



# REPORT OF THE RAPID SITUATION AND NEEDS ASSESSMENT

at Chirundu/Beitbridge Borders  
in Zimbabwe

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## List of abbreviations and acronyms

<b>ASYCUDA</b>	Automated System for Customs Data
<b>BCP</b>	border control post
<b>CBT</b>	cross-border trade
<b>CBTA</b>	Cross-Border Traders Association
<b>COMESA</b>	Common Market for Eastern and Southern Africa
<b>CoO</b>	certificate of origin
<b>IBMIS</b>	Immigration Border Management Information System
<b>ICBT</b>	informal cross-border trader
<b>ILO</b>	International Labour Organization
<b>IOL</b>	<i>Independent Online</i>
<b>IOM</b>	International Organization for Migration
<b>MoHCC</b>	Ministry of Health and Child Care
<b>MSME</b>	micro, small and medium enterprise
<b>OSBP</b>	one-stop border post
<b>PTA</b>	Preferential Trade Area
<b>PCR</b>	polymerase chain reaction
<b>PPE</b>	personal protective equipment
<b>SADC</b>	Southern African Development Community
<b>SOP</b>	standard operating procedure
<b>SSCBT</b>	small-scale cross-border trader
<b>STR</b>	Simplified Trade Regime
<b>TID</b>	Trade Information Desk
<b>TIDO</b>	Trade Information Desk Officer
<b>WHO</b>	World Health Organization
<b>WICBT</b>	women in cross-border trade
<b>ZIMRA</b>	Zimbabwe Revenue Authority

LIST OF ABBREVIATIONS

<b>ZIMSTAT</b>	Zimbabwe National Statistics Agency
<b>ZINARA</b>	Zimbabwe National Road Administration
<b>ZINWA</b>	Zimbabwe National Water Authority
<b>ZWBBP</b>	Zimbabwean side–Beitbridge border post
<b>ZWCH OSBP</b>	Zimbabwean side–Chirundu one-stop border post

## Executive summary

This rapid situation and needs assessment was undertaken in Zimbabwe at Beitbridge border post and Chirundu one-stop border post (Chirundu OSBP) from 1 December 2020 to 10 January 2021. It is part of a series of assessments, with three others having been undertaken in South Africa, Zambia and Malawi by IOM in collaboration with resident missions in all the four countries under the project titled “Supporting informal cross-border traders in Southern Africa to do business during COVID-19 pandemic” funded by the Foreign, Commonwealth and Development Office (FCDO). The assessment served to inform activities under the three outcomes of the project including the national-level policy dialogue and activities with border officials and Cross-Border Traders Associations (CBTAs) undertaken at the two border control posts (BCPs).

The objective of this project is to contribute towards the enhanced protection of the health and economic rights of informal cross-border traders (ICBTs) through the facilitation of continued trade during the COVID-19 pandemic. The expected outcomes are as follows: (a) consensus exists on policy direction to favourably incorporate informal cross-border trade and informal traders into national COVID-19 trade plans and to the extent possible, preparing for the COVID-19 socioeconomic recovery plans; (b) BCPs and border officials have improved capacity to facilitate a healthier and safer environment for ICBTs to operate; and (c) small-scale cross-border traders (SSCBTs)/ICBTs demonstrate increased ability on how to trade safely and operate at BCP during restrictions brought about as a consequence of COVID-19. It included both the national-level and border-specific analysis and analysis of the situation at Chirundu OSBP and Beitbridge as it intended to create a gender-mainstreamed baseline.

The rapid situation and needs assessment was based on a methodology, which included a rapid literature review, site visits to the two border posts and stakeholder consultations. Face-to-face interviews were conducted on a total of 40 Zimbabwean ICBTs – 20 from Chirundu OSBP and 20 from Beitbridge. Of these, 32 (80%) were female, while 8 (20%) were male. Furthermore, 16 (6 female and 10 male) key informant interviews from both BCPs were held. The interviewed key informants included those from the Zimbabwe Revenue Authority, Department of Immigration, Port Health, Trade Information Desk, CBTAs, as well as national representatives of the Ministry of Women Affairs, Community, Small and Medium Enterprises and the Interministerial Committee on Migration.

Findings from this project revealed that for eight months since the outbreak of COVID-19 in March 2020, ICBTs in Zimbabwe were banned from cross-border trading as part of the Government’s measures to mitigate against the spread of the disease across the borders. This measure caused a lot of unprecedented socioeconomic harm to the lives and livelihoods of ICBTs, the majority of whom entirely depend on



## EXECUTIVE SUMMARY

cross-border trade (CBT) for their basic survival. While at least 92 per cent of ICBTs in Zimbabwe are women, this project established that at least 92 per cent (n = 40) of ICBTs did not benefit from the National Stimulus Package Programme or any other such private or public arrangement. According to the informal cross-border border trade respondents, when the Government reopened the BCPs to informal cross-border trade in December 2020, the accompanying COVID-19 control measures were restrictive and costly. This included the mandatory submission of a negative COVID-19 polymerase chain reaction (PCR) test certificate within 48 hours at USD 65 per individual per test. This pushed ICBTs to either buy fake certificates only to be denied entry or exit at the BCPs, or use illegal border routes by jumping through flooded rivers (Zambezi and Limpopo). Among the many other challenges are import and export licences or permits not being issued at BCPs – as these facilities remained centralized in Harare (348 km from Chirundu OSBP and 581 km from Beitbridge) – and PCR testing facilities far away from the respective BCPs. When the Government put back the country on total national lockdown starting from 5 January 2021 for the next 30 days in response to the second wave of the pandemic, informal CBT was once again banned. This has further compounded the adverse socioeconomic disruptive effects of the pandemic on ICBTs.

Despite all these unprecedented socioeconomic challenges faced by informal CBT in Zimbabwe amidst the pandemic, this project established that ICBTs have remarkably demonstrated increased ability on how to trade safely and operate at BCPs during restrictions brought by the COVID-19 pandemic in Zimbabwe. When the Government opened BCPs to informal CBT in December 2020, almost all those interviewed ICBTs had received information or some form of essential education on the infection, prevention and control measures from various sources including the media and awareness programmes from government officials and local communities. The findings from the field visits at the BCPs revealed that the level of knowledge of prevention measures possessed by all the ICBT respondents was remarkably high. They correctly knew when to wash and sanitize their hands. They had a deeper appreciation of the importance of using face masks and maintenance of social distancing.

On the other hand, findings revealed that all border stakeholders were generally stretched in terms of the availability of the necessary resources for the effective management of COVID-19 at the BCP level. As for the front-line workers, they all said they lacked free regular and random COVID-19 testing, while others at times lacked adequate personal protective equipment (PPE) for use. In spite of all this, findings showed that BCPs and border officials exhibited the enhanced capacity to facilitate a healthier and safer environment for ICBTs to continue to operate amidst the pandemic and stringent national COVID-19 control measures aimed at curtailing the spread of the virus. Strategies implemented include the use of automated systems to clear goods, clearance of imported ICBTs' goods through the groupage system, enforcement of mandatory temperature checks, hand sanitization, use of face mask and observance of social distancing.

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Lack of harmonized and coordinated announcement and implementation of COVID-19 policy measures, misaligned quarantine measures, heterogeneous COVID-19 compliance requirements, and lack of exchange of necessary information among others, between Zimbabwe and its neighbouring countries, ranked highly as major causes of informal CBT disruption. Lack of interborder or transborder standard operating procedures and processes, diverging COVID-19 compliance requirements at BCP implementation level, absence of nearby designated COVID-19 testing centres – all transformed into new institutionalized non-tariff barriers to informal CBT, which resulted in ICBTs incurring high-trade costs. These indicative challenges require immediate attention and an all-encompassing approach in managing them, given that majority of the women in CBT are in this trade mainly for basic survival reasons (of themselves and their families).



# 1. Introduction

## 1.1. Project background

In the Southern African Development Community (SADC), informal cross-border trade (CBT) is significant, accounting for between 30 to 40 per cent of total intra-SADC trade, with an estimated value of USD 17.6 billion. Women, who make up approximately 70 per cent of informal traders, face gender-specific risks and are more susceptible to harassment and exploitation by corrupt officials (Sommer and Nshimbi, 2018). The majority of female informal cross-border traders (ICBTs) are relatively poor, with low levels of education, and trade in high volume of low-value goods, including food products, cosmetics, clothes and handicrafts (Jacobson and Joekes, 2019). Women in CBT (WICBTs) support some of the most fragile and impoverished communities, and so any threat to informal CBT poses a threat to the most vulnerable and least resilient. Moreover, besides a marked increase in gender-based violence and a decrease in access to sexual and reproductive health, COVID-19 is expected to affect women significantly more than men especially through widening existing financial inequality between men and women.

**Figure 1. Map of countries where the project was implemented**



Source: Map based on United Nations Geospatial Information Section and elaborated by the authors. Available at <https://un.org/geospatial/content/afrique-1>.

Note: This map is for illustration purposes only. The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the International Organization for Migration.

## 1. INTRODUCTION

The outbreak of COVID-19 in Southern Africa has led to border closures and travel restrictions throughout the region. Where CBT is permitted, it has been for larger commercial flows and not for the movement of people, accompanied by quarantine measures for varying periods, often at the cost of the traveller. Additional security measures have been put into place to patrol borders. For ICBTs, these changes have had a catastrophic impact on their livelihoods, and as they are unable to conduct their routine trade. COVID-19 restrictions have hit informal trade harder than other sectors, with women hit particularly hard by economic losses. There is likely to be further pressure on the informal sector post-COVID-19.

IOM is implementing a project titled “Supporting informal cross-border traders in Southern Africa to do business safely during the COVID-19 pandemic”. The project is being managed by the IOM office in Zambia and implemented in conjunction with IOM missions in Malawi, South Africa and Zimbabwe (Figure 1). The objective of this project is to contribute towards the enhanced protection of the health and economic rights of ICBTs through the facilitation of continued trade during the COVID-19 pandemic. The expected outcomes are as follows:

- Consensus exists on policy direction to favourably incorporate ICBTs and informal traders into national COVID-19 trade plans and to the extent possible, preparing for the COVID-19 socioeconomic recovery plans and strategies aimed at formalizing the informal sector.
- Border control posts (BCPs) and border officials have improved capacity to facilitate a healthier and safer environment for ICBTs to operate.<sup>1</sup>
- Small-scale cross-border traders (SSCBTs)/ICBTs demonstrate increased ability on how to trade safely and operate at BCP during restrictions brought by COVID-19.

This is intended to be an emergency response project, to be implemented over a period of seven months, between October 2020 to April 2021.

A rapid and needs assessment was therefore planned to take place in the first two months of the project as part of the inception phase, which would also serve as a baseline for future project activities. The assessment was specifically carried out at Beitbridge (South Africa and Zimbabwe), Chirundu one-stop border post (OSBP) (Zimbabwe and Zambia) and Mchinji/Mwami (Zambia and Malawi) BCP. It will serve to inform activities under the three outcomes of the project including the national-level policy dialogue and activities with border officials and Cross-Border Traders Associations (CBTAs) undertaken at the BCP level, which are part of this project.

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<sup>1</sup> In this study, border post and BCP are used interchangeably and have the same meaning.



## 1.2. Objectives of the assessment

This assessment serves to inform activities under the three outcomes of the project including the national-level policy dialogue and activities with border officials and CBTAs at the BCP level, which are part of this project. The specific objectives will therefore include the following:

- Establishing if consensus exists on policy direction to favourably incorporate ICBTs and informal traders into national COVID-19 trade plans and to the extent possible, preparing for the COVID-19 socioeconomic recovery plans and strategies aimed at formalizing the informal sector;
- Determining whether BCPs and border officials have improved capacity to facilitate a healthier and safer environment for ICBTs to operate;
- Finding out if SSCBTs/ICBTs demonstrate increased ability on how to trade safely and operate at BCP during restrictions brought about by COVID-19;
- Informing activities under the three components of the project including the national-level policy dialogue and activities with border officials and CBTAs undertaken at the BCP level, which are part of this project;
- Creating a gender-mainstreamed baseline.

This rapid situation and needs assessment's contributions would be in the form of research-based and assessment-informed recommendations to various stakeholders. These stakeholders include the regional and national policymakers, border stakeholders, CBTAs and other informal CBT supporting agencies, ICBTs and development partners.

## 1.3. Scope of the assessment

This rapid situation and needs assessment was undertaken in Zimbabwe at Beitbridge border post and Chirundu OSBP. The assessment served to inform activities under the three outcomes of the project including the national-level policy dialogue and activities with border officials and CBTAs undertaken at the two BCPs. It included both the national-level and border-specific analysis and analysis of the situation at Chirundu OSBP and Beitbridge. The project intended to create a gender-mainstreamed baseline. The rapid situation and needs assessment was based on a methodology, which included a rapid literature review, site visits to the two border posts, as well as consultations with a range of stakeholders including border officials, national-level policymakers from various government agencies as well as with the CBTAs other relevant trade entities (see Annex 1 for the terms of reference).



## 2. Methodology, assumptions and limitations

According to UNICEF (2010), rapid needs assessment includes carrying out primary and secondary research hurriedly or swiftly to gain an understanding of the key information that can drive programme design and implementation in emergencies. Rapid assessments are perceived as tools for making data available quickly to provide information on the impact of an emergency on affected populations, as well as improve response planning and resource mobilization. Under such emergency situations, primary research is the first-hand data, gathered through direct investigation of a topic or situation of interest, while secondary research is information that is already available about an issue. The latter can be in the form of previous studies, peer-reviewed journal articles, reports and other documents.

Essentially, four qualities describe a basic rapid situation and need assessment, and these are low cost, quick feedback of results, smaller sample size than would be expected with traditional survey methods, and increasingly, computerized data capture and analysis (Macintyre, 1999). Soon after the start of the emergency or outbreak, during the instant response phase, an initial often inter-agency rapid assessment must be carried out (UNICEF, 2010). The assessment field visits were undertaken from 14 to 18 December 2020 as part of the inception phase of the entire project.

### 2.1. Assessment methodology

This was a formative assessment that employed qualitative and to a lesser-extent quantitative research methods. Before primary data collection, a rapid literature or desk review of available recent publications, reports on informal CBT, and a rapid situation and needs assessment at Chirundu OSBP and Beitbridge were undertaken. Preliminary findings from the literature review helped in the further development and refinement of the primary data collection tools. The literature review formed part of the preparatory analysis that was conducted before initiating a detailed situational and needs assessment. It was instrumental in getting a deeper understanding of the assignment, situation and needs assessment. It entailed teasing out important issues that needed further investigation through analysis of the relevant primary data. The objective of the primary data collection was to interrogate further the preliminary findings of the literature review. A total of 40 ICBTs (20 from Chirundu OSBP and 20 from Beitbridge) who were all Zimbabwean traders were interviewed (Table 1). Of the 40 interviewed ICBTs, 32 (80%) were female, and the majority of those interviewed (37 or 93%) were not members of any CBTA. This agrees with the fact that approximately 70 per cent of informal traders are women.

## 2. METHODOLOGY, ASSUMPTIONS AND LIMITATIONS

Table 1. Individuals interviewed

	Non-CBTA member			CBTA member			Overall				
	Female	Male	Total	Female	Male	Total	Female	Male	Total		
Beitbridge	15	3	18	1	1	2	16	80%	4	20%	20
Chirundu–Zimbabwe	15	4	19	1	0	1	16	80%	4	20%	20
<b>Total</b>	<b>30</b>	<b>7</b>	<b>37</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>32</b>	<b>80%</b>	<b>8</b>	<b>20%</b>	<b>40</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Data was captured using computer-aided personal interviewing gadgets loaded with KoBoCollect data forms. The main purpose of these interviews was to collect information on the lived experiences of ICBTs at each targeted BCP.

Further to the ICBTs interviews held, a total of 16 (6 female and 10 male) key informant interviews were held with targeted stakeholders (see Table 2). These were identified during the stakeholder mapping exercise.

Table 2. Schedule of the key informant interviews at both border control posts

Full name	Sex		Organization	Designation
	National	Female		
1. Ruzive Magret		√	Ministry of Public Service, Labour and Social Welfare	Social Development Officer – Migration and vulnerable mobile person
2. Irvine Chivaura			Ministry of Home Affairs and Cultural Heritage	Deputy Director
<b>Beitbridge Border Control Post</b>	<b>Female</b>	<b>Male</b>		
3. Mafios Macheke			Beitbridge Cross-Border Transporter Association	Coordinator
4. Nobuhle Ncube	√		Department of Social Department	Superintendent
5. Trust Manatsire		√	Department of Immigration	Assistant Regional Immigration Officer
6. Tongogara Mutambanengwe		√	National Biotechnology Authority	Biosafety Officer
7. Levy Gama		√	Plant Quarantine Services	Station Manager
8. Oripa Makhado		√	Ministry of Health and Child Care – Port Health	Port Health Officer
9. Tina Mhlanga	√		Veterinary Services	Food Inspector
10. Mbuso Moyo		√	Zimbabwe Revenue Authority (ZIMRA)	Acting Shift Manager

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Full name	Sex		Organization	Designation
	National	Female		
Chirundu Border Control Post		Female	Male	
11. Chrysler Kudzai			√	Zimbabwe Cross-Border Traders Association Chairperson (Chirundu Chapter)
12. Rumbidzai Antonio	√			Environmental Management Agency Officer
13. Emmanuel Mashura			√	Plant Quarantine Services Institute Plant Health Inspector
14. Shelter Mtizwa	√			Trade Information Desk (TID) Office Trade Information Desk Officer (TIDO)
15. Violet Rupiya	√			ZIMRA Revenue Supervisor
16. Morgan Moyo			√	Department of Immigration Assistant Regional Immigration Officer

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

These key informants were purposively selected at both BCPs and the national level. At each BCP level, the interviews included the following government authorities: ZIMRA, Department of Immigration, Port Health, CBTAs, TIDOs and the plant inspector. At the national level, the stakeholders included representatives of the Ministry of Industry and Commerce, Ministry of Women Affairs, Community, Small and Medium Enterprises and members of the Interministerial Committee on Migration, as shown in Table 3.

**Table 3. Key informant interviewees disaggregated by sex**

	Female	Male	Total
National level	1	1	2
Beitbridge	2	6	8
Chirundu OSBP	3	3	6
<b>Total</b>	<b>6</b>	<b>10</b>	<b>16</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

The questions for the key informants were specifically tailored for each target group at the national level. Most importantly, these were designed to find out how informal CBT had been incorporated (or not) into the existing COVID-19 response plans, national economic recovery plans and strategic guidance at the national level. Similarly, at the BCP level, the questions were designed for border officials to solicit information on border restrictions that were currently in place at the time of this assessment, as well as their recommendations on how to improve the trading environment for informal CBT amidst the pandemic. Finally, walk-through

## 2. METHODOLOGY, ASSUMPTIONS AND LIMITATIONS

observations were conducted at each BCP and the border marketplaces. A total of 4 selected marketplaces within the border towns – 1 in Chirundu and 3 in Beitbridge, being Old Rank Flea Market, Mashakada Flea Market and Mashavira Flea Market – were visited for rapid walk-through observation, while the other 2 (Renkini Flea Market and Mbedzi Flea Market) could not be visited due to time constraint.



One of the stalls visited during the rapid assessment tour of the Old Rank Flea Market. © 2020/Rwatida MAFURUTU

Two observation checklists (border and market walk-through) were developed and used during the observation of all the border posts and the border markets (see Annex 4). These checklists had semi-structured questions that were developed, preloaded on KoBoCollect, an online data collection tool (see Annex 2 for the detailed overview).

### 2.2. Assessment assumptions

The researchers interviewed those whom they could find and agreed to be interviewed at the time of the assessment under the following assumptions:

- The inclusion criteria of the sample were appropriate and therefore assured that the participants had all experienced the same or similar phenomenon of the study.
- Those interviewed answered the interview questions honestly, candidly, and without fear or favour. They were assumed to have had a sincere interest in participating in the research.

- The presence of the National Steering Committee of the project and IOM personnel on the ground was assumed to be instrumental in getting the participation and cooperation of all the stakeholders who were targeted for the assessment.
- Every response given by each respondent or participant was considered informative and credible enough under the rapid needs and situational assessment.

### 2.3. Limitations of the assessment

At the time of carrying out the assessment:

- The informal CBT activities through the official control points were low given the new COVID-19 measures that were in effect. The measures included the mandatory production of a COVID-19-free certificate by each traveller within 48 hours of undergoing a polymerase chain reaction (PCR) testing. The cost of getting tested was USD 65 per individual, which turned to be too high and unaffordable to the majority of the ICBTs.
- The researchers could not interview as many ICBTs as they would have wanted due to time limitations.
- The implementation of fresh total lockdown measures by the Government in response to the second wave of the pandemic during the first week of January 2021 coincided with schedule for the face-to-face interviews with the key informants from government stakeholders at the national level. Use of email questionnaires was employed. The response rate turned out to be slow and low given the limited time frames. In the absence of their anticipated responses to the targeted questionnaires, applicable secondary data used were relevant.



