

TRADE FACILITATION, PUBLIC HEALTH, AND IMMIGRATION SURVEY STUDY

Preparedness and Response Capacity to COVID- 19/Infectious
Disease at Selected Points of Entry of the West African
Growth Ring Corridors

Data Collection and Analysis

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ACRONYMS AND ABBREVIATIONS

AEO	Authorized Economic Operator
ANER	National Intelligence Agency - Agence Nationale de Renseignement
BAE	Customs clearance certificate - Bon à enlever
BMIS	Border Management Information System
СВС	Burkina Shippers' Council - Conseil Burkinabe des Chargeurs
DUT	Unique Transportation Document - Document Unique de Transport
FENACOFBVI-CI	National Federation of Livestock-Meat Traders - Fédération Nationale des Commerçants de Bétail (Viande de Côte d'Ivoire)
ECOWAS	Economic Community of West African States
GUCE	Single Window for Foreign Trade - Guichet Unique pour le Commerce à l'Extérieur
IBM	Immigration and Border Management
ICUMS	Integrated Customs System
IEC	Information, Education and Communication
IMF	International Monetary Fund
IOM	International Organization for Migration
JBP ¹	Joint Border Post
JICA	Japanese International Cooperation Agency
MIDAS	Migration Information and Data Analysis System
OCTRIB	Central Office for the Repression of Illicit Drug Traffic and Laundering - Office Centrale de Répression du Traffic Illicite des Drogues et du Blanchiment
OIC	Côte d'Ivoire Shippers' Council - Office Ivoirien des Chargeurs
OSBP	One Stop Border Post
PISCES	Personal Identification Secure Comparison and Evaluation System
PoE	Point of entry
PPE	Personal protective equipment
RCCE	Risk Communication and Community Engagement
SBEE	Benin Electricity Company - Société Beninoise d'Énergie Électrique
SEGUB	Benin One-Stop-Shop Operating Company - Société d'Exploitation du Guichet Unique du Bénin
SICOSAV	Sanitary and Veterinary Inspection and Control Service - Service d'Inspection et de Contrôle Sanitaire et Vétérinaire
SOP	Standard Operating Procedures

[.]

¹ The term JBP is mainly used in West Africa to describe One Stop Border Posts (OSBP)

EXECUTIVE SUMMARY

This report presents findings from three (3) surveys of more than 300 public and private stakeholders who work daily at six (6) borders on the West Africa Growth Ring Corridors: Abidjan-Lagos, Abidjan-Ouagadougou, Accra-Ouagadougou, and Lomé-Ouagadougou. The surveyed stakeholders included personnel from government agencies such as Customs, Immigration, Police, Health, Phytosanitary, Fisheries, and Bureau of Standards, and stakeholders representing the private sector such as traders, truck drivers, and freight forwarders. The information and insights provided cover border operations related to health, immigration, and trade facilitation, and in particular border operations related to COVID-19 pandemic response measures.

The survey findings indicate that physical infrastructure and soft infrastructure at the border crossing points suffer a variety of deficiencies. Roads, bridges, parking areas, hygienic facilities, and workspaces need repair or renovation, IT equipment is insufficient and Internet connectivity is often sporadic and weak. Mechanisms to improve coordination among and between the various services at the border installations and across the borders are not used to their full potential: although relationships among and between agencies at the borders and across the borders were described as good, only a few meetings are actually held and they are scheduled on an irregular basis. Difficulties vary according to borders, as respondents indicated that physical infrastructure, including roads, bridges, and facilities they use daily (offices), are often in poor condition. Many borders lack communication materials to ensure that traders and other stakeholders using the border fully understand the procedures to follow to move their goods. Many operations are completed manually as automation is used inconsistently depending on the borders. Some necessary equipment to implement trade rules and regulations, such as weighbridges and scanners, is sometimes dysfunctional or unavailable. Respondents also indicated that the cooperation and collaboration between and among various stakeholders, public or private, needs improvement at several border crossing points.

Respondents generally asserted that the border post they were using or working at, had not benefited from much assistance from development partners. They provided a list of issues that should be addressed to improve overall operations at their border crossing points.

COVID-19 significantly affected border operations as governments closed borders following the recommendation of ECOWAS in March 2020. Although most borders reopened in January 2022, trade activities dropped significantly, and people movements virtually stopped. COVID-19 response training was provided to border personnel along with personal protective equipment. Travellers were screened for illness symptom detection and information on the disease was posted at border posts. The quick reaction to the pandemic by agencies should be highlighted and much credit goes to the border personnel for implementing a variety of measures – in a very short time – to protect public health. However, the pandemic highlighted the deficiencies at the borders such as the lack of means of transportation to take travellers showing symptoms to health facilities and the lack of adequate rooms or areas to isolate people with COVID-19 (confirmed or suspected cases).

The surveys reveal that border operations could be improved at many levels. All border posts have physical infrastructure deficiencies: for example, facilities for offices and lodging are limited and roads and bridges are often in poor condition. The structure of the Côte d'Ivoire-Burkina Faso border (on the Abidjan-Ouagadougou corridor) is the perfect example of the inadequacy of physical infrastructure in the region, as the border control processes are spread across four localities. Regarding "soft" infrastructure at border posts, they are also deficient, particularly in terms of cross-border coordination and cooperation. Border personnel often work in silos and their computer systems are usually not connected to the Internet and/or to other countries' systems. Many expressed the need for training and for better

IT equipment. Additionally, equipment is inconsistently available to implement risk management activities – cargo scanners, X-ray machines, etc. are often unavailable. As for weighbridges: most border posts do not have weighbridges, and when they do, they are not functional.

While COVID-19 response appears to have been robust, the provided PPE was insufficient and personnel said more communication materials were needed. More space to isolate people with confirmed or suspected cases is needed, as well as specific software applications to ensure easier tracking of travellers infected with COVID-19. The implementation of various public health measures (i.e., screening of travellers) in response to the pandemic increased crossing delays at some border posts, but not all; this was probably because although the measures lengthened the crossing time, there were fewer people and trucks crossing the borders. If the measures are maintained, however, it is inevitable that the time to cross borders will increase, perhaps substantially.

Borders are complex intersections, requiring the sharing of information such as cargo invoices and immigration papers, as well as physical inspections of trucks and their cargoes. Multiple stakeholder groups are involved, representing a variety of interests. Inevitably, problems arise for specific shipments, vehicles or persons. Coupled with physical problems or infrastructural issues, borders can pose a significant challenge to economic growth and development in West Africa. Tackling these problems, however, would improve and increase trade in the region, to the benefit of businesses, government, and citizens. Improving the operations at the borders would decrease the delays in the movement of people, goods, and vehicles that constrain economic growth in the region.

CHAPTER 1 INTRODUCTION

The COVID-19 pandemic resulted in the West African region facing a number of negative impacts on trade, immigration, and public health.

From 2015 to 2019, Benin, Burkina Faso, Côte d'Ivoire, Ghana, and Togo relied on a strong economic growth. In 2019, each country's GDP growth was of 5.7 percent or higher (during this same period, sub-Saharan Africa GDP growth rates were approximately of 2.0 percent annually). In March 2020, the World Health Organization (W.H.O.) officially declared that COVID-19 was a pandemic, which led to a dramatic decline in economic growth. Ghana, which was cited as the fastest growing economy in the world in 2017 (8.2 percent) registered an annual GDP growth of only 0.4 percent in 2020. For 2022, the IMF reported that GDP growth rates would be the following: Benin, 5.9 percent, Burkina Faso, 4.7 percent, Côte d'Ivoire, 6 percent, Ghana, 5.2 percent, and Togo, 5.6 percent.

In West Africa, the regional economic community (ECOWAS) declared the shutdown of borders in February 2020. By the end of March, all countries had closed their borders, consequently restricting people's movement, in order to prevent the spread of COVID-19. The number of people crossing and goods circulating between borders dropped dramatically, especially in Ghana and Burkina Faso. In late 2021, ECOWAS advised countries to reopen borders. However, only Benin and Burkina Faso followed this recommendation.

Three (3) surveys – on border management, immigration, and public health – conducted at six (6) selected border posts provided a variety of insights and information on the implementation of these services, particularly in the context of the COVID-19 pandemic.

By the time these surveys were conducted, most borders were partially or completely open. The table below presents each border post's status from December 2021 to January 2022.

Tabi	e 1	Status	oţ	bora	ers	by	count	try	and	bord	er
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Country	Point of Entry (PoE)	Status
Benin	Hillacondji	Open
Burkina Faso	Cinkansé	Open
	Dakola	Open
	Yendéré/Niangoloko	Open
Côte d'Ivoire	Laléraba/Ouangolodougou	Partially open
	Noe	Partially open
Ghana	Aflao	Partially open
	Elubo	Partially open
	Paga	Partially open
Togo	Cinkassé	Partially open
	Sanveecondji	Partially open
	Kodjoviakopé	Partially open

The COVID-19 pandemic significantly affected the population's way of life, the modus operandi of borders as well as economic growth and development, particularly in low- and middle-income countries around the world. The global spread of COVID-19 quickly affected the region of West Africa, which is less resilient, given its weak health system. However, for reasons that are not yet entirely understood, COVID-19 did not lead to significant numbers of illnesses nor of deaths in comparison to the USA, Europe, and China.

The shutdown of West African borders increased the level of vulnerability of the sub-region because borders play a critical role in facilitating movement of people, goods, and services. Activity at borders generates national revenue and private income, which are essential for the survival of populations. Additionally, disinformation campaigns maintained and fuelled by some networks worsened the

pandemic's negative impacts by pushing the population to question the anti-COVID-19 protocols in place. These disinformation campaigns jeopardized the efforts of member states and the International Organization for Migrations (IOM) in the managing the pandemic.

A variety of measures were put in place in order to minimize the spread of COVID-19 in areas where physical and/or financial access to information and health equipment is difficult. Yet, these actions were far from sufficient. Meanwhile, the pandemic has not been fully contained, despite a drop in intensity.

Consequently, the IOM focused on the implementation of a strategy to strengthen the managerial capacities of the services in charge of border management to facilitate the understanding of cross-border movements in a health crisis context. IOM has engaged in capacity building for the services in charge of border management and public health in Benin, Burkina Faso, Côte d'Ivoire, Ghana, and Togo to curb the spread of COVID-19 at border entry points. These capacity-building activities were conducted in accordance with the legislative provisions of the International Health Regulations (2005), bearing in mind the risks of a possible increase in cases in West Africa.

The inadequate means of these countries to deal with the crisis are particularly highlighted through the insufficient public health capacities at the border, which are not fully considered by health policies. To address this situation, IOM has developed a support strategy to border entry points in the sub-region, particularly in vulnerable countries, for smooth border management and capacity building in public health.

This study, financed by JICA and conducted by IOM, aimed at collecting data relating to the improvement of border-related facilitation and public health capacity, which can address COVID-19 and infectious diseases at entry points. The findings of the study will enable IOM and its financial partner, JICA, as well as the Governments of Benin, Burkina Faso, Côte d'Ivoire, Ghana, and Togo, to have a baseline regarding the situation at entry points. This baseline will provide a common understanding of the health crisis, thereby ensuring the effectiveness of taken measures that are likely to curb the spread of the pandemic in cross-border areas. The actions proposed via this study will support efforts to build the capacities of the above-mentioned countries in border management, assist them in renewing their health policies, and strengthen the equipment and infrastructure available at the entry points.

I.I METHODOLOGY

I.I.I Type of Survey

Teams of surveyors engaged by the International Organization for Migration conducted one-on-one interviews with stakeholders at the selected border posts. Respondents for the trade component were selected to include the entire trading community at the various borders, including customs authorities, traders, transporters, drivers, etc. Immigration and health authorities were interviewed for those specific modules. In addition to the formal survey questions, surveyors developed questions to collect qualitative information and had respondents provide information about the steps followed to process the movement of people and goods as well as the public health measures implemented at the borders. Surveyors sketched basic maps of selected borders to provide further details on their specific contexts. In addition, a literature review was done in the first phase of this project. However, this report is limited to the findings of the survey.



Figure 1 A map of key corridors in the West Africa sub-region.

I.I.2 Survey Samples

Hundreds of stakeholders working daily at the border were surveyed. The table below indicates the number of stakeholders surveyed at each border post. However, at Cinkansé border post, the number surveyed were very limited because respondents did not get the authorization from their hierarchy to comment.

Table 2 The number of respondents by country and border

Country	Border Post	Number of individuals surveyed					
Country	Border Post	Trade	Health	Immigration			
Benin	Hillacondji	58	58	58			
Burkina Faso	Cinkansé	10	10	10			
	Dakola	10	10	10			
	Yendéré/Niangoloko	8	8	8			
Côte d'Ivoire	Ouangolodougou / Laléraba	9	12	12			
	Noe	28	100	28			
Ghana	Aflao	21	36	42			
	Elubo	34	37	41			
	Paga	35	42	44			
Togo	Cinkassé	2	1	1			
	Sanveecondji	1	1	1			
	Kodjoviakopé	5	2	4			
	Total	220	316	258			

Breakdown by Service

The graphic below represents the proportion of respondents according to their affiliations. The largest group – "other" – is largely composed of various private sector stakeholder groups.

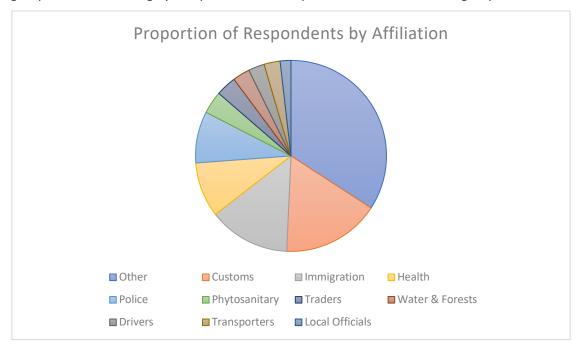


Figure 2 Proportion of respondents by affiliation

1.2 OBJECTIVE OF THE STUDY

This report presents results from a survey conducted among public and private sector stakeholders at six primary border crossing points that connect the five countries of the West Africa Growth Ring Corridor: Benin, Burkina Faso, Côte d'Ivoire, Ghana, and Togo.

The surveys were implemented to provide information and insight on trade facilitation, immigration, and health services at the selected border posts. They also aimed at identifying the obstacles encountered by present border management from a public health perspective. The results of this study will help identify responses that could be implemented with medium to long-term plans, with particular attention to disease control. The report's findings should allow stakeholders to devise urgent countermeasures that maintain smooth mobility of goods and people at borders during infectious-disease outbreaks such as COVID-19; and identify medium- to long-term effective measures to tackle potential risks for the future border management.

A well-functioning border crossing administration involves a carefully choreographed process whereby people, goods and vehicles *are on the move* – after complying with a variety of checks and controls. These controls protect the public from pathogens, prevent fraudulent business activity, interrupt illegal trade in drugs and other regulated goods (and lead to confiscation and prosecution of those involved), and ensure the proper collection of duties that finance governments, among other positive outcomes.

Through this study, JICA and IOM seek to provide assistance to the governments of Benin, Burkina Faso, Côte d'Ivoire, Ghana, and Togo based on up-to-date data regarding challenges related to border management:

- → Data collection at border entry points and complement the data with a document review
- → Data analysis to develop a better understanding of the current situation at the site level and contribute to future planning
- → Collaboration with health authorities to update standard operating procedures (SOPs) for border emergency response and training materials
- → Implementation of pilot interventions, including distribution of Personal Protective Equipment (PPE) at target entry points, holding workshops with local authorities and communities for a rendition of the study's results.

I.3 SURVEY QUESTIONS

Surveys undertaken in 2021 at six primary border posts that link trade activity between Benin, Burkina Faso, Côte d'Ivoire, Ghana, and Togo, generated quantitative and qualitative data on border posts "health", including the COVID-19 pandemic impacts on the borders. In West Africa, the primary policy approach to limiting the spread of COVID-19 was shutting down borders, which significantly reduced traffic volumes, and particularly personal vehicle circulation.

The surveys collected information on three key areas: Trade, Health, and Immigration.

Trade Survey

Respondents were asked a variety of questions to better understand the situation at the border in the following areas:

- **Personnel at border posts**: Who is working at the border? How many hours per week do they work? Are they adequately trained?
- **Physical infrastructure at border posts**: What are the roads, bridges, facilities, technology, and other physical infrastructure conditions?
- Implementation of trade protocols and practices at border posts: Do agencies at border posts follow standard operating procedures and implement other best practice methods to ensure an efficient flow of people, goods, and vehicles?
- Adaptation to COVID-19 at border posts: How have organizations or agencies adapted their practices to COVID-19 recommended health guidelines?
- The use of automation and technology at border posts: To what extent are border agencies or organizations using technology to achieve greater efficiency in implementing various border processes?
- Cooperation, collaboration and availability of services at the borders: Are agencies and
 organizations at the borders cooperating and collaborating to address issues that affect the
 movement of people, goods, and vehicles?
- Specific equipment for control activities at the border, assistance from development partners and additional feedback from respondents: Do agencies and organizations have suitable equipment to effectively monitor and enforce various rules related to the movement of people, goods, and vehicles? Have agencies or organizations received assistance from development partners?

The survey reached hundreds of agents, from every major agency and organization, who work daily at the border posts selected for this study, including public sector agencies such as Customs, Immigration, Police, Health, Phytosanitary and Veterinary, together with private sector stakeholders such as traders, drivers,

and freight forwarders. Weighbridge and scanner operators were also surveyed. As expected, the agencies with the largest workforce at the border were Customs and Immigration. On the private sector's side, thousands of traders, and hundreds of drivers use borders daily.

As border posts operations were significantly affected by COVID-19, this particular aspect is covered by several questions of the trade survey.

Health Survey

The COVID-19 pandemic challenged public health systems across the globe. As COVID-19 is caused by a virus transmitted from one person to another through the air, among the first restrictive measures taken by governments were shutting down borders to prevent populations' movement as it was believed that "If people could not move, the virus could not either." West African countries closed borders in March and April 2020, shortly after the WHO had declared the global pandemic. However, Benin and Côte d'Ivoire adopted a different approach allowing for the movement of people and goods deemed essential, which was eventually adopted by other countries. Adopting a national policy allowing for essential movements to be maintained meant this policy had to be implemented at the border level as well. The health surveys conducted as part of this report examined the implementation of the national policy and how well borders could respond to such an urgent public health crisis.

The health survey questioned respondents on five key areas (this list of questions is not exhaustive):

- Processes, procedures, and personnel to face the pandemic: Was there a plan for the public health response at the border? Was it easily available (printed or electronically)? Did personnel at the border designated in the plan (or non-designated) receive training on COVID-19 public health measures? Had other personnel been trained to implement such measures? Do personnel at the border need further training and capacity building regarding COVID-19 public health measures?
- Communication materials and general communication at the border, regarding COVID-19: Were there IEC materials communicating the risks of COVID-19 and providing clear information to travellers (entering and exiting the country) regarding COVID-19? Were there IEC materials communicating the risks and providing clear messages to border communities regarding COVID-19? Were border personnel in charge of screening travellers able to communicate with a designated health facility? Were there designated health centres to which people with suspected COVID-19 cases could be transferred? Did these centres differentiate between infectious diseases, including COVID-19 and others? Did border personnel have contact information for the designated health centre? Did the health post at the border have contact information for their counterparts on the opposite side of the border? How did border personnel contact emergency health services (i.e., ambulances)? Was there a mechanism for contacting emergency health services on the opposite side of the border? Who was authorized to contact emergency health services on the opposite side of the border?
- Implementation of public health measures and availability of public health services: Was equipment to check travellers body temperature available at border posts? Were travellers required to complete health declaration screening forms? Did designated health centres have procedures and means in place to verify alerts from the border posts? Were contact details for the quarantine area or facility available at border posts for referral of travellers with COVID-19 symptoms? Was there a hospital or clinic at the border? How far away was the hospital or clinic? Did the hospital or clinic have running water? Was there a hospital or clinic on the opposite side of the border?
- Implementation and possibilities of implementation of public health measures at the border: Did the border post have handwashing stations or other measures for travellers and border personnel? Was personal protective equipment provided to border personnel?

• **Incidences of COVID-19 at the border**: In the last month, were there any suspected, probable, or confirmed cases of COVID-19 been recorded? How many?

Immigration Survey

One of the primary functions of border crossings is to manage people's movement, with immigration services handling the flows. At frequently used border posts, such as Ghana-Togo, immigration officers might process as much as hundreds of people daily entering and exiting their respective countries. The implementation of public health measures to mitigate the spread of the coronavirus brought new challenges, including, among other tasks, rigorous health screening procedures (for example, temperature monitoring and individual interviews regarding symptoms), proper use of PPE by the border personnel and coordination of COVID-19 suspected cases referral to health facilities in cooperation with health authorities.

