

Mobility, transport and rural access in sub-Saharan Africa: the challenges of travel to key services



Gina Porter
Durham University, UK



Workshop on Rural Access and Mobility
T2 Conference, Arusha, 22nd-24th November 2011

Common rural transport challenges

- Road conditions
- Availability, reliability, cost of transport services
- Distance to key services:
 - Clinics and hospitals
 - Schools, especially post-primary
 - Market outlets for produce sales
 - Financial and political/administrative services
- Socio-economic conditions:
 - Poverty
 - Gender- and age-related travel constraints

Road condition challenges



Transport service constraints

- Poor availability of transport services
 - Taxis/minibuses often based at paved road
 - Few vehicles in remoter villages
- High cost of motorised transport services
 - Vehicle owners must factor in wear and tear
 - Often approximately double per km taxi charges on unpaved roads
- Unreliability of transport
 - May arrive at village already full - no space for new passengers
 - May arrive late/not arrive due to breakdowns/impassable roads
 - May arrive late/fail to arrive at destination, so loss of time, deterioration of produce etc.



Distance to key services

1. Medical services



- Many remoter ['off-road'] villages have no formal medical services located nearby
- Topography and rapidly rising rivers may exacerbate distance constraints
- Even primary care (rural clinics) often beyond walkable distance (especially when ill, infirm)
- Mobile nurses etc. often lack funds/transport to visit remote communities

a 15-year old expectant mother had obstructed labour and I needed a car badly to take her to the hospital [30 km distant]. She gave birth eventually the following morning but the pain was too much for her to bear [she died]. She was in primary 6...' [rural Ghana, TBA]

Ghana: Young people[9-17yrs], reported use of health services within last 12 months [N=943]

| Settlement type | <i>Any health facility</i> | <i>Type of health facility most recently used</i> | | | |
|-------------------------------|----------------------------|---------------------------------------------------|----------------|--------------|-----------|
| | | Regional/ specialist hospital | Local hospital | Local clinic | Drugstore |
| Urban | 42.8% | 34.0% | 27.8% | 21.6% | 16.5% |
| Peri-urban | 30.8% | 33.3% | 35.7% | 14.3% | 16.7% |
| Rural/services | 15.4% | 22.2% | 2.8% | 41.7% | 33.3% |
| Remote rural | 13.5% | 11.5% | 11.5% | 69.2% | 7.7% |
| <i>All settlements</i> | 26.5% | 29.6% | 25.1% | 27.2% | 18.1% |

Health implications of long distance to medical services

- Common dependence on:
 - pharmaceutical purchases from grocery stores
 - traditional healers
 - TBAs/family in childbirth
- Emergencies ► bicycle travel to bring in taxi, or pedestrian-borne stretcher to main road etc.
- For women:
 - High maternal mortality rates
 - Obstetric fistula
 - Reduced uptake of pre-natal/other services
- Widespread chronic health problems ► chronic poverty ► cycle of poverty continues

Distance to key services

2. Education

- Remoter settlements commonly lack even primary schools
- Secondary schools often located in major service settlements
 - ▶ long walks to school
 - ▶ delayed primary enrolment, early drop out
 - ▶ low secondary enrolment
 - ▶ limited livelihood opportunities



Distance to key services

3. Markets

- Markets for rural produce often in major service centres
- Rural bulking centres usually on major paved roads
- Urban-based traders often reluctant to travel off- road unless produce prices very high
- Traders purchasing at the farm gate pay low prices
- Absence of reliable, cheap transport ► goods head-loaded to paved road or nearest market
- Paved road construction may lead to decline of off-road rural markets



Distance to key services

4. Financial and political/administrative services

- **Rural banks** limited to main service centres
- **Bank staff** reluctant to travel to remote locations
- Pension points usually in service centres
 - ▶ villagers excessively dependent on informal loans, high-cost credit
- **District administrative staff** located at district HQs
- Administrators/politicians rarely visit village constituents
 - ▶ villagers limited access to the political process
- **NGOs** can support political participation and service improvements BUT usually based in service centres, may rarely visit remote settlements

Gender-related travel constraints

- Greater impact of distance to services on women and girls due to constraints on their mobility:
 - Time and income poverty [caring duties, doorstep anchors, lower incomes, less credit]
 - Cultural + financial constraints on women operating transport equipment
 - Male association of female mobility with vulnerability and promiscuity
 - Expected to fill the transport gap as load carriers





Load carrying: a 'female' activity



- Males 15+ may head-load for *domestic* purposes only in emergencies
- Loads often extremely heavy; health impacts largely unknown:
Most of the times the loads [I carry] are heavy and the distance to the house is long. I often feel very tired and feel pains on the knees, joints, neck and back
[Matilda 15 years, 1 child. Farmer/pito seller, rural forest Ghana]
- When transport technology introduced, boys/men may take over transport tasks

Women and girls as transporters



Men and boys as transporters



Women and girls' perceived vulnerability

*There are people who abduct children and then cut their body parts
letting girl children travel alone on public transport is not safe
[because of this]. [grandmother, rural Eastern Cape. RSA]*

