

BASELINE INSIGHTS & OPPORTUNITIES

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

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Contents

1.	<u>Introduction</u>	3
2.	<u>Research methods</u>	4
3.	<u>Country overview & insights summary</u>	5
4.	<u>Insights & opportunities</u>	11
	a. <u>Financial health & livelihoods</u>	12
	b. <u>Awareness & access to support services</u>	52
	c. <u>Attitudes & psychological well-being</u>	71

1. Introduction

Niger registered its first confirmed COVID-19 case on 19 March 2020. On 27 March 2020, the imposition of a night-time curfew and the closure of Niger's border saw an initial decline in confirmed positive cases. Under economic and religious pressures, the government lifted the night-time curfews and banned religious gatherings on 13 May 2020; however, the initial success was short-lived. On 13 November 2020, in response to cases rising again, the authorities announced visitors would have to surrender their passports and only returned after a negative test following one week of strictly monitored self-isolation. These new measures illustrate the delicate balancing act the government is continuously trying to maintain.

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 adapts 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



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. Niger

Country overview & insights summary

Niger overview

COUNTY PROFILE

Population size: 23,31^[1]
 % Urban population: 16.51^[2]
 % Rural population: 83.48^[3]

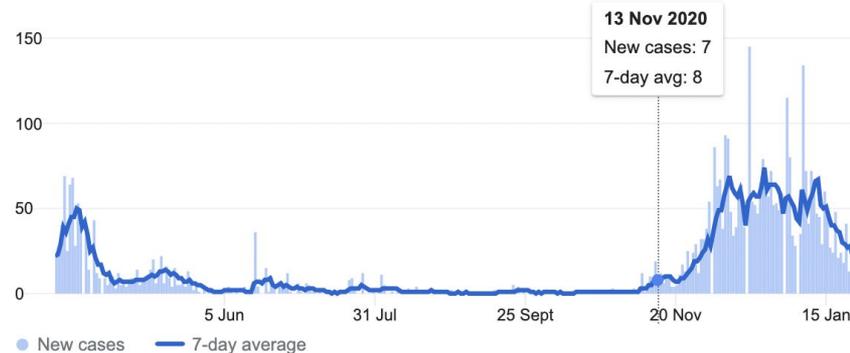
Health spending per capita:
 30.36 USD^[4]
 Physicians per 1000: 0.043^[5]

Labor force: 8.75M^[6]
 % Unemployment: 0.485^[7]
 % Employment in agriculture:
 74.84^[8]
 % Employment in industry:
 7.18^[9]
 % Employment in service:
 17.98^[10]

GOVERNMENT FISCAL POLICIES ^[11]

- 1) 1.3 % of GDP in resources re-allocated to additional spending toward health, security and social assistance
- 2) Food distribution, two months of free utilities to the vulnerable households.
- 3) Temporary tax relief for hard-hit sectors. Finance Ministry also announced credit support to the private sector in the form of loan guarantees.
- 4) Large-scale support for agricultural production, revenue shortfalls, and the building of liquidity buffers.
- 5) Price controls for essential goods for 3 months. Niger secured US\$114.5 million in emergency financing from the IMF on April 14, 2020 and relief from its debt service to the IMF on April 13, 2020.

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



Location	Cases ↓	Recovered	Deaths
Niger	4,353 +0	3,464 +0	151 +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#>
 [12] JHU CSSE COVID-19 Data

Niger insights summary

FINANCIAL HEALTH & LIVELIHOODS

1 **ACCESS TO FINANCIAL SERVICES** - People's incomes have reduced due to the pandemic and simmering political instability. They have limited savings to fall back on and limited means to access loans or credit lines from formal financial institutions due to high bureaucracy levels in those institutions.

2 **FAMILY SUPPORT** - With the lack of a formal social safety net, people rely on their families and communities when faced with financial challenges. High financial losses due to the pandemic have reduced people's ability to provide for their families and communities, resulting in household tension and no choice but to cut back on necessities such as purchasing medication and children's pocket money.

3 **IMPACT ON MSMEs** - Border closures, restrictions in movement, and increased transportation costs have cut off small businesses from cities, leaving them unable to access supplies and sustain their operations.

4 **LIMITED FINANCING OPTIONS** - Lack of savings and little economic support, and inability to access formal loans due to high-interest rates for SMEs have resulted in small businesses suffering heavy financial losses without any clear recovery channels. This is typically a heavier burden for SMEs in the informal sector, often unregistered, who cannot access state funding for MSMEs in the formal sector.

AWARENESS & ACCESS TO SUPPORT SERVICES

5 **ACCESS TO SAFETY KITS** - An increase in the prices of masks and hygiene equipment, with very few government subsidies or support for households, has increased the out-of-pocket expenditure placed on families, further exacerbating the financial strain they are under, ultimately leaving many people unable to protect themselves and their families.

6 **COMPLIANCE** - In rural areas, people's compliance with COVID-19 precautions is hindered by low literacy levels, established beliefs, misinformation, and financial constraints that feel more pressing than the COVID-19.

7 **SOCIAL PROTECTION** - Government welfare and benefits are highly politicized, so people do not see them as a dependable support source. Instead, they rely on and trust NGOs and associations to fill the gaps left by the government.

8 **ACCESS TO INFORMATION** - For information on COVID-19 precautions and updates, people trust TV and radio, which are perceived as authenticated sources, as well as first-hand information from their peers. Yet, people still seek out multiple sources to verify information, typically turning to social media, despite being wary of this source.

ATTITUDES & PSYCHOLOGICAL WELL-BEING

9 **GAPS IN EDUCATION** - Teachers' reluctance to provide online lessons, the high cost of private tuition, and inadequate digital and remote learning infrastructure resulted in the seizure of many students' education when schools were closed. Leading to a gap in students' education, this failure of the education system has left older students not feeling supported in their learning and ill-prepared to enter an already bleak job market.

10 **CHILDREN'S MENTAL HEALTH** - Abiding by restrictions during the pandemic and returning to schools with new regulations in place has impacted children's mental health. While caregivers recognize this, they feel ill-equipped to provide help.

11 **PSYCHOSOCIAL SUPPORT** - The uncertainty and income loss during the pandemic has impacted people's mental health. Family heads bear a particular burden because they feel pressure to provide for their families, yet with little awareness around mental health or support avenues.

12 **SECURITY** - With the increasing threat of terrorism in parts of the country, a rise in crime or insecurity due to COVID-19 does not feel as significant to people, particularly those in rural areas with recent attacks.

Opportunities summary

FINANCIAL HEALTH & LIVELIHOODS

How might we enable MSEs and small scale producers to still have a viable and sustainable route to market amidst the COVID restrictions?

How might we help entrepreneur envisage new ways of generating income, allowing them to still have a path towards a meaningful livelihood during the economic downturn

How might we better support and understand the COVID related needs of the Niger labor forces, especially workers in informal employment?

- Explore alternative sales and distribution models to sustain the movement of goods and services, such as using CBOs/ NGOs/ business groups to aggregate and sell produce on behalf of MSME owners or rotating market days to connect sellers and buyers safely
- Create pathways to transition entrepreneurs to alternative temporary income generation activities that empower entrepreneurs to pivot and earn a living during COVID
- Develop or scale tech-enabled solutions that enable entrepreneurs to adapt their operational activities. For example, using satellite technology to guide pastoralists to nearby pastures
- Educate on the benefits of formal registration to entrepreneurs so they can benefit from broader access to resources and support
- Create and promote COVID compliance standards to provide clarity on safety measures that businesses can take while building consumer confidence
- Strengthen criteria to target and support MSMEs by instituting measures to admit and vet informal MSMEs

How might we promote formal financial institutions and MFIs, and community lending schemes as a channel for accessing credit lines, ensuring the process is simple and meets the needs of vulnerable households and MSMEs?

How might we leverage people's existing financial habits to increase uptake of tailored financial products that are beneficial for people's current situation?

- Provide emergency cash transfers to replace depleted savings and support households to meet their basic short and medium-term needs
- Leverage informal savings groups as an avenue for cash transfers or promote saving activities among men and women who cannot access formal finance.
- Build local government capacity to evaluate and identify at-risk households who qualify for financial assistance
- Subsidize or cap mobile money interest rates to increase short-term financing through widely accessible means or expand banks' reach into rural and informal demographics to increase access to formal financial support through roving agents.
- Institute more lenient payment term. For example, by extending loan repayment periods without classifying them as non-performing

Opportunities summary

AWARENESS & ACCESS TO SUPPORT SERVICES

How might we better deliver targeted messaging that will reach and resonate with rural communities reinforcing the pandemic's seriousness without fear-mongering?

How might we better use technology to collect accurate information from community groups and provide an avenue to access health information?

- Use influential community members to raise awareness, including the likes of digital influencers, local leaders, and religious leaders, to relay crucial information on prevention, protection, and management of COVID-19.
- Work with call centers to decentralize healthcare, for example, by helping people self-diagnose and be directed to further assistance where necessary.
- Contextualize the information being shared to make it more relatable to communities. Such as carefully drawing from religious texts to familiarize communities with pandemics or likening casualty statistics to similar disease outbreaks.

How might we strengthen third sector organizations' existing reach to disseminate information and provide access to a safety net for vulnerable households?

How might we better identify at-risk households and ensure they are not excluded from support packages put in place by the government and aid organizations?

- Partner with vetted NGOs, CBOs, and religious organizations to carry out needs assessments and distribute government social safety nets. These partnerships will provide reach and leverage critical contextual information on pressing challenges facing communities as well as possible solutions
- Seek alignment among development and implementation organizations to ensure maximum reach and coverage in PPE distribution, to avoid uneven supply across regions or localities

Opportunities summary

ATTITUDES & PSYCHOLOGICAL WELL-BEING

How might we provide access to quality learning to set students' education back on track?

How might we provide mental health support to adults and children alike to adapt to the uncertainties that COVID-19 presents?

- Tap into existing care channels and equip them to provide mental and physical care, including informal points such as traditional healers
- Develop remedial learning materials and link them to other ongoing educational support forms to support children's ability to refresh previous learnings and gradually progress. Consider creating workbooks attached to broadcasted learning content, including answer sheets that can be completed independently without parental oversight.
- Develop and scale reading camps to promote literacy skills among young learners. If possible, to comply with social distancing, consider recruiting teenagers to support younger learners.

- Train parents to identify mental health struggles in their children and provide access channels for professional mental support.
- Gamify COVID measures to encourage young children to comply with COVID protection measures as well as positively influence their peers and family member

4. Niger

Insights & opportunities

ACCESS TO FINANCIAL SERVICES

People's incomes have reduced due to the pandemic and simmering political instability. They have limited savings to fall back on and limited means to access loans or credit lines from formal financial institutions due to high bureaucracy levels in those institutions.

Depleting cash reserves

Before the pandemic, most people had limited savings, and the little they had has now been exhausted to cope with income loss. While banks are lending money during the pandemic, people do not typically turn to them when faced with financial difficulties. Instead, they turn to their families and community loan providers as there is a fear that if they cannot repay the bank, it may result in the seizure of assets.

Low utilization of banks

Very few people know how to access formal financial services, have the necessary paperwork, meet the requirements, or feel confident navigating the process of taking traditional formal sector loans. Historically, many have depended on money transfer agents as their primary financial tool. The nascent push for increased utilization of banks was only due to people needing additional financial support beyond what they previously required. The strict banking rate in Niger was 6.3% in 2016, much lower than the average of 16.1% in the West African Economic and Monetary Union (WAEMU) zone.^[1] The microfinance sector penetration rate was 10%, compared to an average of 18.6% in other WAEMU countries.^[2]

Informal financing options

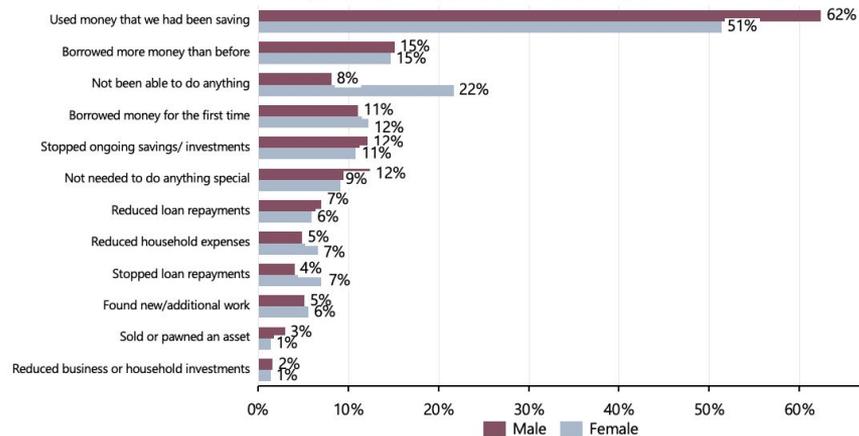
The formal banking system notably excludes funding of rural activities, which it considers "high-risk," and most Nigeriens prefer to use informal borrowing or savings groups instead.^[3] People's engagement with financial service providers tends to be limited to money transfer agencies like Nita or Al Izza. They feel more comfortable accessing these because they do not require paperwork, documentation, or complicated processes.



“The work I’m doing is better than nothing, but it’s not enough... I try to save a little bit. I have a box where I put my money down.”

