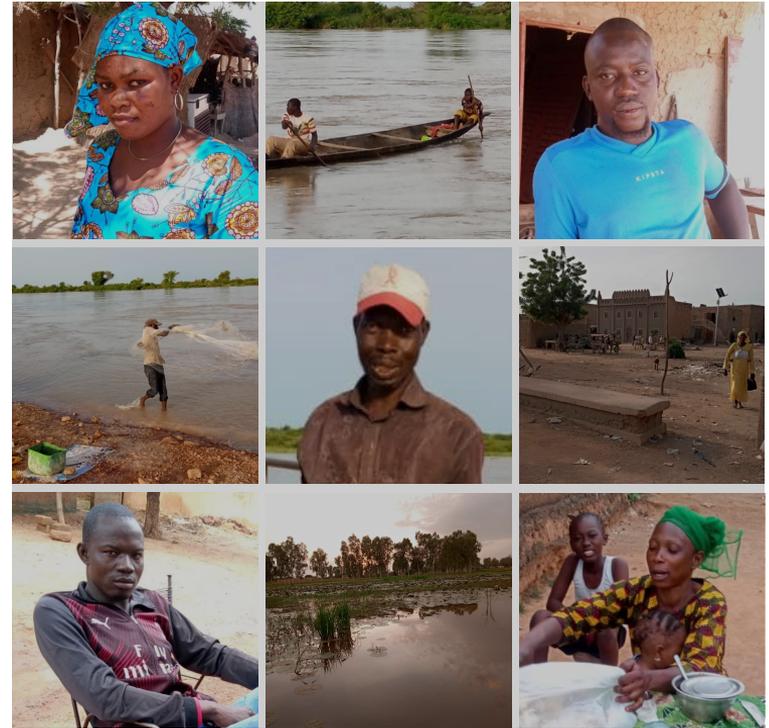


# BASELINE INSIGHTS & OPPORTUNITIES

A mixed methods study on the impacts of the COVID-19 crisis on low and middle income people in **Mali** and opportunities for policy and programmatic intervention

01 Feb, 2021



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# 1. Introduction

**In Mali, the first confirmed case was on March 24th, 2020, which was relatively late compared to neighboring countries. Despite the government introducing several preventive containment measures.** Such as the closure of land borders, a curfew from 9:00 pm to 5:00 am, the suspension of all public gatherings, the prohibition of social, sports, cultural and political gatherings of more than 50 people. **Since October, there has been a recent acceleration in positive cases. The country went from around 15 new cases a day to over 100 cases at the end-December 2020.**

As the COVID-19 pandemic has progressed and national lockdowns lifted in places, people have started to see some respite, but many still struggle to cope with the financial and psychological setbacks. Food insecurity is a reality for many, whose mounting debts are still unpaid and income volatility is high. Social relationships have both provided for and become strained due to the toll that the pandemic has taken on individuals and communities.

Closure of international borders, lack of governmental aid and limited support from the international community have further magnified the issues due to COVID-19. As the pandemic continues, the negative impact on sectors like education, mental health, gender equality, access to primary healthcare, security & violence, access to information, food security & agriculture, livelihoods & informal sector, among others has started to become evident.

Most decisions require trade-offs, as delivering on one can mean jeopardising the other, particularly for majority of the population who survive on low incomes and have minimal access to support. Public, private and third-sector responses must navigate these stark choices, recognising if they are unable to help their vulnerable populations survive both the public health and economic crises, progress could be handicapped for a generation.

**OSIWA** has partnered with **Dalberg** to conduct a mixed methods study to understand the social, economic, financial and psychological impacts of COVID-19 on low and middle income people in Mali, Niger, Burkina Faso, Côte d'Ivoire, Ghana and Senegal as well as the reach and efficacy of policy and programmatic support targeted at these communities.

Our study builds on and improvises the mixed methods research methodology evolved during similar work in Nigeria and Kenya in April-May 2020. For this study, we conducted the following across all 6 countries:

- In-depth remote Human Centred Design (HCD) interviews with 74 participants
- Macro analysis of existing programmatic and policy responses, reports and surveys on the impacts of COVID-19
- *Phone-based survey, to test emerging findings and insights, with a nationally representative sample*
- *Expert interviews with NGOs/CBOs*

Our hope is that by capturing representative human stories backed by data, and identifying unmet needs, we can inform OSIWA's decision making process and engagement across West Africa and compel a compassionate and effective policy and programmatic response across the national and international community.

**We structured our research around four main thematic areas**, for which we generated findings, insights, and programmatic policy recommendations:

- Financial health & livelihoods
- Awareness & access to support services
- Attitudes & psychological wellbeing
- Programmatic/policy gaps & best practices

**However, we believe there are opportunities and scalable interventions that can support many low and middle income people survive this crisis.** We hope the outputs of this study can play a pivotal role in helping ensure that both the response and recovery is anchored on the needs of the many vulnerable in our society.

## 2. Research methods



Human Centred Design (HCD)

+



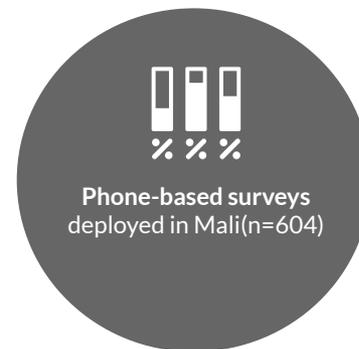
NGO/CBO interviews

+



Review of policies/programmes

+



Phone-based surveys

### RESEARCH THEMES

#### 1. Financial health & livelihoods

We explored the impact of COVID-19 on people's financial health, including changes in people's financial behaviors and attitudes since the crisis began; the drivers of income loss and impact on livelihoods; and strategies to cope (e.g. borrowing, new income generation, relocation, cost-cutting, risky behavior like theft, gambling).

#### 2. Awareness & access to support services

We mapped awareness of and access to health services and information; economic and financial support programmes; schooling and education programmes; needs, capability, behaviours, and preferences of vulnerable people across different types of support services; and trusted people/channels for disseminating information during the crisis.

#### 3. Attitudes & psychological wellbeing

We assessed pervasive attitudes towards different aspects of the pandemic response; the effect of the crisis on mental health; potential drivers of poor mental health such as time poverty, overcrowding, anxiety, community unrest, and gender-based violence.

#### 4. Programmatic/policy gaps & best practices

We identified public, private and third-sector response and corresponding gaps; local or international best practices that could be scaled; and broader macro-economic trends and sector-specific pressures that are likely to shape the crisis in the months ahead.

# 3. Mali

Country overview & insights summary

# Mali overview

## COUNTY PROFILE

Population size: 19.66<sup>[1]</sup>  
 % Urban population: 43.14<sup>[2]</sup>  
 % Rural population: 56.86<sup>[3]</sup>

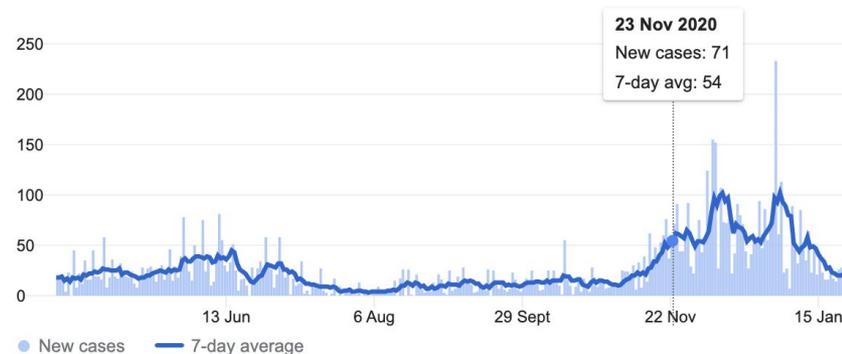
Health spending per capita:  
 34.95USD<sup>[4]</sup>  
 Physicians per 1000: 0.129<sup>[5]</sup>

Labor force: 7.6M<sup>[6]</sup>  
 % Unemployment: 7.34<sup>[7]</sup>  
 % Employment in agriculture: 62.26<sup>[8]</sup>  
 % Employment in industry: 7.57<sup>[9]</sup>  
 % Employment in service: 30.17<sup>[10]</sup>

## GOVERNMENT FISCAL POLICIES <sup>[11]</sup>

- 1) Setting up of initial budget of XOF6.3 billion to fight against the Coronavirus pandemic.
- 2) The government has updated its medical response plan to prevent the spread of COVID-19 and strengthen its medical care capacity, in collaboration with the World Health Organization, now costed at about 0.6 percent of GDP (including bonuses to health workers), and the World Bank in terms of medical equipment (respirators, quarantine facilities, etc).
- 3) a special fund to provide targeted income support and a mass distribution of grain and food for livestock to the poorest households,
- 4) The supply of electricity and water free of charge to the consumers in the social tranche for the months of April and May 2020,
- 5) 3-month exemption from VAT on electricity and water tariffs, and a 3-month exemption from customs duties on the import of basic food (rice and milk).
- 6) A package of economic measures was also launched to ease liquidity constraints on ailing firms, including an SME-support guarantee fund, clearing the budget spending float, granting tax deferral and relief to ease liquidity constraints on the hardest-hit companies, especially in the hospitality sector (hotels, restaurants, transportation).

[12] Mali Covid-19 data as of the completion of HCD research



Location	Cases ↓	Recovered	Deaths
 Mali	<b>7,983</b> +18	<b>5,717</b> +12	<b>323</b> +0

[1]United Nations Population Division, World Population Prospects: 2019 Revision.  
 [2]United Nations Population Division, World Urbanization Prospects: 2018 Revision.  
 [3]World Bank staff estimates based on the United Nations Population Division's World Urbanization Prospects: 2018 Revision.  
 [4]World Health Organization Global Health Expenditure database (apps.who.int/nha/database).  
 [5]World Health Organization's Global Health Workforce Statistics, OECD, supplemented by country data.  
 [6]Derived using data from International Labour Organization, ILOSTAT database. The data retrieved in June 21, 2020.  
 [7]International Labour Organization, ILOSTAT database. Data retrieved in September 20, 2020.  
 [8]International Labour Organization, ILOSTAT database. Data retrieved in September 20, 2020.  
 [9]International Labour Organization, ILOSTAT database. Data retrieved in September 20, 2020.  
 [10]International Labour Organization, ILOSTAT database. Data retrieved in September 20, 2020  
 [11]<https://www.imf.org/en/Topics/imf-and-covid19/Policy-Responses-to-COVID-19#M>  
 [12] JHU CSSE COVID-19 Data

# Mali insights summary

## FINANCIAL HEALTH & LIVELIHOODS

- 1** **INCOME LOSS** - COVID-19 has compounded the loss of livelihood caused by prolonged periods of instability across the country. Many households have lost up to 90% of their income due to lost jobs, reduced wages, disruptions in supply chains and passing trade, and a hostile environment for NGOs and CBOs.
- 2** **MISTRUST IN FORMAL FINANCE** - COVID-19 restrictions have resulted in many smaller financial institutions defaulting or restricting withdrawal amounts. This failure of small finance institutions has eroded people's trust in formal finance systems and jeopardized regular savings and withdrawal behavior.
- 3** **CHALLENGES FACED BY MSMEs** - Small businesses have experienced heavy losses due to decreased customer traffic, increased costs of commodities, and fear of exposure to COVID-19. The lack of economic support and limited access to personal protective equipment while having to comply with COVID-19 guidelines further exacerbates their challenges.
- 4** **CONSUMPTION EXPENDITURE** - To cope with reduced income and depleted savings, people are shifting to a more conservative lifestyle, decreasing their food intake, and curbing expenses on essential services like healthcare.

## AWARENESS & ACCESS TO SUPPORT SERVICES

- 5** **ACCESS TO HEALTHCARE** - High burdens and restrictions on health facilities during the pandemic, limits on the number of appointments, along with the fear and stigma of being diagnosed with COVID-19, have deterred many people from accessing healthcare.
- 6** **TRUSTED CHANNELS** - People see the government as a reliable source of information on COVID-19 precautions, as interventions support the precautions. However, there is little trust in the government's economic announcements, which many regard as empty promises. Most people seek out their information through TV and radio and rely on their community peers, even though this contributes to the spread of misinformation.

## ATTITUDES & PSYCHOLOGICAL WELL-BEING

- 7** **IMPACTS OF SCHOOL CLOSURE** - School closures due to COVID-19 have increased the likelihood of children, particularly girls, permanently dropping out of the education system because there are minimal opportunities to continue learning outside the school environment. Schools also serve as a source of nutritious meals, and closures have increased the risk of hunger, too.
- 8** **LOSS OF DIGNITY** - Income earners are no longer able to support their families and communities due to financial pressures during the pandemic. This inability to help loved ones has led to deteriorating mental and emotional health, self-esteem, and relationships.
- 9** **SOCIAL DYNAMICS** - Restrictions on community gatherings and social customs central to life in Mali have led to social tensions, challenges in keeping youth engaged, and reduced pastoral care and community support with no alternative ways to fill these gaps.
- 10** **PSYCHOSOCIAL SUPPORT** - As people continue to face financial pressure, their stress and anxiety levels have increased. In the absence of direct support from the government and NGOs and little hope for economic recovery, many people have turned to their religious faith and, where feasible, family support to tide through.

# Opportunities summary

## FINANCIAL HEALTH & LIVELIHOODS

**How might we foster existing relationships and grassroots groups to ensure that the government's social protection measures are fairly distributed and equitable?**

**How might we better rebuild trust between low-income households and formal finance, ensuring it is accessible and their finances well protected during the economic downturn?**

**How might we better facilitate a wider group of low-income households to access available government support and benefits?**

- Revisit and adjust tax allowance bands, ensuring support packages are well suited to the recipients.
- Continue to provide unconditional cash transfers or food packets to vulnerable communities?
- Strengthen partnerships with NGOs and CBOs to better engage young Malians in community mobilization and implement on-the-ground support.
- Promote financial education to rebuild trust in formal FSPs, through the use of existing community group, highlighting the safeguards that formal financial institutions benefit from to secure people's wealth.
- Reduce or subsidize transaction costs and better communicate transaction costs to incentivize cash transfers among community members.

