The current COVID-19 outbreak has affected global mobility in the form of various travel disruptions, restrictions and bans. Many countries have taken measures to restrict or bar population movements, in addition to border closures, in order to stem the spread of the virus. In Chad, since 16 March 2020 (prior to the identification of the first confirmed case, on 19 March 2020), the Republic of Chad has taken **measures to limit and contain the spread of COVID-19**. Most notably, the government **closed all air and land borders, as well as schools and places of worship**. **Strict limitations on internal mobility** were also imposed, including a curfew in four Provinces and the capital city N'Djamena, a ban on entries and exits to and from the capitals of Provinces and the city of N'Djamena, and a limitation of the number of passengers onboard private vehicles. In addition, the government declared a state of public health emergency on 25 April 2020. In this context, **IOM has developed a tool to better understand how these restrictions are affecting mobility in the country** and to guide authorities' and other partners' pandemic preparedness and response interventions at points of entry and transit. This tool consists in **mapping the main Points of Entry (PoE) and transit points in the country** and **collecting their operational status**. The tool also takes stock of the **restrictions and preventive measures in place** and the **Risk Communication and Community Engagement (RCCE) activities** implemented at these points. This report presents key results from data collection conducted at **19 official PoE and 10 points of transit***.

METHODOLOGY

During the months of April and May 2020, data was collected through key informant interviews, in the field (for 15 points) or by phone (14 points).

