, from a Global South perspective. It
473 reinforces the call, made by other scholars, for the co-creation of mitigation strategies with local
474 communities, rather than the imposition of externally derived solutions that may not be effective
475 in the local context. Future research could complement these findings by assessing the actual
476 effectiveness of such measures through physical measurements of mazuku concentrations, as
477 well as by further examining local risk perception.



478 Appendices

479 Appendix A

480 **Table A1: Results of test of variations of motivations according to demographic**
481 **characteristics**

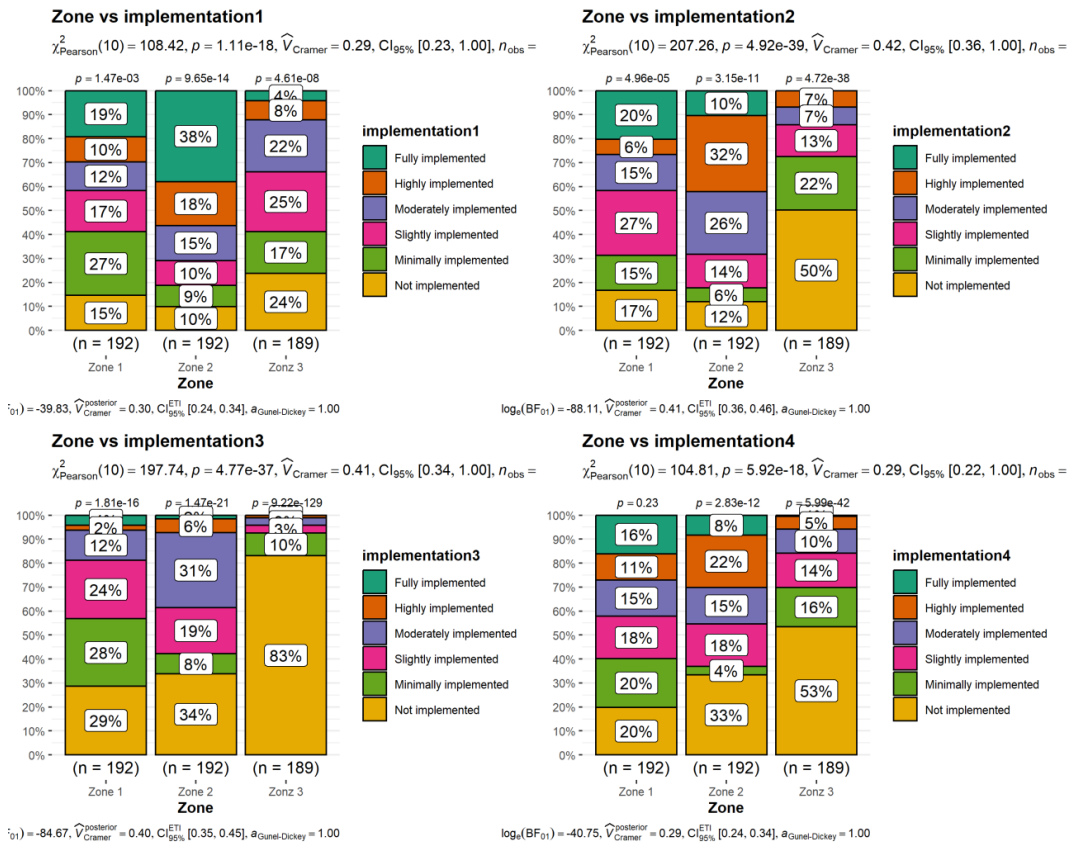
482

1. Blocking gas measures			
Variable	Test	Statistic	P_Value
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
2. Adaptative mitigation measures			
Variable	Test	Statistic	P_Value
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
3. Community based awareness measures			
Variable	Test	Statistic	P_Value
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

483



484 **Appendix B: The spatial variations of level of implementation per sampling zones**
485



486

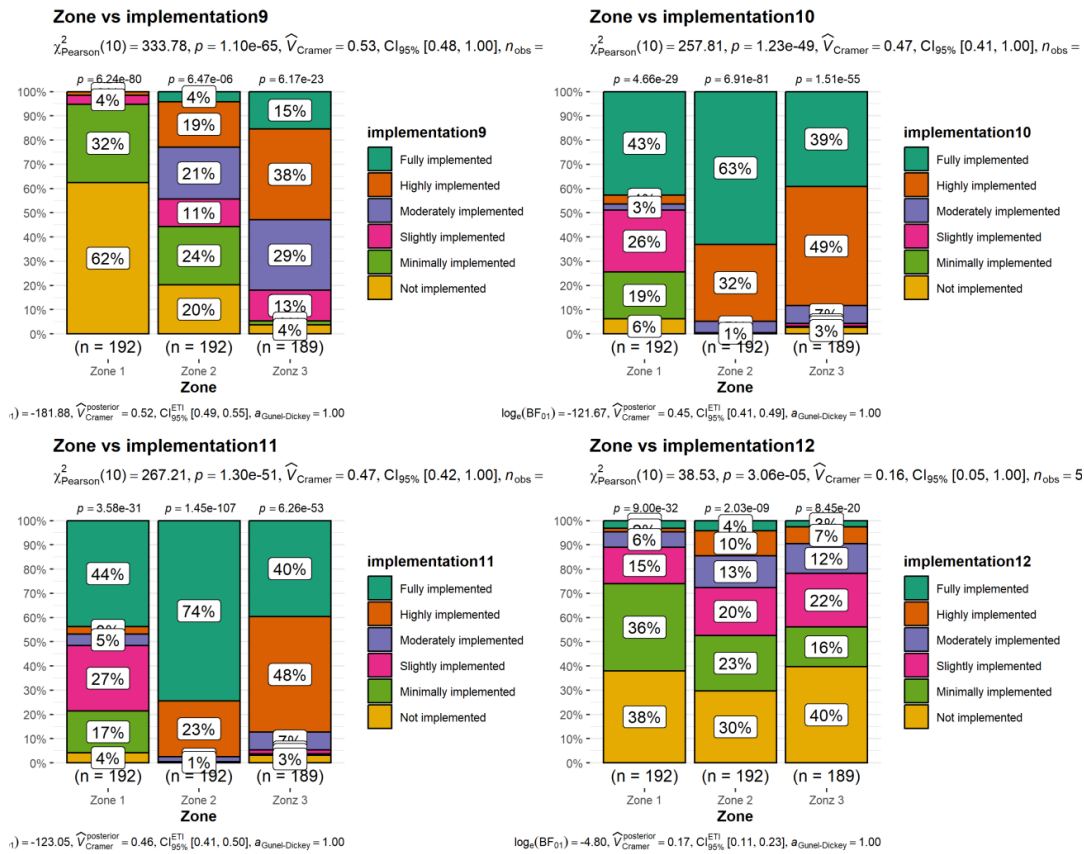
Figure B1: Variation of level of implementation of blocking gas measures



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



29



488

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

489



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497 **Data availability**

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

500 **Ethical statement**

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

505 **Competing interests**

506 The author declares no conflict of interest

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