# COVID-19: IMPLICATIONS OF CROSS-BORDER TRAFFIC IN EASTERN AND SOUTHERN AFRICA

## WHY IS CROSS-BORDER TRAFFIC A CONCERN?

Cross-border traffic is a significant factor in COVID-19 transmission in Eastern and Southern Africa, and most countries have restricted entry – some even before the first local cases were identified. However, the economy and the social fabric of the region are dependent on the flow of goods and people, and the impact of closures may be worse than the impact of the pandemic.

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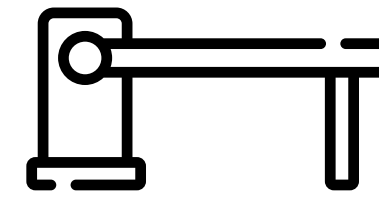
Cross-border travel is essential to life in the Eastern and Southern Africa region. A wide range of people cross borders every day for economic, health care and family reasons.
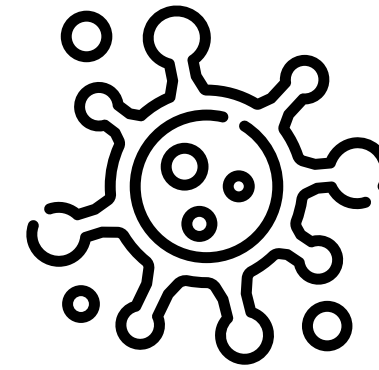
Many COVID-19 cases have been confirmed among cross-border travellers and their contacts throughout the region.
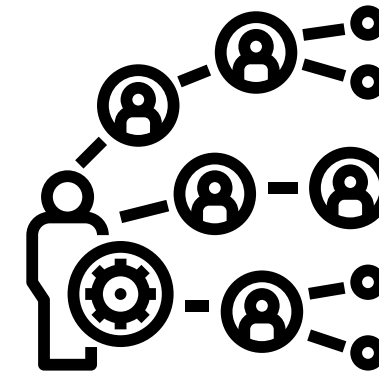
Cross-border travellers interact with others at their destinations, along their travel routes, and on their return, increasing the risk of spread between and within countries. Sex workers, border agents and service providers are at high risk.
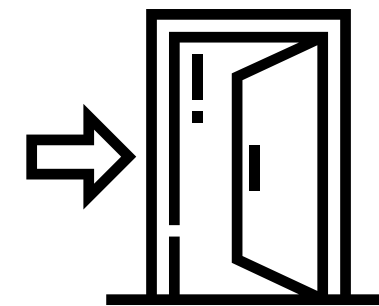
Most borders have been closed to all but essential traffic to prevent transmission of COVID-19, but restrictions are being lifted due to economic and social consequences.
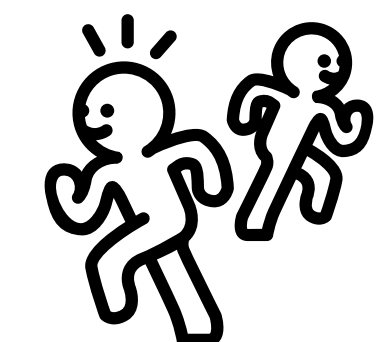
Crossing at uncontrolled and unmonitored sections of borders is common in the region. For example, Botswana has reported many Zimbabweans entering at unauthorised crossing points.