**How might we facilitate business owners to build customer confidence that there are adequate precautions to ensure their safety is prioritized?**

**How might we better tailor business support packages to increase uptake and reach of the programs?**

- Capitalize on the reach of trade unions and expand MSME networks to facilitate information sharing on COVID safety measures among business owners and disseminate information about available government support schemes.
- Develop sector-specific COVID compliance standards to promote safe practices and build customer confidence through publicly displayed certifications/badges
- Anchor MSME support programs on needs assessments that prioritize MSME challenges and preferred means of support, which will foster the designing of sector-specific financial assistance to support the hardest-hit sectors
- Extend tax payment deferrals or implement a promise to pay policy to improve MSMEs' short-term cash-flow and explore concessional loan packages, such as:
  - Cash loans with a grace period, lower interests, and structured payback mechanisms (e.g., payment through buying back goods produced)
  - Alternative models of guaranteeing payback for formal finance such as having banks lend to savings groups who then lend onward to informal MSMEs

# Opportunities summary

## AWARENESS & ACCESS TO SUPPORT SERVICES

**How might we increase equitable access to healthcare support, foster trust between health officials and marginalized communities while strengthening pre-existing channels of support?**

**How might we better promote reliable information, ensuring hard to reach communities and underserved demographics have access to accurate information about COVID-19?**

- Decentralizing health care services to increase health workers' capacity and access to remote care, which might include the creation of escalation facilities/protocol from primary healthcare points such as pharmacies and mobile clinics
- Enhance messaging by selecting communication channels based on demographic characteristics to tailor information to their specific needs.
- Support trusted communication channels to spotlight other accessible and credible channels, for example, using TV to direct people to a toll-free hotline, or a specific organization
- Establish informal, public forums that comply with covid measures to address questions, facilitate constructive discussions and engage knowledgeable actors.

**How might we promote better coordination amongst development actors to minimize wastage in support delivery and ensure unified messaging is circulated at the community level?**

- Align on messages with other partners to reinforce critical themes and avoid confusion within the community
- Create feedback loops to monitor progress and track challenges as they arise, potentially through interactive channels such as radio programs, socially distanced public debates, or mobile hotlines
- Design public messaging to cater to underserved groups, such as reformatting materials for people with disabilities or having tailored discussions for people who cannot read

# Opportunities summary

## ATTITUDES & PSYCHOLOGICAL WELL-BEING

**How might we equip communities with adequate resources to provide psychosocial support and mitigate the impacts of COVID-19?**

**How might we support existing social dynamics and hierarchies to better foster community and household cohesion during a period of heightened tension?**

- Engage youth, women, men, and community leaders equally to understand social complexities and involve them in mapping possible solutions to encourage safe socio-cultural relations
- Provide free mental health support services for persons in high-stress roles, such as heads of households and community health workers (front line and non-front line)
- Identify contact points to connect GBV survivors with support services in light of movement restrictions. These could include pharmacies, handwashing stations, or female latrines for communication on helplines
- Train frontline workers on psychological first aid and referrals they can offer to people suffering from poor mental health upon disclosure

**How might we ease the transition of children returning to school and a keen emphasis on girls who have the highest chances of being left behind?**

**How might we ensure parents are well equipped to manage school closures' potential psychological impact on children?**

- Promote alternative learning environments, such as using mobile vans with pre-recorded messaging to educate children in public spaces while complying with social distancing or providing solar-powered radios for remote learning.
- Educate communities on the merits of children's return to school to encourage re-enrollment through 'back-to-school' campaigns
- Advocate in favor of women and girls' continued education and capacity building programs that support vulnerable groups' empowerment, such as girls who are pregnant or married young.
- Mobilize government or donor funding for virtual or covid-compliant youth development programs to upskill youth through peer training or drawing from the wider community's knowledge/expertise.
- Develop community-wide campaigns to shift attitudes towards social distancing measures. For example, celebrating students who comply with preventive and social distancing measures as 'Covid Champions' keeps their friends and loved ones safe.

# 4. Mali

Insights & opportunities

**INCOME LOSS**

**COVID-19 has compounded the loss of livelihood caused by prolonged periods of instability across the country. Many households have lost up to 90% of their income due to lost jobs, reduced wages, disruptions in supply chains and passing trade, and a hostile environment for NGOs and CBOs.**

## High Unemployment Rate

Even before people started to experience the full economic effects of COVID-19 in Mali, the employment outlook was bleak. Lockdowns and supply chain disruptions during the pandemic have led to a further sharp increase in job losses across the country.<sup>[1]</sup> Trade and services - which employ 83% of people in urban areas, predominantly low-income women and youth with low savings - have seen a particularly adverse impact.<sup>[2]</sup>

## Impact on Agriculture

Agricultural production and pastoralism, which already suffered losses due to armed groups and inter-community clashes,<sup>[3]</sup> have been further affected by COVID-19 regulations. Between 60 to 80% of opened agricultural and pastoral markets, respectively, were not functioning correctly due to movement restrictions.<sup>[4]</sup> The livestock sector has seen a decline in exports due to border closures, restrictions of movement on traditional transhumance routes, and deterioration of terms of trade, leading to a loss of income, employment, and access to food. Supply chain disruptions have caused sellers to increase food prices, making essential commodities, like rice and oil, less available to low-income households.

## Support Channels

NGOs and aid organizations supplement gaps in state-funded initiatives and employ many young educated Malians. However, people noted that these organizations have limited their operations or wholly withdrawn due to political instability. Without this employment and financial support source, it has been even more challenging for people to endure the COVID-19 crisis.



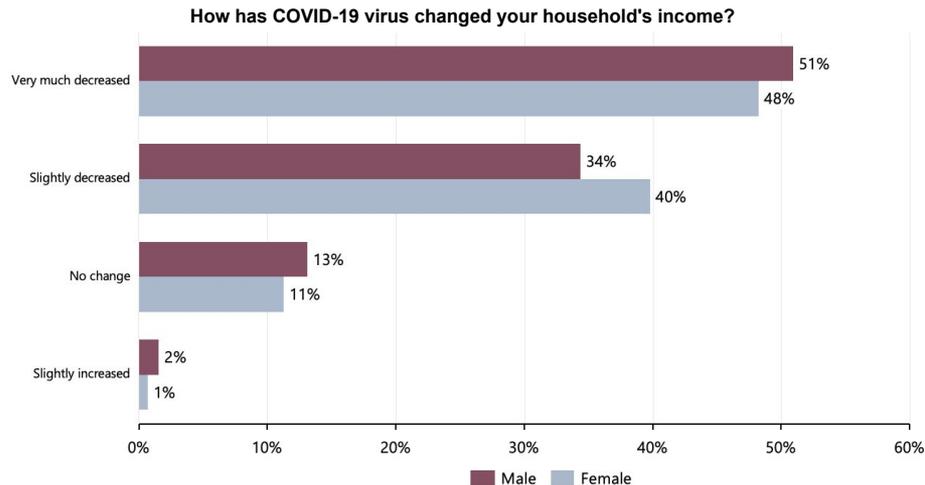
[1, 2] UNDP, *Rapid analysis of socio-economic impacts of COVID-19 Mali*, May 2020

[3] UNU-MERIT, "Labour market effects of COVID-19 in sub-Saharan Africa: An informality lens from Burkina Faso, Mali and Senegal", May 2020

[4] Clingendael, "COVID-19 impact on West African value chains", June 2020

*“I usually sell more [goods] during the holidays, but unfortunately this year, I didn’t make more or sell more because of the travel bans.”*

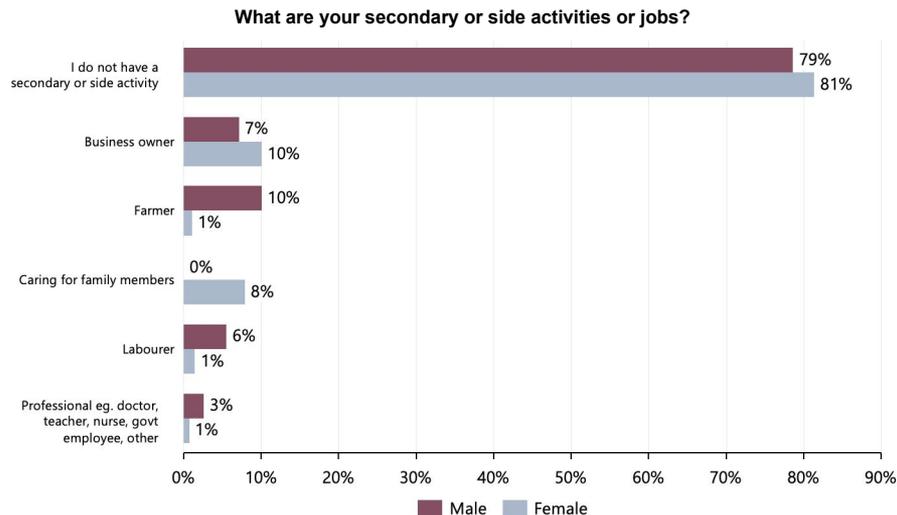
Nana, 26 years old, Female | Trader | Urban, Bamako, Mali



## HOUSEHOLD INCOME LOSS

A stark majority of households are earning substantially less than they did before the pandemic. Overall, 85% of men and 88% of women have reduced household income.

International trade and travel bans and domestic movement restrictions have interrupted the movement of goods and services. In addition to reduced incomes, **many Malians do not have secondary economic activities** to cushion their ongoing economic losses. **79% of men and 81% of women do not have secondary jobs.** Some women have the added burden of being a caregiver in addition to their primary activity.



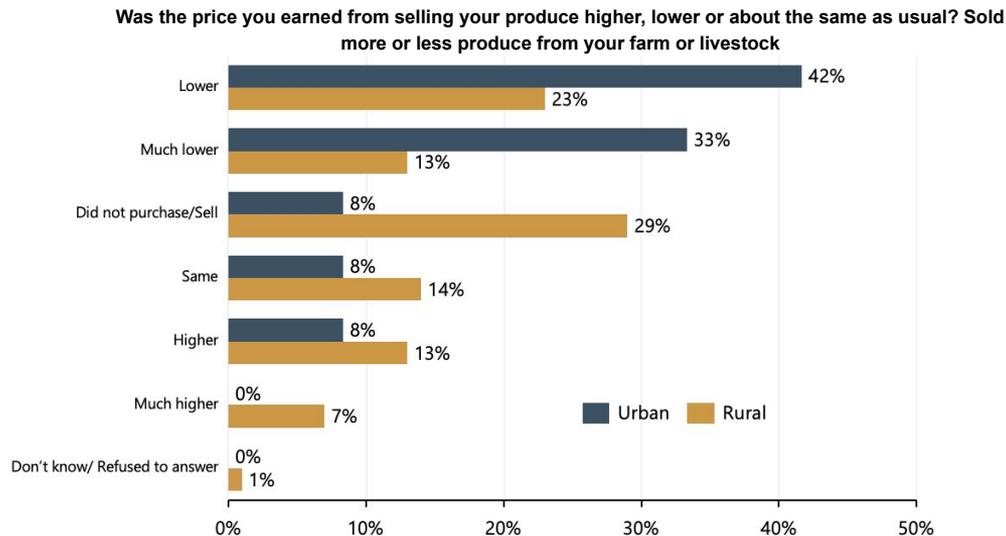


*“Before the pandemic, I used to make at least 60-75k CFAF per month, but now we are suffering because of COVID...The income in the job I'm doing now is not profitable enough to meet all my expenses at this moment. I don't just want to sit and wait for support. I'm willing to do any other jobs that...would help me cover my bills.”*

Djeneba, 26 years old, Female | Mobile money agent | Rural, Mopti, Mali

## AGRICULTURAL MARKET PRICES

Urban farmers are grappling with lower prices, while rural farmers can either sell or face lower prices. 76% of urban farmers are selling their produce/livestock at lower prices than 36% of rural farmers. Meanwhile, 65% of rural farmers sell their harvests at lower prices (39%) or not selling their products altogether. (29%)





*“When people from other countries come to buy our harvest, we sell a bag for 30k CFAF, and sometimes even the NGOs will come to us to buy once we have harvested. Now, since all the borders have closed and the NGOs can't come anymore because of the terrorists, we are forced to sell just in our local community, and the best we can get is 10k CFAF.”*

Salif, 38 years old, Male | Farmer | Rural, Mopti, Mali

## A GENDER PERSPECTIVE

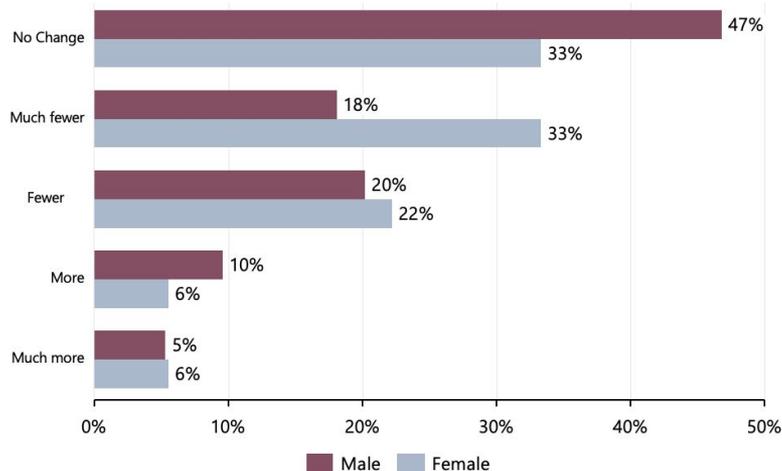
### Some women are compensating for reduced sales

**quantities by increasing their prices.** Most women are selling less produce, but form the majority of few farmers securing higher prices. 55% of women are selling lower amounts of produce vs. 38% of men. 29% of women are getting higher prices vs. 15% of men.

### On the other hand, some men are reducing prices to ensure sales and maintain their income.

Most men are not experiencing changes in sales; however, they are also accepting lower prices. 47% of men are selling the same quantities as before the pandemic. Also, 43% of men are selling their produce at lower prices.

