

Community-led responses to COVID-19 in the Sahel

Oral testimonies #2, July - August 2020

This extract is based on a larger research conducted and compiled by consultant Gerd Kieffer-Døssing for International Media Support (IMS) in consultation with Local2Global Protection.

Introduction, methodology and background

This report is the second of two produced during a short-term consultancy in the summer of 2020 – see also: *Qualitative research in the Sahel. Community led responses to COVID-19 – report 1*.

The aim is to collect local community-based responses, examples and experiences from the cross-border conflict zones in West Sahel in connection to COVID-19 and with the overall objective to "Raise understanding of practical examples of community-led crisis responses as well as the importance of supporting it."

Based upon findings in the first report, it was decided for this second report to focus on providing more insights into the local responses, which the first report touched upon. The intended aim is to shed light on how the local populations have come together to get through the pandemic and what exactly they have done to support those among them who were the most exposed to the consequences.

The research is planned along the lines of the Local2Global-project (https://www.local2global.info) with whom IMS collaborates for this project. The research has been carried out by the author in collaboration with IMS' local partners in the Liptako-Gourma region in Mali, Burkina Faso and Niger. Informants were identified by/via IMS's local partners, targeting specifically the local women's clubs in Gorom-Gorom in Burkina, Tillaberi in Niger and Gao in Northern Mali. Furthermore, the consultant knew the women beforehand from a workshop in Niamey, Niger, in October 2018, hosted by IMS so basic levels of trust were already well established previous to the initiation of the research. Due to unstable Internet connections, all interviews were for this second report undertaken entirely by sending audio messages back and forth in an exchange sometimes spanning several days. The ruptures and the fact that the interviews did not take place as fluid conversations have to some extent impeded the possibilities of obtaining elaborations and/or clarifications. When informants have provided information on the same topic in different audio recordings, the author have merged this information with the original testimony to provide a more usable and unified response. The testimonies are thus a compiled result of the interviews. In a few places text has been added in brackets to clarify or provide missing context.



Keeping the wheels turning...

Living with the threat of Covid-19 part II Experiences from Niger, Mali and Burkina Faso

Niger – Ayerou₁

Testimonies offered by Halima Moussa, member of a female listeners' club, who was joined by Hamsatou Boubacar, president of the said listeners' club for this interview. Present was also Abdoulaye Amadou, radio director in a community radio in Ayerou, who acted as a translator. The testimonies should be considered in that light.

Actions of the listeners' club and school issues

Hamsatou Boubacar:

"We are 20 women in the club who meet up2 every Thursday. But to fight COVID we have asked that only eight women at a time could come – so one week eight people will meet, and the following Thursday [another] eight women from the club will get together. We talked with health workers and with the other women's groups, the other listeners' clubs, we went to the radio to sensitize other groups to do the same, to respect [COVID-19] and to always keep a one-meter distance. This is how we have fought against COVID-19 at the local level.

"After the schools reopened, we took precautions. We told the parents of the students to make sure to avoid [that the children bought food at the school.] We made a commitment to prepare [a lunch pack] from home and put in our children's bag, so that each student eats by himself in order to avoid contamination in the schools. It is not everybody who has the means to [provide a lunch pack] for their children. Those who have [money] prepare food for the children in the morning for the break, but there are children who because of this, refuse to go to school because their parents have nothing to give them to bring along."

"When the schools were still closed, we appealed to the older pupils, the middle school students. The families with middle school students asked them to tutor the young students while waiting for the schools to reopen."

Abdoulaye Amadou

"Those who have the means also [paid] teachers to come to their homes to teach their children while waiting for the classes to reopen."

Giving up traditional practices

Halima Moussa

"To this day, there is no medication [to treat COVID-19], there is nothing – all we have is our traditional medicine made from trees. That is what we use. We boil it, give it to the children, we bathe them in it – we do everything we can to avoid COVID-19."

Hamsatou Boubacar

"Before people did not take their sick ones to the health centres but treated them with traditional

1 A village situated at the river Niger in the region Tillaberi in West Niger (bordering East Burkina Faso and close to Northern Mali).
2 These meetings are not recorded and broadcast per se. Typically, the women clubs use the meetings to define which discussions and topics qualify for a radio programme. It could be why it is important to send girls to school, why vaccination programmes are important, or more security-related topics like causes and solutions to conflicts between pastoralists and farmers, etc. The meetings also have a social importance, as they are a place where the women get together to talk, discuss and support each other. Hence, these meetings serve several purposes, but are always held (as preparatory) in advance of an eventual recording for subsequent editing and radiobroadcast.



medicine made from trees. Among themselves, people were sensitized to abandon this kind of practice because [it brings people together] washing each other with tree roots or leaves – COVID is COVID, and it could infect everyone. That is why people became aware and started to give up this kind of practice."

