



# Covid-19 and the socio-economic situation of migrants in Niger

Analysis of 4Mi data collected in Niger between July and September 2020



January 2021



The Mixed Migration Centre produced this 4Mi data analysis with the financial and technical support of the Office of the United Nations High Commissioner for Human Rights (OHCHR). The analysis is part of a broader OHCHR project focusing on the socio-economic impacts of migrants' human rights in Niger in the context of COVID-19, under the auspices of OHCHR's Surge Initiative and its objective to develop disaggregated data and evidence to inform legal, policy, planning and programming at the country level. The outcomes of this analysis will also serve as a basis for future activities of the PROMIS project, a UNODC-OHCHR joint initiative aimed at promoting a human rights-based response to smuggling of migrants and to effectively respond to human rights violations related to irregular migration in West Africa.

The analysis is based on primary data collected in Niger through the 4Mi, which is the Mixed Migration Centre's flagship primary data collection system, an innovative approach that helps fill knowledge gaps and inform policy and response regarding the nature of mixed migratory movements.

**Front cover photo credit:**

Kristof Vadino, Niger.



Niger has ratified the UN International Convention on the Protection of the Rights of All Migrant Workers and Members of Their Families, as well as other Core Human Rights Treaties including on Economic, Social and Cultural Rights, on the Rights of the Child and on Discrimination Against Women. The current analysis is anchored in this human rights framework, as well as the wealth of analysis and recommendations of various UN human rights mechanisms, including those of the UN Special Rapporteur on the Human Rights of Migrants who visited the country in 2018. In his end of mission report, the Special Rapporteur noted that: “(T)he lack of comprehensive and reliable data on migration, including internal and irregular migration, has been highlighted by the Government as one of the gaps to be addressed (See the national strategy to combat irregular migration, p. 15)”<sup>1</sup>.

The analysis and the subsequent research also contribute to both the attainment of the objectives identified in the Global Compact for Safe, Orderly and Regular Migration (GCM) and the 2030 Agenda for Sustainable Development’s pledge to “leave no one behind”, as well as its target 10.7 - to facilitate orderly, safe, and responsible migration and mobility of people, including through implementation of planned and well-managed migration policies.

This quantitative analysis intends to inform a further qualitative research that will be undertaken by OHCHR to provide additional in-depth human rights analysis of the socio-economic impacts on the human rights of migrants in the Agadez region in Niger. The findings and recommendations of both assessments will inform OHCHR’s actions, including of the joint OHCHR-UNODC initiative “PROMIS”, and aim to provide reliable data to inform the upcoming review of Niger by the Committee on the Rights of Migrant Workers, the GCM regional review as well as Niger’s upcoming third Voluntary National Review in 2021. Ultimately, the overall aim of both assessments is to inform the Government of Niger, the UNCT, CSOs and other stakeholders’ analysis of the immediate and longer-term socio-economic needs of migrants in the Agadez region, including as relevant to the upcoming CCA and UNSDCF, as well as the National Action Plan on Migration.

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1 Footnote 21 of the Report of the Special Rapporteur on the human rights of migrants on his mission to Niger in 2018 – A/HRC/41/38/Add.1

# Key findings

Based on 4Mi survey conducted in Niger between July and September 2020 with 527 migrants<sup>2</sup> (30% women, 70% men), this analysis aims to provide some insights on the profiles of respondents and analysis of the impact of Covid-19 on their mobility, livelihood situation and certain socioeconomic rights, namely: access to health services, sanitation, housing, and education. Key findings include:

## i. Impact on the journey

- **Respondents reported Covid-19 impacted their journeys (91%) and their migration plans (49%).** Despite the impact of Covid-19 on migrants' mobility, respondents were largely continuing their journey albeit often with longer stops and adjusted routes – of those respondents who reported making a change to their plans, only 11% changed their destination (5% of respondents overall).
- Although crossing-borders was increasingly difficult according to 42% of respondents, **54% arrived in Niger after the Government had officially closed the borders on March 19th, 2020.**
- Of those respondents who indicated arriving after the pandemic (n= 252), **60% reported the pandemic did not impact their decision to migrate.** When Covid-19 did play a role, respondents most often reported economic factors.

## ii. Impact on education

- **Covid-19 impacted children's education access negatively.** Seventeen out of 27 respondents declared that although they had at least one child enrolled in school prior to the outbreak, they were no longer able to keep at least one child in the school during Covid-19.