As a way to cope with the COVID-19 virus, has your household had to do any of the following farm activities differently from how you would normally have done them? Sold more or less produce from your farm or livestock





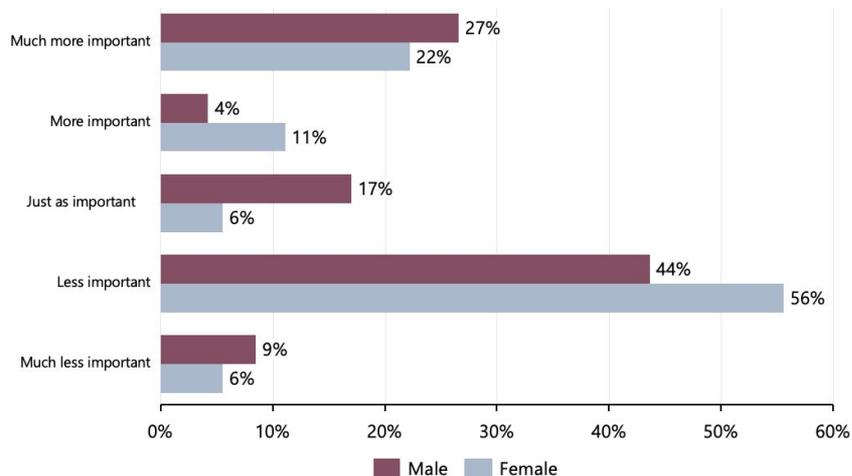
*“Farmers are the last to receive anything from the government in such situations like COVID-19. We haven't received any support.”*

Baba, 50 years old, Male | Farmer | Rural, Mopti, Mali

## SHIFTING PRIORITIES

In general, it appears that people are moving away from agriculture as an income earner, more so among rural households. 62% of women and 53% of men shared that since the first case of covid was reported, farming has become less important as a source of livelihood for their family

Since (first case of COVID was reported) has farming become more, less or remained just as important as a livelihood for your family?



***“Before COVID and now, they are not the same. Due to COVID, we are having a lot of issues with fertilizers. The people who supply us these products are also struggling to bring them into the country.”***

Salif, 38 years old, Male | Farmer | Rural, Mopti, Mali

38-year-old Salif has been a farmer most of his life. Although he also owns a metal workshop, Salif considers farming his primary source of income. Of the roughly 20 hectares that he grows crops, he sells a quarter and uses the rest to feed his family, including his five children.

In the past few years, Salif has relied on an NGO to help store his crops and access inputs, a significant source of help. Mali's hostile political environment has made NGOs' intervention challenging, and now, with the closed borders due to the pandemic, it has become even more challenging. Salif explains, "The NGOs didn't come to buy our crops last year because of the terrorist around us, but this year they couldn't come because of COVID. All my crops are just going to waste, and I also can't farm the rest of my land because I don't have the money."

The restrictions have resulted in difficulties importing inputs and accessing international markets to export goods. Salif now sells his crops at the local market, for a third of the price he would typically get for selling his produce internationally, and is struggling to make ends meet.



***“I used to work on a consultation basis for a lot of NGOs, especially when they had research projects. For example, once I worked for 20 days and earned approx 500k CFAF. Now, I will work the whole month, and I can't afford my 50k CFAF rent.”***

Youssouf, 32 years old, Male | Security guard | Urban, Bamako, Mali

Youssouf is a 32-year-old security guard at a factory on the outskirts of a big city. He lives with his brother and has no children or partner of his own. Youssouf has a degree in public law and used to work as an enumerator for NGOs doing research. With the money he earned, Youssouf was able to care for himself and his extended family.

However, Youssouf's work as an enumerator was on a contractor basis, and he was not guaranteed a regular income. Youssouf's income had been affected by the past political crisis, but the pandemic made him realize that he needed to find a more steady job. He says, "I'm willing to do anything now to fill this gap as long as it doesn't mean that I am committing a crime. This is why as a graduate, I am willing to take this job as a security guard even though it is below me."

Youssouf believes that his job as a security guard has helped him maintain some dignity during the pandemic. Still, the pay is much less than his previous career. He has had to rely on his family like never before, can barely cover his rent, and worries about his future.



## MISTRUST IN FORMAL FINANCE

**COVID-19 restrictions have resulted in many smaller financial institutions defaulting or restricting withdrawal amounts. This failure of small finance institutions has eroded people's trust in formal finance systems and jeopardized regular savings and withdrawal behavior.**

### Decline of remittances

Remittances are a significant lifeline for many in Mali, representing a little over 5% of the country's 2019 GDP<sup>[5]</sup> and are a reason for people to engage with formal Financial Service Providers (FSPs). Remittances to sub-Saharan Africa are expected to decrease by over 20% in 2020 due to the pandemic,<sup>[6]</sup> with many migrants losing their jobs and several money transfer operators forced to close. The loss of income from remittances, combined with widespread loss of livelihood and people's inability to make deposits in financial institutions, have resulted in banks defaulting or restricting their withdrawal amounts.

### Dwindling trust in FSPs

This failure of financial institutions has led to a significant distrust in formal FSPs. Before COVID-19, saving in Microfinance Institutions (MFIs) was a prevalent behavior in Mali. MFIs served to build up trust in formal FSPs, and people viewed them as a stepping stone to the rest of the financial system. COVID-19 has changed people's financial behavior, and many have shifted to saving money through alternative means such as a physical money box or family savings group.

### Interventions

Aware of the lower utilization of banks and people's need for cash in hand, the government has implemented an agreement with banks to allow civil servants and select private company employees to go into overdraft.<sup>[7]</sup> However, this intervention does not apply to all workers. With 73% of Mali's economically active population working in the informal economy,<sup>[8]</sup> most people are left behind.



[5] Wageningen University & Research and Royal Tropical Institute, "Rapid country assessment: Mali. The impact of COVID-19 on the food system", July 2020

[6] UNDP, "Rapid analysis of socio-economic impacts of COVID 19 Mali", May 2020

[7] Dalberg analysis, 2020

[8] International Labour Organization, "Employment-Intensive Investment in Mali", 2020



*“I use Orange Money for my work in the workshop and to work with my clients, but after the money is in the account, I withdraw it and put it in my money box...I have had to start using the savings money box because of the reduction in income.”*

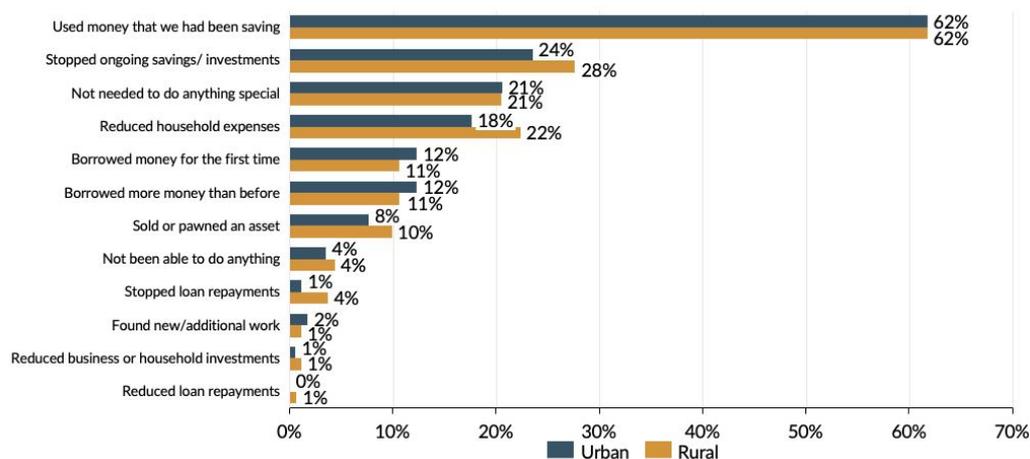
Soumaila, 25 years old, Male | Micro entrepreneur | Rural, Mopti, Mali

## RELIANCE ON FINANCIAL SYSTEMS

Most people are leaning on their savings to cope with the disruptions brought about by COVID-19. **62% of urban and rural respondents reported having used the money saved to cope with the COVID-19 situation.**

Anecdotal evidence on the closure of microfinance institutions and the introduction of withdrawal limits relays how much more vulnerable many Malians are; at best, they can only access partial amounts of their savings and investments.

As a way to cope with the COVID-19 situation, have you or anyone in the household had to do any of the following



***“I have a microfinance bank account, but since COVID, a lot of these accounts have shut, and now many people have lost a lot of money. I lost about 75k CFAF in the microfinance bank.”***

Soumaila, 25 years old, Male | Microentrepreneur | Rural, Mopti, Mali

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***“I don't have a bank account, and I'm not in a savings group because to save money, I first have to be able to cover my daily expenses I can't even do that at the moment, so how can I save in a bank or a group? The little money I save is in my moneybox”***

Djeneba, 26 years old, Female | Mobile money agent | Rural, Mopti, Mali

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***“Sometimes with the work, it is difficult to give you an exact amount I earn. There are some weeks where I don't earn anything, so I save my money through my mobile phone, and I use a small box in my house that is my savings account now it works for me better than any bank.”***

Soumaila, 25 years old, Male | Microentrepreneur | Rural, Mopti, Mali



### CHALLENGES FACED BY MSMEs

**Small businesses have experienced heavy losses due to decreased customer traffic, increased costs of commodities, and fear of exposure to COVID-19. The lack of economic support and limited access to personal protective equipment while having to comply with COVID-19 guidelines further exacerbates their challenges.**

### Lockdown and restrictions

MSME owners in Mali typically have meager earnings and often rely on their daily sales and profits. With the outbreak of the pandemic and the subsequent restriction on people's movement, their businesses have experienced lower sales and less passing trade, hence a decrease in earnings. Lockdowns and regulations have had a particularly adverse impact on the service industry, especially the hospitality, transport, and tourism sectors, and the significant number of people working in trade across borders.<sup>[9]</sup>

### Limited access to information

MSME owners have not been given either equipment or advice on precautions to function safely and fear opening their businesses because of this. Most end up finding their workarounds or relying on suggestions from fellow MSMEs on best practices to take. Without sufficient precautions, customers, too, stay away from businesses for fear of getting infected.

### Limited avenues for support

With banks closing, reduced revenue, and exhausted borrowing sources, MSMEs' access to rolling credit has been depleted too, yet government relief interventions have primarily focused on big businesses, such as hotels, and have excluded MSMEs. The low volume of activities and profits that characterizes VSEs and SMEs does not guarantee them access to and benefit from measures that tend to be tailored to more prominent companies with larger industrial and commercial profit<sup>[10]</sup> and leave out the businesses most in need.

<sup>[9]</sup> Dalberg analysis 2020

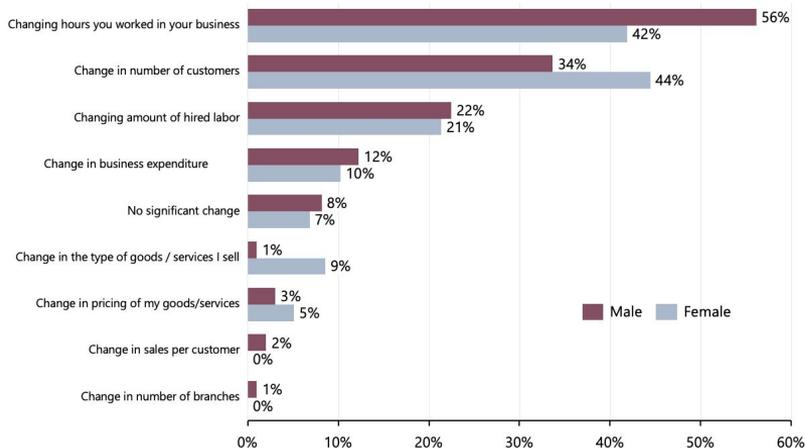
<sup>[10]</sup> UNDP, "Rapid analysis of socio-economic impacts of COVID 19 Mali", May 2020



*“I don't have many clients [at my workshop] now. People don't have as much money, and the cost of my materials has also increased.”*

Soumaila, 25 years old, Male | Microentrepreneur | Rural, Mopti, Mali

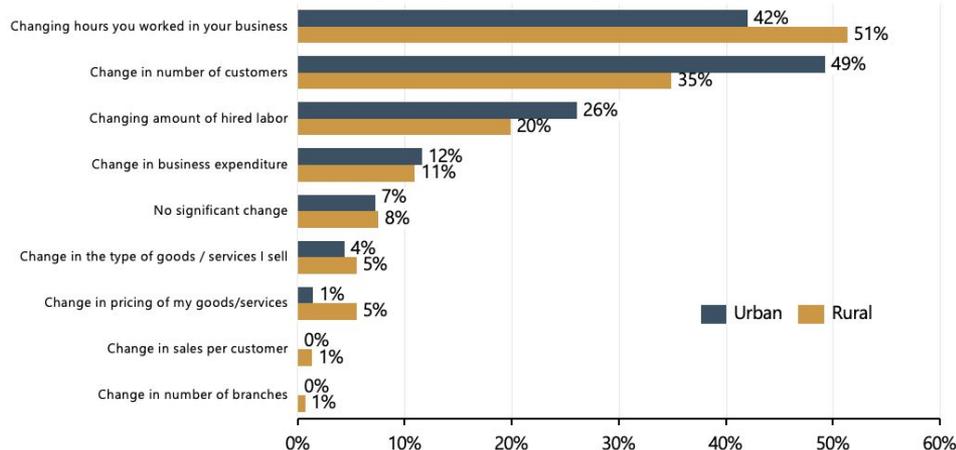
Which of the following changes have been significant for your Business?



