COVID-19 – Regional Points of entry analysis
Annual Report on Operational Status and Measures in Place at Points of Entry in West and Central Africa

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DTM
IOM DISPLACEMENT TRACKING MATRIX

April 2020 - March 2021

Context and Introduction

The COVID-19 pandemic reached Africa in February 2020 with the first case detected in Egypt. In West and Central Africa (WCA), Nigeria registered the first confirmed case at the end of February. By March 2020, COVID-19 cases had been declared in every country in the region. As of 30 April 2021, over 600,000 cases of COVID-19 had been reported in West and Central Africa, of which 8,500 COVID-19 related deaths were reported. The case fatality ratio was at 1.4%. The top three countries with the highest number of reported COVID-19 cases were Nigeria, Ghana and Cameroon which accounted for 56 per cent of all the cases in the region. Liberia (4.1%), Mali (3.8%) and Niger (3.7%) had the highest case fatality rates.
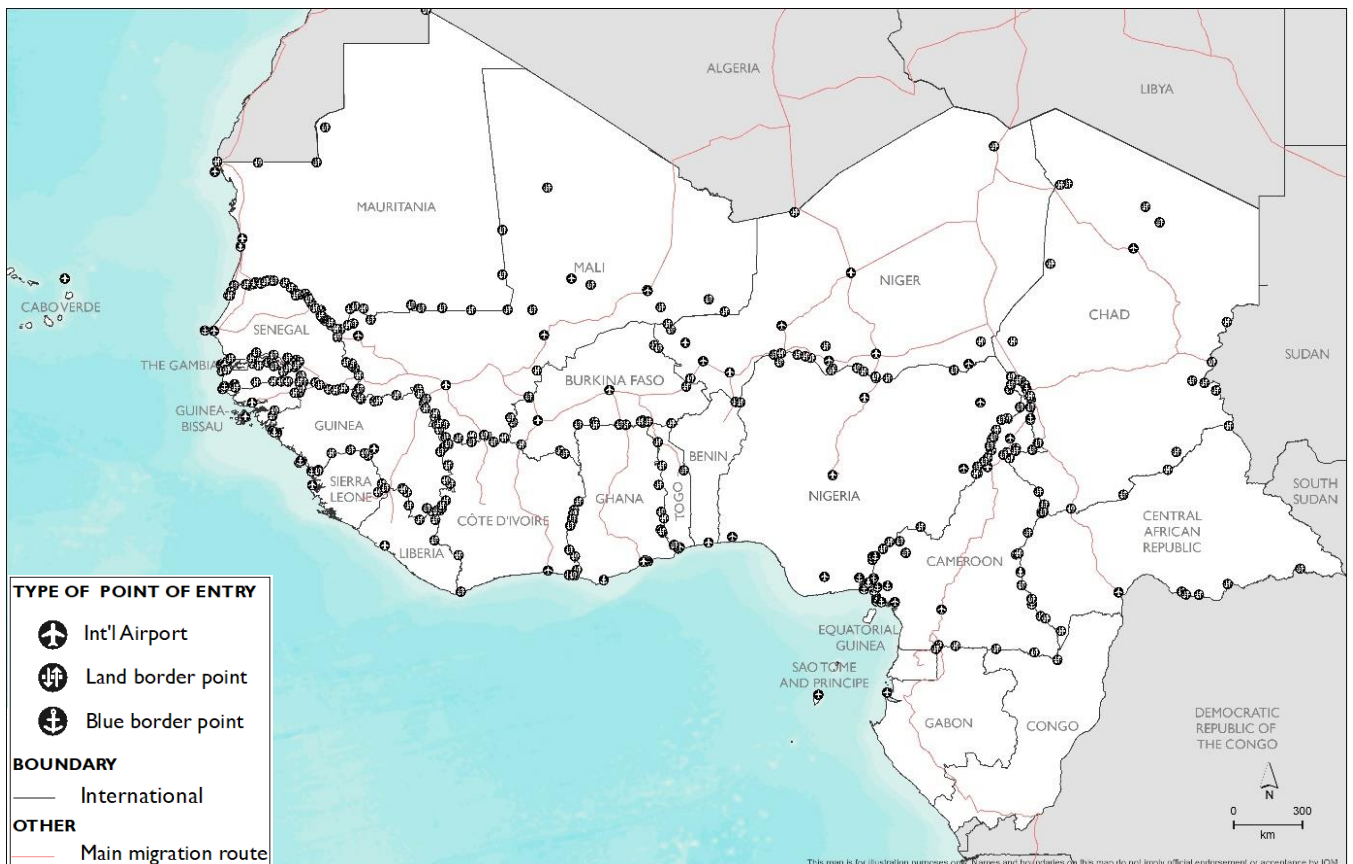
Similarly to countries across the globe, governments in West and Central Africa adopted measures to limit the spread of the virus, including the closure of maritime, air and land borders; restrictions on internal mobility such as curfews, lockdowns and quarantining of cities or regions; states of emergencies; mandatory isolation of travellers; closures of schools, non-essential businesses and public spaces; and restrictions on social, educational, and economic activities.