*When people detect that she cannot find her way to wherever she
came from, she may be raped by other people
[taxi driver, rural forest zone, Ghana]*

*[We fear girls will] be cheated on or get raped on the way to school
[Fathers' group, rural highlands, Malawi]*



Mobility as incitement to promiscuity: a common subtext

I think a woman who travels a lot is befriending other men and that's why she travels

[Men's group, southern Ghana]

To raise a girl child properly, you need to have a keen eye on her always

[father of 10, Blantyre, Malawi]

[boys are allowed more freedom to travel because] *boys are more responsible and less susceptible to bad company*

[women's group, Blantyre, Malawi]

Gender-related travel constraints impact on girls' education

- Load carrying demands ► girls' enrollment delayed/no school/early drop-out
- Pre-school tasks ► late to school ► punishment + tiredness, lack of concentration in school ► poor results
- Physical hazards on journeys to school : e.g. rivers [n.b. girls lower swimming competency], ► late arrival, punishment, truancy..... [urban +rural]

Our teachers understand our route, they do not punish us much.. two lashes, but sometimes we miss morning classes... (Busi, 19 years RSA)

- Fear of verbal abuse, men/boys propositioning, rape, on journey to school:

I don't like to travel to school because there are boys who mock us on the way... They wait for us on the road where they smoke dagga and then they follow... (Zodwa, 13 yrs, RSA)



Cycling can aid low-cost mobility, but mostly for boys/men

females, even if they learn they will not get the money to buy a bicycle...even if they ride they just ride it around they do not send it on long distances ... they do not have the strength

[Yaw, 18 years, out-of-school boy, rural forest zone Ghana]



... people laugh if they see a girl riding a bicycle

[out-of-school boys group, rural highlands Malawi]

it would seem strange to see a girl riding a bicycle in this settlement because it is unheard of

[out-of-school boy 18, rural Eastern Cape, RSA]



- Survey data: know how to ride a bicycle [n=2967]
Ghana: 56% girls, 87% boys.
Malawi: 44% girls 72% boys
RSA: 52% girls, 71% boys

Age-related travel constraints: children and youth

- Poverty re transport fares
- Physical limitations re long distance walks
- Time poverty due to household roles
- Low status, lack of voice
- Parental concerns re safety (especially girls)
- Pedestrian harrassment (e.g. vehicle drivers)
- Harrassment on public transport



Older people's mobility constraints

- Need for access to health services, work, kin, pension points etc.
BUT mobility may be limited by :
- Poverty (especially among older women)
- Caring roles
- Infirmary (varies incl. with age) i.e. limits walking distance
- Other health issues e.g. urinary incontinence among women with obstetric fistula
- Difficulties standing in full, unstable vehicle
- Harassment, cheating on fares by operators
- Difficulties cycling
- Decline in cognitive abilities ► traffic dangers
- Lack of voice

Interventions for positive change?

1. Road improvements

Crucial role of basic road maintenance especially in remoter rural areas

BUT

Road improvement not necessarily beneficial to all:

- Roads are not enough[need low-cost, regular, reliable transport services]
- Off-road market/service decline
- Increased road traffic speeds/volume ► more accidents ► impact on carers
- Roads as routeways for STD transmission ► impact on sex workers and clients ► impact on carers
- Labour-based construction jobs often mostly to men

Interventions for positive change?

2. Improved transport services

- Improvement of conventional transport services on feeder roads
- Subsidies for motorised transport in remote areas?
- Planned, piloted, monitored IMT interventions + associated track improvements
- Improvement/expansion of cycle- + motorbike-taxi services
- Experiment with walking bus schemes for rape/harassment prevention

Interventions for positive change?

3. Possible non-transport interventions

- Mobility is a means, not (necessarily) an end in itself
- Improved availability of water supplies, community woodlots, grinding mills, fuel-efficient stoves etc. ► reduce headloading
- Rapid expansion of mobile phone networks [+ other ICTS] ► substitute/complement to transport services?

Exploring mobility and rural access using checklists

- The Lawate-Kibong'oto road area
- The value of checklist interviews
 - For exploring people's own understanding of their situation i.e. contextualisation of access problems
 - For exploring multiple realities
 - Flexibility is key
 - Potential for mobile conversation
 - Research ideas can be generated from the research process
 - Stand-alone technique or as a base for survey design



% children who reported carrying water every day in the week prior to our survey [N=1000 per country]

*‘Drawing and head loading water is a feminine job and parents are taking advantage of the concept of gender equality [when] they send the boy child to draw water’
[boys’ 12-15 yr group discussion, urban Malawi]*

| Settlement type | Ghana girls | Ghana boys | Malawi girls | Malawi boys |
|----------------------------|--------------------|-------------------|---------------------|--------------------|
| Remote rural | 95.9 % | 89.1 % | 75.6% | 22.8% |
| Rural with services | 89.4 | 78.5 | 75.7 | 34.8 |
| Peri-urban | 77.5 | 77.2 | 80.0 | 33.3 |
| Urban | 52.0 | 56.6 | 57.6 | 28.1 |
| All settlements | 76.5 | 75.7 | 71.5 | 29.8 |