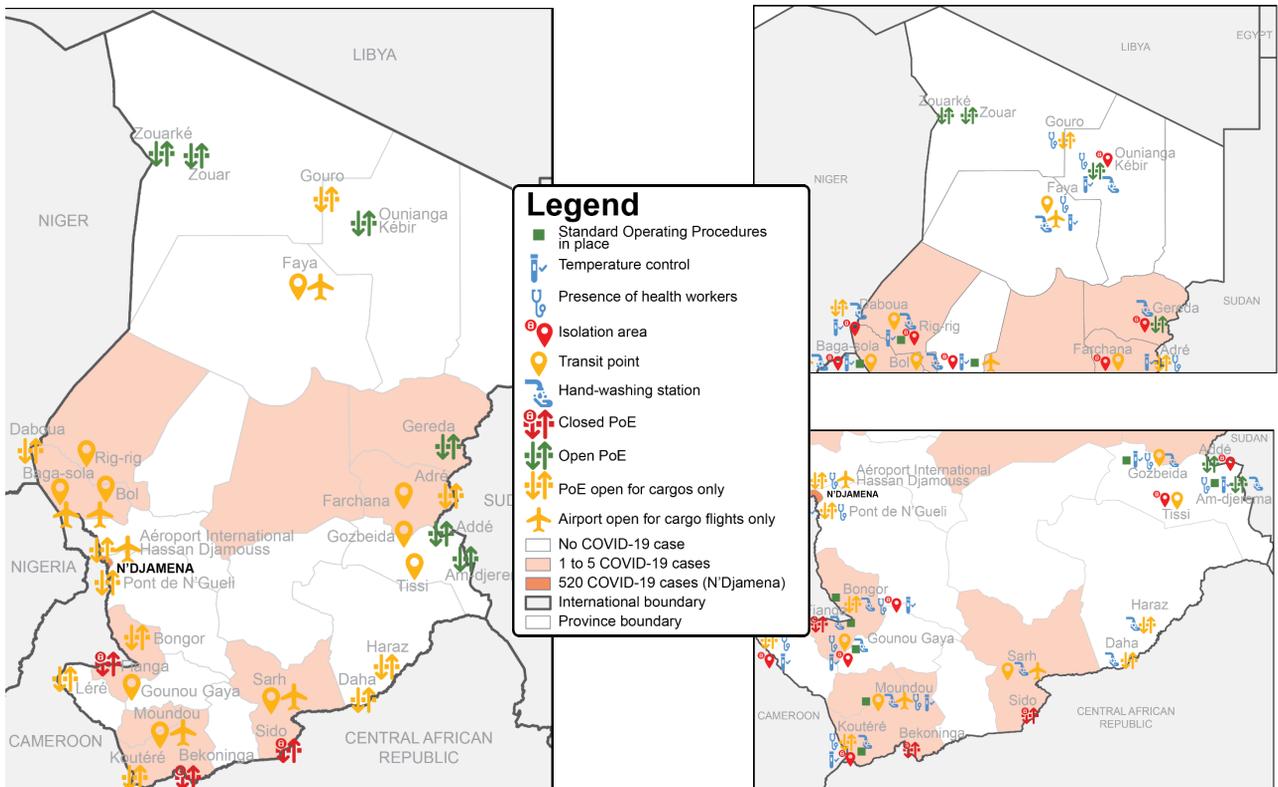**29** points assessed

6 airports

23 land border points

STATUS OF ASSESSED POINTS AND CROSSBORDER MOBILITY

19 Points of Entry

6 open

10 partially open

3 closed

10 transit points

Out of the **29 points assessed by IOM, 19 are Points of Entry (PoE) and 10 are points of transit**. Out of the 19 PoE, **10 were partially open to enable freight transport, as well as the entry of Chadian nationals coming from neighbouring countries**. It should be kept in mind that even at the three PoE that were completely closed, Chadian nationals were still able to cross the border to enter the country. They have been placed in quarantine for 14 days at the PoE. This has been the case for thousands of Chadian students coming from Cameroon (see the COVID-19 Event Tracking Tool report #5), and hundreds of individuals who have been deported from Libya (see this Emergency Tracking Tool report). However, a number of individuals, notably in Mayo-Kebbi Est Province, were reported to leave their quarantine location before the end of the required two-week quarantine period, due to the lack of support to meet their daily needs. Furthermore, six PoE were reported to remain open.

MAPS : POINTS OF ENTRY AND TRANSIT ASSESSED IN CHAD

Legend
- Standard Operating Procedures in place
- Temperature control
- Presence of health workers
- Isolation area
- Transit point
- Hand-washing station
- Closed PoE
- Open PoE
- PoE open for cargos only
- Airport open for cargo flights only
- No COVID-19 case
- 1 to 5 COVID-19 cases
- 520 COVID-19 cases (N'Djamena)
- International boundary
- Province boundary

The maps included in this report are for illustration purposes only. The depiction and use of boundaries, geographic names and related data shown on these maps are not warranted to be error free nor do they imply judgment on the legal status of any territory, or any endorsement or acceptance of such boundaries by IOM.

* For this report, "Points of Entry" refers to places located on a land border or international airports officially designated by the legal framework of the State as official entry to / exit from the State, with border control points – see the IOM Glossary on Migration for more information. As for "points of transit," they refer to points of interest where important and regular flows of travellers are observed.

INTERNATIONAL ORGANIZATION FOR MIGRATION
Websites : https://migration.iom.int
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International Organization for Migration (IOM)
The UN Migration Agency

When quoting, paraphrasing, or in any other way using the information mentioned in this report, the source needs to be stated appropriately as follows: "Source: The International Organization for Migration [Month, Year], Displacement Tracking Matrix (DTM)"

DTM

PUBLIC HEALTH MEASURES IN PLACE AT THE ASSESSED POINTS OF ENTRY AND TRANSIT

In addition to capturing the operational status and identifying the types of restrictions and measures in place at each PoE or transit point, the assessment seeks to identify what (if any) **preventive health measures** have been set up at these points since the start of the epidemic. In particular, the assessment seeks to identify:
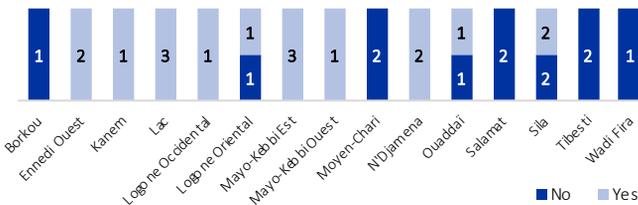
- The presence of **health workers** at the point of entry or transit
- The implementation of **Standard Operating Procedures** (SOPs) for managing flows, occupational health and safety of staff, health screening processes, as well as the registration, notification, management and referral of ill travellers
- The implementation of **Risk Communication and Community Engagement** (RCCE) activities
- The installation of **hand-washing stations**
- The implementation of a **health screening process**