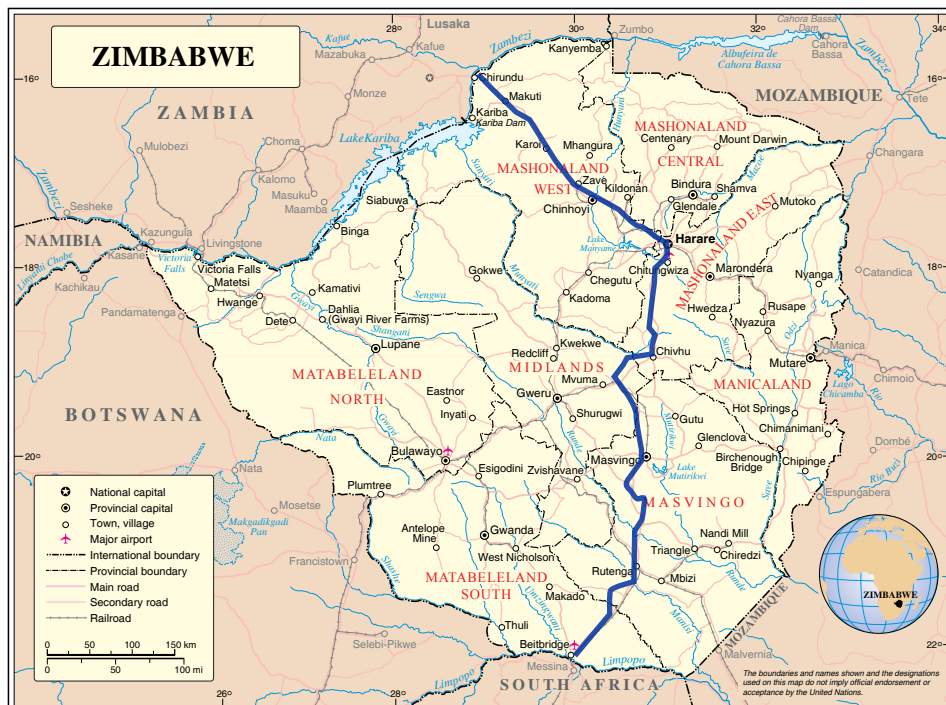


### 3. Chirundu/Beitbridge borders

#### 3.1. Description and location for Chirundu and Beitbridge

Chirundu borders Zimbabwe and Zambia to the north, while Beitbridge borders Zimbabwe and South Africa to the south. The name Chirundu is common to both Zimbabwe and Zambia, while Musina refers to the South African side border post that links to Beitbridge BCP. In the north, the Zambezi River splits Chirundu into Chirundu Zimbabwean side and Chirundu Zambian side. In the south, Limpopo River is the natural frontal demarcation between Zimbabwe and South Africa. Chirundu and Beitbridge are interlinked by the Chirundu–Beitbridge Road Corridor. Chirundu–Beitbridge is a major part of both the Regional Trunk Road Network and the Trans-African Highway Network Zimbabwean road connection between Zambia to the north and South Africa to the south (see Figure 2). It forms an important part of the North–South Corridor and the Cape to Cairo Road network connection (Mutume, 2002).

Figure 2. Beitbridge–Chirundu corridor



Source: Map based on United Nations Geospatial Information Section, 2017. Available at [zimbabwe\\_4210\\_r2\\_dec17\\_120.pdf](#).

Note: This map is for illustration purposes only. The boundaries and names shown and the designations used on this map do not imply official endorsement or acceptance by the International Organization for Migration.

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Chirundu is approximately 348 km from Harare, the capital city of Zimbabwe to its south, and 115 km from Lusaka, the capital city of Zambia to the north. Beitbridge is approximately 581 km from Harare to its north and approximately 544 km from Johannesburg, the industrial capital city of South Africa to its south.

### 3.2. Demographics and main economic activities at the border

The informal sector predominates in Southern Africa as a form of self-employment. The 2017 Southern African Migration Programme Report, which used both qualitative and quantitative survey methods, estimate the percentages of informal economy in South Africa to be at 33 per cent, Namibia at 44 per cent, and Zimbabwe at 52 per cent with Zimbabwe's informal sector largely constituted by women, and the Zimbabwe National Statistics Agency (ZIMSTAT) estimates it to be much higher than other countries in the region at 94.5 per cent for those in the age group of 15 years and above. The report further observed that the informal CBT between Zimbabwe and South Africa is significant, with Beitbridge being one of the busiest in the region. The same report estimates that Zimbabwe contributes 29 per cent of all ICBTs with South Africa (Southern African Liaison Office (NPC), 2017).

Table 4 shows the demographics of ICBTs interviewed at both BCPs as disaggregated by sex at the time of carrying out the field visits. The ages of the WICBTs interviewed at both BCPs ranged from 24 years (minimum) to 50 years (maximum) for Beitbridge and 26 years (minimum) to 60 years (maximum) for Chirundu OSBP. There are not many differences in the minimum age of male ICBTs at Beitbridge (35 years) and those interviewed at Chirundu OSBP (36 years). The marginal difference was also noted in their maximum ages, which were 46 years at Beitbridge and 48 years at Chirundu OSBP. The average age of all women combined (from Beitbridge and Chirundu), as well as all men, added together from the two BCPs were 43 years and 42 years respectively. This shows a marginal mean difference between the female and male interviewees.

**Table 4. Informal cross-border traders' demographics by sex**

	Sex	Mean	Minimum	Maximum	Range
Beitbridge	Female	41	24	50	26
	Male	42	35	46	11
	Total	41	24	50	26
Chirundu–Zimbabwe	Female	44	26	60	34
	Male	43	36	48	12
	Total	44	26	60	34
<b>Total</b>	Female	43	24	60	36
	Male	42	35	48	13
	Total	43	24	60	36

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Chirundu became an OSBP in December 2009. After just 12 months in operation, border crossing times were reduced by an average of 50 per cent (from 3 days to same-day clearance) for freight transport and 83 per cent (from 3 hours to 30 minutes) for passenger transport while Beitbridge handled a large significant number of commercial trucks per day (TradeMark Southern Africa, n.d.). Chirundu border economic activities consist predominantly of SSCBTs or ICBTs, mainly women and youth. Beitbridge's border economy can broadly be divided into four segments: (a) largely informal CBT; (b) a formal retail network that serves both traders and those crossing the border; (c) a logistics industry largely serving the movement of freight through several clearing agencies; and (d) theoretically, manufacturing, which has potential for further development through the Musina–Makhado special economic zone (Ngarachu et al., 2019). At the time of carrying out this assessment, a company named ZimBorders had won the concession tender to upgrade and modernize Beitbridge BCP. The scope of works covered a full upgrade of the border terminals where three new terminal buildings will be constructed and all related systems will be upgraded under phase 1. Other works included developing the fire station, housing, sewer line, housing electrical supply, reservoir, water pipeline and sewage treatment plant. Notably, project works were actually underway when the field visits were done.

From the information gathered from all the targeted interviewees during this assessment, it was generally concluded that both Chirundu OSBP and Beitbridge land borders were important locations for releasing regional value chains through commercial, small to medium, and individual or informal CBT. It was also observed that long queues of commercial trucks stretching to at least 10 km has characterized both BCPs since mid-December 2020. The delays were related to the mandatory requirements of the PCR COVID-19-free test certificates among other COVID-19 compliance measures.

### 3.3. Trade and migration at the borders

In the context of this assessment, CBT refers to the exportation or importation of goods and services by ICBTs through the designated BCPs. ZIMRA, through its Customs and Excise Division, is the lead border agent responsible for the customs operations, administration and management at all the country's ports of entry, including Chirundu OSBP and Beitbridge land borders. Its oversight is principally on the import, transit–movement and export of goods and services by formal and informal cross-border traders. ZIMRA border officials cited the Customs and Excise Act (Chapter 23:02) as their principal legislation that provides for the national exportation, transit–movement and importation or CBT of goods and services. Application of its provisions is done in conjunction with the country's various import, transiting and export subsidiary statutory instruments. These subsidiary statutes include the Customs and Excise (General) Regulations being Statutory Instrument 154 of 2001, and several export and import regulatory controls. It was established that besides ZIMRA, other government stakeholders are located at the BCPs and mandated with the regulatory control and movement of certain

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specified goods. These include Port Health, Agriculture, Environmental Management Agency, plant inspector and veterinary services. These border officials issue out and validate permits and licences depending on the type of goods traded. All exporters and importers, whether commercial or small-scale, formal or informal – including WICBTs – must adhere to these regulatory controls and requirements.

According to ZIMRA officials, the organization uses the Automated System for Customs Data (ASYCUDA) World System to clear ICBTs' goods and commercial consignments, as they are exported, imported or moved in transit across the BCPs. The system was said to be effective and efficient in the management of both customs and other border operations, which included the collection of import licence fees paid by ICBTs on behalf of other government departments such as veterinary services and plant inspector's fees. Concerning payment of the duties due by ICBTs, it was revealed that they pay through the ASYCUDA World System under a payment regime for private importations. This is the same regime that caters for informal CBT payments, while clearance of merchandise is done under the commercial clearance regime.

The researchers sought Customs border officials' views or clarification on claims made by ICBTs earlier on that the duties charged on their small groceries and basics were too high. The officials concurred that the official duty rates charged on most of the goods imported by ICBTs were considerably high, as they generally averaged at least 40 per cent. They further revealed that no legislation or any form of national decision was put in place to allow for reduced rates of duty or exemption or suspension of import duty on the basic goods commonly imported by ICBTs during this period of the pandemic.

As pointed out by ZIMRA, one striking attribute of ICBTs who frequently use Chirundu OSBP is that in most cases, ICBTs hide, fail to declare or attempt to smuggle goods, which when properly declared, they would not attract any duty or require import or export permits or licences. This was the case with most of those whom they caught using illegal routes prior to COVID-19. This was a clear indication that ZIMRA as a border stakeholder needs to conduct capacity training and building workshops for ICBTs so that they become knowledgeable on the customs procedures and processes that affect them.

The Immigration border officials concurred that migration and human mobility were critical enabling factors to the successful and meaningful CBT of goods and services by ICBTs at Chirundu OSBP and Beitbridge. They cited that while the movement of goods through BCPs was the responsibility of ZIMRA, the actual movement of people was the responsibility of the Department of Immigration. They highlighted that the department was mandated with the administration of Zimbabwe's Immigration Act, Chapter 4:02, 1996 Revised Edition and attendant Regulations of 1998 as amended, on behalf of the Government. The two aspects of control and facilitation of movement of people as they depart and enter the country were cited as being at the centre of their main functions. As part of its broader strategies to achieve these deliverables, the department operates category A, B and C visa regime on entry.

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Those people who do not require a visa on entering Zimbabwe fall under category A, while those who may be granted a visa on arrival fall under category B. Category C is for those who should obtain a visa before they travel to Zimbabwe. Over and above managing Zimbabwe's visa regime, the Department of Immigration also issues and extends several permits, which include investor residence permits and business visitor permits. The Immigration Border Management Information System (IBMIS) is the system used by the Department of Immigration to clear people as they exit or enter the country. It operated as a stand-alone computerized system at both BCPs.

Most of the ICBTs at Chirundu OSBP had raised issues regarding the fast running out of their passport pages due to the high frequency of crossing the BCPs, as well as big stamp impressions being used at Chirundu OSBP by both countries. A check in one of the randomly selected ICBT's passport revealed that stamp impressions before the COVID-19 outbreak were generally big. ICBTs revealed that getting a replacement passport was expensive and took long waiting periods (see next photo) to have it processed.



Example of an ICBT's passport taken during the situation and needs assessment at Chirundu OSBP.  
© 2020/Rwatida MAFURUTU

The Department of Immigration officials at Chirundu OSBP further confirmed that they no longer had the border pass facility in place following past abuse of this facility by other chancers who were not locals. These border passes were issued manually and to date, the department has no capacity to issue a machine-readable border pass. Border passes were now only being issued to deserving residents in extremely deserving circumstances like a bereavement of a close relative across the border, or serious health-related challenges only. According to the border officials, if the border pass system is to be revived, there will be a need to issue them from the computer system for ease of verification and implementation.

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At Beitbridge, the use of long stamps (a single stamp in the passport that is valid for a determined period, which allows the passport holder to move in and out as many times as one wants during the validity period instead of getting the passport stamped each time one travels) was stopped a long time ago. The revival of this facility depended on bilateral consensus with South African counterparts. The department was still engaging with the South African Immigration Department intending to restore the border pass but was quick to confirm that not much progress was gaining any traction.

Apart from baboons that frequently paraded and trooped Chirundu OSBP premises on a daily basis, all the interviewed ICBTs perceived the general security and lighting system at the BCPs to be satisfactory. At Beitbridge, it was observed that part of the security fence demarcating the entry side of the border premises (northbound) was intentionally removed. According to the border officials interviewed, this was done to give room for the ongoing construction activities meant to modernize the entire border.

#### 3.3.1. Informal cross-border trade at the border

Soon after the COVID-19 outbreak, all the ICBTs interviewed using the Chirundu OSBP and Beitbridge said they had been adversely affected by the stringent national COVID-19 response measures that were adopted and implemented by the Government. These measures included the total ban of movement of the people, particularly ICBTs and their goods across the borders. Following the phased-down relaxation of these measures starting from 1 December 2020, the ICBTs could still not freely trade as they were not able to meet all the new requirements. The new requirements included the following: (a) a person with COVID-19 symptoms despite presenting a negative COVID-19-free certificate not earlier than the previous 48 hours shall be refused entry into Zimbabwe; and (b) a person with no COVID-19 symptoms but cannot present a negative COVID-19-free certificate shall be refused entry into Zimbabwe (Veritas Zimbabwe, 2020a). The Port Health officials further explained they only considered and accepted PCR test certificates. All the ICBT interviewees and key informants confirmed that this mandatory test cost USD 65 per individual. All the interviewed ICBTs indicated that this amount was far beyond their affordability. Furthermore, buses were still banned from moving across the BCPs. On 2 January 2021, the Government reintroduced the total BCP lockdown. Reacting to the latest increasing cases of COVID-19 infections post-festive season, the Government completely banned informal CBT for 30 days that took effect on 5 January 2021. All the ICBTs interviewed and the majority of the border officials from both BCPs indicated that opening of the BCP to people movement without allowing passage of buses was self-defeating and made stifled trade facilitation of their sector. They suggested that the Government needed to immediately allow passage of public buses and make it mandatory for them to be decontaminated each time they passed through the BCPs.

Despite the national banning of informal CBT during the total lockdown period, ZIMRA introduced specific action plans and guidelines meant to facilitate and ensure that informal CBT continued to safely export and import their goods amidst the pandemic. To this effect, on 25 March 2020, ZIMRA issued a news/press release captioned “ZIMRA takes measures to curb the spread of COVID-19”, which covered the following key issues (Mazani, 2020):

- Maintenance of critical skeleton staff in all ZIMRA stations and offices;
- Provision of appropriate personal protective equipment (PPE) and sanitizers for all staff;
- All staff are provided with awareness communication and operational guidelines;
- Where practical, staff are encouraged to work from home;
- Use of electronic means for staff interacting with clients/agents;
- In case of suspected cases or exposure, staff members in question are immediately quarantined and health officials are alerted;
- Appropriate protective clothing are worn by stamping officers while processing documents;
- Clients are encouraged to access and utilize available ZIMRA e-service facilities on <http://efiling.zimra.co.zw/Pages/default.aspx> or [www.zimra.co.zw](http://www.zimra.co.zw);
- All face-to-face meetings with clients are suspended;
- Use of electronic means of communication is encouraged.

In another ZIMRA press statement titled “ZIMRA continues to provide essential services following the recording of COVID-19 cases at Beitbridge” dated 1 December 2020 (ZIMRA, 2020), the organization applied the following measures in instances of expected or suspected exposure to COVID-19 at the BCP:

- All contacts of suspected COVID-19 cases are tested;
- Offices, inland and at-risk border stations are immediately closed and subsequently disinfected;
- Relevant local medical authorities assist and guide in the reopening of disinfected offices;
- Maintenance of critical skeleton staff of ZIMRA stations and offices, where practical;
- Appropriate PPE and sanitizers are provided for staff;
- As much as possible, services are being offered to clients/agents via electronic means.

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- All travellers' imported dutiable goods must be pre-cleared and prepaid before arriving at the border.
- Clients are encouraged to access and utilize the available ZIMRA e-service facilities on <http://efiling.zimra.co.zw/Pages/default.aspx> or [www.zimra.co.zw](http://www.zimra.co.zw).

Field findings from Beitbridge BCP revealed that ZIMRA introduced the consolidation or aggregation of individual ICBTs' imported products or groupage system of clearing goods imported by individual ICBTs. This system was defined as the grouping or bringing together of goods belonging to various ICBTs so that they make up a full container or truckload. These products would be ferried by one means of transport to the BCP and on arrival, these would be cleared as if they belonged to one person.

Through this system, the officials said that the ICBTs could order their goods online whenever possible or send one person/representative to go buy on behalf of everyone or the group. The representative will then import aggregated goods for separate individuals through the BCPs as groupages. On arrival, these would either be cleared by clearing agents as if they were a single commercial consignment, or the individual owners would come at the BCP for final clearance of their individual goods. Where persons could not come individually to clear their groupages, then the entire aggregated consignment would be cleared in the name of the driver or transporter. Alternatively, and depending on the prior agreement of the individual owners, the transporter could offload the goods, leaving them in the custody of ZIMRA pending clearance by individual owners. As walk-in clients were banned, all communications, applications, inquiries and submission of documents were to be done online or through emails to ZIMRA. According to the new guidelines, every transporter of goods imported by informal CBT needs to submit (by email to ZIMRA) a cargo manifest at least three hours before the vehicle's arrival at the respective BCP. Mandatory information in the cargo manifest should include details of the transporter, individual receiving the goods, full names, national identity or passport numbers and addresses of each person whose goods are being transported and a full description, quantity and correct values of the goods, as well as the signature of the driver. ZIMRA will then raise an assessment in the ASYCUDA World System for payment by the driver or individual owners on arrival. Whenever required, physical confirmation of the declared goods is required to be done upon payment of the duties due, observing all the COVID-19 prevention measures.

While some of these response measures from ZIMRA were noble and commendable interventions amidst the pandemic, a closer analysis revealed that most of the ICBTs were not capable of ordering their goods online, especially in the absence of well-organized, robust and effective CBTA institutions at BCP level to do necessary arrangements with the potential suppliers and transporters to assist them. Furthermore, clearing the groupages as if they were commercial consignments, meant increased trade costs in the hands of individual ICBT with goods in the consignments. It was noted that clearing agents operating at both BCPs were professionals who charge commercial rates for whatever brokerage they offer



to anyone. While being welcome alternatives, ZIMRA needed to further refine its strategies in ways that struck a balance between facilitating informal CBT amidst the pandemic and reducing trade costs for the individual ICBTs.

In another press statement (*The Herald*, 2020), ZIMRA indicated that:

Where practical, ZIMRA stations and offices maintain critical skeleton staff. In addition, staff are being provided with appropriate Personal Protective Equipment (PPE) and sanitisers; and services are, as much as possible, being offered to clients/agents via electronic means. ... As a mitigating measure against the spread of the COVID-19 virus, clients are encouraged to access, utilise the available ZIMRA e-service facilities on <http://efiling.zimra.co.zw/Pages/default.aspx> or [www.zimra.co.zw](http://www.zimra.co.zw) and reduce the risks associated with travelling or handling physical documents. The authority also called on people to prioritise public health at all ports of entry.

The ZIMRA interviewees at Beitbridge further elaborated that travellers were being encouraged to use clearance methods of goods that minimize the human interface between its employees and clients. In addition, all travellers importing dutiable goods must preclear and prepay before arriving at the border to reduce crowding and the time spent at border posts.

Notably, some of these alternative facilities were beyond the knowledge and capability of the ordinary ICBTs, especially the vulnerable WICBTs. The majority of the ICBTs raised the issue of the high cost of airtime and Internet rates as one of the reasons they preferred to do ordering of goods in person once in the country of importation. Their knowledge and capacity to use Internet processes were highly limited. The possibility of making some of these strategies mandatory for ICBTs would only push them more into the use of illegal routes for purposes of smuggling. Notably, the majority of the ICBTs were doing so just for their basic survival and not for any business profits. In the absence of profits, use of the above alternatives would not be feasible and tenable to the poor ICBTs.

### 3.3.2. Migration through the border

IOM defines a migrant as any person who is moving or has moved across an international border or within a State away from one's habitual place of residence, regardless of the following: (a) the person's legal status; (b) whether the movement is voluntary or involuntary; (c) what the causes for the movement are; or (d) what the length of the stay is (IOM, 2019). In this rapid assessment, migration includes the movement of people or travellers, ICBTs from one country to the other through the BCPs, for the purposes that include import or export of their goods and services.

At both Chirundu OSBP and Beitbridge, it was observed that cross-border travellers were reporting first to the Port Health Officer's COVID-19 Compliance Desk. Once the health officer was satisfied with the compliance level and outcome of COVID-19 mandatory checks, travellers proceeded to the Department of Immigration Office.

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In the case of Beitbridge, only motorists proceeded to the Zimbabwe National Road Administration (ZINARA) counters for payment of toll bridge fees before getting to the Department of Immigration. Observation during the border walk-through tour at Beitbridge revealed that floor markings, especially on the exit side (southbound), originally meant to assist people standing in queues to maintain social distance had faded and had become less visible. COVID-19 wall posters printed in English and local languages were pinned on the walls at both BCPs within the halls, but these were generally inadequate, and more needed to be added as well as to replace the old ones.



COVID-19 wall poster printed in English at Beitbridge border post. © 2020/Rwatida MAFURUTU



COVID-19 wall poster printed in one of the local languages (Shona) at Chirundu OSBP. © 2020/Rwatida MAFURUTU

Soon after the outbreak of the COVID-19 pandemic, the Government responded by putting in place through public announcement, measures that included the total ban of informal CBT. This meant that the ICBTs could neither move as travellers nor as importers and exporters through the BCPs. In line with this national measure, no new or specific action plans or guidelines were put in place by the Department of Immigration to facilitate or ensure that ICBTs continued to physically move amidst the outbreak. Against this backdrop, most of the ICBTs interviewed at both BCPs – in their understanding and perceptions – wanted the Department of Immigration to reintroduce the border pass system as well as the long stamp approach especially during these times of the pandemic.

Despite putting in place all these measures, the Immigration officials were faced with the following operational challenges amidst the pandemic:

- Type of computers used for clearing travellers are now very slow, not up to date, and operate as stand-alone;
- Despite the large data traffic handled by Immigration especially at Beitbridge, IBMIS remained a stand-alone system that is usually down and unstable as it operates round the clock every day, every week and every month throughout the year;
- Non-availability of reliable heavy-duty machines that can be used to scan all travel documents;
- High frequencies of electricity outages leading to over-reliance on back-up sources of power for business continuity.

Remarkably, the aforementioned challenges of poor electricity outages, lack of computers resulting in the continued use of manual systems including the shortage of staff in some departments, and lack of Internet and Wi-Fi connectivity were commonly cited as causes of delay in migration through the BCPs by majority of the stakeholders. Veterinary services at Beitbridge had one lady officer on duty who worked round the clock without replacement. Her shift ran for a week before another would come in. By observation, discharge of her duties was in ways that were manually repetitive and burdensome.

During the Chirundu OSBP field visit on 14–15 December 2020, the Government had already eased its initial total ban on the movement of people across BCPs. People, including ICBTs, could resume cross-border movement and informal trade under some new conditions that included submission of a mandatory negative COVID-19 PCR test certificate valid for 48 hours from the time of testing, compulsory wearing of face mask and temperature check. By this time, at least 8 months had passed by with ICBTs under the ban from travelling across BCPs. In anticipation of an influx of movement of ICBTs starting 1 December 2020, strategies adopted by immigration at Chirundu OSBP included requesting six additional manpower from their head office. Like Beitbridge, the BCP was opened for 24 hours while additional computers were also secured at both BCPs.