## MSME CHALLENGES

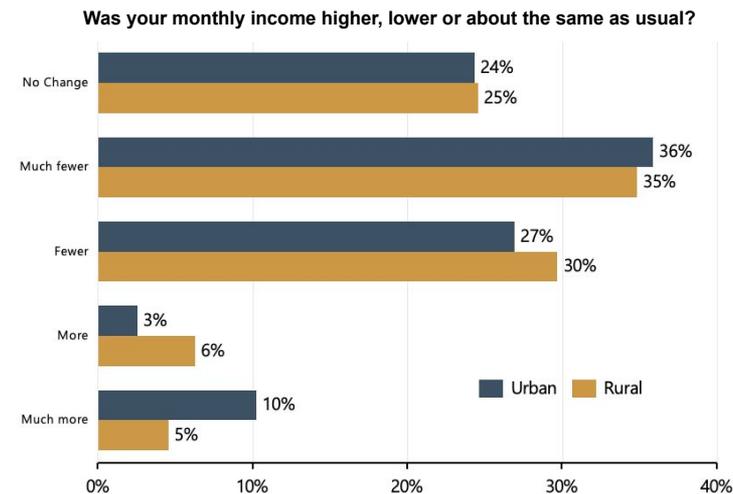
Changes in the number of customers are among the top two significant shifts to business owners. The adjustments to working hours have been most notable for **56% of men**, while the change in customers' behavior has been most significant for **44% of women**. These customer behavior shifts also significantly impacted urban business owners, while the difference in working hours has been most pertinent for rural respondents.

Which of the following changes have been significant for your Business?



## INCOME REDUCTION

**Similar proportions of rural and urban businesses had reduced monthly incomes.** 79% of urban businesses reduced income vs. 72% of rural businesses. Among these, a slightly higher proportion of urban businesses reported "much lower" monthly revenues. **More rural businesses have increased monthly business expenditure compared to urban businesses.** 48% of urban businesses had increased spending vs. 56% of rural businesses

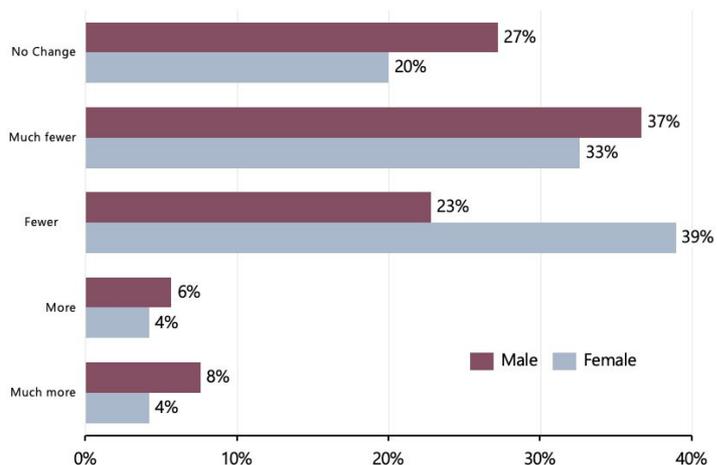


**Women's businesses have been harder hit by reduced income.** A total of 77% of women reported a lower or much lower income since the pandemic began, compared to 65% of men. This may be explained by factors including women's involvement in more vulnerable sectors and women having to devote more time to household responsibilities.

*"I have really been affected [by the pandemic] because I trade food. I have not been able to sell my food as people have been discouraged from buying it due to the safety measures."*

Baratio, 30 years old, Female | Small business owner and homemaker | Urban, Mali

**Was your monthly income higher, lower or about the same as usual?**



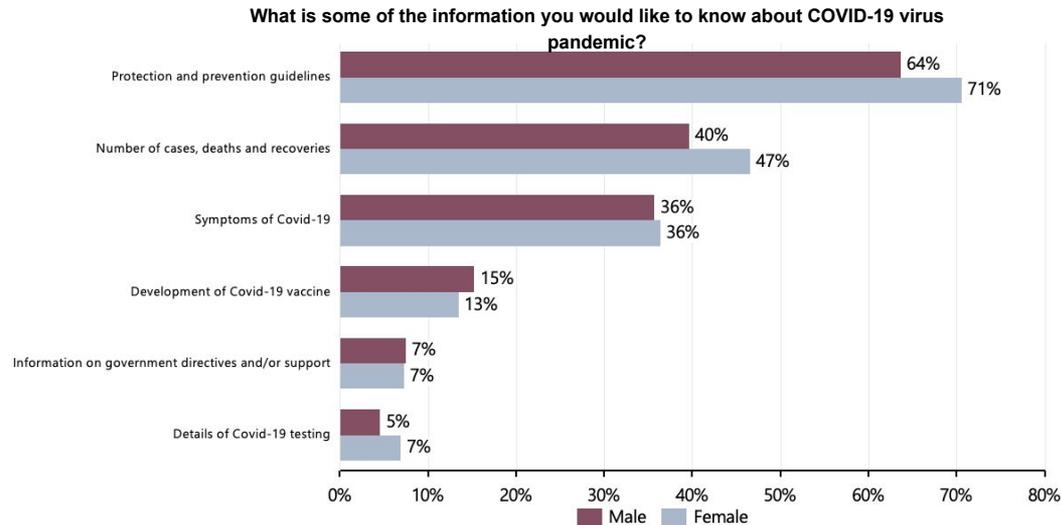


*“I tried to push my customers to follow the safety measures as explained on TV and radio. I am lucky that many of my clients were aware of those measures such as washing hands and covering noses.”*

Sory, 29 years old, Male | Small business owner | Rural, Mopti, Mali

## ACCESS TO INFORMATION

**Business owners and consumers have a shared desire to learn about preventive and protective measures.** 71% of women and 64% of men reported that information they would like to get about the COVID-19 pandemic is on protection and prevention guidelines, compared to 64% of men. Anecdotes from business owners reflect a keen desire to learn about building confidence through measures to protect themselves and their customers from COVID-19.



***“The government directly didn't give me any instructions, but I noticed that people are generally sharing information to prevent the disease. All barbershops around me were doing it.”***

Abdoulaye, 28 years old, Male | Rural, Mopti, Mali

Abdoulaye is a barber in rural Mopti, serving his close community. He began training as a young apprentice and has now been a barber for several years. Abdoulaye shares that he has faced many difficulties due to the pandemic, and it has jeopardized his business. Before COVID-19, he used to welcome many customers simultaneously, and his shop was almost like a community hub. But once the pandemic began, he noticed that clients were afraid even to enter the shop. Abdoulaye was not given explicit instructions to shut down his shop, but business was so slow that he had no other choice.

The government did not provide Abdoulaye or his peers with any information on keeping businesses operational. Instead, Abdoulaye observed what other barbershops in the area were doing and took the initiative to copy their safety measures. Now, when clients arrive, he asks them to wash their hands with soap. He admits that this measure is not perfect, but it is these details that increase customer confidence. He said, "I need more seats, machines, and a hygiene campaign for disinfection...to motivate clients to come to my barbershop. And this support could come from the government and NGOs."



### CHANGE IN CONSUMPTION EXPENDITURE

**To cope with reduced income and depleted savings, people are shifting to a more conservative lifestyle, decreasing their food intake, and curbing expenses on essential services like healthcare.**

### Social Safety Nets

Already in Mali, 81% of the workforce is in vulnerable employment.<sup>[11]</sup> These workers are typically excluded from social security schemes and not reached by government interventions. Social safety nets are further dwindling as a result of the pandemic. Pre-pandemic, there were 760,000 people in need of food assistance, and this is expected to increase by 77% due to COVID-19.<sup>[12]</sup> The government's relief measures, such as free electricity and water to low-income households, have been insufficient, and fail to address people's most significant needs, primarily food.

### Support from family

People with limited social safety nets typically rely on their extended family and community for support in times of need. However, with everyone facing the same income loss and food insecurity due to COVID-19, these credit lines are no longer accessible. To cope, most people have resorted to spending their savings, which were limited to start with, or relying on the goodwill of the few family and community members who can afford to provide some food or money.

### Change in consumer behavior

Most of all, people have been left to make do with their meager resources. People reported cutting down the amount of food they ate, limiting their spending, and stopping any "unnecessary" expenses. For some, this means no longer being able to give pocket money to their children; for others, it means stopping their education. Under immense financial strain, even healthcare services are now seen as a luxury, with people relying on traditional medicines instead of spending money at a hospital.

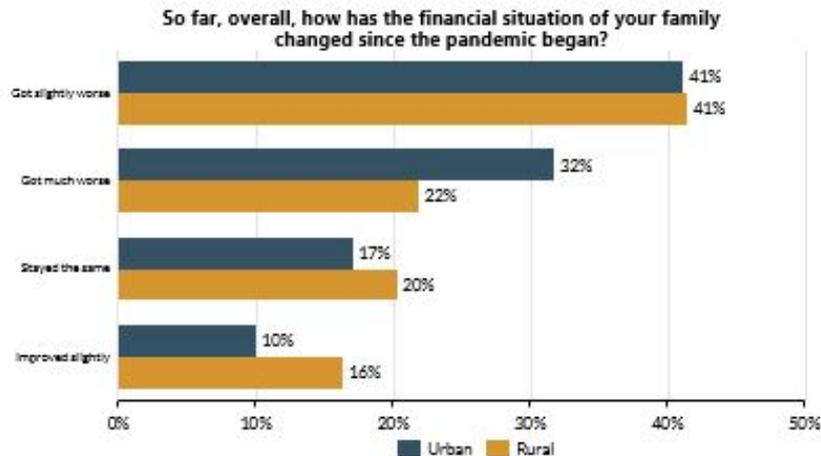


[11] ECOWAS, *Humanitarian and Social Indicators 2019*, via Dalberg analysis.

[12] UNDP, "Rapid analysis of socio-economic impacts of COVID-19 in Mali," May 2020.

*“When my wife fell ill, I didn't have any money to bring her to the hospital. My wife's condition worsened, and I had to run around to borrow money...It will be a serious difficulty [if things continue this way], I won't be able to feed my family and provide for them.”*

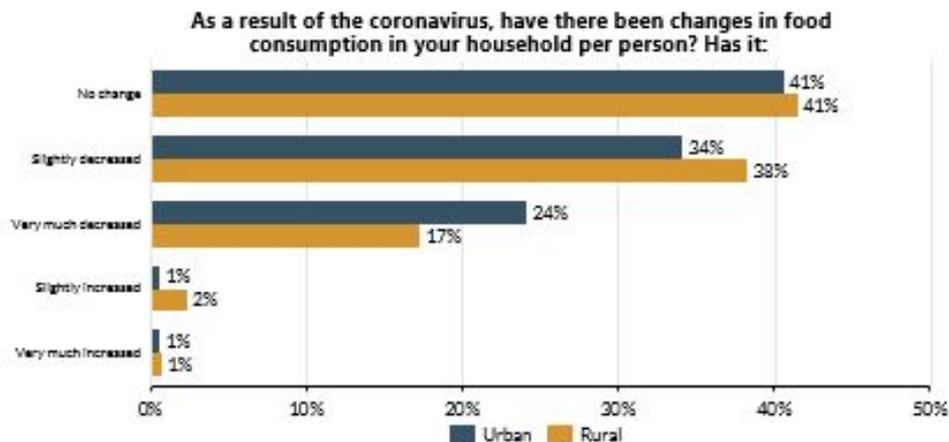
Traore, 34 years old, Male | Farmer | Urban, Mopti, Mali



## REDUCED CONSUMPTION ON BASIC GOODS

Financial situations have worsened mainly, with a broader impact among urban families. 73% of urban respondents say their family's financial situation has declined, vs. 63% of rural respondents.

Urban and rural households have decreased their food consumption. 58% of urban respondents and 55% of rural respondents say they reduced food consumption in their homes. Covid-related hardship has reduced nearly two-thirds of Malians' ability to meet their basic needs.





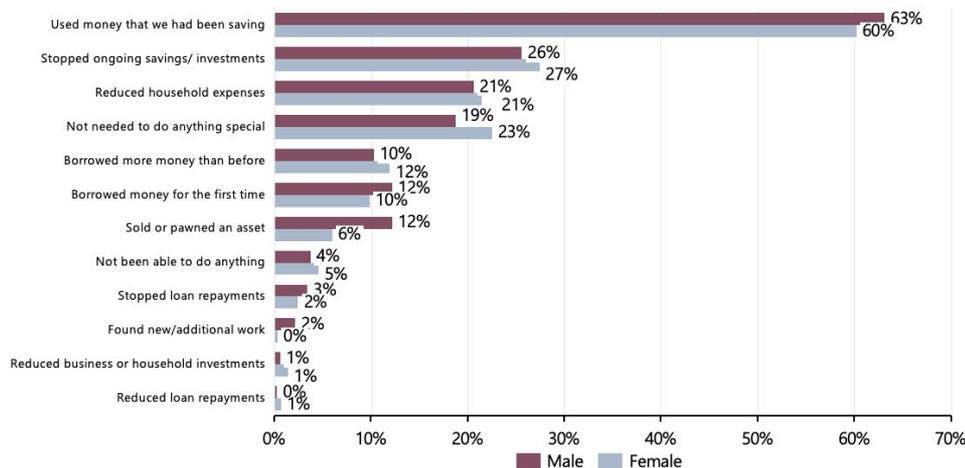
*“When my wife fell ill, I didn't have any money to bring her to the hospital. My wife's condition worsened, and I had to run around to borrow money...It will be a big difficulty [if things continue this way], I won't be able to feed my family and provide for them.”*

Traore, 34 years old, Male | Farmer | Urban, Mopti, Mali

## COPING MECHANISMS

About one-fifth of Malians reduce their household expenditure to cope with the shifts brought about by the COVID-19. 21% of men and women are cutting down their household costs to adapt to the more challenging economic times. However, rather than cut costs, most families opt to supplement their incomes by depleting their savings or pausing investments. **60% of women and 63% of men** reported to have used money that had been saved as a way to cope with the COVID-19 situation.

As a way to cope with the COVID-19 virus situation, have you or anyone in the household had to do any of the following



***“The reduction in my income has meant that the little money I used to give to kids to buy food when they were at school, I no longer can.”***

Baratio, 30 years old, Female | Small business owner | Urban, Mali

Baratio is a petty trader selling homemade food outside children's schools in Kati. She started doing the job to supplement her husband's income and meet her personal needs without depending on her husband.