## iii. Impact on access to health

- **Men appeared more vulnerable in terms of access to adequate sanitation** than women respondents. For instance, 14% reported not having access to toilets versus 4% amongst women.
- **Most respondents felt they could access healthcare services if they presented Covid-19 symptoms** (52%), although 20% were unsure. The main reported barriers for accessing health services were: cost (47%), fear of arrest, deportation or reporting (26%), not knowing where to go (15%) and information being unclear (13%). Women more often reported cost and lack of information as a barrier than men.

## iv. Impact on adequate housing

- More than half of respondents reported enough space in the place they live to physically distance. However, **for those unable to take Covid-19 prevention measures (21%), the main barrier was the inability to physically distance due to living conditions. This was the case particularly for women** - 78% of women not taking precautions reported being unable to physically distance at home due to their living conditions and 52% reported being unable to do so at work, compared to 29% and 18% of men not taking precautions, respectively.

## v. Impact on work

- **Covid-19 impacted men respondents economically from loss of work more than women.** While 40% of respondents who had pre-Covid income (n = 357) reported losing income from loss of work due to the pandemic, this loss affected 45% of men compared to 27% of women. This is in spite of the fact that they earned income at roughly equal rates prior to the pandemic (65% for women, 69% for men). Additionally, the consequences of loss of income overall (ie loss of work income + loss of financial support from family) impacted men to a greater extent. Men more frequently reported being unable to afford basic goods, loss of housing and being unable to continue their journey due to this loss of income than women.

2 MMC normally applies the term 'refugees and migrants' when referring to all those in mixed migration movements, unless referring to a particular group of people with a defined status within these flows. See MMC's full definition of mixed migration and associated terminology [here](#). Since there is no universal and legal definition of a "migrant", OHCHR, in accordance with the mandate to promote and protect the human rights of all persons, describes an international migrant as "any person who is outside a State of which they are a citizen or national" and uses the term 'migrant' as a neutral (and umbrella) term to refer to both migrants and refugees. In light of the partnership between OHCHR and MMC to develop this joint publication the term 'migrants' is used throughout the document.

## Methodology

The Mixed Migration Monitoring Mechanism Initiative (4Mi) is the Mixed Migration Centre's flagship primary data collection system, an innovative approach that helps fill knowledge gaps, and inform policy and response regarding the nature of mixed migratory movements. The recruitment of respondents normally takes place face-to-face. However, due to the Covid-19 pandemic, face-to-face recruitment and data collection have been suspended or paused for different periods of time in all 20 countries where the 4Mi is being implemented across seven regions.

MMC has responded to the Covid-19 crisis by changing the data it collects and the way it collects it. Respondents are recruited through a number of remote or third-party mechanisms; sampling is through a mixture of purposive and snowball approaches. A new survey focuses on the impact of Covid-19 on migrants, and the surveys are administered by telephone by the 4Mi monitors in West Africa in Mali, Niger and Burkina Faso.