To better understand and capture how COVID-19 has been affecting global mobility, IOM developed a global database (the Mobility Restrictions Mapping, MRM) which maps, tracks, and analyses the changes and trends in operational status of and mobility restrictions at Points of Entry (PoEs) including airports, blue border crossing points (such as sea ports and river crossings) and land border crossing points and other key transit points and locations of internal mobility. Outside of operational status for key locations of internal mobility, MRM collects data on COVID measures impacting mobility, health measures issued at Points of Entry and some internal mobility points, and populations impacted by COVID-19 mobility restrictions.

Such information is meant to serve IOM member states, IOM, and its UN partner agencies in responding adequately, and in a targeted manner, to the current and evolving crisis period. In West and Central Africa, IOM missions were involved in providing information on the situation at the PoEs in their respective countries.

This report presents the findings from data collected on the operational status of PoEs, health measures as well as priority needs at PoEs between 30 April 2020 and 31 March 2021 (49 weeks or Rounds), at 469 official points of entry across the region, including 371 land border crossings points , 46 airports and 52 blue border crossing points (maritime borders).
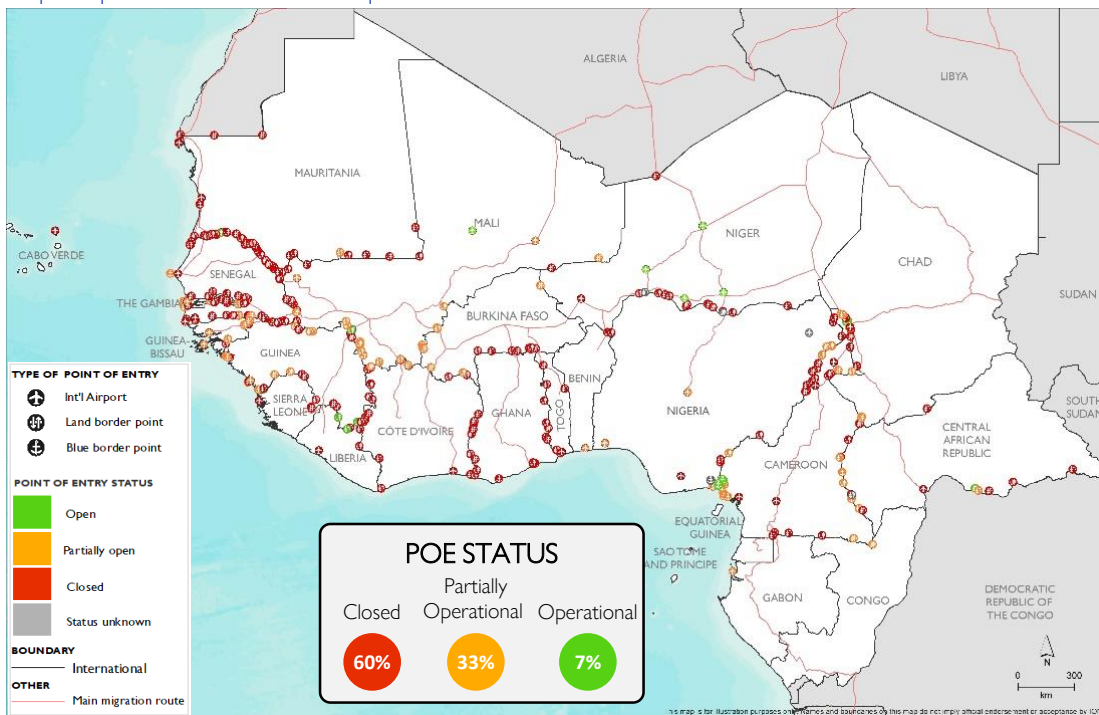
Map 1: POEs assessed across the region

TYPE OF POINT OF ENTRY

- ✈ Int'l Airport
- ⊕ Land border point
- ⊕ Blue border point

BOUNDARY
— International

OTHER
— Main migration route

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I. INTERNATIONAL BORDER ANALYSIS: OPERATIONAL STATUS OF POINTS OF ENTRY

