

The COVID-19 outbreak has affected global mobility in the form of various travel disruptions, restrictions and bans. While many of the mobility restriction measures adopted in March 2020 by national authorities to stem the spread of the coronavirus have been eased or lifted entirely, some land border crossing points continue to be shut off to traffic and are only partially operational to enable trade. However, given the recent rise in the number of cases, new mobility restriction measures could still be implemented by the Government. In order to better understand how these restrictions are affecting mobility in the country and how Points of Entry (PoEs) towards Cameroon are prepared to face sanitary challenges, IOM developed a **mobility database mapping the location, status and different restrictions imposed at key PoEs**. The purpose of this assessment is to help national authorities, United Nations agencies, organizations and other key stakeholders in identifying and developing adequate pandemic preparedness and response interventions at PoEs. This report presents data on public health and border management measures put in place or needs at **71 PoE across the country**.

ASSESSMENT METHODOLOGY

Between December 2020 and February 2021, data was collected at **71 PoEs** across nine regions of the country through phone interviews conducted with a broad number of key informants at health border points (PSF) and border management posts.

Two questionnaires were used to collect information, one on **border management (completed in 64/71 PoEs)**, used for most analysis included in this dashboard, and one on **public health (completed in 35/71 PoEs)**.

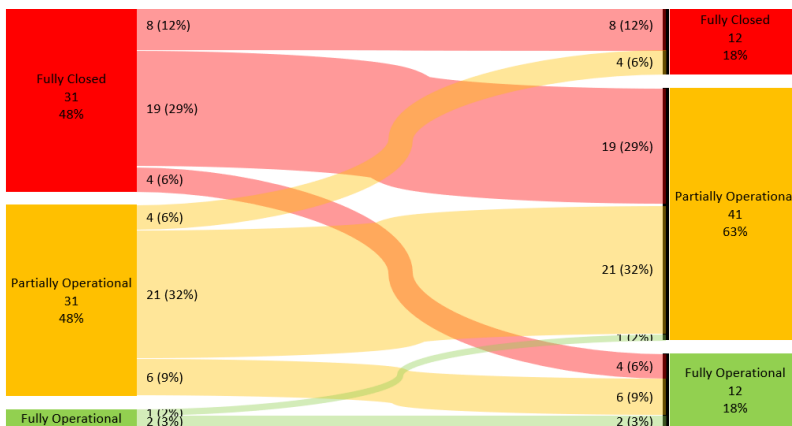


STATUS OF POES

As of February 2021, 14 out of the 71 assessed PoEs (20%) are completely open to traffic. This contrasts with assessments conducted in April 2020, at the height of mobility restrictions in the country, when only 5 per cent of PoEs were fully open. Nevertheless, 12 PoEs continue to be shut off to traffic (as opposed to 31 in April 2020). Almost two thirds of PoEs (45) remain partially open, mostly to allow transport of goods to landlocked neighbouring countries, including the Central African Republic (CAR) and Chad (this was the case for 31 PoEs in April 2020).

NB: Figure 1 only takes into account the 65 initially identified PoEs.

Figure 1: operational status of assessed PoEs in April 2020 (left) and February 2021 (right)



PLANS FOR REOPENING

The recent rise in the number of cases in Cameroon are sparking fears of a wider epidemic crisis in the country and might lead to the reinstatement of mobility restriction measures at key PoEs.

Of the 12 PoEs still closed, a **plan to reopen is coordinated** between actors present on the border for 8 PoEs (67% of closed PoEs), all of them in the Far North (4), North (2) and South West (2) regions. No date for resuming operations has been set at closed PoEs.