Integrated border management surveys interviewed respondents on the following key areas:

- **Status of the border**: Is the border completely open, partially open, or closed? Is the border open 24 hours a day, seven days a week? Are health personnel stationed at the border?
- Coordination with health authorities: Which agency was in charge of leading the public health response to COVID-19? What mechanisms to coordinate the response were in place at the border? Was the response considered to be the responsibility of the health authorities or a shared responsibility with other services?
- Facilities to treat and quarantine, as necessary, people with suspected cases of COVID-19 and Standard Operating Procedures: Were there health facilities designated to treat suspected or confirmed cases of COVID-19? Were quarantine facilities available? Were immigration detention facilities used to isolate COVID-19 cases?
- Equipment to properly screen travellers: Did border personnel have thermal cameras, PPE (visors, gloves, masks), and hand sanitation gel? Were there handwashing stations at the border? Was transportation available to transfer COVID-19 cases (suspected or confirmed) to health facilities?
- Systems to refer travellers with suspected COVID-19 to health facilities: Was a referral system in place to transfer patients to facilities for quarantine or treatment?
- Border Management Information Systems: Do borders have BMIS? Do health authorities have access to it where it does exist?
- Collection of information for contact tracing: Were travellers required to use contact tracing apps? Who has access to the data collected by the app? Does the data storage follow international standards for data protection?
- Border crossing processing time before the pandemic and during the pandemic: Had the implementation of various public health measures led to an increase in processing times?
- **Level of preparation to deal with the pandemic**: Was the border prepared, partially or fully, for the pandemic in terms of its infrastructure, equipment, and training of personnel?

1.4 STRUCTURE OF THIS REPORT

This report is divided in four chapters and contains six annexes. Following this introductory chapter, chapter 2 presents observations and findings from each border crossing posts; these presentations are preceded by a general overview of each location. Chapter 3 focuses on potential actions to address the various issues the surveys highlighted. Chapter 4 contains the conclusions and recommendations of this report.

1.5 CHALLENGES

The difficulties encountered during the study revolve around the following points:

- In the context of insecurity in the region, some administrations, did not want to communicate information that they considered strategic (e.g., number of agents at the border). It was also a challenge to obtain statistics on cross-border trade from some Customs Administration as approval was needed from their headquarters before such information could be shared.
- For questions calling for unambiguous answers, some of the answers turned out to be quite inconsistent from one respondent to another. Example: presence of a weighbridge or banks at the border post.
- There were slight inconsistencies in the collection of data. Some respondents seemed to answer
 more complete versions of the survey while others may have responded to a limited set of
 questions. Analysis was based on all the data that was collected. Where inconsistencies were
 identified in the data collected, follow up interaction with border staff was put in place to verify
 the situation at the border level.
- Sample size was insufficient at some border posts, particularly Cinkansé, Dakola, Ouangolodougou, and Yendéré, where only a few respondents answered questions. Small sample sizes are not necessarily an issue; however, when respondents give contradictory answers on a given question – say, whether there is a weighbridge or a cargo scanner – the small size of the sample lead to difficulties to draw conclusions.



Data collection by the IOM

CHAPTER 2 OBSERVATIONS AND FINDINGS FOR WEST AFRICAN GROWTH RING CORRIDORS

2.1 ABIDJAN-OUAGADOUGOU

2.1.1 General overview

The Abidjan-Ouagadougou corridor runs north-south, connecting the economic capital of Côte d'Ivoire – Abidjan – to the capital and largest city of Burkina Faso – Ouagadougou. The corridor is approximately 1,150 kilometres long.

2.1.2 The Ouangolodougou-Niangoloko Border-Crossing Point

2.1.2.1 General Overview

Unlike the other border posts operational organization, administrative procedures on the Ivorian side take place in two locations separated by a 28-kilometre distance: Ouangolodougou and Laléraba. Most of the state agencies have their processing measures undertaken from Laléraba; yet, there are Customs offices in both locations – the Ouangolodougou office is equipped with a scanner. It is unclear if a Joint Border Post now under construction at Laléraba will consolidate the various administrative offices of Côte d'Ivoire.



Figure 3 A map showing the four locations where border formalities are implemented on the Abidjan-Ouagadougou corridor.

2.1.2.2 Border Crossing Office Elements

The border crossing post consists of the administrative offices listed in the table 3 below which can be seen on the satellite image below.





Figure 4 Satellite image of the Burkina Faso-Côte d'Ivoire border Table 3 Border personnel at the Burkina Faso-Côte d'Ivoire border

	Ouangol	Lale	éraba	Yen	déré	Niangoloko		
Type of Office	#	Opening Hrs	#	Opening Hrs	#	Opening Hrs	#	Opening Hrs
- Cinice	Officers		Officer	<u> </u>	officers :		officers	<u></u>
Immigration	- (does not exist)	×	N/A	7 AM	N/A	7 AM	×	×
Customs	N/A (Information cannot be collected)	N/A (Information cannot be collected)	0	7 AM	×	×	N/A	
Port Health	×	×	N/A	N/A	×	×	×	×
Plant and Animal Quarantine	×	×	×	×	×	×	N/A	х
Phytosanitary	7(*)	×	N/A	N/A	×	×	N/A	N/A
Bureau of Standard	×	×	×	×	×	×	×	×
Police	×	×	9	7 AM	No Answer (**)	No Answer (**)	×	×
Gendarmerie	×	×	N/A	N/A	×	×	×	×
Others	N/A	N/A (Information cannot be collected)	7	No answer	×	×	N/A	х

- (*) The management is based in Ouangolodougou, but a team of seven people is deployed in Laléraba daily. They split into two teams to also cover Pogo point of entry at the border with Mali.
- (**) Because of security reasons, Police of Yendéré refused to give any answer.

Yendéré-Niangoloko

Border police, immigration, health personnel, phytosanitary authorities and customs are stationed at this PoE.

Laléraba- Ouangolodougou

There are six main services at the PoE of Laléraba: immigration services, the customs service, the border police, the gendarmerie, the national police, health services and local authorities.

Additionally, the following services can be found: the Burkinabe Shippers' Council (CBC), the Departmental Directorate of Water and Forests of Ouangolodougou (DDEEO², the Ministry of Agriculture, the phytosanitary service, the Ivorian Shippers' Office (OIC)³. (The exact location of some of the offices cannot be specified due to the insufficiency of the information.)

2.1.2.3 Border Operation During COVID-19

In response to the COVID-19 outbreak, Laléraba PoE was partially shut down, putting people's movement on hold and allowing movements of goods only. Yendéré remained opened and operated at full capacity. To control the entry and exit, the Yendéré PoE did not use travellers screening devices but relied on visual assessment: i.e., observation by personnel. In addition, there is no registration system for cross-border communities' movement.

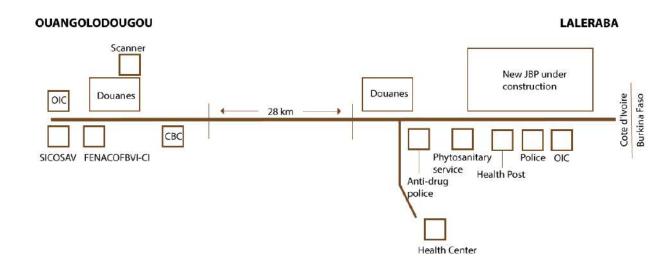


Figure 5 Concise map of the Burkina Faso-Côte d'Ivoire border (Ouangolodougou and Laléraba)

² In French, Direction Départementale des Eaux et Forêts de Ouangolodougou

³ Locally, these services are referred to in French, as follows: Le Conseil burkinabè des chargeurs (CBC), la Direction Départementale des Eaux et Forêts de Ouangolodougou (DDEEO), le Ministère de l'agriculture, le service phytosanitaire et l'Office Ivoirien des Chargeurs (OIC).

2.1.2.4 Movement of Vehicles/People/Goods at the Border

Vehicles

The graphic below presents monthly data on the movements – entries and exits – of heavy vehicles at Ouangolodougou, as provided by the Government of Côte d'Ivoire. As the graphic shows, the border shutdown significantly affected traffic volume. Heavy vehicle movement at Ouangolodougou followed a pattern that aligned with the shutdown and the reported surges in COVID-19 infections:

- Beginning in March 2020, traffic declined significantly, reaching a trough in May and June this coincided with border closures implemented as COVID-19 was declared a global pandemic.
- Traffic began to return in July 2020 as countries in the region eased restrictions to ensure the movement of essential goods.
- From August to October 2021, traffic dropped as a surge in COVID-19 cases occurred.

Table 4 Heavy vehicle movement at Laléraba⁴

Year	Months	J	F	М	Α	М	J	J	Α	S	0	N	D
2020	Entries	2342	2142	1880	1740	1371	1433	2298	2278	2320	1938	1330	2433
2020	Exits	1898	2834	2447	1574	1134	1116	2237	1994	2431	1816	1258	2258
2021	Entries	2433	2157	2339	2167	2009	2715	2006	1456	1578	945	1896	2061
2021	Exits	2258	1750	2183	2016	1728	2197	1683	1879	1383	896	1650	1796

People

The following tables below provide an average number of cross-border movements. The significant differences between these figures can be explained by the differences in the sources of the data. In Yendéré, the figures are based on official registries that were available for examination; in Laléraba, the figures are an average of estimations provided by the interviewed officials. The long distance between the border posts of Laléraba and Yendéré (13 km) can also explain this issue: those who cross Laléraba do not necessarily reach Yendéré. Most people just cross the border for purposes related to farming in the border area.

Table 5 Average daily/monthly number of travellers entering and exiting at the Yendéré PoE⁵

РоЕ	Entry/day	Entry/month	Exit/day	Entry/month	
Yendéré	531	12,936	247	7,414	

Table 6 Average daily/monthly number of travellers entering and exiting Laléraba PoE⁶

РоЕ	Entry/day	Entry/month	Exit/day	Exit/month
Laléraba	1,000	30,000	656	19,708

⁴ Source: Police Commissioner of Laléraba

⁵ Source: IOM survey, December 2021-January 2022

⁶ Source: IOM survey, December 2021-January 2022

Goods

Trade volumes on the Abidjan-Ouagadougou corridor, both export and import, 2019-2021, are illustrated in table 7 below. As the table shows that trade volume continued to increase, the COVID-19 pandemic seemingly did not have significantly impacted the flow of goods on the Abidjan-Ouagadougou corridor.

Table 7 Value and volume of exports and imports on the Abidjan-Ouagadougou corridor, 2019-2021

		2019		2020		2021	
	Type of movement	Value	Volume	Value	Volume	Value	Volume
Ouangolo	Import	21,656.55	277,570.39	23,924.68	319,725.31	34,156.85	444,604.61
Ouangolo	Export	5,739.59	39,046.43	7,086.92	62,398.56	6,924.47	47,637.43
Ouangolo	Transit	-	-	-	-	-	-

The trade volume at the border, measured at the Niangoloko border crossing point, is presented in the table below.

Table 8 Trade volume at Niangoloko, 2019-2021⁷

Number of vehicles		Net weight (Kg)
2019	4,295	154,775,189
2020	5,261	191,616,786
2021	3,809	145,320,811

Table 8 above illustrates a big drop in trade volumes from 2020 to 2021, while there was just a slight decrease between 2019 and 2020. According to the consultations, two reasons could explain this drop of border use at the Niangoloko PoE:

- Côte d'Ivoire has installed a scanner at Ouangolodougou. Drivers chose to avoid the scanning system by using another PoE in Burkina Faso called Galgouli.
- Importers wanted to avoid the interconnected custom system between Côte d'Ivoire and Burkina Faso, which favours transparency for both governments, by using Galgouli where the system was still manual.

The nature of trade is illustrated in table 9 below; they are mainly imports to Burkina Faso.

Table 9 Exports and imports at Ouangolodougou8

		2019			2020		2021		
	# Vehicles	Weight (millions of Kg)	Value (millions of CFA)	# Vehicles	Weight (millions of Kg)	Value (millions of CFA)	# Vehicles	Weight (millions of Kg)	Value (millions of CFA)
Exports	109	4.46	898.85	72	7.45	648.68	54	1.05	423.42
Imports	12,457	150.75	6,741.75	9,718	172.65	7,717.57	6,923	159.88	8,220.73

⁷ Source: Government of Burkina Faso

⁸ Source: Government of Burkina Faso

2.1.2.5 Physical Infrastructure

The physical infrastructure on both sides of the border at Ouangolodougou-Niangoloko is in poor condition, according to the surveyed stakeholders. The roads, bridges, and facilities were described by most respondents as bad or very bad. The lack of parking areas for trucks and drainage systems similarly affects the movement of people, goods, and vehicles. Furthermore, the lack of toilets and handwashing stations raise sanitary concerns.

Table 10 Status of physical infrastructure at the border of Burkina Faso-Côte d'Ivoire

Dhysical Inforstweeters		Condi	tion	
Physical Infrastructure	Ouangolodougou	Laléraba	Yendéré	Niangoloko
Access roads	Satisfactory	Poor	Poor	Poor
Roads in the border area	Satisfactory	Poor	Satisfactory	Satisfactory
Bridge	Very poor	Poor	Satisfactory	Poor
Parking	No parking	No parking	Good	No parking
Power supply	Satisfactory	Satisfactory	Satisfactory	Satisfactory
Internet connection	Satisfactory	Satisfactory	Satisfactory	Satisfactory
Water supply	Satisfactory	Poor	Poor	Satisfactory
Generator	No generator	No generator	Satisfactory	No generator
Drainage	No drainage	No drainage	No drainage	No drainage
Weighbridge	Yes (Non-functional)	No weighbridge	Functional	No weighbridge
Cargo Scanner	Yes (Non-functional)	Mobile scanner	None	No scanner
Officers' housing	Insufficient	Insufficient	None	Insufficient
Others	n/a	n/a	n/a	n/a

2.1.2.6 Soft Infrastructure

At each of the border posts of entry, respondents said that the various services at the border relied on good working relationships and met regularly. However, border coordination committees do not appear to be working effectively: many respondents were not aware that such committees existed. Cross-border relationships were rated as "good," but bilateral coordination committees do not exist.

Surveys also underlined that stakeholders are disregarding the implementation of a variety of measures to facilitate trade: a simplified goods declaration form was not being used, the processing of goods declarations prior to arrival was not implemented, and services were not following risk management procedures, or they were only conducting inspections of relief equipment when the risk was considered high. However, the surveyed stakeholders overwhelmingly agreed that border agencies had a common approach and promoted cooperation to ensure the uninterrupted flow of goods.

2.1.2.7 Cargo Processing

The Ouangolodougou post has a non-functional scanner, and there was no mention of a weighbridge in the stakeholders' answers. Furthermore, there is no Authorized Economic Operator system at Laléraba. Cargo processing appears to be implemented to some extent at four border posts. Controls are conducted

together at these four stops where the corridor crosses between Côte d'Ivoire and Burkina Faso: at Ouangolodougou and Laléraba in Côte d'Ivoire and at Yendéré and Niangoloko in Burkina Faso. The process is not automated, and it involves manual inspections, although Customs agents use SYDONIA World to track cargoes. GPS devices are used to track cargo movement. However, once northbound vehicles arrive in Niangoloko, physical escorts are assigned to them to accompany the trucks to their final destination (Ouagarinter in Ouagadougou).

Clearance Procedure

Table 11 Cargo control process at Ouangolodougou/Laléraba

STEP	LOCATION	ACTIVITIES
1	Sentry box	Arrival of the vehicle, delivery to customs officers of the documents relating to the goods and parts of the vehicle taken to customs or referral to the next service.
2	Cale store or depot: customs clearance	Reception of documents and positioning at the vehicle scanner parking lot. Delivery of the documents (invoices, export declarations) to the freight forwarder who will return with the accounting declaration by assigning a procedure to the goods.
3	Scanner and cargo handling	The vehicle is introduced to the scanner for cargo identification. Following this passage, a report is drawn up after a check of the detailed declaration. The vehicle returns to the car park and the documents are handed over to the visit section.
4	Visit section	Documentary control and if possible physical control of the goods. The auditor draw up a report based on the declaration which, together with the scanner sheet, will be sent to the commissioner.
5	Accounting or revenue window	Collection of duties and taxes. Issuance of receipts and signature of the voucher to be collected. Delivery of these parts to the freight forwarder.
6	Cale store	Presentation of the declaration bearing the mention BAE (<i>Bon à Enlever</i>), the scanner form and the receipt of duties and taxes. Registration of all these parts and vehicle exit report. The freight forwarder with these parts goes to the scanner parking lot to take possession of the vehicle.

Table 12 Cargo control process at Niangoloko-Laléraba

STEP	LOCATION	ACTIVITIES
1	Arrival office	Upon arrival at the Niangoloko office, the transporter must present the cargo and its accompanying documents to the Customs agents, who then confirm its identification and register its arrival.
		A distinction is made regarding the merchandise that then dictates how it is handled:
		Situation 1: Merchandise originating from the Ivoirian market; that is, Ivoirian products
		Situation 2: Merchandise that has been obtained at the Port of Abidjan; that is, products originating from outside of Côte d'Ivoire
		Merchandise that is from the Ivoirian market (Situation 1): After the merchandise is identified and taken into control, the documents are handed over to the customs declarant appointed by the carrier for entry into the ASYCUDA WORLD computer system. The IT system then arbitrarily assigns the declaration to a verifier. The verifier then checks that the information in the documents is accurate and in conformity with the actual cargo. If information is correct, the declaration is liquidated, and a transit document (called a T1) is generated.
		Merchandise obtained at Port of Abidjan (Situation 2): The declaration and the T1 document are established at Abidjan via Internet connection. Accordingly, once the vehicle arrives, the Customs service proceeds to a notification of passage after implementing customary controls (ensuring the seal on the truck has not been broken).
2	Cashier	After verification followed by approbation, the declaration is transmitted to the cashier for payment of applicable duties and taxes.
3	Customs office	The trucks are then assigned a Customs escort or assembled into a convoy. The use of a Customs escort applies to sensitive merchandise according to an established list defined by a service note. The head of the service can put other merchandise under Customs escort if it is determined that its value to the public treasury merits such treatment. Subsequently, the declaration is remitted to the Brigade Section to establish the escort and convoy paperwork. If the cargo is under Customs escort, a Customs agent is assigned to ensure the escort.
		For vehicles in convoy, the documents are handed over to the customs declarant who in turn forwards them to the driver.
4	Exit	The driver leaves the Joint Border Post and continues towards the final destination (Ouagadougou or other location).

The graphic below illustrates the changes in processing time. At Laléraba, the pandemic dramatically increased processing times. While a precise reason for the increase is difficult to determine, it is likely that the controls implemented to prevent further spread of the COVID-19 (i.e., health screening, cargo fumigation, etc.) are the causes for this increase.

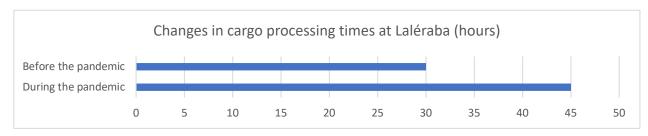


Figure 6 Changes in cargo processing times at Laléraba (Côte d'Ivoire), before and during the pandemic

ICT for Cargo Processing

Table 13 below shows the current use of ICT systems for clearance procedures at the border.

Table 13 Customs, risk, and other systems at Laléraba

		Laléraba/Ouangalodougou	Niangoloko	
Custom	Type of System	SYDONIA WORLD	SYDONIA WORLD (Niger) and SYDONIA++ (Burkina)	
Management Systems (CMS)	Interconnectivity with neighbouring country	Interconnected	Interconnected	
Systems (ems)	Training for CMS	Yes, adequately trained	Yes, adequately trained	
	Cargo scanning service	Yes, but non-functional	No	
Risk	X-ray inspection machine	Yes	Yes	
Management	Raman spectrometer	No	No	
Systems	Vehicles	Yes	Yes	
	Reagent inspection	Yes	Yes	
	GPS Cargo tracking system	Yes	Yes	
Other customs	AEO System	No	No	
related systems	Bilateral bond guarantee	No	No	
	Automated Weighbridge	No	No	

2.1.2.8 Immigration Processing

Ouangolodougou and Laléraba

Laléraba and Ouangolodougou PoEs are not equipped with office supplies or border management information systems. Although the Internet network covers Laléraba, the immigration service does not have appropriate equipment to use Internet.

Immigration services register cross border movements/travellers' information manually in paper format, using a separate register for cross border communities. The health personnel manually collects information on travellers' voyage history to facilitate contract tracing in case of suspected communicable disease.

Yendéré and Niangoloko

This PoE is equipped with the border management information system MIDAS installed in 2016. Nevertheless, it has not been operational since the terrorist attacks in 2017. Travellers' information is collected manually through forms made available by the government. Information related to the public health of travellers is also collected manually.

2.1.2.9 COVID-19

Tables 14 and 15 below summarize the measures taken at the Ouangalodougou-Niangoloko border and border personnel perception of the extent of preparation to face the COVID-19 pandemic. This section provides details on Covid-19-related events and procedures, including planning, infection prevention and COVID-19 alerts.