Abdoulaye Amadou

"Many practices have been abandoned [during COVID-19]. Here, you know, we have traditional healers, we have charlatans – what you call sorcerers; all of them are healers, who are here traditionally and who cure people from certain diseases, [protect them from] evil spirits and put them in a trance. They heal them, they take care of them, but with the appearance of COVID people have stopped with this practice. Everyone is wary. Even when someone is sick with a disease where people [under normal circumstances] would say: "No, do not take him to the health centres, it is not worth the hassle, we will treat him traditionally [instead]". People now take [the sick person] to the health centres."

"So, you see. [The traditional healing] was dropped during COVID-19. [When COVID-19 is over] people will probably start doing it again."

Community responsibility on different levels

Testimony offered entirely by Abdoulaye Amadou.

"Responsibility was taken on all sides, because [here] in Ayerou, responsibilities are shared locally. There is the administration, which is represented by a prefect. There is the commune, meaning the town hall, the mayor and the councillors3, and then there is the traditional chiefdom with a supreme chief4 who is the chief of all the other villages' chiefs. When the [Nigerien] government gives instructions to the people, they go through the prefect, who calls on the town hall and the chief of the canton to [relay the message of the government]."

"This is also the way it happened this time. [The prefect] called upon the officials to tell them about COVID and its serious consequences. Then the canton chief assembled all the village chiefs5, which he is representing. They have a meeting every three months, but this meeting was arranged entirely to pass on the instructions to the village chiefs; to tell them about the disease; what they need to do; what consequences the disease could cause. They were now responsible for [making their communities] change their way of life, their way of living while waiting [for the pandemic to die out]."

"The mayor on his side [called upon] the councillors. After having listened to the mayor, they too went back to their communities to tell them what was happening and what measures to take, and that it was better to respect [the restrictions] to make it through this situation [because] given our situation ... financially [COVID-19] exceeds us, it exceeds our health care, on all levels it exceeds us. We have to fight with all we have to prevent this disease from entering our community. So, these are the key points [in the spreading of the government's message on COVID-19 to the people], which has happened everywhere [in Niger]."

"People understood that really ... well, almost everyone is poor. People have serious problems with treating even smaller diseases like malaria and diarrhoeal diseases caused by the river water, which we drink. Children die of malaria, because the parents cannot afford to pay for treatment. So, people

³ Villages elect their own councillor who represents them at the city hall, informs Abdoulaye Amadou.

⁴ Also called canton chief.

 $^{{\}scriptscriptstyle 5}$ There are 18 administrative villages in the area of Ayerou according to Abdoulaye Amadou.



understood that a disease that is more severe than malaria is serious. People took it seriously - thank God, it worked."

"The population is more attached to the district leaders6 – they are the ones who inform the populations. It is the district leader who takes care of smaller conflicts in the neighbourhood, which he manages to settle amicably without going to the canton chief, the gendarmerie7 or the police. He is someone who is listened to. He shares with the community, they share everything – there is no resistance towards him, he is not superior to them. It is just that he is the neighbourhood chief, and they are the people. They meet up at those spaces8 in the neighbourhood where the elderly meet to exchange9 – they chat in the evenings when they come back from the fields. There, they get news on everyone. They notice if someone does not show up and find out what is happening: "That one did not show up tonight, what is wrong?"

"This is where they will learn if someone is sick, or if he did not come because he is travelling or because his son is sick or because he has this or that problem. As soon as they notice that this one or that one is absent today and was absent yesterday too, then, immediately they send someone to [the absent person's] house to find out what is going on. If help from the others is required, they will all come together to find a solution to the problem."

"It is this kind of practice that gives us information about each and everyone. This is how people consult each other or provide help to each other when necessary."

Mali - Gao10

Testimony offered by Aminata Idrissa, president of a female listener's club and civil society activist in Gao.11

Keeping society's wheels turning

"Concerning local solutions, well, people respect the restrictions – [there are] hand wash stations at the mosques, markets and schools. [People also] make permanently use of hand sanitizer and they wear masks. So, these are the restrictions, along with social distancing, that [are followed] locally.

6 Org. 'chef de quartier'. Each village has a chief. The latter is elected according to a procedure in which the only candidates are men. These men are heirs of the founder of the village. There is only one leader. It is an honorary, traditional function. The village chief is not a civil servant, but an auxiliary of the administration who plays a role in tax collection at the level of his village and manages current affairs between the villagers. The chief is also the first person in the village through whom passes any decision or project concerning the village. His authority can be challenged before the administration or the courts. The chief relies on various "juridical" aspects to settle disputes. These vary between customary practices in general, Islamic custom and modern law. In all cases, his decisions can be challenged before the administrative and judicial authorities. Niger is not broken down into districts. A smaller denominator is a neighborhood (one or more neighborhoods form a village), then villages, then townships (a set of several villages), then municipalities (one or more neighborhoods, villages and townships), then "arrondissements" (several villages and townships), then departments (several municipalities) and finally regions (several departments). There are seven regions in Niger plus the capital of Niamey. A canton (township) chief is a traditional chief who manages several villages. He is also an ex-officio member of the city council, but without voice of deliberation (rep. who has the quality to vote in an assembly).

