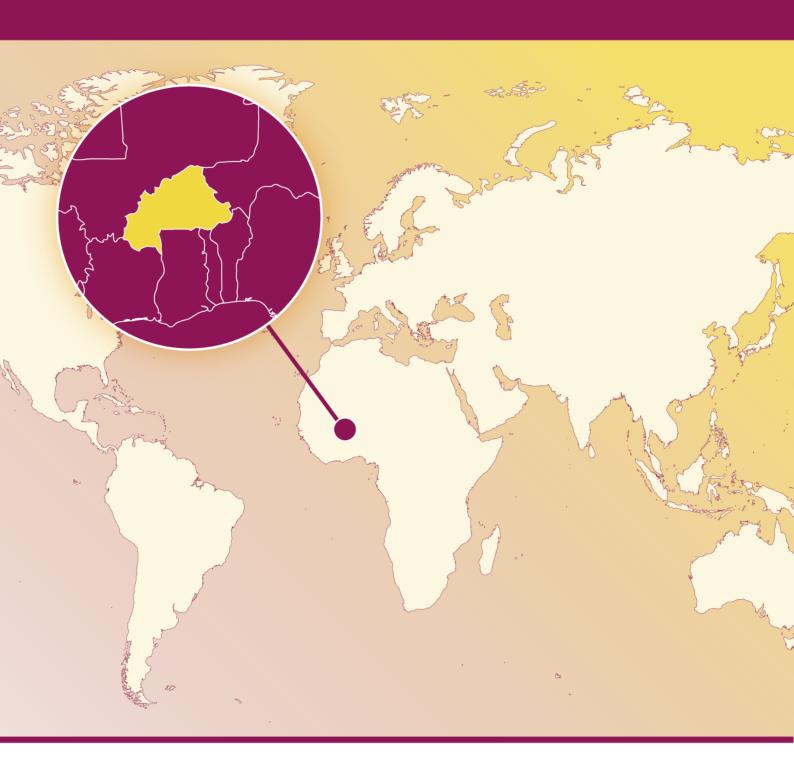
BURKINA FASO

Violence Against Health Care in Conflict 2022







Letter from the Chair



The more than 1,900 incidents of violence against health care in war and situations of political unrest described in this report are by far the highest number documented by the Safeguarding Health in Conflict Coalition since it began reporting a decade ago. The more than 700 assaults by Russia on health care in Ukraine are the most committed in a single year in one country.

Russia's atrocities in Ukraine have brought global attention to assaults on health care in war, highlighting pervasive violations of long-standing humanitarian norms. But in

less visible conflicts and civil strife, the numbers of acts of violence and the stories behind them are equally grim: doctors imprisoned - and sometimes killed - in Myanmar and Iran for treating people in need of care; female health workers in Afghanistan harassed and sometimes beaten as they seek to provide health care for women and children; community health workers murdered in Afghanistan, Pakistan, and elsewhere as they go door to door to immunize children against polio and other infectious diseases.

In the face of the profound harms communities and health workers endure from this violence, the international community has long been passive, even ignoring commitments it has made to prevent attacks and hold perpetrators to account. Impunity for the violence has continued, and even the tracking of attacks has faltered. The World Health Organization's (WHO) system for collecting and disseminating data on attacks on health care in emergencies is plagued by inadequate reporting, lack of transparency, and resistance to reform. After being criticized for reporting zero attacks in Ethiopia despite evidence of looting or damage to hospitals and health centers during the conflict in Tigray, the WHO removed Ethiopia from its public dashboard on attacks on health care.

If we mobilize, however, the war in Ukraine could prove an inflection point. Never have calls for accountability for attacks on health care been as loud and sustained as now. We have an opportunity to press for justice for the people of Ukraine in the face of these atrocities and to extend that demand to people everywhere. The time for accountability for these devastating assaults on health care throughout the world is now.

Len Rubenstein

Chair, Safeguarding Health in Conflict Coalition

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REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS





HEALTH TRANSPORTATION STOLEN/HIJACKED



LOOTED



OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 61 incidents of violence against or obstruction of health care in Burkina Faso in 2022, an increase from 49 in 2021. In these incidents, at least 27 ambulances were stolen and health supplies were looted from health centers, medical warehouses, and pharmacies, undermining health care providers' ability to access people in need and to stock health facilities with the necessary supplies. This factsheet is based on the dataset 2022 SHCC Health Care Burkina Faso Data, which is available for download on the Humanitarian Data Exchange (HDX).