In response to the appearance of the first COVID-19 cases, the initial measures taken by governments were the closure of borders. Some points were partially opened for the transportation of goods, for the passage of nationals stranded at borders and the return of nationals abroad, and humanitarian flights and convoys. However, they issued health measures at such points to ensure the prevention and isolation of potential cases. From July 2020, governments began easing restrictions at country borders and reopening Points of Entry, in particular international airports and sea ports. although entry was often restricted to select travellers. However, most land border posts remained closed.
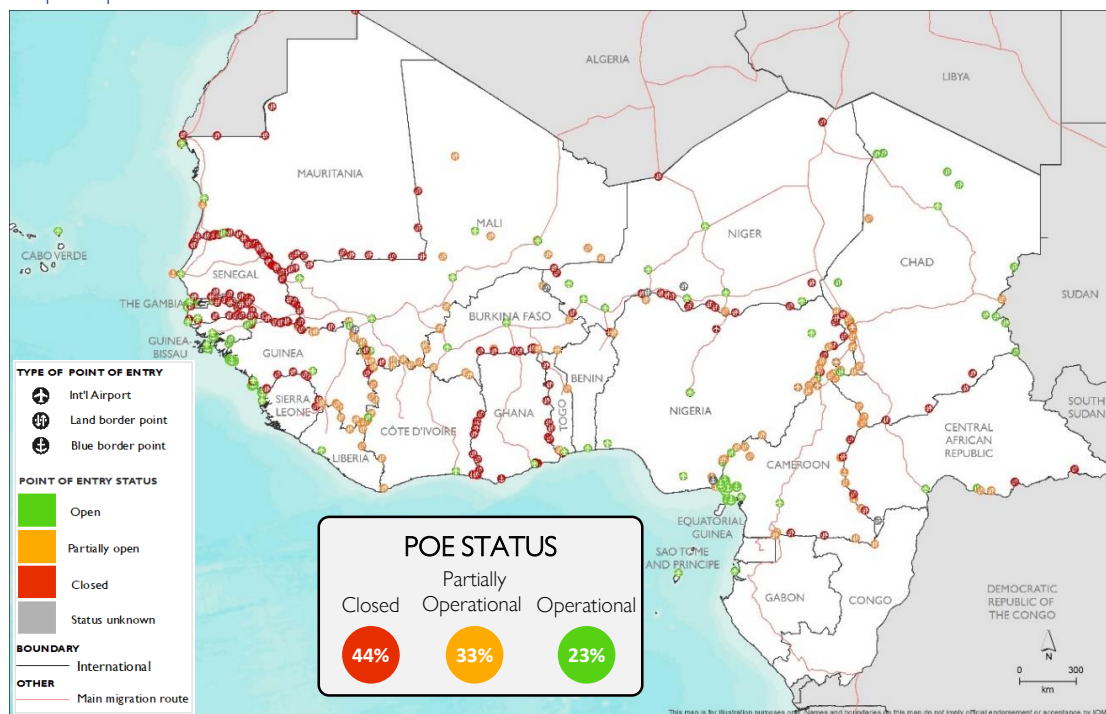
Map 2: Operational Status of PoEs - April 2020

In **April 2020** IOM found that of the assessed PoEs in the region, 60 per cent were reported to be fully shut, closed for both entry and exit while **33 per cent were partially operational** for the transportation of goods, the passage of nationals and residents and humanitarian flights and convoys. Only **7 per cent were reported to be fully operational**, but travellers had to follow basic health measures issued at the points.

Map 3: Operational Status of PoEs – March 2021

In **March 2021**, one year after the first case of COVID-19 was reported in West and Central Africa, 56 per cent of assessed PoEs were either **fully operational (23%) or partially operational (23%)**. The vast majority of airports (91%) and blue points (76%) were fully operational.

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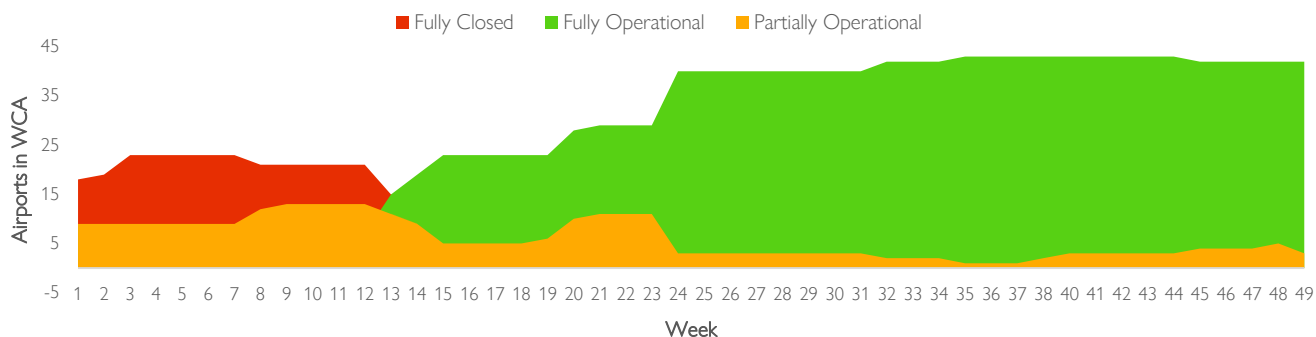
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April 2020 - March 2021

