



## **Burkina Faso – Researched and compiled by the Refugee Documentation Centre of Ireland on 12 August 2010**

### **Re: Information on medical & health facilities in Burkina Faso.**

A report on Burkina Faso from the *UN Committee on the Elimination of Discrimination Against Women* states

“In the field of health Burkina Faso has one of the weakest profiles in the West African subregion. Overall morbidity and mortality rates remain high. As well as child mortality (184 per thousand) and maternal mortality (484 per 100,000 live births), there has been a relatively high prevalence of HIV/AIDS (although it has been falling continuously –from 4.2% at the end of 2002 to 2% in 2006, according to UNAIDS data), which places Burkina Faso among the most affected countries in the subregion. The epidemiological data provided by the various Demographic and Health Surveys (1998 and 2003) show that malnutrition in all its forms and at all stages of severity has increased continuously over the past decade and is quite pronounced among women and children: 21% of women of childbearing age suffer from energy deficit, 63% have hyporetinolemia and more than half are anaemic. Some 7% of pregnant women suffer from nocturnal blindness due to vitamin A deficiency and 68.3% are anaemic, 2.3% of them to a severe degree (Demographic and Health Survey, 2003).” (UN Committee on the Elimination of Discrimination Against Women (1 October 2009) *Burkina Faso: "Consideration of reports submitted by States parties under article 18 of the Convention on the Elimination of All Forms of Discrimination against Women; Sixth periodic report of States parties; Burkina Faso [CEDAW/C/BFA/6]"*)

An IRIN report from states

“Many are drawn to any place offering health care – regardless of licensure – because public health centres are overflowing, maternity ward doctor Darga said. “The clinics are warm, inviting [and] clean and patients do not have to sleep in the hallways because of insufficient space, unlike the situation in some public health centres.”

What can one nurse alone do to face 30 patients?

Long waits and poor services lead patients to seek what can be dangerous care, said nurse Adama Korogo, who also works at Yalgado Ouédraogo hospital. “Most of the time patients have to wait up to four hours to see a doctor. And what can one nurse alone do to face 30 patients?”

Based on the most recent government statistics, Burkina Faso had one doctor for every 29,000 residents in 2005, about one-third the World Health Organization (WHO) recommendation. The country has one nurse for every 7,800 residents versus WHO’s recommended threshold of 5,000.

Regional health director Djigmdé told IRIN the public health system is not meeting patient needs, which leaves a large gap for private licensed clinics to fill. "The government needs to make sure that the services at private clinics are of quality."

Burkina Faso had 10 private clinics in the 1970s versus more than 300 in 1994, according to the country's current health development plan. Though the average distance for residents to reach a public health centre is 10km, there are wide disparities across regions, according to the Health Ministry.

The ministry aims to build primary health centres in communities of at least 10,000 and within 10km of areas with fewer than 10,000 residents.

But finding workers for those centres will be another challenge, according to the health development plan. "On average 30 doctors, 15 pharmacists and some 800 paramedics graduate annually, which is insufficient for the Health Ministry's needs, but budgetary constraints do not permit even employing those who are trained." (IRIN News (28 August 2009) *BURKINA FASO: Illegal clinic crackdown*)

The Burkina Faso entry into the *Encyclopaedia of the Nations*, under the heading 'Health', states:

"In 1993, the government of Burkina Faso took on the project of improving the quality of health services by upgrading facilities and skills, achieving control of endemic parasitic diseases, and strengthening sector institutions. Total health care expenditures as of 1999 were an estimated 4.1% of GDP.

As of 1999, it was estimated that there were fewer than 0.05 physicians and 1.4 hospital beds per 1,000 people. The hospital at Ouagadougou is one of the most modern in Africa. Medical centers at Bobo-Dioulasso carry on research on insect-borne diseases. Mobile medical units attempt to control leprosy, sleeping sickness, yellow fever, and other contagious diseases. There were 2,824 new cases of measles in 1994.

One of Burkina Faso's most serious health problems is onchocerciasis (river blindness), which touches 84% of the total land area and causes many thousands of people to desert settlements infected by the fly vector. A control program has had some success. About two-thirds of Burkina Faso residents have access to safe water. In early 1997, a meningitis epidemic in West Africa spread to Burkina Faso, resulting in 724 deaths out of 5,571 cases." (Encyclopaedia of the Nations (2009) *Burkina Faso: Health*)

A June 2009 *IRIN News* report states:

"OUAGADOUGOU, 30 June 2009 (IRIN) - Reported measles infections and deaths are falling in Burkina Faso following nationwide vaccinations earlier this month, according to the Ministry of Health.

There were 1,007 measles infections and four deaths reported the week ending 26 June, one-fourth the numbers reported for the last week of April, according to Mété Bonkougou, the Health Ministry's vaccine director.

Burkina Faso has reported 51,000 infections and 300 deaths since the beginning of 2009, the largest outbreak the country has seen in more than 10 years.

Bonkougou told IRIN 3,677,000 children were vaccinated from 17 to 21 June – more than expected. “People rushed to get vaccinated because they see [the impact] of measles on their body versus polio, where there is more resistance to vaccination because the consequences are not as visible.” (IRIN News (30 June 2009) *BURKINA FASO: Measles infections declining*)

Another *IRIN News* report from June 2009 states:

“DAKAR, 16 June 2009 (IRIN) - Burkina Faso's Health Ministry has announced a measles vaccination campaign targeting 3.6 million children starting 17 June for five days in high-risk districts, including the densely-populated capital of Ouagadougou.

Only two of 13 regions nationwide are not considered at-risk by the Health Ministry.

Spread through coughing or sneezing, the highly infectious disease is the leading killer of young children globally, especially those who are malnourished, according to World Health Organization (WHO).

The number of measles infections in Burkina Faso has doubled in the past two months to more than 42,000 reported cases this year, the largest outbreak the country has had in more than 10 years.” (IRIN News (16 June 2009) *BURKINA FASO: Measles vaccinations to begin*)

A May 2009 *BBC News* article states:

“Burkina Faso's millions of "nameless" citizens may soon be able to proclaim their existence and reclaim their rights as part of a \$5m (£3.3m) government programme to issue free birth certificates.

Five million people are expected to receive birth certificates under the programme.

Birth certificates have been available in Burkina Faso before now, but have been unaffordable for many of the country's citizens.

A birth certificate attests to the legal existence of an individual. Without one, a person cannot exercise their right to vote, and access to education, health care and other government services can be extremely difficult.” (BBC News (08 May 2009) *Reclaiming Burkina Faso's children*)

A March 2009 *IRIN News* article under the heading ‘Health dangers’, states:

“Among Burkina Faso's 13 regions the Sahel has the highest maternal mortality rate with 840 deaths per 100,000 live births, verses the national average of 700 (2006 data), according to UNFPA.

Most child brides do not seek care at health centres, opting instead for traditional healers, according to the Population Council. In 2004 fewer than 18 percent of women in the Sahel region gave birth in health centres, according to the Ministry of Health.

Unattended deliveries are responsible for the region's fistula problem, according to UNFPA. In 2007 there were 54 reported fistula cases in the Sahel, which was the highest occurrence nationwide, according to the Health Ministry." (IRIN News (16 March 2009) *BURKINA FASO: Child marriage worsens population pressure*)

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This response was prepared after researching publicly accessible information currently available to the Refugee Documentation Centre within time constraints. This response is not and does not purport to be, conclusive as to the merit of any particular claim to refugee status or asylum. Please read in full all documents referred to.

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