

# Refugees' and migrants' access to health services in West Africa in times of COVID-19

The ongoing coronavirus pandemic has had significant impacts on mobility within West Africa. This Snapshot is the second in a series that documents the phenomenon in West Africa through an adapted version of MMC's regular 4Mi data collection carried out in Niger, Mali, and Burkina Faso. It provides insight into access to healthcare, of the scale of testing for COVID-19, and precautions being taken among people on the move.

## Key messages and recommendations

- Lack of funds constitute the primary barrier to health services among respondents.
- Wearing a mask and regular handwashing are the predominant ways migrants and refugees in Niger, Mali, and Burkina Faso are protecting themselves against COVID-19.
- A gender-specific approach could be useful in some forms of outreach: women indicated having a harder time social distancing due to their living situation than men (39% vs 26%), while men reported worse access to health services (44% of men vs 55% of women said they could access health services).
- 17% of respondents are not taking precautions against COVID-19, and many of these say they do not have access to protective gear (54% in Burkina Faso, 42% in Niger and 39% in Mali).
- Information could be improved: of the 17% of respondents who reported not taking precautions against COVID-19, 47% in Niger said they did not feel it was necessary, as did 42% in Burkina Faso and 37% in Mali. Lack of clarity on where to go for healthcare, or on recommendations for testing and treatment were also important barriers to accessing healthcare.
- Testing was reportedly quite varied: 10% of respondents in Niger said they had been tested, 5% in Burkina Faso and only 2% in Mali.

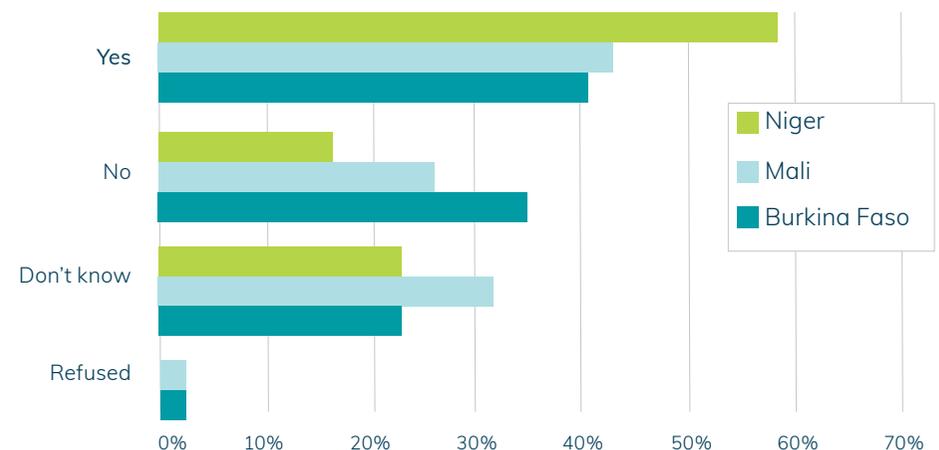
## Profiles

This snapshot is based on telephone surveys carried out with 1,396 refugees and migrants in Niger (464), Mali (530), and Burkina Faso (402), between 20 April and 20 June 2020. Women made up a little under a third of respondents (n=419). The top six countries where respondents started their migration journeys were Niger (n=190), Guinea (n=168), Mali (n=161), Côte d'Ivoire (n=136), Burkina Faso (n=130) and Nigeria (n=120). Age of respondents ranged from 18-56, with an average age of 29.

## Access to healthcare

The proportion of respondents who reported that they did not know whether they would be able to access health services was relatively high (Niger 23%, Burkina Faso 23% and Mali 31%), see Figure 1. While 59% of respondents in Niger said they would have access to health services should they present coronavirus symptoms, only 41% in Burkina Faso and 43% in Mali responded that they could do so.