1.   INTERNATIONAL AIRPORTS

From the beginning of the pandemic, countries started implementing restrictions at international airports, including temperature checks and other health and screening measures. In March 2020, when the number of imported cases of COVID-19 in the region started to grow, many countries shut their airports, taking the decision to ban international as well as domestic flights. While some countries completely closed their airports to international flights, others had partial restrictions allowing for some movement via airports under certain conditions including health screening of passengers and other health measures, or only allowing specific flights for the return of nationals and residents as well as humanitarian flights.
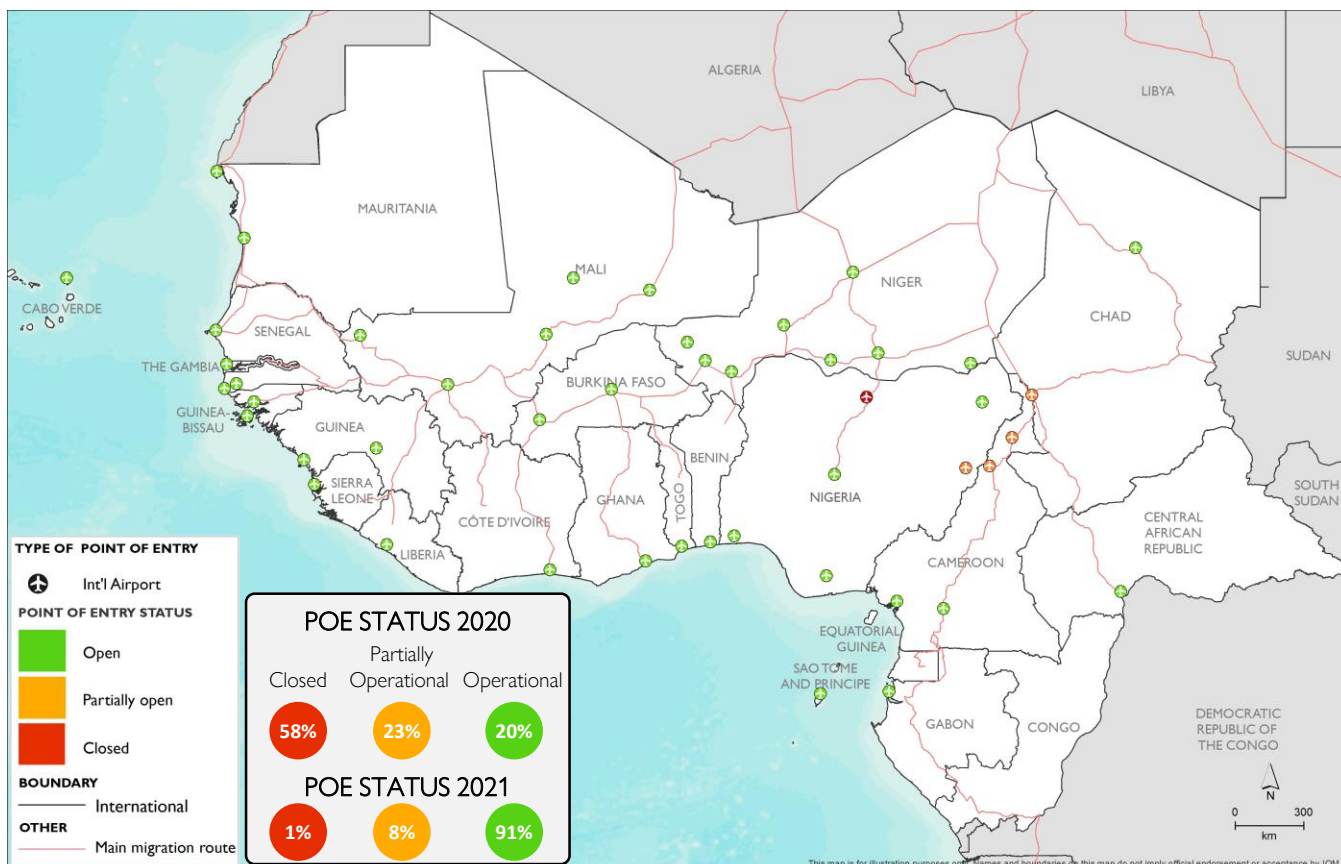
These restrictions remained active until June 2020 in most of the countries across the region. Starting from July 2020 (week 12), most countries in the region reopened their airports to domestic and out-of-country flights, but imposed health measures such as mandatory negative COVID-19 test, mandatory quarantine, filling out of health forms and social distancing for incoming travellers. In addition to these measures, other countries such as Gabon and Senegal, did not allow flights from countries with high incidence of cases. By September 2020, the majority of airports in the region had reopened.

As of March 2021, 91 per cent of airports in West and Central Africa have fully re-opened.

Figure 1: Number of PoE by type of operational status and weeks of assessment

Map 4: Operational status of airports in West and Central Africa – March 2021

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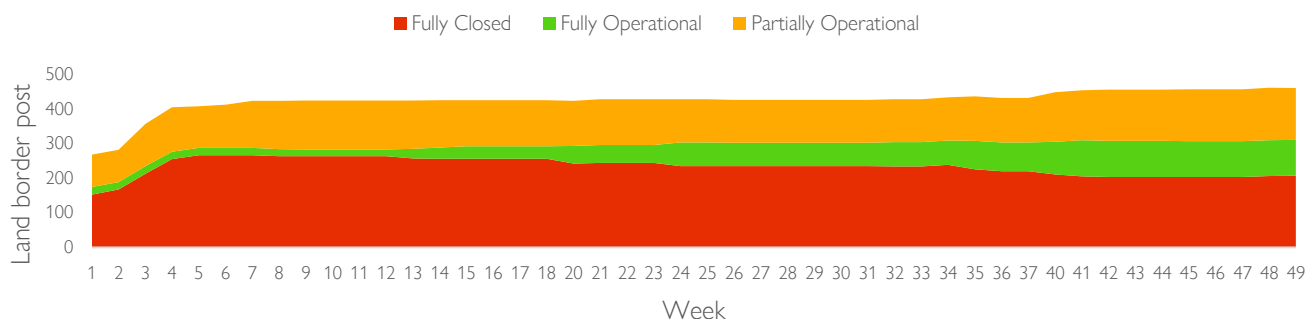**April 2020 - March 2021**