At the outbreak of the COVID-19 pandemic, Baratio was affected almost immediately. As many parents discouraged their children from buying her food for fear of the virus, the amount she sold dwindled until it ultimately came to a grinding halt when the schools closed. Once schools reopened, Baratio started earning again, but the schoolchildren were buying less, and it was nowhere near the amount of money she used to make.

Baratio has cut out all 'unnecessary' expenses, including healthcare products, from her life. She also had to stop giving her children pocket money or money for food at school, which she said affected them psychologically. Fortunately, she managed to continue sending them to school once it reopened, but her reduced earnings have left her with no other option but to rely on her husband's family and money from community members to sustain the household.



**How might we foster existing relationships and grassroots groups to ensure that the government's social protection measures are fairly distributed and equitable?**

**How might we better rebuild trust between low-income households and formal finance, ensuring it is accessible and their finances well protected during the economic downturn?**

**How might we better facilitate a wider group of low-income households to access available government support and benefits?**

- Revisit and adjust tax allowance bands, ensuring support packages are well suited to the recipients.
- Continue to provide unconditional cash transfers or food packets to vulnerable communities?
- Strengthen partnerships with NGOs and CBOs to better engage young Malians in community mobilization and implement on-the-ground support.
- Promote financial education to rebuild trust in formal FSPs, through the use of existing community group, highlighting the safeguards that formal financial institutions benefit from to secure people's wealth.
- Reduce or subsidize transaction costs and better communicate transaction costs to incentivize cash transfers among community members.

## BEST PRACTICES

Oxfam's Saving for Change (SfC) program allows women to self-organize to form groups to save and borrow loans amongst themselves. The groups set their interest rates and pay out dividends at the end of the saving cycle using the pool of funds collected, including profits from interest and investments. This has allowed them to collectively achieve economic opportunities that would be difficult to pursue individually. Households in certain villages of the Segou region of Mali where Sfc has been implemented now have better food security and own more livestock than other control villages.

Islamic Relief is sending cash transfers via mobile money using MobiCash and Orange Money providers to vulnerable populations because it is a fast, reliable, and cost-effective way of reaching their beneficiaries. The cash transfers give the beneficiaries the flexibility to meet other financial needs beyond food kits.

World Vision sent cash transfers to 3220 households that were directly impacted by COVID-19. World Vision gave each home 30,000 CFA sent through Orange Money and a microfinance institution (RMCR) because it is a secure and fast way to reach beneficiaries, given the locality's insecurity.

*"In reality, the population was suffering, and there was a lack especially among those who carry out daily activities. I work today to ensure the rations for tomorrow, who could not leave their homes, so there was a need for food assistance at this level.."*

Sambou, Islamic Relief | Mali

**How might we facilitate business owners to build customer confidence that there are adequate precautions to ensure their safety is prioritized?**

**How might we better tailor business support packages to increase uptake and reach of the programs?**

- Capitalize on the reach of trade unions and expand MSME networks to facilitate information sharing on COVID safety measures among business owners and disseminate information about available government support schemes.
- Develop sector-specific COVID compliance standards to promote safe practices and build customer confidence through publicly displayed certifications/badges
- Anchor MSME support programs on needs assessments that prioritize MSME challenges and preferred means of support, which will foster the designing of sector-specific financial assistance to support the hardest-hit sectors
- Extend tax payment deferrals or implement a promise to pay policy to improve MSMEs' short-term cash-flow and explore concessional loan packages, such as:
  - Cash loans with a grace period, lower interests, and structured payback mechanisms (e.g., payment through buying back goods produced)
  - Alternative models of guaranteeing payback for formal finance such as having banks lend to savings groups who then lend onward to informal MSMEs

## BEST PRACTICES

World Vision offers cash support to local soap manufacturers by providing 350,000 CFA to each enterprise, promoting micro-entrepreneurship while increasing the supply of soap at lower prices in communities to encourage adoption of preventive practices.

Kafo Jiginew is a credit cooperatives network that supports cotton farmers, artisans, and micro-and small-scale entrepreneurs. In early 2020, Kafo Jiginew accepted a loan of ~USD 10.8million from the EU's European Investment Bank for on-lending through 60,000 loans to 15,000 small-scale agricultural producers, artisans, market traders, and other low-income entrepreneurs, many of whom will be women or rural-based, or both. The loan to Kafo Jiginew carries a term of 7 years, with an 18 month grace period. These funds are expected to support MSMEs through the unprecedented challenges brought by COVID-19 disruptions.

*“I think we need to move immediately towards strengthening the resilience of communities, communities had been paralyzed by the pandemic they need to recover, and for this recovery, we need economic support through income-generating activities..”*

Simon, Director of Humanitarian Affairs, World Vision | Mali

**ACCESS TO HEALTHCARE**

**High burdens and restrictions on health facilities during the pandemic, limits on the number of appointments, along with the fear and stigma of being diagnosed with COVID-19, have deterred many people from accessing healthcare.**

### Focus on COVID-19 patients

When COVID-19 first hit Mali, people were reluctant to go to hospitals and health centers out of fear of contracting the virus and its stigma. As time went on, people's fear reduced, and they began to resume going into health centers. However, many hospitals and medical centers have diverted their resources towards responding to COVID-19, and people reported not being able to access routine services, like free mosquito nets and vaccinations.<sup>[13]</sup> Mali has just 0.6 health personnel for every 1,000 people, and resources are unevenly distributed across regions (for instance, Bamako has nearly 2 staff per 1,000, compared to less than 0.3 in Taoudénit, Sikasso, Gao, and Mopti).<sup>[14]</sup> Even before the pandemic, more than 241 health centers had closed or become non-operational due to insecurity in Burkina Faso, Mali, and Western Niger regions.<sup>[15]</sup> The presence of COVID-19 has only added to the health system's existing burden.

### Alternative treatment options

The closure and repurposing of health facilities during the pandemic have made accessing healthcare more onerous. For instance, people reported having to take a ticket for a consultation, wait in long queues, or go to the facility early in the morning to get guaranteed care and attention. These factors deter people from seeking care at health facilities. People either delay treatment or don't get it at all, with some choosing to rely on traditional medicine or unproven home remedies instead.



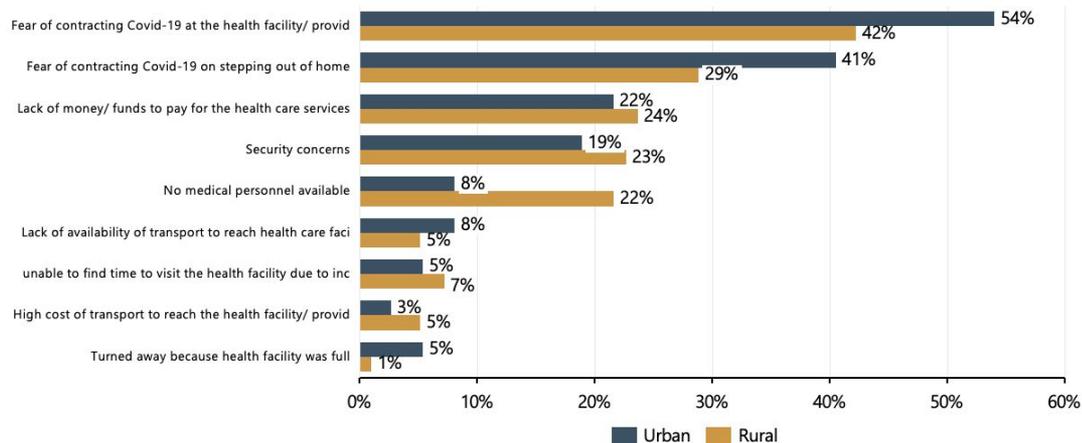
[13, 14] UNDP, "Rapid analysis of socio-economic impacts of COVID-19 Mali", May 2020

[15] OECD, "When a global virus meets local realities: COVID-19 (COVID-19) in West Africa", May 2020

*“It is not easy to get care at the hospital because the health personnel were afraid to be there themselves for fear of contracting COVID-19.”*

Baba, 50 years old, Male | Farmer | Rura, Mopti, Mali

### What was the reason you or a member of your family was unable to access health services?

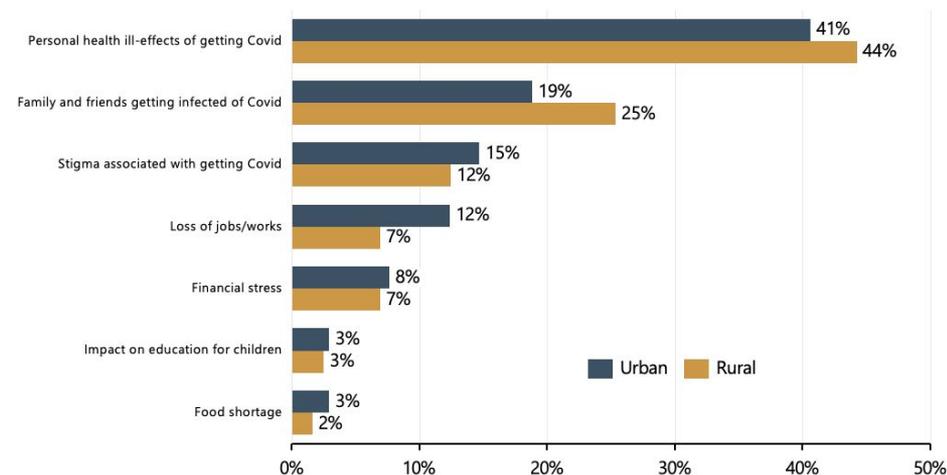


## FEAR OF CONTRACTING COVID-19

**Fear of contracting COVID-19 is the main deterrent from accessing healthcare.** 54% of urban respondents and 42% of rural respondents reported fear of contracting COVID-19 at the health facility due to why they were unable to access health services. Most Malians fear the personal stress of having COVID, infecting their loved ones, and the stigma associated with the virus.

**Also, medical personnel's availability is a significantly larger concern in rural areas compared to urban areas.** 22% of rural respondents reported unavailable medical staff as the reason for not accessing health services, compared to just 8% in urban areas.

### What worries you most about Covid-19?





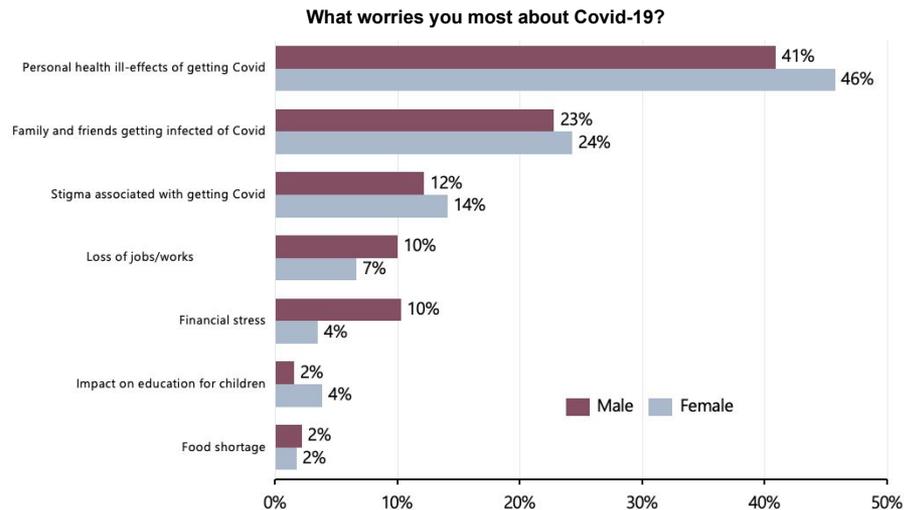
*“Despite the crisis, if I feel sick or one of the kids is sick, I have no choice but to go to the hospital. Health is a must. No matter what the situation, fear is of secondary importance when I have to bring a child or myself to the hospital.”*

Baratio, 30 years old, Female | Small business owner and homemaker | Urban, Bamako, Mali

## A GENDER PERSPECTIVE

**More women than men fear getting COVID themselves or having infected family members.** Although these are widespread fears among both genders, 46% of women fear the personal effects of COVID-19 compared to 41% of men. In the same vein, 24% of women fear their family members getting infected, compared to 23% of men.

**More men than women are concerned about the financial implications of COVID-19.** Over twice as many men fear the financial stress than COVID-19 carries, and 3% more men than women fear losing jobs.



***“In the past, when we went for a consultation [to the hospital], we did not need to take a ticket. But now, the hospital is limited to only 10 spaces, so if they run out of space for that day, there is nothing we can do apart from coming back another day.”***

Nana, 26 years old, Female | Trader | Urban, Mali

Nana is a 26-year-old trader who lives in Bamako with her husband. She imports and exports various products between Mali, Burkina, Togo, and Senegal. The current crisis due to COVID-19 has drastically slowed down her trade activities, and as a result, Nana relies mainly on the support of her husband.

During her pregnancy, Nana faced challenges accessing essential health services. Before the pandemic, pregnant women used to get free mosquito nets, but Nana said the overburdened and under-resourced health center stopped giving them out, and Nana had to purchase mosquito nets herself. The health center also takes fewer patients a day since the pandemic, and Nana had to wait in long queues or get there early in the morning to get medical attention. Nana hopes that these constraints will be addressed soon so that she can access postnatal care more quickly.



**TRUSTED CHANNELS**

**People see the government as a reliable source of information on COVID-19 precautions, as interventions support the precautions. However, there is little trust in the government's economic announcements, which many regard as empty promises. Most people seek out their information through TV and radio and rely on their community peers, even though this contributes to the spread of misinformation.**

### Information from government

People consider information from the government on COVID-19 prevention and health-related matters to be reliable because they have seen evidence of the government taking practical steps in response to the pandemic. For instance, many have received safety kits from their local authorities, witnessed social distancing enforcement, and heard of COVID-19 patients receiving free treatment. However, when it comes to financial relief measures, many have listened to the government's declarations of economic support but have not seen or received it, leading to little trust in what the government has to say on the matter. This builds on the governments' poor track record of welfare provision and the already existing notion people hold of the governments' failure to take action on economic issues.