Idrisa, 25 years old, Male | Day labourer | Rurban,
Tillabéri, Niger

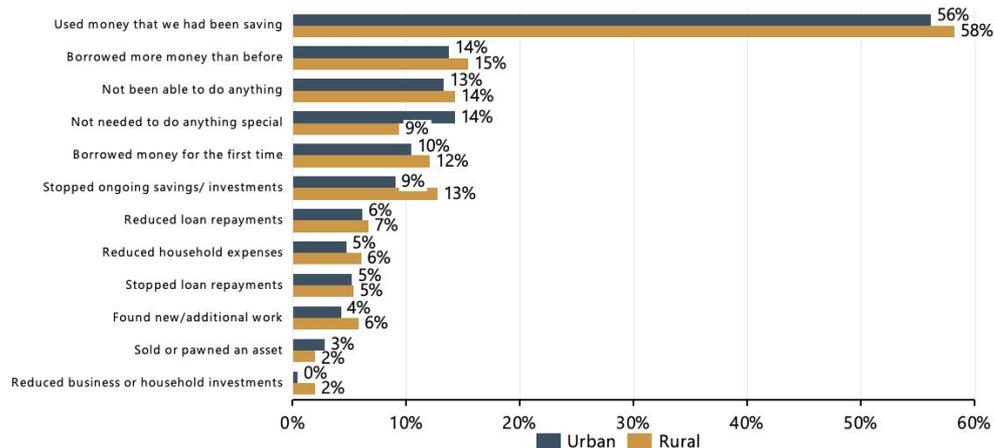
As a way to cope with the COVID-19 situation, have you or anyone in the household had to do any of the following?



DEPLETING SAVINGS

With people coming to terms with lost income, Dalberg's phone survey found that **51% of women** reported having **used money that had been saved as a way to cope** with the COVID-19 situation, compared to **62% of men**. Similarly, **56% of urban and 58% of rural respondents** reported having **used their savings as a way to cope with the COVID-19 situation**.

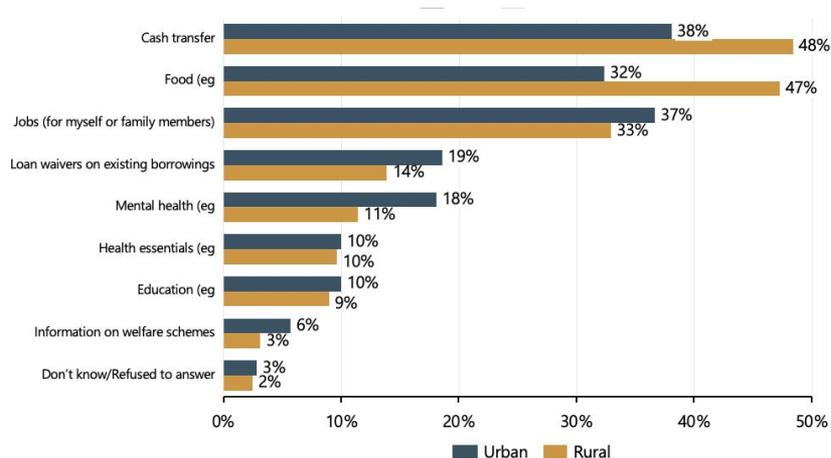
As a way to cope with the COVID-19 situation, have you or anyone in the household had to do any of the following?



“Using money agencies like Al Izza is easier for me. All you need to use for these agencies is your name and ID card. There's no going back and forth. It's straight to the point.”

Daouda, 65 years old, Male | Thrift shop owner | Rurban,
Tillabéri, Niger

What kind of support would be most helpful to you at this time?

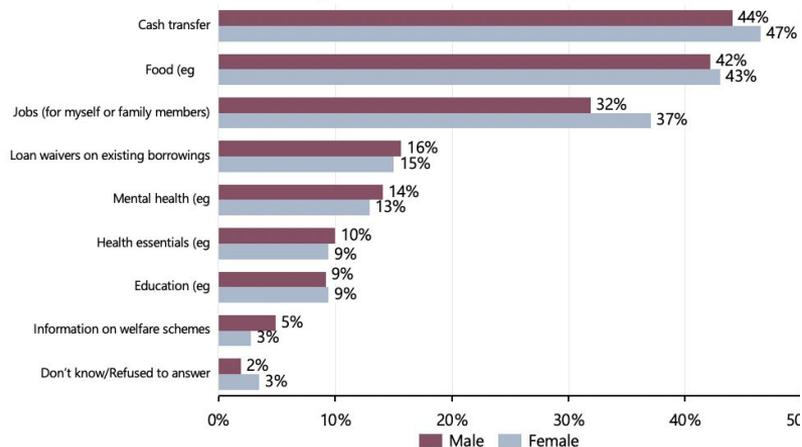


CASH TRANSFERS

A phone survey by Dalberg found that the most helpful support people were looking for during this period was **cash transfers**.

38% of urban respondents and 48% of rural respondents reported that **cash transfer would be the most helpful kind of support** to them at this time. **47% of women** than to **44% of men** said that cash transfers would be most beneficial.

What kind of support would be most helpful to you at this time?



“Even [reselling] hasn’t been bringing me money, ... the Country’s economy is slow, everything is slow. Before the pandemic, able to make up to 450/480k per month. now not even able to make it to 100k a month, sometimes even less, 70k”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

“These money agencies are easier to use than a bank, and there’s no going back and forth, no paperwork. You only need a phone number to send money, and only need an ID to receive money.”

Yacouba, 47 years old, Male | NGO volunteer & trader | Rurban, Tillabéri, Niger

“When the pandemic started, I didn’t even try to take out a loan, and I knew the money would be too much for me to pay back. Because I had no money, I just stayed at home and prayed to God to help.”

Daouda, 65 years old, Male | Thrift shop owner | Rurban, Tillabéri, Niger



FAMILY SUPPORT

With the lack of a formal social safety net, people rely on their families and communities when faced with financial challenges. High financial losses due to the pandemic have reduced people's ability to provide for their families and communities, resulting in household tension and no choice but to cut back on necessities such as purchasing medication and children's pocket money.

Dwindling support channels

The workforce share in vulnerable employment was 94% in 2019,^[5] meaning most people do not have social security to fall back on. The people we spoke to said they typically lean on their families and communities for help in times of need and consider this community supports an integral part of their culture. Through the pandemic, people continue to feel a strong sense of duty to provide for their families and communities, but this responsibility adds to financial burdens that COVID-19 has already heightened. Several people from the cities had to stop sending remittances to their families in the villages due to their loss of income or the increase in the number of people they had to support. Parents have also had to rely on their children's earnings.

Reduction in consumption

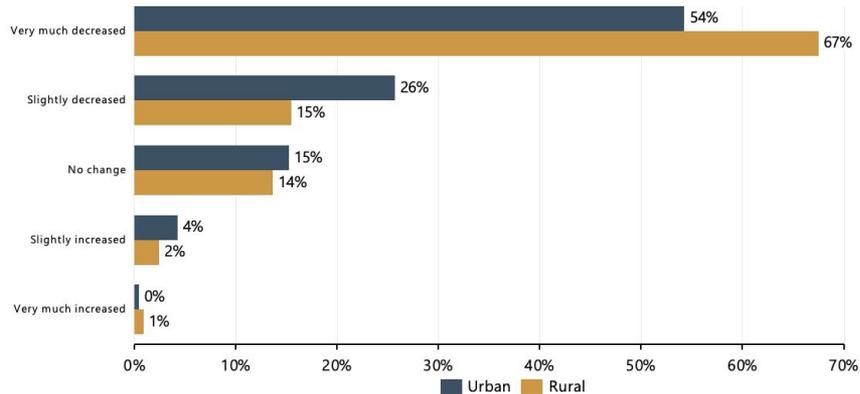
People have managed to sustain some support; it has helped many withstand the crisis, but many are left with no option but to cut down on extra or unnecessary spending. However, with families spending more time at home, households find that their utility expenses increase or stay the same. The loss of income, employment, and savings during the pandemic, without the social safety nets people usually depend on, causes heightened tensions and stress in households.



“Three other children are staying with me, and they are friends of my father’s. I’m the one feeding them. In Niger, we are very social people, so you help the best way you can.”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

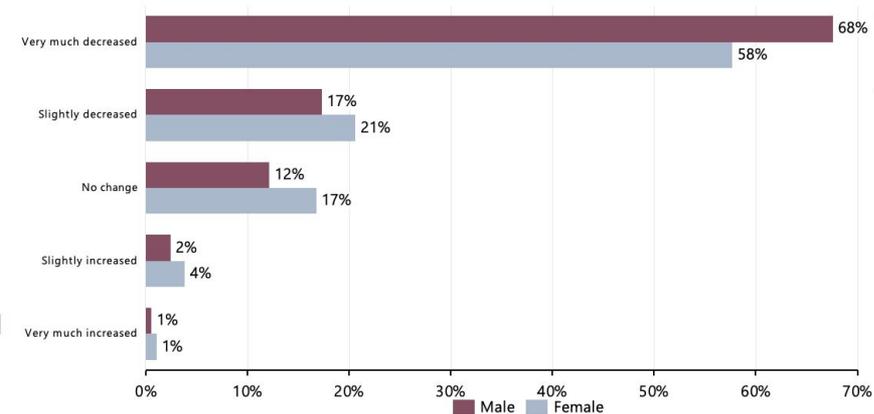
How has COVID-19 changed your household's income?



REDUCED INCOME IN HOUSEHOLDS

In Dalberg's phone survey, **54% of urban respondents** and **67% of rural respondents** reported a **very high decrease in their household's income** since the pandemic began. **58% of women** reported a **very high decrease in their household's income** since the pandemic began, compared to **68% of men**.

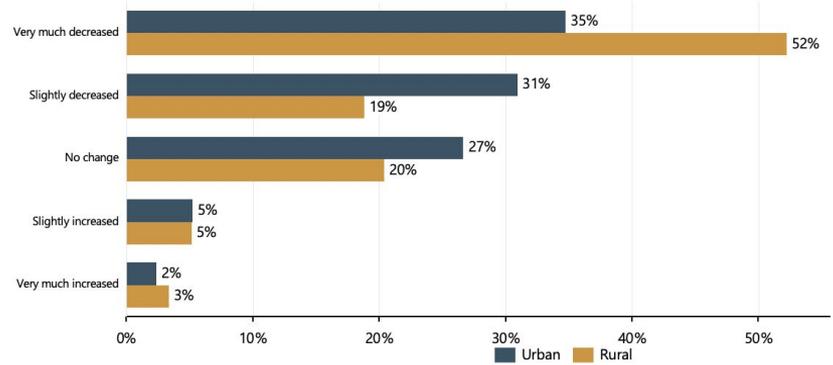
How has COVID-19 changed your household's income?



“I have not been able to carry on in the way I did before because I now have less...I just had to adjust my way of living. For example... now I can't buy cigarettes or buy juice after my meal.”

Mamane, 38 years old, Male | Leatherworker
| Urban, Niamey, Niger

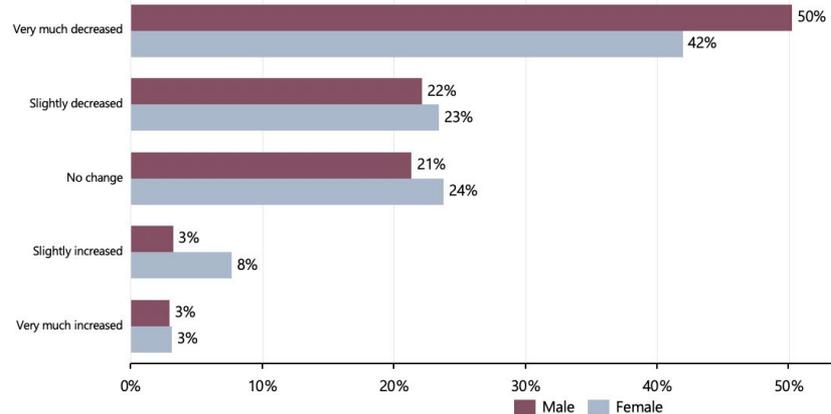
As a result of the COVID-19, have there been changes in food consumption in your household per person? Has it:



REDUCED CONSUMPTION

According to Dalberg's phone survey, **35% of urban and 52% of rural respondents reported a very high decrease in food consumption** in their household due to the COVID-19. From a gender perspective, **42% of women reported a very high reduction** in their households' food consumption due to the COVID-19, compared to **50% of men.**

As a result of the COVID-19, have there been changes in food consumption in your household per person? Has it:



“My family has been fine because we have people helping us, and people know that when you help someone, God will help you too.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger

“Before the pandemic, my earnings were between 500k CFAF to 1m CFAF. Now, with the pandemic, I am earning 150k CFAF per week... Now it is my children who help me when I need financial support.”

Adisatou, 68 years old, Female | Entrepreneur | Urban, Niamey, Niger

“At the beginning, my parents were stressed out because our electricity bills went up and we consumed more food since we were at home all the time... The dynamic [at home] changed.”

Djibril, 23 years old, Male | Student | Urban, Niamey, Niger



IMPACT ON MSMEs

Border closures, restrictions in movement, and increased transportation costs have cut off small businesses from cities, leaving them unable to access supplies and sustain their operations.