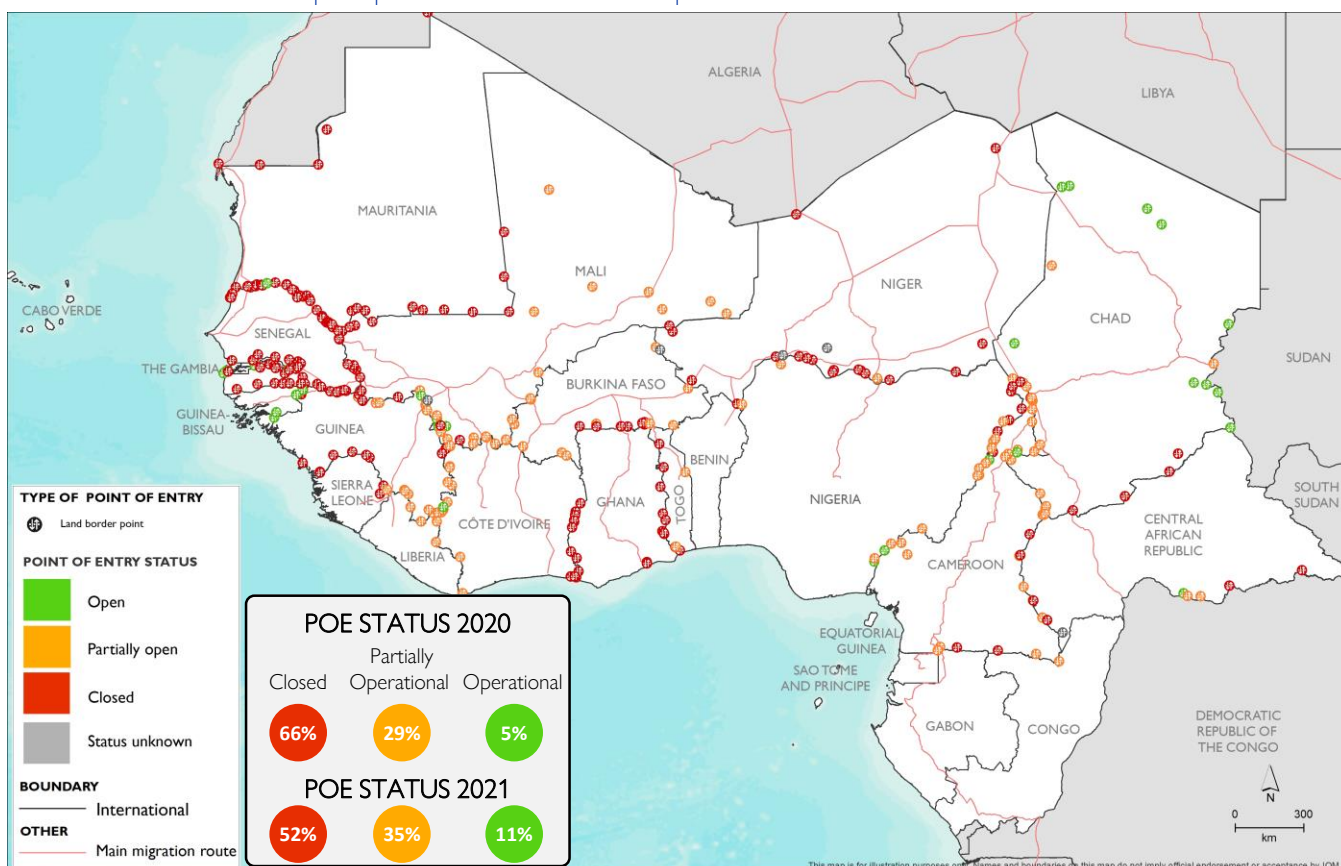## 2.   INTERNATIONAL LAND BORDERS

As for international airports, every country in the region completely closed most land border points, with the exception of strategic entry points or to allow freight transport (particularly to allow the transport of goods to landlocked countries such as Burkina Faso and the Central African Republic). In addition, several countries, with the support of IOM, created humanitarian corridors to allow the safe passage of migrants stranded in third-countries. Finally, some countries concluded agreements for the temporary exceptions to border closures : Chad and Cameroon, for instance, signed an agreement to allow the passage of students to sit the *baccalauréat* (end-of-schooling exam). **Assessments conducted in April 2020 found that 49 per cent of land borders evaluated throughout the West and Central Africa region were completely shut off to all traffic, while 27 per cent were partially open**, only allowing the passage of freight transport, returning nationals or humanitarian convoys. Only 4 per cent of PoE's were fully open to travellers (17% unknown status). This situation generated an estimated 50,000 migrants, as well as 70,000 transhumant herders and 1.5 million cattle left stranded at borders across the region.