### Trusted Channels

In the hierarchy of trusted channels of information, TV and radio are at the top, with people saying they were less likely to doubt what they heard through these channels. Radio is the most popular media in Mali, and most urban households have access to a TV, too (though access is lower in rural areas).[21] Still, traditional forms of communication remain popular,[22] and people seek out information and advice from peers and community networks. For many, this information comes with an inherent sense of trust and has been a valuable way for people, especially small business owners, to access advice on dealing with COVID-19 that they have not been able to get elsewhere. However, it has also added to the spread of misinformation on the pandemic and precautionary measures.

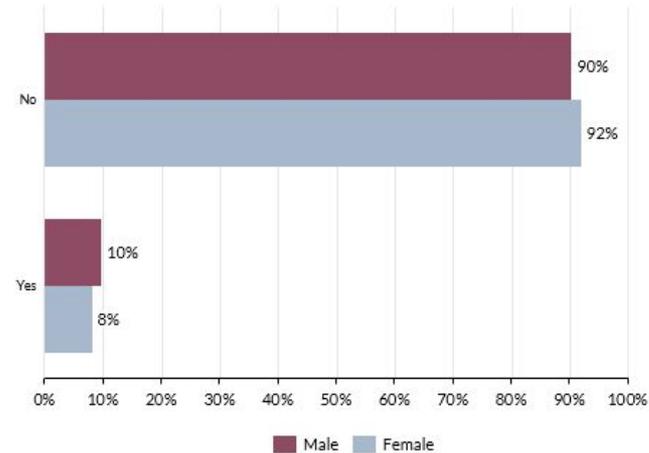
[21, 22] *Media Landscapes, "Mali", 2020*



*“I learned on the streets about the government’s [financial] support, but I didn’t receive anything in any form. I hear about this support but I have not seen any support and I don’t know how to get hold of it.”*

Baratio, 30 years old, Female | Small business owner | Urban, Bamako, Mali

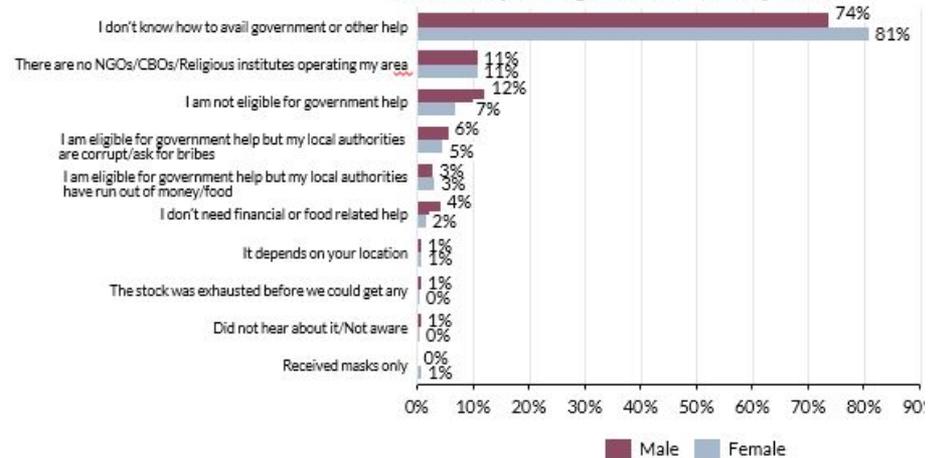
Have you received any financial or food related help during the coronavirus pandemic?



## GOVERNMENT WELFARE SUPPORT

92% of women reported not having received any financial or food-related help during the COVID-19 pandemic, compared to 90% of men. 81% of women reported not knowing how to avail government or other support as the main reason they have not received any financial or food-related help during the COVID-19 pandemic, compared to 74% of men.

Why haven't you received any financial or food related help during the coronavirus pandemic?



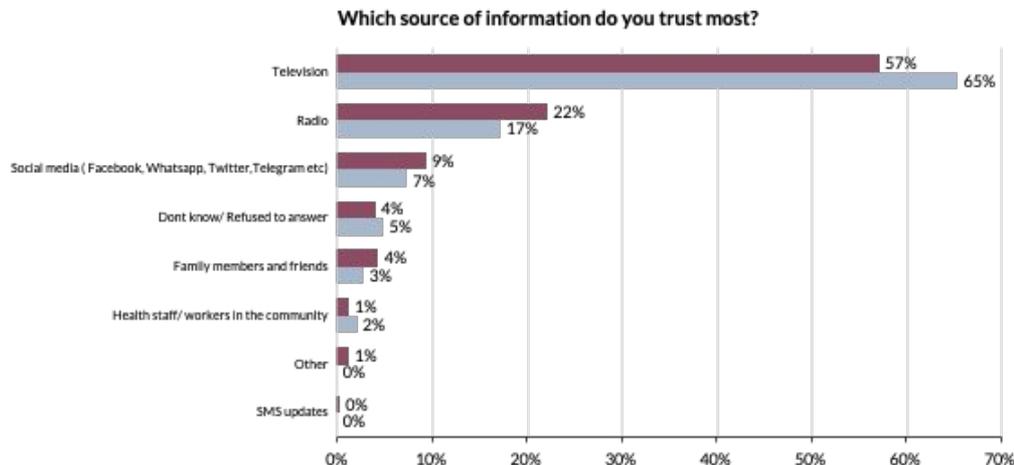


*“The government shared a lot of information about how we can protect ourselves against COVID-19 through TV and radio...In terms of safety measures the government has done a lot and I've seen it with my own eyes, but with economic support I don't trust them because we haven't seen anything. All we have is declarations. Majority of the population doesn't believe in these declarations as we don't want to chase dreams.”*

Youssouf, 32 years old, Male | Security guard | Urban, Mali

## TRUSTED CHANNELS

TV was the most trusted source of COVID-related information. **(reported by 61% of respondents). 65% of women and 57% of men reported relying on TV** the most as their information source. When split by location, the data shows that **61% of rural respondents reported the highest trust in TV, and 61% of urban respondents reported this.** People deemed Social media and untrustworthy, with **9% of rural respondents and 8% of urban** respondents put it at the top of their trusted sources list.



***“I have heard good things and bad things about masks in the community. Some people in the community say it protects you, and some people say it will contaminate you with the virus, so we are cautious of wearing the mask.”***

Traore, 34 years old, Male | Farmer | Urban, Mopti, Mali

Traore is a 34-year-old farmer with no formal schooling who lives with his brother and three children. With rising fertilizer prices during the pandemic, Traore has had to borrow money, sell his cow to cover his needs and suffer deep financial stress.

Through the TV, Traore has heard that the government provides relief during the pandemic, such as soap, masks, and food, but has not received anything himself. His primary source of information on COVID-19 prevention is his village community. He has heard from peers he trusts that putting shea nut butter in children's noses can prevent COVID-19 infection. Traore has started to try this practice with his children, as he worries about contracting the virus at their kindergarten. He has also heard from people in his community that the disease increased in Western countries as mask use increased and that masks exported from these countries carry the virus. This made Traore decide to use locally produced masks instead of those coming from Europe. Traore believed in using masks as a protective measure at the beginning of the pandemic but now says he is unsure about the details of how masks help and which scenarios to use them in.



***“Everything that is on the TV is probably from the government, so I believe it... They say we should avoid crowds, wash hands and wear a mask to keep ourselves safe. It has taught me what we can try to do to stop COVID-19; it is by washing hands and avoiding dirt.”***

Salif, 38 years old, Male | Farmer | Rural, Mopti, Mali

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***“I trust the information [about COVID-19] I receive from the radio and TV because I know they are real problems.”***

Nana, 26 years old, Female | Trader | Urban, Bamako, Mali

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***“Information about the grants [from the government] is not shared with everyone. There is too much favoritism and nepotism. Those who take care of this take care to inform their loved one first before the other population.”***

Ibrahima, 32 years old, Male | Casual laborer | Urban, Bamako, Mali



**How might we increase equitable access to healthcare support, foster trust between health officials and marginalized communities while strengthening pre-existing channels of support?**

**How might we better promote reliable information, ensuring hard to reach communities and underserved demographics have access to accurate information about COVID-19**

- Decentralizing health care services to increase health workers' capacity and access to remote care. which might include the creation of escalation facilities/protocol from primary healthcare points such as pharmacies and mobile clinics
- Enhance messaging by selecting communication channels based on demographic characteristics to tailor information to their specific needs.
- Support trusted communication channels to spotlight other accessible and credible channels, for example, using TV to direct people to a toll-free hotline, or a specific organization
- Establish informal, public forums that comply with covid measures to address questions, facilitate constructive discussions and engage knowledgeable actors

## BEST PRACTICES

Wuya, meaning 'lie' in Bambara, is an interactive fact-checking app to verify and debunk fake news. Users can see what is fake and what is not. Users can also submit news items for verification. Wuya serves the public and media organizations by providing trusted information sources to spread Information.

Mikado FM hosts a variety of radio shows to tackle COVID-19 through tailored information to many audiences. Objectif Santé is a weekly show focused on health and well-being, featuring distinguished health professionals who offer the latest pandemic updates. Le vrai du faux (True from False) focuses on countering rumors and dispelling fake news and misinformation on social media networks. Yet another segment focuses on explaining COVID-19 in simple terms to children.

***“Covid began in a society where people are much more attached to their culture, to their way of doing things, it is this difficulty of changing their mentality and their behavior that is the greatest challenge for us, to make people understand that this Covid is a reality it is not an invention.”***

Yacouba, Evaluation and research advisor, Save The Children| Mali

**How might we promote better coordination amongst development actors to minimize wastage in support delivery and ensure unified messaging is circulated at the community level?**

- Align on messages with other partners to reinforce critical themes and avoid confusion within the community
- Create feedback loops to monitor progress and track challenges as they arise, potentially through interactive channels such as radio programs, socially distanced public debates, or mobile hotlines
- Design public messaging to cater to underserved groups, such as reformatting materials for people with disabilities or having tailored discussions for people who cannot read

## BEST PRACTICES

[International Organisation for Migration, with support from Unicef and the Ministry of Health](#), has trained young people in displacement camps on how to protect themselves and their communities against COVID-19. The youth are then used as community "relays" to spread factual information on acceptable hygiene practices and combat misinformation commonplace in the displacement camps.

[U-Report Platform](#) - The U-Report initiative developed a COVID-19 information chatbot in February 2020 to help Unicef tackle misinformation, assess needs, and share information on where communities can seek assistance. The chatbot allows users of SMS, WhatsApp, Telegram, and Facebook Messenger to ask U-Report questions about COVID-19 and received preprogrammed answers from experts.

**IMPACTS OF SCHOOL CLOSURE**

**School closures due to COVID-19 have increased the likelihood of children, particularly girls, permanently dropping out of the education system because there are minimal opportunities to continue learning outside the school environment. Schools also serve as a source of nutritious meals, and closures have increased the risk of hunger, too.**

### Challenges in online learning

Virtual education is mostly absent in Mali, except for elite private schools that cater to a very small percentage of students. For the majority of the COVID-19 period, public schools did not offer virtual learning. As recently as September 2020, higher education institutes create an app with video learning content, but even when these resources exist, limited internet and smartphone access make it hard for students to access them.<sup>[16]</sup> Girls are even less likely to engage in virtual learning as they take on domestic work.<sup>[17]</sup>

### Impacts of staying at home

Parents struggle to fill the gap in their children's education themselves. Some say the only way for their children to continue learning is by hiring a private tutor, which they cannot afford when facing financial pressures. Parents also worry that, with schools closed, children run the risk of turning to delinquency and violence and might permanently drop out of school.

Girls may face an added risk of not returning to school due to early marriage and adolescent pregnancies, which historically tend to increase during pandemics.<sup>[18]</sup> Girls in Mali already have some of the lowest enrolment and completion rates, and closures in Mali, Niger, and South Sudan have forced an estimated 4 million girls out of school.<sup>[4]</sup>

Schools are not just a source of education but also of daily free meals, which 514,842 school children in Mali are likely to have missed out on due to COVID-19 related closures.<sup>[19]</sup> Many children rely on these meals for nutrition, particularly in low-income households.



[16, 17, 18] Dalberg analysis, 2020

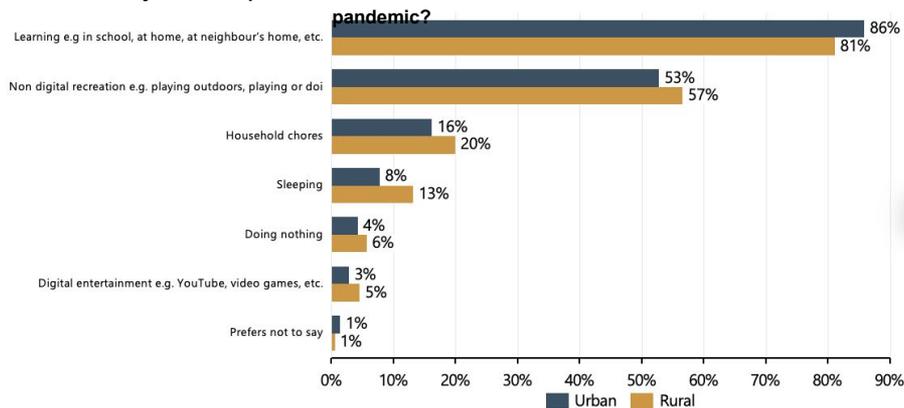
[19] Plan International, "COVID-19 school closures around the world will hit girls hardest", March 2020

[20] OECD, "When a global virus meets local realities: COVID-19 virus (COVID-19) in West Africa", May 2020

*“There is a really big gap now in my children’s knowledge and there is no way for me to fill that gap. I wish I had the money to be able to hire a private tutor, but I don’t.”*

Djeneba, 26 years old, Female | Mobile money agent | Rural, Mopti, Mali

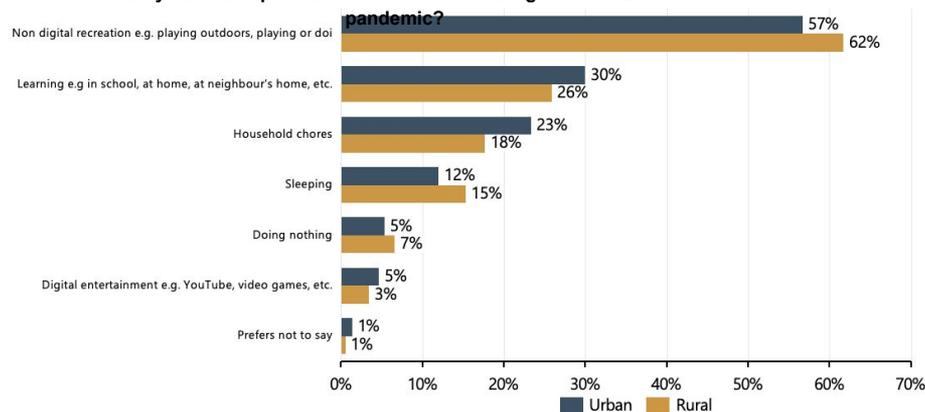
### How did your child spend most of their time before the COVID-19 virus pandemic?