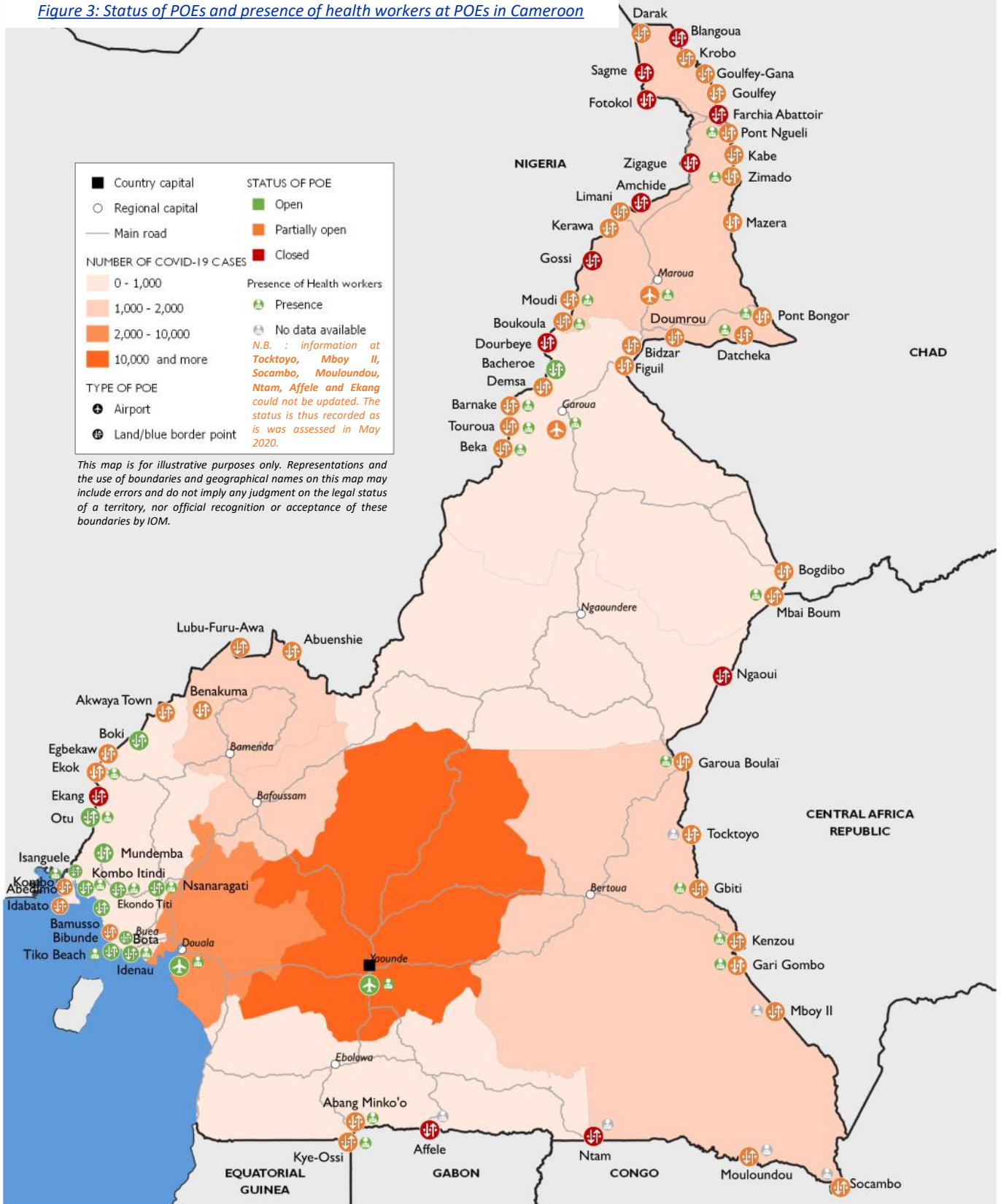
PRIMARY NEEDS

Figure 2: First three priority needs identified by region

Priority Need	Adamawa (1 PoE assessed)	Centre (1 PoE assessed)	East (4 PoEs assessed)	Far North (25 PoEs assessed)	North (11 PoEs assessed)	North-West (3 PoEs assessed)	South (2 PoEs assessed)	South-West (16 PoEs assessed)
1 Disposable gloves								
2 Border management policy and coordination								
3 Handheld infrared thermometer	Training on the correct use of PPE	Hand washing stations	Information and Media	Hand washing stations	Detention facilities	Screening area	Disposable gloves	Thermal cameras
4 Surgical masks	Thermal camera	Face shields	Border Management Information System (BMIS)	Training on the correct use of PPE	Training on the correct use of PPE	Isolation area	Handwashing stations	Quarantine facilities
5 Face shields								
6 Training on the correct use of PPE	Transportation to facilities outside PoE	Disposable gloves	Transportation to facilities outside PoE	Disposable gloves	Disposable gloves	Health referral system	Transportation to facilities outside PoE	Handheld infrared thermometer

NB: To calculate primary needs at PoEs, each item was classified from 0 to 5 according to the level of need. Disposable gloves got the highest score out of 31 possibilities.

Figure 3: Status of POEs and presence of health workers at POEs in Cameroon



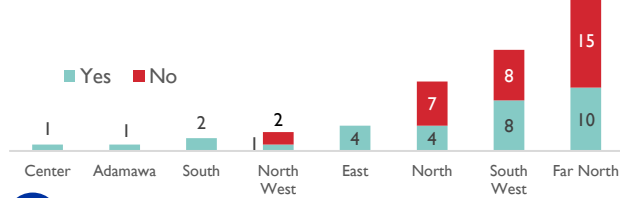
PUBLIC HEALTH MEASURES IN PLACE AT THE ASSESSED POINTS OF ENTRY

Apart from capturing the operational status and identifying the types of restrictions / measures in place at each PoE, the assessment sought to identify what (if any) **preventive health measures** have been set up at these points since the start of the epidemic, including the presence of health workers; coordination mechanisms; standard operating procedures (SOPs); health screening and referral system mechanisms; and essential equipment for infection prevention and control.