**Figure 1. Would you have access to health services?**

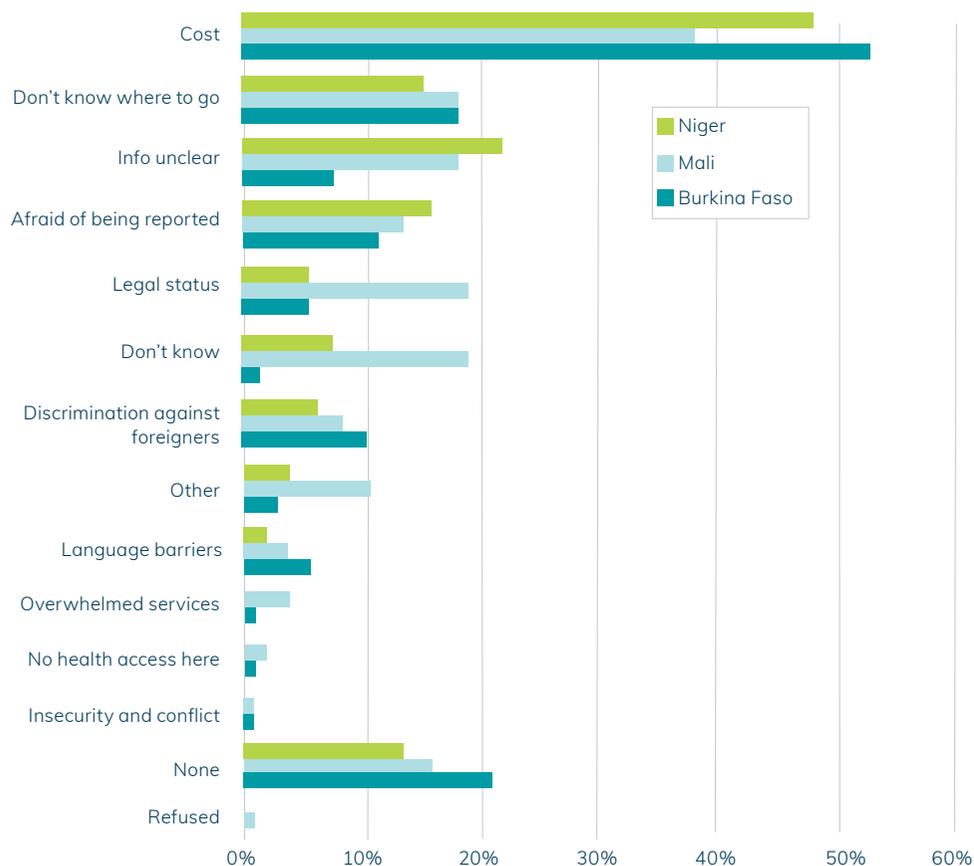


## Lack of money remains a primary barrier to health access

Some 52% of refugees and migrants interviewed in Burkina Faso reported not having money to access healthcare, followed by 47% in Niger, and 38% in Mali. These figures are very similar to those reported in April for Mali and Niger, although respondents in Burkina Faso more frequently reported having access this time (61% of respondents in April said they did not have access to health care).

Additionally, although all respondents have heard of COVID-19, information on access to services is lacking: not knowing where to go for healthcare or having clarity on what is advised for testing or treatment are among the top obstacles to accessing healthcare.

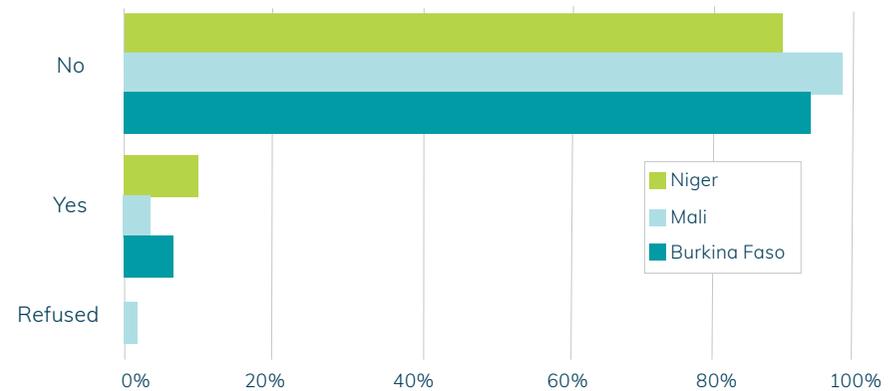
**Figure 2. Obstacles to accessing health services**



## Testing levels vary by country

Out of 1,396 respondents, 78 respondents reported having been tested for coronavirus, with one positive result reported. Niger's testing proportion of 10% was notably higher than Burkina Faso (5%) or Mali (2%). The proportion of men and women being tested for coronavirus was quite similar.

