Framework on COVID-19 Information Sharing

Within East and Southern Africa (ESA)

Background

Like other parts of the world, Africa is witnessing an ongoing pandemic of COVID-19 since mid-February 2020 with exponential increase in several countries. Only one country, Lesotho, in the sub-region has not reported a case with South Africa being worst hit. Governments have moved to put in place various measures to contain or mitigate the spread of the pandemic. These measures include lockdown of non-essential travel in-country and between member states. The movement of cargo has however been allowed to continue to ensure no interruption of the supply of essential commodities including food, non-food items, medicines and other essential supplies through road, air, and sea. Road transport remains a major conduit for delivery of cargo with transboundary travel cross-border, long distance truck drivers on a regular basis thereby increasing the risk of cross-border transmission of Covid-19. To address the potential transmission of COVID-19, the Eastern and Southern African sub region have developed a strategy for containing /mitigating the transmission of COVID-19 especially through long-distance truck drivers.

It is therefore paramount to ensure a systematic flow of information among Member States for timely institution of cross border surveillance and contact tracing interventions. The framework is intended to facilitate sub-regional information sharing among the ESA and Horn of Africa countries including contact tracing of transnational truck drivers related cases. The information to be shared include but not limited to demographic information, travel route, means of transport used, mobility corridor including stop overs, results of the COVID-19 tests and its validity (last for 14 days) origin and destination, case management of positive cases and contact tracing.

Current situation

Cargo trucks continue to ply the routes and across Member States through major points of entry. Information on positive cases identified at the crossing points is not immediately made available to the countries of origin, and in some situations not coordinated, causing a delay in carrying out contact tracing and related measures. Further, delays at borders due to newly introduced health controls are further contributing to the risk of crossing points becoming aggregation areas and hotspots for transmission.

As per the International Health Regulations (IHR) regulations 2005, Third Edition, Member States are required to share information in a timely manner through the IHR National Focal Point (NFP) system.

Although Member States are utilizing adapted case reporting forms and in line with WHO standard form, the enforcement of IHR NFP system remains uncoordinated and not consistently adhered to when it comes to data and information sharing between Member States. This is further the case, when it comes to discreet communication on certain sub-populations, including transport workers, to which NFP require more detail information and are required to engage with a wider network of stakeholders, such as transport authorities and companies.

Strategy

The approach is in line with the requirements of the IHR for Member States to share information on events within their borders through the IHR National Focal Point system. It is also in the interest of member states as it will contribute to control, as well as allow for easy flow of cargo

Objective

Facilitate rapid communication of COVID-19 surveillance and laboratory data regarding truck drivers and their assistants at PoE and along transport corridors including any pertinent reports between Member States to ensure timely cross border action.

Information sharing

- Set up electronic database accessible by IHR National Focal Points. Ministry of Health focal points be given administrative access to the database

- Establish contact list of key health focal points along the transport corridor and strategic crossing points

- Regular updates on laboratory outcomes and cases be relayed, and immediately if found positive to the IHR NFP in addition to entry into the database.

- Share cross border information on contacts and surveillance in relation to COVID-19

- Details of any case should be entered into the system to capture demographic details, point of origin and destination, route of travel and any symptomatology

- Establish a communication link between the IHR NFP and the health focal points at strategic PoEs for smooth bi-directional flow of information within the member state.

- Strengthen the communication links between member states regarding the mapping of cargo transport actors and routes of movement

- Map and share relevant information on available health facilities along transport corridors and protocols to access them

- EAC, SADC and AU facilitate establishment of Memoranda of Understanding between states in the different regional and sub-regional blocks for the use of standardized protocols.

- Share real time relevant health information (or testing) with border officials to simplify cross-border operation

- Establish a channel of communication with truck driver associations and private sector for real-time information if required

- Truck driver shall share information on the routes of the travel until destination

- A tracking system placed to monitor long distance truck shall be made available with IHR FP in case of contact tracing

References

1. https://www.who.int/publications-detail/handbook-for-public-health-capacity-building-at-ground-crossings-and-cross-border-collaboration
2. https://www.sadc.int/files/8315/8626/0246/Final_SADC_Guidelines_on_Cross-Border_Transport_during_COVID19-Adopted_on_6_April_2020-ENGLISH.pdf