Closure of borders

Border closures and restrictions in movement and transportation during the pandemic impacted both the supply and sales of small businesses. Tourists stopped entering or traveling through the country, and people stopped moving from one region or city to another. Business owners who depended heavily on tourists or locals from different locations for their profits have lost their primary income source. The border closures happened during the Ramadan period when prices usually increase. With the borders closed, prices went even higher, and the population's purchasing power drastically declined.^[6] The impact has mainly been felt in the services sector, which accounts for 38% of Niger's GDP,^[7]

Cessation of movement

The movement restrictions also left rural businesses who traveled to urban centers to procure their supplies unable to replenish their stocks. There were hikes in transport costs, and the price of goods increased as a result. Public transport either stopped, became less frequent, or took longer due to new social distancing measures. Private vehicles were not allowed to run either. Those who attempted to travel using private transport often had to pay hefty fines to the police. Cut off from their source of supplies; leaving many small businesses found it impossible to sustain their activities.



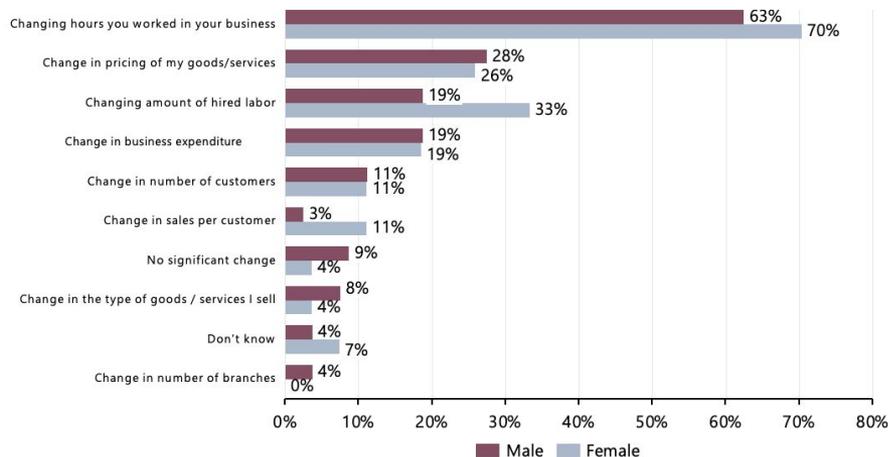
[6] Dalberg analysis, 2020

[7] ECOWAS, Humanitarian and Social Indicators, 2019 via Dalberg analysis

“Due to the pandemic, the cost [of transportation] went up. Cars say they are breaking the rules to go back and forth since it’s not allowed, so if the police catch them, they have to pay a fee. That’s why the cost went up... [It cost] up to 50k CFAF to go from the place I stay to the city [when it used to cost 5k CFAF]... I couldn’t buy the supplies I needed [for my business]”

Abdoul, 32 years old, Male | Breeder & trader | Rural, Tera, Niger

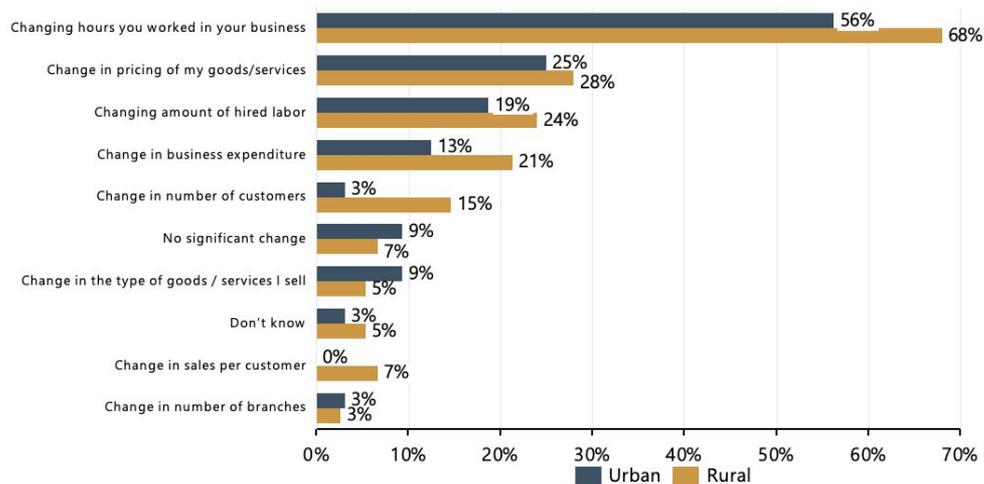
Which of the following changes have been significant for your Business?



CHANGES IN BUSINESS NORMS

68% of urban respondents and 72% of rural respondents reported changing hours worked on the farm as the most significant change in their household since the pandemic began. 86% of women said changing hours worked on the farm was the most significant change in their home since the pandemic started, compared to 71% of men.

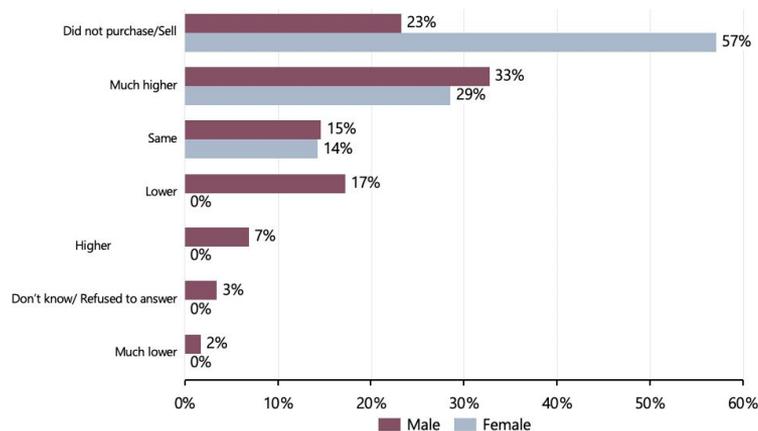
Which of the following changes have been significant for your Business?



“I’ve located 113 km from the city. We were forced to follow social distancing measures on buses, which made it difficult... A trip that would usually take you a day would take you 2-3 days... I get most of my supplies from the city. I couldn’t go back and forth. That impacted my activities.”

Yacouba, 47 years old, Male | NGO volunteer & trader |
Rurban, Tillabéri, Niger

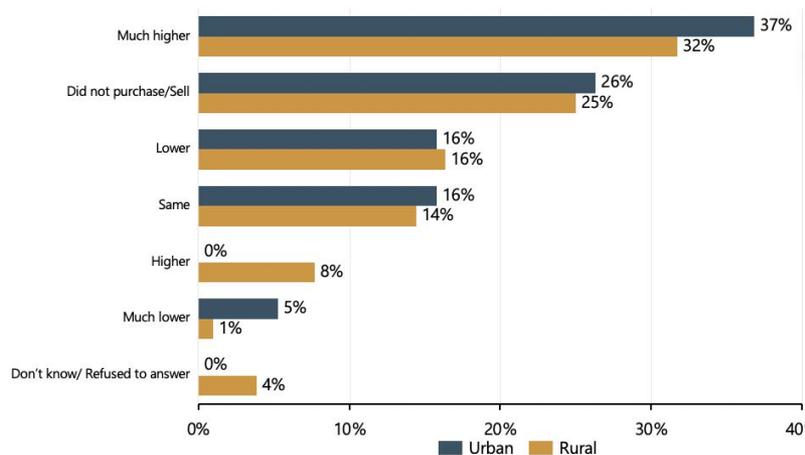
Was the price you paid for (fertilizer, seeds, poultry feed, vaccines) higher, lower or inputs about the same as usual?



ACCESS TO INPUTS

Various measures introduced to curb the spread of **COVID-19 impacted businesses negatively**. **57% of women reported not purchasing any inputs, compared to 23% of men**. From a rural-urban perspective, **37% of urban respondents and 32% of rural respondents** reported paying a much higher price for inputs.

Was the price you paid for (fertilizer, seeds, poultry feed, vaccines) higher, lower or inputs about the same as usual?



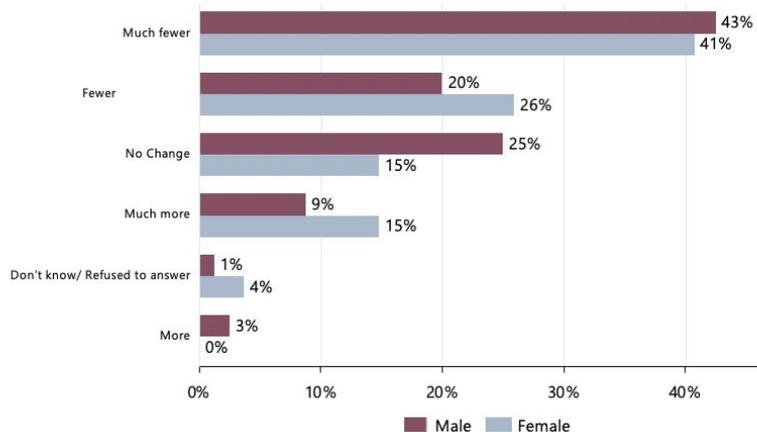
“We live thanks to the tourists, and at the moment, with the closing of the borders, no tourists can come to see us... I was unable to pay my rent for almost 8 months because there was no trade. I was forced to use up all of my savings. Before the virus, I was only making up to 80k CFAF per week, and now I am not making anything.”

Mamane, 38 years old, Male | Leatherworker | Urban,
Niamey, Niger

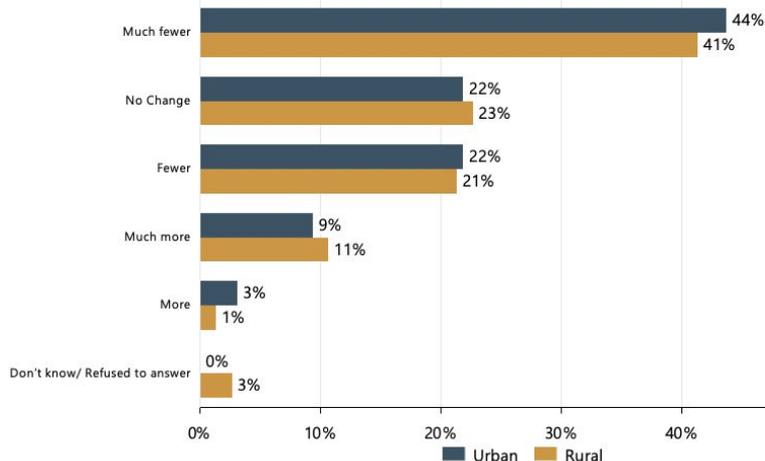
TIME SPENT IN BUSINESS

With the closure of borders and restriction of movement, businesses have struggled to sustain their activities. **44% of urban respondents and 41% of rural respondents** reported fewer working days in their business since the pandemic began. **41% of women reported a much fewer number of working days in their business since the pandemic started, compared to 43% of men.**

Spent more or less number of days working in your business?



Spent more or less number of days working in your business?



“People are just not buying any more... Because of the pandemic, roads were closed, tourists are not coming anymore, and people are traveling less than they used to... This has hurt me the most”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

46-year-old Bashir lives with his wife and six children. Although being a radio host is his dream job, Bashir became a reseller when he moved to Niger from Mali. He chose this work because he “found the business industry to be easier to get into because you can earn easily.” He supplements his income by working as an emcee for parties.

Bashir’s shop is in an area just off the main highway to get in and out of the country, and many travelers and tourists used to go by. Of the 450k CFAF he used to make per month before the pandemic, 350k CFAF was from tourists. Now, with the border and movement restrictions, that has come to a halt. Even local people are no longer buying.

The government has not provided Bashir with any support as he deals with his losses. His community’s town hall provided him with equipment for hand washing, and he makes every customer wash their hands before entering the shop and ensures that they maintain social distance. But what Bashir needs from the government is funding or products to sell. He said, “Things are not back to normal yet [with my business]. It’s not yet working out the way I want it to.”



LIMITED FINANCING OPTIONS

Lack of savings and little economic support, and inability to access formal loans due to high-interest rates for SMEs have resulted in small businesses suffering heavy financial losses without any clear recovery channels. This is typically a heavier burden for SMEs in the informal sector, often unregistered, who cannot access state funding for MSMEs in the formal sector.

Reduced cash flow

Many small business owners said they survive day by day, putting the money they earn towards their food, household expenses, and purchasing enough fresh supplies to sustain their business. They rarely have enough to save, and those who do prefer to do it informally, feeling like they do not have enough money to warrant the use of formal financial institutions. Small business owners are struggling to get by perceiving formal loans as out of their reach because of the interest they would have to pay. Microcredit structures for financing income-generating activities do exist, but the poorest households cannot access them.^[8] 26% of Nigerien households have members who have borrowed money, and only 12% of these loans are made formally (through a bank (1%), microfinance (7%), a cooperative (2%), or a company (2%)).^[9]

Loan options for SMEs

With few accessible avenues of financial support and limited savings to fall back on, some small business owners have had to let go of their staff or find alternate income-generating activities to keep their businesses afloat. Others have had to close their doors. The government has created a fund for SMEs, but the loans are only available to SMEs in the formal sector, excluding most businesses.^[10] The government has also taken measures to make hand washing equipment available to small businesses. While these precautionary steps help build customers' confidence, it has not been enough to revive businesses.

