

# BURKINA FASO

## Violence Against Health Care in Conflict 2024



**SAFEGUARDING  
HEALTH  
IN CONFLICT**



# Letter from the Chair



Assaults on health care in conflicts around the world reached new levels of horror in 2024, exceeding 3,600 incidents, 15% more than in 2023. They consisted of air, missile, and drone strikes; shelling; tank fire; shootings; arson; the looting and takeover of health facilities; and the arrest and detention of health workers. As the descriptions in this report show, each incident brings terror, trauma, and - in too many cases - injury, untreated illness, destruction and death.

By far the largest number of attacks on health care – more than 1,300 – took place in Gaza and the West Bank, far more than we have ever reported in one conflict in one year, including more than double the number of health workers killed. Gaza properly drew global attention for the ferocity and relentlessness of assaults on health care. But we must also reckon with the more than 2,300 attacks in other conflicts, including the hundreds in each of Ukraine, Lebanon, Myanmar and Sudan. The cumulative number of attacks over the course of wars that began in the past three years include more than 1,500 in Myanmar since the military coup in 2021; close to 2,000 in Ukraine since the Russian invasion of Ukraine in 2022, and more than 500 since the outbreak of war in Sudan in 2023.

This onslaught of violence has been accompanied by attempts by perpetrators to limit legal protections for health care and civilians in war, driven, as the International Committee of the Red Cross (ICRC) puts it, by a desire to have more “leeway to kill and detain.” Israel has sought to dilute legal requirements of precaution and proportionality during conflict. The new U.S. secretary of defense has called for “a law of war for winners.” Simultaneously, campaigns to delegitimize the International Criminal Court (ICC) are underway. The newly inaugurated U.S. president Donald Trump imposed sanctions on ICC staff and even their families for having charged Israelis with war crimes. In 2023, Russia’s Duma passed legislation criminalizing cooperation with the ICC or any foreign court or ad hoc tribunal that seeks to hold Russians to account. Hungary announced its plan to withdraw from the ICC, falsely alleging political bias.

These terrible developments threaten to make a mockery of the 10th anniversary of Security Council Resolution 2286 in 2026 and the 50th anniversary of the Additional Protocols of the Geneva Conventions (the law protecting health workers and civilians during armed conflict) in 2027. If this resolution and law are to be more than words, the current approach to protection, amounting to mere admonitions, must be replaced by centering accountability, accompanied by the political will to drive it.

That is the approach long taken by the Coalition, and recently taken by a report *In the Line of Fire*, issued in November 2024 by the World Health Organization and the World Innovation Summit for Health. It called for a new alliance of member states, UN agencies, and NGOs. It recognized that the renewal of long-ignored commitments could not possibly suffice. Instead, UN agencies, international organizations, NGOs, and civil society organizations must rally together to take tough action, including outreach to the International Criminal Court, to impose consequences on the perpetrators of violence. Actions must include states cutting off arms transfers to perpetrators of attacks and employing the power of universal jurisdiction to prosecute. If the laws of humanity are to be upheld and the carnage is to end, governments and all concerned citizens everywhere must find the political courage and will to act.






Len Rubenstein  
Chair, Safeguarding Health in Conflict Coalition

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## REPORTED INCIDENTS AND MOST COMMONLY REPORTED CONCERNS

 REPORTED INCIDENTS	 INCIDENTS WHERE HEALTH SUPPLIES WERE LOOTED	 HEALTH WORKERS KILLED
<b>2024</b>		
<b>22</b>	<b>6</b>	<b>5</b>
<b>2023</b>		
<b>51</b>	<b>21</b>	<b>8</b>
<b>2022</b>		
<b>66</b>	<b>14</b>	<b>4</b>

↓ Source: 2022-2024 BFA SHCC Health Care Data

## OVERVIEW

The Safeguarding Health in Conflict Coalition (SHCC) identified 22 incidents of violence against or obstruction of health care in Burkina Faso in 2024, compared to 51 in 2023 and 66 in 2022. In these incidents, five health workers were killed and medical supplies were looted. The actual number of incidents and the severity of the problem are likely much greater.

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 Attacks on health care and broader violence and instability have exacerbated the weaknesses of the country's health care system.
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 Health workers were killed on accusations of collaborating with JNIM militants.
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 Nearly one in three health facilities were impacted by violence, with hundreds closed or operating at minimum capacity.

Information on incidents of violence against health care in Burkina Faso is compiled from aid agency data-sharing mechanisms, information projects and open sources. See [Methodology](#) for further information.