## LEARNING DURING COVID-19

Before the pandemic, learning was children's main activity. **86% of urban respondents and 81% of rural respondents reported their children had spent most of their time learning, e.g., in school, at home, at a neighbor's house before the COVID-19 pandemic.** Now, less than half of the students previously enrolled in learning devote their time to continuing their studies. **Only 30% of urban respondents and 26% of rural respondents reported that their children spent most of their time learning during the pandemic.**

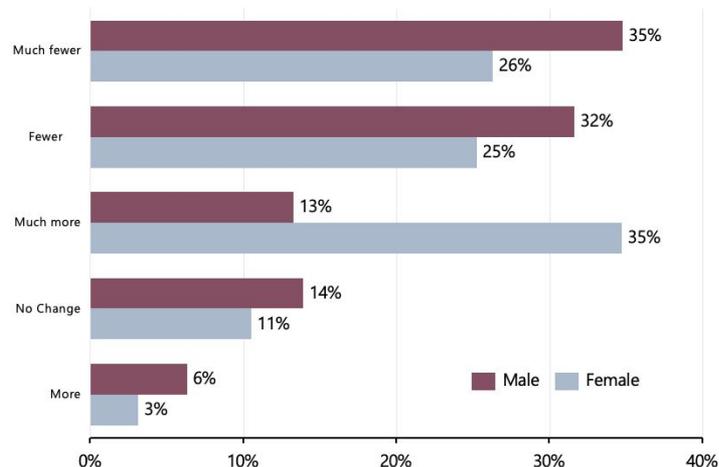
### How did your child spend most of their time during the COVID-19 virus pandemic?



*“Because my children can't go to school and there were no other activities for the children on my village, the children have to go and work in the farm.”*

Salif, 38 years old, Male | Farmer | Rural, Mopti, Mali

Did you spend more or fewer hours per week engaging in your labor activities?

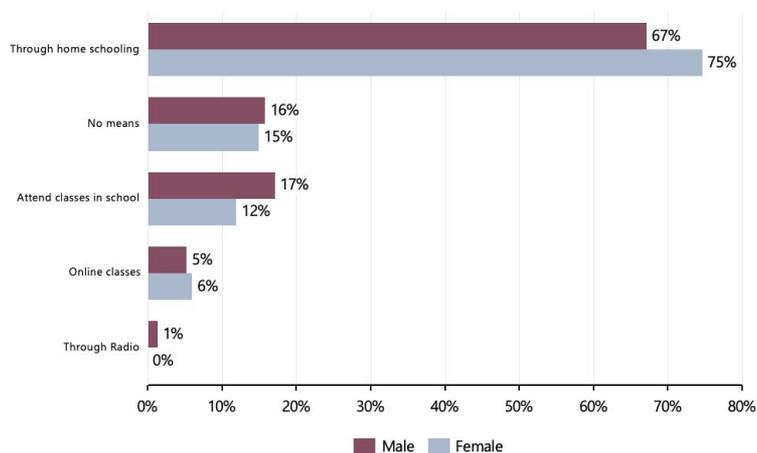


## A RURAL PERSPECTIVE

Most children now depend on homeschooling, which means it is often highly dependent on parents' proficiency, ultimately determining the quality of education passed on. **67% of men respondents and 75% of women respondents reported learning being done through homeschooling.**

With children spending most of their time at home, women are facing an increased burden of care. **Over twice as many women as men feel that they are working "much more" in labor activities.** The added responsibilities at home are especially burdensome for the  $\sim\frac{1}{3}$  of women who are caregivers as their primary or secondary activity.

How is learning done?



***“The reduction in my income has meant that the little money I used to give to my kids, I no longer can. The kids can't get money from me to go to school, and I can't feed them at home. Some good willing people can help, and they gave me financial support to give my kid money to go to school.”***

Madeleine, Female, 33 years old | Teacher | Rural, Mopti, Mali

33-year-old Madeleine is a teacher in a public elementary school in Mopti, where she lives with her family.

Madeleine loves teaching, and spending months away from her work affected her psychologically. As a state civil servant, she believes that it was easier for her to get through the crisis than contract teachers, as she continued to get paid even when schools were closed. She also received support from the government once the schools opened, including safety kits (masks, sanitizers, etc..) to help people get back to school safely, but she admits that other teachers have been protesting about insufficient safety measures.

Madeleine's biggest worry is about her young students' future and how they will catch up on the learning and time they lost due to the crisis. She fears seeing young people fall into delinquency and vagrancy. In the future, Madeleine hopes that decision-makers will take steps to deal with this type of situation.



**LOSS OF DIGNITY**

**Income earners are no longer able to support their families and communities due to financial pressures during the pandemic. This inability to help loved ones has led to deteriorating mental and emotional health, self-esteem, and relationships.**

### Role of household heads

Being an income earner or 'family leader' in Mali comes with a high degree of prestige and a tremendous amount of pressure. Those who take on this role are expected to ensure access to food, healthcare, and education, along with general mentorship and pastoral care, to both their immediate and extended family. The financial disruption and food security that the pandemic has brought on has made it a challenge for people to provide for their families.

### Limited job opportunities

In the past, when there have been economic downturns, people would often leave the country to seek employment elsewhere while sending money back home to continue providing for their families. Border closures during the pandemic, though, have eliminated this option.

### Impacts on mental health

This failure to fulfill their family and community obligations has led to a big mental and emotional strain. People reported feelings of guilt, inability to sleep, and lowered self-esteem. These financial pressures have also put a physical strain on people. For instance, those who have had to sell their cattle are now left to plow their land themselves. Yet, people who bear the role of community leaders have very few people they can turn to for support, as they worry asking for help would mean undermining their position or the expectation that they must be strong.





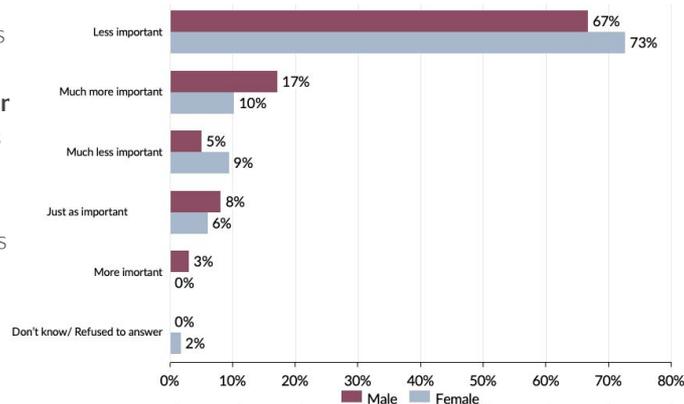
*“With the COVID-19 crisis, I can't help anyone, so I let my family members know that I won't be able to support them... Now I just really can't support the people I used to be able to, and that is really weighing on me.”*

Nana, 26 years old, Female | Trader | Urban, Bamako, Mali

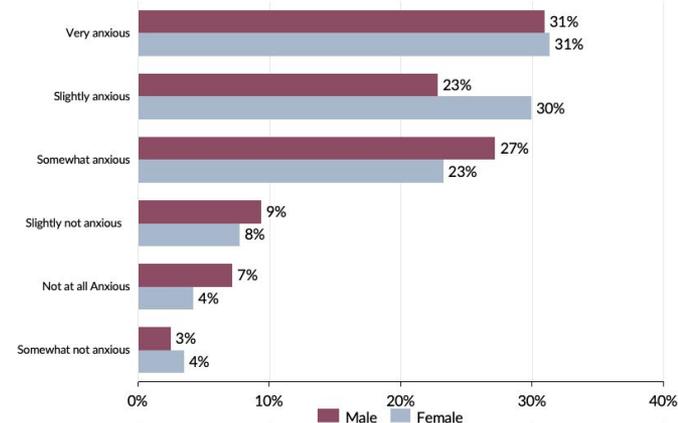
## GROWING FINANCIAL RESPONSIBILITIES

Men and women alike feel that their businesses are less capable of sustaining their families' financial needs. **73% of women and 67% of men reported that their business has become less important** as a livelihood for their family since the pandemic began. **81% of men** (typically household heads) reported feeling very anxious in the last 3 months, **compared to 77% of women.**

Since (first case of COVID-19 was reported) has your business become more, less or remained just as important as a livelihood (source of income) for your family?



Overall, how anxious have you felt in the last 3 months?



***"I also felt the impact of COVID-19 although I got my wage. Somebody who likes their job, if you are not working or doing anything, psychologically this is such an issue. I am also always worried for the children; I don't know about the future."***

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Madeleine, 33 years old, Female | Elementary school teacher | Rural, Mali

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***"If the rain season is bad, I would [usually] move to another country...and take any petty jobs to try and send money back. But because all the borders have now been closed, I didn't even have the option to do that. I would have never had to sell my cow, but because all the borders were closed, I couldn't travel to earn money."***

Traore, 34 years old, Male | Farmer | Urban, Mopti, Mali

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***"I prioritize food because I am not only a farmer but also a head of the family. When a crisis like this hit, I immediately think, 'How can I make sure we have food on the table?'"***

Baba, 50 years old, Male | Farmer | Rural, Mopti, Mali



**SOCIAL DYNAMICS**

**Restrictions on community gatherings and social customs central to life in Mali have led to social tensions, challenges in keeping youth engaged, and reduced pastoral care and community support with no alternative ways to fill these gaps.**

### Impact on the youth

Social gatherings and community events are often used to keep young people engaged, provide counseling, and even share skills. However, COVID-19 restrictions have limited people's ability to hold these gatherings, leaving many young people, who are now unemployed or unable to attend school due to COVID-19, with little to do and less oversight from older community members.

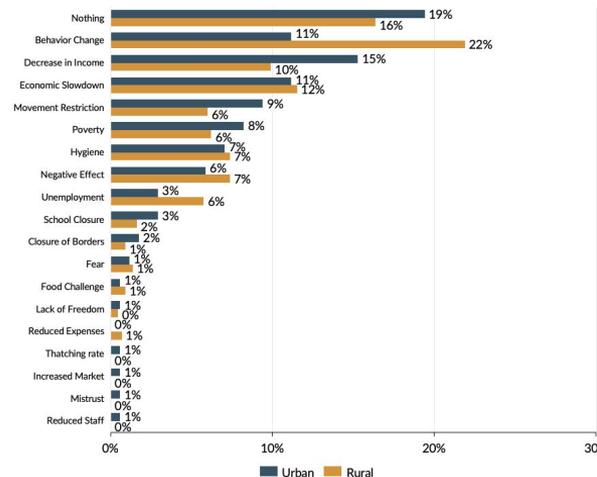
People worry that this interference in social norms has led to increased delinquency, crimes, and general dormancy amongst young people. Also, there has been a noticeable tension between older and younger generations. Many young people feel an ever-growing gap between themselves and their elders as they have limited opportunities to interface with each other.

### Impact on community dynamics

Community gatherings are also considered central to life in Mali, and without them, an essential aspect of social and cultural life is missing for all. This has impacted people psychologically and taken away a valued source of support at a difficult time. Disruptions to social customs like shaking hands and important cultural gatherings due to COVID-19 have led to strained community relationships and even hostility, particularly between those taking precautionary measures and those who are not.

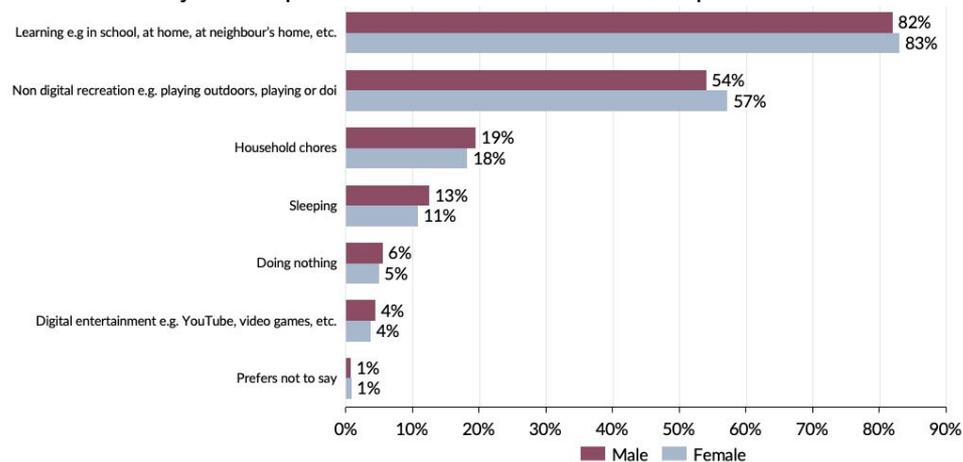


Movement restrictions have been more significant hindrances for urban dwellers. **9% of urban respondents consider movement restrictions to be the most significant effect of COVID-19 on their household, compared to 6% of rural respondents.** With the imposition of lockdown restrictions, **54% of men and 57% of women reported that their children were doing mainly none digital recreation, with no opportunities for youth meetings or other alternative means of engaging** the many young leaders state there has been a breakdown in communication between community leaders and the young.