MANAGING CROSS-BORDER TRANSMISSION

Countries in the Eastern and Southern Africa region have implemented measures, such as testing and tracing, to manage cross-border transmission of COVID-19, while also trying to limit their impact on movement of trade.
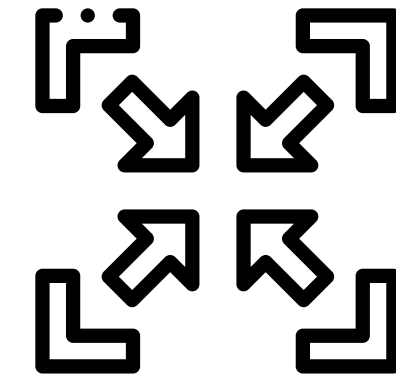
Government and INGO working groups have developed procedures to minimise the risk of cross-border transmission. These include testing and tracing protocols and hygiene guidelines.
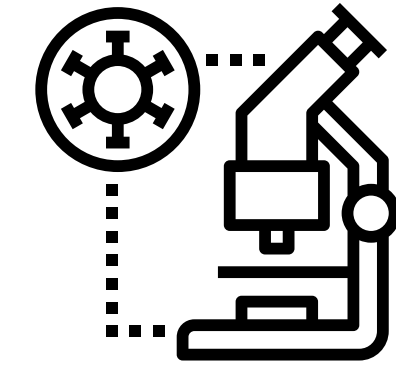
COVID-19 testing is being conducted at most border crossings in the region. To reduce delays in cross-border truck traffic, several countries have cooperated to establish a programme to test and pre-certify truck drivers as COVID-negative.
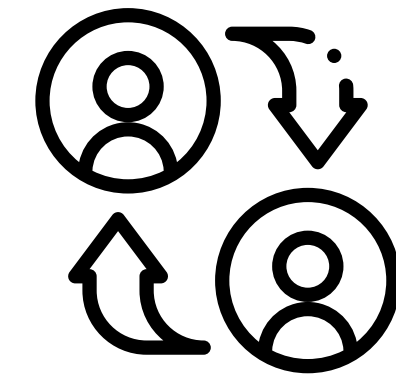
Governments are working to trace contacts of confirmed cases. For example, South Africa has repurposed tracing mechanisms that had been developed for tuberculosis outbreaks and has developed new mobile geomapping technology.

Even where rates of testing and contact tracing are high, as in South Africa and Zimbabwe, inadequate arrangements to support self-isolation and state-mandated quarantine erode any gains from contact tracing.

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## WHAT CAN AFFECT CROSS-BORDER MANAGEMENT?

Effectiveness of COVID-19 measures directed at communities may be influenced by a number of issues, including knowledge and perceptions, attitudes to mitigation measures, state-citizen relations and economic factors.
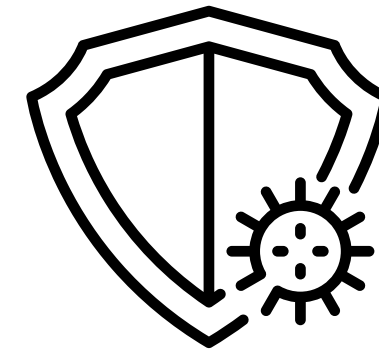
Levels of knowledge about COVID-19 and the risk of contracting it can affect response to containment measures and may vary by population groups.
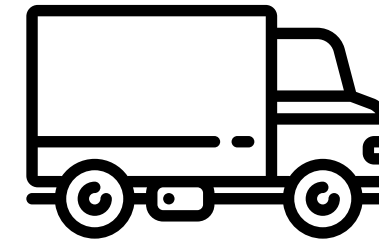
Certain groups, such as truck drivers, may experience stigma because they are believed to be responsible for cross-border spread of COVID-19. This may make them less likely to engage with health systems.
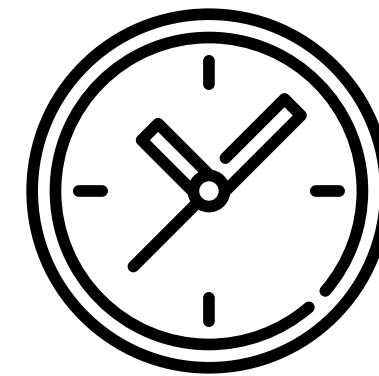
Few governments have invested in the necessary infrastructure, supplies or personnel at borders. Truck drivers at border crossings in east African countries have reported waiting for 5-10 days to receive clearance to cross.
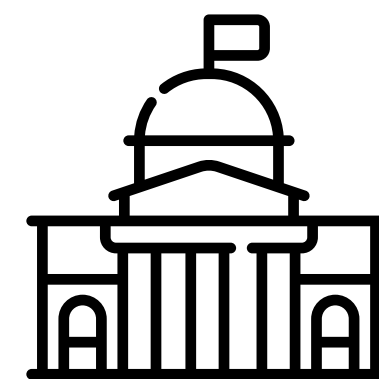
Although most governments are working together there are still tensions in the region, particularly between Tanzania and its neighbours. Cooperation between and among governments and other response partners is important to prevent transmission across borders.
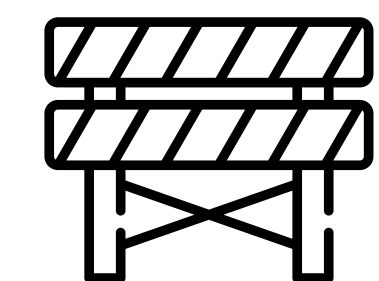
Communities may resist measures to control transmission, including border closures and restrictions, because of their impact on livelihoods. Ugandan farm workers, for example, have been unable to cross the border to work their land in DRC.