Table 14 Summary of COVID-19 measures implemented at the Côte d'Ivoire-Burkina Faso border (Ouangolodougou, Laléraba, Yendéré and Niangoloko)

Measures	Ouangolodougou	Laléraba	Yendéré	Niangoloko
Coordinated mechanism for COVID	Yes	Yes (Police/Border	Yes	Niangoloko
Coordinated medianism for Covid	(Health Port)	police)	(Health Port)	PoE is
Sanitation Action Plan	Yes	Yes	No	reserved for
SOP	No	No	Yes	Customs
Emergency Action Plan	No	No	No	procedures only
IEC Materials	No	No	Yes	,
Communication Tool	No	No	Yes	
Hospital or Health Centre	Yes	Yes	Yes	
Quarantine facility	Yes	Yes	No	
EPI	Yes	Yes	Yes	
Sanitation Equipment	No	No	-	
Hand Washing Station	Yes	Yes	No	
Toilet	No	No	1	
Transport (Ambulance)	No	-No	-No	

Table 15 Equipment for COVID-19 measures at the border of Laléraba, Ouangolodougou, Yendéré, Niangoloko

Equipment for COVID Measures	Ouangolodougou	Laléraba	Yendéré	Niangoloko
Thermal camera	No	No	No	Niangoloko
Portable infrared camera	No	Yes	Yes	PoE is
Surgical masks	Yes	Yes	yes	reserved for
Disposable gloves	Yes	Yes	Yes	Customs
Protective visors	No	Yes	Yes	procedures
Hand sanitation gel	No	No	Yes	only
Handwashing stations	No	Yes	Yes (non- functional)	
Dedicated area to screen travellers	Yes	Yes	Yes	
Dedicated area to isolate sick travellers	Yes	Yes	No	
Means of transport to sick travellers	No	No	No	

2.1.2.9.1 Planning and Coordination

At the Yendéré border crossing point, the border police operates in coordination with the health authorities. There is an operational coordination mechanism managed by the health unit, to harmonize COVID-19 public health response bringing together immigration and customs services to reinforce detection, notification, management, and referral of suspected COVID-19 cases in Yendéré and Niangoloko.

The management of Laléraba and Ouangolodougou PoE is essentially based on a coordination mechanism by the national police and health authorities of the region in coordination with immigration services and customs.

2.1.2.9.2 Public Health Measures

Emergency Action Plan/SOP

There is no existing emergency action plan at Ouangolodougou and Laléraba. Nevertheless, there is a coordination platform for administration authorities and representatives of border management services stationed at the PoE, holding periodic meetings for close monitoring of the health crisis.

Frontline border personnel (both health and non-health personnel) have been trained to a certain extent on COVID-19 prevention and response measures. The National Institute of Public Hygiene (INHP) is present at this PoE and is in charge of implementing public health measures at the border.

There is a public health emergency plan in response to COVID-19 at the Yendéré – Niangoloko PoE. Health personnel, immigration and customs services have both received training on these measures.

The Laléraba and Ouangolodougou PoE does not have Standard Operating Procedures (SOPs). However, the Yendéré border crossing point works with Standard Operating Procedures on the identification, notification and referral of COVID-19 suspected cases, guiding movements in the border area.

2.1.2.9.3 Risk Communication and Community Engagement

The Laléraba PoE does not have Information, Education and Communication (IEC) materials. However, the screening staff can communicate with the designated health centres that carry out patients triage for infectious diseases including COVID-19. Moreover, health centres have been designated according to their proximity to the border for the management and treatment of COVID-19 cases. These include the Kaoura health centre and the Ouangolodougou hospital.

IEC materials are available at the Yendéré and Niangoloko border, including posters in different languages: French, Mooré, Dioula displayed on the walls and in offices along the border to inform travellers on COVID-19. Cross-border communities receive information through telephones and tape recorders. In addition, the screening staff in Yendéré can communicate directly (telephone) with the health centre.

In addition, there is a referral system for suspected cases of COVID-19 to centres such as the Niangoloko CM and the Banfora CMU. These centres, established in 2020, sort out patients with infectious diseases, including COVID-19, and with other diseases. The border posts of Yendéré and Niangaloko communicate with the designated centres. From a cross-border cooperation perspective, the head of the border post can contact his counterpart in the neighbouring country as needed.

2.1.2.9.4 Monitoring

At the Ouangolodougou and Laléraba posts, there is a declaration form to facilitate health information processing in addition to the periodically launched alerts. In addition, there is a referral system for travellers with symptoms. Border management authorities and quarantine facilities are responsible for travellers with symptoms.

The border post has a drinking water station as well as good ventilation, and protective and preventive measures are enforced at the border. There is a clinic in the neighbouring country, however medical cases are usually not referred to the neighbouring country or outside the national territory.

The temperature control device is installed at the Yendéré and Niangoloko border posts. The traveller's screening questionnaire was added to the border crossing formalities in addition to the health declaration form. The health centres verify alerts issued at the border despite the absence of contact information for the quarantine facility for travellers with symptoms of COVID-19.

2.1.2.9.5 Infection Prevention and Control, Personal Protective Equipment

The border post of Laléraba (where the border crossing sanitary control is done) has a handwashing station and wearing a mask is mandatory at the PoE. The border has PPE but no screening, disinfection equipment or transportation. Health personnel did not receive any training regarding the 2005 International Health Regulations (IHR).

There are handwashing stations for travellers and staff at the Yendéré and Niangoloko PoEs but they are non-functional and in insufficient quantity. PPE is available at the border as well as cleaning and disinfection materials. However, the border post does not have any means in place for transportation of suspected cases to designated health centres. Health personnel received training regarding the 2005 International Health Regulations.

2.1.2.9.6 COVID-19 Alerts

At the Ouangolodougou and Laléraba border posts, there are no statistics on travellers identified as suspected cases in January 2022. However, as part of the screening process, joint activities are being carried out between the Ministry of Health and the National Institute of Public Hygiene (INHP), which is the supervising entity.

There were no suspected or confirmed cases of COVID-19 in the Yendéré and Niangoloko PoEs' records for the month preceding the survey (December 2021). The border staff has the contacts of the designated health centre, and the focal points phone numbers are clearly posted at the PoE. In addition, the head of the health service has the contacts of his neighbouring country counterpart. The emergency department and/or ambulance is contacted by phone by the chief of service (ICP) or his deputy, even if the PoE does not have an ambulance.

Screening staff have a functioning power source to charge phones/radio. The PoE has generators and solar panels with the support of SONABEL.

2.1.2.9.7 Screening Process – Communication

The Ouangolodougou and Laléraba PoEs coordinate with the designated health centres through a specific platform to facilitate collaboration between services and patient management. Toll-free numbers have been put in place for stakeholders to facilitate coordination and information exchange. To this end, a joint

team has been set up for managing suspected cases of COVID-19, but the National Institute of Public Health remains responsible for case management. In addition, there are focal points contacts posted at the PoE and the health services have the contacts of their counterparts in the neighbouring country. The health facilities at the Yendéré⁹ (located 500 metres from the PoE) and Niangoloko posts coordinate cases with the health centres, although it was not clear from stakeholders' responses whether there is a designated platform for this process. Contact information of the health facilities is posted at the border posts.

2.1.2.9.8 Status of Infrastructure and Equipment

The PoE Ouangolodougou and Laléraba has quarantine facilities, administrative detention centres, screening, and isolation areas. The detention centres are managed by the health services and the border police.

The Yendéré and Niangoloko PoEs do not have a quarantine facility. COVID-19 cases are not referred to these facilities, but there are administrative detention centres and isolation areas. These centres are managed jointly by the border police, immigration, and health authorities. The PoEs have almost all the necessary PPE except for the handwashing stations. Additionally, PPE are not available in sufficient quantity. Border officials have received training regarding the proper use of handwashing stations, hydroalcohol gel, and disposable gloves. However, none of them have been trained on how to use portable infrared thermometers, surgical masks, and protective visors. Despite the COVID-19 control system, the PoEs do not have transportation in place. However, there is a referral system for suspected cases towards designated health centres or quarantine facilities at the border.

⁹ In French: Centre de Santé et de Promotion Sociale

Figure 7 COVID-19 infrastructure at the Yendéré Border Post



















2.2 ABIDJAN-LAGOS

2.2.1 General Overview

The Abidjan-Lagos corridor is the busiest trade corridor in West Africa, connecting the major population centres of Abidjan, Accra, Lomé, Cotonou, and Lagos. An estimated 35 million people live along this corridor, which stretches over approximately 1,000 km. The corridor facilitates the movement of myriad consumer products to this large coastal population originating from major manufacturing facilities in Abidjan and Lagos. In 2020, COVID-19 affected the movement of goods (see Figure 17 below): the number of trucks travelling westward declined but the number moving eastward increased.

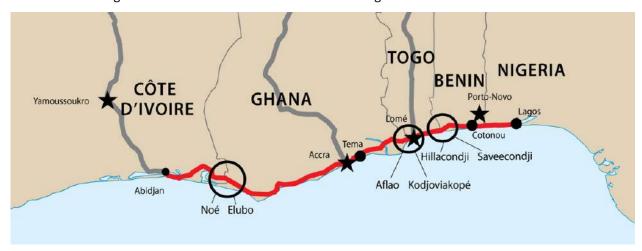


Figure 8 A map of the Abidjan-Lagos corridor.

As moving goods along the corridor involves crossing several borders, the speed of movement of goods and vehicles was affected by COVID-19 restrictions. The West Africa Growth Ring Corridor does not include routes that enter Nigeria; consequently, only three border crossings were included in this set of surveys:

- Noé-Elubo (Côte d'Ivoire-Ghana)
- Aflao-Kodjoviakopé (Ghana-Togo)
- Sanveecondji-Hillacondji (Togo-Benin)

2.2.2 The Noé-Elubo Border-Crossing Point

2.2.2.1 General Overview

Located about 175 km from Abidjan, border controls by the Government of Côte d'Ivoire are implemented at the Noé border post, while border controls by the Government of Ghana are implemented at the Elubo border post. The figures for trade volumes illustrate that imports are of vastly greater volume and value than exports. Overall, the physical infrastructure at the border is in good condition. However, the exclusive use of French or English at each side of the border may affect the quality of communication with people speaking other languages, and hence bilateral coordination and cooperation.



Figure 9 A satellite image of the Noé-Elubo border crossing post

2.2.2.2 Border Crossing Office Elements

All key border control services are present at the border as mentioned in the table below:

Table 16 Border personnel at the Côte d'Ivoire-Ghana border posts (Noé and Elubo)

	Noé			Elubo
Office	# Officers	Schedule	# Officers	Schedule
Immigration	27	Every day, 6:30 am -6:30 pm	200	Every day, 6 am- 6 pm
Customs	110	M-Sat, 6:30 am to 6:30 pm	120	Every day, 6 am- 6 pm
Port Health	16	Every day, 6:30 am – 6:30 pm	10-12	Every day, 6 am- 6 pm
Plant and Animal Quarantine	4	Every day, 6:30 am – 6:30 pm	3-5	Every day, 6 am- 6 pm
Phytosanitary	2	Every day, 6:30 am – 6:30 pm	3-5	Every day, 6 am- 6 pm
Bureau of Standard	4	M-F, 6:30 am – 6:30 pm	4	Every day, 6 am- 6 pm
Police	50-100	Every day, 6:30 am – 6:30 pm	10-30	Every day, 6 am- 6 pm
Gendarmerie/Military	5	Every day, 6:30 am – 6:30 pm	5	Every day, 6 am- 6 pm
Others	2	Every day, 6:30 am – 6:30 pm	5-10	Every day, 6 am- 6 pm

2.2.2.3 Border Operation During COVID-19

The border post between Noé and Elubo is partially operational, open for cargo movements but closed to regular passenger traffic. Limited movement of persons was allowed with the proper derogatory approval.

2.2.2.4 Movement of Vehicles/People/Goods at the Border

Vehicles

The table below presents the information regarding vehicle movements from 2018 to 2021. There is a sharp decline from 2019 to 2020, corresponding to the onset of the COVID-19 Pandemic. Slight increases were recorded in 2021. However, there is still a significant reduction in movement as compared to pre-COVID volumes.

Table 17 Trade volume (vehicle movement) at the Elubo border post

	Number of vehicles inward bound	Number of vehicles outward bound	
2018	4,724	6,661	
2019	4,125	7,076	
2020	1,648	2,221	
2021	1,852	3,573	

People

Prior to the COVID-19 pandemic, in 2019, immigration officials at Elubo recorded 22,135 arrivals to Ghana and 22,238 departures. The impact of the pandemic led to steep declines of both arrivals and departures: in 2020, 3,959 arrivals and 4,393 departures were recorded. These numbers dropped significantly again in 2021 – with just 217 arrivals recorded compared to 206 departures.

Table 18 Totals of arrivals and departures per year at the Elubo border post, 2019-2021¹⁰

Elubo					
Year	Arrivals	Departures			
2019	22,135	22,238			
2020	3,959	4,393			
2021	217	206			

Table 19 Estimated entries and exits per day and per month at Noé border post

PoE	Entry/day	Entry/month	Exit/day	Exit/month
Noé ¹¹	1,000	3,000	1,000	3,000

Goods

Both the volume and value of goods traded through the Noé border post have increased quite significantly from 2019 to 2020, and further increased in 2021. Recorded statistics were almost exclusively related to imported goods, with limited movement for export and transit cargo. Thus, this data shows that the COVID-19 pandemic did not significantly affect the import of goods.

¹⁰ Source: Ghana Immigration Service

 $^{^{\}rm 11}$ The number displayed in the table is the estimation by the immigration office staff

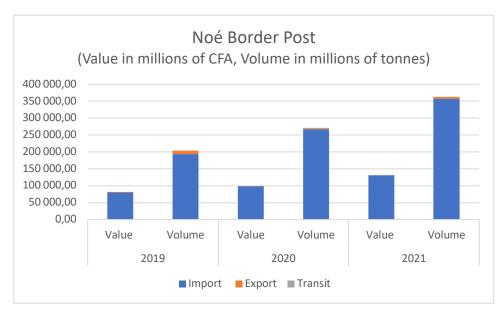


Figure 10 Trade volume and value at Noé border post, 2019-2021

2.2.2.5 Physical Infrastructure

Respondents indicated that the physical infrastructure at the Noé border post (Côte d'Ivoire), including roads and bridges, was in very good condition, around the border services location as well as away from the border post area. Parking areas for trucks and private vehicles were also described to be in good condition. Electricity is provided by the national electric company and water is obtained from a hydraulic pump. Fiber optic cable is available for telecommunication. Drainage of the border area is facilitated by land pipes, according to the respondents. However, in Elubo (Ghana) the situation is starkly different: 88% of the interviewees rated the road condition as "poor" or "very poor," and more than half of the interviewees rated Internet connectivity as poor and unstable. Drainage was also rated as very poor by almost half of the interviewees.

Table 20 Status of physical infrastructure at the Côte d'Ivoire-Ghana border posts (Noé and Elubo)

Dhariad Infrastructure	Situation		
Physical Infrastructure	Noé	Elubo	
Access roads	Very good	Very good	
Roads in the border area	Very good	Very bad	
Bridge	Very good	Good	
Parking	Satisfactory	Very poor	
Power supply	Satisfactory	Satisfactory	
Internet connection	Poor	Satisfactory/poor	
Water supply	Adequate	Good	
Generator	Adequate	Good	
Drainage	Adequate	Very Poor	
Weighbridge	Non-functional	Non-functional	
Cargo Scanner	Adequate	Very good	
Officers' housing	Poor	Very inadequate/Poor	
Others	-	-	

2.2.2.6 Soft Infrastructure

Respondents said that relationships among and between services were cordial and generally good, both at their border and with cross-border counterparts. They also declared that regular meetings facilitated cooperation at the Noé border post, but that there is no bilateral coordination committee. Nevertheless, they reported regular meetings between the two countries' services, which facilitated cooperation.

At the Elubo border post, respondents agreed that:

- Government was prioritizing the clearance of relief shipments based on a list of basic necessities and supporting the exemption or suspension of import duties and taxes for relief materials;
- Government (or agencies) provided for the processing of declarations of goods prior to arrival and then the release of goods upon arrival;
- Government (or agencies) encouraged the coordination of inspections carried out simultaneously by customs authorities and other government agencies;
- Government (or agency) advocate or support the exemption or suspension of import duties and taxes for relief materials.

2.2.2.7 Cargo Processing

According to respondents at the Elubo border post, there is a shared Customs interface (ICUMS) to handle cargo processing and GPS tracking devices are used to monitor the movements of trucks and their cargoes. It takes about four minutes to install the devices and about three minutes to uninstall them according to the interviewees. Respondents at the Noé border post did not have any information to share regarding the use of GPS devices.

However, based on the survey answers, there is a need for more training to optimize technology use by Customs agents to process shipments. Respondents indicated that agents, together with stakeholders using the border for business reasons (such as freight forwarders), needed basic IT training to use the system in place. However, respondents identified the lack of IT equipment as the main IT challenge at the border. Although there are scanners at the Noé and Elubo border posts, the weighbridges are nonfunctional.

Clearance Procedure

Table 21 Cargo control process at the Noé border post

STEP	LOCATION	ACTIVITIES
1	Border entrance	Vehicle acceptance including parts. The vehicle is taken to the scanner service.
2	Scanner service	Customs clearance with the receipt of the cargo and the accompanying documents, which are registered along with the driving licence and registration card. The freight forwarder receives the invoice and the export declaration. The freight forwarder then fills in the declaration, gets the DUT (Single Transport Document ¹²) from the OIC and the quality certificate from CODINORM (Côte d'Ivoire Normalization). After the scan, a report indicating that the cargo complies with the documents is issued, before the vehicle is taken to the OIC fleet pending the completion of the formalities.
3	DARRV (assessment service)	The customs service carries out a tax check (value, tariff species and origin). The custom services write the final report which will indicate the continuation of the procedure.
4	Secretariat of the Head of Office	Receipt of all documents, including commercial documents, obtained during the border crossing process. Registration and transmission to the head of office.
5	Revenue Department	The revenue department receives authorization from the head of office to collect duties and taxes. The department issues receipts and returns the file to the head of office.
6	Exit Authorization	The head of office checks the receipts with the evaluation results, before issuing the exit voucher.
7	IT Department	The IT department records the accounting statement and attachments including the receipt and the BAE ¹³ (customs clearance certificate).
8	Exiting the vehicle	The brigade service registers the BAE, goes to the OIC park ¹⁴ (Office Ivoirien des Chargeurs) for the exit of the vehicle following its report: seen out, date, name and signature of the customs officer.

¹² In French: Document Unique de Transport

¹³ In French: *Bon à enlever*

¹⁴ In French: Office Ivoirien des Chargeurs

Table 22 Cargo control process at the Elubo border post

STEP	LOCATION	ACTIVITIES
1	En route	Transit vehicles are electronically and remotely monitored by Integrated Customs System (ICUMS).
2	Border entrance	With the arrival of the transit vehicle at the border, the vehicle is registered in a procedure called "Gate in," while departure registration is called "Gate out." Goods in transit are never meant for local consumption.
		Goods in transit are only declared at the Border with a Regime or Code document from the Exporter.
		Transit goods are not subjected to examination except when necessitated by a special alert.
		Besides processing fees, no tax is paid on transit goods.
3	Customs	"Movement sheets" are issued to the exporter to match the number of checkpoints along the intended route. These sheets are declared at each checkpoint and entered into the ICUMS electronic monitoring systems to ensure effective tracking.
4	Exit point	GPS tracking device is attached to the vehicle.

ICT for Cargo Processing

Table 23 Customs, risk, and other systems at the Noé and Elubo border posts

		Noé	Elubo
	Type of System	SYDAM WORLD	ICUMS
Custom Management	Interconnectivity with neighbouring country	No	No
Systems	Training for CMS	Insufficient – basic IT training needed	Insufficient – basic IT training needed
	Cargo scanning service	Yes	Yes
Risk	X-ray inspection machine	Yes	No
Management	Raman spectrometer	No	No
Systems	Vehicles	No	No
	Reagent Inspection	No	No
	GPS Cargo tracking system	Yes ¹⁵	Yes
Other customs related systems	AEO System	Yes	Yes
	Bilateral bond guarantee	Yes	Yes
7,300	Automated Weighbridge	Yes (Not functional)	Yes (Not functional)

¹⁵ There is a GPS tracking system from Abidjan to Noé, but not from Noé to Abidjan. It is operated by the CCI-CI (in French: *Chambre de commerce et d'industrie de Côte d'Ivoire*)

2.2.2.8 Immigration Processing

There are several collection systems at the border between Noé and Elubo. On the Côte d'Ivoire side, the Noé post has a manual collection system with paper forms, an electronic collection system with the Migration Service database and the Border Management Information System (BMIS). In addition to these systems, there is a travellers' directory to track the travellers' history for contact tracing purpose in Noé. However, Noé register cross-border movements manually through registers. In Elubo, this additional system does not exist. This may be explained by to the shutdown of the border. Nevertheless, biometric registration with PISCES (Personal Identification Secure Comparison and Evaluation System) is in place at the Elubo border crossing.

On the Ghanaian side, the registration system does not track cross-border communities' daily movements, contrary to the policy applied in Noé. According to respondents, compliance with national legislation and international principles on migrant data is required at these two border crossings. The Advance Passenger Information (API) and Passenger Name Record (PNR) data are not applicable at these land border crossings.

Health personnel process and register health information manually (paper forms) and electronically at the two border crossings. The gathered information constitutes a database managed by the same services on both sides of the border. It should be noted that the Elubo post was closed at the time of data collection.

On the Ghanaian side, the time spent by travellers at the border was estimated at 5 minutes both before and after the pandemic. Similarly, at the Noé border crossing, the time for travellers to pass through the border post did not vary before and during COVID - 19: around 2 minutes. This difference in time between the two could be related to the closure of the neighbouring Elubo post.

2.2.2.9 COVID-19

Tables 24 and 25 below summarize the measures taken at the Noé-Elubo border posts and personnel perceptions on how much prepared they were to face COVID-19.