**Figure 3. Respondents tested for COVID-19**

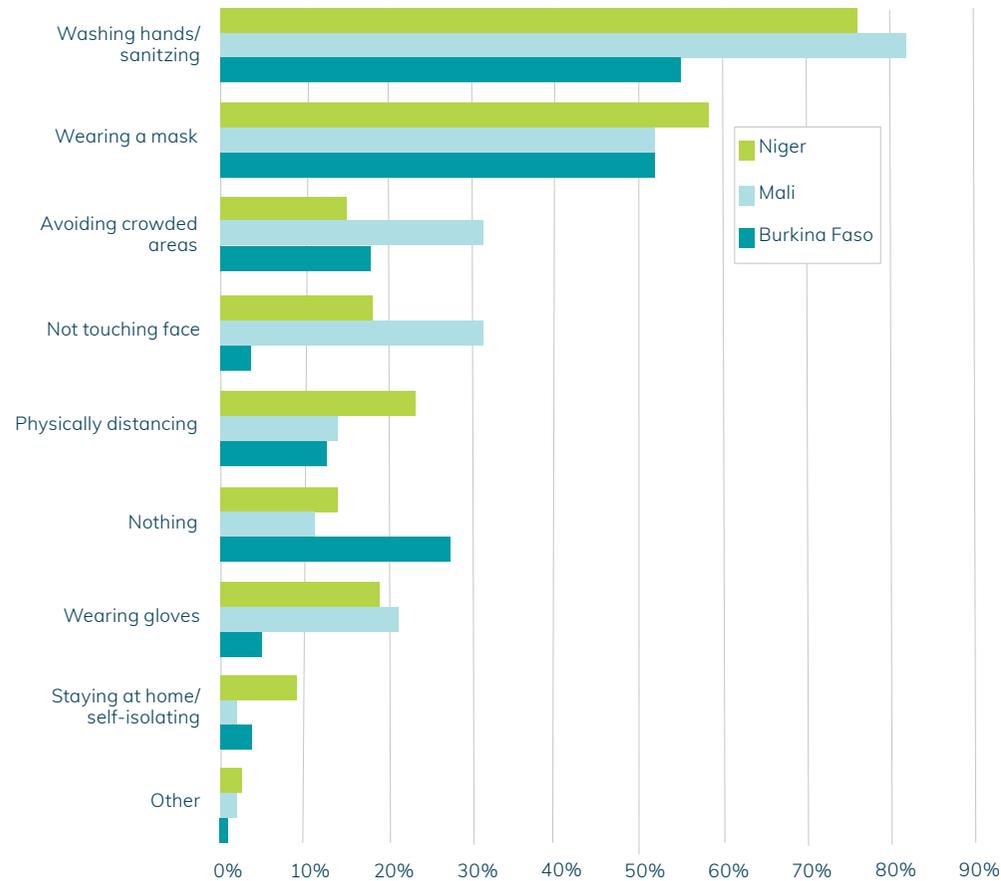


## Handwashing and masks are key infection control measures

Washing hands or regularly using hand sanitizer were the most commonly reported infection control measures. The numbers were particularly high in Mali (81%) and Niger (77%), see Figure 4. Furthermore, more than half of all respondents across all countries reported wearing a mask (Niger – 58%, Mali – 54%, Burkina Faso – 54%).

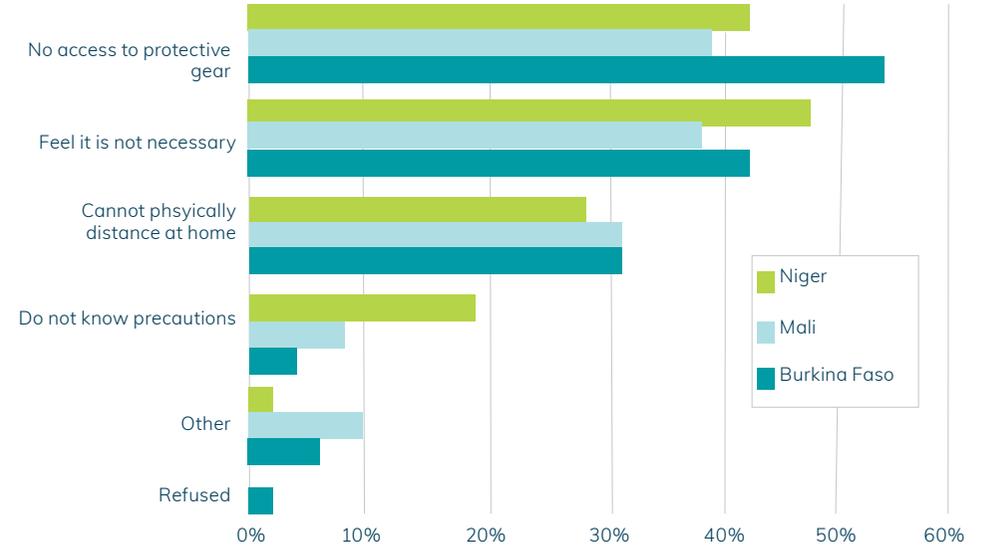
Nonetheless, 27% of respondents in Burkina Faso reported not taking any precautions. This percentage was much lower in Niger (16%) and Mali (12%).