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One of the new conditions set by the Government under its new relaxed measures was the mandatory requirement to produce a COVID-19-free certificate issued within 48 hours of arriving at the border. Feedback from the border officials from both BCPs revealed that this measure resulted in so many illegal routes along the borders being opened or used, as ICBTs could not afford the required USD 65 for PCR testing. This explained why the observed numbers of ICBTs that were officially crossing through both BCPs were lower in numbers than traditionally was the case at this time of year, two weeks after reopening the borders for people movement. Reported common challenges faced by border officials as they tried to balance between the continuity of informal CBT facilitation and controlling the spread of the pandemic included the following:

- Generally, most of the local people whose means of livelihood were based on local CBT struggled to obtain PPE for use as they crossed the BCP in compliance with the new requirements. Despite having high-level individual knowledge about the preventative and control measures of the pandemic, some of the border officials generally feared for their health and safety. While the majority of ICBTs equally demonstrated high-level individual knowledge of the preventative and control measures of the virus, the real challenge was in them affording to buy face masks and other related preventative materials.
- Local hospitals had no capacity to carry out the required PCR testing, while appropriate PPE for use by border officials was inadequate and often lacking due to lack of internal funding/limited budgets.
- Disinfection of the buildings was a challenge, as other border stakeholders rarely afforded this. Buses and other public means were not being decontaminated on arrival at the local border terminal where people disembarked to find other means of transport to get to the border, as buses were still banned from crossing the borders at the time of carrying out the field assessment.
- There was only one COVID-19 scanner booth (that is, a walk-through machine that automatically takes body temperature and sanitizes hands by remote sensing. It releases fog-like smoke that disinfects the entire human figure as one walks through it while at the same time allowing for foot bathing on entry into the buildings) at Chirundu OSBP where there are two separate entrance points to the hall.
- Beitbridge BCP had two scanner booths, with each on the exit side and entry side of the border. The one on the exit side (for those leaving for South Africa) was last used when one had already gone to the Department of Immigration, ZINARA and ZIMRA instead of being located at the Port Health official screening travellers by the entrance door to ZINARA or Department of Immigration exit counters. Border stakeholders at both BCPs indicated that additional booths were needed. General inadequacy of other preventative and control facilities (temperature check tools,

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handwashing dispensers, foot baths, hand-sanitizing dispensers and others) at both BCPs. To being inadequate at both BCPs, these had more downtime periods than expected.



People passing through the COVID-19 booth at Chirundu OSBP on 15 December 2020. © 2020/ Rwatida MAFURUTU

During the week of field assessments at Chirundu OSBP and Beitbridge BCPs, from 14 to 18 December 2020), informal CBT was already taking place following its prior reintroduction by the Government, which took effect on 1 December 2020. The ICBTs were now allowed to import and export goods under new relaxed but restrictive measures from the initial total ban. Despite the thriving import and export of goods by ICBTs at both BCPs, ZIMRA officials indicated that generally, the volume of goods that were passing through the border was far less than prior to COVID-19. They attributed this trend to the rampant smuggling of goods through illegal cross-points, as ICBTs were avoiding the costly COVID-19 PCR testing requirement.

### 3.4. Cross-border traders association and other informal cross-border trade-support agencies/organizations at the border

#### 3.3.1. Profile of informal cross-border traders using the border

The mean age of all ICBTs interviewed was 43 years, while for Beitbridge, it was 41 years and Chirundu–Zimbabwe was 44 years. The minimum age of the ICBTs interviewed was 24 years while the maximum age was 60 years (see Table 5). There is no major noticeable variance between male and female categories. The age interval

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for women was from 24 years to 50 years at Beitbridge compared to their male counterparts at 35 years to 46 years. At Chirundu OSBP, women's age range was from 26 years to 60 years compared to men's 36 years to 48 years.

**Table 5. Summary statistics of the informal cross-border traders' age**

	Sex	Mean	Minimum	Maximum	Range	Standard error of mean	Standard deviation
Beitbridge	Female	41	24	50	26	2	9
	Male	42	35	46	11	3	5
	Total	41	24	50	26	2	8
Chirundu–Zimbabwe	Female	44	26	60	34	2	10
	Male	43	36	48	12	3	6
	Total	44	26	60	34	2	9
Total	Female	43	24	60	36	2	9
	Male	42	35	48	13	2	5
	Total	43	24	60	36	1	8

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

ICBTs interviewed at Chirundu indicated that they all (100%) only operated at Chirundu OSBP, while 90 per cent of those interviewed in Beitbridge said they only operated at Zimbabwean side–Beitbridge border post (ZWBPP). To those most frequently using Beitbridge, the remaining 10 per cent (women) stated that they occasionally used other BCPs (see Table 6). Further inquiry revealed that these very few (2 women traders) used Forbes border post in Mutare City in Manicaland Province and Nyamapanda border post in Kotwa District in Mashonaland East Province. Both BCPs are land borders to Zimbabwe with Mozambique. It could not however be established at the time of the interview which type of goods they were importing or exporting through these BCPs, as this was beyond the scope of the assessment on hand.

**Table 6. Most frequently used border post by informal cross-border traders**

	Sex	Beitbridge (%)	Chirundu OSBP (%)	Others (%)
Beitbridge (n = 20)	Female (n = 16)	87.5	0.0	12.5
	Male (n = 4)	100.0	0.0	0.0
	Total (n = 20)	90.0	0.0	10.0
Chirundu OSBP (n = 20)	Female (n = 16)	0.0	100.0	0.0
	Male (n = 4)	0.0	100.0	0.0
	Total (n = 20)	0.0	100.0	0.0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

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Respondents from both BCPs cited various reasons why they chose to venture into informal CBT. As shown in Table 7, the lack of employment at 30 per cent (includes 37.5% of the total women who use Beitbridge at n = 16 and 12.5 per cent of the total women who use Chirundu OSBP at n = 16) followed by basic survival reasons at 22.5 per cent were the major push factors of individuals into informal CBT. Linked to basic survival reasons was the need by respondents to fend for their families, including their extended families at 20 per cent, followed by passing on of a breadwinner in the family at 17.5 per cent. These were the two main reasons why women ventured into informal CBT. Some men (12.5%, n = 8) reported that they ventured into informal CBT as this was the easiest profession after school. Much of women's reasons were on fending and looking after the family.

**Table 7. Reasons for venturing into informal cross-border trade**

	Beitbridge (n = 20)			Chirundu–Zimbabwe (n = 20)			Overall (n = 40)		
	F (n = 16) (%)	M (n = 4) (%)	Total (n = 20) (%)	F (n = 16) (%)	M (n = 4) (%)	Total	F (n = 32) (%)	M (n = 8) (%)	Total (n = 40) (%)
Lack of employment/high unemployment levels	37.5	50.0	40.0	12.5	50.0	20.0	25.0	50.0	30.0
Basic survival reasons	25.0	0.0	20.0	18.8	50.0	25.0	21.9	25.0	22.5
To fend for family (including extended family members)	18.8	25.0	20.0	25.0	0.0	20.0	21.9	12.5	20.0
Passing on of a breadwinner in the family	18.8	0.0	15.0	25.0	0.0	20.0	21.9	0.0	17.5
To complement monthly salaries	0.0	0.0	0.0	12.5	0.0	10.0	6.3	0.0	5.0
It was the easiest thing to do soon after leaving school	0.0	25.0	5.0	0.0	0.0	0.0	0.0	12.5	2.5
Others	0.0	0.0	0.0	6.3	0.0	5.0	3.1	0.0	2.5

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

## 3. CHIRUNDU/BEITBRIDGE BORDERS

Following the conditional opening of the country's borders to the movement of all people and their goods by the Government on 1 December 2020, both BCPs started recording clearances by ICBTs. Based on the findings shown in Table 8, it can be concluded that at the time of carrying out the assessment, 95 per cent of those interviewed at Chirundu OSBP and 80 per cent of those interviewed at Beitbridge were involved in CBT. Overall, there is no clear-cut difference between women and men involved in informal CBT during the COVID-19 era.

**Table 8. Informal cross-border traders involved in cross-border trading, 14–19 December 2020**

Border post	Informal cross-border traders currently involved in cross-border trading			
	Frequency	Overall (%)	Female (%)	Male (%)
Beitbridge (n = 20)	16	80	81	75
Chirundu–Zimbabwe (n = 20)	19	95	94	100
<b>Combined total</b>	<b>35</b>	<b>88</b>	<b>88</b>	<b>88</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

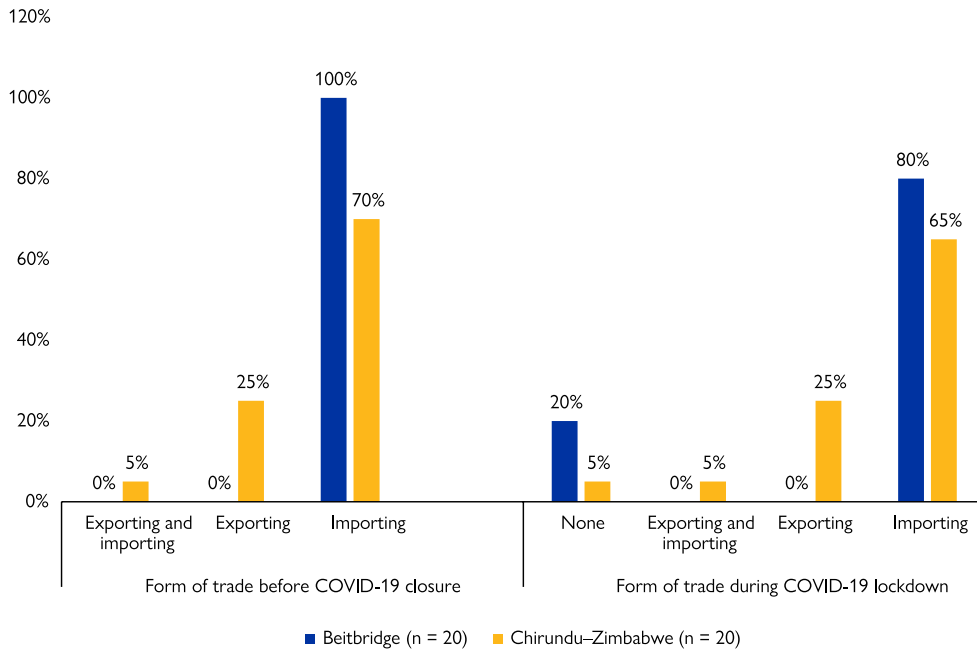
Despite this development, respective border officials at both BCPs confirmed that the movement of people and the export and import of goods by ICBTs via the designated points had notably remained exceptionally low compared to other prior periods of normal trade. Most of ICBTs interviewed openly admitted that they had resorted to using illegal routes to cross the borders because they could not afford to pay USD 65 for a PCR test to get the mandatory COVID-19-free certificate. Border officials unanimously concurred that this requirement had become a new form of non-tariff barrier to informal CBT whose effect was to fuel illegal cross-border migration. Findings showed that at least 87 per cent of the interviewed ICBTs had resorted to smuggling of goods through border jumping because of this mandatory requirement.

The majority of male ICBTs revealed that they resorted to border jumping or use of illegal crossing points because they could not afford the USD 65 required for one to undergo a PCR test for COVID-19. A total of 35 (at least 87%) of the 40 interviewed ICBTs were still trading at the time of this assessment. Figure 3 shows that the majority of the interviewed ICBTs were involved in importing goods into Zimbabwe, while quite a few were involved in exporting before and during the COVID-19 restrictions. Before the COVID-19 lockdown, 85 per cent (n = 40) reported importing goods to Zimbabwe, and during the COVID-19 lockdown, 73 per cent (n = 40) reported doing so. These statistics show that smuggling through illegal points kept ICBTs thriving, given that both Customs and Immigration officials confirmed that volume of goods and people travellers passing through the BCPs were all low.



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**Figure 3. Form of trade before and after the COVID-19 lockdown either through official routes or otherwise**



Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Further analysis was done on how women participated in trading before and during the COVID-19 travel ban. The only noticeable change was an increase in exporting reported by the females from 12.5 per cent (n = 32) to 14.3 per cent (n = 32) (see Table 9).

**Table 9. Form of trading disaggregated by sex of informal cross-border trader (%)**

	Form of trading					
	Exporting		Importing		Exporting and importing	
	Before COVID-19 restrictions	After COVID-19 restrictions	Before COVID-19 restrictions	After COVID-19 restrictions	Before COVID-19 restrictions	After COVID-19 restrictions
Female (n = 32)	12.5	14.3	84.4	82.1	3.1	3.6
Male (n = 8)	12.5	14.3	87.5	85.7	0.0	0.0
<b>Total</b>	<b>12.5</b>	<b>14.3</b>	<b>85.0</b>	<b>82.9</b>	<b>2.5</b>	<b>2.9</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

At Chirundu OSBP, the number of ICBTs who were exporting remained constant at 25 per cent before and during the COVID-19 lockdown. The use of illegal routes at Chirundu by ICBTs was cited by border stakeholders as the main reason why exports had remained constant at 25 per cent prior to the COVID-19 outbreak and thereafter. Table 10 shows that new clothes and shoes, processed food products

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and bedding materials (blankets, bed covers, bedsheets, pillows and the like) were the commonly imported goods both before and during the pandemic as at the time of carrying out the assessment. This supports the fact that ICBTs trade in high volumes of low-value goods. As for the import of the rest of the goods (building materials, fresh fruits or vegetables, fresh meat or fish, used clothing and shoes, cosmetics, electricals and handcrafts), no significant or noticeable changes occurred during the period before and after the introduction of COVID-19 restrictions by the Government. Common goods imported by women at both BCPs included new clothes and shoes, blankets, bed covers/bedsheets, pillows, processed food products and household items. Unique to women at Chirundu OSBP is the importation of cosmetics, fruits and vegetables plus more of second-hand clothing and shoes.

**Table 10. Goods imported before and during COVID-19 lockdown (%)**

	Beitbridge (n = 20)			Chirundu–Zimbabwe (n = 20)			Overall (n = 40)		
	Female	Male	Total	Female	Male	Total	Female	Male	Total
New clothes and shoes	81.3	50.0	75.0	75.0	66.7	73.3	78.6	57.1	74.3
Blankets/ Bed covers/ bedsheets/ pillows, etc.	18.8	0.0	15.0	33.3	33.3	33.3	25.0	14.3	22.9
Processed food products	18.8	25.0	20.0	8.3	33.3	13.3	14.3	28.6	17.1
Household items	18.8	25.0	20.0	8.3	0.0	6.7	14.3	14.3	14.3
Cosmetics	0.0	0.0	0.0	25.0	33.3	26.7	10.7	14.3	11.4
Electricals	6.3	25.0	10.0	8.3	33.3	13.3	7.1	28.6	11.4
Second-hand clothes and shoes	6.3	0.0	5.0	16.7	0.0	13.3	10.7	0.0	8.6
Fresh meat and/or fish	6.3	0.0	5.0	8.3	0.0	6.7	7.1	0.0	5.7
Building materials	6.3	0.0	5.0	0.0	0.0	0.0	3.6	0.0	2.9
Fresh fruits and/or vegetables	0.0	0.0	0.0	8.3	0.0	6.7	3.6	0.0	2.9
Handicrafts	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0
Others	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

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All the respondents generally agreed that the availability of reliable and affordable transport logistics was key to the successful movement of their goods across borders. They all concurred that transport costs, no matter how low or high, impacted the landed cost of their wares. At least 87 per cent of ICBTs that were interviewed at both BCPs said they paid transport costs for the movement of their goods, and 46 per cent of them said the charged fares were generally affordable. The use of the same commercial trucks by each ICBT over a long time had resulted in them being charged favourable and discounted transport charges. On the other hand, the remaining 54 per cent said the transport costs charged were at least high. Table 11 shows that of this 54 per cent, 35 per cent said it was high while 13 per cent said it was very high. It was their view that these high transport charges significantly ate into their limited profit margins.

**Table 11. Payment of transport costs (%)**

Border post	Do you pay transport fares for your goods from one country to the other?		What would you say about the fares?		
	No	Yes	Affordable	High	Very high
Beitbridge (n = 20)	5	95	55	25	15
Chirundu–Zimbabwe (n = 20)	20	80	25	45	10
<b>Total</b>	<b>13</b>	<b>88</b>	<b>46</b>	<b>35</b>	<b>13</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Further analysis of the data shows that all interviewed men (100%, n = 8) pay for transportation of their goods. Though a greater majority (84%, n = 32) of women reported paying for the transportation of their goods, there were some (16%, n = 32) who reported that they do not pay for such services. No clear explanation could be given in respect of this trend, although a few hinted that they had generally been using the same transporters for so many years. This reasoning was consistent with the earlier findings that ICBTs frequently use one BCP for their CBT business or activities.

**Table 12. Proportion of those who pay for the transportation of goods by sex (%)**

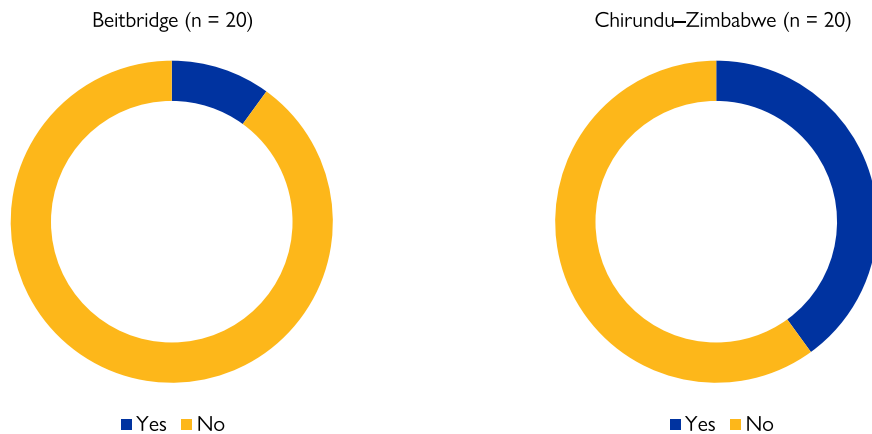
	Paying for the transportation of their goods			
	Female (n = 32)		Male (n = 8)	
	No	Yes	No	Yes
Beitbridge	6	94	0	100
Chirundu–Zimbabwe	25	75	0	100
<b>Overall</b>	<b>16</b>	<b>84</b>	<b>0</b>	<b>100</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

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Figure 4 shows that exported and imported goods requiring permits or licences constituted 25 per cent of the total traded goods at both BCPs. Almost half (40%) of all the traded goods through Chirundu OSBP required export and import permits or licences compared to only 10 per cent at Beitbridge BCP.

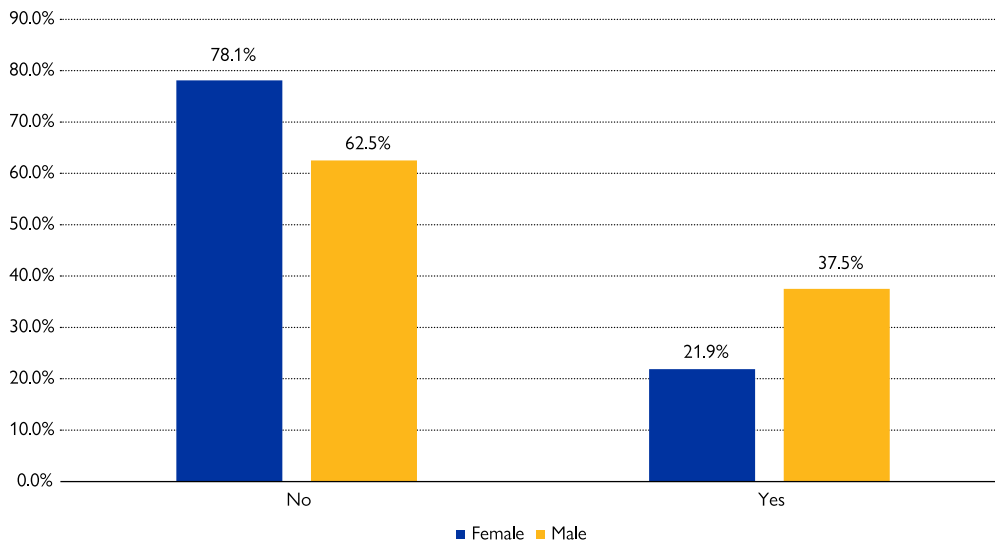
**Figure 4. Trade in goods that require Zimbabwean export or import permits or licences**



Trade goods that require export and import permits or licenses?		
	Yes (%)	No (%)
Total (n = 40)	25	75

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Many women (78.1%, n = 32) reported that they traded in goods that did not require trade permits or licences, while more men traded in goods that required permits or licences (Figure 5). By analysis, this was a proxy indicator of the value of goods traded, as those that require permits/licences are high-value goods or these are goods that probably sell fast. For the majority of women to start trading in these controlled goods, there is a need to decentralize issuing of these permits at BCP levels so that women can equally enjoy whatever benefits that make more men traded in these goods.

**Figure 5. Proportion of informal cross-border traders whose goods require permits/licences by sex**

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

All the respondents were concerned that despite the outbreak of the pandemic, the export and import permits and licences on applicable goods were still not being issued at the BCPs but from head offices located in Harare, the capital city of Zimbabwe. By location, Harare is about 348 km from Zimbabwean side–Chirundu one-stop border post (ZWCH OSBP) and about 581 km from ZWBPP. Furthermore, interviewees revealed that these permits and licences could not be interchanged or redeemed by another person other than the one to whom they were issued in their names. While indications were that these permits could be obtained online, this was not readily known to the ICBTs who were interviewed. Despite their limited capacities (high cost) and knowledge (lack of capacity-building from the service providers) in the use of Internet-based technologies, it could be concluded that respective government stakeholders had not done enough in alerting the public, especially ICBTs to the existence of such facilities. Aggressive sensitization of the existence of such online facilities lacked both at national and BCP levels.

Concerning order placement and transaction methods of payment by ICBTs, 100 per cent said they owned smart mobile phones, 90 per cent owned mobile accounts, and 55 per cent owned bank accounts (Table 13). Despite possessing all these, almost all the ICBT respondents said they relied on the face-to-face physical placement of orders once in the country of importation. In respect of payment method used, 39 in 40 ICBTs said they used cash while only 1 in 40 said they used electronic Visa cards. The high percentage rates charged as government levy for every transaction through traditional banking or Internet banking was cited as highly discouraging and prohibitive by all the ICBT interviewees. Airtime costs and Internet charges imposed by service providers were cited by the ICBTs as too high for their affordability. Their suggestions included the urgent need for the Government to lower its levies being charged on every intermediate transaction, as well as to either

## 3. CHIRUNDU/BEITBRIDGE BORDERS

control airtime and Internet charges or engage service providers to generally charge favourable rates. Bankers were singled out for the need to lower bank charges to promote and encourage the use of bank transfer facilities by ICBTs.