## THE CONTEXT

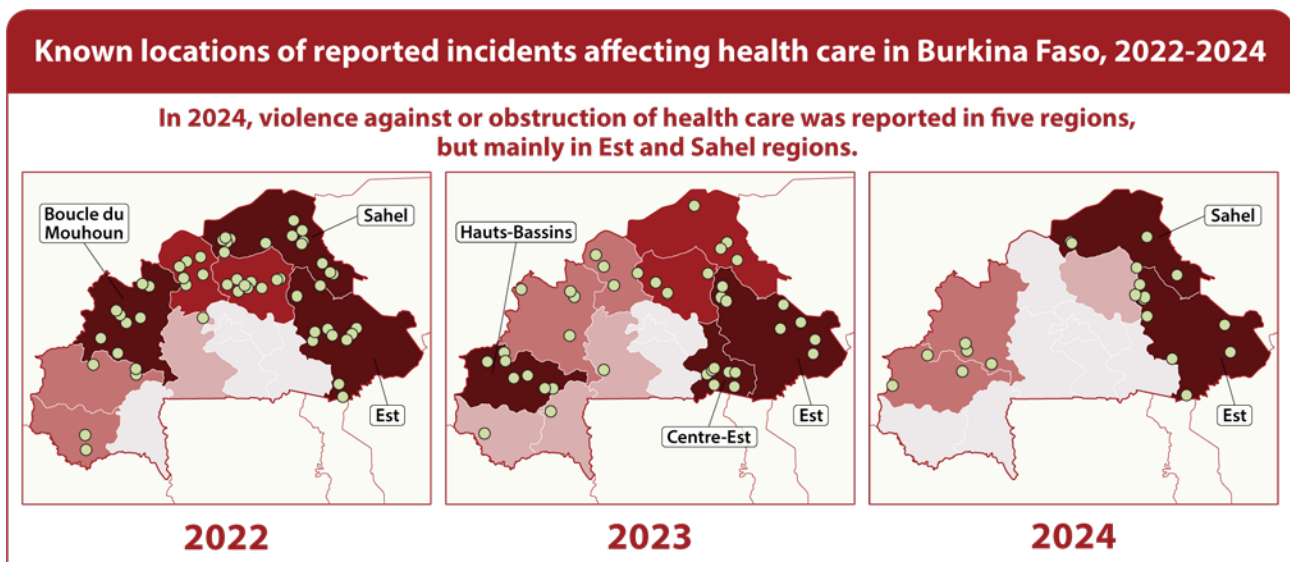
Armed insurgencies have affected Burkina Faso for over a decade, and continued to do so in 2024. Reported violence reduced slightly compared to the previous year, but remained at high levels, especially in the southern and eastern halves of the country in Boucle du Mouhoun, Est, and Sahel regions.<sup>1</sup> After the 2022 coup, the country's military rulers remained in power in 2024 and extended their rule by five years.

The Islamist insurgent groups Jama'at Nusrat al-Islam wal-Muslimin (JNIM) and Islamic State Sahel Province (ISSP) retained de facto control over large areas of territory and continued to impose blockades on urban areas. Members of both groups were accused of massacring civilians, while government forces summarily executed hundreds of civilians as part of a wider crackdown on civilians said to have collaborated with Islamist armed groups.

Around two million people were internally displaced and 6.3 million people were in need of humanitarian assistance.

## VIOLENCE AGAINST OR OBSTRUCTION OF HEALTH CARE IN 2024

In 2024, violence against or obstruction of health care was reported in five of Burkina Faso's regions, but mainly in Est and Sahel regions. Most incidents affected health care providers operating in national health structures, with three affecting an INGO.<sup>2</sup>



Source: Safeguarding Health in Conflict Coalition

JNIM fighters armed with guns were implicated in most incidents. They set fire to health centers; killed, abducted and threatened health workers; and on one occasion fired shells towards a town, hitting the roof of a health center and injuring a nurse.<sup>3</sup> ISSP fighters kidnapped a nurse at an illegal checkpoint in the Sahel; her subsequent whereabouts were not recorded.<sup>4</sup>



Reports suggest that the Burkinabé Armed Forces were implicated in the killing of two health workers, including an INGO staff member, after they were accused of collaborating with JNIM militants in Est and Sahel regions.<sup>5</sup>

An unidentified improvised explosive device (IED) was found in a health center courtyard and safely detonated.<sup>6</sup>

↓ This factsheet is based on 2022-2024 BFA SHCC Health Care Data. Download the data [here](#) or on the [Humanitarian Data Exchange \(HDX\)](#).

## Health workers killed

Five health workers were killed in four incidents in 2024. Victims included a pharmacy manager, nurse, and other health care staff who were killed in and around towns and villages in Boucle du Mouhoun, Est, and Sahel regions. In addition to the previously mentioned health workers killed for alleged collaboration with JNIM, other health workers were killed in indiscriminate attacks, such as the abduction and killing of a pharmacy manager during a JNIM assault on a public bus in Gnagna province.<sup>7</sup>

## Medical supplies looted

Vital medical supplies were looted from health facilities on at least six occasions in 2024. All reported incidents involved JNIM fighters usually armed with machine guns, AK-47s, and other firearms, who looted medicine and other medical supplies from health centers, pharmaceutical depots, and pharmacies. Lootings occurred as part of broader assaults involving civilian casualties and the destruction of property.