Table 24 Summary of COVID-19 measures implemented at the Noé-Elubo border

Measures	Noe	Elubo	Notes
Coordinated mechanism for COVID	Yes (Health pole)	Yes (Health pole)	
Sanitation Action Plan	Yes	No	
SOP	Yes	No	
Emergency Action Plan	Yes	Yes	
IEC Materials	Yes	No	
Communication Tool	No	No	
Hospital or Health Centre for the treatment	Yes	Yes	CS Noe CS Elubo
Quarantine facility	No	No*	*Quarantine facility previously implemented for Ebola Fever is now used as office/stock yard.
EPI	Yes	Yes	
Sanitation Equipment	No	No	
Hand Washing Station	Yes	Yes	
Toilets	No	Yes	
Transport (Ambulance)	No	No	

Table 25 Adequacy of COVID-19 response preparation at the Elubo and Noé border posts

	Was the border prepared in terms of:		
	Infrastructure Equipment Training		
Elubo	Partially	Partially	Fully
Noé	Noé Somewhat not Somewhat not Somewhat		Somewhat not

2.2.2.9.1 Planning and Coordination

At the Noé border post, the health response management is based on a coordination mechanism managed by the police and health services. Interestingly, coordination and planning are managed by the health services and the phytosanitary authorities, and the other services are not involved in coordination.

At the Elubo border post, coordination is handled by the health authorities. However, health services are overseeing operational coordination while immigration, border control and/or customs departments are responsible for the management and referral of suspected COVID-19 cases.

2.2.2.9.2 Public Health Measures

Emergency Action Plan/SOP

At the Noé border post, there is an emergency action plan which allowed for the deployment of health personnel and medical equipment. Despite the absence of an emergency committee to implement the plan, periodic meetings are organized by the platform that brings together all the heads of services stationed at the border. At the Noé border post for example, a simulation exercise for the management of a health threat had been carried out in the months preceding the report. The emergency action plan comprises a communication plan to reach all targets. In addition, a health monitoring committee was implemented at the border.

Technical capacities of health staff and non-health staff have been strengthened on barrier measures and other measures related to the fight against COVID-19. The implementation of public health measures is ensured by the National Institute of Public Hygiene (INHP).

The Noé border post can rely on SOPs and a referral system coordinated by the health authorities, the immigration service, the border police, and the customs.

As for Ghana's Elubo border post, there is a public health emergency plan for COVID-19. This plan comprises technical capacity building on COVID-19 public health measures for health staff as well as non-health staff such as customs and immigration. However, the Elubo border post does not have Standard Operating Procedures on COVID-19.

2.2.2.9.3 Risk Communication and Community Engagement

There are some Information, Education and Communication (IEC) materials at the Noé post, but the type of IEC materials available was not communicated. Screening staff have can communicate with the designated health centres with a distinction between infectious diseases including COVID-19 during the screening process.

There are no IEC materials on COVID-19 at the Elubo border post. The Elubo health centre is designated for the referral of suspected COVID-19 cases. Screening staff have a telephone to communicate with the designated centre and their contact information. Although the focal point contacts are not stationed at the border, the head of the health unit has the contact information of the competent authority at the neighbouring border. In case of emergency, the dedicated services (emergency/ambulance) can be contacted by cell phone. However, there is no mechanism for contacting the emergency service at the neighbouring border.

2.2.2.9.4 Monitoring

The Noé border post has a traveller monitoring system that is essentially managed by the health services. They use a declaration form to facilitate the processing of health information, as well as a system for alerting and referring travellers with symptoms of COVID-19 to quarantine facilities. There is a clinic in the neighbouring country, but no information on the name or contact of the responsible officer is available.

The Elubo border post has a temperature control system for travellers entering the country without a health declaration form and/or screening questionnaires.

2.2.2.9.5 Infection Prevention and Control / Personal Protective Equipment

The Noé border post has a control system, handwashing stations and PPE provided to border officials. The border post has screening and disinfection equipment but transportation is not available. In addition, border personnel have not been trained on the 2005 IHR.

A handwashing station and PPEs are available for first responders at the Eludo border post, but the quantities are insufficient. Cleaning and disinfection materials are also provided but in insufficient quantities. Additionally, there are no vehicle to transport patients and health personnel has not been trained on the 2005 IHR.

2.2.2.9.6 COVID-19 Alerts

The Noé border post did not have any information on the number of travellers identified as suspected cases in the month prior to the survey. However, screening activities were conducted jointly by the Ministry of Health and the National Institute of Public Hygiene (INHP).

At the Elubo border post, the control system for the identification of suspected, probable, or confirmed cases of COVID-19 has not recorded any cases at the border.

2.2.2.9.7 Screen Process – Communication

The Noé border post personnel has the contacts of the designated health centres since all services are organized in a platform. Toll-free numbers have been put in place to facilitate coordination and information exchange between stakeholders. A joint team has been set up for the management of possible cases and the Institute of Public Health is the main focal point. In addition to this system, the contact details of the focal points are posted at the border crossing point and the health services have the contacts of their counterparts in the neighbouring country. Mechanisms have been put in place to contact the emergency services of neighbouring countries, the head of the post gets in touch with his counterpart in Ghana whenever it is needed and when it is difficult, the administrative authority, i.e. the prefect, can provide support.

At the Elubo border post, screening staff communicate with the designated health centre through cell phones. These staff have a functional and reliable source of electricity to charge their phones/radios. Emergency/ambulance services are contacted by the health centre manager when needed.

2.2.2.9.8 Infrastructure and Equipment

Table 26 Equipment, facility space and transport at the Noé and Elubo border posts

At your border is (are) there	Noé	Elubo
Thermal camera	No	Yes
Portable infrared camera	Yes	Yes
Surgical masks	Yes	Yes
Disposable gloves	Yes	Yes
Protective visors	Yes	Yes
Hand sanitation gel	Yes	Yes
Handwashing stations	Yes	Yes
Designated area to screen travellers	Yes	No
Designated area to isolate sick travellers	No	No
Transportation for sick travellers	No	No

The Noé border post does not have a quarantine facility, screening or isolation areas. The suspected cases are directly referred to the health centre.

The Elubo border post does not have a quarantine and administrative detention facility.

Figure 11 COVID-19 infrastructure at the Elubo border post

















Movement of People

2.2.3 The Aflao-Kodjoviakopé Border-Crossing Point

2.2.3.1 General Overview

Located on the border of Ghana and Togo, the Aflao-Kodjoviakopé border post is the only international border in the world located within a capital city (Lomé, Togo). As the satellite image below shows, the border is compact, with joint operations consolidated within a roughly 500m long stretch of roadway.



Figure 12 Satellite view of the border crossing point at the Ghana-Togo border.

2.2.3.2 Border Crossing Office Elements

All key border control services are in place at the border crossing points on both the Aflao side and the Kodjoviakopé side. However, information regarding personnel was not available for the Kodjoviakopé side of the border (see table 27 below).

Table 27 Border personnel at the Ghana-Togo border (Aflao and Kodjoviakopé border posts)

	Aflao		Kodjoviakopé	
Office	# officers	Schedule	# officers	Schedule
Immigration	60-120	Every day, 6 am- 6 pm	Not available	Every day, 24h
Customs	150	Every day, 6 am- 6 pm	Not available	Monday-Saturday, 7:30 am-5:30 pm
Port Health	10-20	Every day, 6 am- 6 pm	Not available	Monday-Saturday, 24h
Plant and Animal Quarantine	2-5	Every day, 6 am- 6 pm	Not available	Every day, 24h
Phytosanitary	2	Every day, 6 am- 6 pm	Not available	Every day, 24h
Bureau of Standard ¹⁶	5	Every day, 6 am- 6 pm	Not available	Every day, 24h
Police	50	Every day, 6 am- 6 pm	Not available	Every day, 24h
Gendarmerie	15 (Ghana Army)	Every day, 6 am- 6 pm	Not available	Every day, 24h
ANER	Not available	Not available	Not available	Not available
OCTRIB	Not available	Not available	Not available	Not available
Veterinary Service	Not available	Not available	Not available	Not available
Commissariat ¹⁷	Not available	Not available		Not available
Others	5	Every day, 6 am- 6 pm		

 $^{\rm 16}$ A national body that establishes and monitors the use of various standards

¹⁷ Commissariat is a police force with a commissary-level ranked officer in charge, often attached to a municipality, while the police in Togo is a national-level force, with wider powers and missions.

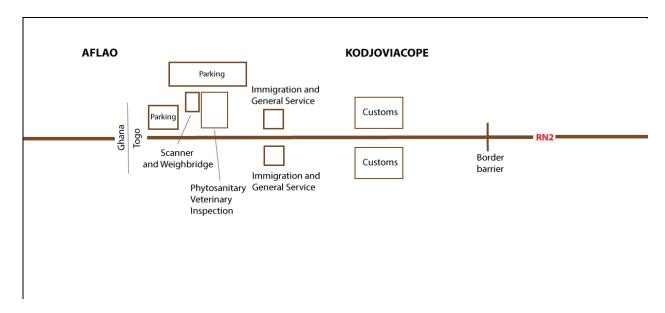


Figure 13 Simplified map of the Ghana-Togo border (Aflao and Kodjoviakopé border posts)

As shown in table 27 above, health personnel are deployed at the PoE and work the same hours as the police and immigration services at both sides of the border.

In addition to the traditional stakeholders involved in immigration and border management, there are other support services in Togo to reinforce the existing system. These include ANER (National Intelligence Agency¹⁸), OCTRIB (Central office to reduce illicit drug trafficking and money laundering¹⁹), the veterinary services, the general service, and the special commission. This multi-actor mechanism aims to strengthen effective management in the PoE in order to stop the spread of COVID-19.

2.2.3.3 Border Operation During COVID-19

Border crossing between Aflao and Kojoviacopé is partially operational, open to cargoes but closed to regular passenger traffic. Limited movement of persons was allowed with the derogatory approval.

2.2.3.4 Movement of Vehicles/People/Goods at the Border

Vehicles

There was an increase in heavy vehicle movements at the Aflao border post for both imports and exports from 2019 to 2020. From 2020 to 2021, even though exports continued to increase, the number of vehicles crossing for import of goods declined but remained higher than in 2019.

¹⁸ In French: Agence Nationale de Renseignement

¹⁹ In French: Office Centrale de Répression du Traffic illicite des drogues et du Blanchiment

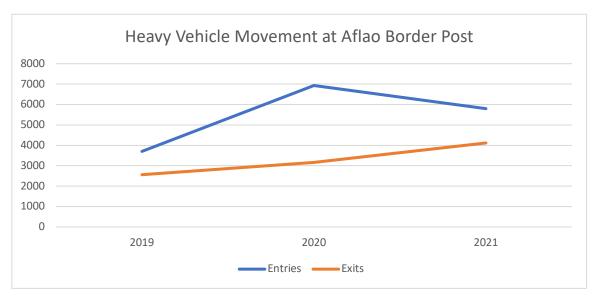


Figure 14 Heavy vehicle movement at the Aflao border post²⁰

People

Aflao is Ghana's busiest land border. Before the COVID-19 pandemic, in 2019, around 76,000 people entered and 37,000 departed Ghana via the Aflao border post. These numbers declined dramatically due to the pandemic: in 2020, only 9,508 people entered and 5,578 departed Ghana through this border post. 2021 saw another drop in numbers: 2,677 entries and 3,274 departures, as shown in table 28 below:

Table 28 Total of arrivals and departures per year at the Aflao border post, 2019-2021²¹

	Aflao		
Year	Arrivals	Departures	
2019	75,898	37,062	
2020	9,508	5,578	
2021	2,677	3,274	

Goods

Information on the specific volume of goods could not be collected. However, the details of the heavy vehicle movement provided gives an indication of the volume of goods moving across the border.

2.2.3.5 Physical Infrastructure

On the Ghanaian side of the border (Aflao), respondents indicated that the infrastructure is overall in good condition. Indeed, the roads at the border are in good condition – both at the border itself and leading up to it – as are bridges. Parking areas are paved and in good condition as well. Drainage was described as "satisfactory." Internet connection was described as "stable" and "good."

The Aflao border post is equipped with a weighbridge. However, it has not been functional for quite some time, according to one respondent. Unfortunately, information regarding the dates of installation and dysfunction of the weighbridge was provided in the answers to the survey. According to the survey,

²⁰ Source: Ghana Revenue Authority (Customs Division)

²¹ Source: Ghana Immigration Service

Ghanaian Roads and Highways is the operator of the weighbridge. There is an operational scanner at the border.

The physical infrastructure conditions on the Togolese side was described as "poor" and "very poor". Drainage was described as "very poor", and the Internet connection was rated as unstable and poor as well. There were mixed remarks on the condition of the road, parking areas and facilities. The weighbridge and scanner conditions were described as "very poor", and it was not clear whether they were functional or not.

Table 29 Status of physical infrastructure at the Ghana-Togo border (Aflao and Kodjoviakopé border posts)

	Condition	
	Aflao	Kodjoviakopé
Access road	Good	Poor
Roads in the border	Good	Poor
Bridge	Good	Very poor
Parking	Good	Satisfactory
Power supply	Satisfactory	Satisfactory
Internet connection	Good	Poor
Water supply	Satisfactory	Present but poor
Generator	Satisfactory	Poor
Drainage	Poor	Very poor
Weighbridge	Non-functional	Very poor
Cargo Scanner	Good	Very poor
Officer's housing	Poor, insufficient	Very poor
Others	Urgent need for office space	

2.2.3.6 Soft infrastructure

According to the surveys, there are protocols and procedures in place to guide the various services' activities at the Aflao and Kodjoviakopé border posts. The regular meetings serve as a primary mechanism to facilitate cooperation between the Customs services and other services, and between the Customs services and the private sector. In Aflao, however, respondents said these meetings did not occur regularly. It was unclear whether meetings were held at all. Relationships among agents and leadership of various services were described as good. Respondents indicated that their relationships with cross-border counterparts are generally cordial or good; however, meetings are rare.

Additional training on the basic use of computers and computer systems, focusing on the use of commonly available software for instance, is needed on both sides of the border according to respondents. IT training is also needed for private sector stakeholders. However, respondents agreed that the primary IT challenge at the border was the lack of IT equipment.

2.2.3.7 Cargo Processing

At Aflao, respondents overwhelmingly indicated that the goods clearance system was fully automated, but many said that there was not a shared IT system interface. Tables 30 and 31 below present the goods clearance process for the Aflao border post.

Clearance Procedure

Table 30 Cargo control process at the Aflao border post

STEP	LOCATION	ACTIVITIES
1	Customs office	Movement sheets are issued to the exporter, based on the number of check points within the entry and exit points. Each check point receives a movement sheet to confirm passage of the goods.
2	Customs office	Entries of all movement sheets are recorded through the ICUMS system for easy tracking and confirmation.
3	Exit point	At the exit point, a gate-out input is recorded into the ICUMS system to close the transaction.

Note: At the Aflao border post, there is an internal arrangement between customs officials and traders which allows for goods in transit to be brought into the PoE for reloading from Togo as it is more cost effective.

Table 31 Cargo control process at the Kojoviacopé border post²²

STEP	LOCATION	ACTIVITIES
1	Customs Point	Declaration and payment
2	Customs Office	Assignment to a circuit
3	Customs Office	Issuance of inspection certificate
4	Customs Office	Issuance of the BAE ²³
5	Customs Office	Request for exit of the goods
6	Exit Point	Actual exit
7		Stripping report
8		Transmission to the Head of Domestic Visits
9		File archiving

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²² Source: Information from interviews with freight forwarders and not official customs SOP

²³ In French: *Bon à Enlever*

ICT for Cargo Processing

Respondents said the use of GPS tracking devices was common: it takes about 10 minutes to install the devices and about 8 minutes to remove them in Aflao. In Kodjoviakopé, on the Togolese side of the border, the time to install and remove the devices appear to be somewhat better: respondents said it took on average between 3 and 5 minutes for either operation.

Respondents indicated that expected clearance times were usually respected, before and after COVID-19 measures were implemented. The graphic below shows their estimations for Ghana borders (Aflao on the left). For the Kodjoviakopé border post, respondents indicated that the processing time for cargoes – 24 hours – was the same before and during the pandemic.

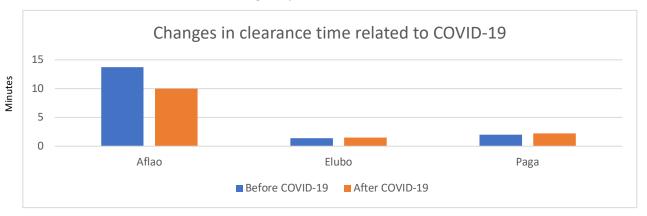


Figure 15 Changes in clearance time before and during the pandemic at Ghana's borders, in minutes.

Table 32 Customs, risk, and other systems at the Aflao border post

		Aflao	Kojoviacopé
	Type of System	ICUMS	SYDONIA WORLD
Custom Management Systems	Interconnectivity with neighbouring country	No	No
o,o.oo	Training for CMS	Yes, though basic IT refresher training would be helpful	Yes, though basic IT refresher training would be helpful
	Cargo scanning service	Yes	No
Risk	X-ray inspection machine	Yes	No
Management Systems	Raman spectrometer	Yes	No
-,	Vehicles	Yes	No
	Reagent inspection	Yes	No
	GPS Cargo tracking system	Yes	Yes
Other customs	AEO System	No	Yes
related systems	Bilateral bond guarantee	No	No
.,	Automated Weighbridge	No	

2.2.3.8 Immigration Processing

Aflao Border Post

The Aflao PoE does not have a border management information system. However, the biometric system PISCES was implemented and is used. However, there is no registration system for cross-border communities. National legislation and international data protection standards constitute the framework for the collection, storage, and use of information. In addition, Advance Passenger Information (API) and Passenger Name Record (PNR) data are not applicable at land crossings.

At the Aflao border crossing point, public health information on travellers is collected manually. Travellers also have access to applications to record their travel history, potential symptoms, and contact information. Health data is managed by the border health services. It was not possible to determine the exact time needed for crossing the border at the Aflao border post. Nevertheless, it was estimated at 5 minutes, both before and after the pandemic.

Kodjoviakopé Border Post

There are two systems of collection of travellers' data at the Kodjoviakopé border post: the manual collection system with paper forms and the electronic system based on a computerized database through the immigration service. In addition to these systems, there is an immigration registry to record travellers' profiles, indicating their departure, arrival, and duration of stay. However, there is no registration system for cross-border communities. The use of a biometric system from the Canadian Note Bank (CNB) was observed. The national legislation on data collection, storage complies with international standards.

Health data on travellers is collected by health authorities through forms. Collected health data is essentially managed by health services.

The duration of the border crossing varies; it depends on the stakeholders and the type of travel: ordinary travellers, transporters, traders, daily workers. It is estimated between 1 and 16 minutes.

2.2.3.9 COVID-19

The two following tables summarize the measures taken at the Aflao and Kojoviacopé border PoEs and personnel perceptions on how much they were prepared to face COVID-19. The following section provides details on these two topics.

Table 33 Summary of COVID-19 measures implemented at the Aflao-Kodjoviakopé border post

Measures	Aflao	Kodjoviakopé	Notes
Coordinated mechanism for COVID	Yes (Health Port)	Yes (Health Port)	
Sanitation Action Plan	No	No	
SOP	Yes	Yes	
Emergency Action Plan	Yes	Yes	Not functional (Togo)
IEC Materials	Yes	Yes	Insufficient
Communication Tool	No	Yes	Insufficient
Hospital or Health Centre for the treatment	Yes	Yes	
Quarantine facility	No	Yes	Located in a far location (Aflao)
EPI	Yes	Yes	Insufficient
Sanitation Equipment	Yes	No	
Hand Washing Station	Yes	Yes	
Toilets	Yes	No	Not enough toilets for travellers (Aflao)
Transport (Ambulance)	No	No	

Table 34 Adequacy of COVID-19 response preparation at the Aflao and Kodjoviakopé border posts

	Was the border prepared in terms of:				
	Infrastructure Equipment Training				
Aflao	Partially or fully	Partially or fully	Partially or fully		
Kodjoviakopé	Partially	Partially	Not prepared		

2.2.3.9.1 Planning and Coordination

At the Aflao border post, coordination is managed by the health service also overseeing an operational coordination mechanism. The other services, namely immigration, border control and/or customs, are involved in the detection, notification, management, and referral of suspected COVID-19 cases.

At the Kodjoviakopé border post, the immigration service oversees all questions related to border-crossing, at the border, while the management, detection and notification of suspected cases are essentially managed by Health Port. Health personnel are deployed on the same schedule as police and immigration personnel to conduct screening.

2.2.3.9.2 Public Health Measures

Emergency Action Plan

The Aflao border post has an emergency plan, and the health workers technical capacities were strengthened for public health measures for pandemic management. However, health and non-health personnel require additional and refresher training.

At the Kodjoviakopé border post, there is an action plan for health emergencies at the border level, but the plan is not functional due to lack of funding.

SOP

At the Aflao border post, SOPs are not available. However, officers are trained in the detection, notification, management, and referral of suspected COVID 19 cases.

At the Kodjoviakopé border post, there are SOPs but neither health nor non-health personnel received proper training.