[8, 9] Netherlands Enterprise Agency, "Report on Entrepreneurship: Niger Catalistas", August 2019

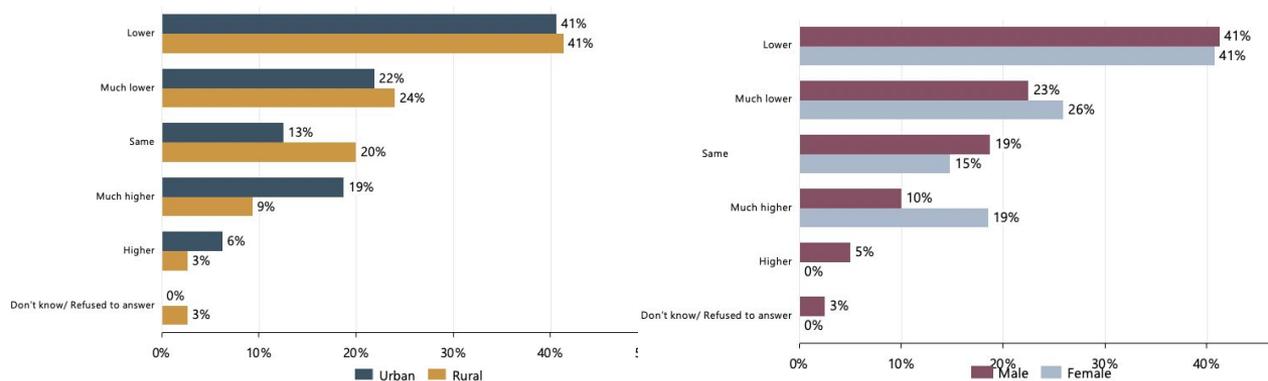
[10] Dalberg analysis, 2020



“The virus has made everything go sideways, the activities [of my cleaning business] had to stop so I focused on my events business, but even that was not possible because of the virus... Even till today, things are not as they used to be. Despite the fact that we are now allowed to gather again, people are still scared.”

Adisatou, 68 years old, Female | Entrepreneur | Urban, Niamey, Niger

Your monthly income was higher, lower or about the same as usual?

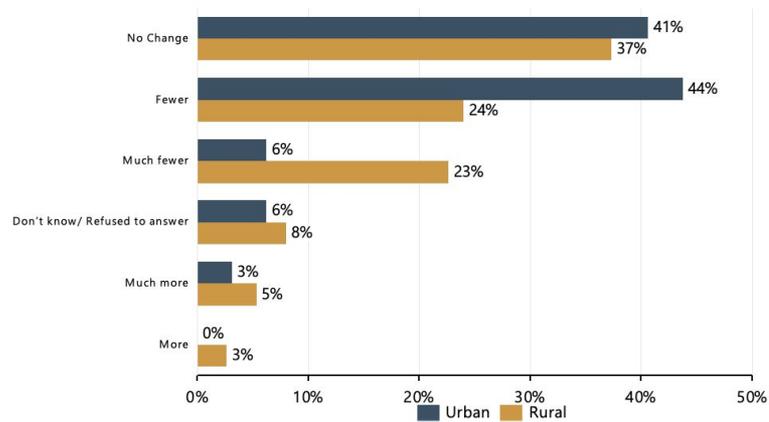


REDUCED INCOME

Across genders and locations had experienced a significant drop in income in their businesses.

41% of both urban and rural respondents reported a lower monthly gain since the pandemic began. 41% of both women and men reported a lower monthly income since the pandemic began. This income reduction is partly due to a high number of people working as day laborers. Our survey revealed that **44% of urban respondents and 24% of rural respondents reported fewer hired laborers** since the pandemic began.

Hired more or less labourers to work in your business?





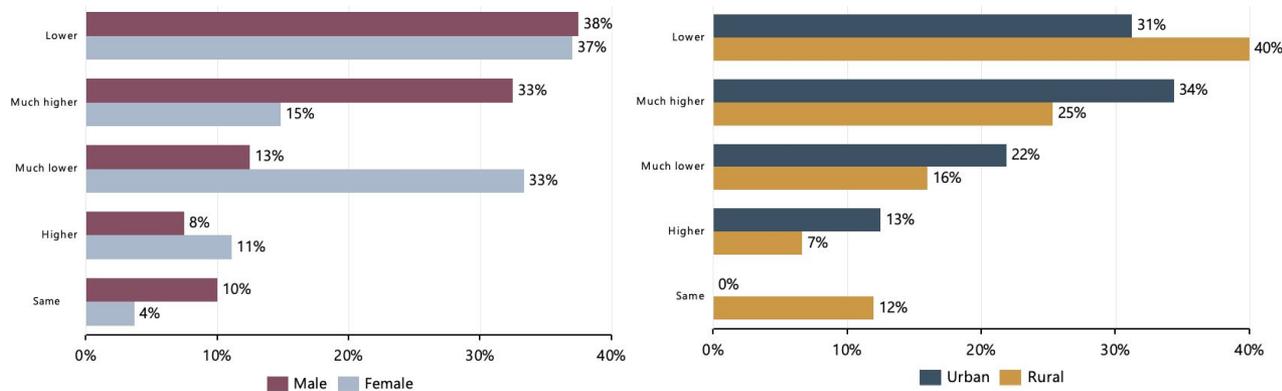
“It's only when you get a lot of money that you can think about saving. When you earn daily from a small business, you can't think about saving. Everything you get goes back into the household, food, clothing, for the family.”

Daouda, 65 years old, Male | Thrift shop owner | Rurban, Tillabéri, Niger

REDUCED EXPENDITURE

31% of urban respondents and 40% of rural respondents reported a lower monthly expenditure since the pandemic began. Similarly, 37% of women reported a lower monthly expense since the pandemic started, compared to 38% of men.

Your monthly expenditure was higher, lower or about the same as usual?



“I tried my best to keep things moving and pay my staff... But I had to shut down everything.... It was a radical decision to fire everyone. I was only able to stay afloat because I have children who are all stable, and I have a good pension from the bank”

Adisatou, 68 years old, Female | Entrepreneur | Urban, Niamey, Niger

“When I started my business, I started doing the paperwork to open a bank account, but the money they asked me to put down to start an account was too much, so I didn’t.”

Abdoul, 32 years old, Male | Breeder & trader | Rural, Tera, Niger

“I’ve been living with what I get daily from my job. When I don’t get money, I sit tight and pray to God.”

Idrisa, 25 years old, Male | Day labourer | Rurban, Tillabéri, Niger



How might we enable MSEs and small scale producers to still have a viable and sustainable route to market amidst the COVID restrictions?

How might we help entrepreneurs envisage new ways of generating income, allowing them to still have a path towards a meaningful livelihood during the economic downturn

How might we better support and understand the COVID related needs of the Niger labor forces, especially workers in informal employment?

- Explore alternative sales and distribution models to sustain the movement of goods and services, such as using CBOs/ NGOs/ business groups to aggregate and sell produce on behalf of MSME owners or rotating market days to connect sellers and buyers safely
- Create pathways to transition entrepreneurs to alternative temporary income generation activities that empower entrepreneurs to pivot and earn a living during COVID
- Develop or scale tech-enabled solutions that enable entrepreneurs to adapt their operational activities. For example, using satellite technology to guide pastoralists to nearby pastures
- Educate on the benefits of formal registration to entrepreneurs so they can benefit from broader access to resources and support
- Create and promote COVID compliance standards to provide clarity on safety measures that businesses can take while building consumer confidence
- Strengthen criteria to target and support MSMEs by instituting measures to admit and vet informal MSMEs

BEST PRACTICES

[Conseil de Jeunes](#) supports young people's livelihoods by acting as an intermediary between public authorities and the youth. Conseil de Jeunes mobilizes food assistance from larger donors and humanitarian bodies, distributing free food or selling it at subsidized prices.

[Save the Children](#) partners with other development institutions to aggregate and then distribute cereals to affected households as part of their food assistance to local communities. They also offer technical training on good irrigation to support farming activities.

[Niger Adaptive Social Safety Nets Project 2 by the World Bank](#), is an emergency cash transfer program for 500,000 beneficiaries in eight regions of the country to help them cope with the pandemic's short-term consequences.

How might we promote formal financial institutions and MFIs, and community lending schemes as a channel for accessing credit lines, ensuring the process is simple and meets the needs of vulnerable households and MSMEs?

How might we leverage people's existing financial habits to increase uptake of tailored financial products that are beneficial for people's current situation?

- Provide emergency cash transfers to replace depleted savings and support households to meet their basic short and medium-term needs
- Leverage informal savings groups as an avenue for cash transfers or promote saving activities among men and women who cannot access formal finance.
- Build local government capacity to evaluate and identify at-risk households who qualify for financial assistance
- Subsidize or cap mobile money interest rates to increase short- term financing through widely accessible means or expand banks' reach into rural and informal demographics to increase access to formal financial support through roving agents.
- Institute more lenient payment terms. For example, by extending loan repayment periods without classifying them as non-performing

BEST PRACTICES

BCEO, the regional central bank for the West-African Economic and Monetary Union, among other measures, set up a framework, inviting banks and microfinance institutions to accommodate the request for postponement of repayment of loans from customers facing COVID-19 related repayment difficulties for a three-month renewable period without classifying such loans as non-performing.

OSV (Vulnerability Monitoring Observatory) in Niger, mobilized partners who contributed funds to assist MSMEs to resume their activities. For example, NGO CLAIR financed women traders with 32,000 CFA each. OSVs are also partnering with organizations to create several companies that will be formally licensed to trade a wider variety of products and seek out markets beyond the designated market days.

ACCESS TO SAFETY KITS

An increase in the prices of masks and hygiene equipment, with very few government subsidies or support for households, has increased the out-of-pocket expenditure placed on families, further exacerbating the financial strain they are under, ultimately leaving many people unable to protect themselves and their families.

High cost of protective equipment

The government has reallocated the equivalent of 1.3% of GDP to emergency spending on health, security, and social assistance amid the pandemic^[11]. In July 2020, the Niger COVID-19 Emergency Response Project, in collaboration with UNICEF, delivered \$3 million worth of medication and equipment.^[12] Still, people say that protecting themselves and their families from the virus comes at a high cost. Since the pandemic began, people report that the price of masks, hand sanitizers, and other hygiene equipment has soared. The government provides these supplies to government establishments, like schools, offices, and some businesses, but expects individuals and households to procure themselves.

Increased burden on expenditure

Without support or subsidies from the government, out-of-pocket expenditure on masks and sanitizers has exacerbated the financial strain households are already facing and further reduces people's ability to save. Those who are already incredibly vulnerable, and have limited access to healthcare resources, like internally displaced people, migrants, or refugees, living insecurely in camps, are left even more exposed to the threat of COVID-19 and even less able to comply with protective measures, such as hand hygiene.^[13]



[11] IMF, *Policy Responses to COVID-19, 2020*; ECOWAS, *Assessment of the Implementation of Heads of States Decisions*, July 2020

[12] World Bank, "Niger: they fight the COVID-19 in their own way", October 2020

[13] Medecins sans Frontieres, "Facing multiple challenges in responding to COVID-19 in Niger", June 2020



“For households, you have to get your own [hygiene] equipment. It has been difficult for a lot of people to get this because it’s very expensive. The prices have just gone up...For example the price of a face mask has risen from 100 CFAF to 500 CFAF. Now, imagine if you have a lot of children and you want to keep them safe. It’s impossible.”

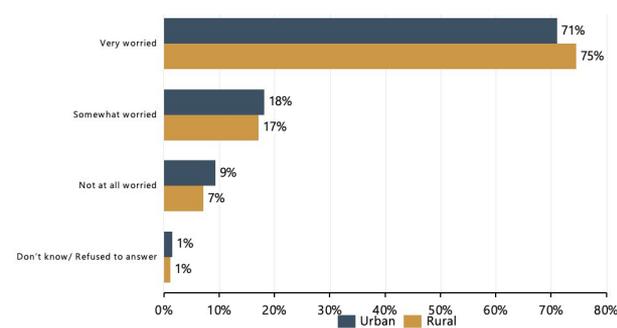
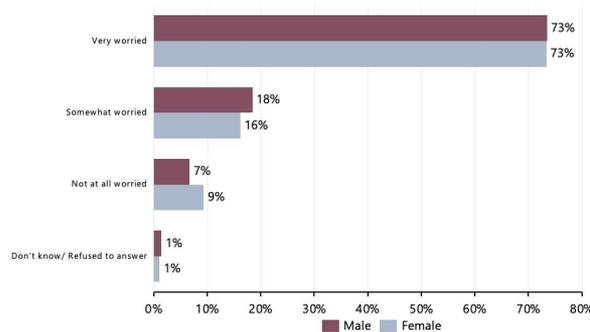
Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger

How worried are you, if at all , about getting infected with Covid-19?

FEAR OF CONTRACTING COVID

In Dalberg’s phone survey, **73% of both women and men** reported being very worried about getting infected with Covid-19

The same was true for people in both rural and urban areas, who reported being very worried about contracting COVID-19. **71% of urban respondents and 75% of rural respondents** reported being very worried about getting infected with Covid-19.