Analysis of data by sex shows that compared to men, more women interviewed at Beitbridge BCP had mobile accounts. Similarly, survey outcomes show that across the two BCPs, more women than men had more bank accounts.

**Table 13. Cell phone, mobile accounts and bank accounts ownership (%)**

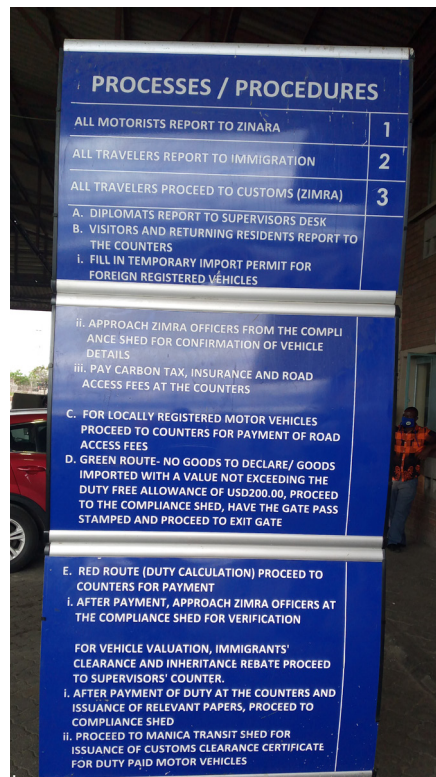
	Beitbridge (n = 20)			Chirundu–Zimbabwe (n = 20)			Overall (n = 20)		
	Female	Male	Total	Female	Male	Total	Female	Male	Total
Cell phone	100	100	100	100	100	100	100	100	100
Mobile account	81	75	80	100	100	100	91	88	90
Bank account	50	25	45	63	75	65	56	50	55

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

From the common list of challenges faced by ICBTs, Beitbridge had more reports than Chirundu OSBP who faced delay challenges emanating from standing in long queues while waiting to be served by the border officials. This was attributed to the fact that Beitbridge is one of the busiest land borders in the region. Notably, this was also the biggest challenge at Chirundu OSBP. On the other hand, Chirundu OSBP had more reports on challenges related to the cumbersome (repetitive and time-consuming, often manual and therefore burdensome to comply with) clearance process than Beitbridge. Apart from these BCP-specific distinctions, cumbersome processes generally remained the cause of major concern among ICBTs interviewed at both BCPs. As can be deduced from the consolidated responses shown in Table 14, the following challenges were encountered at both BCPs: (a) detention of goods by Customs officials without clear explanations as to why, (b) duplication or replication of physical searches on the same goods by different border officials, and (c) shortage of water within the border premises (both for drinking and in ablution facilities).

Analysis of the above findings concluded that lack of adequate public signage and step-by-step visual aids (see photo) to assist ICBTs in giving them directions once within the border premises at both BCPs contributed a lot to the persistence of these singled-out border delays.

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The only public signage on the entry side (northbound) at Beitbridge BCP. © 2020/Rwatida MAFURUTU

As earlier on reviewed, the absence of clearly displayed clients' charters at both BCPs continued to aggravate the dilemma of ICBTs. Over and above closing these gaps, border stakeholders needed to come up with express lanes for those ICBTs with goods that do not attract duties or require the production of permits or licences. Border queue management that separates men from women and allows for social distancing (through clear one-metre markings) can assist in reducing overcrowding and unnecessary mingling at any given instance. Priority clearance should be extended to women traders, especially the elderly, pregnant and those with children at their backs. Already, the survey has found out that the maximum age for women was higher than those for men at both BCPs. At Chirundu OSBP, the oldest women interviewees had a maximum age of 60 compared to 48 years for men, while at Beitbridge, it was 50 years for women compared to 46 for men. All the ICBTs interviewees suggested that instead of having repeated searches at every stage, border officials needed to come together and then carry out such searches (if ever really necessary especially during these pandemic periods) at once.

As expected, more women than men complained about water shortages at both BCPs. At least 9 per cent (9.4%, n = 32) women respondents reported cases of harassment from both BCPs, while no report was made by men. Few women may have reported instead of many of them, because such issues may be generally sensitive even to the victims. Given this possible analysis, many women could have been afraid to report such cases. As earlier on reviewed, women empowerment through capacity-building by way of training them in border processes and procedures by

## 3. CHIRUNDU/BEITBRIDGE BORDERS

respective border officials is critical. Providing separate lanes under border queue management for women and men and conducting physical searches in the presence of all border officials with such mandates would go a long way in reducing cases of any form of harassment and other associated challenges.

**Table 14. Common challenges faced by informal cross-border traders by border control post (%)**

Challenges	Beitbridge (n = 20)	Chirundu– Zimbabwe (n = 20)	Overall		
			Male (n = 32)	All (n = 8)	Female (n = 40)
Standing in a long queue waiting for one's turn to be cleared by the border officials	90.0	55.0	68.8	87.5	73.0
Detention of goods by Customs officials without a clear explanation as to why	35.0	45.0	40.6	37.5	40.0
Searches or physical verification of goods by many border officials one after the other	30.0	40.0	34.4	37.5	35.0
Shortage of water within the border premises (tapes, ablution facilities, etc.)	30.0	35.0	37.5	12.5	33.0
Cumbersome clearance processes	15.0	30.0	18.8	37.5	23.0
Closed or decrepit toilet or ablution facilities	20.0	10.0	18.8	0.0	15.0
Others	5.0	25.0	15.6	12.5	15.0
Harassment from any of the border officials	5.0	10.0	9.4	0.0	8.0
Being cleared from the same place with commercial trucks, other motorists and others	0.0	15.0	6.3	12.5	8.0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

More than half (58%, n = 40) of the combined interviewees reported that they frequently experienced one or more of these challenges at the respective BCP they used (see Table 15 for the complete summary of the findings). There was 3 per cent (n = 32) of women who reported that they meet challenges more frequently, and this was not so with men. Combined, more women reported that they experience these challenges frequently (56%, n = 32) and very frequently as compared to men.



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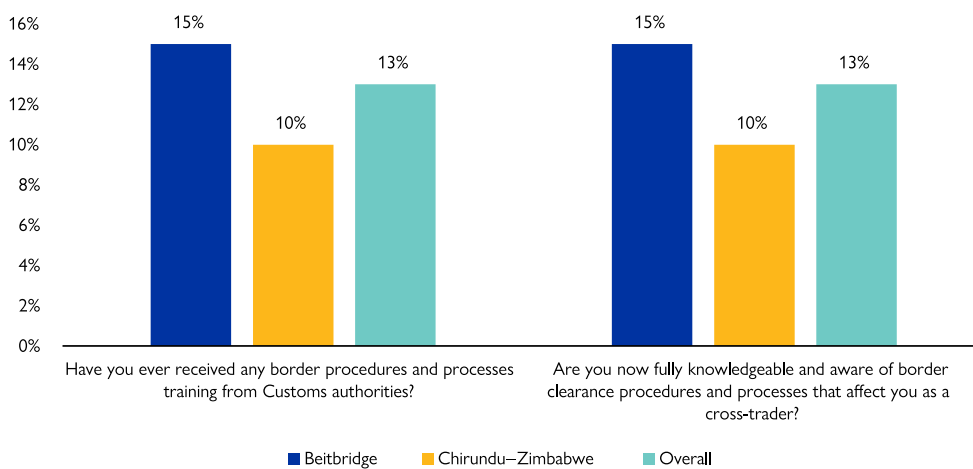
**Table 15. Frequency of experiencing challenges (%)**

	Border control post		Sex		Overall
	Beitbridge	Chirundu–Zimbabwe	Female	Male	
Frequently	50	60	56	50	55
Rarely	50	35	41	50	43
Very frequently	0	5	3	0	3

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Pertaining to the knowledge of border procedures and processes by ICBTs, 85 per cent from Beitbridge and 90 per cent from Chirundu OSBP had never received any form of training from Customs authorities, CBTA or any other border stakeholders. This was despite the survey findings that almost all the ICBTs interviewed had been entirely using either Beitbridge or Chirundu OSBP for longer periods, stretching into years going into the past. Only very few (15% at Beitbridge and 10% at Chirundu OSBP) said they were fully knowledgeable and aware of border processes and procedures in application (Figure 6). It is critical for the border officials to provide frequent pieces of training targeted at specific BCP standard operating procedures (SOPs) and processes. Identification of areas by sex, gender or age among the ICBTs is a noble gap-closing strategy. These pieces of training will be of greater value addition to the targeted ICBTs if delivered in local languages for enhanced participation and understanding.

**Figure 6. Training on border procedures and processes**



Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

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Regarding just-after the border challenges faced by ICBTs, as seen from Table 16, the majority (75%, n = 40) of the total interviewees reported that they had frequently encountered delays related to numerous highway roadblocks in one trip. A considerable 37 per cent of them said that these highway roadblocks were too many and had become unnecessary in their business opinions.

**Table 16. Respondents encountering roadblocks and their perception (%)**

Border post	Have you ever encountered roadblocks to check or verify on your imported/exported goods?		How frequently are you checked at these roadblocks?	
	No	Yes	Moderate and necessary	Too many and unnecessary
Beitbridge (n = 20)	25	75	53	47
Chirundu–Zimbabwe (n = 20)	25	75	73	27
<b>Total</b>	<b>25</b>	<b>75</b>	<b>63</b>	<b>37</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

A considerable majority (47%, n = 20) of ICBT interviewees from Beitbridge who frequently encountered roadblocks to check or verify on their imports or exports said that these were too many and unnecessary. They implored that these numerous roadblocks along the Beitbridge highway needed to be scaled down given that similar searches by officials from the same border stakeholders would have inspected the same consignments at the BCP as part of clearing processes. The analysis shows that such delays added up to the trade costs of ICBTs, and such activities needed to be coordinated in ways that eliminated or reduced duplicity.

### 3.3.2. Services provided by Cross-Border Traders Associations and Trade Information Desk Officers to small-scale cross-border traders and informal cross-border traders

#### Services provided by Cross-Border Traders Associations

The Zimbabwe Cross-Border Traders Association–Chirundu Chapter (thereafter the Chapter) indicated that they kept a manual membership register that contained extremely limited information about its membership who were generally very few and estimated to be less than 25 in total. Female ICBTs were the majority and estimated to be around 20. This finding was corroborated by the outcomes of the ICBTs who were interviewed across the two BCPs, as only 8 per cent (3 people out of 40) of them indicated that they belonged to a CBTA (1 male and 1 female from Beitbridge BCP and 1 female from Chirundu OSBP). The chairperson emphasized that their services were not only limited to its members only but were freely available and open to all ICBTs who use the BCP. Table 17 summarizes in detail the proportion of CBTA members against non-CBTA members both at each BCP, as well as across the two BCPs under the rapid assessment.

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**Table 17. Respondents disaggregated by Cross-Border Traders Association membership**

	Non-CBTA member			CBTA member			Overall				
	Female	Male	Total	Female	Male	Total	Female	Male	Total	Female	Male
Beitbridge	15	3	18	1	1	2	16	80%	4	20%	20
Chirundu–Zimbabwe	15	4	19	1	0	1	16	80%	4	20%	20
<b>Total</b>	<b>30</b>	<b>7</b>	<b>32</b>	<b>2</b>	<b>1</b>	<b>3</b>	<b>32</b>	<b>80%</b>	<b>8</b>	<b>20%</b>	<b>40</b>

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Concluding from the feedback obtained from 93 per cent of ICBTs interviewed across the two BCPs, CBTA was non-existent and offered no form of services to them. The majority of the women in this category said they were not aware of the existence of such an organization and what it stood for. Very few of the respondents who had heard about CBTA perceived it as another organization bent towards collecting money from them through the payment of joining fees in return for no service or benefit to them. The Chapter said it had no member who was registered with CBTA or other trade-related associations on each side of the border.

All interviewees at Beitbridge said they did not belong to any local CBTA branch or chapter. From the feedback given by the chairperson of the Chapter during the field visits, the services they provide to ICBTs at Chirundu OSBP are representative and operational. They include constantly influencing for a conducive and trade facilitative environment at Chirundu OSBP through the mutual engagement of all the border stakeholders where necessary and whenever there is that need, but these efforts according to the respondent had not been always easy. These noble intentions were however not known to the majority of ICBTs interviewed at the BCP. The majority of them said they did not know about the existence and role of CBTA at the border. All the interviewed ICBTs indicated that they had never attended any meeting or workshop convened by the Chapter on any border-related issues. Some of the major common challenges they faced in their efforts to provide services to ICBTs are summarized in Table 18.

**Table 18. List of major common challenges faced by the Chirundu Chapter in service provision**

1	Often left out/not invited to numerous local border stakeholders' meetings where local decisions binding on ICBTs and SSCBTs are made and agreed upon. In most cases, they attend meetings with the border stakeholders, which are organized upon invitation by development partners.
2	As an organization representing ICBTs, they feel left out and less engaged or informed by Port Health officials on COVID-19.
3	Absence of clear-cut SOPs to guide ICBTs and SSCBTs in a more progressive and predictable manner.

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4	No educational workshops being conducted by respective border officials to the Chapter, ICBTs and SSCBTs.
5	Sometimes, Customs put high values on their imported goods in ways that are not understood by ICBTs; sometimes, goods were not charged duty, while in certain circumstances, the same goods in few quantities were charged.
6	Administrative challenges: Manual membership registers are not up to date with extremely limited biodata and related information of their members.
7	Exceptionally low and loosely affiliated membership.
8	Inability to project their purpose to ICBTs and SSCBTs.
9	Low uptake of the Simplified Trade Regime (STR) facility as the majority of ICBTs who should be benefiting from it do not know or lack the necessary appreciation of what it means due to high levels of illiteracy.
10	Border officials generally perceive ICBTs as border jumpers and smugglers who are bent towards breaking the border procedures and process.
11	Because local government stakeholders marginalize CBTA, the majority of ICBTs who frequently use the border do not see any value in the intended purposes of CBTA, leading to very low membership.
12	Hiding of goods from Customs officials even if the goods being hidden do not attract any duties or require permits.

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

The Chapter suggested that border stakeholders need to start involving and inviting them to all relevant stakeholder meetings so that their input could be part of the eventual proceedings. Analysis of the findings showed that the Chapter needed support from local border stakeholders, respective government ministries and development partners to be able to modernize their set-up and become effective in what they should stand for. Findings show that ever since the outbreak, no attempts (even in their limited membership) had been made to meet and exchange ideas with their Zambian counterparts in the best interest of the safe and health continuity of CBT by ICBTs. Following the outbreak of the second wave of the COVID-19 pandemic around the beginning of January 2021, Zimbabwe imposed a total lockdown with stringent restrictions in the best interest of the citizens' safety. This coincided with the scheduled time for interviewing the CBTA at national levels, failing to go ahead as per the plan.

#### Services provided by Trade Information Desk Officers

STR is an inventive trade facilitation strategy designed to increase the involvement of ICBTs and SSCBTs in CBT by enjoying preferential rates of their goods under the Common Market for Eastern and Southern Africa Preferential Trade Area (COMESA PTA) configuration. Before its introduction, ICBTs from the member States were illegible from benefiting from the already existing COMESA PTA arrangements. Under this PTA arrangement, only commercial traders would enjoy preferential rates of duty on originating goods on submission of a valid certificate of origin (CoO) among other requirements on their importations and exportations within the

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COMESA regional economic bloc. This facility was later extended to cover SSCBTs and ICBTs under some simplified terms and conditions and is currently applicable in three COMESA Member States: Malawi, Zambia and Zimbabwe.

According to the information given by the Chirundu OSBP TID Office, to date, the STR initiative gives ICBTs duty-free preference on their exported or imported goods with a threshold value of USD 2,000 for Malawi and Zambia, and USD 1,000 for Zimbabwe. Upon arrival at the border, ICBTs with the qualifying goods is issued with the simplified CoO by the TID Office for presentation to ZIMRA. This will allow the qualifying imported goods to enter the country customs duty-free (depending on the Customs Tariff Classification of the goods being imported, at the most, only import value added tax remains payable plus presumptive tax if the trader does not have a valid tax clearance certificate). TID Office is responsible for educating ICBTs and SSCBTs about this facility through holding workshops and awareness initiatives, explaining the procedures and processes, updating them on any changes that might come into existence, as well as assisting them with the completion of the applicable forms. Areas of concern as observed and cited by the respondents are briefly summarized in Table 19.

**Table 19. Consolidated list of observed and cited issues under the Simplified Trade Regime facility at Zimbabwean side–Chirundu one-stop border post**

1	The whole process is largely manual. On arrival, TIDO completes the certificates manually and issue them to the trader. The trader takes all the forms to Zambian Customs authorities who will verify the application and authenticate the forms manually if the goods involved qualify. The trader goes back to the TIDO and leaves one form. The trader will then submit the remaining two copies to ZIMRA for processing and stamping if all is in order. ZIMRA will retain their copy for filing and then give the trader their copy for accompanying their qualifying goods.
2	Against the spirit of enhanced informal CBT facilitation, the STR facility was neither linked to ZIMRA nor Zambia Revenue Authority's ASYCUDA World System.
3	The introduction of the groupage system by ZIMRA as a measure to allow continuity of informal CBT amidst the pandemic meant that these goods no longer qualified for the simplified CoO, as they were now cleared as commercial consignments that needed a more costly and cumbersome CoO (ordinarily used by commercial importers).
4	Sometimes, Customs put high values on their imported goods in ways that are not understood by ICBTs; sometimes, goods were not charged duty, while in certain circumstances, the same goods in few quantities were charged.
5	Outdated common list of goods qualifying for STR. (Available list in use was last updated in 2013; however, a reviewed list was done two years ago and was still pending approval by the Ministry of foreign Affairs and International Trade.)
6	There is only one TIDO operating at the BCP without anyone to relieve her as she is the only employee.
7	There is no STR trade portal specifically for Zimbabwe.
8	Flyers and brochures printed in local languages were last provided more than five years ago.

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

### 3. CHIRUNDU/BEITBRIDGE BORDERS

It is critical for the Government to intervene so that additional employees for TID are made available at Chirundu OSBP. Given that there was one employee, transforming all manual STR processes into electronic processes as well as launching of the STR portal specifically for Zimbabwe (in English and local languages) had to be prioritized as highly critical and urgent. Observation of ICBTs being served revealed that both men and women were queuing in one line. There was no separation between the elderly women and those few who had children on their backs. Analysis revealed the need to separate queues for women from men, give priority to the elderly and breastfeeding women through the introduction of the express lanes for them to be cleared faster. The majority of ICBTs interviewees were Chirundu locals (majority being WICBTs). Given that findings revealed that these were the same ICBTs who frequently used the BCP, the border officials needed to come up with strategies that suited this profiling in ways that promoted expedient clearances. According to the feedback given by the TID Office, introduction of groupage or aggregation of ICBTs' goods by ZIMRA, while it was a noble idea, had resulted in the aggregated goods failing to enjoy the STR facility as these were being cleared as commercial consignments. The TID Office cited that commercial clearance for ZIMRA purposes could only be done by ZIMRA authorized and licensed agents, who charge professional rates for such services. Analysis revealed that this alternative could not be enjoyed by the majority of ICBTs, as it had its glaring disadvantages that included high trade costs among others. Most of the ICBTs ventured into CBT for basic survival reasons, and therefore such alternatives were beyond their meagre returns. ZIMRA needed to restore STR benefits for ICBTs and assist them with the free clearance of their groupages as an exception, especially during this period of the pandemic. Further analysis pointed to the possibility of ICBTs resorting to smuggling through illegal routes to avoid some of these alternatives, which only increased their trade costs and non-tariff barriers to their CBT as ICBTs.

Notably, as at the time of the assessment, no STR facilities had been ever present at Beitbridge BCP. During the stakeholder validation meeting, representative from the TID emphasized the need for the Government to engage South Africa bilaterally, as this was the agreed position to take if intra-SADC STR facility was to be urgently made available to ICBTs who use this BCP.

## 4. COVID-19: Challenges, impact and possible solutions

In Southern Africa just like anywhere else, the challenges and impact of COVID-19 are summed up daily and presented in terms of the total number of confirmed cases, number of the demised and recoverable. To national policymakers, a different indicator of the extent of the challenges, impact and proposed possible solutions faced by a nation can arguably be summed up in terms of the series of regulations put in place towards COVID-19 management by prevention, containment and mitigation over a given period. From the time of the outbreak of the pandemic in March 2020 to the end of August 2020, Zimbabwe had published 17 statutory instruments and made a consolidation of all these into one document (Veritas Zimbabwe, 2020c). These were designed with the intent to regulate the national management of COVID-19, yet positive cases continued to soar. The statutory instruments covered an array of issues that included the national lockdown rules and the assignment of roles in the management of the pandemic starting from the national level to the subnational (ZIMFACT, 2020).

### 4.1. COVID-19: What it is; national, regional and global trends and statistics

Zimbabwe recorded its first positive case of COVID-19 on 21 March 2020 (Africanews, 2020). By end of March 2020, the country had recorded a total of 8 cases, 1 death and 7 active cases (World Health Organization (WHO), 2020a). As of 31 December 2020, Zimbabwe had a total of 13,625 confirmed cases against a total death toll of 360. Until the end of December 2020, Zimbabwe had generally experienced a relatively low rate of coronavirus infection since March 2020. Two weeks into the new year, the country's confirmed positive cases had almost doubled. A total of 20,499 confirmed positive cases and 483 deaths were recorded as of 11 January 2021 (WHO, n.d.a). This abrupt spiralling was consequent of an influx of mainly Zimbabweans as well as Zambians, Malawians and other citizens who were departing South Africa for the Christmas and New Year holidays to their respective countries. As of 12 January 2021, Africa recorded 2,162,982 confirmed cases and 48,371 deaths while 89,416,559 confirmed cases and 1,935,028 deaths were recorded globally (WHO, n.d.b).