- ⁷ As a former French colony, Niger has inherited the French system with both a national police force and a gendarmerie, a military force. Overall, they have the same obligation (to keep order and secure safety), but whereas the police are responsible for the urban areas, the gendarmes are in charge of the rural areas.
- 8 The mosque is another type of meeting place mentioned by Abdoulaye Amadou.
- 9 The palaver tree.
- 10 Gao is a city in Northern Mali and the capital of the Gao Region. The city is located on the River Niger, 320 km east-southeast of Timbuktu. For much of its history Gao was an important commercial center involved in the trans-Saharan trade. In March 2012, Gao was captured from Malian government forces by National Movement for the Liberation of Azawad (MNLA) and Ansar Dine rebels. After the additional captures of Kidal and Timbuktu, in April, the MNLA declared the region independent of Mali as the nation of Azawad and named Gao its capital. The MNLA lost control to Islamist militias after the Battle of Gao in June 2012. In January 2013, the city was recaptured by French military forces as part of Opération Serval.
- 11 Read an interview with Amina here: https://www.mediasupport.org/womens-voices-prevent-conflict-in-the-sahel/



[The markets were closed, but] people went anyway to sell their goods,12 but everybody respected the distancing and wore a facemask. That helped people not to suffer more [than they already did]."

"The listeners' clubs13 also contributed to securing that the restrictions were reinforced and that the population got used to [living with] the restrictions and respected them. The clubs organised radio programmes to show the importance of the restrictions and how people have to comply to prevent the spreading of the disease. The women's associations, such as the listeners' clubs, are constantly active in raising awareness to prevent the spread of the disease."

"The schools were closed but the schools with students who have their exams [shortly] have resumed classes. The restrictions are still respected; there are permanent [sanitation] kits14, hand sanitizer and [everybody have to wear] a mask. So, these schools are providing classes to at least allow the students to attain a certain level before taking their exams."

"Some NGOs have begun to support the population [in relation to the COVID-19 pandemic] and have just started to distribute cards 15 – this is what you call *cash for work*. They started distributing



those cards, but people have not yet [started to work], but at least they have their cards."

"We, the listeners' clubs, have a cash register system. IMS knows about this – there was an expert who came to our workshop in Niamey and who trained us in using such cash registers.

Ansongo, Mali.

So, these cash registers work at the level of women's associations. [We keep] the money in a small cash box with three keys. Three different women keep the three keys, and the cashier [a fourth women] keeps the cash box. [We collect money] weekly -500 CFA francs (0,76 Euro) per person. This is the savings and with it, the members manage to cover small needs or to uphold activities. All members can borrow money from the cash register, and after some time, when they have the money, they reimburse the amount, which other members then can borrow."

"Then there is the cash register for solidarity for which we pay 100 CFA francs (0,15 Euro) every week. This money we use on our members. If there are any deaths, weddings, baptisms or fires, we take money from the solidarity cash register and we give it. If there are citizens' activities in the

¹² Cf. report 1, section 4.1 From disbelief to panic.

¹³ There are more than one listener's club in Gao.

 $_{\mbox{\scriptsize 14}}$ Cf. report 1, section 4.2 Increasing prices on basic goods.

 $^{^{15}}$ At the time of deadline, Aminata Idrissa has not yet returned with an answer on how exactly this system works and what the cards designate. My guess is, that the card is a kind of proof that a person is hired as part of the cash for work-programme.



community, we support it [financially]. Even [people from] the community come to borrow money from us. We give them a [deadline] before which they have to return the money. So, these cash

registers are permanently in use. [They] served to help the population."

Taking on social responsibility

"Indeed, in our community, people are very close and are afraid of being evicted [from society]. So, people felt a responsibility to really care about COVID-19. If a relative of yours is infected, you have to help him in some way, even if you cannot be in [physical] contact with him. People understand that having [physical] contact is [no good], [but] you still have a responsibility to engage, as a citizen, to help him to respect the restrictions, to help him even with his treatment and also to give a lot of advice. And if you have even the tiniest bit of more money than him,



One of the images, which the clubs used in their door to doorsensitization in Gorom Gorom. Burkina Faso.

[you have to] help him and also help his wife [economically].

So, people felt very, very responsible. When everybody understood that the disease really did exist, 16 everyone felt a responsibility [to help]."