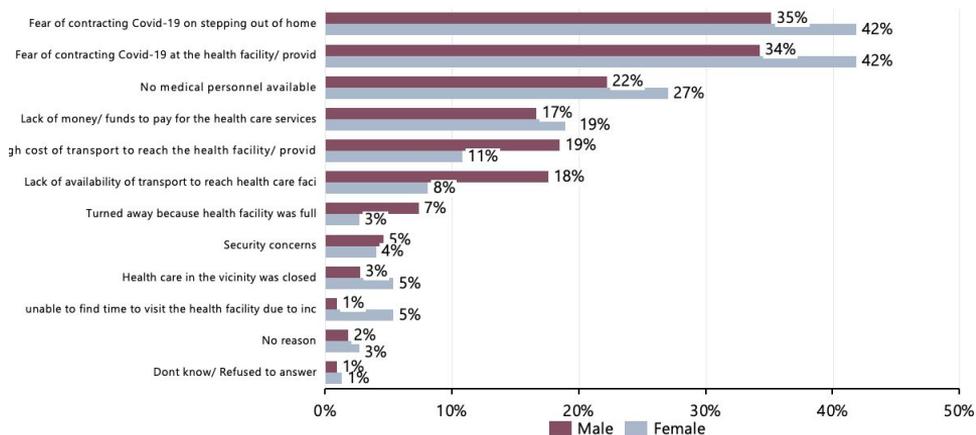
“My family has been fine because we have people helping us... Mostly friends and family and former colleagues have been helping us with donations for PPE.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger

ACCESS TO HEALTHCARE

Dalberg’s phone survey found that **42% of women** reported **fear of contracting covid 19** on **stepping out of the house** as the reason as to why they were **unable to access health services**, compared to **35% of men**.

What is the reason you have been unable to access health services?



“For households, you have to get your own [hygiene] equipment. It has been difficult for a lot of people to get this because it’s very expensive. The prices have just gone up...For example the price of a face mask has risen from 100 CFAF to 500 CFAF. Now, imagine if you have a lot of children and you want to keep them safe. It’s impossible.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger

“I couldn’t save money [during COVID-19] because I had to buy masks and hand sanitisers.”

Djibril, 23 years old, Male | Student | Urban, Niamey, Niger

“My family has been fine because we have people helping us... Mostly friends and family and former colleagues have been helping us with donations for PPE.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger



COVID-19 COMPLIANCE

In rural areas, people's compliance with COVID-19 precautions is hindered by low literacy levels, established beliefs, misinformation, and financial constraints that feel more pressing than the COVID-19.

Lack of visible evidence in rural areas

When the pandemic first hit Niger, many did not believe that COVID-19 was real, or urgent. The government has taken measures to raise awareness about the virus and the necessary precautions, which have helped increase people's awareness of COVID-19. However, many people in rural areas (who make up 83% of Niger's population^[14]) still feel removed from the threat of the virus. Many said that while they have heard of COVID-19, they do not actually know of anyone who has been infected, and there is a sense that the virus is more of a risk in urban or wealthier parts of the country.

Misinformed beliefs

People also hold beliefs that make them resistant to taking precautionary measures, such as the view that COVID-19 is a cattle disease that rural people already know how to handle; that the virus only impacts Western people; or that dying from it would be god's will. Adding to the challenge of making people accurately understand COVID-19, is a literacy rate that is one of the world's lowest, though it is improving among younger generations (as of 2018, the literacy rate was 43.5% for Nigeriens aged 15-24, but only 15.8% for those aged 65+.)^[15]

More pressing needs

Many people also face day-to-day financial challenges that feel more urgent, and the virus, in comparison, is a non-issue. Those who were already struggling to make ends meet do not see the pandemic as a matter of great consequence and thus feel less of a need to follow protective measures.

[14] UNESCO Institute for Statistics, "Niger", Accessed October 2020

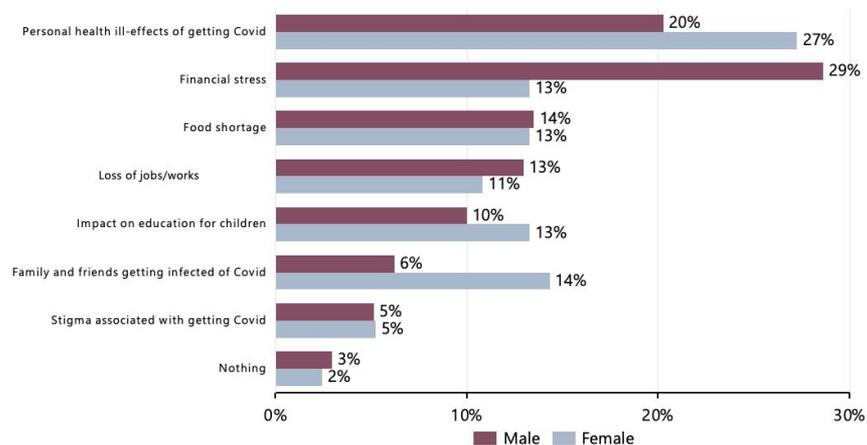
[15] <https://www.msf.org/facing-multiple-challenges-responding-covid-19-niger>



“I have heard people talking about the virus, but I have not actually seen anyone get infected.”

Daouda, 65 years old, Male | Thrift shop owner |
Rurban, Tillabéri, Niger

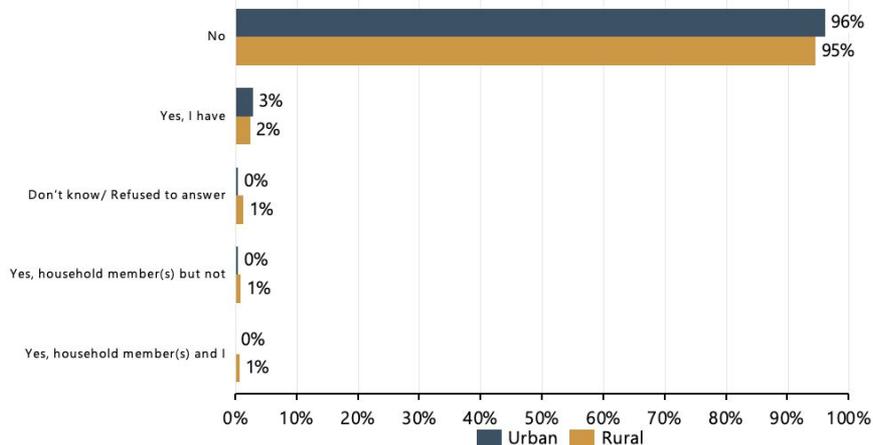
What worries you most about Covid-19?



LOW EVIDENCE OF INFECTIONS

Many people do not know anyone who has contracted COVID-19, which has resulted in reduced compliance with regulations. **96% of urban respondents and 95% of rural respondents reported no infections of Covid-19 in their households. 13% of women said that the most significant worry related to Covid-19 was the financial stress, compared to 29% of men.** Indicating the rationale behind low compliance as people feel that they are unlikely to contract the virus, and there's a pressing need to survive the economic downturn.

Have you or your household members been infected with Covid-19?





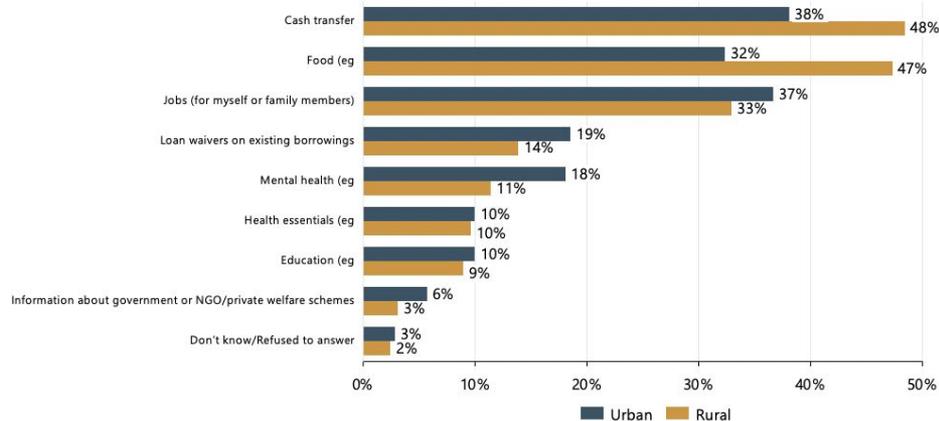
“[The pandemic] doesn't affect me that much... The work I'm doing is not bringing me enough money to survive... I have no one to ask for help if I need money. It's always been like this. It started way before the pandemic.”

Idrisa, 25 years old, Male | Day labourer | Rurban, Tillabéri, Niger

CASH TRANSFERS

Financial aid was considered more helpful compared to needs such as health essentials. The study found that **38% of urban respondents and 48% of rural respondents reported that cash transfer** would be the most helpful kind of support to them at this time. Only **10% of the respondents in both urban and rural areas reported that health essentials** would be the most helpful kind of support at this time.

What kind of support would be most helpful to you at this time?



“[The pandemic] doesn't affect me that much... The work I'm doing is not bringing me enough money to survive.... I have no one to ask for help if I need money. It's always been like this, it started way before the pandemic.”

Idrisa, 25 years old, Male | Day labourer | Rurban, Tillabéri, Niger

“I have heard people talking about the virus, but I have not actually seen anyone get infected.”

Daouda, 65 years old, Male | Thrift shop owner | Rurban, Tillabéri, Niger

“The main difference we have [in rural areas] is on an educational level. Most people are not able to understand the magnitude of the virus.”

Atiku, 51 years old, Male | Doctor | Rural, Tillabéri, Niger



“The government did try to raise awareness [about COVID-19], but people didn’t take it so seriously because we live in an African country where people face things like this all the time.”

Atiku, 51 years old, Male | Doctor | Rural, Tillabéri, Niger

Dr. Atiku has been an eye doctor for the last 15 years. He works at a hospital in Tillabéri, while his family lives in Niamey.

Initially, Dr. Atiku shared, many people in the rural community where he is based did not believe that the virus was real. To make people take it more seriously, the government spread awareness, and when they closed the borders, people started to pay more attention. While this has helped people understand that the pandemic is real, many remain unconcerned. “In our community, there are many people who have low literacy, or they are pastoralists who feel that the virus is a cattle virus, and they feel like they know how to deal with it traditionally,” he said. While there is awareness on handwashing, masks, and social distancing, few follow these precautions. Dr. Atiku is not too worried, either. “I don’t think there is a big issue that people don’t believe it because...in these rural areas there have not been many cases at all, but in the cities even I know people who have died from it. But for some reason, it is only the rich that die from it. I don’t know why.” He said that when the government has training sessions for the hospital staff, people wear masks and take precautions during the session, but throw away the mask and carry on as usual once it ends.



SOCIAL PROTECTION

Government welfare and benefits are highly politicized, so people do not see them as a dependable support source. Instead, they rely on and trust NGOs and associations to fill the gaps left by the government.

Government aid

People say that their access to government support is highly dependent on political affiliations and nepotism. Only those with connections to the ruling party can avail of any relief measures or benefits that the government has put in place. Without any political connections, people say they do not even hear about government schemes. People also expressed concern about accepting aid from the government for fear that it might come with political consequences or leverage against them. As a result, people have little confidence in the government's ability to support them without expecting anything in return.

Non Government Organisations

In the gaps that the government does not address, NGOs and associations play a critical role. They have provided food and monetary support to individuals and small businesses and even running training on COVID-19 precautionary steps. Those who have benefited from NGOs and associations see them as more accessible and egalitarian sources of support. Some associations have distributed the government's relief packages to the broader community, but many have supported them independently. People have also been self-organizing and mobilizing their social networks to provide different forms of help to their communities, from masks to food, to accurate information.





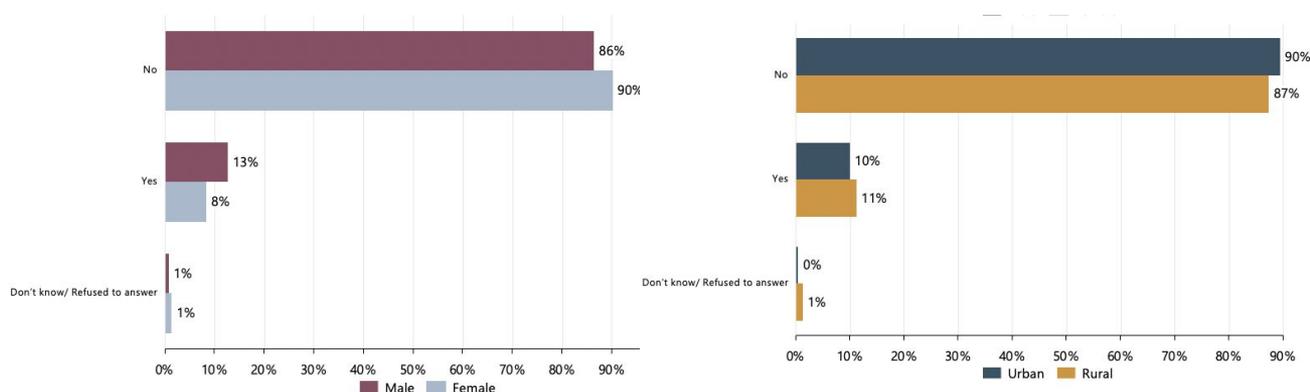
“Any time [the government] helps you, and it's like they own you. That's why I avoid any type of help from them... They don't help you just to help you. They always want something in return.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger

FINANCIAL SUPPORT

Most people had not received any financial or food support during the pandemic. **90% of urban respondents and 87% of rural respondents reported not having received any monetary or food-related help** during the COVID-19 pandemic. **90% of women** reported not having received any financial or food-related assistance during the COVID-19 pandemic, compared to **86% of men**.

Have you received any financial or food related help during the COVID-19 pandemic?