### 4.2. COVID-19 at the border

No statistics on COVID-19 cases at each BCP could be provided because such information was not being collected. The main reason cited for this gap, as cited by the border officials who were interviewed, included the lack or the inadequacy of testing capacity and facilities at both BCPs. While the Ministry of Health and Child Care (MoHCC) was circulating national daily COVID-19 updates or situational

#### 4. COVID-19: CHALLENGES, IMPACT AND POSSIBLE SOLUTIONS

reports, these focused on giving statistical figures of COVID-19 cases at the provincial level. The reports did not disaggregate the daily updates to include cases recorded at the BCP level. In the absence of the COVID-19 daily update dashboard facility at BCPs, all the border stakeholders who were interviewed at the time of field visits believed that Beitbridge and Chirundu OSBP were both super gateways and therefore potentially superspreaders of the COVID-19 virus especially during this festive season when seasonal migration of people was generally at its peak between South Africa, Zimbabwe and even beyond.

Border officials were not being tested at all, and they all concurred that at least frequent scheduled testing of all border front-line staff at the BCPs was of paramount importance. All the border front-line officials suggested that it was supposed to be a condition of service to be tested regularly and free of charge, as well as to be provided with adequate PPEs, under the current pandemic situation. It was their notable opinion that this should be the norm whether ICBTs are banned from trading or not.

### 4.3. Incidence of COVID-19 and its management at the border

The Port Health officials at both BCPs indicated that every traveller was subjected to mandatory hand sanitization and temperature checks, as well as obliged to wear a face mask on arrival at the border. They both emphasized that for a traveller to enter Zimbabwe, be it in transit or as a returning resident, one is strictly required to have a COVID-19 certificate showing a negative PCR test. Failure to produce a negative PCR test certificate would result in the traveller being referred to a quarantine centre for testing. The officials further revealed that all the ICBTs could not afford PCR testing. At USD 65 per individual test and being valid only for 48 hours, this amount was far beyond their capacity to pay, resulting in them resorting to increased use of fake COVID-19 certificates and high incidences of use of illegal routes to cross the border.

On the issue of statistics of people who had been referred or denied entry and taken to quarantine facilities due to symptoms of COVID-19 or non-compliance, none could be produced or given by the Port Health officials from both BCPs or any other border stakeholder. Researchers however noted that incidences of COVID-19 had been reported especially at Beitbridge BCP. After the reopening of the Beitbridge border post to the public starting 1 December 2020, MoHCC initiated a programme to test all border officials on the following day. There were 8 Customs officials who tested positive to COVID-19 (Samaita, 2020). Within two weeks of the opening of the border, 104 positive cases of COVID-19 were confirmed (Daniel, 2021). At the time of writing this project report, the Government had reintroduced the total ban of informal CBT, which took effect on 5 January 2021, among other measures. This means that SSCBTs and ICBTs were back on BCP total lockdown.



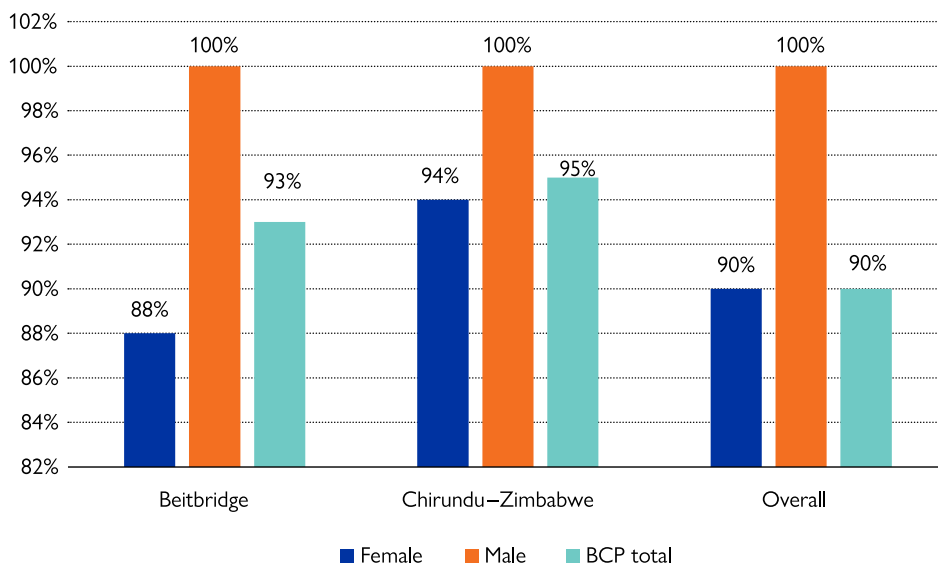
#### 4.3.1. COVID-19 awareness by border agency personnel

All the border stakeholders who were engaged at both BCPs demonstrated a high personal degree of COVID-19 awareness during the site visit. Anecdotal evidence by observation revealed that they all wore face masks and worked in offices observing social distancing, with only critical members of staff reporting on duty. All passed through Port Health Desk for hand sanitizing and temperature checks each time they entered the building. “No mask, no entry” signages were elaborately displayed and said mandate was being observed during the site visit. Personnel working from enclosed offices kept the windows open to allow for free airflow.

#### 4.3.2. COVID-19 awareness by informal cross-border traders

The majority of those interviewed (93%, n = 40) at both BCPs reported that they were informed about COVID-19 infection, prevention and control measures. Figure 7 indicates that 93 per cent of the ICBT interviewees at ZWBBP and 95 per cent at ZWCH OSBP had been informed about COVID-19 infection, prevention and control measures respectively.

**Figure 7. Proportion of informal cross-border traders educated on COVID-19 infection and control measures, by sex**



Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Findings from both BCPs show that most of the respondents (90%, n = 40) received information or education on COVID-19 through media, which include television, radio and the Internet. Notably, the respondents across the two BCPs indicated that they had also received COVID-19 awareness through government officials (63%, n = 40) and local communities (58%, n = 40). Local communities included churches, WhatsApp groups and clubs. As little as 3 per cent (n = 40) of the ICBT interviewees had received their information from a CBTA. As shown in Table 20,

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this finding was far less than 20 per cent (n = 40) and 15 per cent (n = 40) across the two BCPs who indicated that they had received information through friends and families accordingly.

**Table 20. Sources of COVID-19 information/education (%)**

Sources of information	Border control post		Sex		Overall (n = 40)
	Beitbridge (n = 20)	Chirundu–Zimbabwe (n = 20)	Female (n = 16)	Male (n = 8)	
Media (TV, radio, Internet)	95	85	88	100	90
Government officials	70	55	56	88	63
Local communities (Churches, WhatsApp groups, clubs, etc.)	60	55	50	88	58
Friends	5	35	22	13	20
Family	10	20	19	0	15
A trader's association	0	5	3	0	3
Others (please specify)	0	5	3	0	3

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

The general level of knowledge of prevention measures indicated by all the ICBTs respondents from both BCPs was extremely high. Almost all respondents correctly knew when to wash their hands as a preventative measure. Table 21 shows that all the circumstances that required washing of hands were known to the ICBTs. A close comparison between male and female show that women are less knowledgeable on when to wash hands for COVID-19 prevention.

**Table 21. COVID-19 prevention: When to wash hands (%)**

When to wash hands	Border control post		Sex		Overall (n = 40)
	Beitbridge (n = 20)	Chirundu–Zimbabwe (n = 20)	Female (n = 16)	Male (n = 8)	
Touching your eyes, nose or mouth	100	95	97	100	98
Entering and leaving a public place	100	90	94	100	95
Touching an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts or electronic cashier registers/ screens	100	90	94	100	95
Touching of mask	90	85	88	88	88
Do not know	0	0	0	0	0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

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All ICBT respondents acknowledged that they were aware of the travel restrictions and measures that were in place. The findings of their responses are presented in Table 22. There is generally more or less equal knowledge between men and women on the border travel restrictions.

**Table 22. Border and travel restrictions in place and known by the respondents (%)**

Restrictions	Border control post		Sex		Overall (n = 40)
	Beitbridge	Chirundu– Zimbabwe	Female (n = 32)	Male (n = 8)	
Ban of people movement across the borders	100	100	100	100	100
Use of hand sanitizers	100	95	97	100	98
Washing of hands with soap	100	95	100	88	98
Ban of movement of goods across borders (other than designated essential goods)	90	90	88	100	90
Maintenance of social distance	95	85	91	88	90
Mandatory requirement to produce a negative COVID-19 test certificate	95	75	84	88	85
Others (Please specify)	0	0	0	0	0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Analysis of all the above findings revealed that it is one thing knowing and demonstrating a high level of individual appreciation of the preventative, control and mitigating COVID-19 measures and being fully aware of travel restrictions, while complying with the same measures was yet another different thing. ICBTs revealed that the Government needed to provide them all the PPEs for free, as well as free COVID-19 testing. Alternatives or strategies meant to curtail the spread of the virus to serve ICBTs' lives without providing means of affordable, safe and healthy continued livelihoods to ICBTs amidst the pandemic was counterproductive. Such measures pushed ICBTs into the use of illegal routes and smuggling to avoid perceived stringent BCP restrictions. COVID-19 national policies in place as well as strategies employed in the administration of COVID-19 measures at BCP levels needed to be balanced to ensure safety and health continuity of CBT by ICBTs under enabling BCP environments.

#### 4.3.3. Resources to manage COVID-19 at the border

Port Health desk facilities manned by Port Health officials around the clock were visibly and functionally available at both BCPs. As outlined earlier, Chirundu OSBP had one COVID-19 booth while Beitbridge had two. Each entry and exit side of each BCP had a single COVID-19 intelligent scanner machine for hand sanitization. A COVID-19 scanner booth is a walk-through machine that automatically checks body

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temperature and sanitizes hands by remote sensing. It releases smoke that disinfects the entire human figure as one walks through it, while at the same time allowing for foot bathing on entry into the buildings. All this happens under the remarkable close supervision of the Port Health officer on duty. When the scanner was down or not being used, travellers passed through the Port Health official's desk for a handheld thermometer temperature check and manual hand sanitization. Border stakeholders from each BCP revealed that disinfection of the entire border premises was being done once every week.

Management of queues involved both men and women moving in single file and in turns. However, as earlier reviewed, the one-metre social distance floor markings had become obliterated at Beitbridge BCP exit side. The Port Health officer was located just outside the entrance door to ZINARA and the Immigration offices. An IOM-donated handwash dispensary was visibly erected for use by travellers to wash their hands under running water at both BCPs. They were located just by the main entrance doors to the buildings. The officer would allow a limited number of travellers into the building to avoid overcrowding inside. The "No face mask, no entry" rule is applied at both BCPs. Information display through the use of COVID-19 posters, wallpaper charts and other related signage about COVID-19 written in English and to a lesser extent in local languages were all evident at the BCPs.

Despite all this, the majority of the border stakeholders (front-line personnel) at both BCPs revealed that at times they used single-use masks repeatedly or used their own money to purchase them for use on duty, as supply from their respective employers was frequently inconsistent and erratic. Temporary isolation room was observed to be exceedingly too small at the Chirundu OSBP and contained other used files and cartons. Though available, it was observed that ablution facilities were inadequate, while about 50 per cent of the facility at Chirundu OSBP was out of function due to lack of service or repairs, to which the Customs officials confirmed that it had been like this for some time. Female border officials from both BCPs who were asked during border walk-through tours revealed that ablution facilities were not adequately sensitive to women travellers' gender needs and requirements. Toilets had no provision for breastfeeding mothers to change nappies for the babies. Tap water supply was inconsistent, and both border officials and travellers indicated that they preferred purchasing mineral water for drinking. At Chirundu OSBP, travellers leaving the country and those arriving in the country used one entrance into the building and were being served from the same hall and same side of the border. Port Health check desks and handwash basins were located just before entry into the buildings instead of at the main exit and entry gates of getting in or out of the border premises. Overall, the survey noted that border stakeholders were limited in terms of availability of resources due to budget constraints.

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#### 4.3.4. COVID-19 prevention, control and management measures at the border

Handwashing facilities were available at the two border posts. This position was reported by 98 per cent (n = 40) of all the interviewed ICBTs, while 95 per cent (n = 40) of these respondents further indicated that the handwashing facilities were accessible (see Table 23). Quite important was the fact that 93 per cent (n = 40) of the interviewed ICBTs reported that they used the handwashing facilities at the borders. All those interviewed acknowledged that there were toilet buildings at the BCPs, but 78 per cent (n = 40) reported that though usable, they were inadequate and substandard. Only 38 per cent (n = 40) of the total ICBTs interviewed at both BCPs reported that the toilets were adequate.

Table 23. COVID-19 prevention structures and practices (%)

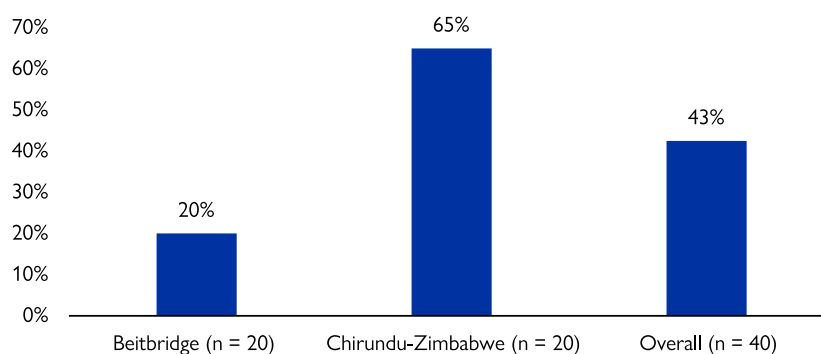
	Border control posts		Sex		Overall (n = 40)
	Beitbridge (n = 20)	Chirundu– Zimbabwe (n = 20)	Female (n = 32)	Male (n = 8)	
<b>Toilets</b>					
Is there a toilet at the BCP? (Single response)	100	100	100	100	100
Is it usable?	63	90	72	100	78
Are there handwashing facilities within or at the entrance of the toilet? (Single response)	89	100	94	100	95
Is handwashing done under running water?	84	95	88	100	90
Are the available ablution facilities adequate?	42	33	34	50	38
<b>Handwashing facilities</b>					
Is there a handwashing facility at the BCP?	95	100	97	100	98
Is the handwashing facility accessible?	95	95	94	100	95
Is washing of hands done under running water?	95	95	94	100	95
Is the handwashing facility labelled? (Single response – Cascade)	95	90	91	100	93
Have you used the handwashing facility?	95	90	91	100	93

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

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As shown in Figure 8, of notable attention was the fact that slightly above half (43%, n = 32) of the interviewed women reported that the toilets were adequately constructed to serve women's gender-sensitive needs and requirements.

**Figure 8. Adequacy of toilets for women's gender-sensitive needs and requirements**



Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

The majority of the ICBT respondents demonstrated that they were generally quite aware of the infection control measures at the BCPs that they frequently followed. However, only 25 per cent of those ICBTs interviewed at Chirundu OSBP were aware of the need to produce a valid negative COVID-19 certificate as a necessary requirement and measure. Use of foot and wheel baths (mats on which people step to get sanitized or vehicles stop for the wheels to be disinfected by the spraying of the wheels or otherwise) was known to quite a few ICBTs, as only 25 per cent of them managed to cite them as infection and control measures for COVID-19 (see Table 24).

**Table 24. Infection control measures at border control posts (%)**

Infection control measures at border post	Border control post		Sex		Overall (n = 40)
	Beitbridge (n = 20)	Chirundu–Zimbabwe (n = 20)	Female (n = 32)	Male (n = 8)	
Hand sanitizers	100	100	100	100	100
Temperature checks	100	95	97	100	98
Face masks	95	100	97	100	98
Border clearance queue space is enough for social distancing	85	90	84	100	88
Production of a valid negative COVID-19 certificate	75	25	53	38	50
Foot and wheel baths	35	15	25	25	25
Does not know	0	0	0	0	0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

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COVID-19 testing requirement at BCPs was known by less than half of the interviewed ICBTs. Few of them (43%, n = 40) knew that there were health personnel who do rapid COVID-19 testing at the border; very few (40%, n = 40) knew of the COVID-19 testing site or tent; while only 12.5 percent (5 out of 20) interviewed ICBTs at Beitbridge knew of the existence of this COVID-19 testing tent. Survey findings revealed that the positioning and location of these tents may have been less visible to travellers at both BCPs. This was worsened by the lack of adequate public signage to this effect.

**Table 25. COVID-19 testing and procedures (%)**

	Border control post		Sex		Overall (n = 40)
	Beitbridge (n = 20)	Chirundu– Zimbabwe (n = 20)	Female (n = 32)	Male (n = 8)	
Health personnel providing COVID-19 education	45	40	44	38	43
COVID-19 testing tent/room	5	75	38	50	40
Health personnel doing COVID-19 testing	5	35	19	25	20
Transport to take those who tested positive to a health facility	0	20	6	25	10
Health personnel to monitor those in isolation/quarantine	0	20	9	13	10
Isolation/quarantine tent/room	0	15	6	13	8

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

The border tour at Chirundu OSBP revealed that the designated isolation room was very small, with half of its space used for storing obsolete files and old cartons/boxes. Close analysis pointed to the effect that this room was a storeroom of old files that had just been rebranded as COVID-19 isolation room. As at the time of border tour at Beitbridge, no room was shown or indicated as an isolation or quarantine room after having asked for it. There is a need to put in place two large tents (one at each BCP) that should stand in as temporary holding isolation rooms. These tents need to be pitched at places that are easily visible and accessible. Port Health officials at both BCPs needed to prioritize provision of these facilities.

#### 4.4. Impact of COVID-19 on informal cross-border trade at the border

The Department of Immigration officials confirmed that the number of people passing through the border were too low, as many had resorted to using illegal crossing points. They did this because the cost of undergoing a COVID-19 PCR test was just too high. Customs officials confirmed that the volume of exports and

## 4. COVID-19: CHALLENGES, IMPACT AND POSSIBLE SOLUTIONS

imports through the BCPs had remained very low, even though imported goods were finding their way into the country. As confirmed by the majority of the women interviewees from both BCPs, the COVID-19 certificate required for one to cross the border was too expensive, resulting in the majority of them resorting to using illegal entry and exit points. Some feared that use of the borders would result in them interacting with those already infected with COVID-19.

**Text box 1. Extract from *Independent Online (IOL)*, 8 December 2020**

Harare – Zimbabwean police have busted part of a racket involved in the distribution of fake COVID-19 clearance certificates at the border post linking the country to neighbouring Zambia. Police spokesperson Paul Nyathi said law enforcement agents last week arrested two men who were part of a syndicate selling fake COVID-19 certificates at Chirundu border post. The suspects, who are not medical practitioners, were found with 330 blank stamped fake COVID-19 certificates and testing equipment. “They were arrested on December 3, 2020 for originating fake COVID-19 certificates for travellers at Chirundu Border Post,” Nyathi said in a statement on Monday. The syndicates are operating at most of Zimbabwe border posts where they are having thriving business from desperate locals wishing to cross into neighbouring countries. They charge about USD 20 (R 300) to issue a fake certificate to a traveller wishing to cross into Botswana, Namibia, Mozambique, South Africa or Zambia. According to Zimbabwe’s COVID-19 health protocols, a traveller requires a valid health certificate that must have been issued not more than 48 hours prior to the date of travel

Source: *Agence de Presse Africaine (APA)*, 2020.

Very few of the ICBTs respondents said that the situation presented a good business opportunity, as they were the only ones left doing business through the border. They were therefore earning more from CBT. Some argued that the restrictions had not affected them at all, as they were already smuggling their goods through illegal routes. Others resorted to the use of runners<sup>2</sup> who had means of crossing the border. This also increased their cost and reducing their profit. Text box 1 is an extract from IOL, which came out on 8 December 2020.

Text box 2 is an extract from the *Daily Maverick* on 5 January 2021 depicting the situation at ZWBB and Beitbridge BCP.

<sup>2</sup> These are people being border hustlers who survive on smuggling goods on behalf of ICBTs for a charge. Character-wise, runners can be mean and so daring.



**Text box 2. An extract from the *Daily Maverick* depicting the situation at Zimbabwean side–Beitbridge border post**

It's do or die as Zimbabweans descend on Beitbridge to escape month-long lockdown.

The Beitbridge border was chaotic on Monday, 4 January, as hundreds of people tried to make their way into South Africa following an announcement that Zimbabwe would be placed back on to Level 4 lockdown for 30 days due to a surge in COVID-19 cases. The lockdown includes a 6pm to 6am curfew. Zimbabweans hoping to escape the Level 4 lockdown announced by the Government found themselves cheek by jowl with hundreds of their fellow citizens at the Beitbridge border into South Africa. Some have been queuing since Sunday, 3 January, while the numbers kept swelling. By Sunday, Zimbabwe had recorded over 14,000 cases of coronavirus infections and nearly 370 deaths. It was these numbers that prompted Zimbabwe's acting president, Kembo Mohadi, to announce the lockdown, which sent people fleeing. *Daily Maverick* arrived at the border on Monday morning, as South Africa's Minister of Home Affairs, Aaron Motsoaledi, visited to assess port control officials' readiness for the expected influx of people following the announcement. Motsoaledi said more than 500 undocumented Zimbabweans are arrested each day at the border for trying to enter South Africa illegally. A large group of border jumpers were seen under the bridge connecting South Africa to Zimbabwe.

Source: Mohamed, 2021.

#### 4.5. National response to COVID-19: health measures, lockdowns and others

In his update to the nation through a speech delivered on 17 March 2020, Zimbabwe's president Emmerson Mnangagwa declared COVID-19 a national disaster. He informed the nation that the country had heightened its national response following reported cases from neighbouring countries. Since no case had been reported yet in Zimbabwe, all ports of entry were kept open while screening and COVID-19 testing of visitors were to be intensified (*Xinhuanet*, 2020).