2.2.3.9.3 Risk Communication and Community Engagement

Aflao Border Post

There are IEC materials, but not in sufficient quantity. The materials are used to inform travellers on COVID-19 risks. Screening staff have a telephone for communications with the designated health centre. Ketu South District Hospital is the designated health centre for Aflao. Infectious diseases and COVID-19 are subject to differentiated treatment from Aflao, with systematic isolation as soon as cases are suspected.

Kodjoviakopé Border Post

There are IEC materials at the Kodjoviakopé border post. The communication strategy relies on posters, stickers, large posters, large and illuminated billboards, loudspeakers to broadcast messages in French, English and local languages (Ewe, Kanye, Fon and Yorouba). Moreover, health and non-health personnel have received training on barrier measures. However, the border post needs capacity building.

2.2.3.9.4 Monitoring

Aflao Border Post

Travellers fill out a health declaration form and/or screening questionnaires. The Aflao Port Health has implemented procedures and facilities for alert and contact information checks for the referral of travellers with symptoms at the designated facility. There are SOPs at the border to guide personnel in carrying out their duties.

Kodjoviakopé Border Post

The surveillance equipment available at the border is essentially composed of thermo-flash, thermal camera, and laser thermometer. SOPs are in place at the Kodjoviakopé border post and the designated Health Centre for emergencies is located 3 km away from the border.

2.2.3.9.5 Infection Prevention and Control / Personal Protective Equipment

Aflao Border Post

There are handwashing stations, but in insufficient quantity. PPE, including visors, has been provided to first responders and border personnel at the border but in insufficient quantities. Personnel received training on how to use PPE. Similarly, cleaning and disinfection materials are provided but in insufficient quantity. As such, the results of staff training on the 2005 International Health Regulations are unclear. The PoE has running water, but no transportation means.

Kodjoviakopé Border Post

There are PPE, handwashing stations, cleaning, and disinfection equipment but no transportation means. Immigration officers have been trained in the proper use of PPE, but handwash stations and PPE is not available in sufficient quantities. The handwashing stations need to be replaced as they are damaged and

non-functional. Suspected cases that have been identified at the Kodjoviakopé border post vary between 42 and 198, while probable and confirmed cases have not been recorded.

2.2.3.9.6 COVID-19 Alerts

A system to identify suspected or confirmed cases is in place the Aflao border post, but these cases are not recorded.

The Kodjoviakopé PoE uses an alert mechanism which notifies health personnel for the referral of suspected cases in designated facilities.

2.2.3.9.7 Screen Process -Communication

Screening staff communicate with the designated health centre through cell phones. An electrical power source is available to charge staff phones/radios. When needed, emergency/ambulance services are contacted by the head of the Aflao health centre.

The screening staff present at the border uses telephone for communications.

2.2.3.9.8 Infrastructure and equipment

Table 35 Equipment, facility space and transportation at the Aflao at Kodjoviakopé border posts

Equipment for COVID Measure	Aflao	Kodjoviakopé
Thermal camera	No	Yes
Portable infrared camera	No	Yes
Surgical masks	Yes	Yes
Disposable gloves	Yes	Yes
Protective visors	No	No
Hand sanitation gel	Yes	Yes
Handwashing stations	Yes	Yes, but damaged and need replacement
Designated area to screen travellers	Yes	Yes
Designated area to isolate sick travellers	No	Yes, but not equipped
Transportation for sick travellers	No	No

Aflao Border Post

The Aflao border post does not have a quarantine facility or an administrative detention centre.

In addition, the border has a screening and isolation area but no means of transportation for confirmed and suspected cases, but there is a referral system to direct them to a closer health centre.

Figure 16 COVID-19 infrastructure at the Aflao border post





















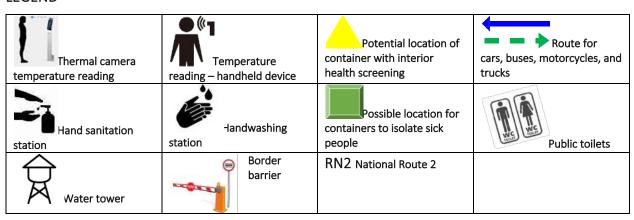
Kodjoviakopé Border Post

Kodjoviakopé has a quarantine facility, an administrative detention centre, and an isolation centre, but no transportation means. Despite the lack of logistical means, a system has been implemented for the referral of suspected cases to the health centre located at 3 km from the border

Figure 17 Sanitary equipment at the Kodjoviakopé border post



LEGEND



2.2.4 The Sanveecondji-Hillacondji Border-Crossing Point

2.2.4.1 General Overview

Operations at the Sanveecondji-Hillacondji border post seem to be somewhat smoother than other border posts as both countries (Benin and Togo) are francophone. The border post's configuration is quite compact and physical infrastructure is in overall good condition. However, there are significant deficiencies. Indeed, there was no generator available, toilets or water supply and accommodation was inadequate. The customs office is located about 5 Km from Hilacondji on Benin's side of the border, and 2 Km from Sanveecondji on Togo's side.

But these facilities will be integrated after the completion of the Joint Border Post (JBP). During the study period, the Sanveecondji-Hillacondji JBP was still under construction and not functional. The information collected in this chapter is thus the information of the each two-separated PoE before the construction of JBP was completed.



Figure 18 Satellite Photo of JBP Sanveecondji-Hillacondji

2.2.4.2 Border Crossing Office Elements

Both sides of the border have fully functional offices for Immigration, Customs, Port Health, Plant and Animal Quarantine, Phyto sanitary, Standards Bureau, Police and Gendarmerie, all working from 7 am to 7 pm daily.

Table 36 Border personnel at the Benin-Togo border post (Sanveecondji and Hillacondji)

	Sanveecondji			Hillacondji
	# Officers	Schedule	# Officers	Schedule
Immigration	10-20	Every day, 7 am-7 pm	25	Every day, 7 am-7 pm
Customs	10-20	Every day, 7 am-7 pm	25-35	Every day, 7 am-7 pm
Port Health	5-10	Every day, 7 am-7 pm	12	Every day, 7 am-7 pm
Plant and Animal Quarantine	4	Every day, 7 am-7 pm	4	Every day, 7 am-7 pm
Phytosanitary	2	Every day, 7 am-7 pm	6	Every day, 7 am-7 pm
Bureau of Standard	3-5	Every day, 7 am-7 pm	5	Every day, 7 am-7 pm
Police	20-30	Every day, 7 am-7 pm	25-35	Every day, 7 am-7 pm
Gendarmerie	15	Every day, 7 am-7 pm	15	Every day, 7 am-7 pm
Others -Merchants Association -Freight Forwarders Association -Carriers Association - Driver Association -Administrative and local authority -Customary and religious authority	5	Every day, 7 am-7 pm	5-10	Every day, 7 am-7 pm

Hillacondji Border Post

Respondents indicated that Hillacondji border post had banking facilities within the Customs service, with three banks providers. Additionally, most of border services accept cash payments.

Health personnel are deployed at the PoE. However, those services do not have the same working hours.

Sanveecondji Border Post

In addition to these traditional stakeholders involved in immigration and border management, other support services are present in Togo to reinforce the existing systems: ANER, OCTRIB, the veterinary services, the general service, and the special commission for COVID-19management.

2.2.4.3 Border Operation During COVID-19

The Hillacondji PoE was reported to be fully operational, and operational capacities were not impacted by the COVID-19 crisis. The PoE operates 24/7.

On the side of the border, the Sanveecondji PoE is partially operational, open to cargo movements but closed to regular passenger traffic. Limited movement of persons was allowed with the necessary derogatory approval.

2.2.4.4 Movement of Vehicles/People/Goods at the Border

Vehicles

No information has been collected as information could not be shared without authorization from Customs Headquarters.

People

The Hillacondji PoE has an average of 675 inbound travellers per day and 20,250 inbound travellers per month, outside the border communities. On the outbound side, an average of 913 outbound travellers per day and 27,396 outbound travellers per month are recorded. The figures in the table below are estimations shared by the immigration personnel at the border.

Table 37 Average number of travellers entering and exiting the country²⁴

	Number of travellers Entries per day Entries per month Exits per day Exits per month				
Minimum	275	8,250	266	7,980	
Maximum	1,000	30,000	1,500	45,000	
Average	675	20,250	913	27,396	

No information on the number of travellers was collected for the Sanveecondji PoE as information could not be shared without authorization from Customs Headquarters.

Goods

Information on this issue has not been collected at either border post since information could not be shared without authorization from Customs Headquarters.

2.2.4.5 Physical Infrastructure

At the Hillacondji border post, respondents generally agreed that the roads providing access to the border services and the access road to the border were in satisfactory condition. But their ratings of the condition of bridges were mixed. Stakeholders declared that there were small parking areas for private vehicles and official vehicles and a large parking area for large vehicles that could accommodate from 100 to 200 trucks inside the JBP. The Benin National Water Company provides water at the border and GSM mobile cellular service is available. Most respondents indicated poor drainage at the border, and no accommodation facilities on both sides of the border.

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²⁴ Source: OIM Survey, December 2021 to January 2022

Table 38 Status of physical infrastructure at the Togo-Benin border (Sanveecondji and Hillacondji border posts)

Dhariad Information	Cond	Condition		
Physical Infrastructure	Sanveecondji	Hillacondji		
Access road	Satisfactory	Satisfactory		
Roads in the border	Satisfactory	Satisfactory		
Bridge	Poor	Poor		
Parking	Present	Present		
Power supply	Present	Present		
Internet connection	Present	Present		
Water supply	Satisfactory	Present		
Generator	No generator	No generator		
Drainage	Poor	Poor		
Weighbridge	Satisfactory	Satisfactory		
Cargo Scanner	Functional	Functional		
Officer's housing	No accommodation	No accommodation		
Others	No public toilets	No public toilets		

2.2.4.6 Soft Infrastructure

Respondents at the Hillacondji border post unanimously agreed that the services at the border had good working relationships and said they met regularly to discuss issues. But most indicated the absence of a border coordination committee. While they described relations with their counterparts on the other side of the border as good and that regular meetings did occur, there was no bilateral border coordination committee.

2.2.4.7 Cargo Processing

Clearance Procedure

The goods clearance process at the Hillacondji border post is fully automated and agents and private freight forwarders were adequately trained to use the IT equipment of the automated system. However, the IT systems interface is not a shared one.

According to the survey, the border post uses SYDONIA World, which is financed by the Government of Benin. However, the system seems to be archaic and works very slowly. The survey result shows that SYDONIA World is connected to the custom system of Government of Niger and financed by the UN Agency for Trade and Development. The Benin systems are also connected to the Togolese systems, but several respondents said that connection is not currently functional.

According to respondents, GPS-enabled devices are used to track the cargo, a system managed by Benin Control. Respondents said it takes about 15 minutes to install the GPS tracking device and about 30 minutes to remove it.

Most respondents said agents and private freight forwarders can receive basic IT training and refresher training. The primary IT challenge at the border was the lack of IT equipment.

As the graphic below illustrates (Figure 19), processing time at the Hillacondji border post doubled during the pandemic, increasing from 26 hours before the pandemic to 50 hours during the pandemic.

Table 39 Cargo control process at the Hilacondji border post

STEP	LOCATION	ACTIVITIES
1	Single window for	Announcement of the trip at the GUCE.
	foreign trade (GUCE ²⁵)	Request for the Certificate of Customs Verification ²⁶ (AVD).
		Trader presents documents to customs.
		Determination and reconciliation of the value of the goods.
		Receipt of the invoice with the Single Fee Schedule ²⁷ (BFU) number.
2	Bank	Payment at the bank.
3	GUCE/SEGUB	Presentation of the receipt to the inspector for verification at the GUCE or SEGUB ²⁸ counter.
4	Benin Control	Submission of files for tracking.
5	Benin Control	Installation of the tracking device and exit from the park.

Table 40 Cargo control process at the Sanveecondji border post²⁹

STEP	LOCATION	ACTIVITIES
1	Customs Office	Declaration and payment
2	Customs Office	Assignment to an inspector
3	Customs Office	Issuance of inspection certificate
4	Customs Office	Issuance of the BAE ³⁰
5	Customs Office	Trader requests for release of the goods
6	Exit	Exit
7		Report (inventory) of consignments
8		Transmission to the Head of Domestic Visit
9		File archiving

²⁵ In French: Guichet unique du commerce extérieur

²⁶ In French: Attestation de Vérification Documentaire

²⁷ In French: Bordereau des Frais Uniques

²⁸ Société d'Exploitation du Guichet Unique du Bénin

²⁹ Source: Information from interviews with freight forwarders and not official customs SOP

³⁰ In French: *Bon à Enlever*

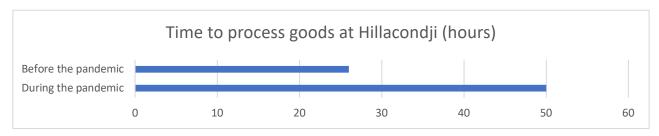


Figure 19 Time to process goods, per hour, at Hillacondji

ICT for Cargo Processing

A modern weighbridge is available at the Hillacondji border post. One stakeholder indicated the weighbridge was installed by ECOWAS and can weigh vehicles up to 150 tons. The border post also has a scanner.

At the Sanveecondji border post, the information on the ICT for Cargo Processing could not be collected because administrative procedures required authorization from customs service's headquarters.

Table 41 Customs, risk, and other systems at Hillacondji and Sanveecondji

		Hillacondji	Sanveecondji
Custom	Type of System	SYDONIA WORLD	ASYCUDA WORLD
Management	Interconnectivity with neighbouring country	Yes	Yes
Systems	Training for CMS	n/a	n/a
	Cargo scanning service	Yes	n/a
Risk	X-ray inspection machine	Yes	n/a
Management	RISK	No	n/a
Systems	Vehicles	No	n/a
	Reagent inspection	Yes	n/a
Othor	GPS Cargo tracking system	Yes	n/a
Other customs	AEO System	No	n/a
related	Bilateral bond guarantee	No	n/a
systems	Automated Weighbridge	No	n/a

2.2.4.8 Immigration Processing

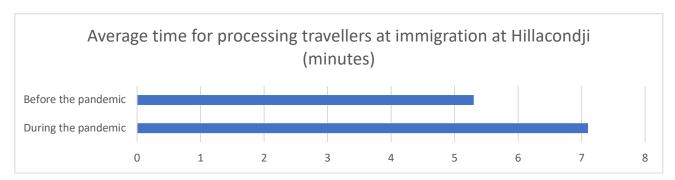


Figure 20 Average time to process travellers at Immigration at Hillacondji

Hillacondji

The PoE does not have a border management information system (BMIS) or a biometric system. Travellers at the PoE are generally not asked to download or access applications to record their travel history, potential symptoms, and contact information.

The procedure to evaluate the volume of travellers is based on observation; there is no check-in system for cross-border community movements. Process time at the PoE was 5 minutes before the pandemic and it is currently 7 minutes, a difference of 2 minutes. This can be justified by the passage of people to the handwash station and social distancing measures that are in place.

<u>Sanveecondji</u>

The PoE does not use a biometric system and travellers are not required to download or access applications to record their travel history, potential symptoms and contact information. In addition, traveller registration is paper-based data entry, data logging, etc. The cross-border community movements are not formally monitored or recorded. The collection, storage and use of public health information is based on national legislation and international data protection principles.

2.2.4.9 COVID-19

The table below summarizes the measures taken at Sanveecondji-Hillacondji border post, which are detailed in the following section.

Table 42 Summary of COVID-19 measures implemented at Togo-Benin border (Sanveecondji-Hillacondji)

Measure	Hillacondji	Sanveecondji	Notes
Coordinated mechanism for COVID	Yes (Health Port)	Yes (Response committee)	
Sanitation Action Plan	Yes		
SOP	No	No	
Emergency Action Plan	Yes	Yes	
IEC Materials	Yes	Yes	
Communication Tool	Yes	Yes	
Hospital or Health Centre for the treatment	Yes	Yes	
Quarantine facility	No	Yes (Government authority)	
EPI	Yes	Yes	
Sanitation Equipment	Yes	Yes	
Hand Washing Station	Yes	Yes	
Toilets	No	No	
Transport (Ambulance)	No	No	

Table 43 Adequacy of COVID-19 response preparation at the Sanveecondji and Hillacondji border posts

	Was the border prepared in terms of:				
	Infrastructure Equipment Training				
Sanveecondji	reecondji Partially Partially Partially				
Hillacondji	Partially	Not prepared	Partially		

2.2.4.9.1 Planning and Coordination

Hilacondji Border Post

Coordination with the health authorities is carried out by the health services. There is an operational coordination mechanism led by this health cluster to harmonize the COVID-19 response. Health workers are not the only ones involved in COVID-19 management: immigration, border control and/or customs structures are also involved in the detection, notification, management, and referral of suspected COVID-19 cases.

Sanveecondji Border Post

Although there are several departments at the PoE, the immigration department is responsible for coordination with the health authorities. In addition, there is an operational coordination mechanism at the PoE for the public health COVID-19 response. The mechanism is managed by the response committee created for this purpose. Nevertheless, the detection and notification, management and referral of suspected cases are essentially managed by the health authorities.

2.2.4.9.2 Public Health Measures

Emergency Action Plan

At the Hilacondji PoE, an official public health emergency plan for COVID-19 and health staff received partial training on public health measures related to COVID-19. In addition to the health staff, the Grand Popo town hall personnel received partial training on public health measures related to the COVID-19 pandemic. However, more training on public health is needed for the services present at the PoE.

At the Sanveecondji PoE, there is an official public health emergency plan for COVID-19 and health staff at the PoE have been fully trained on public health measures related to COVID-19. In addition to the health personnel, other departments such as immigration, customs, general police, veterinarians, and forestry officers have been fully trained on public health measures related to the COVID-19 pandemic.

SOP

The Hilacondji PoE does not have Standard Operating Procedures (SOPs) for the detection, notification, management, and referral of suspected COVID-19 cases.

There are no SOPs at the Sanveecondji PoE for the detection, notification, management, and referral of suspected COVID-19 cases.

2.2.4.9.3 Risk Communication and Community Engagement

Hilacondji Border Post

At the Hillacondji PoE, there are some IEC materials such as posters for risk communication and to provide travellers with clear information on COVID-19. However, the PoE needs assistance with IEC materials and risk communication strategies.

Designated health centres, close to the Hillacondji PoE, were set up in 2020 to refer suspected COVID-19 cases. These designated centres are Agoué, Grand Popo and Hillacondji, which mostly treat infectious diseases. Nonetheless, screening staff do not have communication means with the designated health centres. The 3 centres do not present the same health level. Grand Popo is the most equipped and is run by a doctor, acting as head of the centre. Agoué and Hillancondji are nurses' centres.

The PoE has the contact information for the designated health centres. In addition, the head of the health centre has the contact information of the competent authority at the corresponding PoE in the neighbouring country. In case of emergency, the dedicated services (emergency/ambulance) are usually contacted by cell phone. Personnel at the Hillacondji border post indicated the lack of a standardized mechanism or communication channel to contact the emergency service in the neighbouring country. Yet, the Head Doctor of the Grand Popo health centre indicated that the mechanism did exist. In case of emergency, the Head Doctor is contacted by the Hillacondji border personnel and is responsible for informing the local coordinator based in Come (Benin). In turn, the local coordinator informs his counterpart in Togo.

Sanveecondji Border Post

The PoE has some IEC materials on risks and provide information to travellers about COVID-19. The IEC materials are mainly stickers in French, Ewe and Kanye. These materials are not available for border communities.

The Prefectural Aneho Health Centre is the designated health centre for COVID-19 cases referrals by the PoE. The PoE has the contact information of the centre, which does separate COVID-19 and other infection diseases cases. The existence of a mechanism for the PoE authorities to contact their peers in

neighbouring countries was not clear. In case of emergency, the dedicated services are contacted by phone, the head of the health unit being in charge.

2.2.4.9.4 *Monitoring*

Hillacondji Border Post

The PoE has a system in place to monitor the temperature of incoming travellers, but travellers do not systematically fill in health declaration forms and/or screening questionnaires. There are no procedures in place to verify alerts issued to the PoE at the health centre level and the PoE does not have the contact of the quarantine area or facility for the referral of travellers with symptoms. However, there is one designated health centre (Hillacondji health centre) at the border located 500 metres and 10 minutes away from the PoE. This health centre has running water and is spacious enough for social distancing but does not provide good ventilation to prevent the spread of COVID-19. In addition, the Centre Hospitalier Préfectoral d'Adjido is located at the border with the neighbouring country, in the locality of Aného, which is about 1 km from the PoE. It takes take 5 minutes for the emergency services to reach the hospital.

Sanveecondji Border Post

There is a surveillance system with PPE equipment for identification of suspected and/or confirmed cases of COVID-19: thermometers to measure the temperature of travellers at the PoE. The surveillance equipment available at the PoE is essentially composed of thermo-flash, thermal camera, laser thermometer and thermo scanners.

In addition, a designated health centre (Préfectoral health centre Aneho) is located 3 km from the PoE but no procedures nor resources are in place to verify alerts issued at the PoE. The PoE has the contact information for the quarantine area or facility for the referral of travellers with COVID-19 symptoms.

2.2.4.9.5 Infection Prevention and Control / Personal Protective equipment

Hillacondji Border Post

There are handwashing stations at the PoE. PPE (except protective visors, thermal imaging cameras, and portable infrared thermometers), cleaning, and disinfecting equipment have been provided, yet in insufficient quantities to first responders at the border. However, the PoE does not have vehicles to transport sick travellers. The staff has not received general training on the International Health Regulations (IHR) of 2005, but received limited training in the proper use of surgical masks, hydro-alcohol gel, and washing stations.