A year after the COVID-19 pandemic reached the region West and Central Africa, the majority of land borders across the region remained closed, although controls at border points are looser and border closure measures have been eased. Health measures, including health screening of travellers, setup of isolation wards, the requirement to show a negative COVID-19 test, and installation of handwashing stations, were also put in place at borders. **Assessments conducted in March 2021 identified 52 per cent of land borders evaluated throughout the West and Central Africa region were completely closed, while 35 per cent were partially operationnal. Only 11 per cent of PoE's evaluated were fully operational.**

Figure 2: Number of PoE by type of operational status and weeks of assessment

Map 5: Operational status of land border points in West and Central Africa – March 2021
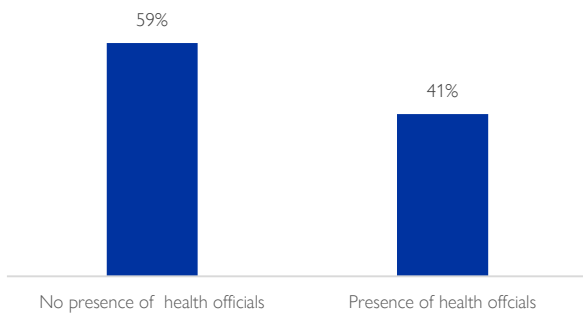
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II.   HEALTH MEASURES PUT IN PLACE AT POINT OF ENTRY'S

The exercice also included an assessment of health measures, health coordination mechanisms and referral systems in place at covered PoEs, collected by interviewing health focal points at each Point of Entry. Assessments were conducted between November 2020 and March 2021, in Cameroon, Côte d'Ivoire, Gambia, Ghana, Guinea, Mali, and Mauritania.

Health official presence at PoEs

The assessment found that the majority of PoEs (59%) in those countries did not have health officials present.

Figure 3: Health officials deployed at PoE

Disposable gloves available at PoEs for staff

Of the PoEs assessed in in Cameroon, Côte d'Ivoire, Gambia, Ghana, Guinea, Mali and Mauritania, less than 50 per cent reported disposable gloves were available (47%) and among those that had access to disposable gloves, 41 per cent reported they were not available in sufficient quantities (mainy in Guinea and Mali).

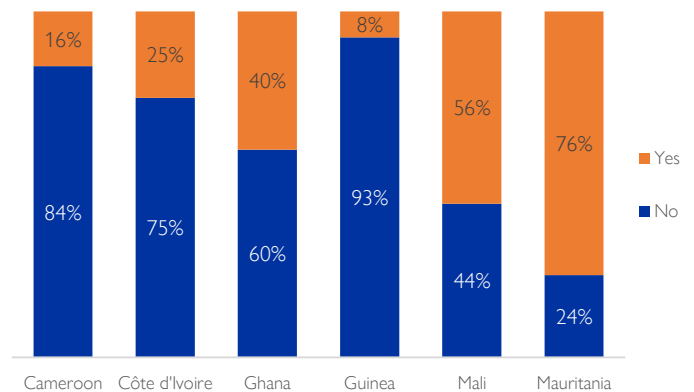Figure 4: Availability of disposable gloves

Surgical masks available at PoEs for staff

The majority of PoEs assessed (58%) had surgical mask available, although in many countries, and especially in Guinea (93%), Cameroon (84%) and Côte d'Ivoire (75%), the number of available masks was not sufficient.

Figure 5: Availlability of surgical masks

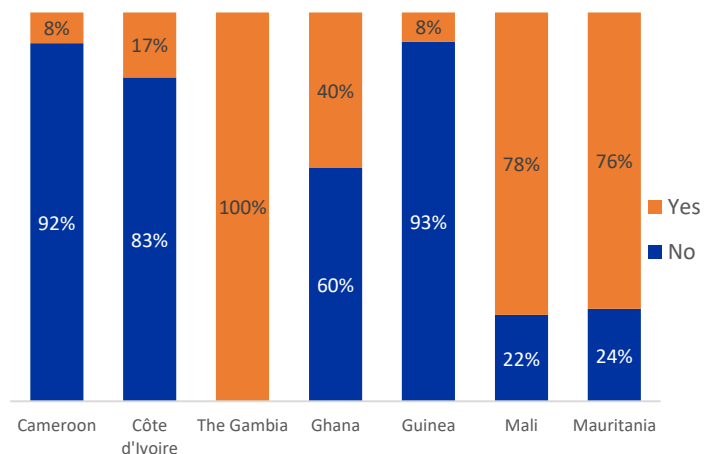Figure 6: Sufficiency of surgical mask supply by country

Thermometers available at PoEs

Unlike the situation with surgical masks, thermometers were largely reported to be available (at 83% of PoEs). However, the supply was not sufficient in Guinea (93%), Cameroon (92%) and Côte d'Ivoire (83%).