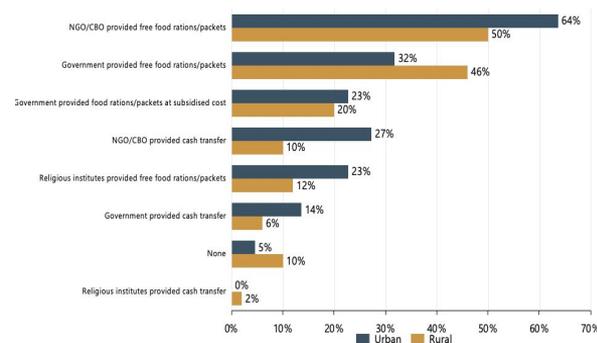
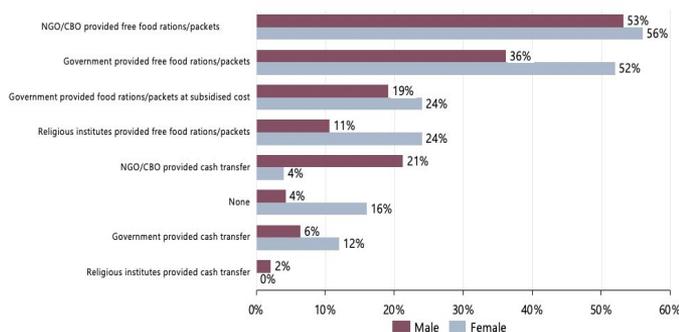
“You have to be part of a political group to know about such things [government relief]. This is a huge problem in Niger—if you're not part of an actual political group, you won't get any funding help... You can get 2-3 political alliances in the same family. The family member who is with the current government will help his family members get into the funding system.”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

SOURCES OF AID

Of those who received aid, **56% of women** reported **NGO/CBO provided free food rations/products as the highest source of financial or food-related help** received during the COVID-19 pandemic, compared to **53% of men**. **64% of urban respondents** and **50% of rural respondents** reported **NGO/CBO provided free food rations/products** as the highest source of financial or food-related help

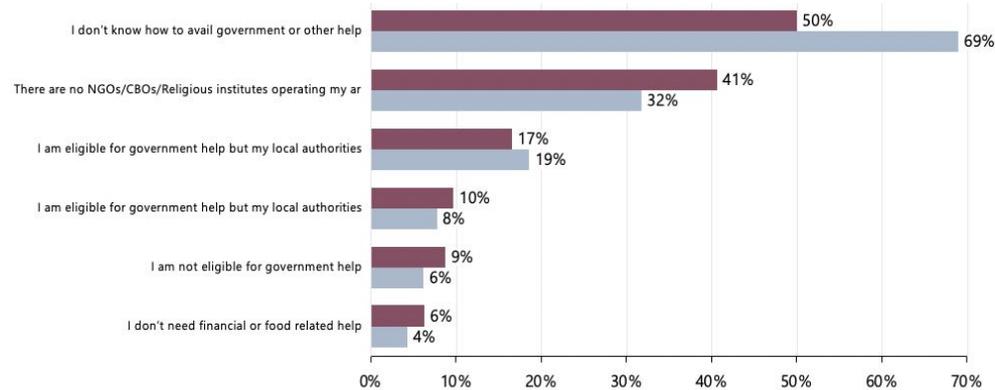
What financial or food related help have you received during the COVID-19 pandemic?



“I didn't receive any help or support from the government. But I am in an association of alumni of my old university that has been helping people.”

Adisatou, 68 years old, Female |
Entrepreneur | Urban, Niamey, Niger

Why haven't you received any financial or food related help during the COVID-19 pandemic?

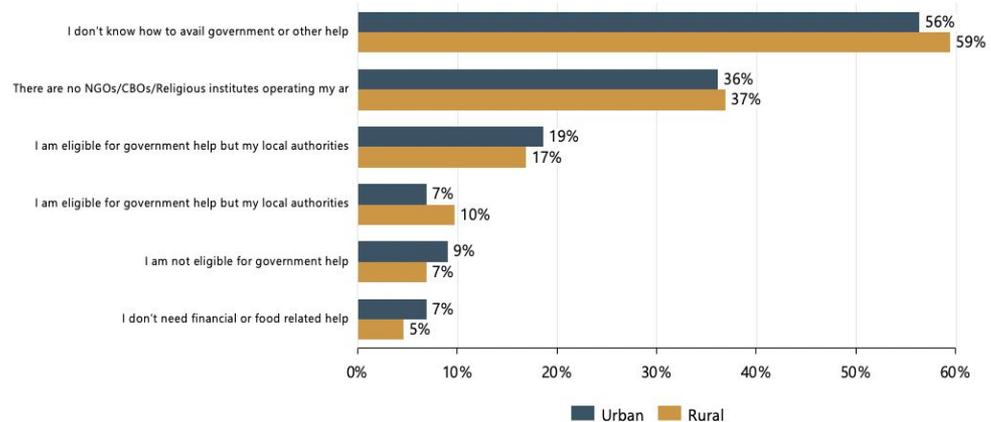


BARRIERS TO ACCESS

In Dalberg's phone survey, **56% of urban** respondents and **59% of rural** respondents reported **not knowing how to avail government or other help** as the main reason they have not received any financial or food related help during the COVID-19 pandemic.

69% of women compared to 50% of men, reported not knowing how to avail government or other help as the main reason they did not receive aid

Why haven't you received any financial or food related help during the COVID-19 pandemic?



“Our association helped us in terms of food. They gave us rice and millet every month for four months because they saw that many people were struggling... The food came from the government, but the association just helped them to distribute it... Whether you are part of the association or not, the help and support you receive are the same.”

Mamane, 38 years old, Male | Leatherworker | Urban, Niamey, Niger

“I gave my information to an NGO, and they said they would call me in one week and they will give me 35k. They told us they’re just trying to help [small business owners].”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

“The donations [my English club] has been getting [to provide masks to people] is not coming from the government but NGOs... I met an American woman whom I became friends with, and she’s the one who’s been helping me because she works with an NGO.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger



ACCESS TO INFORMATION

For information on COVID-19 precautions and updates, people trust TV and radio, which are perceived as authenticated sources, as well as first-hand information from their peers. Yet, people still seek out multiple sources to verify information, typically turning to social media, despite being wary of this source.

Multiple sources of information

Even though people feel an information overload when it comes to COVID-19, they often seek out multiple sources to verify the information they are receiving about the virus and precautionary measures.

Verification of information

People tend to trust the information received through TV and radio the most because they believe it is checked by professionals and has more authority. Yet, people tend to compare the information obtained through TV and radio with other sources to verify it despite trusting these sources. Often, people prefer to authenticate information through their own first-hand experience, seeing this as a way to guarantee the legitimacy of information — knowing someone who has COVID-19, seeing the government actually implement a prevention measure, or observing what precautions the people around you are taking all help people ensure that the information they are receiving is accurate. When people cannot rely on first-hand experience or observations, they seek out multiple other sources. Though many expressed wariness of Facebook, Twitter, and WhatsApp, for spreading misinformation, they tend to use social media as a way to cross-check information received from other sources.



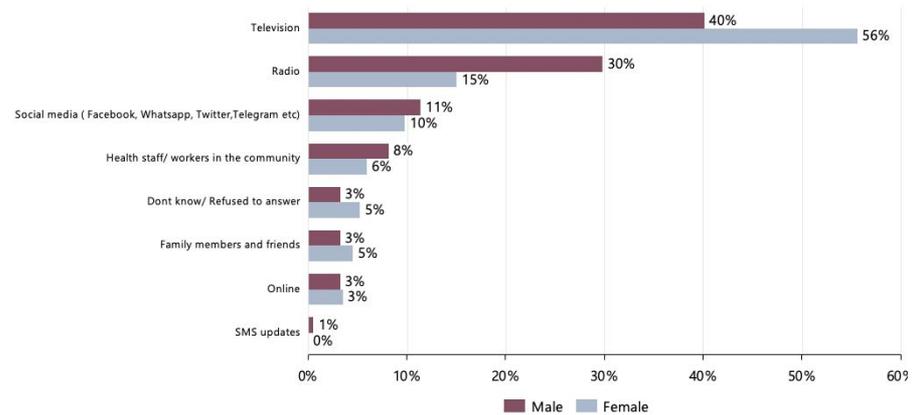
“When it comes to keeping myself safe, I would follow the things I see on TV, but I also follow what I see other people do.”

Mamane, 38 years old, Male | Leatherworker | Urban, Niamey, Niger

“I trust information from peers, but not at a 100% level, only 50%. I have to get confirmation from radio or TV.”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

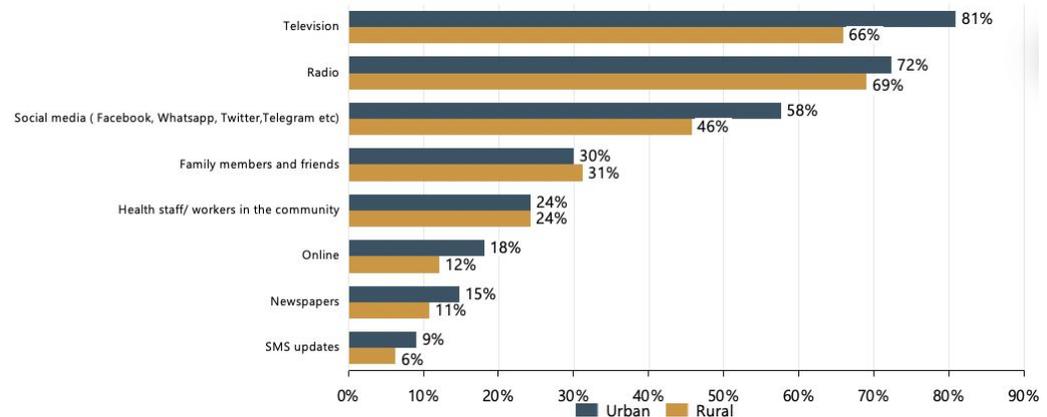
Which source of information do you trust most?



TRUSTED SOURCES

TV is the most used source of information about the COVID-19 pandemic (reported by 71% of respondents). **81% of urban respondents and 66% of rural respondents said they currently get information about COVID-19 through Television.** It was also the most trusted source of COVID-related information (reported by 47% of respondents). When split by location, the data shows that **45% of rural respondents reported the highest trust in TV compared to 52% of urban respondents.** **56% of women** reported trusting TV the most as their source of information, compared to 40% of men.

Currently, how do you get information about COVID-19 pandemic?



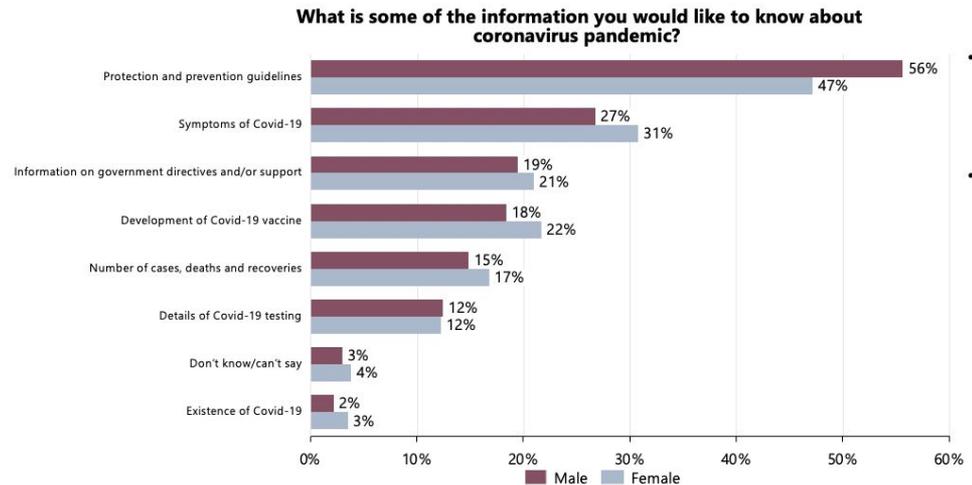


“I compare the information on Facebook with what people are saying in the streets because sometimes people like to dramatize things... and also with what the government says on the TV. The TV information is accurate... but you can't trust everything you get from the government.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger

INFORMATION TYPE

Most of the respondents wanted to learn about COVID-19 **protection and prevention guidelines**, followed by the **symptoms of COVID-19**. **47% of women** reported that information they would like to get about the pandemic is on **protection and prevention guidelines**, compared to **56% of men**. **31% of women** compared to **27% of men** wanted to learn about the symptoms of COVID-19



“Besides the training I receive, I get my information on COVID from television and from social media... The media that I trust the most is TV...because there is a committee of experts in place and they really know what they are talking about.... But the most accessible [channels] are social networks like WhatsApp where I have groups.”

“I have had first hand information because my neighbour was taken away because they were suspected to have the virus, I have seen it with my own eyes...and I hear from what people are saying in the city.”

Mamane, 38 years old, Male | Leatherworker | Urban, Niamey, Niger

“WhatsApp and TV are my ways of receiving the news. I pay more attention to the TV because I am able to see what was happening nationally and it is more accurate... but even with the TV, at some point it became too much and I had to switch off.”

Adisatou, 68 years old, Female | Entrepreneur | Urban, Niamey, Niger



How might we better deliver targeted messaging that will reach and resonate with rural communities reinforcing the pandemic's seriousness without fear-mongering?

How might we better use technology to collect accurate information from community groups and provide an avenue to access health information?

How might we strengthen third sector organizations' existing reach to disseminate information and provide access to a safety net for vulnerable households?