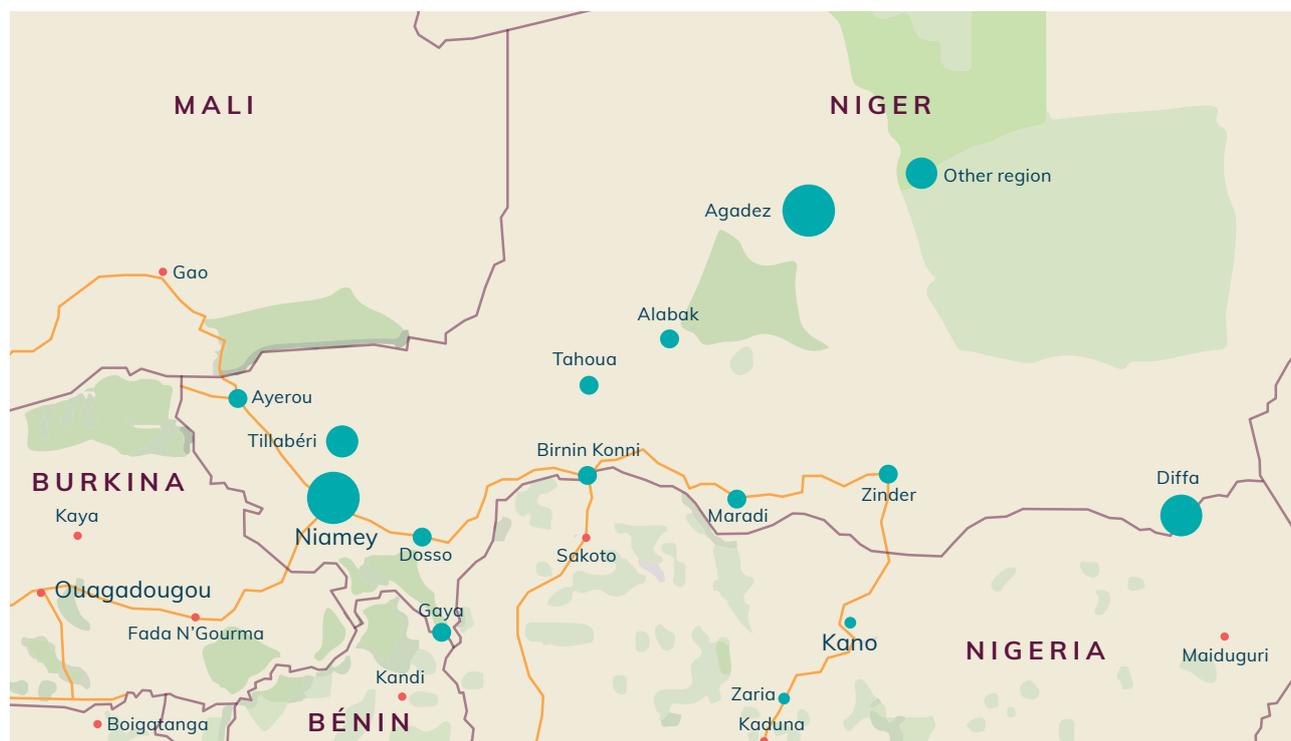
Given that 4Mi's methodology is adapted to target people on the move – a population whose fluidity makes it both challenging to reach and difficult to count – 4Mi data collection uses a non-probability sampling approach, and therefore, is not intended to be representative of the overall volume or characteristics of people on the move in the region.<sup>3</sup> Although measures have been put in place to check and – to the extent possible – control for bias and to protect personal data, the switch to remote recruitment and data collection results in additional potential bias and risks, which cannot be completely avoided.

See more 4Mi analysis and details on methodology at [www.mixedmigration.org/4mi](http://www.mixedmigration.org/4mi)

527 interviews conducted in Niger between July and September 2020 were geographically divided as follow:

157 in Agadez, 145 Niamey, 79 Diffa, 60 Tillabery, 12 Zinder, the rest was spread across 69 various locations, including Dosso, Ayerou, Maradi, Gaya etc.

**Figure 1. Locations of 4Mi respondents**



<sup>3</sup> MMC (2019) [Frequently Asked Questions](#) (FAQ)

## Migrants' profiles and status

Between July and September 2020, a total of 527 migrants were interviewed by 4Mi in Niger. Eleven monitors interviewed both women (30%) and men (70%) by telephone<sup>4</sup>. 59% of respondents were between 25

and 34 years old, 34% were between 35 and 51 years old and 15% were between 19 and 24 years old. The most common nationalities among respondents were: Nigeria, Chad, Mali, Burkina Faso, Cameroon and Togo. 75% of respondents in Niger originated from ECOWAS countries<sup>5</sup>.

**Table 1. Composition of sample: nationality and gender**

Nationality	Women (30%)	Men (70%)	Total respondents
Benin	18	12	30
Burkina Faso	7	37	44
Cameroon	11	32	43
Chad	12	46	58
Mali	16	37	53
Nigeria	43	53	96
Togo	17	26	43
<b>Total</b>	<b>158</b>	<b>369</b>	<b>527</b>

32% of respondents declared being migrants with regular migration status and no need for a permit. However, **39% declared being present irregularly in Niger** (n=207, including 72 women), of which 15% were from Nigeria, 14% from Chad, 11% from Togo, 8% from Côte d'Ivoire and 8% from Cameroon. Citizens from ECOWAS countries who reported being present in Niger irregularly may lack a valid ECOWAS Travel Certificate as institutionalized in 2014 by ECOWAS Member States. 7% declared being asylum seekers (n=37), mainly from Cameroon and Chad.

**14% of respondents declared having children under 18 in their care** (n=74). Women were more likely to report this than men (respectively 24% versus 10%). Of those respondents with children under their care, women were also more likely to report having at least one child under their care too young to go to school prior to the outbreak (16 women compared to 11 men out of 37 total travelling with at least one child too young to go to school).