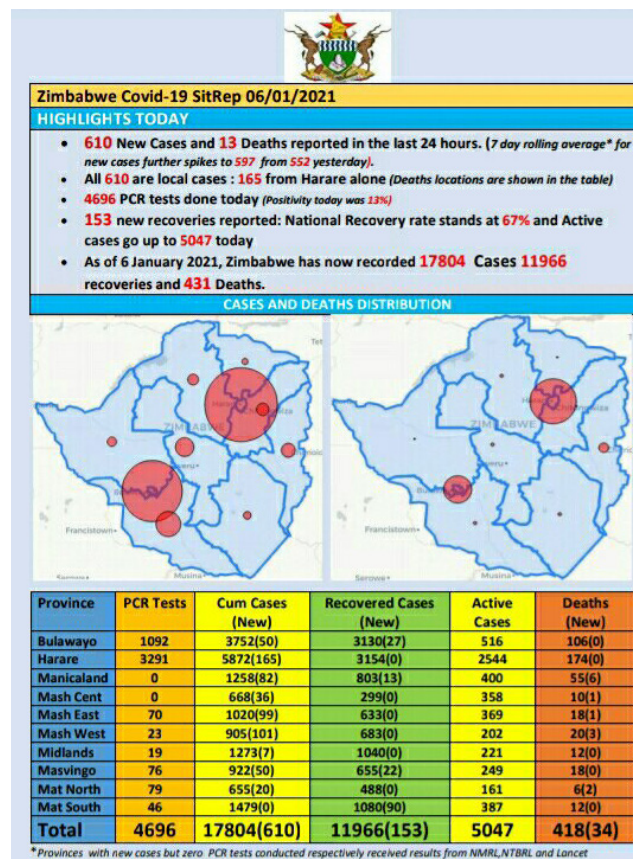
On 21 March 2020, Zimbabwe officially reported its first COVID-19 positive case through MoHCC (*Africanews*, 2020). By the 23 March 2020, the Government announced additional measures that included the closure of Zimbabwe's borders to all non-essential travel and traffic (both inbound and outbound), except for returning residents and the movement of cargo. MoHCC went on to implore everybody to remain committed to the prevention of the pandemic by observing good personal hygiene. Good personal hygiene included washing of hands with soap under running water regularly or use of alcohol-based sanitizers, use of tissue paper or flexed elbow to cover mouth and nose when sneezing or coughing, observing social distance, and strongly discouraging all non-essential travel (*Chirisa*, 2020). On 27 March 2020, the Government declared a nationwide total lockdown for 21 days starting from 30 March 2020 (*Veritas Zimbabwe*, 2020b). Throughout the subsequent reviews, land borders remained closed to people travel including ICBTs and the movement of their goods.

## 4. COVID-19: CHALLENGES, IMPACT AND POSSIBLE SOLUTIONS

On 30 November 2020, the Government relaxed its stringent border limitations. It opened all its ports of entry with neighbouring countries amidst new restrictions. With effect from 1 December 2020, for a traveller to enter Zimbabwe as a returning resident or in transit, the individual should have a negative COVID-19 test result. According to Port Health officials from both BCPs, this required a negative PCR test certificate to be presented at the border that was issued within 48 hours of arrival at the BCP. A curfew starting at 10 p.m. and ending at 6 a.m. was also imposed. Failure to exhibit the certificate or comply with these requirements by a traveller (or non-Zimbabwean resident) in transit would result in entry being denied, with or without symptoms of the virus. Port Health officials further confirmed that returning residents not in possession of a negative PCR certificate would require to be tested upon arrival and remain in a government holding facility until the results of the tests were available.

Citing an almost 100 per cent surge in COVID-19 cases during November and December 2020, the Government responded by putting the country back on extended and enhanced stringent COVID-19 measures with effect from 5 January 2021. As of 6 January 2021, the MoHCC reported that Zimbabwe had a total of more than 17,000 confirmed positive COVID-19 cases and more than 400 deaths (Matiashe, 2021). Figure 9 shows the Zimbabwe COVID-19 Situation Report as of 6 January 2021 showing the exact statistics.

Figure 9. Zimbabwe COVID-19 Situation Report as at 6 January 2021



Source: Matiashe, 2021.

The enhanced and extended stringent COVID-19 restrictions adopted and implemented by the Government subject to short notice (Crisis24, 2021) included the following:

- Land borders are closed except for cargo transport and tourists.
- Travellers should submit a negative COVID-19 test certificate obtained within 48 hours prior to arrival. Those without a test result or exhibiting symptoms of the disease could be denied entry. Those who test positive on arrival are subject to 14-day quarantine at a government-approved facility.
- All persons departing the country should show a negative COVID-19 test obtained within 48 hours of departure.
- Returning residents should show a negative COVID-19 test obtained within 48 hours before arrival or be tested on arrival and await the outcome of the results while at a government facility;
- There is a daily mandatory nationwide curfew from 6 p.m. to 6 a.m.
- All non-essential businesses, with some limited exceptions, were closed for 30 days with effect from January 5. Essentials services, such as grocery stores, hospitals, and pharmacies, are allowed to operate from 8 a.m. to 3 p.m.
- Face masks are mandatory in public.
- Interprovincial and intercity transport is prohibited.
- Persons must stay at home and may only leave to acquire essential goods or for medical reasons.
- Tourists may travel from the BCP to a designated tourist facility.
- Gatherings are restricted except for funerals; however, no more than 30 people may attend the burials.

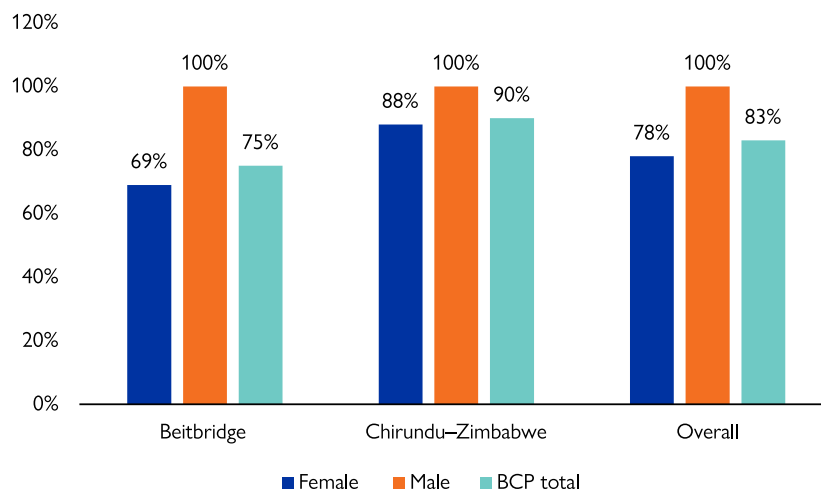
#### 4.6. National economic recovery plans and COVID-19

On 1 May 2020, the Government unveiled the 18-billion Zimbabwean dollar (ZWL) Economic Recovery and Stimulus Package whose budget worth was equivalent to 9 per cent of the country's GDP. As a national policy response, it was targeted at reviving the economy from the unprecedented socioeconomic freezing effects of COVID-10 through the provision of relief to individuals, families, small businesses and industries. Included in its proposals was to provide income support to all vulnerable groups and individuals, recovery mechanism for the most affected microenterprises and households, as well as the introduction of food grant. The food grant was aimed at supporting at the minimum of 1 million susceptible individuals with their food needs and requirements for a period of eight months (Veritas Zimbabwe, 2020a). Concerning this package, most of the interviewed ICBTs from both BCPs reported knowing about the existence of this COVID-19 National Stimulus Package as

## 4. COVID-19: CHALLENGES, IMPACT AND POSSIBLE SOLUTIONS

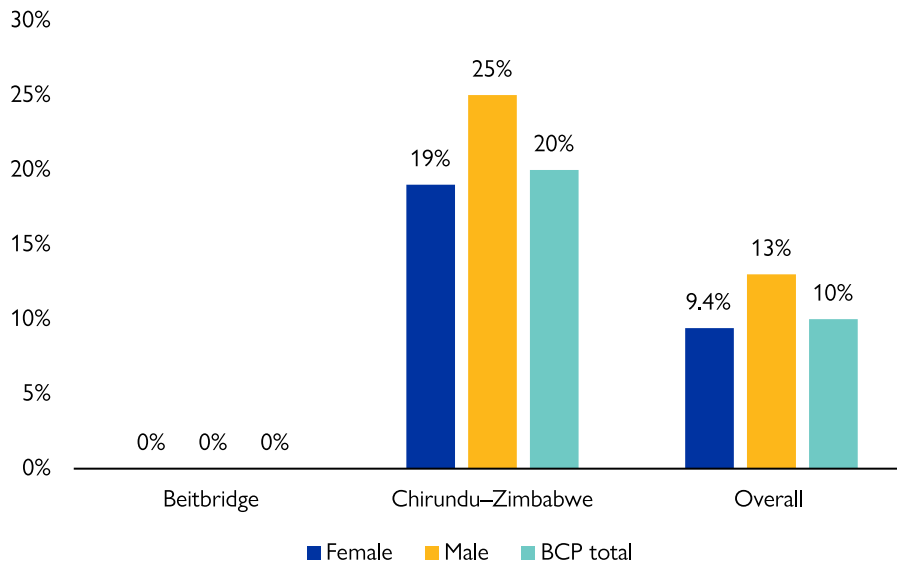
well as its purpose. Based on Figure 10, ICBTs using Chirundu OSBP were more knowledgeable and aware at 90 per cent compared to 75 per cent of ICBTs using Beitbridge. When compared to their male counterparts, women seem to have less knowledge about the government stimulus packages. All (100%, n = 8) interviewed men were aware of this.

**Figure 10. Proportion of informal cross-border traders aware of the Government's stimulus package**



Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Despite 83 per cent of the total ICBTs respondents being aware of the existence of this national stimulus package, 90 per cent of them said they had neither received nor benefited from it under the Government's plan for the vulnerable families. According to the majority of the interviewed ICBTs, they qualified for the scheme under the vulnerable families. Overall, 20 per cent of the ICBTs from Chirundu OSBP said they had benefited in one way or the other. Further inquiry revealed that 15 per cent of these said they had specifically benefited from receiving loans while 5 per cent had precisely received food as assistance (see Figure 11). None from Beitbridge had benefited from this stimulus package. As expected, fewer women as compared to men reported benefiting from government assistance. This can be attributed to the same discussion that fewer women, as compared to men, knew about the government assistance programmes.

**Figure 11. Benefited from any government assistance programme**

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Apart from this stimulus package, all respondents revealed that they had not known of any other economic recovery plan that was meant to cushion or revive them amidst the pandemic. Despite sounding more optimistic and positive, the general feedback received from all the interviewed national stakeholders revealed no tangible or clear-cut national economic recovery plan targeted at the revival of SSCBTs and ICBTs at present or in the immediate future.

On indications of incorporating ICBTs in the national economic recovery plans by the Government, all ICBTs, CBTA and most of the border stakeholders from both BCPs revealed that there were currently no signs to that effect. Some of the insights that came out from the interviewees included the following opinions:

- The country's lockdowns were put in place without dedicated revival or recovery plans for ICBTs.
- ICBTs are the most affected and remain most left out in terms of continuity of their CBT amidst the pandemic.
- The Government is yet to pay attention to the basic natural issue of the lives and livelihoods of ICBTs in the context of stimulus package or continued CBT.
- The Government must come up with a specific stimulus plan that targets the SSCBT and informal CBT sectors.
- By not announcing any plans to subsidize COVID-19 testing fees, free provision of preventative materials like sanitizers, masks and possible future vaccinations and the longer the pandemic persists, the more the vulnerable groups will suffer and largely get vulnerable to the pandemic itself.

- Total lockdown of borders means completely shutting down socioeconomic lives and livelihoods of ICBTs. It must be followed by consistent and reliable national economic reliefs and strategic economic recovery action plans.

#### 4.7. National strategies and action plans for informal cross-border trade in relation to COVID-19

All the ICBTs interviewees and the entire border stakeholder respondents from both BCPs revealed that they had not heard of any specific national strategies and action plans particularly targeted at assisting or cushioning ICBTs in relation to the first wave of the COVID-19 pandemic. All the border stakeholders, particularly Customs and Immigration officials, further confirmed that no specific border exemptions, concessions or rebates applicable to ICBTs were in existence at the BCPs. In response to the second wave of the pandemic, the Government rightfully put back the nation on total lockdown including banning of all informal CBT. However, the Government did not announce any specific national strategies or action plans for cushioning the impact on ICBTs. This policy approach leaves a considerable gap concerning the lives and livelihoods of ICBT amidst the pandemic now and going into the future.

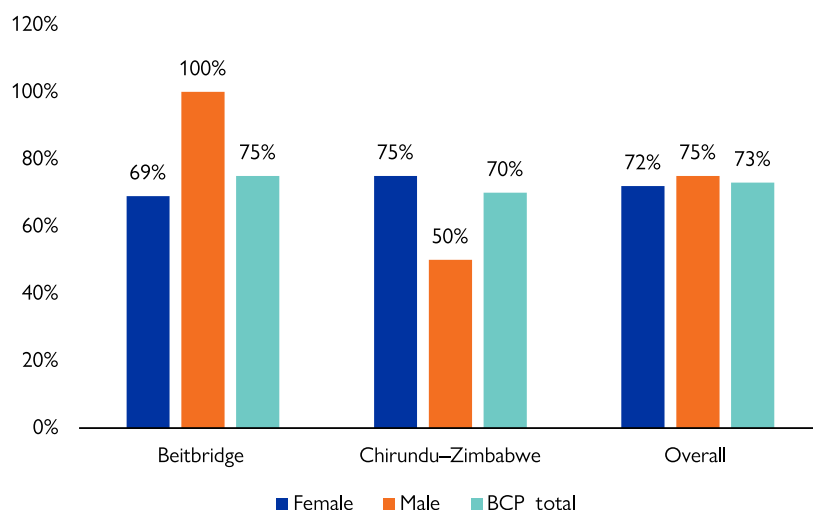
Almost three weeks after the outbreak of the second wave of the pandemic in Zimbabwe, some media have reported that the Government is set to vaccinate at least 80 per cent of the population (this translates to at least 11.2 million doses of the vaccine out of a population of about 14.65 million) once negotiations with the potential suppliers of the vaccine have been completed. The principal director of Policy Planning, Monitoring and Evaluation under MoHCC, Dr Robert Mudyiradima, who oversees the vaccination programme said the Government had already agreed to take the vaccine and all the necessary resources have been made available (*NewsdzeZimbabwe*, 2021).

#### 4.8. Informal cross-border traders' viable livelihood alternatives in response to COVID-19

At the time of carrying out field visits at both BCPs, and as shown in Figure 12, the majority (73%, n = 40) of the interviewed ICBTs reported that informal CBT was their only means of income and survival during the COVID-19 period.

REPORT OF THE RAPID SITUATION AND NEEDS ASSESSMENT  
AT CHIRUNDU/BEITBRIDGE BORDERS IN ZIMBABWE

**Figure 12. Proportion of those who rely on cross-border trade only**



Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

The following were reported as alternative livelihoods that were undertaken during this COVID-19 period. Making the list were casual or daily labour, sale of crops and income-generating activities (see Table 26).

**Table 26. Alternative livelihood sources during the COVID-19 period (%)**

Alternative livelihood	Beitbridge (n = 20)	Chirundu- Zimbabwe (n = 20)	Overall (n = 40)
Casual/daily waged labour	20	10	15
Family business	0	0	0
Sale of crops	5	0	3
Sale of livestock	0	0	0
Skilled trade/artisan (plumbers, sowing, etc.)	0	0	0
Engaging in income-generating activities	0	5	3
Sale of household assets or belongings	0	0	0
Household savings	0	0	0
Remittances from relatives, well-wishers or friends	0	0	0
Others	0	15	8

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Of the 8 respondents who reported switching to alternative livelihoods, 6 of them reported that the alternative livelihood, such as selling crops was fairly viable while 2 of them indicated that they were unviable. Following from the already reviewed findings in various prior sections of this report, informal CBT generally continued to thrive during its banning and phased-down periods in Zimbabwe, because they

#### 4. COVID-19: CHALLENGES, IMPACT AND POSSIBLE SOLUTIONS

had no other meaningful alternative to resort to. The modus operandi used was smuggling of goods through illegal routes at both BCPs. This explains why a negligible 8 respondents out of a possible 40 interviewees reported have resorted to the aforementioned insignificant forms of livelihoods (selling of crops). In the absence of any national stimulus packages to significantly cushion ICBTs, for such prolonged periods of total disruptions to their CBT, they had no better alternative to resort to apart from smuggling goods illegally across the Limpopo and Zambezi rivers.



## 5. Gender and COVID-19 management in national responses, strategies and action plans

The report by the International Labour Organization (ILO, 2018) indicated that globally, of the 2 billion people who were employed in the informal sector, 40 per cent were women while regionally, 70 to 80 per cent of CBTs in sub-Saharan Africa were also women. It further stated that, out of 168 million migrant workers in 2017, over 68 million were women. Zimbabwean women are included in these statistics. Today, they suffer substantial levels of unemployment, loss of income and reduced means of livelihoods because of the COVID-19 pandemic. With at least 57 per cent of the micro, small and medium enterprises (MSMEs) in Zimbabwe being owned by women, it implies that they are affected the most in terms of the accelerated loss of income and their livelihoods. The same women in Zimbabwe also find themselves confronted with a 19.4 per cent gender wage gap (Tarinda, 2020). This chapter briefly presents the rapid assessment findings on gender and COVID-19 management both at the national and BCP level in Zimbabwe. The findings are outlined in the subsequent sections below.

### 5.1. Gender and COVID-19 management nationally

Following the declaration of COVID-19 as a public health emergency of international concern by WHO on 30 January 2020, countries were encouraged to prepare for its containment by the International Health Regulations (2005) Emergency Committee (WHO, 2020b). In line with this recommendation, Zimbabwe through MoHCC, began to initiate the process of developing the Zimbabwe National Preparedness and Response Plan (MoHCC, 2020a). The objective of this policy approach was to eventually minimize morbidity and mortality emanating from the pandemic. The Plan embraced prevention, containment and mitigation measures as priority actions to reinforce the overall health system. The Government, through MoHCC, adopted the national COVID-19 management approach premised on eight pillars. The pillars are as follows: (a) coordination, planning and monitoring; (b) risk communication and community engagement; (c) surveillance, rapid response and case investigation; (d) points of entry; (e) national laboratory system; (f) infection prevention and control; (g) case management; (h) logistics, procurement and supply management (United Nations in Zimbabwe, 2020). Assisting MoHCC in managing COVID-19 both at national and subnational levels are several public and private actors. These actors are drawn from appropriate government ministries, regulatory authorities, non-governmental organizations, the private sector, civil society, academia and development partners (MoHCC, 2020b).

## 5. GENDER AND COVID-19 MANAGEMENT IN NATIONAL RESPONSES, STRATEGIES, ACTION PLANS

The key stakeholder informant from the national interministerial committee who was part of the National Steering Committee to the rapid assessment elaborated in detail on the institutional set-up and approaches to the national COVID-19 management in Zimbabwe. The interministerial task force is the apex organ to the national COVID-19 response set-up and is chaired by the country's vice presidency. The chair is mandated with the execution oversight of all the basic measures to curtail, contain and mitigate the transmission of the virus. Below this echelon are nine working groups whose configuration comprise officials from government, the private sector, academia and development partners. The duties and functions of the working groups entail carrying out risk and capacity assessments, designing SOPs, guidelines and tools, determination of key priorities to drive up operationalization of priority activities, setting up of operational budgets, and deadlines for the execution of identified priorities. The identification of respective resource needs as well as resource mapping are some of their responsibilities.

In the absence of COVID-19 cure and given the longevity and the continued overwhelming shattering effects of both the first and second waves of the pandemic so far, Zimbabwe has continued to focus on preventative, mitigatory and containment response strategies in its national management of the COVID-19 crisis. In a move to mitigate the effects of COVID-19 on MSMEs, the Reserve Bank of Zimbabwe uplifted its medium-term bank accommodation facility to ZWL 3 billion (USD 52.3 million) from ZWL 500 million (USD 8.7 million) followed by lowering of the interest rate from 15 per cent to 10 per cent per annum. The Government rolled out cash transfers to cover 1 million poor and vulnerable households, the majority of which were headed by women. It also unveiled ZWL 600 million (USD 10.5 million) facility to MSMEs, youth, women and the elderly as part of the compensation for loss of income during the first wave of the pandemic. Processing of tax refunds was accelerated and due dates were extended without being charged penalties and interest. Import duties were suspended on all COVID-19 designated essential goods (Tarinda, 2020).

Nationally, Zimbabwe has progressively passed considerable pieces of legislation since the turn of the millennium in favour of the protection of women and girls. The new constitution upholds gender equality by outlawing sex or gender-based discrimination and behaviour. It clearly states that men and women are equal (Borgen Project, 2020). Despite all this, the country's response strategies to COVID-19 have fallen short of addressing the gender dimension. All the women ICBTs who were interviewed cited that no national legislation was put in place to suspend or exempt customs duties on basic goods commonly imported by ICBTs, especially WICBTs amidst the pandemic. They all concurred that the Government's total socioeconomic lockdowns had been applied equally to all the sectors. According to the Chirundu Chapter, this non-selective approach to the pandemic by the Government had resulted in the disproportionate widening of the gap of the existing gender inequalities between men and women that they strongly believed predated the COVID-19 pandemic. The few national key informants that were successfully interviewed admitted that to date, there had been no policy measures that favoured

the continuity of the informal CBT or specifically designed to mitigate against the full impact of the pandemic on WICBTs.

Far away from the BCPs, all the ICBTs interviewees highlighted the different ways in which the national lockdown had severely affected them. At times, some could go for days without a basic meal and had to rely upon the neighbourhood, though it was not easy as everybody was more or less affected in the same way. Rental debts accrued, and some were forced out of their rented accommodation despite the Government's order not to evacuate tenants during lockdown periods. The majority of ICBTs said that providing food for their children became a nightmare in the country where prices were skyrocketing every day, as the local currency lost value against the United States dollar. Before the COVID-19 outbreak, naturally, their profits were marginal, and spending eight months without alternative work or replenishing their stocks turned out to be a major socioeconomic catastrophe beyond imagination. The majority of the ICBTs said that they had no option but to resort to illegal cross-border jumping given that they were the breadwinners in their families, often taking responsibilities for their extended families. Almost all women interviewed said it was highly risky for them, as they found themselves sexually harassed and abused in the process of crossing the borders illegally. Challenges faced by many ICBTs in the process of crossing the borders illegally included the following: (a) drowning in Zambezi or Limpopo rivers; (b) being killed by crocodiles and other wild animals; (c) confiscation of their goods by thieves who imposed themselves as border officials; and (d) other genuine yet rogue elements of the border patrol teams. Lack of trading meant that they could not pay for their children's fees to attend virtual classes.

## 5.2. Gender and COVID-19 management at the border

Border stakeholders from both BCPs unanimously agreed in their separately collected responses that men and women's needs and requirements were naturally different and therefore ought to be treated differently. They further admitted to the fact that informal CBT through their respective BCPs was almost all about WICBTs. The Chirundu Chapter aptly summarized the nature of informal CBT at Chirundu OSBP and across the rest of the BCPs as all about WICBT informal business sector.