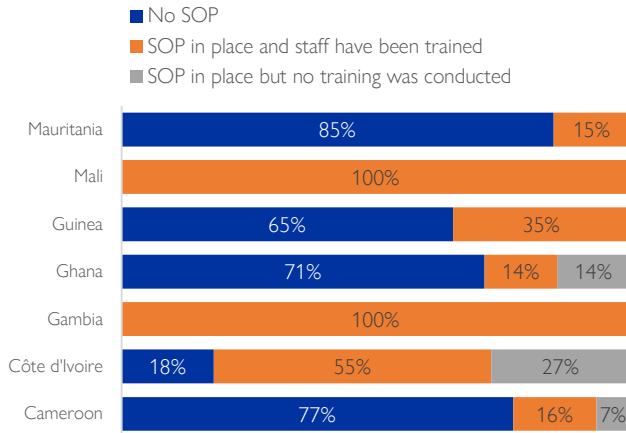Figure 7: availability of thermometers

Figure 8: Sufficient numbers of thermometers by country

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SOPs in place at PoEs

Though 67 per cent of PoEs assessed reported referral systems in place, more than 50 per cent of PoEs did not have Standard Operating Procedure (SOPs) for COVID-19 case detection to fight the spread of COVID-19, notably in Mauritania (85%), Cameroon (77%) and Ghana (71%). However, in Guinea and Mali, 100 per cent of assessed PoEs had SOPs for case detection and staff working at these FMPs had been trained on case detection.
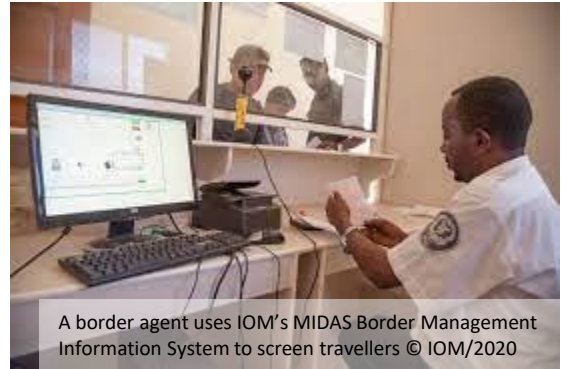
Figure 9: SOPs in place at PoEs, by country

■ No SOP
■ SOP in place and staff have been trained
■ SOP in place but no training was conducted

Country	No SOP	SOP in place and staff trained	SOP in place but no training
Mauritania	85%	15%	
Mali		100%	
Guinea	65%	35%	
Ghana	71%	14%	14%
Gambia		100%	
Côte d'Ivoire	18%	55%	27%
Cameroon	77%	16%	7%

Handwashing stations available at POEs for staff

Like other protection measures, hand washing stations were largely reported to be available at PoEs (70%). Many of them, however, did not have sufficient soap and water at their disposal.

Figure 10: Hand washing station available

No	Yes
30%	70%

A border agent uses IOM's MIDAS Border Management Information System to screen travellers © IOM/2020
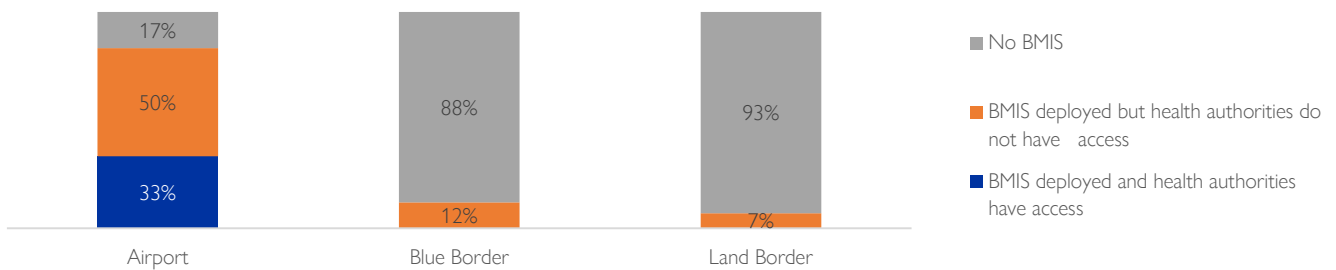
III.   BORDER MANAGEMENT AT POEs

Information system

Border Management Information Systems (BMIS) are electronic, IT-based solutions to border security and control and migration management. BMIS allow border agents to record travellers, collect statistical migration data and conduct processing and screening of passengers. BMIS were available at only a few of assessed PoEs: only 12 per cent of blue borders points and 7 per cent of land borders points were equipped with BMIS and for most of them.
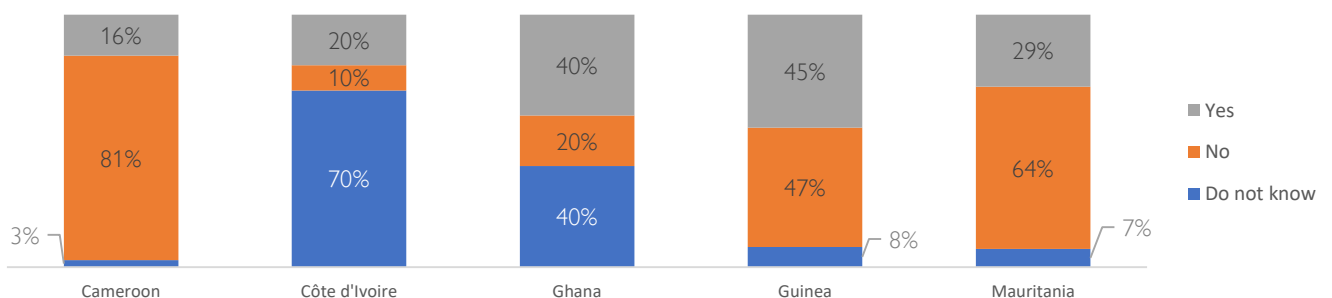
Figure 11: Availability of Border Management Information System, by PoE type