Respondents were generally well-educated. While 10% had not completed any formal schooling, **32% completed high school or secondary education**, 23% completed vocational training and 9% completed university. Women reported slightly lower levels of access to education with 13% reporting not completing any schooling compared to 9% of men. However, women reported more completion of primary school (respectively 16% and 12% men), which might be explained by the higher percentage of men reporting religious primary education (11% men, 6% women). Secondary school (33% and 32%) and university completion (8% women and 9% men) were more similar.

<sup>4</sup> Recognizing the role gender can play in putting respondents at ease and providing an environment conducive to sharing, the sampling approach also strives to ensure a strong representation of women. During their training, 4Mi monitors are encouraged to identify and survey female migrants. As of the time of writing, there were 37 monitors in the region, of whom ten were women. In Niger, 4Mi sample includes a higher % of women than the 23% of women identified through the IOM DTM in September 2020. This is explained by the fact that one 4Mi female monitor is specifically tasked to recruit female respondents in Niger to ensure their voices are being heard.

<sup>5</sup> ECOWAS, the Economic Community of West African States includes Benin, Burkina Faso, Cabo Verde, Cote d'Ivoire, The Gambia, Ghana, Guinea, Guinea-Bissau, Liberia, Mali, Niger, Nigeria, Senegal, Sierra Leone, and Togo.

## Covid-19 and mobility

### Migration decisions

**Economic conditions played an important role in respondents' migration decisions.** 86% of respondents in Niger reported leaving for economic reasons with little gender difference. However, women respondents more often reported leaving due to lack of access to services and/or corruption (17% versus 8% men) and personal/family reasons (38% versus 24% men) as compared to men. Men more often reported a culture of migration/tradition as a reason for migrating (16% versus 9% women)<sup>6</sup>.

**Most respondents do not consider Covid-19 to have influenced their migration decisions.** 57% declared Covid-19 was not a factor in their decision to leave their country. Of those respondents who indicated that they arrived after the pandemic outbreak, only 41% reported that Covid-19 influenced their migration decision. Among these respondents, economic reasons (77%), family and/or personal reasons (36%) and culture of migration (24%) were most often cited in relation to Covid-19.

### Journey and plans

**91% of respondents reported that Covid-19 had impacted their journey, but less than half reported adjusting their plans** (e.g. in relation to route, destination, return home, duration of stay in current location). This seems to suggest that migration plans are durable even despite the constraints caused by the pandemic. For the 49% reporting some change in their migration plans, many changed their route but maintained the same destination (41%) and/or stopped longer (33%). A small percentage changed destination (11%) and/or decided to return home (10%).

Of the 91% of respondents who indicated that Covid-19 had an impact on their journey, common effects included: increased difficulty crossing borders (88%) and moving internally (39%), as well as being afraid to move due to the pandemic (49%). Men reported greater impacts on their journey than women, declaring themselves more often afraid to move due to the virus (54% versus 37%) and less able to afford the journey (14% versus 2%). However, women reported more difficulties in crossing borders (46% versus 40%).

## Increased protection risks

The majority of respondents surveyed in Niger agreed that according to their experience, the risk of: extortion (81%), theft (80%), detention (66%), domestic violence (59%), labor exploitation (57%), pushback at borders (56%) and sexual exploitation (50%) on their journey had increased

Covid-19.<sup>7</sup> When aggregating all protection incidents covered in the survey,<sup>8</sup> 66% of women respondents agreed that there was an increased risk of such protection violations since Covid-19 compared to 59% of men.

**Figure 2. Percentage of respondents who agree and strongly agree there is an increase in protection risks since Covid-19 began**



6 A culture of migration generally refers to cultural beliefs and/or social patterns that influence people to move.

7 The sample differed according to the question asked with some questions having higher response rates than others.

8 The type of protection risks measured include: extortion, theft, detention, domestic violence, labor exploitation, pushback at borders, sexual exploitation and deportation.

More specifically, **women more often agreed that sexual exploitation (68%), labor exploitation (70%) and domestic violence (74%) had increased since Covid-19** as compared to men (42%, 52% and 52% respectively). On the other hand, men more often agreed that detention had increased (70%) in comparison to women (58%).

who had at least one child enrolled in school prior to the outbreak (n=27), 10 out of 15 men respondents and 7 out of 12 women respondents reported that this was no longer the case at the time of interview.