Sanveecondji Border Post

The PoE has handwashing stations as well as cleaning and disinfecting equipment. However, the PoE does not have PPE and the staff are not trained on their correct use. Additionally, the PoE does not have a vehicle to transport sick travellers. Health staff indicated that they have been trained on the 2005 International Health Regulations (IHR).

2.2.4.9.6 COVID-19 Alerts

At the time of the survey – January 2021 – respondents said that no suspected, probable, or confirmed cases of COVID-19 had been recorded at the Hillacondji PoE within the last 30 days.

On the other hand, the PoE Sanveecondji had registered suspected, probable, or confirmed cases of COVID-19 among travellers within the last 30 days preceding the survey, but did not communicate the related figures.

2.2.4.9.7 Screen Process - Communication

<u>Hillacondji Border Post</u>

Screening staff communicate with designated health centres by telephone through an integrated system (corporate community) that allows for zero exchange costs thanks to the public authorities' support. The screening staff connects to the local SBEE³¹ (the Electrical Energy Benin Company) power grid available in the PoE. This grid is the only functional and reliable source of electricity to charge their phones/radios.

The PoE does not have the contact information for the designated health centres or the focal points. Also, the head of the Health Cluster does not have the contact information for the competent authority at the corresponding Entry Point in the neighbouring country. The emergency/ambulance services are contacted by cell phone exclusively by the health workers and in particular by the head doctor who is the authorized person.

Sanveecondji Border Post

There is nothing in place for the screening personnel to communicate with the designated health centre. The sampling room used by these staff is connected to the electrical system of the PoE. However, electricity cuts are frequent. The head of the health centre is the person authorized to contact the emergency service if needed.

2.2.4.9.8 Infrastructure and Equipment

Table 44 Equipment, facility space and transport at the Hillacondji and Sanveecondji border posts

Equipment for COVID Measure	Sanveecondji	Hillacondji
Thermal camera	No	No
Portable infrared camera	No	No
Surgical masks	No	Yes
Disposable gloves	No	Yes
Protective visors	No	No
Hand sanitation gel	No	Yes
Handwashing stations	No	Yes
Designated area to screen travellers	Yes	No
Designated area to isolate sick travellers	Yes	No
Transportation for sick travellers	No	No

Hillacondji Border Post

There is no quarantine facility at the Hillacondji PoE. The assigned existing quarantine facility (the Millenium Popo Beach Hotel and Hotel Bel AZUR) is distant from the PoE. Border agencies such as customs and immigration do not refer COVID-19 cases to this quarantine facility. In addition, there are no administrative detention centres used as isolation area for COVID-19 cases.

There is no isolation and screening area or means of transportation available to reach the facilities outside the PoE However, there is a referral system for suspected COVID-19 cases to a nearby health centre (Hilacondji Health Centre), provided by the health authority, and to a lesser extent by immigration.

³¹ In French: Société Béninoise d'Énergie Électrique

Sanveecondji Border Post

There are quarantine facilities at the PoE and they are managed by the state authorities. Staff at the PoE refer suspected COVID-19 cases to these facilities.

Despite the lack of logistics, there is a system for suspected cases referral to a nearby health facility (Prefectural Health Centre of Aneho) through the health services at the PoE.

2.3 ACCRA-OUAGADOUGOU

2.3.1 General Overview

The Accra-Ouagadougou corridor is approximately 983 km long, stretching from north to south and facilitating the movement of people, goods, and vehicles between the Port of Tema (Ghana's busiest port, located outside of Accra) and the Burkinabe capital, Ouagadougou, as well as the capital inland dry port, Ouagarinter. Border formalities are implemented at the Paga-Dakola border crossing. The Paga-Dakola border crossing is possible through several control offices implemented along an approximately 2 km stretch. As the two cooperating countries use a different official language (French on the Burkinabe side, English on the Ghanaian side) border-crossing coordination is challenging for both sides of the border.

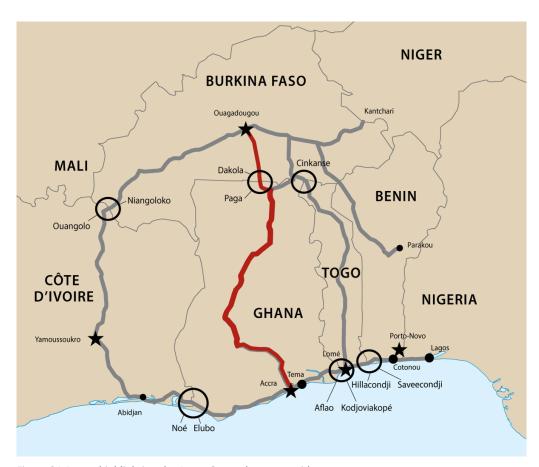


Figure 21 A map highlighting the Accra-Ouagadougou corridor.

2.3.2 The Paga-Dakola Border Crossing Point

2.3.2.1 General Overview

The Paga-Dakola border facilitates the movement of goods, vehicles and people between Ghana and Burkina Faso. The use of English on the Ghanaian side and French on the Burkinabe side of the border makes close coordination among and between multiple stakeholders challenging. The prohibition of narcotics in recent years and continued security issues in Burkina Faso due to jihadist movements have led to heightened security concerns at the border.

2.3.2.2 Border Crossing Office Elements

At the Paga-Dakola crossing point, all key border functions have their offices located at the border as shown in table 45 below. However, Police Officers are only stationed on the Dakola side, while the Plant and Animal Quarantine and Food and Drugs Authority is only stationed on the Paga side of the border.

Table 45 Border personnel at the Ghana-Burkina Faso border (Paga and Dakola)

	Paga		Dakola	
Office	# Officers	Schedule	# Officers	Schedule
Immigration	25-35	Every day, 6 am-6 pm	61	Every day, 7 am-7 pm
Customs	10-20	Every day, 6 am-6 pm	11	Every day, 7 am-7 pm
Port Health	5	Every day, 6 am-6 pm	6	Every day, 7 am-7 pm
Plant and Animal Quarantine	3-5	Every day, 6 am-6 pm		
Phytosanitary	2	Every day, 6 am-6 pm	2	Every day, 7 am-7 pm
Bureau of Standard	2	Every day, 6 am-6 pm	1	Every day, 7 am-7 pm
Police			2	Every day, 7 am-7 pm
Gendarmerie/Military	0-2	Every day, 6 am-6 pm	2-5	Every day, 7 am-7 pm
Food & Drugs Authority	3-5	Every day, 6 am-6 pm		
Others	5 (Narcotics)	Every day, 6 am-6 pm	3	Every day, 7 am-7 pm
Others	5 (Narcotics)	Every day, 6 am-6 pm	3	Every day, 7 am-7 pm

Health professionals are deployed at the PoE with the same working hours as the police and immigration services at both borders.

Respondents from both sides of the border said banking services were available inside the Customs facilities. However, the custom services do not accept cash payments.

Dakola Point of Entry (Burkina Faso-Ghana)

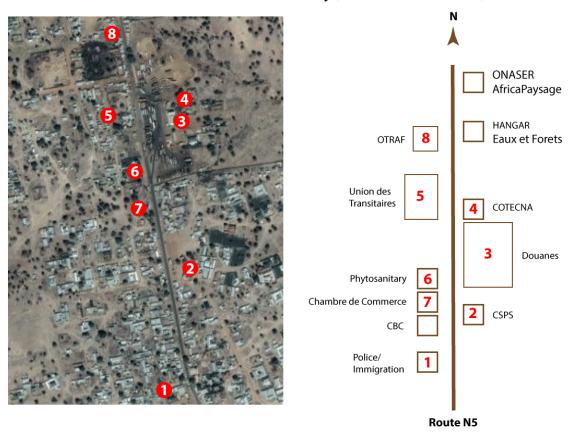


Figure 22 Annotated Paga-Dakola satellite map

2.3.2.3 Border Operation During COVID-19

The PoE is partially operational following the COVID-19 pandemic on both sides of the border at the Dakola and Paga border posts.

2.3.2.4 Movement of Vehicles/People/Goods at the Border

Vehicles

According to the graphic below (Figure 23), which shows the heavy vehicle movements at the Paga border post, this traffic was declining before the pandemic. The pandemic does not appear to have changed that trend significantly.

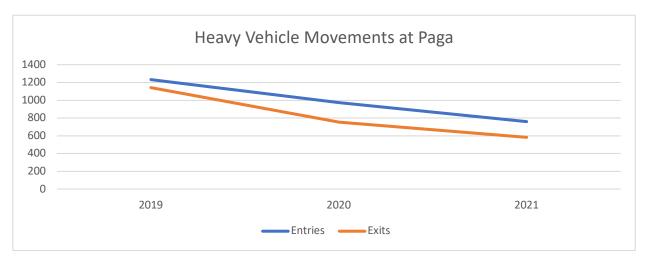


Figure 23 Heavy vehicle movement at the Paga border post

People

Statistics show the clear impact of border closures on the movement of people. In 2019 - before the COVID-19 pandemic - Paga border posts authorities recorded nearly 14,000 arrivals and around 12,500 exits at the border. Since the pandemic, the border post has seen a significant drop in number of people crossing the border. In 2020, only 2,093 arrivals and 1,645 departures were recorded. The numbers further dropped in 2021, with only 222 recorded arrivals and 754 departures. Unfortunately, daily and monthly entries and exits from Dakola were not available during this survey.

Table 46 Annual total of arrivals and departures at the Paga border post (Ghana-Burkina Faso border), 2019-202132

	Paga		
Année	Arrivals	Departures	
2019	13,876	12,465	
2020	2,093	1,645	
2021	222	754	

Goods

Table 47 below presents trade volume at this border post over the last three years (2019-2021). Despite the COVID-19 pandemic, trade volumes increased at the Paga-Dakola border, with a more significant increase from 2020 to 2021, as volumes more than doubled compared to the figures recorded in 2019 – 2021.

Table 47 Trade volume at the Dakola border post, 2019-2021³³

	Number of vehicles	Net weight (Kg)
2019	662	19,117,276
2020	841	23,235,829
2021	1,467	44,796,769

³² Source: Ghana Immigration Service

³³ Source: Government of Burkina Faso

Table 48 below shows the nature of trade is illustrated in the table below. Trades are mostly comprised of imports to Burkina Faso.

Table 48 Exports and imports at the Dakola border post³⁴

	2019 2020		2019		2020			2021	
	Vehicles	Weight (millions of Kg)	Value (millions of CFA)	Vehicles	Weight (millions of Kg)	Value (millions of CFA)	Vehicles	Weight (millions of Kg)	Value (millions of CFA)
Exports	53	2.21	612.27	14	1.94	128.46	24	4.62	1,348.84
Imports	19,775	224.37	19,281.28	18,460	252.85	19,414.85	16,367	378.84	33,609.25

2.3.2.5 Physical Infrastructure

Roads are in poor condition the Paga-Dakola border post, but bridges are in overall good condition, according to the respondents. Parking areas are in satisfactory or good condition and access to electricity was rated as satisfactory. Similarly, Internet connectivity was described as satisfactory. Water supply was rated as satisfactory, and drainage was rated as good.

There is no weighbridge at the Paga border post, but there is a scanner in working condition. There is neither a weighbridge nor a scanner on the Dakola side of the border.

74

³⁴ Source: Government of Burkina Faso

Table 49 Status of physical infrastructure at the Ghana-Burkina Faso border (Paga and Dakola border posts)

Dh i I for a house	Condition			
Physical Infrastructure	Paga	Dakola		
Access road	Poor	Very poor		
Roads in the border	Poor	Very poor		
Bridge	Good	Poor		
Parking	Good	Poor		
Power supply	Satisfactory Satisfactory			
Internet connection	Satisfactory Poor			
Water supply	Satisfactory Poor			
Generator	Satisfactory	Satisfactory		
Drainage	Good Satisfactory			
Weighbridge	None	Non-functional		
Cargo Scanner	Good	None		
Officer's housing	ficer's housing Very poor / non-existent Very poor / in:			
Others	Lodging needed Lodging needed			

2.3.2.6 Soft infrastructure

Respondents at the Paga border post said they were not aware of any mechanism to facilitate cooperation between Customs and other services, nor between Customs and the private sector. Nevertheless, respondents said the relationships at the border among agencies were generally good.

Respondents indicated that their relationships with cross-border counterparts are generally cordial or good. Most respondents declared that no meetings took place between cross-border counterparts.

About a third of respondents at the Paga border post indicated not being familiar with the Customs procedures for goods in transit. Others described basic procedures (examination of documents, cargo checks, escorts). They also mentioned the use of GPS tracking devices.

2.3.2.7 Cargo Processing

Respondents at the Paga border post said that the goods clearance system was fully automated, but they said there was no shared IT systems interface between Paga and Dakola. Respondents said the Integrated custom management system (ICUMS) was used at the Paga border post, while SYDONIA WORLD Customs system is used at the Dakola border post.

Clearance Procedure

The agents and/or goods' owners get the required documents and certificates of approval and examinations from the respective stakeholders such as:

- a) Food and Drugs Board (FDB) for Goods that contain processed foods;
- b) Forestry Commission for Wood;
- c) Plant and Protection Regulatory Services (PPRS) for raw foods;
- d) Veterinary Services for livestock;

e) Bureau of National Investigations for explosives.

They attach to their declaration forms, invoices and waybills and present all the documents to the Customs.

Table 50 Cargo control process at the Paga border post

STEP	LOCATION	ACTIVITIES
1	Customs	Acquire the required documents (i.e. waybill, bill of lading and invoices and letters of commitment (LOC)) and receipts from the declarant.
2	Customs	Import/Export Declaration using the Integrated Customs Management System (ICUMS) attaching the title documents.
3	Customs	The examination officers conduct an examination of the goods after the declarant presents the Imports/Exports declaration.
4	Customs	Goods are released after examination confirms the goods as on the declarations.

Table 51 Cargo control process at the Dakola border post

STEP	LOCATION	ACTIVITIES
1	Customs office	Upon arrival at the Dakola office, the transporter must present the cargo and its accompanying documents to the Customs agents, who then confirm its identification and register its arrival.
		The goods are sorted according to their origin and destination:
		Scenario 1: Merchandise originating from the Ghanaian market (Ghanaian products)
		Scenario 2: Merchandise that has been obtained at the Port of Accra (Tema) or the Port of Takoradi (products originating from outside Ghana)
		Goods from the Ghanaian market (Scenario 1): After identification and control, the documents are handed over to the customs declarant appointed by the carrier and recorder into the SYDONIA WORLD computer system. The IT system arbitrarily assigns the declaration to a verifier. The verifier assures that the information in the documents is accurate and in conformity with the actual cargo. If the verification is correct, the declaration is liquidated, and a transit document called a T1 is generated.
		Goods obtained at the Port of Accra (Tema) or Takoradi (Scenario 2): The declaration and the T1 document are established at Abidjan via connection. Accordingly, once the vehicle arrives, the Customs service proceeds to a notification of passage after implementing customary controls (ensuring the seal on the truck has not been broken).
2	Cashier	After verification followed by liquidation, the declaration is transmitted to the cashier for payment of applicable duties and taxes.
3	Exit point	The trucks are assigned a Customs escort or assembled into a convoy. The use of a Customs escort applies to sensitive merchandise according to an established list defined by a service note. The head of the service can put other merchandise under Customs escort if it is determined that its value to the public treasury justifies such treatment. Subsequently, the declaration is issued to the Brigade Section to establish appropriate escort and convoy paperwork.
		If the cargo is under Customs escort, a Customs agent is assigned to the escort.
		For vehicles in the convoy, the documents are handed over to the customs declarant who in turn forwards them to the driver.
4	Exit	The driver leaves the Joint Border Post and continues towards the final destination (Ouagadougou or other location).

Respondents estimated clearance times before and after COVID-19 measures were implemented. The graphic below (Figure 24) presents their estimations. The table shows that there was no significant impact on clearance time because of COVID-19.

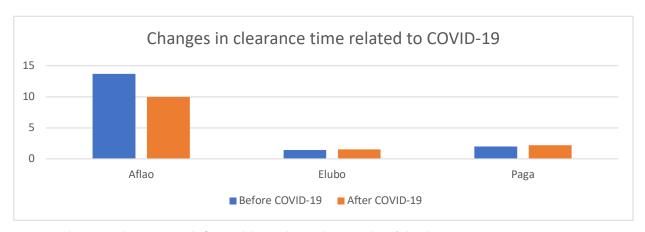


Figure 24 Changes in clearance time before and during the pandemic at Ghana's border posts

ICT for Cargo Processing

According to respondents, using GPS tracking devices is common at the Paga border post. Respondents estimated that it took around five minutes to install the devices and about three minutes to uninstall them. GPS tracking is also in use at Dakola.

Respondents indicated that agents were not adequately trained to use computers and computer systems, and basic IT training was needed for stakeholders, including stakeholders from the private sector.

Table 52 Customs, risk, and other systems at the Paga at Dakola border posts

		Paga	Dakola
	Type of System	ICUMS	SYDONIA WORLD
Custom Management Systems	Interconnectivity with neighbouring country	No	No Yes
Systems	Training for CMS	More training needed	More training needed
	Cargo scanning service	Yes	No
Risk	X-ray inspection machine	Yes	No
Management	Raman spectrometer	No	No
Systems ³⁵	Vehicles	Yes	No
	Reagent inspection	No	No
Other	GPS Cargo tracking system	Yes	Yes
customs related systems	AEO System	Yes	No
	Bilateral bond guarantee	Yes	Yes
3,3001113	Automated Weighbridge	No	Yes

³⁵ Besides Cinkansé, Burkina Faso land borders are not equipped with risk management systems. The Risk Management Systems (mainly the Cargo scanning services) are located in Ouagadougou (Ouaga Inter-dry port and Bobo Inter dry port).

2.3.2.8 Immigration Processing

Dakola Border Post

In addition to the lack of border management information systems (BMIS), no biometric system is used at the Dakola border post. In addition, public health information on travellers is collected manually and there is no digital server and/or application for travellers. However, the database for information collected from travellers via manual forms is available at the health services in Dakola. The Dakola PoE used to have a MIDAS system to control entries and exits in Dakola, but this system was not operational at the time of surveys, and manual registration of users was in use. In addition, there is no registration system for the movements of cross-border communities. Needed time to cross the border used to be one hour and has increased to two hours with the public health measures in place.

Paga Border Post

Although there is no functional BMIS at this PoE, there is a PISCES biometric system. In addition, information related to the public health of travellers is collected manually by the health services. Travellers at the PoE are usually not asked to download or access applications to record their travel history, potential symptoms, and contact information. The national legislation and international data protection standards regulate the collection, storage, and use of travellers' public health information, and travellers are informed. The registration process consists of recording data in the immigration register. Despite this mechanism for passengers, there is no registration system for the movement of cross-border communities. The time for travellers to pass through the immigration office at the PoE was estimated at 2 minutes before the pandemic and 3 minutes after the pandemic.

2.3.2.9 COVID-19

The two following tables summarize the measures taken at the Dakola-Paga border posts and personnel perceptions of how prepared they were to face COVID-19.

Table 53 Summary of COVID-19 measures implemented at the Ghana-Burkina Faso border (Paga-Dakola)

Measures	Dakola	Paga	Notes
Coordinated mechanism for COVID	Yes (Health Pole)	Yes (Health Pole)	
Sanitation Action Plan	Yes	Yes	
SOP	No	Yes	
Emergency Action Plan	No	Yes	
IEC Materials	Yes	Yes	
Communication Tool	Yes	Yes	
Hospital or Health Centre	No	Yes	Paga: CSPS/CMA Dakola: Hospital of Paga/Hospital of Navrongo
Quarantine facility	Yes	Yes	
PPE	Yes	Yes	
Sanitation Equipment	Yes	Yes	
Hand Washing Station	Yes	Yes	
Toilets	No	No	
Transport (Ambulance)	No	No	

Table 54 Adequacy of COVID-19 response preparation at the Dakola and Paga border posts

	Was the border post prepared in terms of:			
	Infrastructure Equipment Training			
Dakola	Partially	Partially	Partially	
Paga	Partially or fully	Partially or fully	Partially or fully	

2.3.2.9.1 Planning and Coordination

Dakola Border Post

The Health Pole is responsible for leading coordination with health authorities at the PoE. In addition, there is an operational coordination mechanism at the PoE level to coordinate the public health response to COVID-19, managed by the health services. Moreover, the detection, notification, management, and referral of suspected COVID-19 cases is the sole responsibility of the health authorities at the PoE.

Paga Border Post

Coordination on public health is carried out by the health services and a COVID-19 operational coordination mechanism is in place, led by health services. Immigration and customs are also involved in the detection, notification, management, and referral of suspected COVID-19 cases.

2.3.2.9.2 Public Health Measures

Dakola Border Post

At the Dakola border post, there is no official public health emergency plan for COVID-19 at the PoE level, however, all staff members have been partly trained on public health measures. Unfortunately, according to the survey results, the training received did not cover all the relevant subjects. Thus, more training is needed for health personnel and other services to be more operational, according to responders.

There are no standard operating procedures (SOPs) for the detection, notification, management, and referral of COVID-19 cases.