Burkina Faso - Gorom Gorom₁₇

Testimonies offered by Fatoumata Alou, 18 member of a women's listening club in Gorom Gorom, Burkina Faso.

Door to door

"We [the two listeners' clubs in Gorom Gorom] were trained [by a health worker] from the health district in Gorom Gorom on the COVID-19 pandemic; on how to fight this disease, how to avoid catching it and how the restrictions must be respected in order for [our community] not to be contaminated, because it [COVID-19] is spreading rapidly.

You can reduce your risk of getting infected or spreading COVID-19 by taking a few simple precautions. [The health worker] showed us, quite simply, how to carefully wash the hands with hand sanitizer or water and soap, how to wear facemasks and keep a distance of at least one meter to other people. If you cough or sneeze, [you must] cover your mouth with a bended elbow or with a tissue, which you must throw in a bin immediately afterwards. [You must] follow the instructions of the health authorities and constantly stay informed to know in which cities or areas COVID-19 is spreading.

¹⁶ To begin with, many thought corona was a scam by the government to get foreign funding (cf. report 1, section 4.1 From disbelief to panic). ¹⁷ https://en.wikipedia.org/wiki/Gorom-Gorom

¹⁸ Fatoumata is a local woman and member of one of the local women's debate groups (a listening club) in Gorom, a conflict-zone in the north east of Burkina Faso. The listening clubs collaborate with the local community radio in Gorom. Both the local women's group and the local radio are partners of IMS.



If you are elderly or diabetic [or] if you have a heart or lung disease [you must] disinfect all public objects with bleach or alcohol before using them. If you are not feeling well, stay at home and call the free of charge-number to go to a [health] centre."

"It was through this instruction that the listeners' clubs [decided] to sensitize the population by going from door to door. Knowing that this disease is a real disease, the clubs got together to find out what [we could do] to prevent this pandemic from reaching our province and that was how we decided to raise awareness by going from door-to-door.

[Through the training] we received images with all the instructions printed on it, [and] we used this image in the door-to-door sensitisation. We elected five, ten persons; everybody kept a one-metre distance to the others and wore facemasks, and with a bucket, soap and water they assisted in this sensitization. They went door-to-door, left to right – there is not a single courtyard where we have not been to raise awareness about COVID-19."

"[Apart from the training and the image] we had no support. We did it all voluntarily. There was no support from any projects nor from any NGOs – we got together, and we did all this voluntarily, on our own, with our own money. We did it for the benefit of all, because we are from the community and we have to defend our community [and protect it] from this disease. That was our goal. Even to this day, we are still raising awareness about this disease – we are still sensitizing our children, our sisters, our brothers, our fathers and mothers, to avoid that people, when they know we have had no cases, will stop [to be careful]."

Assisting the internally displaced persons

"We only meet once a week, on Saturday evenings at 3 pm, we meet at my place, as I am the president [of the club], and we make our contributions to our cash register 19: 600 CFA francs (0,91 Euro) per woman. We are 14 members and then there are other women, who have joined the club; they are not members but are only part of the cash register.



A listener's club in Burkina Faso is collecting money for its cash register.

500 CFA francs are for the cash register [meaning for the club itself] – 100 CFA francs are for a solidarity fund. [For instance] if a person is sick, we withdraw a small amount to buy juice and send it to that person, or if a member of the listeners' club has lost one of her parents or one of her relatives, we take money from the solidarity fund to [show our solidarity], to show that we are sorry too.

So, with COVID-19, we

withdrew some money to help people – we could not provide help to everyone, but, really, we did our best. We did a survey to identify the [most vulnerable] people with no means and who were in need and we agreed to take a few francs from our [solidarity fund] to help.

19 Like Aminata Idrissa, Fatoumata Alou also highlights the training during IMS workshops in Niamey, Niger as the reason for starting a cash register in her listeners' club. IMS runs 3-4 workshops with its radios and women's club partners during one year in a Danida supported programme, IMS Sahel programme: https://www.mediasupport.org/where/#sahel



The households, where we have been, these are the households of the vulnerable – the displaced persons. They have nothing; we really pity them, because they have nothing. If a person has left his home, he has nothing. This is why the listeners' club took the initiative to pay for two boxes of soap, kettles [for water] and facemasks for these people. We gave away 15 facemasks for men, 15 facemasks for women, and soap and kettles for washing the hands."

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Please also look up (link below) a mini-series of five corona-films from the Sahel (Burkina Faso, Mali and Niger in West Africa) produced by Sahelian filmmakers & supported by IMS. The videos offer you an additional glimpse into local realities and the challenges that citizens are facing due to the imposed regulations and restrictions: "Filmmakers from Sahel document life during times of coronavirus"

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