**Timeline**  
June-July 2020, October-December 2020

**Study Type**  
Descriptive / Surveillance

**Article Link**  
https://www.poverty-action.org/recovr/recovr-survey

**Research Implemented by IPA**  
Yes

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**RECOVR Burkina Faso: Tracking the Effects of the COVID-19 Pandemic**

**Researchers**  
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**Abstract**

Tracking how people’s lives are affected by the COVID-19 pandemic can enable policymakers to better understand the situation in their countries and make data-driven policy decisions. To respond to this need, IPA has developed the RECOVR survey—a panel survey that will facilitate comparisons, document real-time trends of policy concern, and inform decision-makers about the communities that are hardest-hit by the economic toll of the pandemic. In Burkina Faso, IPA is conducting the survey in partnership with the Ministry of Employment. The survey will provide the Ministry with data on how the pandemic is affecting employment and business outcomes, particularly for youth and vulnerable populations, to inform its policy responses.

**Project Outcomes of Interest**

Some of the key questions the survey aims to answer at the global level include the size and scope of the disruptions to government service provision, work disruptions and type of disruptions, whether and how households with school-aged children are spending time on education since schools have been closed, extent to which people are skipping necessary healthcare, and identification of populations most at risk of skipping necessary healthcare. The Burkina Faso survey includes health symptoms and care, COVID-19 mitigation behavior, education, work and income, social safety net support received, food and market security, and financial health, with a particular focus on small and medium enterprises and employment, as well as a module on access to family planning.
Partners

Ministry of Employment, Burkina Faso

Key Findings

Round 1:

- 8.4% of respondents say they or any other person in their household delayed or skipped needed healthcare visits since mid-March 2020. Most cite long waits or understaffed clinics
- 25% of respondents say they have had to limit portion sizes at meal times or reduce the number of meals in the past week
- 21% of respondents say they would not be able to find 20,000 FCFA to pay for an emergency. 50% say that it would be somewhat difficult to obtain these funds
- More than 60% of employed individuals report having earned less pay than they did in a typical week before the government closed schools
- Respondents report that 50% of primary and secondary school children are spending time on education at home since schools were closed

Round 2:

- The proportion of respondents who indicate that they always wear a facemask in public decreased by 9pp. Among those who do not wear a facemask, the proportion who believe it is not necessary (50%) nearly doubled.
- There have been decreases between 19-25pp in respondents' inability to buy their usual amounts of food from markets because of market shortages, high food prices, or reduced incomes.
- Across rounds, a majority (78%-81%) of respondents could obtain emergency financial sources (20k FCFA) in 1 month, though more than one in four would find it somewhat difficult.
- Among those who indicate they are working less compared to February 2020, 38% indicate it is because the business is no longer operating. Among this group, only 22% has looked for a new job.
- A majority of respondents prefer for primary-level students (79%) and secondary-level students (75%) to return to in-person schooling.

Link to Results

- Round 1: Full results presentation (in French), blog post (in English) summarizing the key takeaways, and video recordings of webinars (in English and French) sharing the results and their policy implications
- Round 2: Full results presentation (in French), full results presentation (in English), blog post (in English) summarizing key takeaways, and video recordings of webinars (in English and French) sharing the results and their policy implications.
Impact Goals

- Build resilience and protect the financial health of families and individuals
- Build resilient and adaptable businesses and employment opportunities
- Improve social-safety net responses
- Improve women’s health, safety, and economic empowerment
- Keep children safe, healthy, and learning
- Promote peace and safety, and improve humanitarian response
- Reduce COVID-19 transmission rates

Project Data Collection Mode

- CATI (Computer-assisted telephone interviewing)

Link to Public Data

https://dataverse.harvard.edu/dataset.xhtml?persistentId=doi:10.7910/DVN/BGHJYK

Results Status

Results