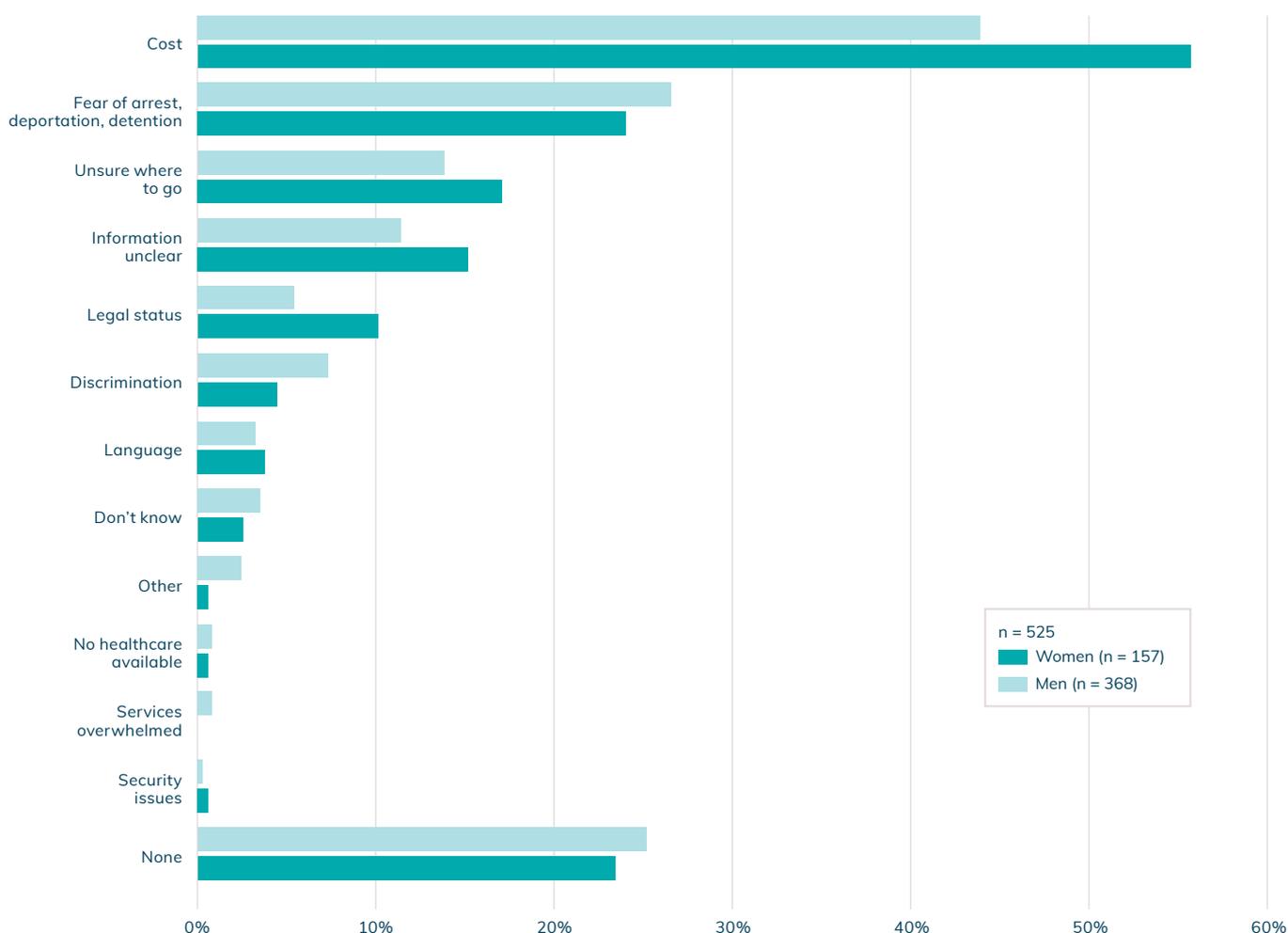
## Children’s access to education during the journey

Overall, 14% of respondents were travelling with children under their care (n=75 including 38 women). Slightly fewer respondents (9%) reported travelling with at least one school-aged child (n=46). Of this group, 61% reported that at least one of their children was receiving schooling prior to the outbreak (n=27). Covid-19 impacted children’s education access negatively. Out of those respondents

## Access to health services

Half of respondents felt they could access health services if they had Covid-19 symptoms (52%). The main barriers for accessing health services mentioned were: cost (47%), fear of arrest, deportation or reporting (26%), not knowing where to go (15%), and information being unclear (13%) (See Figure 3). 25% of respondents reported no barriers. Women more often reported cost (56%), lack of information (28%) and legal status (10%)<sup>9</sup> as barriers to accessing health services compared to men (44%, 22% and 5% respectively). Discrimination against foreigners was reported only by 6% of the respondents.