THE CONTEXT

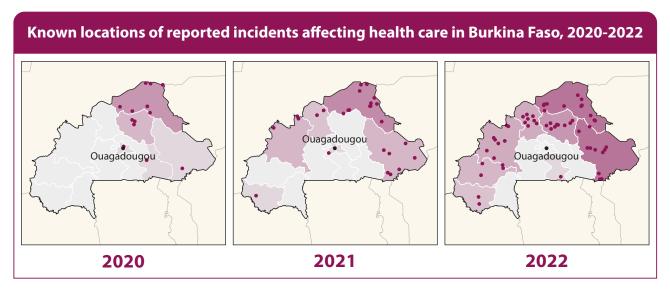
Armed violence perpetrated by non-state armed groups targeting health infrastructure in Burkina Faso's northeastern Est and Sahel regions including Islamic State Sahel Province (ISSP), Jama'ah Nusrat al-Islam wal-Muslimin (JNIM), and Ansaroul Islam continues to undermine health care delivery. Violence spread westwards throughout 2022, impacting an increasing number of health care providers in the country's Boucle du Mouhoun, Centre-Nord, and Nord regions.

As a result of insecurity, by the end of 2022, 197 health facilities remained closed, double the figure for 2021, and a further 430 were operating at minimum capacity, impacting more than 2.1 million people's ability to access health services, according to UNICEF. Around 50 health workers left the Sahel health zone in August alone and demanded to be redeployed in safer areas due to increasing insecurity.

VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2022

All the recorded incidents affected health workers operating in the national health structure in seven of Burkina Faso's 13 regions in 2022. The number of incidents rose by over a fifth in 2022 compared to the previous year, and an increase was particularly marked in Boucle du Mouhoun, Centre-Nord, and Nord regions. High incident numbers continue to be reported in Est and Sahel.





Ambulance hijackings were frequently reported in 2022, a change from previous years, when health-worker kidnappings were more often recorded. Health worker kidnapping cases decreased in Est, Nord, and Sahel, and increased in Boucle du Mouhoun, where ambulance hijackings were also common. Health worker killings declined from 10 in 2021 to two in 2022. The looting of health supplies remains a concern, because it undermines the ability to provide health care.

Most incidents were attributed to JNIM – an <u>umbrella organization</u> loosely grouping a coalition of distinct Islamist groups, such as the Macina Liberation Front – and its ally Ansaroul Islam. Some attacks, although to a much lesser extent, were attributed to ISSP. In most cases, perpetrators were armed with firearms, and used them to threaten and in some cases kill health workers. In four cases, ambulances were set on fire during wider attacks on civilians in Boucle du Mouhoun, Centre-Nord, and Hauts-Bassin regions, and at an IDP camp in Nord. In a fifth case, an ambulance was damaged when a nearby military convoy hit a JNIM-planted improvised explosive device in Est in September.

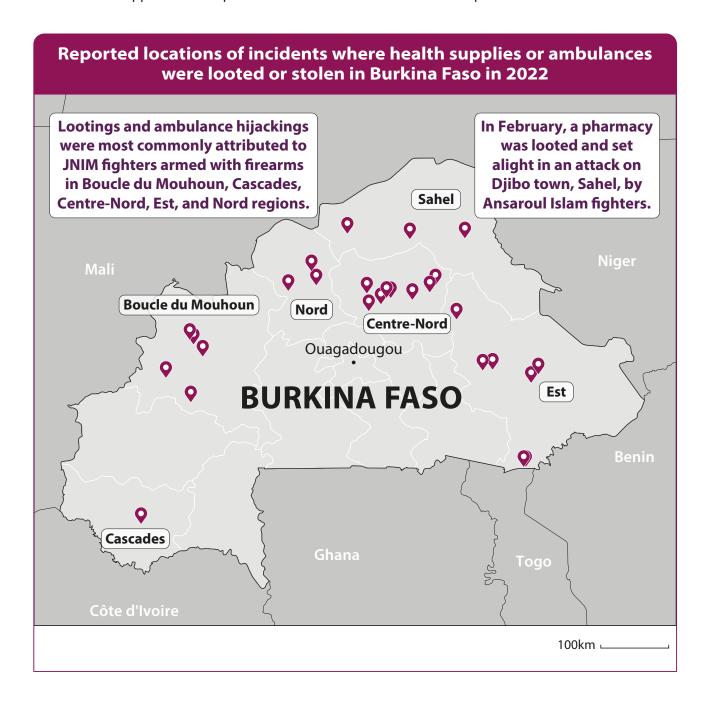
HEALTH TRANSPORTATION STOLEN OR HIJACKED