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# CONSIDERATIONS FOR COMMUNITY ENGAGEMENT

Risk communication and community engagement efforts need to be tailored to the specifics of the border context: cultures, languages, levels of literacy and trust in authorities.
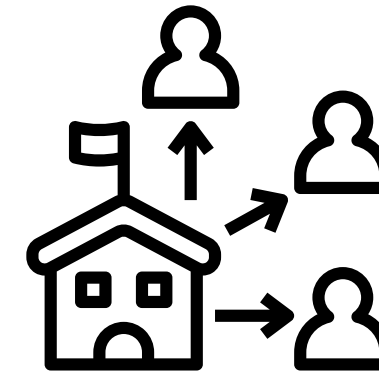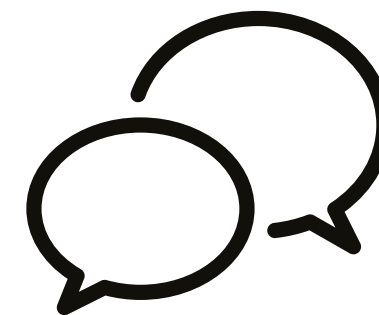
Community engagement efforts should aim to reach people at all relevant locations, including formal and informal entry points and along transport routes.
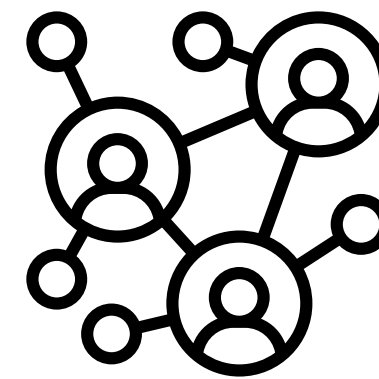
Engagement should occur with all affected populations, including drivers, migrants, traders, and members of border communities. Marginalised populations should be specifically included in outreach efforts (e.g. women, children, people with disabilities, refugees, migrants, and the elderly).
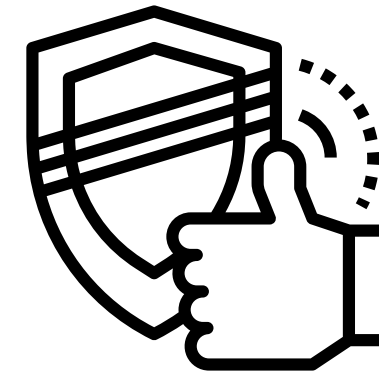
Trusted community members, such as religious and cultural authorities, leaders of trade groups and representatives of vulnerable and marginalised groups should be consulted about effective communication approaches.

Two-way communication is essential so that community concerns are incorporated into engagement efforts. The focus should be on mutual sharing of information rather than "messaging."

A variety of communication methods and channels should be used, including person-to-person and technology-based approaches. Communication should take place in local languages and accessible formats.