PRESENCE OF HEALTH WORKERS

Health workers are present at less than half of PoEs (48%, 33 out of 64 assessed PoEs), although the share of PoEs with health workers present is higher than the 32 per cent identified in April 2020. Among the 59 fully/partially operational PoEs, 26 have no health workers at the border and no information is available for 5 of them. In both the Far North and the North regions, a little more than a third of PoEs (36%) have health workers present.

Figure 4: presence of health workers at assessed PoEs


COORDINATION

The main authority in charge of coordinating COVID-19 response activities is the border police (at 40 PoEs, or 63% of PoEs), followed by the military (30%), health authorities (27%) and customs (27%).

A task force to coordinate public health response has been set in place at 89 per cent of PoEs (57 PoEs). The primary coordinating authority can be the border police (33%) or health authorities (21%).

REFERRAL SYSTEMS

Referral systems for suspect COVID-19 cases are in place at 19 PoEs (30%), generally put in place by health authorities (at 10 PoEs). At three-quarters of PoEs (74%), there was **no quarantine facility** for COVID-19 cases in the vicinity of the PoE, with quarantine areas located further away. Most quarantine facilities available near PoEs are run by the government (9 out of 14, or 64% of quarantine areas).

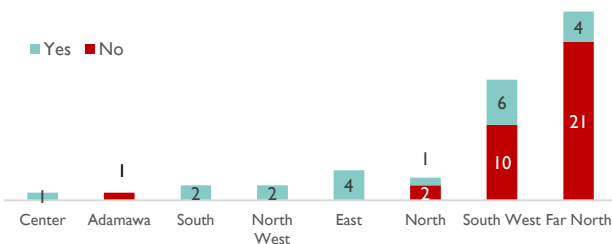
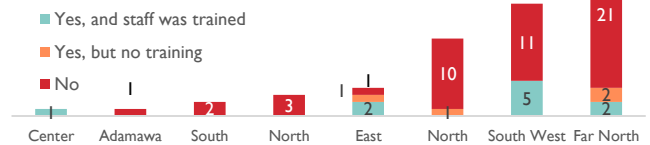


Figure 7: referral system at assessed PoEs

STANDARD OPERATING PROCEDURES

Almost three-quarters (74%) of assessed PoE **do not have SOPs** in place to manage flows and detect ill travellers. This figure has not changed since April 2020. Proportions of PoEs without SOPs are highest in the North (91%) and Far North (76%) regions. When SOPs are in place, the majority of staff on site have been trained on these SOPs. Among the 59 fully/partially operational PoEs, 39 have no SOPs in place and no information is available for 5 of them.

Figure 5: SOPs developed and put in place at assessed PoE

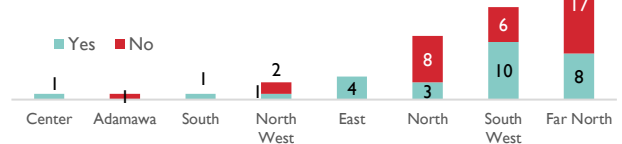


Most PoEs assessed with the health questionnaire (17 out of 35) do not have any public health contingency plan. The situation is particularly worrisome in the South West region, where no PoE has defined a contingency plan.

INFECTION PREVENTION AND CONTROL

Surgical masks are available at 29 PoEs, representing less than half of PoEs (45%). Notably, only 32 per cent of PoEs in the Far North and 27 per cent of PoEs in North Region have surgical masks available. However, 84 per cent of PoEs indicate not having sufficient masks available or no masks at all.

Figure 6: Surgical masks available at assessed PoEs



Similar to the situation in April 2020, half of PoEs (31 PoEs, or 49%) have handwashing stations installed. As for surgical masks, only a small proportion of PoEs in the Far North (20%) and North (27%) regions have handwashing stations available, while every PoE in North West, East, South West Regions have handwashing stations for use. However, the number of stations is considered insufficient in 84 per cent of PoEs.

Finally, 38 per cent of PoEs have handheld thermometers, but only 24 per cent of PoEs in the Far North and 36 per cent in North region. An overwhelming number of PoEs (92%) reported not having enough thermometers.

For all three items, training on use had been given at between 58 per cent and 75 per cent of PoEs in possession of the equipment.

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