How might we better identify at-risk households and ensure they are not excluded from support packages put in place by the government and aid organizations?

- Use influential community members to raise awareness, including the likes of digital influencers, local leaders, and religious leaders, to relay crucial information on prevention, protection, and management of COVID-19.
- Work with call centers to decentralize healthcare, for example, by helping people self-diagnose and be directed to further assistance where necessary.
- Contextualize the information being shared to make it more relatable to communities. Such as carefully drawing from religious texts to familiarize communities with pandemics or likening casualty statistics to similar disease outbreaks.
- Partner with vetted NGOs, CBOs, and religious organizations to carry out needs assessments and distribute government social safety nets. These partnerships will provide reach and leverage critical contextual information on pressing challenges facing communities as well as possible solutions
- Seek alignment among development and implementation organizations to ensure maximum reach and coverage in PPE distribution, to avoid uneven supply across regions or localities

BEST PRACTICES

Medecins Sans Frontiere built a 50-bed treatment center in Niamey, the epicenter of infections in Niger, and supported the Ministry of Public Health emergency medical assistance service call center, helping them verify alerts, organize triage, and refer severe cases from health centers to the treatment center. This intervention helped ease the expected rise in demand in public health facilities. They also helped organize the transport of test samples from the Zinder area to the capital, about 980 km away.

#WaHagovDaCovid19 is a digital campaign funded by USAID and implemented by UNICEF, which mobilized digital influencers to spread information on COVID-19 and tackle misinformation and rumors circulating on various social media platforms. The initiative has reached 2,000,000+ people and engaged 120,000+ across different digital platforms

Save The Children is sensitizing people on preventive measures against COVID-19 and providing handwashing kits, soaps, sanitizers, and face masks. They are also ensuring children remain protected in schools to minimize the risk of infection.

"It should also be noted that people were living under the anxiety of being enveloped by the Covid 19 pandemic and some health sectors have been left behind to focus solely on Covid 19 disease and this has created disruption and confusion at the Integrated Health Centres."

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

GAPS IN EDUCATION

Teachers' reluctance to provide online lessons, the high cost of private tuition, and inadequate digital and remote learning infrastructure resulted in the seizure of many students' education when schools were closed. Leading to a gap in students' education, this failure of the education system has left older students not feeling supported in their learning and ill-prepared to enter an already bleak job market.

Lack of remote learning options

When schools closed down due to the pandemic, not all educational institutions offered online programs. Many professors, usually paid based on how much they prepare for classes, resisted a digital system as they saw it as a tool that the government might use to disempower them going forward.^[16] Universities were reluctant to do online classes, as they worried that students would not pay them and preferred instead not to offer any education until the economic situation improved.^[17] Inadequate technological infrastructure and unequal digital access made it very difficult for any alternatives that were put in place to work successfully. This impacted students' motivation to continue courses from their homes, they were primarily expected to self-study, and most said that their learning stopped.

Gaps in learning

Although most schools have now reopened, young people worry about the opportunities and education they missed out on when schools were closed due to remote learning inadequacies—many expressed concerns about finishing the school year and falling behind. University students are also struggling to find internships because companies affected by the pandemic have had to cut costs or recruit less frequently. Already it is estimated that, on average, 34.6% of the national working-age population is underemployed.^[18] Entering the workforce post the pandemic is now even more of a challenge.

[16,17] Dalberg analysis, 2020

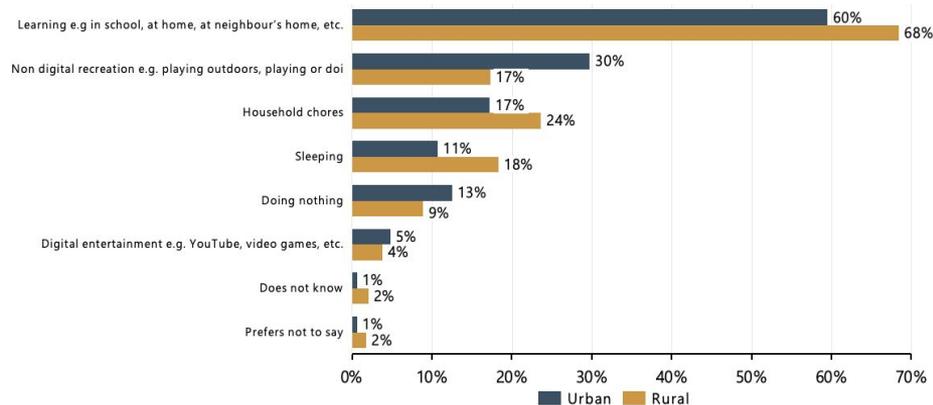
[18] The National Agency for Youth Employment via Netherlands Enterprise Agency, "Report on Entrepreneurship: Niger Catalistas", August 2019



“Among students, we weren't motivated any more when we resumed [university] after a long time.... In the future, if I'm looking for a job, it will be difficult after the pandemic, so I'm worried about the future.”

Djibril, 23 years old, Male | Student | Urban,
Niamey, Niger

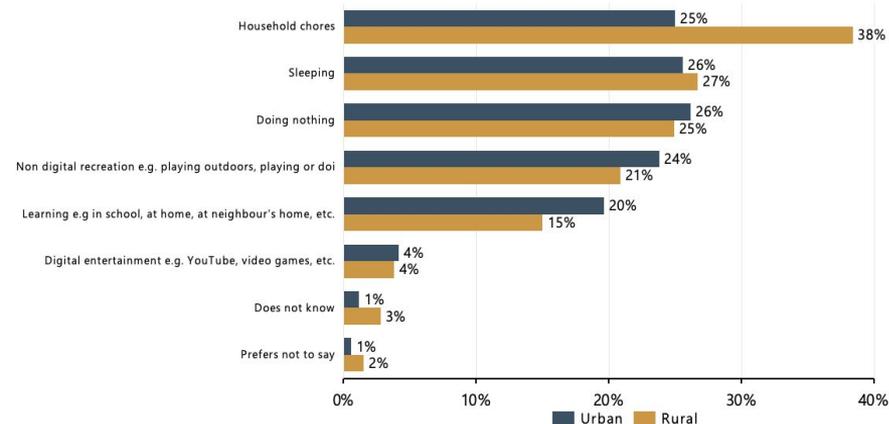
How did your child spend most of their time before the COVID-19 pandemic?



LACK OF REMOTE LEARNING OPTIONS

60% of urban respondents and 68% of rural respondents reported their children had spent most of their time learning in school, at home, at neighbor's house before the COVID-19 pandemic. However, during the pandemic, 25% of urban respondents and 38% of rural respondents reported their children had spent most of their time doing household chores, closely followed by sleeping. And any learning they did was through homeschooling, with 64% of urban respondents and 67% of rural respondents saying learn was done through homeschooling.

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



“Online classes weren’t going as well as they should be... Sometimes the internet didn’t work, and sometimes you just didn’t have money to put data on your phone...some of the students weren’t paying attention, and even teachers weren’t motivated. So eventually, they just stopped”

Djibril, 23 years old, Male | Student | Urban, Niamey, Niger

23-year-old Djibril lives with his parents and four siblings. He is in his third and final year at university, where he has a scholarship and is currently an intern at a local telecom company.

When the pandemic began and schools closed, Djibril’s university tried online classes. Those soon stopped, too, due to various difficulties, including poor internet connectivity and data cost. Teachers resorted to sending students the material, expecting them to study and complete exercises themselves, and raising their doubts with teachers via WhatsApp messages. “As a student, it makes you lazy. You start to forget what you’re supposed to learn,” said Djibril, who ended up spending his days watching TV and worrying about completing the year.

By August, the university resumed classes, but for Djibril, re-adjusting to the routine of school was hard, combined with new social distancing measures. Djibril is also upset by the internship opportunities he missed during the pandemic and is concerned about finding a job.



CHILDREN'S MENTAL HEALTH

Abiding by restrictions during the pandemic and returning to schools with new regulations in place has impacted children's mental health. While caregivers recognize this, they feel ill-equipped to provide help.

Adjusting to COVID-19 regulations

Caregivers pointed to the impact that the pandemic restrictions had on children, who were no longer able to play or spend time with their peers while schools were closed. Even though most schools have now resumed, the COVID-19 precautionary measures that are in place have been difficult for young children to abide by and adjust to. Young children are finding it hard to make sense of the situation and the new regulations. Teachers say some of the children struggle with wearing masks all day, which are compulsory, and washing their hands multiple times a day. These rules, and children's trouble adjusting to them, disturb classes and create a disruptive learning environment.

Lack of support systems

People's understanding of mental health is low in general, and parents typically do not seek medical care for children with mental illness.^[19] While parents, teachers, and caregivers are aware of the psychological impacts that the virus is having on children, very few, feel like they have the knowledge and capacity to help children manage it. The government has provided little awareness or support. Some people have been taking their initiatives, like a teacher who created a WhatsApp group to provide relatable and reliable information on COVID-19 precautions to children. NGOs have some interventions, too, like training for teachers on how to better support children during the pandemic, but these efforts tend to be one-off and are focused on teachers and institutional caregivers, leaving out ordinary parents.

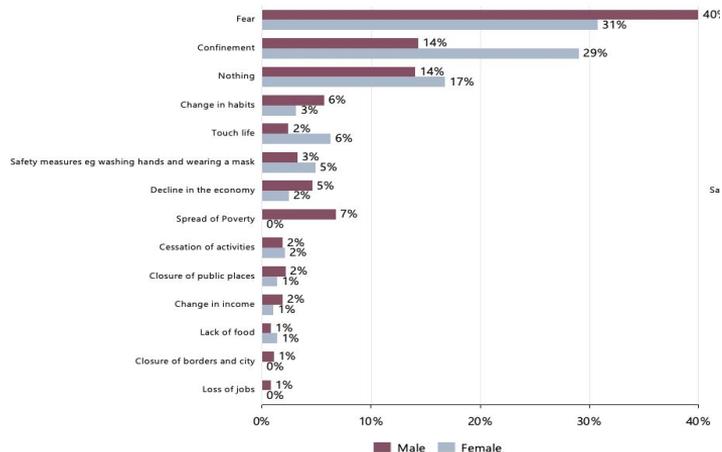


[19] Hwang, A, et al. "Scaling up mental healthcare in the Republic of Niger: priorities for and barriers to service improvement", *BJPsych International*, May 2015

"It's been difficult for children because they are used to playing together and being together. Now they can't do that. It is very challenging [mentally] for them."

Ramatou, 27 years old, Female | Teacher | Rural,
Tera, Niger

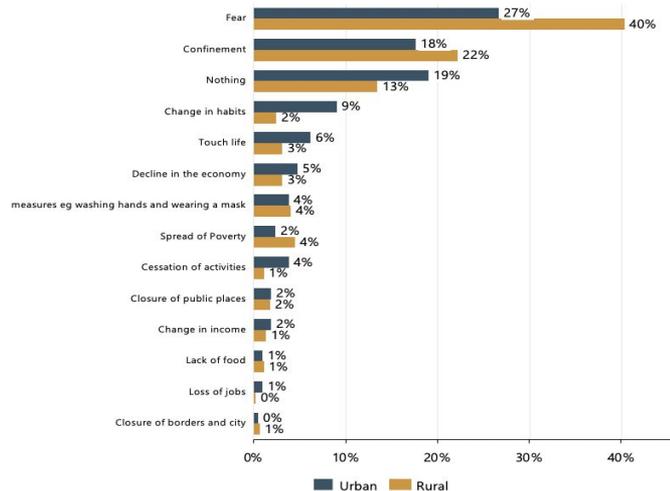
What has been the most significant effect of the COVID-19 on your household?



FEAR OF COVID-19

Whereas children spent most of their time in school learning before COVID-19, their time is now spent mostly doing house chores or sleeping after schools' closure. **27% of urban respondents and 40% of rural respondents reported that fear had been the most significant COVID-19 effect on their households. 31% of women** reported fear as the most significant COVID-19 effect on their families, compared to **40% of men**. If this fear is left unchecked, many feel that their **children's fear is internalized, leading to them being dependant at school.**

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



“Things have been very difficult [at school], especially with kids having to cover their mouths and wash hands every time. Now, when they see teachers, they associate them automatically with covering their mouth and washing their hands.”

Ramatou, 27 years old, Female | Teacher | Rural, Tera, Niger

Ramatou is a 27-year-old English teacher who teaches in public middle and high schools. She aspires to do a Ph.D. in English someday.

Through the pandemic, going to school has been challenging, Ramatou said, but particularly so for her young students, who do not fully understand the new situation. "It's been easier [for me] mentally because we're all adults and know what we have to do, compared to the kids whom we deal with." She noted that her students had had a hard time adapting to frequent handwashing rules, and some find it difficult to breathe with their masks on, which are compulsory. These challenges end up disturbing the classes. The children no longer being able to play together as they used to has been another cause of the trouble.

Ramatou wants to help her students as much as she can. She recently participated in a training by an NGO on how to better care for children in the area. "We have been trying to make things a habit for children, rather than making them feel like things were changing drastically."



PSYCHOSOCIAL SUPPORT

The uncertainty and income loss during the pandemic has impacted people's mental health. Family heads bear a particular burden because they feel pressure to provide for their families, yet with little awareness around mental health or support avenues.