PRESENCE OF HEALTH WORKERS

Health workers were present at almost 60 per cent of the assessed points (17 out of 29). These may include workers from the Ministry of Public Health or local health authority staff. However, **health workers have been trained on Standard Operating Procedures (SOPs) at less than a quarter of the assessed points (7 out of 29)**.
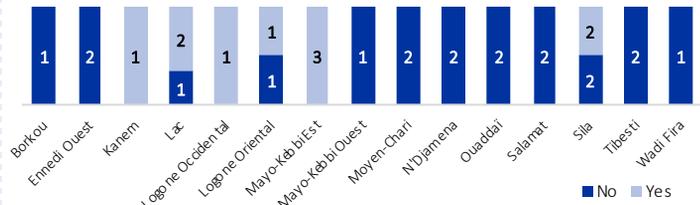
Graph 1: Presence of health workers at the assessed points (by province)

STANDARD OPERATING PROCEDURES (SOPs)

More than 65 per cent of the assessed points of entry and transit (19 out of 29) did not have SOPs in place for managing flows or for the detection of ill travellers. Even at points where SOPs were in place, in most cases, they were implemented without being written. Health staff on site have been trained on these SOPs in relation to COVID-19 at 8 out of the 10 points which had SOPs in place.
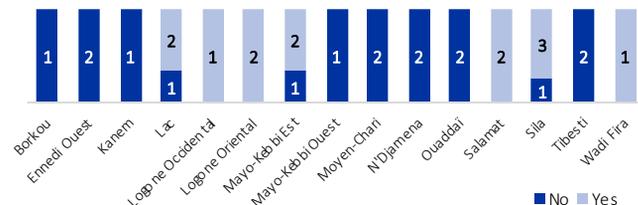
Graph 2: SOPs put in place at assessed points (by province)

RISK COMMUNICATION AND COMMUNITY ENGAGEMENT

Information about COVID-19 was provided at 13 points of entry and transit (out of 29), which represents 45 per cent of the assessed points. In most cases, this information was shared through verbal announcements on COVID-19 risks and prevention, and to a lesser extent via posters. At these 13 points, travellers were also notified about what to do if they develop COVID-19 symptoms.
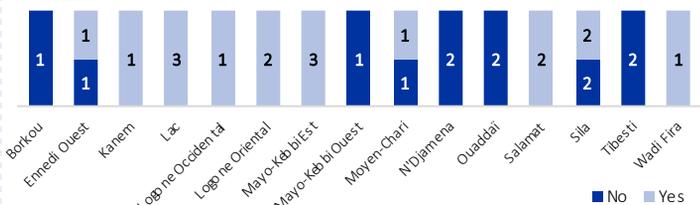
Graph 3: COVID-19 information sharing at the assessed points (by province)

INFECTION PREVENTION AND CONTROL

There were reportedly hand-washing stations available at 17 of the 29 assessed PoE and transit points (59%). However, water availability remains a challenge at a number of these points. For instance, a hand-washing station was installed at Daboua, but would still often lack water. Water availability is even more challenging at the points located in the desert in northern Chad, notably in Tibesti Province.

Graph 4: Availability of hand-washing stations at the assessed points (by province)

HEALTH SCREENING PROCESS AND REFERRAL SYSTEMS

Slightly more than half (15 out of 29) of the assessed points of entry and transit have set up a health screening process for travellers. At these points, the temperature of travellers was checked with laser and non-contact thermometers. In addition, at 10 points (out of the 15 points with a health screening process), health declaration forms were also reportedly collected, 8 of which had installed infrastructure (sheds) to ensure the safety of screeners. Furthermore, personal protective equipment (masks and gloves) was available for and worn by screeners at the 15 points, where a health screening process was implemented. However, the quantities of medical supplies were very limited. At Léré for instance, only one laser and non-contact thermometer was reported available.

Operational referral systems were in place at 14 out of the 29 PoE and transit points assessed. These systems allow for the referral of travellers with high fever to quarantine centres.

NEXT STEPS

Continue conducting assessments at points of entry and transit and strengthen data collection on flows of travellers who pass through these points

In coordination with the national monitoring committee, identify the points where a health surveillance system and preventive measures need to be put in place or reinforced

In coordination with Chadian authorities and other partners, strengthen assistance to individuals placed in quarantine at PoE

For further explanations on the methodology, please refer to the Methodology Framework, available on the following link: https://migration.iom.int/

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