**What has been the most significant effect of the COVID-19 on your household?**


***“We are affected as a society because big community gatherings are central to our culture, and now we cannot do that anymore due to COVID-19...Right now, we have absolutely nothing, we can't even be with our brothers and sisters, so of course, this will affect us mentally.”***

Youssef, 32 years old, Male | Security guard | Urban, Mali

**How did your child spend most of their time before the COVID-19 pandemic?**




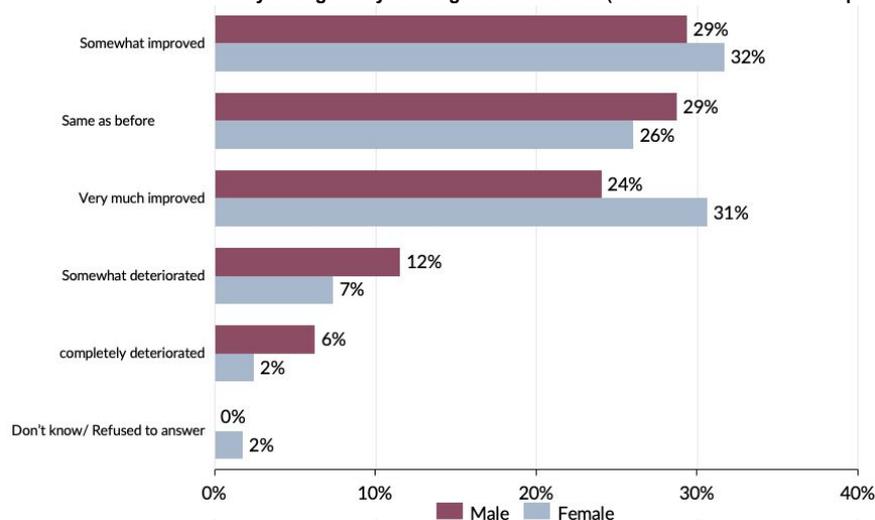
*“In ceremonies and demonstrations, people do not take the necessary precautions and sometimes rebel against those who reprimand them... I got insulted when I was trying to teach people about the safety measures, especially in crowds and in naming ceremonies and funerals.”*

Baba, 50 years old, Male | Farmer | Rural, Mopti, Mali

## COMMUNITY SECURITY

Most people feel safer in their communities compared to before the pandemic. **53% of men and 63% of women** say that security has improved in their neighbourhoods. Restrictions and increased vigilance during curfew hours may explain the decline in security threats.

How have the state of security changed in your neighborhood since (first case of COVID was reported) ?



***“There were serious tensions in the community between those who took COVID-19 seriously and refused to shake hands with neighbors or friends as a sign of greeting, and others who didn’t believe in COVID-19 and felt rejected.”***

Sory, Male, 29, Small business owner | Rural, Mali

Sory is a 29-year-old small business owner and father. He has observed that the arrival of COVID-19 has divided his community, into two camps—those who believe in the disease, and those who don't—creating a rift. Those who believe in COVID-19 have begun to systematically avoid shaking hands with those of the opposite camp, resulting in insults, hostility and strained relationships. Sory explained, "The fact that people do not hold hands was frowned upon by some in society because people generally hold hands to greet each other in our society. So when you don't say hello to someone, they think you have rejected them, which makes the question very sensitive, to the point where people have promised not to shake hands with others. Some who didn't believe in [COVID-19] said that they would hate forever their brothers who refused to take their hands due to COVID-19."

Despite the friction around him, Sony believes his high school education has helped him understand and believe the information he hears on the TV and radio, and Sony tries to educate his loved ones and his customers about COVID-19.



**PSYCHOSOCIAL SUPPORT**

**As people continue to face financial pressure, their stress and anxiety levels have increased. In the absence of direct support from the government and NGOs and little hope for economic recovery, many people have turned to their religious faith and, where feasible, family support to tide through.**

### Security at home

The people we spoke to acknowledged heightened tensions in their homes due to spending more time inside together during the lockdowns and the stress from volatile incomes. Families are experiencing disagreements and damaged relationships. Research has noted a rise in reports of gender-based violence in the country.<sup>[23]</sup> At the same time, there has been a decrease in service provision for survivors of violence.<sup>[24]</sup>

### Support channels

Mental health services are largely lacking in Mali, outside of big cities or areas with the presence of humanitarian actors, and people tend to hold prejudices against psychologists' use.<sup>[25]</sup> The people we spoke to said they cope with the heightened tension by seeking counsel from the community or religious elders on how to navigate their relationships in times of stress. Yet, people prefer to keep family matters to themselves, so the support they seek out is limited. With everyone facing their challenges, families and communities are less able to support each other.

In the absence of government and NGOs' support, too, people are left with only their religious faith to keep them going. Praying and attending mosques has also been impacted by the curfews and insecurity in Mali, with people facing security risks from armed forces who block them from going for Friday prayers.<sup>[26]</sup>



[23] Plan International, "Policy brief: Girls' and young women's rights at risk under covid-19 in West and Central Africa", 2020

[24] UNFPA, "West and Central Africa Region: COVID-29 situation report no.5", 2020

[25, 26] Care International, "Rapid Gender Analysis COVID-19: West Africa – April 2020", 2020



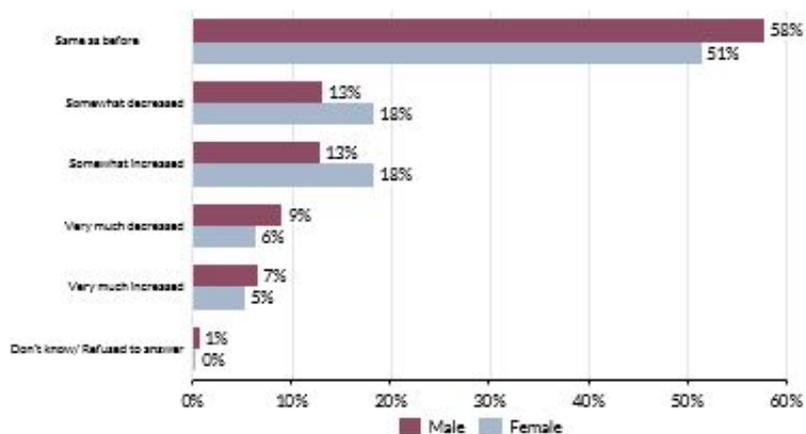
*“I feel that a lot of people in my family and in my community have started being very short tempered, and it has made it very easy for small issues to become a big deal.”*

Nana, 26 years old, Female | Trader | Urban, Bamako, Mali

## HOME SECURITY

More women than men are reporting increased domestic conflict in the home. Although most men and women say that the number of home conflicts has stayed the same, **23% of women note that domestic disputes have gone up, compared to 20% of men.**

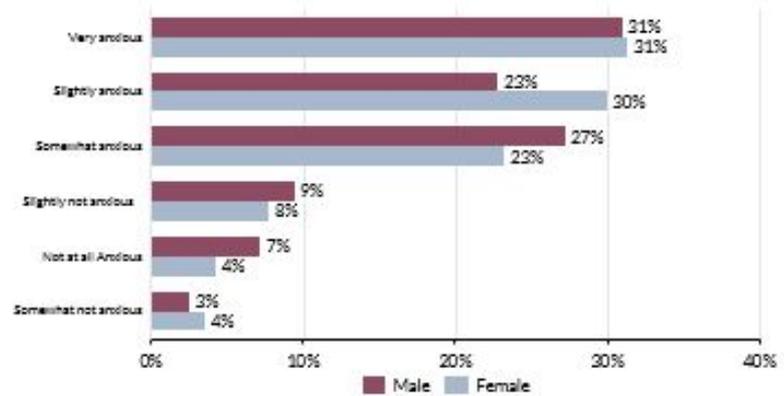
Have conflicts at home increased or decreased during the coronavirus pandemic?



*“I can't speak about the future. If things don't get better, all we can do is pray to god, and we will hope that things improve.”*

Youssef, Gender, Age, Occupation | Rural/Rurban/Urban, Country

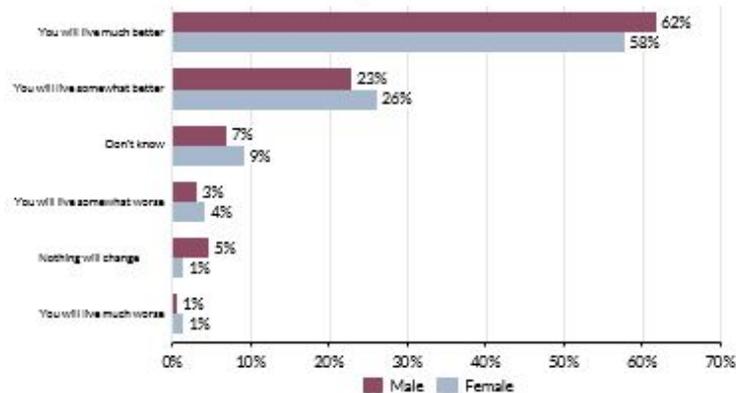
Overall, how anxious have you felt in the last 3 months?



## FUTURE OUTLOOKS

Over the past 3 months, anxiety levels are high and slightly higher among women than men. Overall, **81% of men have felt varying levels of anxiety vs. 84% of women.** Despite widespread feelings of anxiety, most people believe the **hardships brought by COVID-19 will be short-lived. 58% of women and 62% of men reported** that they think life will be much better in the next 12 months for their households than it is today.

Do you think that in the next 12 months you and your family will be better than today or worse?



***"I suffered a lot as a result of all of this pandemic. But there is nothing I could do apart from waiting on God to be helped. There is no outlet except God almighty."***

Djeneba, 26 years old, Female | Mobile money agent | Rural, Mopti, Mali

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Djeneba is a 26-year-old mobile money agent whose income has reduced by 50% due to COVID-19. She has separated from her husband and lives with her parents and children.

Djeneba noted the negative impact that the COVID-19 crisis has had on her mental health, saying, "I have suffered so much as a result of this crisis that now I can't even sleep well...I have now become someone who is always in a bad mood." It has also impacted her family relationships and others in her community. She notes, "Many people in my family and community have started being very short-tempered, and it has made it very easy for small issues to become a big deal." She observed that the stress has led to less affection between parents and children, too. However, Djeneba added that despite disagreements, physical violence is not in her community's culture, and they have managed to remain peaceful.

Djeneba copes by spending time with her older brothers and sisters, who give her advice and are fun to talk with. She has neither heard of nor received relief from NGOs, government, or local authorities. This has damaged her trust and makes her feel like there is no one to help her. "If I'm in a situation like that and I don't get help from others, I don't see how I can help other people. I have lost the trust of others."



**How might we equip communities with adequate resources to provide psychosocial support and mitigate the impacts of COVID-19?**

**How might we support existing social dynamics and hierarchies to better foster community and household cohesion during a period of heightened tension?**

- Engage youth, women, men, and community leaders equally to understand social complexities and involve them in mapping possible solutions to encourage safe socio-cultural relations
- Provide free mental health support services for persons in high-stress roles, such as heads of households and community health workers (front line and non-front line)
- Identify contact points to connect GBV survivors with support services in light of movement restrictions. These could include pharmacies, handwashing stations, or female latrines for communication on helplines
- Train frontline workers on psychological first aid and referrals they can offer to people suffering from poor mental health upon disclosure

## BEST PRACTICES

Gateway Classes is an accelerated learning program launched by UNICEF and APIDEV in Mali, supported by KOICA. Accelerated learning centers set up in various villages enable children aged between 8 and 12 years who have been out of school for multiple reasons, such as the lack of funds, to go through 9 months of intensive accelerated training before being reintegrated into formal education systems.

UNESCO-UNFPA-UN Women Joint Programme with the support of 15 million USD from the republic of Korea, aims to ensure girls and young women benefit from a full cycle of quality education. In addition to providing technical support to the Malian government to broadcast educational content on national television during COVID-19, they are sensitizing parents to relieve girls from domestic tasks to attend remedial classes through radio and television and encouraging the reporting of gender-based violence incidents through a toll-free number.

***“In the school spaces we suppose that they will be opened in January as planned, we recommend that people place to focus on the establishments where we have big children like university level so that they are not exposed to the pandemic. A lot of interaction happens in such establishments.”***

Yacouba, Evaluation and research advisor, Save The Children| Mali

**How might we ease the transition of children returning to school and a keen emphasis on girls who have the highest chances of being left behind**

**How might we ensure parents are well equipped to manage school closures' potential psychological impact on children.**

- Promote alternative learning environments, such as using mobile vans with pre-recorded messaging to educate children in public spaces while complying with social distancing or providing solar-powered radios for remote learning.
- Educate communities on the merits of children's return to school to encourage re-enrollment through 'back-to-school' campaigns
- Advocate in favor of women and girls' continued education and capacity building programs that support vulnerable groups' empowerment, such as girls who are pregnant or married young.
- Mobilize government or donor funding for virtual or covid-compliant youth development programs to upskill youth through peer training or drawing from the wider community's knowledge/expertise.
- Develop community-wide campaigns to shift attitudes towards social distancing measures. For example, celebrating students who comply with preventive and social distancing measures as 'Covid Champions' keeps their friends and loved ones safe.

## BEST PRACTICES

Plan International and ERAD, a local partner NGO have been driving community engagement at various levels. They have set up youth clubs trained on COVID-19 prevention measures and peer education to empower young people to sensitize their communities. In addition, they support local WASH Committees take charge of hygiene and sanitation in 40 villages, to ensure hand washing kits are used properly and provide an avenue for help or advice on preventive hygiene where needed.

Islamic Relief has protection and inclusion offices that offer psychosocial support to beneficiaries in their activities. They have partnered with other organizations such as INFP to refer cases that they are not equipped to handle due to a lack of skills.

***“At first, people were afraid, there was psychosis but with the sensitization, according to our reports, people started going to the health centers again.”***

Sambou, Islamic Relief | Mali

# THANK YOU

A mixed methods study on the impacts of the COVID-19 crisis on low and middle income people in Mali and opportunities for policy and programmatic intervention

01 Feb, 2021