	Airport	Blue Border	Land Border
No BMIS	17%	88%	93%
BMIS deployed but health authorities do not have access	50%	12%	7%
BMIS deployed and health authorities have access	33%		

Plan in place for re-opening

As of March 2021, only 30 per cent of assessed PoEs in Cameroon, Côte d'Ivoire, Ghana, Guinea and Mauritania had plans to reopen, the majority of which were in Guinea (where 45% of PoEs had a plan to reopen) and Ghana (where 40% of PoEs had a plan in place).
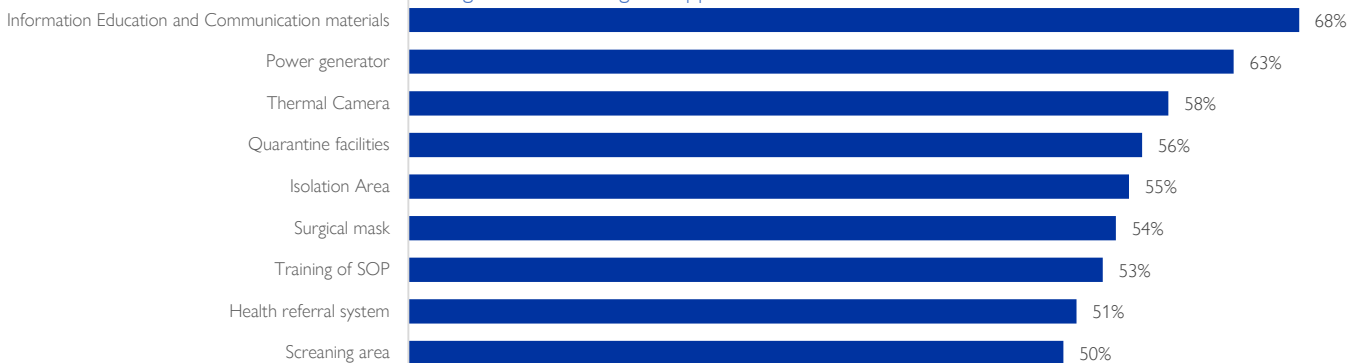
Plan to reopen PoE

	Cameroon	Côte d'Ivoire	Ghana	Guinea	Mauritania
Yes	16%	20%	40%	45%	29%
No	81%	10%	20%	47%	64%
Do not know	3%	70%	40%	8%	7%

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IV. MOST URGENT NEEDS AT POEs

The assessment found that the most urgently needed support needed at PoEs included communication materials (68%), facilities and equipment to detect and isolate potential COVID-19 cases such ad thermal cameras (58%), screening areas (50%) and quarantine facilities (56%), power generators (63%), Personal Protective Equipment to protect health workers such as masks (54%), and training on procedures in place (53%) and referral mechanisms (51%).

Figure 12: Most urgent support needed at POEs

Information Education and Communication materials	68%
Power generator	63%
Thermal Camera	58%
Quarantine facilities	56%
Isolation Area	55%
Surgical mask	54%
Training of SOP	53%
Health referral system	51%
Screaning area	50%

A border control agent verifies a traveller's identification documents © IOM/2020

V. METHODOLOGY

To better understand how COVID-19 affects global mobility, Displacement Tracking Matrix (DTM) has developed a global mobility database mapping the locations, status, and different restrictions of Points of Entry (PoE) by country or territory, globally. These points include airports, land border crossing points, blue border crossing points (including sea, river, and lake ports), internal transit. Data is collected by utilizing DTM's local expertise from IOM offices globally who adhere to a systematic and structured approach to data collection.

Information collected include: (1) Movement restrictions on entry and/or exit (1) closed for entry and exit, (2) closed for entry (3) closed for exit (4) open for commercial traffic only (5) open only to returning nationals and residents (6) open for entry and exit (7) other and (8) unknown) (5) Medical measures applied such as Health Staffing/Medical Personnel, Standard Operating Procedures (SOPs), Risk communication and community engagement (RCCE), Infection prevention and control (IPC).

Data collected by DTM includes information on types of restrictions, measures applied, and the population category affected by such measures. This information is collected for each type of observation point, which includes points of entry, transit points, and areas.
Limitations of this analysis and data collection mechanism are related to the extremely time sensitive nature of the data being collected.

Restrictions, and who they affect, are continually changing, and it is often difficult to collect accurate information in real time. Considering this, all DTM data made available is timestamped in order to reflect the reality of the situation at the specified time. In this report we cover the entire region regardless in the country is or not part of DTM. This report does not include the analysis of internal transit locations.

Humanitarian Aid
and Civil Protection