Ambulances were commonly stolen from health centers and in ambushes by JNIM fighters in Boucle du Mouhoun, Cascades, Centre-Nord, and Est regions. Two others were taken by ISSP fighters in Sahel in separate incidents in July, and armed men used a stolen ambulance to travel to Solenzo city in Boucle du Mouhoun, where they burned down a municipal building.² While most ambulance hijackings occurred without physical harm to health workers, three incidents involved nurses and ambulance drivers being briefly held before being released and their ambulance being stolen. The reported targeting of ambulances decreases the ability of health providers to access vulnerable civilians in insecure areas.



HEALTH SUPPLIES LOOTED

Vital medicine and equipment were frequently looted from health centers, medical warehouses, and pharmacies in Boucle du Mouhoun, Centre-Nord, Est, and Nord regions, often by JNIM fighters armed with firearms. A pharmacy was looted, and set on fire during an attack on Djibo town, Sahel, by Ansaroul Islam fighters in May.³ In most lootings health workers were not present, suggesting that access to health supplies was an important motivation behind these incidents. The exception was when a health team was ambushed and robbed of medicine and malnutrition products at gunpoint by JNIM fighters in Est in September.⁴ The looting of medical supplies temporarily reduces access to vital medication. Repeated lootings severely affect reliable supplies and can put health workers at risk from frustrated patients and their families.





HEALTH WORKERS KIDNAPPED

At least 11 health workers, including ambulance drivers and nurses, were kidnapped in nine incidents in 2022, compared to 42 in 19 incidents in 2021. Most kidnappings were attributed to JNIM fighters and occurred while staff were traveling in Boucle du Mouhoun, Centre-Nord, and Est regions. Others took place at an illegal checkpoint in Sahel in March, in a home invasion during a wider attack on civilians in Hauts-Bassins in September, and from a health center in Est in November. Seven victims were released after 24 hours, while a nurse who had been kidnapped at an illegal checkpoint was killed in Sahel in March. The fate of the remaining three kidnapping victims was not recorded.

HEALTH WORKER SEXUALLY ASSAULTED, KILLED, AND INJURED

In other incidents affecting health workers, a nurse was attacked and raped in front of her colleagues by JNIM fighters in Sahel region in February, and a health worker and three civilians were killed in an ISSP attack on a mosque in October.⁵ In Cascades, an ambulance driver was shot and wounded during fighting between JNIM and Burkinabé Armed Forces soldiers in January.⁶ In Hauts-Bassin and Nord in October and December, respectively, health workers were ordered to abandon their facilities by an armed group or face unspecified reprisals. Violence against health workers impacts health care providers' ability to maintain staffing levels appropriate for patient needs and affects staff well-being.

¹ JNIM is an umbrella organization consisting of a number of semi-independent armed groups that coordinate their activities through the JNIM structure. Ansaroul Islam and JNIM often conduct their attacks together, making it difficult to distinguish between the two when assigning responsibility.

² Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Burkina Faso Data. Incident numbers 33548; 36092; 34843.

³ Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Burkina Faso Data. Incident number 35089.

⁴ Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Burkina Faso Data. Incident number 36121.

⁵ Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Burkina Faso Data. Incident numbers 31780; 35080.

⁶ Insecurity Insight. Safeguarding Health in Conflict Coalition 2023 Report Dataset: 2022 SHCC Health Care Burkina Faso Data. Incident number 33482.



The Safeguarding Health in Conflict Coalition is a group of more than 40 organizations working to protect health workers and services threatened by war or civil unrest. We have raised awareness of global attacks on health and pressed United Nations agencies for greater global action to protect the security of health care. We monitor attacks, strengthen universal norms of respect for the right to health, and demand accountability for perpetrators. www.safeguardinghealth.org