The survey showed that all men and women respondents had been highly informed and educated on COVID-19 infection, prevention and control measures. A close analysis of the rapid analysis data collected at the BCPs showed that there were fewer women as compared to men who reported being educated on COVID-19 infection, prevention and control measures. Whereas all (100%, n = 8) men interviewed from the two border posts reported being educated on COVID-19 infection, prevention and control, about 88 per cent (n = 16) women at Beitbridge and 94 per cent (n = 16) at Chirundu acknowledged being educated on this subject. Thus, there are therefore more women than men currently involved in CBT who are not aware or knowledgeable about COVID-19 infection, prevention and control measures.

5. GENDER AND COVID-19 MANAGEMENT IN NATIONAL RESPONSES, STRATEGIES, ACTION PLANS

Women generally seem to have less knowledge of the COVID-19 infection, control and prevention measures as their proportion was less on every parameter that was asked to both men and women (Table 27). A noticeable difference was that of more women who knew the need for a valid negative COVID-19 certificate at the border and that it was a necessary control and prevention measure at the BCP.

**Table 27. Comparison of the proportion of women and men who knew the infection control measures at border control posts (%)**

Infection control measures at border post	Sex		Overall (n = 40)
	Female (n = 32)	Male (n = 8)	
Hand sanitizers	100	100	100
Temperature checks	97	100	98
Face masks	97	100	98
Border clearance queue space is enough for social distancing	84	100	88
Production of a valid negative COVID-19 certificate	53	38	50
Foot and wheel baths	25	25	25
Does not know	0	0	0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

Despite this development, respective border officials at both BCPs confirmed that the movement of people and the export and import of goods by ICBTs via the designated points had notably remained exceptionally low compared to other prior periods of normal trade. Most of the ICBTs interviewed openly admitted that they had resorted to using illegal routes to cross the borders because they could not afford to pay USD 65 for a PCR test to get the mandatory COVID-19-free certificate. Border officials unanimously concurred that this requirement had become a new form of non-tariff barrier to informal CBT whose effect was to fuel illegal cross-border migration. Findings showed that at least 87 per cent of the interviewed ICBTs had resorted to smuggling of goods through border jumping because of this mandatory requirement.

ICBTs revealed that they resorted to border jumping or use of illegal crossing points because they could not afford the USD 65 required for one to undergo a PCR test for COVID-19. A total of 35 (at least 87%) of the 40 interviewed ICBTs were still trading at the time of this assessment. The majority of the interviewed ICBTs were involved in importing goods into Zimbabwe, while quite a few were involved in exporting before and during the COVID-19 restrictions. Before the COVID-19 lockdown, 85 per cent (n = 40) reported importing goods to Zimbabwe, and during the lockdown, 73 per cent (n = 40) reported doing so.

Washing hands has been stressed as one of the best ways of COVID-19 prevention and control. Marginally, fewer women when compared to men were aware of the critical times to do handwashing. The majority of women reported that there were fewer handwashing facilities at the border. They also complained of water scarcity within the BCPs, water as one of the most important requirements by women, and that this is a critical time where handwashing is strictly required.

Observations of the queue management at both BCPs revealed that men and women lined up in one queue. Immigration, Customs and TIDOs attended to them on a first-come-first-service approach despite differences in sex and age. Women with children joined the same queues as well. Standing in long queues was cited by both men and women (73%, n = 40) as the most common challenge they face at BCPs. About 69 per cent (n = 32) of women and 87.5 per cent (n = 8) of men cited this common challenge (Table 28). This has a bearing on social distancing, as more time spent in queues will result in them starting to interact.

**Table 28. Proportion of women and men reporting standing in long queues as a common challenge at border control posts (%)**

Challenge	Beitbridge (n = 20)	Chirundu– Zimbabwe (n = 20)	Overall		
			Female (n = 32)	Male (n = 8)	All (n = 40)
Standing in a long queue waiting for turn to be cleared by the border officials	90.0	55.0	68.8	87.5	73.0

Source: Data gathered from the 2020–2021 field survey and elaborated by the author.

At Chirundu OSBP, border officials revealed that only four toilets for ladies and four for men in one block were far from being sufficient. Port Health officials further revealed that some of these toilets were in a state of disrepair and overwhelmed by demand. On a busy day and in most of the cases, women would be seen lining up to get in the ablution facilities one after the other. During the border tours, it was observed by all the stakeholders at both BCPs that existing ablution facilities were not sensitive to women travellers' needs and requirements. They had no facilities for breastfeeding mothers, including provisions to change nappies for their babies.



## 6. Conclusions

Following the aforementioned findings, it can be concluded that there are numerous gaps inherent in the management and implementation of COVID-19 measures at national, BCP and CBTA levels in Zimbabwe that adversely affect the livelihoods of the ICBTs, particularly the majority of women who survive on informal CBT. For eight months starting from March 2020, CBT by ICBTs was banned. When the BCPs were opened in December 2020, the control measures put in place were extremely restrictive, literally making it difficult for ICBTs to revive and resume trading for their basic survival. This month-long opportunity was short-lived when the Government put back the country on total national lockdown for the next 30 days starting from 5 January 2021. Again, informal CBT has been banned among other measures put in place by the Government aimed at controlling and preventing the wide spread of the virus.

Despite all these unprecedented socioeconomic challenges faced by ICBTs in Zimbabwe amidst the pandemic, they have remarkably demonstrated increased ability on how to trade safely and operate at BCPs during restrictions brought by the COVID-19 pandemic in Zimbabwe. On the other hand, BCPs and border officials exhibited the enhanced capacity to facilitate a healthier and safer environment for ICBTs to operate amidst the pandemic and stringent national COVID-19 control measures put in place by the Government. When the Government opened BCPs to informal CBT in December 2020, almost all those interviewed ICBTs had received vital information and some form of education on the infection, prevention and control measures from various sources, including awareness through government officials and the local communities. The findings from the field visits at the BCPs revealed that the level of knowledge of prevention measures possessed by all the ICBTs respondents was remarkably high. They correctly knew when to wash and sanitize their hands. They had a deeper appreciation of the importance of using face masks and maintenance of social distancing.

Generally, border stakeholders at both BCPs collectively managed to create a fairly safe and enabling environment for continued CBT by ICBTs. Almost all the COVID-19 prevention and control facilities were in place and strategically positioned for ease of accessibility by the travellers at all the BCPs. Non-face-to-face or non-physical interaction business continuity measures aimed at facilitating informal CBT through the BCPs; at the same time, reducing or eliminating physical human interaction were in place. These included submissions of clearance documents, goods and passenger manifests electronically through the use of emails. Customs pre-arrival clearance system was extended to cover imports and exports by informal CBT, and groupage approach to the clearance of goods imported by ICBTs and SSCBTs was introduced. Weekly disinfection of the BCP premises was being done. The Government has always kept its doors open to engagement and advice from experts and policymakers and implementers in so far as designing and implementing COVID-19 response measures

## 6. CONCLUSIONS

that are pro-trade. There exist common understanding and consensus on policy direction to favourably include ICBTs and informal traders into national COVID-19 trade plans and to the extent possible, preparing for the COVID-19 socioeconomic recovery plans now and going into the future.



## 7. Recommendations

Having already identified and outlined the existing gaps in the country's national COVID-19 management at national, BCP and CBTA levels, this section presents recommendations that may be adopted in the best interest of safe informal CBT continuity amidst the pandemic. These research-based recommendations seek to restore enhanced protection of health and economic rights of ICBTs in Zimbabwe through the facilitation of the continued trading during and after the pandemic. In presenting, the recommendations are given in this order: (a) national level; (b) BCP level; (c) informal CBT; (d) CBTA; and (e) TID Office level. In presenting these findings/recommendations, it is important to note that their possible adoption and potential prioritization for probable implementation (under short term, short to medium term, medium term, medium to long term and long term) solely remain with the project owners (IOM Zimbabwe).

### 7.1. National-level recommendations

- Gaps in the absence of harmonized and coordinated SOPs under the OSBP concept between Zimbabwean and Zambian border stakeholders existed. All the Zimbabwean ICBTs who were interviewed revealed that while Zimbabwean Port Health officials were limiting the validity of their COVID-19 certificate to 48 hours, their Zambian counterparts were limiting their certificates to 14 days at the very beginning of the outbreak. This misalignment of COVID-19 certificates requirements also existed between Beitbridge (48 hours) and Musina (72 hours). To close this gap, there is a need for harmonization and coordination of policy approaches by Zimbabwe through engaging Zambia and South Africa. This will pave the way towards the elimination of the above-highlighted policy disparities as at the time of the assessment are eliminated. South Africa, Zimbabwe and Zambia are all member States to SADC, while Zimbabwe and Zambia are member States to COMESA. Zimbabwe needs to ride on these already existing regional economic communities as platforms for engaging with its neighbouring countries to strike an agreement for policy coordination and harmonization even at bilateral levels. Once this policy space is created at the national level, then COVID-19-driven interborder procedures that are adopted by consensus in the best interest of promoting continuity of SSCBT and informal CBT amidst the pandemic is the first step towards creating trade facilitation, enabling environment harmoniously from one border to the other at the BCP levels.
- Harmonized and coordinated policy approaches help to eliminate subsequent institutional delays inherent in the existing different procedures and processes in each neighbouring country with Zimbabwe at BCP levels. Institutionally, this strategy can be supported by having a joint COVID-19 cross-border rapid liaison team made up of corresponding Port Health,

## 7. RECOMMENDATIONS

Immigration and Customs officials. The joint COVID-19 rapid team should not be too small or too big to be able to operate optimally, instantly, swiftly and decisively.

- Every time policymakers announce a ban on informal CBT due to COVID-19, it means an estimated 94.5 per cent of WICBTs are severely affected as the majority of the interviewed women said they relied on informal CBT for their basic survival. The Government ought to come up with separate national stimulus packages specifically targeted at ICBTs including WICBTs so that they are cushioned from the disruptive impacts of COVID-19. Gender and COVID-19 management at the national level require that the Government put up trade policies that are sensitive to the needs and plight of WICBTs. Majority of ICBTs are women, including elderly ones of around 60 years. It is important for the Government to put in place policies that charge reduced duties on all goods commonly imported by women traders.
- All ICBTs complained that the cost of PCR testing was very high while its validity period was just too short. The government-appointed testing hospitals were far away from both BCPs. The Government needs to decentralize COVID-19 testing facilities to all BCPs. All the ICBTs and border stakeholder interviewees unanimously concurred that COVID-19 testing be done for free at the BCPs. It is therefore recommended that the Government work closely with development partners to provide free COVID-19 testing for all ICBTs including border front-line workers.
- The researchers sought Customs border officials' views or clarification on claims made by ICBTs earlier on that the duties charged on their small groceries and basics were too high. The officials concurred that the official duty rates charged on most of the goods imported by ICBTs were considerably high, as they generally averaged at least 40 per cent. They further revealed that no legislation or any form of national decision was put in place to allow for reduced rates of duty or exemption or suspension of import duty on the basic goods commonly imported by ICBTs during this period of the pandemic. It is recommended that the Government introduce import legislation that suspends or significantly reduces import duties payable on goods commonly imported by ICBTs especially WICBTs.
- It is recommended that national COVID-19 strategies that balance between informal CBT continuity and prevention and control measures of the pandemic be put in place now and going into the future, given COVID-19 is still around. National policymakers must now focus on broadening the scope of national guidelines and action plans to allow for importation and exportation of goods and services beyond currently designated essential goods and services. Current trade facilitation regulations should be broadened to cover all goods and services, particularly those commonly imported by ICBTs.

- Adopt a harmonized and coordinated system for certification of COVID-19 testing results and sharing relevant information between countries as well as corresponding BCPs. This will go a long way in reducing trade costs associated with COVID-19 in the hands of SSCBTs and ICBTs including all cross-border travellers. When this is done in the context of harmonious SOPs and national measures between countries, duplication of testing efforts and costs are drastically reduced.
- The researchers noted that each country announced its COVID-19 measures without regard to the impact it would have on the neighbouring country. This position was concurred by all the border stakeholders from both BCPs. There is a need for a simultaneous or joint announcement of new COVID-19 measures by Zimbabwe and its neighbouring countries that are complimentary and well-coordinated in principle to avoid sharp contrast in the application when one travels from one country to the other. Current practice in which countries belonging to the same regional economic community announcing policy measures that are at times extremely antagonistic in principle, application and compliance requirements transform and elevate COVID-19 into another non-tariff barrier to CBT.
- Cross-border buses were still banned from moving across the BCPs when the two BCPs reopened as of 1 December 2020. It is recommended for the Government to arrive at decisions that affect ICBTs upon close consultation with them at all times.
- According to the border security officials at Beitbridge, they emphasized the need for the Government to start investing in its proposed national border surveillance system that uses drones to deter smuggling, discourage the use of undesignated entry points by border jumpers and reinforce the national security of the country among other considerations. This option could be implemented under some of the Government's medium- to long-term border security concerns.

## 7.2. Border control post-level recommendations

This section begins by presenting recommendations that apply to both Beitbridge and Chirundu OSBP. It will then be followed by the presentation of each BCP-specific recommendation where applicable.

- As the first port of call at both BCPs, Port Health officials' desks are supposed to be relocated to the main entrance gates for incoming people travellers and main exit gates for outgoing people travellers. This will enable them to do their mandatory primary COVID-19 checks and deter any suspected or non-compliant cases before getting inside the BCP premises. Reviews showed that Port Health officials needed support to be able to move to the gates. It is therefore recommended that the MoHCC work closely with the development partners to provide two tents to

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be pitched at each main gate of each BCP including the necessary office equipment (short term).

- From the border walk-throughs conducted at both BCPs, it was observed that no clients' charters and visuals of standard border operating procedures and processes were publicly displayed. The lack and therefore need for visible and prominent public signage on COVID-19 and movement directions to all ICBTs and travellers needed urgent readdress. This will assist in reminding ICBTs about the need to be highly alert to preventing, controlling and mitigating requirements against the virus, as well as decongesting or reduce mingling of people in the control zone. It is recommended that border officials adopt these techniques that are useful in aiding trade facilitation at the BCPs at the same time creating a conducive environment. These aids should also be written English and in local languages that can be read and understood by ICBTs.
- All the ICBTs interviewed and the majority of the border officials from both BCPs indicated that opening of the BCP to people movement without allowing passage of buses was self-defeating and made stifled trade facilitation of their sector. They suggested that the Government needs to allow passage of public buses and make it mandatory for them to be decontaminated each time they passed through the BCPs. Border officials working closely with development partners to provide frequent decontamination of travel vessels/vehicles/buses once arrived at the BCPs. This can be done in coordinated ways between corresponding BCPs.
- Government ministries/departments responsible for issuing import and export licences/permits should decentralize these facilities to the BCPs. While it was noted that of late these permits/licences could be obtained online, responsible ministries/departments need to aggressively sensitize the public on this development, as well as enhance and empower ICBTs to be able to easily get them online. Most importantly, the issue of the high cost of airtime and high rates of Internet connectivity raised by the ICBTs should be addressed within the context of this online facility. There is a need for the Government to work closely with the local Internet and airtime service providers to keep the charges affordable to ICBTs, and in ways that do not eventually increase their trade costs.
- On the issue of statistics of people being referred to quarantine facilities or denied entry on account of COVID-19 symptoms or non-compliance, MoHCC – through Ports Health – should start collecting and keeping statistics of such cases at the BCP level at both borders. Such data is very critical for use in informing SOPs and national policy responses going into the future.
- While border stakeholders concurred that generally, ZIMRA was taking responsibility for disinfecting border premises once every week at both BCPs, the issue of hygienic cleanness and litter management within the border premises remained at the individual stakeholder level. ZIMRA

officials indicated that their resources could not allow them to disinfect more than once per week. Survey feedback revealed that Port Health officials at both BCPs emphasized the need for proper litter and waste management to avoid the outbreak of other related diseases. Coordinated litter management within the border premises is critical in curtailing the spread of other epidemic diseases such as cholera. It is recommended that Port Health officials working closely with all border stakeholders and the development partners ensure that border premises are always clean and frequently disinfected more than once per week. This approach should also be extended to the local border marketplaces where ICBTs often sell their imported and exported goods and services. Furthermore, working closely with development partners, local Port Health officials and local interministerial committee including local district joint coordinating committees should urgently consider coming up with public risk communication approaches that raise public awareness and consciousness with an emphasis on adoption and observation of self-preventative and control measures within the border premises, along the borderline and at border marketplaces that emphasize on safety and health business environment/border marketplaces.

- All border stakeholders indicated the need for back-up power for use during times of electricity outage at both BCPs. They also suggested the need for investing in solar energy as an alternative. It is recommended that the Government work closely with development partners to invest in solar energy for both BCPs.
- The Department of Immigration officials from both BCPs cited that their computer systems were stand-alone that use offline border management systems. They rated their system as far from being robust and efficient, given the pressure that often comes with a huge number of travellers using the two BCPs. As at the time of the stakeholder validation meeting of the findings of this project, the latest update from the department's representative indicated that a tender for this project had been issued out. The suggested timeline of having the issue resolved was given as three months. It is recommended that the Department of Immigration continue to closely follow-up and engage the Government to ensure that the project fully materializes.
- Some institutions operating at both BCPs such as veterinary services, agriculture and immigration revealed that their systems were still manual processes. They concurred that in delaying border processes, such approaches posed a high risk in terms of transmission of the virus. It is recommended that parent ministries or departments engage the Government to have all manual processes transformed into digital or online electronic processes. Provision of adequate computers for use by the border officials, as well as reliable Internet and Wi-Fi facilities are all important for reducing physical human interaction and trade costs associated with border dwell time.

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- Border officials to work closely with development partners to ensure that client charters, step-by-step visual aids and adequate public signages are put in place at both BCPs.
- Border officials to address all sources of border delays as highlighted by the ICBTs from both BCPs. These include the elimination of duplication of searches and other related activities.
- Border stakeholders to urgently introduce border queue management system that allows for separate queues for women and men, express lanes for ICBTs with goods within duty-free allowances, priority clearance for the elderly women and those mothers with breastfeeding children.
- Border stakeholders to generally reduce and eliminate unnecessary number of highway roadblocks in the best interest of promoting trade facilitation especially during the pandemic times.
- Port Health officials working closely with development partners to ensure that tents for rapid testing are visibly located and easily accessible to travellers. This should be complemented by the use of adequate public signages for ease of directions.
- The Department of Immigration to ensure that their tenders for their computerization project comes to fruition within the set timelines.

### 7.3. Recommendations specific to Chirundu one-stop border post

- Border key informants to the interviews concurred that existing ablution facilities were inadequate. The existing facilities were not particularly sensitive to women's needs and requirements. They did not have facilities for breastfeeding women to safely and conveniently change childrens' nappies and other related routines. Tap water was generally perceived as unsafe to drink, and most of the time the taps were dry. Both ICBTs and border stakeholders revealed that they preferred to buy mineral water for drinking. Port Health officials together with the responsible government local service providers – including Zimbabwe National Water Authority (ZINWA), which could not be interviewed due to unforeseen constraints – need to take a lead or influential role towards rectifying this potentially looming health hazard at the BCP. Border stakeholders are recommended to work closely with the development partners to repair current facilities so that they function at full capacity in the interim. Government to work closely with development partners to consider upgrading existing facilities (interim to short term) or constructing additional ablution facilities (medium to long term) that offer gender-sensitive needs and requirements. In the same vein, it is critical to ensure reliable and constant tap water supply that is also safe for drinking.

- There was only one COVID-19 sanitizing booth against two existing entrances into the building. Through MoHCC, it is recommended for the Government to work closely with the development partners to consider putting an additional booth so that all entrance points into the building are sanitized.
- Against the noted inadequacies as at the time of the survey, there is a need to increase the number of body temperature monitoring facilities including infrared thermometers, handwashing dispensers, sensors and foot-pedal-operated hand sanitization facilities starting from the main entrance and within the border premises. These should be strategically positioned within the border premises so that they are visible and accessible to all.
- Provision of adequate computers for use by the border officials, provision of reliable Internet and Wi-Fi facilities especially for the Department of Immigration and Department of Veterinary Services are all important for reducing physical human interaction and trade costs associated with border dwell time.
- The Department of Immigration to introduce new small passport stamps and computerization local border pass (to be issued from the system) to avoid nationwide abuse.
- Port Health, in close collaboration with the development partners, is recommended to introduce regular and random testing of BCP front-line workers at no cost. This strategy requires to be complemented with frequent awareness training and free distribution of PPEs and other associated supplies for staff.
- Combined client care workshops for border officials and CBTA's will help in improving the professional relationship and team approach to issues of common concern.
- Most of the ICBTs at Chirundu OSBP raised issues regarding the fast running out of their passport pages due to the high frequency of crossing the BCPs, as well as big stamp impressions being used at Chirundu OSBP by both countries. The Department of Immigration to replace big stamps with small ones. The revival of the border pass system that is machine-readable is essential.
- Border tour at Chirundu OSBP revealed that the available isolation room was very small, with half of its space used for storing obsolete files and old cartons/boxes. It is recommended for Port Health, in close partnership with development partners, to provide a large quarantine tent.

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#### 7.4. Recommendations specific to Beitbridge Border Control Post

- Concerning inadequate and gender-insensitive ablution facilities, it could not be ascertained whether the new structures being constructed by ZimBorders would include these aspects. It is recommended that government authorities responsible for the oversight of the currently ongoing construction project ensure that facilities that are sensitive to women's needs and requirements are catered for in the new border structure being constructed by ZimBorders. It is further recommended that ZINWA, working closely with the Beitbridge local authority and the development partners, find a lasting solution to the need for safe drinking water and reliable water supply so that ablution facilities are fully functional around the clock.
- The BCP had two COVID-19 booths, one on the exit side and the other on the entry side of the border. It is recommended that the MoHCC, working closely with the development partners, secure two more booths so that each of the remaining entries on either side of the hall are catered for.
- Given the noted general inadequacy of other preventative and control facilities (such as handheld temperature guns, handwashing dispensers, foot baths and hand-sanitizing dispensers), Port Health officials are recommended to work closely with development partners to provide these additional facilities.
- As at the time of the field visit, there was no quarantine room or such facilities within the BCP premises. It is recommended that Port Health working closely with the development partners procure a separate tent for that purpose.
- Social distancing floor markings on the exit side (southbound) were unclear and faded. It is recommended that respective border officials always ensure that these markings are clear, elaborate and renewed.
- Border officials to reduce or eliminate highway roadblocks targeting ICBTs, particularly in these times of the pandemic.
- The use of long stamps that was discontinued some time back needs to be revived. While the revival of this facility depends on bilateral consensus with South African counterparts, the department must continue to engage the South African Immigration Department with a view to restoring the border pass.
- Border officials to ensure that one-metre social distance floor markings are renewed. Additional COVID-19 wall posters printed in English and local languages should be provided by the Port Health officials in close cooperation with the development partners.