**Figure 4. Methods of protection against COVID-19**



54% of people in Burkina Faso who were not taking measures said that one reason was a lack of access to protective gear (masks, gloves, sanitizer), see Figure 5. A slightly smaller proportion reported the same issue in Niger (42%) and Mali (39%). 47% of those interviewed in Niger who said they were not taking precautions indicated they did not feel it necessary to do so, compared to 42% in Burkina Faso and 37% in Mali.

**Figure 5. Reasons for not taking COVID-19 precautions**



39% of women reported not being able to practice physical distancing due to their living situation compared to 26% of men. Otherwise, there was no gap in responses between genders.

## Refugee and migrant voices

"I was forced to leave my home following the death of my father. My family has relied on me ever since. But now we don't even have enough [money] to eat, let alone send back home."<sup>1</sup>

**22 Chadian man interviewed in Niger**

"Corona has turned our lives upside down. For us foreigners, the hunger is exhausting."<sup>2</sup>

**25-year-old Malian woman interviewed in Burkina Faso**

"I am really lost. I don't know what [work] I will find in my destination country because they are also in a critical situation. I don't think I will have the life there that I thought I would. Some tell me here is better than there at the moment. I have to stay until the situation of this pandemic calms down a bit."<sup>3</sup>

**32-year-old Burkinabe man interviewed in Niger**

"I am going through the most difficult situation in my life right now. Not only am I on display in a train station, all that I had has been stolen. Nothing but devastation."<sup>4</sup>

**22-year-old Nigerien man interviewed in Burkina Faso**

"It should be noted that when you leave your country, you have to expect that anything could happen. So to migrate is to sell your life, in my opinion."<sup>5</sup>

**27-year-old Ivorian woman interviewed in Burkina Faso**

"Despite COVID-19 and all the measures taken by the government, I still am just as determined to go to Europe."<sup>6</sup>

**26-year-old Cameroonian woman interviewed in Niger**

"If I had known it was going to be like this, I wouldn't have left the country, but now I have to continue, whatever the situation."<sup>7</sup>

**31-year-old Nigerian woman interviewed in Niger**

"Migration is really not easy given the risks we run, and now COVID-19 has been added to it."<sup>8</sup>

**33-year-old Togolese man interviewed in Niger**



### 4Mi & COVID-19

The Mixed Migration Monitoring Mechanism Initiative (4Mi) is the Mixed Migration Centre's flagship primary data collection system, an innovative approach that helps fill knowledge gaps, and inform policy and response regarding the nature of mixed migratory movements. Normally, the recruitment of respondents and interviews take place face-to-face. Due to the COVID-19 pandemic, face-to-face recruitment and data collection has been suspended in all countries.

MMC has responded to the COVID-19 crisis by changing the data it collects and the way it collects it. Respondents are recruited through a number of remote or third-party mechanisms; sampling is through a mixture of purposive and snowball approaches. A new survey focuses on the impact of COVID-19 on refugees and migrants, and the surveys are administered by telephone, by the 4Mi monitors in West Africa, East Africa, North Africa, Asia and Latin America. Findings derived from the surveyed sample should not be used to make inferences about the total population of refugees and migrants, as the sample is not representative. The switch to remote recruitment and data collection results in additional potential bias and risks, which cannot be completely avoided. Further measures have been put in place to check and – to the extent possible – control for bias and to protect personal data. See more 4Mi analysis and details on methodology at [www.mixedmigration.org/4mi](http://www.mixedmigration.org/4mi)

1 "J'ai été forcé de quitter ma maison suite au décès de mon père. Ma famille compte sur moi depuis. Mais maintenant on n'a même pas de quoi bien manger à plus forte raison envoyer à la maison."

2 "Corona est venue bouleverser nos vies. C'est la faim qui nous fatigue nous les étrangers."

3 "Je suis vraiment perdu, je ne sais pas ce que je peux trouver dans mon pays de destination, car eux aussi ils sont dans une situation critique. Je ne pense pas avoir la vie que j'espérais là-bas. Quelqu'un me dit qu'ici est mieux que là-bas pour le moment. Je dois rester jusqu'à ce que la situation de cette pandémie se calme un peu."

4 "Je traverse une situation des plus difficiles actuellement dans ma vie. Non seulement je suis exposé dans une gare en plus tout ce que j'avais été volé. Il n'y a que la désolation."

5 "Quand on quitte son pays faut s'attendre à tout. Donc migrer équivaut à vendre sa vie selon moi."

6 "Malgré la Covid 19 et toutes les mesures prises par le gouvernement, je garde toujours la même détermination pour me rendre en Europe."

7 "Si je savais que ça allait être ainsi je ne quitterai même pas le pays et maintenant je suis obligée de continuer quel que soit la situation"

8 "La migration n'est vraiment pas facile vu les risques qu'on court et à ça vient s'ajouter la Covid-19."