**Figure 3. What are the barriers to accessing health services?**



<sup>9</sup> The relationship between legal status and barriers to access health services is to be understood in relation to fear of arrest, deportation, or reporting.

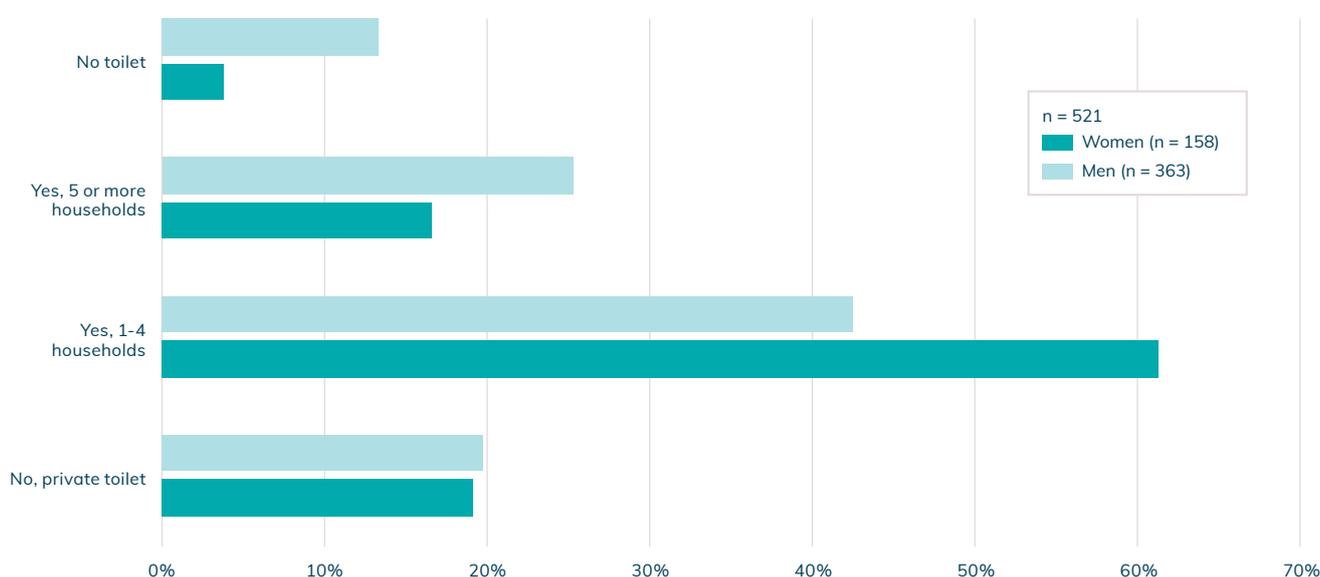
## Sanitation, housing, and physical distancing capacity

The living situation of respondents might affect their ability to protect themselves from Covid-19. 56% of respondents declared that they live in a place with enough room to be able to respect the recommended distancing of 1.5m apart from each other. However, **for those unable to take Covid-19 prevention measures (21%), the main barrier was the inability to physically distance due to living conditions.**

**Men's housing situation seemed more precarious than that of women. Men more frequently reported loss of housing due to a loss of income (15%) as compared to women (0%).** Additionally, men more frequently lived in collective shelters (34% versus 22%) and were less likely to live in private accommodation than women (48% and 62% respectively).

**Men appeared more vulnerable in terms of sanitation access than women.** Few respondents overall reported having a private toilet (19% women and 20% men). Men were more likely to share a toilet with 5 or more households (25% versus 16% women), with another 13% reporting having no toilet at all (compared to 4% of women).

**Figure 4. Do you share a toilet with other households?**



Nonetheless, **more women reported struggling to practice prevention against Covid-19 than men.** 21% of respondents (n = 111) reported not taking any prevention measures against Covid-19, with more women (29%) than men (18%) reporting this. 78% of the women not taking preventive measures against Covid-19 (36 out of 46) reported that they were unable to physically distance due to their living conditions compared to 29% of men (19 out of 65). Again, the need to care for children is one possible factor that could help explain this disparity. More women were travelling with children in their care than men (24% vs 10%), and of these respondents, women were more likely to have at least one child younger than school age at home (43% versus 30% for men).