Paga Border Post

The PoE has a COVID-19 Public Health Emergency Action Plan and health staff at the PoE have been fully trained on public health measures related to COVID-19. In addition to the health staff, staff members such as immigration and customs have been partly trained on public health measures related to the COVID-19 pandemic.

The PoE has standard operating procedures (SOPs), and immigration officers are trained on the detection, notification, management, and referral of suspected COVID-19 cases.

2.3.2.9.3 Risk Communication and Community Engagement

Dakola Border Post

Information, Education and Communication (IEC) materials on the risks of COVID-19 are partly available at the PoE. These are posters and leaflets on COVID-19 in French. Some IEC materials such as posters and flyers are also available in French for border communities.

In addition, the screening staff have cell phones to communicate with the designated health centres. They usually refer the suspected COVID-19 case to the CSPS and the CMA which are the designated health centres established in 2019. These centres separate COVID-19 and infectious diseases from other diseases after analysis and examination.

The PoE has the contact information of the designated health centres as well as the contact information of the focal points. Also, as part of the strengthening of cross-border cooperation, the head of the health services of the PoE has the contact details of the relevant authorities in the neighbouring country. In this context, the police intervene to ensure the safety of health workers and to direct road users to the health post.

In addition, the emergency services are contacted when needed by the PoE via cell phones. It is not possible to contact the emergency services in the neighbouring country.

Paga Border Post

IEC materials on the risks and information regarding COVID-19 are available at the PoE for travellers. The screening staff have a cell phone for communications with the designated health centre. Two designated health centres are in charge of suspected COVID-19 cases referrals: the hospitals in Paga and Navrongo, which separate infectious diseases, including COVID-19. These centres have been in place since 1981 and need to be renovated.

The PoE has the contact information for the designated health centres. Similarly, the contact information for the focal points is displayed and available at the PoE. The head of the health centre has the contact information for the corresponding PoE in the border country. In case of emergency, the dedicated services

(emergency/ambulance) are usually contacted by cell phone. However, there is no mechanism or procedure in place for contacting the emergency services in the border country.

2.3.2.9.4 Monitoring

Dakola Border Post

At the PoE entrance, there is a device for monitoring incoming travellers' temperature. Border personnel record information regarding travellers' health by filling out screening questionnaires. Designated health centres have procedures and resources in place to verify alerts issued at the PoE. For referral of travellers with covid-19 symptoms, the Dakola PoE has contact information for the quarantine area or facility. This area is located at the border police station. There is also a clinic at the border but the infrastructure is in poor condition. Additionally, there is a CSPS³⁶ (Health and Social Development Centre) located 500m from the PoE. Unfortunately, the centre does not have adequate ventilation, although the space allows for social distancing between people. There is another CSPS near the Dakola border post, located 15 km away from the Dakola PoE. This CSPS is in poor condition and the population prefers to use the Navrongo Hospital in Ghana which can rely on more advanced capacities in treatment and medical facilities. This hospital is located 45 km away from the PoE, and it takes an average of 2 hours for the emergency services to arrive from the Ghana hospital.

Paga Border Post

At the PoE entrance, there is a temperature control system for incoming travellers, as the health centre is located there. The travellers are asked to fill out health declaration forms and/or health screening questionnaires by the health authorities. In addition, the designated health centres have procedures and resources in place to verify alerts issued at the PoE. The PoE has the contact information for the quarantine area or facility for the referral of travellers with symptoms. In addition, there are two private clinics, Wedam Clinic and Wisdom Clinic, and a Paga hospital. The distance between the PoE and the hospital is 1 km which is a 10 minutes' walk. The same distance separates the PoE from the clinics. The clinics do not have running water, do not provide good ventilation and do not have enough space for social distancing. The hospital, however, has running water, ensures good ventilation and has enough space for social distancing.

2.3.2.9.5 Infection Prevention and Control/Personal Protective Equipment

Dakola Border Post

The PoE has handwash stations and other measures to ensure hand hygiene for staff and travellers entering the border. Personal protective equipment (PPE) is also provided to first responders at the border, as well as cleaning and disinfection materials, with the exception of portable infrared thermometers. Staff received training on the 2005 International Health Regulations. However, the PoE does not have vehicles to transport sick travellers.

Paga Border Post

There are washing stations at the Paga PoE, but the respondents advocated for increasing their number. There are PPE, cleaning and disinfection equipment but in an insufficient quantity. The health staff is trained on the 2005 International Health Regulations, but the PoE does not have vehicles to transport sick travellers.

 $^{^{36}}$ In French: Centre de santé et de promotion sociale

2.3.2.9.6 COVID-19 Alerts

Dakola PoE has not recorded any suspected or confirmed COVID-19 cases since the survey began.

Paga PoE has not recorded any suspected or confirmed COVID-19 cases at the PoE level within the 30 days preceding the survey data collection in January 2022.

2.3.2.9.7 Screening Process - Communication

Dakola Border Post

The screening staff at the Dakola PoE are in direct contact with the designated health centre. They have the contact of the head nurse and the contact of the health district ambulance. The screening staff also have a functional and reliable source of electricity to charge their phones/radio. These are solar installations (panels). The head of the health service has the contact information of the competent authority at the corresponding PoE in the border country. In addition, the head nurse acts as the focal point at the PoE, and is authorized to contact the emergency service and/or the ambulance

Paga Border Post

The screening staff communicates with the designated health centre via cell phones. They have a functional and reliable source of electricity to charge their phones/radios, provided by the national electricity company's facility. However, this source is not stable. When needed, the emergency/ambulance services are contacted by the head of the health centre.

2.3.2.9.8 Infrastructure and Equipment

Table 55 Equipment, facility space and transport at the Paga and Dakola border posts

Equipment for COVID Measures	Paga	Dakola
Thermal camera	No	Yes
Portable infrared camera	No	Yes
Surgical masks	No	Yes
Disposable gloves	No	Yes
Protective visors	No	Yes
Hand sanitation gel	No	Yes
Handwashing stations	Yes	Yes
Designated area to screen travellers	No	Yes
Designated area to isolate sick travellers	Yes	Yes
Transportation of sick travellers	No	No

Dakola Border Post

There are quarantine facilities at the Dakola PoE but they are located far away. However, the PoE has administrative immigration detention centres temporarily used as isolation space for suspected COVID-19 cases. These are managed by the health services.

To guide the administrative detention centre management, guidelines have been issued to ensure minimum standards of detention conditions in the context of COVID-19.

In addition, the Dakola PoE is equipped with Personal Protective Equipment (PPE) such as thermal imaging cameras, portable infrared thermometers, surgical masks, disposable gloves, protective visors, hydroalcohol gel, and handwashing stations. Screening areas are also available at the PoE. However, there is no

transportation to facilities outside of the PoE. There is a referral system for suspected COVID-19 cases to a nearby health centre.

Paga Border Post

At the Paga PoE, there is a quarantine facility run by government authorities.

The PoE only has portable infrared thermometers and handwashing stations.

In addition, there are no isolation areas, no screening areas, and no transportation to external facilities at the PoE. There is also a referral system for suspected COVID-19 cases to a nearby health centre, which is provided by customs officers/immigration police/immigration services.



Figure 25 COVID-19 infrastructure at the Dakola border post

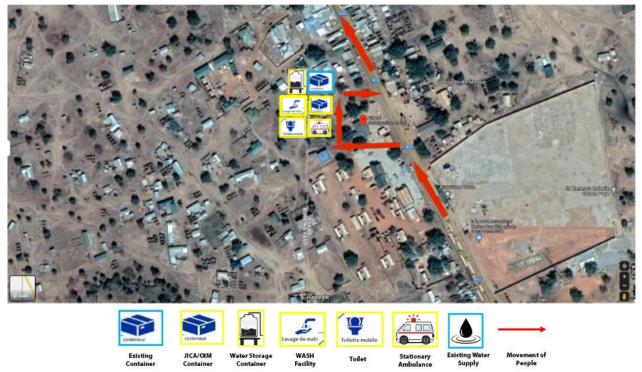


Figure 26 COVID-19 response infrastructure at the Paga border post

2.4 LOMÉ-OUAGADOUGOU

2.4.1 General Overview

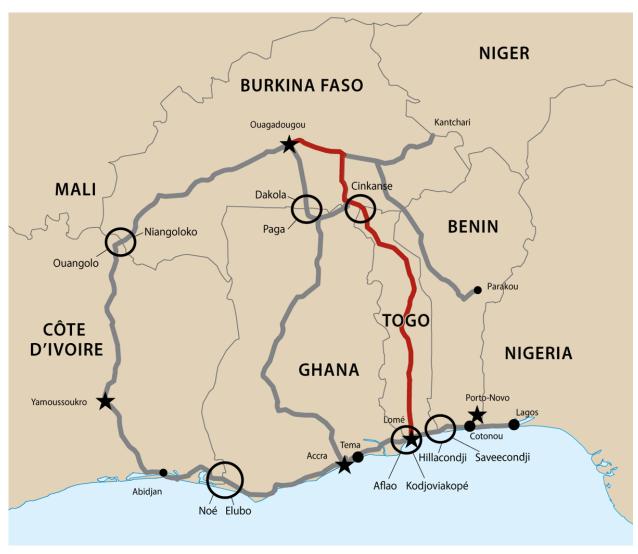


Figure 27 A map highlighting the Lomé-Ouagadougou corridor.

2.4.2 Cinkansé Border Crossing Point



Figure 28 Cinkansé satellite view

2.4.2.1 General Overview

The Cinkansé border post comprises a joint border post, where Burkina Faso and Togo coordinate the border control services.

2.4.2.2 Border Crossing Office Elements

All key services including Immigration, Customs, Port Health, Plant and Animal Quarantine, Phytosanitary, Bureau of Standard, Police and Gendarmerie are located at the joint border post.

Table 56 Border personnel at the Burkina Faso-Togo border (Cinkansé and Cinkassé border posts)

	Cinkansé (Burkina Faso)		Cir	nkassé (Togo)
Office	# Officers	Schedule	# Officers	Schedule
Immigration	20	Every day, 7 am- 7 pm	21	Every day, 6 am-6 pm
Customs	55	Every day, 7 am- 7 pm	20	Every day, 6 am-6 pm
Port Health	13	Every day, 7 am- 7 pm	7	Every day, 6 am-6 pm
Plant and Animal Quarantine	0	Every day, 7 am- 7 pm	0	Every day, 6 am-6 pm
Phytosanitary	5	Every day, 7 am- 7 pm	2	Every day, 6 am-6 pm
Bureau of Standard	0	Every day, 7 am- 7 pm	0	Every day, 6 am-6 pm
Police	20	Every day, 7 am- 7 pm	10	Every day, 6 am-6 pm
Gendarmerie	15	Every day, 7 am- 7 pm	10	Every day, 6 am-6 pm
Others	5	Every day, 7 am- 7 pm	5	Every day, 6 am-6 pm

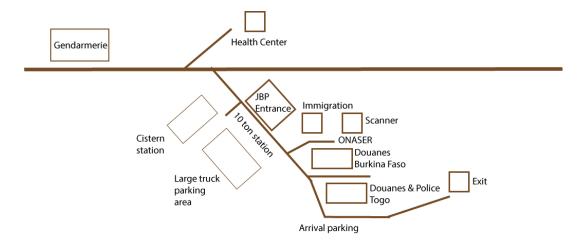


Figure 29 Plan of the Cinkansé border post

2.4.2.3 Border Operation During COVID-19

On the Burkinabe side of the border, in Cinkansé, the border office operates 24/7, despite COVID-19. On the Togolese side of the border, the PoE functions properly even if some readjustments have been made since the COVID-19 pandemic. It remains open from 7 am to 7 pm to facilitate the movement of people, goods, and services.

2.4.2.4 Movement of Vehicles/People/Goods at the Border

Vehicles

The table below presents trade volumes passing through this border over the past three years (2019-2021), which constitutes the most recent data available. The COVID-19 pandemic led to a significant drop in volume in 2020.

Table 57 Cinkansé border post trade volumes, 2019-2021³⁷

	Number of vehicles	Net weight (Kg)
2019	15,997	407,229,406
2020	662	19,117,276
2021	4,295	154,775,189

People

Table 58 below illustrates the daily and monthly entries and exits at the PoEs. An estimated 448 persons per day and 13,440 persons per month are entering the PoE. Regarding exits, an estimated 214 persons per day and 6,420 persons per months are exiting the PoE. The survey did not allow for an assessment of the impact of COVID-19 on the number of people crossing the border.

Table 58 Entries and exits per day and per month at the Cinkansé border post³⁸

	Entries per day	Entries per month	Exits per day	Exits per month
Cinkansé	448	13,440	214	6,420

Goods

The nature of trade is illustrated in table 59 below. Trade mostly consists of imports to Burkina Faso. There are not any big differences between the volume and value of goods imported before or after the COVID-19 pandemic. As for exports, results show an increase from 2019 to 2020 especially in terms of weight and value of the cargo. Though there is not a significant change in the number of vehicles. However, customs were not able to provide an explanation for this increase.

Table 59 Exports and imports at Cinkansé³⁹

		2019			2020		2021		
	Vehicl es	Weight (millions of Kg)	Value (millions of CFA)	Vehicl es	Weight (millions of Kg)	Value (millions of CFA)	Vehicl es	Weight (millions of Kg)	Value (million s of CFA)
Exports	21	0.35	150.46	38	53.79	1,001.29	57	3.52	399.86
Imports	10,496	128.03	14,988.80	9,296	110.38	12,060.69	20,492	110.99	12,939.2 5

2.4.2.5 Physical Infrastructure

Apart from bridges and the water source (a pump), the physical infrastructure condition at the Cinkansé border post was described as poor or very poor by most respondents. Internet connectivity is weak, the roads at the border and leading to the border are in poor condition, the facilities at the border do not

³⁷ Source: Government of Burkina Faso

³⁸ Source: OIM survey, December 2021-January 2022

³⁹ Source: Government of Burkina Faso

have adequate capacity and are in poor condition, the parking area for trucks and other vehicles is in very poor condition, and drainage is very poor.

The condition of the weighbridge and scanner at the border were also described as "very poor", though apparently the weighbridge is functional. Respondents indicated that there was no accommodation for service personnel at the border.

Table 60 Status of physical infrastructure at the Togo-Burkina Faso border (Cinkansé border post)

Physical Infrastructure	Condition			
	Cinkansé (BF)	Cinkassé (TG)		
Access road	Poor	Poor		
Roads in the border	Poor	Very poor		
Bridge	Poor	Very poor		
Parking	Poor	Poor		
Power supply	Satisfactory	Adequate		
Internet connection	Poor	Poor		
Water supply	Satisfactory	Adequate		
Generator	Poor	Adequate		
Drainage	Poor	Very poor		
Weighbridge	Very poor	Non-functional		
Cargo Scanner	Very poor	Non-functional		
Officer's housing	Poor, insufficient	Very poor/ No accommodation		
Others	Office space and accommodation needed	Office space and accommodation needed		

2.4.2.6 Soft Infrastructure

As for the cooperation and coordination at the Cinkansé PoE the heads of various services, who serve as focal points, meet quarterly. They also meet on a weekly basis with local authorities (the prefect and the mayor) to discuss security issues. Cross-border meetings are held to manage and resolve issues regarding heavy traffic occurring occasionally.

2.4.2.7 Cargo Processing

Clearance Procedure

At the Cinkansé border post, respondents indicated that cargo was processed electronically. However, respondents were enabled to provide the time needed to install and remove the GPS devices used to monitor the movement of cargoes as the devices are managed by COTECNA. The most important challenges are Internet connectivity, the availability of adequate IT equipment, and a reliable source of electricity.

Table 61 Cargo control process at Cinkansé – Entry into Burkina Faso

Steps	Actions
1	Upon arrival at the Cinkansé office, the carrier must present the cargo and accompanying documents to the Customs officers who carry out the identification and registration in a register.
2	Goods are sorted according to their origin and destination:
	Goods for the Togolese market (scenario 1): after identifying and taking in charge the goods, the documents are given to the customs declarant mandated by the carrier and recorded into the ASYCUDA WORLD computer system. The computer system randomly assigns this statement to an auditor. The latter verifies the conformity and accuracy of the declaration statements with the attached documents. If the verification is correct, it liquidates the declaration and generates the transit document called T1.
	Goods obtained at the port of Lomé (scenario 2) : the declaration and the T1 document are drawn up in Lomé via interconnection. Thus, as soon as the vehicle arrives, the customs service proceeds to the notification of passage, after completion of the customary checks (integrity of the sealing).
3	After the verification and the liquidation, the declaration is sent to the Cashier for payment of any duties and taxes.
4	The trucks are then put on customs escort or in the convoy. Customs escort are put in place for sensitive goods which are listed as such by a memorandum. Also, in view of the risk that the Public Treasury may incur, the Head of Office may place under escort, goods that are not on the list of sensitive goods.
	The declaration is then given to the line brigade section for the preparation of escort and convoy records.
	If the cargo is under customs escort, a customs officer is listed to ensure it.
	For vehicles in the convoy, the documents are given to the customs declarant who transmits them to the driver.
5	The driver leaves the JBP compound and heads towards Ouagadougou or the destination country.

Table 62 Cargo control process at the Cinkansé PoE - Exiting Burkina Faso

Steps	Actions
1	The truck enters the Joint Border Post at the Cinkansé checkpoint.
2	Cargoes are sorted according to their origin and destination, depending on whether the transit takes place in an inland office or in a neighbouring country of passage at the Cinkansé office (scenario 1), or whether the transit begins at the Cinkansé office (scenario 2).
3	Scenario 1: Transit begins in an inland office or from a border office of entry
	The truck enters the JBP. At the entrance, the carrier hands over the transit documents and permit to the scanning service.
	After this step, the carrier submits the documents to the customs service, which notifies the passage of the load to the destination office in the neighbouring country, after completion of the customary checks (integrity of the sealing).
	Scenario 2: Transit begins in Cinkansé office
	The truck enters the JBP. At the entrance, the carrier hands over the transit documents and permit to the scanning service.
	After this step, the carrier gives the documents to a customs declarant to fill out an export declaration.
	The customs declarant records the declaration into the ASYCUDA WORLD computer system. Then the computer system randomly assigns this declaration to a verifier, in charge of processing it after control of the documentation and the integrity of the seals.
4	After verification and liquidation, the declaration is sent to the Cashier for payment of the computer fee.
5	The declaration is then given to the section of the commercial brigade, which verifies and hand over the documents to the declarant or the carrier.
6	The truck leaves the JBP and heads towards the Togolese Customs.

ICT for Cargo Processing

Table 63 Customs, risk, and other management systems at the Cinkansé border post

Custom	Type of System	SYDONIA WORLD
Management	Interconnectivity with neighbouring country	Yes
Systems	Training for CMS	Training adequate
	Cargo scanning service	Yes (non-functional)
Risk	X-ray inspection machine	No
Management	Raman spectrometer	Yes
Systems	Vehicles	No
	Reagent inspection	Yes
Othor	GPS Cargo tracking system	Yes
Other customs	AEO System	Yes
related	Bilateral bond guarantee	No
systems	Automated Weighbridge	Yes (non-functional)

2.4.2.8 Immigration Processing

Cinkansé Border Post (BF)

The PoE has a Border Management Information System (BMIS) operating without a biometric system. This system is connected to the Interpol data base, but was not functional at the time of the survey. Information related to the public health of travellers is collected manually. The border police is responsible for managing the said information, and operates in compliance with national legislation and international data protection standards. Travellers are not required to download or access applications to record their travel history, potential symptoms and contact information. API and PNR are used by health and immigration authorities, as the national legislation allows their use for public health purposes.

To control entries and exits at the PoEs, traveller screening systems are often put in place. In the Cinkansé border post, the immigration register serves as a registration system. It keeps track of the number of travellers entering and leaving the PoE. The waiting time of one hour at the PoE immigration office has not changed with the implementation of COVID-19 public health measures. There is no registration system for the movement of cross-border communities.

Cinkassé Border Post (TG)

This PoE does not have a BMIS or a biometric system. In addition, immigration officers collect public health information electronically from travellers. This information is held by the health centre. Travellers are not required to download or access applications to record their travel history, potential symptoms, and contact information. The collection, storage and use of travellers' public health information comply with national legislation and international data protection principles. In Cinkassé, API and PNR are not used by health and immigration authorities because national law does not allow their use for public health purposes or at land PoEs. The duration of the immigration office procedure at the PoE has increased from 5 minutes before the pandemic to 10 minutes with the public health measures to combat the health crisis. There is no registration system for the movement of cross-border communities.

2.4.2.9 COVID-19

Tables 64 and 65 below summarize the measures taken at the Cinkansé border posts.

Table 64 Summary of COVID-19 measures implemented at the Burkina Faso-Togo border (Cinkansé and Cinkassé border posts)

Measures	Cinkansé (BF)	Cinkassé (TG)
Coordinated mechanism for COVID	Yes (Health Service)	Yes Health Services
Sanitation Action Plan		
SOP	No	Yes
Emergency Action Plan	Yes	Yes
IEC Materials	Yes	Yes
Communication Tool	Yes	Yes
Hospital or Health Centre for the treatment	Yes	Yes
Quarantine facility	Yes	Yes
EPI	Yes	Yes
Sanitation Equipment	Yes	Yes
Hand Washing Station	Yes	Yes
Toilet	No	No
Transport (Ambulance)	No	No

Table 65 Adequacy COVID-19 response preparation at the Cinkansé border post

	Was the border prepared in terms of:				
	Infrastructure Equipment Training				
Cinkansé	Partially Partially Not prepared				

2.4.2.9.1 Planning and Coordination

In response to the COVID-19 pandemic, an operational coordination mechanism has been put in place at the Cinkansé PoE (Burkina Faso) to coordinate the public health response and is managed by the health service.