Stress and anxiety

In the face of heavy financial burdens and continued uncertainty about when they will ease, people's mental health deteriorates. People shared feeling stressed, worried about the future, unable to sleep, and having no one but God to turn to. People who have lost their job or faced losses feel a sense of hopelessness, as they cannot access any support outside of their primary income source. There is a risk of people sliding into serious mental health challenges. Those who are the 'head of family' and provide for their families and communities shared being under immense stress and pressure to continue supporting them, to fit their role of 'provider' or family head, and to appear strong throughout the process.

Lack of support systems

There is little awareness around mental health support or avenues to access support. Mental healthcare service provision continues to be neglected, and the treatment gap for severe mental disorders is estimated to be over 90%, partly because mental health services and senior professionals are consolidated in Niamey.^[20] In addition, there is limited awareness about the realities of mental health issues. People tend to believe that mental illness results from supernatural forces and prefer visiting traditional healers.^[21] Without the ability to gather with their communities, people's preferred source of support is gone, too. Some see religion and prayer as their only hope right now, leading to the government lowering the curfew restrictions to accommodate prayer times and visits to the mosque.^[22]



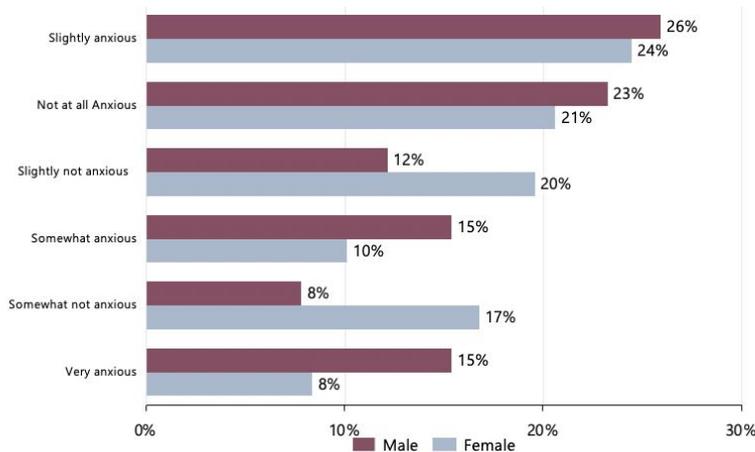
[20, 21] Hwong, A, et al. "Scaling up mental healthcare in the Republic of Niger: priorities for and barriers to service improvement", *BJPsych International*, May 2015

[22] Dalberg analysis, 2002

“I’m a very active woman, so having to stay at home doing nothing was very depressing... Even the comfort I would get from my children and neighbors I couldn’t have anymore because of the restrictions”

Adisatou, 68 years old, Female | Entrepreneur | Urban, Niamey, Niger

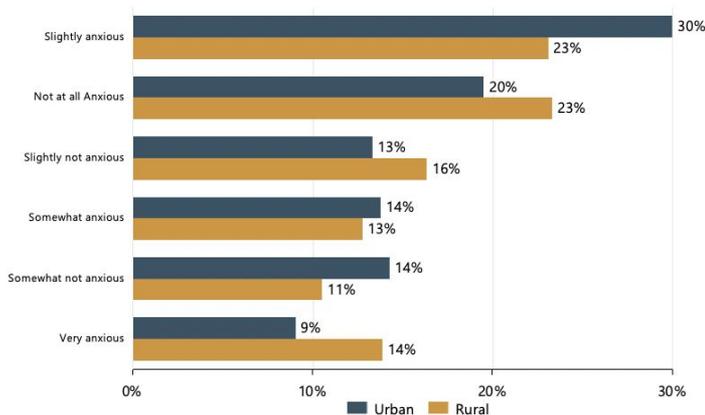
Overall, how anxious have you felt in the last 3 months?



INCREASED ANXIETY

30% of urban respondents and 23% of rural respondents reported feeling slightly anxious in the last three months. Further, 9% of urban respondents than 14% of rural respondents reported feeling very anxious during the previous three months. More men than women, in general, reported feeling more anxious now and since the onset of the COVID-19 pandemic. 24% of women reported feeling slightly anxious in the last three months, compared to 26% of men. Further, 8% of women reported feeling very anxious in the previous three months, compared to 15% of men.

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





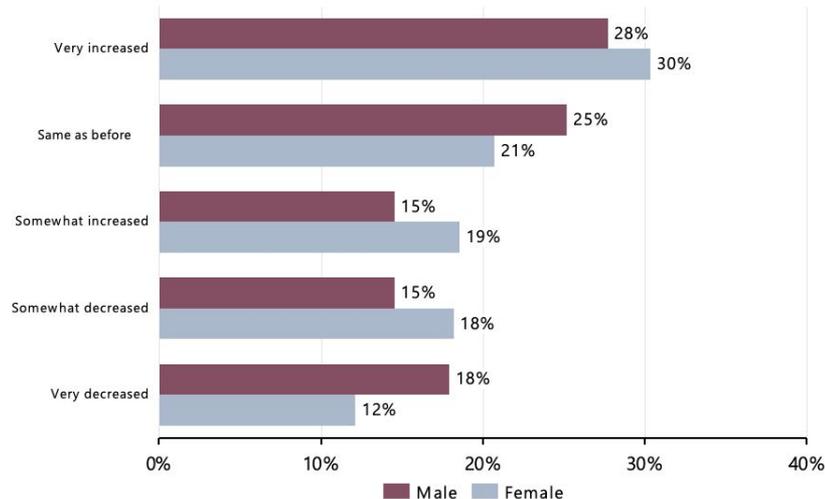
“I was able to provide for my family. For them everything is fine, everything is the same. But for me when I go out, I know everything has changed.”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

CONFLICTS IN THE HOUSEHOLD

The number of conflicts at home has increased since the onset of the COVID-19 pandemic. **30% of women and 28% of men reported a very high increase in home conflicts since the pandemic began.**

Have conflicts at home increased or decreased during the COVID-19 pandemic?



“People who knew me the way I was before [the pandemic], when they see me on the street, some won't even recognize me... My skin has darkened, I've lost weight. I'm thinking so much that sometimes at night I can't even sleep.”

Bashir, 46 years old, Male | Reseller | Urban, Niamey, Niger

“Even though I live by myself, I still have to look after my siblings and my mum because since my dad passed away I have become the head of the family.”

Mamane, 38 years old, Male | Leatherworker | Urban, Niamey, Niger

“The only way we didn't feel safe was in a social aspect. We couldn't meet up, we had to keep distance, follow precautions. We didn't have our social support.”

Yacouba, 47 years old, Male | NGO volunteer & trader | Rurban, Tillabéri, Niger



IMPACT ON SECURITY

With the increasing threat of terrorism in parts of the country, a rise in crime or insecurity due to COVID-19 does not feel as significant to people, particularly those in rural areas with recent attacks.

Increased security due to terrorism

Niger faces a high threat from terrorism, including armed attacks and abductions, and militant Islamist cells from various Nigerian and Malian terrorist groups are all active in the country.^[23] In Niger, Mali, and Burkina Faso, deaths from terrorist attacks jumped more than five-fold between 2016 and 2019, going from 770 to over 4,000.^[24] As a result of this surge in terrorist attacks, people in several parts of Niger have been living with increased vigilance and heightened security and military presence.

During the pandemic, it is unclear whether people have been driven to crime due to the heightened food insecurity and income loss. However, the people we spoke to in regions like Tillabéri do not consider this potential increase in crime a significant threat compared to the ever-growing presence of terrorists that they face. This risk of terrorism remains their biggest security concern.

Threats of terrorism

Experts predict that as the pandemic's burden deepens, terrorist groups in the Sahel will only increase in strength.^[25] As the government of Niger, and other Sahelian countries, work to counter COVID-19, their ability to provide essential services to local populations is likely to be even more strained, and extremist groups' are likely to exploit vulnerabilities amongst local communities and have more significant opportunities to provide financial or security incentives to membership.^[26]



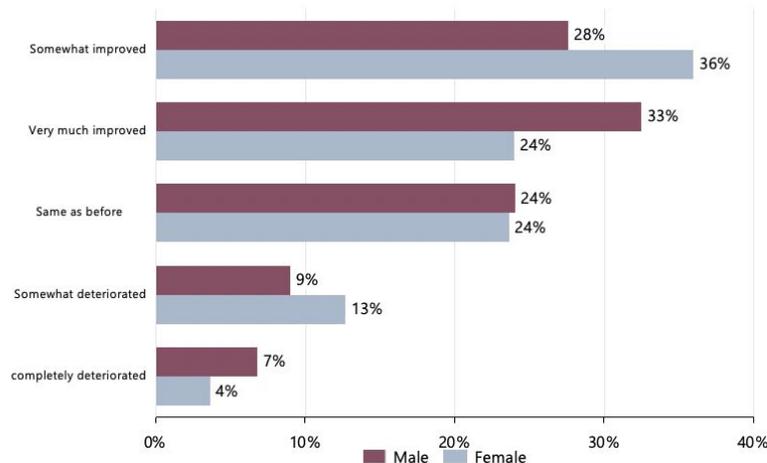
“The insecurity we’ve been facing is not due to pandemic, it’s been there for a while, since the terrorist attacks in January.”

Abdoul, 32 years old, Male | Breeder & trader | Rural, Tera, Niger

“If you read the news you will see that there has been a lot of instability in this area [Tillabéri]... I can’t really talk about the security issues, but all I can say is that we are currently safe as we are and people are able to go about their everyday life.”

Atiku, 51 years old, Male | Doctor | Rural, Tillabéri, Niger

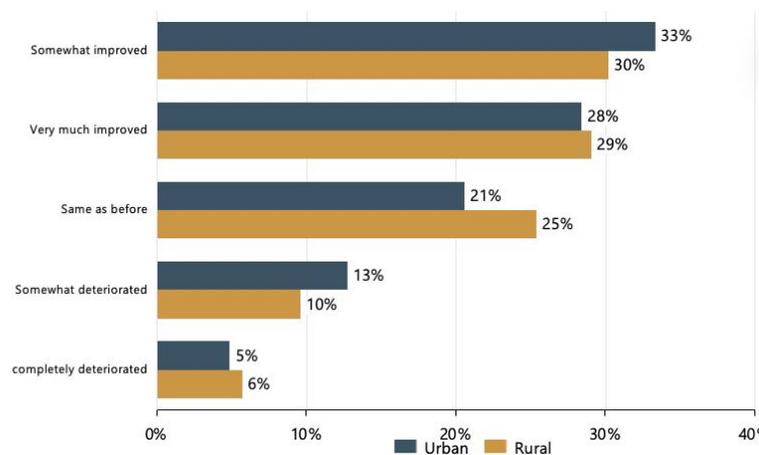
How have the state of security changed in your neighbourhood since (first case of Covid was reported) ?



SECURITY SITUATION

The general feeling among people is that security in the country has improved since the first case of COVID-19 was reported in the country. Security in most neighborhoods had increased since the first case of COVID-19 was reported. From those surveyed, **36% of women said the state of security had somewhat improved since the first case of covid was reported vs. 28% of men.** There is an acknowledgment that this improvement is due to the government crackdown on terrorist-related activities.

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



How might we provide access to quality learning to set students' education back on track?

How might we provide mental health support to adults and children alike to adapt to the uncertainties that COVID-19 presents?

- Tap into existing care channels and equip them to provide mental and physical care, including informal points such as traditional healers
- Develop remedial learning materials and link them to other ongoing educational support forms to support children's ability to refresh previous learnings and gradually progress. Consider creating workbooks attached to broadcasted learning content, including answer sheets that can be completed independently without parental oversight.
- Develop and scale reading camps to promote literacy skills among young learners. If possible, to comply with social distancing, consider recruiting teenagers to support younger learners.
- Train parents to identify mental health struggles in their children and provide access channels for professional mental support.
- Gamify COVID measures to encourage young children to comply with COVID protection measures as well as positively influence their peers and family member

BEST PRACTICES

UNICEF supported the Ministry of Secondary Education in production of booklets for 101626 students in grade 6, which provided exercises that would support them in catching up on the lessons missed during the school closures. Ongoing courses were supported by remedial classes, when schools opened.

World Vision has created reading camps in the areas where they carry out their interventions in the Maradi region of Niger. The reading camps provide alternative education focusing on reading and writing skills. This aims to improve the quality of learning in the early critical years.

Sensitization by various organisations such as OSV, JMED, Save the Children and World Vision to create awareness of how the disease is spread, prevention measures, and that it is a dangerous but treatable disease with high survival rates played a role in alleviating stigma and fear of COVID-19.

COOPI works in the Doffa region of Niger to provide protection, education in emergency, psychosocial support, and mental health support. As of October 2020, they had trained 700 health workers working in Integrated Health Centres in Niger to help them identify signs of mental illness and how to approach treatment and created a mental health center for migrants.

Voices 4 Peace (V4P) has set up youth tech camps in Niger, Cameroon, Burkina Faso, and Mali to train young community leaders on using social media to help counter violent extremist narratives while promoting inclusive governance. This is part of a regional partnership between Equal Access and USAID to reduce vulnerability to violent extremism and promote democracy, human rights, and good governance in Niger, Chad, Burkina Faso, Cameroon, and Mali.

“The education system was threatened by the closure of schools and only one case positive case can create more fear and mistrust in the Integrated Health Centres. People did not want to go to hospitals for fear of being attacked by Covid 19, which explains the severe psychosis among the population.”

Saidou, Community Mobilization, Save The Children | Niger

THANK YOU

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

03 Feb, 2021