Additionally, 52% of women who did not take any prevention measures reported not being able to physically distance at work compared to 18% of men. Given that

fewer women reported loss of work income during the pandemic than men (27% versus 45%), women may have continued working throughout the pandemic in settings where physical distancing was difficult.

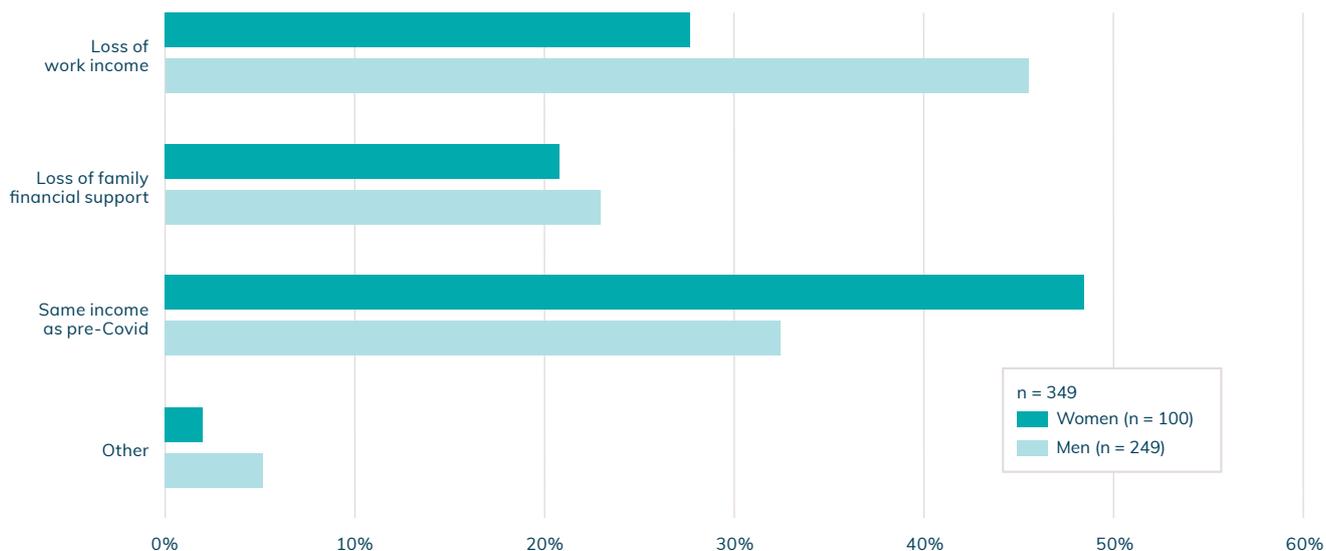
Finally, women not taking measures against Covid-19 also cited more often a lack of equipment such as masks (46% versus 26% men).

## Covid-19 economic impacts

**32% of respondents had no income<sup>10</sup> prior to the pandemic and were potentially already vulnerable.** Of respondents who had income prior to the pandemic (n = 349), 37% reported that their income had stayed the same, indicating that a large proportion had experienced a drop in income likely making more people more vulnerable.

<sup>10</sup> Income here includes both income from work and financial support from family.