On the Togolese side of the border, an operational coordination mechanism to manage the public health response to COVID-19 is in place, overseen by the health department. Within the framework of the COVID-19 response, the management, detection and notification of suspected cases are essentially managed by the health services.

2.4.2.9.2 Public Health Measures

On the Burkinabe side of the border, there is an official public health COVID-19 emergency plan at the PoE and most of the border health personnel have been trained on public health measures. The police departments have also been partly trained on public health measures related to COVID-19.

There is no Standard Operating Procedures (SOPs) for the detection, notification, management, and referral of COVID-19 cases at the Cinkansé PoE.

On the Togolese side of the border, there is an official public health COVID-19 emergency plan against at the PoE but it is not functional due to lack of funding.

There are Standard Operating Procedures (SOPs) for the detection, notification, management, and referral of COVID-19 cases at the Cinkassé PoE, but only one officer is trained on the matter. These SOPs take into consideration immigration, border control and customs services.

2.4.2.9.3 Risk Communication and Community Engagement

Cinkansé Border Post (BF)

There are Information, Education and Communication (IEC) materials available at the Cinkansé PoE. They provide clear information on COVID-19 to travellers in local language but assistance with IEC materials and risk communication strategies are still required. However, there is no communication process in place between the Cinkansé screening staff and the designated health centre.

There are 2 containers provided by the World Bank for health control purposes but they are not operational yet. A room located in Immigration building serves as a referral health centre for suspected cases of COVID-19. This centre, installed on 15 June 2020, treats infectious diseases (including COVID-19) and other diseases separately. Contact information for the focal points is available at the Cinkansé PoE. The health services have the contact information of the competent authority in the PoE of the border country and if necessary, the emergency services can be reached by phone.

Cinkassé Border Post (Togo)

There are IEC materials to communicate the risks and provide information on COVID-19 to travellers and border communities at this PoE. The communication strategy relies primarily on posters in French.

In addition, the screening staff communicates with the designated health centre by phone for the management of emergency cases. These connections between health services allow for appropriate management of COVID-19 cases at the border. Following the COVID-19 outbreak, the CHP-Cinkassé⁴⁰ has been designated as the health centre to refer suspected cases of COVID-19.

Thanks to the cooperation and collaboration mechanisms carried out via phone calls or scheduled meetings, the PoE collaborates with the designated health centre as well as with the focal points.

2.4.2.9.4 Monitoring

<u>Cinkansé Border Post (BF)</u>

The PoE is equipped with a thermometer scan for incoming travellers. Information is manually collected with screening questionnaires. The designated health centre in Cinkansé has procedures and resources in place to verify issued alerts. This PoE has the contact information for the quarantine area or facility for referral of travellers with Covid-19 symptoms. Three containers have been installed by SCANNING SYSTEMS to serve as a quarantine facility for suspected cases of COVID-19 from travellers arriving at the PoE.

⁴⁰ In French: Centre Hospitalier Préfectoral

There is a hospital located 2 km away from Cinkansé. This facility is made of has four buildings and ensures adequate ventilation as well as social distancing. In addition to this, there is a hospital in the neighbouring country (Togo), the CSPS, based in a large building located 4 km from the PoE.

<u>Cinkassé Border Post (TG)</u>

At the <u>Cinkassé</u> PoE, there is a system in place to monitor the temperature of incoming travellers. The designated health centre has procedures and resources in place to verify alerts issued at the PoE. The PoE has the contact information for the quarantine area or facility for the referral of travellers with symptoms of COVID-19. This facility is located at the PoE. This facility is accessible for all travellers regardless of their nationality and is managed following International Health Regulation.

2.4.2.9.5 Infection Prevention and Control/Personal Protective Equipment

There are handwash stations for border personnel and travellers at both PoEs. Personal protective equipment, such as portable infrared thermometers, surgical masks, disposable gloves, protective visors, and hydro-alcohol gel has been provided to first responders, but quantity is insufficient. However, Cinkansé does not have thermal imaging cameras. The PoE and health staff received training on the 2005 International Health Regulations. However, neither PoE has vehicles to transport sick travellers.

The Cinkansé PoE does not have any PPE to combat COVID-19 except for infrared thermometers, which are not available in sufficient quantities. However, immigration officers are trained on the proper use of infrared thermometers, surgical masks, disposable gloves, hydro alcoholic gel and handwashing stations.

2.4.2.9.6 COVID-19 Alerts

The alert mechanism in place in both PoEs shows that within the 30 days preceding the survey implemented in January 2022, there were no travellers identified as suspected, probable, or confirmed cases of COVID-19.

2.4.2.9.7 Screening Process - Communication

Cinkansé Border Post (BF)

Screening staff are in direct contact with the designated health centre by telephone, as they have the contact of the head nurse and the contact of the designated health district ambulance. The screening staff also have a functional and reliable source of electricity to charge their phones/radio, namely with SONABEL facilities and generators. The PoE has the contact information of the designated health centre as well its focal points. The emergency department and/or ambulance is contacted by phone, usually by the head of the department or the deputy, who is authorized to do so.

Cinkassé Border Post (TG)

The screening staff can communicate with the designated health centre using phones. They have a functional and reliable source of electricity to charge their phones/radio. This PoE does not have a generator, a solar panel, or any other energy source.

2.4.2.9.8 Infrastructure and Equipment

Table 66 Equipment, facility space and transport at the Cinkansé and Cinkassé border posts

Equipment for COVID Measure	Cinkansé (BF)	Cinkassé (TG)
Thermal camera	No	Yes
Portable infrared camera	Yes	No
Surgical masks	Yes	No
Disposable gloves	Yes	No
Protective visors	Yes	No
Hand sanitation gel	Yes	No
Handwashing stations	Yes	No
Designated area to screen travellers	No	No
Designated area to isolate sick travellers	Yes	Yes, but unequipped and it will be used as the vaccination facility
Transportation for sick travellers	No	No

Cinkansé Border Post (BF)

There is a quarantine facility, managed by non-governmental stakeholders, for suspected COVID-19 cases at the PoE. Border authorities refer COVID-19 cases to the quarantine facility. In addition to the quarantine facility, there are temporary immigration administrative detention centres at the PoE. They are currently being used as isolation area for suspected COVID-19 cases and are managed by the health personnel. Guidelines have been issued to ensure compliance with minimum standards regarding conditions of detention during COVID-19 at the administrative detention centres.

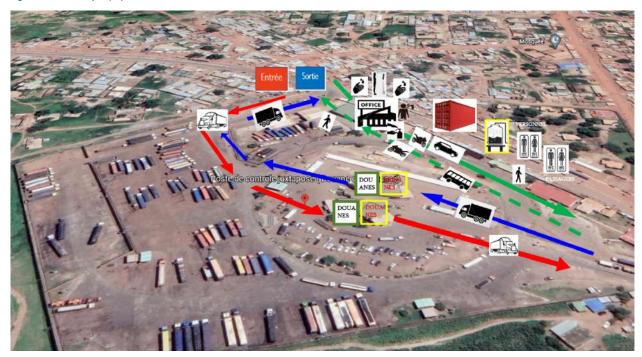
In addition, there is an isolation area and an ambulance is available for transportation to facilities outside the PoE. There is a referral system for suspected cases at the PoE, playing a decisive role in disease management at the borders.

Cinkassé Border Post (TG)

There is a quarantine facility for suspected COVID-19 cases but it is not equipped and it will also be used as the vaccination facility at the PoE. It is operated by government authorities. Border authorities refer COVID-19 cases to the quarantine facility. However, there are no administrative immigration detention centres at the PoE that can be temporarily used as isolation area for suspected COVID-19 cases.

The PoE does not have a screening area, isolation area, or transportation to external facilities. Nonetheless, there is a system for the referral of suspected cases to a nearby health centre by the PoE's health authorities.

Figure 30 Sanitary equipment at the Cinkansé Joint Border Post



LEGEND

Thermal camera temperature reading	Temperature reading – handheld device	Potential location of container with interior health screening	Route for cars, buses, motorcycles, and trucks
Hand sanitation station	Handwashing station	Possible location for containers to isolate the sick	Public toilets
Water tower	Border barrier	RN2 National Route 2	

CHAPTER 3 OVERALL SITUATION AT THE TARGETED BORDERS AND RECOMMENDED ACTIONS

3.1 OVERVIEW OF RECOMMENDED ACTIONS

3.1.1 Border Management

With regards to communication between the borders of the targeted ports of entry, there is no bilateral coordination committee and regular meetings are rare, although relations between the border management stakeholders are reportedly good. English-speaking countries seem to have more communication challenges than the French-speaking ones. For a better understanding of border facilitation issues and for smoother and more efficient coordination, the creation of a bilateral cross-border committee is recommended.

Regarding border infrastructure, conditions vary greatly from one PoE to another but improving the Internet connection and stabilizing the power supply will be the key element in the digitalization of the immigration procedures and customs services. Furthermore, to improve sanitation, water access should be improved particularly at the Burkinabe border (Yendéré and Dakola border posts), as water is essential for the use of sanitary facilities such as handwashing stations and toilets.

3.1.2 Immigration

Most of the borders of targeted PoEs of this survey collect the travel information manually and the Elubo and Aflao PoEs in Ghana need to be equipped with MIDAS. At the Dakola and Yendéré border posts, MIDAS is not functional and the system needs to be reinstalled. The adaptation of a standardized border management information system (BMIS) or interconnectivity of the BMIS is recommended. However, this digitalization requires a stable electricity and Internet connection.

The average time spent for the immigration procedures is about 5 minutes and there was just a slight increase (if any) during the pandemic. However, PoEs in Burkina Faso (Dakola and Cinkansé border posts) reported a much longer processing time with the initial average time of one hour increasing to two hours during the pandemic (Dakola border post). Reasons behind this difference should be identified, and corrective actions should be proposed in a future study.

None of the 6 PoEs had a registration system for cross-border communities, but immigration officers use a visual assessment. This prevents the statistics to gather the accurate number of cross-border community members crossing the border.

3.1.3 Health

At all borders, a health port is deployed and it is responsible for the detection, notification, management and referral of COVID-19 suspected cases. At some border posts, such as Dakola and Sanveecondji, immigration officers also play an important role in coordination. Additionally, there is a coordination system between the different offices at the borders in most PoEs. As for the bilateral coordination for COVID-19 response with neighbouring borders, the health agent is usually the only stakeholder having access to the counterparts' contacts. It was not clear whether face-to-face coordination committees between health agent are organized or not.

There are emergency plans for the pandemic at all border posts except in Laléraba and Dakola. SOPs are available at the Noe, Paga, Kojoviakope and Cinkassé (Togo) border posts only. However, these PoEs need assistance on the implementation and use of the SOPs at the field level.

Although the sanitation equipment status varies between borders, there is no ambulance to transport people (suspected cases of COVID-19), except at the Cinkansé border post (Burkina Faso). Handwashing stations are installed at all PoEs except in Yendéré, but more handwashing stations will be needed after the reopening of the borders. There is a lack of toilets in general at all borders as the toilets are usually provided for the border officers and not for travellers. 7 out of 12 PoEs have isolation containers but lack the necessary equipment such as cooling systems, beds, etc., and the containers are often not used for their initial purposes.

At all border posts, the screening activity such as temperature control, and handwashing is done before the immigration process, but the travellers' health information is not systematically collected.

All border staff including non-health staff are trained for public health measures, but more training will seemingly be needed, especially for non-health staff.

It is recommended to create a coordination platform for the border offices and SOPs in accordance with the installation of sanitation equipment. Such coordination platform should be implemented along with training on the adaptation of the SOPs to improve the pandemic management.

3.1.4 Custom Connectivity and Goods Clearance

Information on time spent during the customs clearance process could not be collected at all border posts. However, the information available suggested that an estimated 30 minutes is spent at the Ouangolodougou (Laléraba) border post, 2.5 hours at the Paga border post, 14 hours at the Aflao border post, 24 hours at the Kojoviakope border post, and 26 hours at the Hilacondji border post. The longest clearance time, 50 hours, was recorded at the Hilacondji border post. It was not possible to determine the time needed for each step of the clearance process, and the study could not identify the steps where congestion was the most important. To clarify this specific issue, another study will be needed to understand more clearly the dynamic involvement of the customs administrations.

When it comes to customs systems, French-speaking countries (Côte d'Ivoire, Burkina Faso, Togo and Benin) use SYDONIA WORLD while Ghana uses another system called ICUMS. The interconnection is functional between Burkina Faso — Côte d'Ivoire and Burkina Faso — Togo. There is an interconnection between Togo — Benin but it is non-functional. It means that among the targeted corridors, only the Abidjan-Ouagadougou corridor has an interconnected customs system allowing for more efficient trade flows.

As to the custom-related equipment, only the weighbridges of the Paga and Noe border posts are functional. The weighbridges in Ouangolodougou (Laléraba), Aflao, Cinkansé are not functional. There are functional scanners in Noe, Elubo, Aflao and Hilacondji, while Ouangolodougou (Laléraba) and Cinkansé have non-functional scanners. Reparation or new installation of such equipment is needed at most of the targeted borders.

3.2 INFRASTRUCTURE AND EQUIPMENT

3.2.1 The Ouangolodougou-Niangoloko Border-Crossing Point

Reducing the extended distances separating the four localities of the Ouangolodougou-Niangoloko border-crossing point would likely significantly reduce delays and costs associated with moving goods along this corridor. Building a Joint Border Post (JBP) at Laléraba might address this issue. A JPB would allow to consolidate border control procedures.

Addressing the lack of technology at the border could improve the implementation of various border control processes (cargo processing, traveller document processing, etc.). New IT equipment should be paired with Internet connectivity improvements. Furthermore, efforts should be made to implement the use of GPS tracking devices on this corridor. Similarly, the use of weighbridges and scanners should be improved on this corridor.

Adequate quarantine facilities are needed to isolate COVID-19 cases. The facilities require appropriate equipment as well. Proper electricity and water service systems should be installed. Office space, logistical supplies, and furniture are also needed.

3.2.2 The Noé-Elubo Border-Crossing Point

The physical infrastructure at this border is in poor condition on the Ghanaian side of the border. The roads, facilities, bridges, and drainage are in poor condition. Parking is insufficient. Accommodation and sanitation facilities are needed as well, and office space is insufficient. Quarantine facilities should be built to isolate travellers with COVID-19 infections. Internet connectivity is poor.

3.2.3 The Aflao-Kodjoviakopé Border-Crossing Point

The physical infrastructure at this border is in particularly poor condition on the Togolese side of the border (Kodjoviakopé). Repairing the roads and other physical infrastructure could reduce delays in the physical movement of vehicles and people. Quarantine facilities should be built to isolate travellers with COVID-19 infections. Toilet facilities are needed.

3.2.4 The Sanveecondji-Hillacondji Border-Crossing Point

The main physical infrastructure issue is the lack of accommodation at the border.

3.2.5 The Paga-Dakola Border-Crossing Point

The roads at the border are in very poor condition and need repairs. Additionally, there is no weighbridge. Quarantine facilities should be built to isolate travellers with COVID-19 infections. Toilet facilities are needed. Dakola needs a medical facility, and the emergency services need more space to provide adequate ventilation to infected travellers.

3.2.6 The Cinkansé Border-Crossing Point

Respondents described the physical infrastructure condition as poor or very poor: roads need repairs and the available space is insufficient. Drainage needs to be improved and accommodation is insufficient. This PoE needs quarantine facilities to isolate travellers with COVID-19 infections.

Furthermore, a reliable source of electricity is needed. Internet connectivity is a major constraint to the performance of various tasks. There is a significant lack of IT equipment.

3.3 PROCEDURES AND COORDINATION

3.3.1 The Ouangolodougou-Niangoloko Border-Crossing Point

Border coordination committees – in-country and bilateral – are not used at this border. Implementing a program to develop and support such coordination activities could support improved coordination among and between services. Border personnel should be trained on the protocol regarding free movement of

goods, persons, and vehicles. The application of the Authorized Economic Operator system would also likely reduce processing times. Implementation of the Border Information Management System should be expanded.

A study of the cargo processing procedures, focusing on the time needed to complete each step, could identify problems causing delays in cargo processing.

Support for strategic communications would improve the level of awareness at the border, including provision of adequate and targeted IEC materials. Border personnel require training on the implementation of public health measures, including building the capacity of non-medical personnel on preventive measures. Sufficient quantities of personal protective equipment are needed (including training of personnel on its appropriate use). Public health information should be collected to inform authorities, which should include the use of a mobile app for travellers to easily share public health-related information. An immigration register should be implemented to monitor border movement, including a movement registration system for cross-border communities.

3.3.2 The Noé-Elubo Border-Crossing Point

While the soft infrastructure appears to be sufficient, respondents said one important gap is the unavailability of IT equipment, which is in short supply. Agents, including private sector stakeholders and customs agents, need basic training to use the equipment. Support for strategic communications would improve the level of awareness at the border.

A registration system for the cross-border communities' movements and a Border Information Management System should be implemented. The border post should be equipped with vehicles for the transportation of passengers to external facilities. Official emergency health plan should be developed.

Border personnel require training in the 2005 International Health Regulations. Support to improve bilateral cooperation is needed. Personal protective equipment is needed in sufficient quantities.

3.3.3 The Aflao-Kodjoviakopé Border-Crossing Point

Improving and extending access to the customs' automated interface would improve communication. More training on the use of IT equipment would improve agents' abilities. Such training should target private sector stakeholders as well.

Support to improve coordination and cooperation at the border is needed: services do not meet regularly to discuss issues at either border and cross-border meetings are very rare.

Support for strategic communications would improve the level of awareness at the border. A Border Information Management System and a registration system for the cross-border communities' movements should be implemented.

The border should be equipped with vehicles for the transportation of passengers to external facilities. Official emergency health plans should be developed. Border personnel require training on implementing public health measures. Personal protective equipment is needed in sufficient quantities.

3.3.4 The Sanveecondji-Hillacondji Border-Crossing Point

Support to improve coordination and cooperation at the border is needed: border services do not meet regularly at either border and there are no regular bilateral meetings among and between various services. The customs interface is not accessible to other services. Both public and private sector

stakeholders require basic IT training. Support for strategic communications would improve the level of awareness at the border.

The capacities of border personnel on immigration and border management should be strengthened. An inclusive governance mechanism should be implemented to facilitate smooth coordination. A travel document reading system, offices, and logistics equipment are needed. Training on standard operating procedures is needed. Implementing a Border Information Management System is needed along with appropriate training on the system. Personal protective equipment is needed in sufficient quantities.

3.3.5 The Paga-Dakola Border-Crossing Point

Support to improve coordination and cooperation at the border is needed as border services do not meet regularly at either border and there are no regular bilateral meetings among and between the various services. The customs interface is not accessible to other services. Basic IT training is needed for both public and private sector stakeholders. Support for strategic communications would improve the level of awareness at the border.

An internal mechanism is needed to ensure the functional operation of the Paga border post, 24 hours a day, seven days a week. A registration system for the cross-border communities' movements should be put into place. A Border Information Management System should be implemented.

Border personnel require training on public health measures. The border should be equipped with vehicles for the transportation of passengers to external facilities. The border personnel require support in implementing their public health plan. Personal protective equipment is needed in sufficient quantities. The contact information of health facilities on both sides of the border needs to be displayed. The border post should be equipped with a vehicle for the transportation of passengers to external facilities.

3.3.6 The Cinkansé Border-Crossing Point

The capacities of border personnel on immigration and border management should be strengthened. An inclusive governance mechanism should be implemented to facilitate smooth coordination. A travel document reading system, offices, and logistics equipment are needed. Training on standard operating procedures is needed. Implementing a Border Information Management System is needed along with appropriate training on the system. Personal protective equipment is needed in sufficient quantities.



CHAPTER 4 CONCLUSIONS AND RECOMMENDATIONS

The movement of people, vehicles and goods across West Africa relies upon the proper operation of its borders, where national and international laws and regulations are implemented. The surveys conducted among hundreds of stakeholders at the borders reveal a variety of issues that need to be addressed to improve these border posts operations. This report provides specific information on the situation at each border post with a focus on its physical and soft infrastructure. These findings can guide the implementation of actions to significantly improve the flow of people, vehicles, and goods across the subregion.

The recommendations below are based on the data and reports resulting from the various survey activities, including conversations with stakeholders.

- Improve the support needed to conduct such surveys to ensure that stakeholders at borders fully
 participate in the data collection effort. At some border posts, officials refused to answer any
 questions, which limited the data collection activity.
- Undertake additional studies to clarify the cargo processing procedures at border posts.
 Specifically, studies should target a more precise identification of each processing step together with the time needed for each step. This would potentially help to identify the root causes of delays.
- Improve involvement of private sector stakeholders in the analysis process regarding the situation at border posts, as they appear to have participated in some of the surveys, but not in others.
- Improve efforts to involve multiple stakeholders, including development partners, in the analysis of the situation at border posts. Involvement of multiple stakeholders could help deploy the significant efforts that are necessary to improve border operations.



Data collection training