## Other incidents

On July 17, a health INGO's office in Djibo town was attacked with gunfire, an advanced health post was set on fire, a medical center supported by the INGO was vandalized, and two water distribution sites were targeted, endangering medical care and clean water access amid the broader security crisis.<sup>8</sup>



## SOCIAL MEDIA REACTIONS TO THE DJIBO ATTACK

Six days after the coordinated attacks in Djibo on July 17, 2024, which included the vandalizing of a health post during which armed group members stole medical equipment, a video circulated on X allegedly showed JNIM members using the ultrasound machine reportedly taken from the health post. The video reached an estimated 26,200 X users and generated 254 interactions, many of which included misleading or hostile content.

Numerous social media comments misrepresented the incident, accusing the INGO of deliberately assisting armed groups. Statements included:

- “[the INGO] are terrorist accomplices.”<sup>9</sup>
- “They use taxpayers’ money to buy equipment that ends up with terrorists.”<sup>10</sup>
- “You are the source of Fake news. You yourself are a terrorist.”<sup>11</sup>

Unsubstantiated allegations of this kind contribute to reputational harm and can compromise the safety of humanitarian personnel. On September 2, 2024, a driver for the INGO in question was killed by Burkinabé forces in Djibo, reportedly after accusations that he was collaborating with armed groups. The motives could not be independently verified, but the incident illustrates the potential real-world impact of online disinformation, in which health care is far too often portrayed as complicit in terrorism, thus legitimizing further violence.

In October 2024, the INGO in question announced its withdrawal from parts of Burkina Faso due to deteriorating security conditions and growing threats to its staff. The organization has emphasized that without assurances of the safety of its teams, it is no longer able to operate effectively in affected areas, leaving a growing number of people without access to health care.

## THE IMPACT OF ATTACKS ON HEALTH CARE

Burkina Faso had the ninth lowest Human Development Index globally in 2022, with the latest available data suggesting only one doctor per 10,000 people, which is well below the WHO's recommended doctor-to-population ratio of 1:1,000. Attacks on health care and broader violence and instability have exacerbated the weaknesses of the country's health system.

According to the Burkina Faso Health Cluster, 424 health facilities (17.7% of the total) were closed and 309 health facilities (12.9% of the total) were functioning at minimum levels as of the end of August 2024. Boucle du Mouhoun, Centre-Nord, Nord, and Sahel regions were the most affected and witnessed some of the highest levels of violence in the country in 2024.<sup>12</sup>



Attacks on health care and insecurity have directly undermined the functionality of Burkina Faso's health system. After health facilities were struck by gunfire in Djibo in July 2024 following previous attacks in November 2023, the number of health providers in the health district declined when some providers left. Several months later, in October 2024, health providers continued to suspend services.

*After health facilities were struck by gunfire in Djibo in July 2024 following previous attacks in November 2023, the number of health providers in the health district declined when some providers left.*

The suspension of services at health facilities increases the strain on those that remain open, because more patients become dependent on them, increasing the barriers to health care access in the country. According to surveys conducted by REACH between June and August 2024, around two-thirds of households in Oudalan province in Nord region and Loroum province in Sahel region experienced long waits to obtain access to health care.

- 1 Armed Conflict Location & Event Data (ACLED) database attribution policy, <https://acleddata.com/privacy-policy/> (accessed February 26, 2025).
- 2 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 BFA SHCC Health Care Data. Incident numbers 81247; 62942; 62940.
- 3 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 BFA SHCC Health Care Data. Incident number 79531.
- 4 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 BFA SHCC Health Care Data. Incident number 92384.
- 5 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 BFA SHCC Health Care Data. Incident numbers 81247; 79499; 79498.
- 6 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 BFA SHCC Health Care Data. Incident number 84323.
- 7 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 BFA SHCC Health Care Data. Incident number 86131.
- 8 Insecurity Insight. Safeguarding Health in Conflict Coalition 2024 Report Dataset: 2022-2024 BFA SHCC Health Care Data. Incident numbers 62942; 62941; 62940.
- 9 "[les ONG] sont des complices terroristes."
- 10 "Ils utilisent l'argent du contribuable pour acheter des équipements qui finissent avec les terroristes."
- 11 "Toi tu la source de Fake news. Toi même tu es un terroriste."
- 12 Armed Conflict Location & Event Data (ACLED) database attribution policy, <https://acleddata.com/privacy-policy/> (accessed February 26, 2025).

# SAFEGUARDING HEALTH IN CONFLICT

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.

<https://safeguarding-health.com>

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