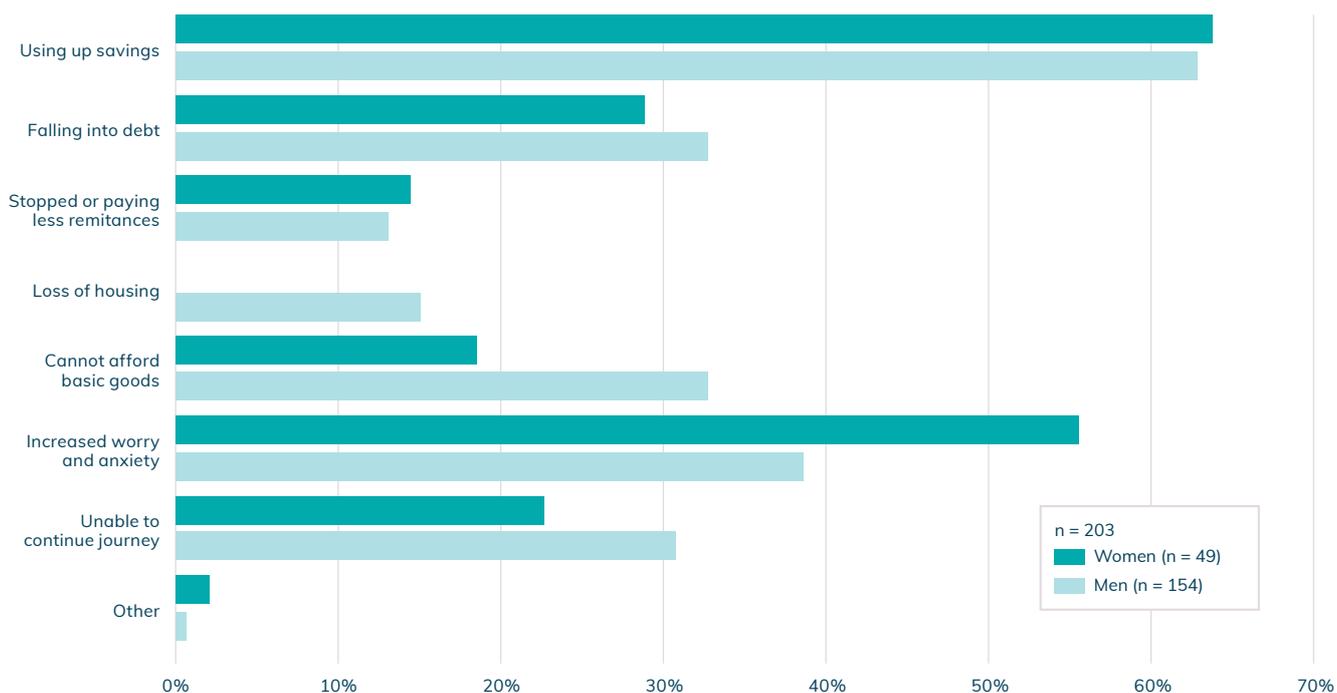
**Figure 5. Have you lost income due to coronavirus restrictions?**



**Women's income was less impacted during the pandemic than income-receiving/-earning men.** For example, 48% of women respondents who had income prior to the pandemic reported their income had remained the same during the pandemic in comparison to 32% of men respondents with pre-Covid income. Further, 45% of men who had an income prior to the pandemic reported losing income from loss of work compared to just 27% of women (40% overall). This is even though quite a similar proportion of men and women reported earning income before the pandemic (65% women and 69% men).

**Regarding the consequences of the economic impacts, more than half of the respondents who lost income were using up their savings (58%),** and 27% reported falling into debt with little gender difference. Of those reporting loss of income (n=203),<sup>11</sup> men also more frequently reported not being able to afford basic goods (30% for men, 18% for women) and having lost housing (13% for men, 0% for women). This may provide additional explanation for why more men live in collective shelters than women.

**Figure 6. What impact has the loss of income had?**



<sup>11</sup> Either loss of work income or financial support from family.

The gendered economic consequences of Covid-19 may have also influenced respondents' migration journeys and plans. For example, women were more likely to report no change in their migration plans than men (60% versus 48%) which may be partially explained by the fact that of those with pre-Covid income, 31% of women reported a loss of income in general as compared to 42% of men. Further, men more often reported being unable to continue travelling as a result of losing income in general (31% of men who lost income versus 22% of women who lost income).

Those respondents with children who had lost some type of income (n=28) more often reported using up their savings (68% versus 61% for those without children), falling into debt (46% versus 29% for those without children) and increased worry and anxiety (54% versus 41% for those without children). This high incidence of falling into debt could further indicate migrants travelling with children are particularly economically vulnerable.



The Office of the United Nations High Commissioner for Human Rights (UN Human Rights) is a part of the Secretariat of the United Nations and is the leading UN entity on human rights. It represents the world's commitment to the promotion and protection of the full range of human rights and freedoms set out in the Universal Declaration of Human Rights.

The MMC is a global network consisting of seven regional hubs and a central unit in Geneva engaged in data collection, research, analysis and policy development on mixed migration. The MMC is a leading source for independent and high-quality data, research, analysis and expertise on mixed migration. The MMC aims to increase understanding of mixed migration, to positively impact global and regional migration policies, to inform evidence-based protection responses for people on the move and to stimulate forward thinking in public and policy debates on mixed migration. The MMC's overarching focus is on human rights and protection for all people on the move. The MMC is part of and governed by the Danish Refugee Council (DRC). Global and regional MMC teams are based in Amman, Copenhagen, Dakar, Geneva, Nairobi, Tunis, Bogota and Bangkok.

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