- The Department of Immigration working closely with the development partners should prioritize securing reliable heavy-duty machines that can be used to scan all travel documents at the BCP.
- Among other border stakeholders, the Veterinary Services urgently need to resolve its staff shortage challenges by securing additional manpower.
- The numerous roadblocks along the Beitbridge Highway need to be scaled down given that similar searches by officials from the same border stakeholders would have inspected the same consignments at the BCP as part of clearing processes.

### 7.5. Informal cross-border trade levels

- According to ZIMRA officials who were interviewed, in some cases, ICBTs smuggle or under-declare goods in quantities and values that do not attract any duties or require licences due to lack of customs knowledge, procedures and processes. It is recommended that ZIMRA regularly hold targeted customs workshops for ICBTs on customs import and export processes and clearance of goods.
- The majority of the interviewed ICBTs who import and export goods that require import and export licences were concerned that despite the outbreak of the pandemic, the export and import permits and licences were still not being issued at the BCPs but from head offices located in Harare, the capital city of Zimbabwe. Furthermore, interviewees revealed that these permits and licences could not be interchanged between or among them. It is recommended that these licences and permits be issued at BCPs, in the event that ICBTs are unable to rely on the online alternative.
- From the common list of challenges faced by ICBTs, Beitbridge had more reports than Chirundu OSBP. These included standing in long queues while waiting to be served by different border officials. Though common to Beitbridge as well, Chirundu OSBP had more reports on challenges relating to cumbersome clearance processes. It is recommended that BCPs introduce lanes for ICBTs and prioritization of clearance for women especially those with small children and elderly ones.
- During border market walk-throughs, especially in Beitbridge, local ICBTs operating at the border markets revealed that they had no idea about the role and importance of a border marketers' association. It is recommended that the Ministry of Women Affairs, Community, Small and Medium Enterprises take the lead in assisting local marketers to appreciate and form a marketers' associations.
- Ablution facilities at border markets visited in Beitbridge were either inadequate, not functioning or non-existent at all. There were no litter bins as used face masks were strewn all over within the marketplaces. Two of the three visited marketplaces had no toilets and tap water. No hand sanitization or temperature checks were being done on entering

## 7. RECOMMENDATIONS

border marketplaces at both BCPs. Health measures in marketplaces where ICBTs sell their wares are critical for curtailing the spread of the virus. It is highly recommended that local councils working closely with MoHCC start to address these issues without further delay. Government working together with development partners (whenever possible) need to start providing free handwashing stations, introduce daily marketplace disinfection, impose mandatory temperature checks and wearing of masks, and maintain social distancing. There is a need for local councils to provide proper waste management facilities at all border marketplaces in both border towns.

When asked about their suggested recommendations which when adopted for implementation will assist them in trading better and safer amidst the pandemic, they had the following to say:

- Lower or remove customs duties on the goods they commonly import during this pandemic period.
- The Government must closely engage and encourage service providers to reduce costs of transaction to encourage the use of mobile money by ICBTs in reducing chances of infection through the use of hard cash currencies.
- Decongesting current border marketplaces by opening new ones or introducing a staggered method that allows traders to evenly come and sell their wares at different days in a week.

### 7.6. Recommendations on services provided by cross-border traders associations

- The Chirundu Chapter raised concerns that they felt overlooked, left out or marginalized by border stakeholders. They were not being invited to crucial meetings and other feedback programmes that dealt with decisions or issues that affected them and their constituencies. Administratively, they have challenges in maintaining membership registers, capturing important biodata and related information of their members no matter how few. They also confirmed that their website was difficult to access, as well as being generally outdated. In Beitbridge, there was no CBTA at the BCP level, yet some of the interviewed local traders indicated great willingness to have one. Their website at national level was outdated and not being updated.

It is recommended that the Ministry of Women Affairs, Community, Small and Medium Enterprises work closely with the development partners (whenever possible) to assist with aspects of capacity-building in the areas of identified need. Identified areas of need include transforming the current loosely set-up CBTAs, into modern ones, capable of capturing all the biodata information and business details of their membership, maintenance of essential statistics which can be used in policy formulations that affect their constituencies.

When asked what kind of services they would want to offer to their members that they were not offering now, they had the following to reveal to the researchers:

- CBTA facilitate bulk purchases of goods commonly imported by ICBTs from neighbouring countries and then liaise or collaborate with transporters' associations and suppliers on either side of the BCPs.
- CBTA to be assisted in reviving robust inter-CBTA engagements with counterparts from Zambia and Malawi in the best interest of safe continuity of CBT by ICBTs.
- CBTA to assist with the dissemination of border processes and procedures for their membership, to be sources of latest border developments and changes in customs legislation and to work closely and in strategic partnership with the border stakeholders.

### 7.7. Recommendations on services provided by Trade Information Desk Officers

The Government, through the Ministry of Foreign Affairs and International Trade, needs to take the issue of updating of STR common list to COMESA. Local/ internally, updating of the list was last done two years ago, but the draft is still pending approval so as to become effective. In the meantime, the computerization of all TID manual process needs to be prioritized. ZIMRA's ASYCUDA World System has the potential to accommodate these manual processes. It is imperative that TID be linked directly to Zambia's ASYCUDA System as well, as the current manual processing of forms may lead to the spreading of the virus. While the introduction of the groupage system by ZIMRA was plausible in the best interest of continuity of informal CBT amidst the pandemic, these groupages are now treated as commercial consignments that cannot be granted simplified preferential treatment through the issuance of a simplified certificate of origin at the TID. Once goods are cleared as commercial consignments, services of a clearing agent or clearing broker are required, and these come at a professional cost that is generally far beyond affordability by ICBTs. ZIMRA and TID should be flexible enough to ensure that STR benefits are retained and restored to ICBTs in ways that do not distort the good-intentioned trade facilitation measures for ICBTs. As it is, the misaligned application of measures results in increased trade costs in the hands of ICBTs. This is also becoming a form of institutionalized non-tariff barrier to informal CBT. Consistency and predictable customs valuation of goods imported by ICBTs under STR should be standardized and done transparently and systematically so that ICBTs are not left guessing. The Government, through the Ministry of Industry and Commerce, needs to work closely with ZIMRA as well to come up with a Zimbabwean STR Trade Portal that should be available in local languages as well. The Government needs to initiate the expedient introduction of SADC STR and TID Office facilities through engaging South Africa bilaterally. This will go a long way in ensuring that ICBTs that use Beitbridge benefit from intra-SADC trading or simplified rules of origin for originating goods between South Africa and Zimbabwe.



## Annex 1. Terms of reference

### A RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE IN ZIMBABWE AND CONSOLIDATION OF REGIONAL REPORT

#### I. Background and rationale

In the Southern African Development Community (SADC), informal cross-border trade (CBT) is significant, accounting for between 30 to 40 per cent of total intra-SADC trade, with an estimated value of USD 17.6 billion. Women, who make up approximately 70 per cent of informal traders, face gender-specific risks and are more susceptible to harassment and exploitation by corrupt officials. Women make up approximately 70 per cent of informal cross-border traders (ICBTs), face gender-specific risks, and are more susceptible to harassment and exploitation by corrupt officials. The majority of female ICBTs are relatively poor, with low levels of education, and trade in high volume of low-value goods, including food products, cosmetics, clothes and handicrafts. Women ICBTs (WICBTs) support some of the most fragile and impoverished communities, and so any threat to informal CBT poses a threat to the most vulnerable and least resilient. Moreover, besides a marked increase in gender-based violence and a decrease in access to sexual and reproductive health, COVID-19 is expected to affect women significantly more than men especially through widening existing financial inequality between men and women.

The outbreak of COVID-19 in Southern Africa has led to border closures and travel restrictions throughout the region. Where CBT is permitted, it has been for larger commercial flows and not for the movement of people, accompanied by quarantine measures for varying periods, often at the cost of the traveller. Additional security measures have been put into place to patrol borders. For ICBTs, these changes have had a catastrophic impact on their livelihoods and are unable to conduct their routine trade. COVID-19 restrictions have hit informal trade harder than other sectors, with women hit particularly hard by economic losses. There is likely to be further pressure on the informal sector post-COVID-19.

IOM is implementing a project titled “Supporting informal cross-border traders in Southern Africa to do business safely during the COVID-19 pandemic”. The project is being managed by the IOM office in Zambia and implemented in conjunction with IOM missions in Malawi, South Africa and Zimbabwe.

The objective of this project is to contribute towards the enhanced protection of the health and economic rights of ICBTs through the facilitation of continued trade during the COVID-19 pandemic. The expected outcomes are as follows:

- Consensus exists on policy direction to favourably incorporate ICBTs and informal traders into national COVID-19 trade plans and to the extent possible, preparing for the COVID-19 socioeconomic recovery plans;

- Border control posts (BCPs) and border officials have improved capacity to facilitate a healthier and safer environment for ICBTs to operate;
- Small-scale cross-border traders (SSCBTs)/ICBTs demonstrate increased ability on how to trade safely and operate at BCP during restrictions brought by COVID-19.

This project will be implemented in four countries in Southern Africa namely Malawi, South Africa, Zambia and Zimbabwe. This is intended to be an emergency response project, to be implemented over a period of 7 months, between October 2020 to April 2021.

## II. Scope of work

Within the context of this project, a rapid situation and needs assessment of informal CBT in select countries and borders in Southern Africa will be undertaken. The rapid situation and needs assessment will be undertaken in Malawi, South Africa, Zambia and Zimbabwe, and at three BCPs namely, Beitbridge (Zimbabwe/South Africa), Mwami/Mchinji (Zambia/Malawi) and Chirundu one-stop border post (OSBP) (Zambia/Zimbabwe).

The rapid situation and needs assessment will take place in the first two months of the project as part of the inception phase. It will serve to inform activities under the three outcomes of the project, including the national-level policy dialogue and activities with border officials and Cross-Border Traders Association (CBTAs) undertaken at BCP level that are part of this project.

This rapid situation and needs assessment will take place in Zimbabwe and South Africa. It will include both national-level and border-specific analysis. The selected candidate will be expected to also analyse the situation at Chirundu OSBP (Zimbabwe/Zambia) and Beitbridge (Zimbabwe/South Africa), working closely and in coordination with other selected national candidates who will be undertaking the corresponding analysis on the other side of the borders. The intention of this rapid situation and needs assessment is also to create a gender-mainstreamed baseline.

The rapid situation and needs assessment will cover the following issues in relation to informal CBT during the COVID-19 pandemic:

- Overview of existing national COVID-19 policies and strategies and BCP-specific multisectoral action plans/guidelines to support ICBTs within the context of COVID-19 national response.
- Overview of whether/how informal CBT has been incorporated (or not) into existing COVID-19 response plans, policies and strategic guidance at national and subnational levels where implementation is taking place.
- Impact of COVID-19 on informal CBT including the gender dimensions of the same.

- Impact of national or regional COVID-19 agreements, guidelines on informal CBT and CBTA and the extent to which such will facilitate resumption of safe trade.
- Extent to which ICBTs have switched to other alternative livelihoods in the wake of COVID-19 and the viability of such alternative livelihoods.
- Assess the potential opportunities and feasibility of technological solutions to support ICBTs and CBTA.
- Indication whether/how informal CBT is being considered by national governments as part of the post-COVID-19 recovery plans, policies and strategies.
- Number of ICBTs that has benefited from COVID-19 stimulus packages and recommendations for consideration.
- Key issues identified by government officials from a policy perspective regarding the issues relevant to the needs of ICBTs.
- National-level and BCP-specific multisectoral action plans/guidelines to support ICBTs within the context of COVID-19 national response.
- Overview of relevant national plans that support the implementation of the International Health Regulation (IHR) (2005) requirements in the context of the COVID-19 pandemic.
- Whether informal CBT is taking place at the specific BCP at the time of the assessment. If it is, the volume nature and scale of informal CBT at the time of the assessment.
- Current border and travel restrictions that are in place at the time of the assessment.
- Effect of these restrictions on informal CBT and priority needs of ICBTs, assuming that these restrictions are in place.
- Mapping and profiling of CBTA/other relevant association.
- Estimated number of cross-border traders (by gender) registered by CBTA/relevant other organization in the location of the specific BCP.
- The number of traders registered with CBTA/other trade-related associations on each side of the border, at the given BCP at the time of the assessment.
- Location, size and composition of trader markets within the border vicinity/relevant to CBT (for example, the COMESA market in Lusaka).
- Identification of Trade Information Desks (TIDs) and Trade Information Desk Officers (TIDOs) and ICBTs to be trained as part of the project.
- Clear outline of the capacity-building needs at the BCPs, as well as priority health-related infrastructure requirements at BCP (and border market areas) in light of COVID-19.

- Number (Percentage) of ICBTs reporting access to infection prevention and control (IPC) measures at BCPs; number (percentage) of ICBTs who reported having used a handwashing facility at the BCP in their most recent travel; number of infrastructure measures put into place that respond to the needs of ICBTs, including the specific needs of women traders.
- IPC measures currently in place and the extent to which they serve the needs of ICBTs, including review of SOPs/protocols developed for each BCP, level of usage and gaps in implementation.
- Identification of relevant inter-agency and cross-border coordination mechanisms and needs including at national and BCP level.
- Procedural guidance and training requirements for (health and non-health) front-line border officials to facilitate informal traders.
- Other issues relevant to understand informal CBT at national and specific BCP level, during the COVID-19 pandemic.

The selected candidate is expected to undertake field visits to the BCPs at Beitbridge and Chirundu (OSBP) for purposes of data collection. The rapid situation and needs assessment will be based upon an agreed-upon methodology that will be jointly agreed with the IOM project management site at the start of the project. This will include a rapid literature review, site visits to the BCP in conjunction with government officials from the concerned country, as well as consultations with a range of stakeholders including border officials, national-level policymakers from various government agencies in the country, CBTA's and other relevant trade entities. Additionally, the candidate selected for Zimbabwe and South Africa will be tasked to take a lead in coordinating with identified national experts on the approach, methodology and tools to be used for purposes of the assessment, as well as consolidating the final report. The selected candidate will lead the consolidation of the reports from the participating countries into one regional report to be shared with the Foreign, Commonwealth and Development Office.

### **III. Mainstreaming gender**

Gender refers to the social attributes and opportunities associated with being male and female and the relationships between women and men. These attributes, opportunities and relationships are socially constructed and learned through socialization processes. Gender determines what is expected, allowed and valued in a woman or a man in each context. In the context of this terms of reference, mainstreaming gender into the rapid situation and needs assessment means ensuring the interests, needs and priorities of both women and men are taken into consideration during the design and execution of the rapid assessment and fully integrated within the final report presented by the successful candidate. In doing so, this rapid situation and needs assessment will contribute to the inclusion and promotion of women in informal CBT as contributing agents to sustainable development.



#### IV. Responsibilities and time frames

The incumbent will be responsible for the following deliverables, as per the following time frames:

- (a) Undertake a rapid literature/desk review of available recent publications and reports on informal CBT in the region in general and in Zimbabwe and South Africa in particular and coordinate with other national experts undertaking the rapid assessment in Malawi, South Africa and Zambia in order to standardize the approach, methodology and tools for the assignment (by end of week 1).
- (b) Draft inception report that provides an overview of the proposed methodology to be used to undertake the rapid situation and needs assessment. The methodology and tools must be agreed and synchronized with other experts conducting the same assessment in Malawi and Zambia (by end of week 2).
- (c) Draft rapid situation and needs assessment report, which includes all areas outlined in the proposed scope of work, with special reference to the capacity gaps and needs, and quick wins that may be leveraged to promote informal CBT, feedback from field visit to BCP and any additional feedback provided by IOM and other relevant stakeholders (by end of week 4).
- (d) Final rapid situation and needs assessment report, which integrates feedback provided by IOM and other relevant stakeholders, as well as a policy brief summarizing the findings of the report, and a PowerPoint presentation of key findings and recommendations (by end of week 8).
- (e) Consolidated regional report, incorporating the situation and needs assessment reports from Malawi, South Africa and Zambia, working closely with the identified national consultants.

#### V. Competencies

The incumbent is expected to demonstrate the following values and competencies:

##### Values

- Inclusion and respect for diversity: Respects and promotes individual and cultural differences; encourages diversity and inclusion wherever possible.
- Integrity and transparency: Maintain high ethical standards and acts in a manner consistent with organizational principles/rules and standards of conduct.
- Professionalism: Demonstrates ability to work in a composed, competent and committed manner and exercises careful judgment in meeting day-to-day challenges.

### **Core competencies – Behavioural indicators**

- Teamwork: Develops and promotes effective collaboration within and across units to achieve shared goals and optimize results.
- Using appropriate software for both quantitative and qualitative analysis of migration data sets.
- Delivering results: Produces and delivers quality results in a service-oriented and timely manner; is action oriented and committed to achieving agreed outcomes.
- Managing and sharing knowledge: Continuously seeks to learn, share knowledge and innovate.
- Accountability: Takes ownership for achieving the Organization's priorities and assumes responsibility for own action and delegated work.
- Communication: Encourages and contributes to clear and open communication; explains complex matters in an informative, inspiring and motivational way.

### **VI. Education and experience**

The successful consultant should have the following qualifications and experience:

- Advanced university degree in International Relations, Public Health, Migration Management or a related field.
- Extensive knowledge of immigration and border security and management, informal CBT in the region and in Zambia, trade facilitation and customs or other relevant areas.
- Minimum of 10 years of relevant professional experience working for government or an intergovernmental organization in a related area of immigration and border management.
- Proven previous working experience consisting of substantial involvement in assessments, evaluations and/or reviews in related areas.
- Working experience with senior officials within government, intergovernmental and non-governmental organizations.
- Full computer literacy, including familiarity with research and basic statistical tools.
- Excellent written and spoken English; knowledge of local languages an advantage.
- Demonstrated ability to work in a multicultural environment and establish harmonious and effective relationships.

## Annex 2. Sample of interviewed stakeholders and key informants

Full name	Sex		Organization	Designation	
	National	Female			Male
1. Ruzive Magret		√	Ministry of Public Service, Labour and Social Welfare	Social Development Officer – Migration and vulnerable mobile person	
2. Irvine Chivaura			√	Ministry of Home Affairs and Cultural Heritage	Deputy Director
<b>Beitbridge Border Control Post</b>	<b>Female</b>	<b>Male</b>			
3. Mafios Macheka			√	Beitbridge Cross-Border Transporter Association	Coordinator
4. Nobuhle Ncube	√			Department of Social Department	Superintendent
5. Trust Manatsire			√	Department of Immigration	Assistant Regional Immigration Officer
6. Tongogara Mutambanengwe			√	National Biotechnology Authority	Biosafety Officer
7. Levy Gama			√	Plant Quarantine Services	Station Manager
8. Oripa Makhado			√	Ministry of Health and Child Care – Port Health	Port Health Officer
9. Tina Mhlanga	√			Veterinary Services	Food Inspector
10. Mbuso Moyo			√	Zimbabwe Revenue Authority (ZIMRA)	Acting Shift Manager
<b>Chirundu Border Control Post</b>	<b>Female</b>	<b>Male</b>			
11. Chrysler Kudzai			√	Zimbabwe Cross-Border Traders Association	Chairperson (Chirundu Chapter)
12. Rumbidzai Antonio	√			Environmental Management Agency	Officer
13. Emmanuel Mashura			√	Plant Quarantine Services Institute	Plant Health Inspector
14. Shelter Mtizwa	√			Trade Information Desk Office	Trade Information Desk Officer
15. Violet Rupiya	√			ZIMRA	Revenue Supervisor
16. Morgan Moyo			√	Department of Immigration	Assistant Regional Immigration Officer

## Annex 3. Data collection tools

### Annex 3.1. Individual informal cross-border trade interview questionnaire

#### INDIVIDUAL INFORMAL CROSS-BORDER TRADE INTERVIEW QUESTIONNAIRE FOR A RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE

This questionnaire will be used to collect information that will enable the assessment of the following issues in relation to informal cross-border trade (CBT) during the COVID-19 pandemic.

- (i) Impact of COVID-19 on informal CBT including the gender dimensions of the same.
- (ii) The extent to which informal cross-border traders (ICBTs) have switched to other alternative livelihoods in the wake of COVID-19 and the viability of such alternative livelihoods.
- (iii) Whether informal CBT is taking place at the specific border control post (BCP) at the time of the assessment. If it is, the volume nature and scale of informal CBT at the time of the assessment.
- (iv) Current border and travel restrictions which are in place at the time of the assessment.
- (v) The effect these restrictions on informal CBT and priority needs of ICBTs, assuming that these restrictions are in place.
- (vi) Number (Percentage) of ICBTs reporting access to infection prevention and control (IPC) measures at BCPs; number of (percentage) of ICBTs who reported having used a handwashing facility at the BCP in their most recent travel; number of infrastructure measures put into place which respond to the needs ICBTs including the specific needs of women traders.
- (vii) IPC measures currently in place and the extent to which they serve the needs of ICBTs, including review of SOPs/protocols developed for each BCP, level of usage and gaps in implementation.

REPORT OF THE RAPID SITUATION AND NEEDS ASSESSMENT  
AT CHIRUNDU/BEITBRIDGE BORDERS IN ZIMBABWE

### SECTION A: INTRODUCTION

\*\*\*\*\*This section is completed before you start the interview.\*\*\*\*\*

1. DETAILS OF THE INTERVIEWER	
1.1. Name of research assistant in full	
1.2. Date of interview	____ / ____ / ____
1.3. Interview language	<input type="radio"/> English <input type="radio"/> Local language (Please specify)

2. IDENTIFICATION DETAILS	
2.1. Country (Single response)	<input type="radio"/> Malawi <input type="radio"/> South Africa <input type="radio"/> Zambia <input type="radio"/> Zimbabwe
2.2. Border post town (Single response – Cascade)	<input type="radio"/> Beitbridge <input type="radio"/> Chirundu–Zambia <input type="radio"/> Chirundu–Zimbabwe <input type="radio"/> Mchinji <input type="radio"/> Musina <input type="radio"/> Mwami

### CONSENT

My name is ..... I am a research assistant for an IOM Rapid Situation and Needs Assessment of Informal Cross-Border Trade in [Country]. The aim of this rapid assessment is to gather important information that will inform activities of the IOM project, which aims to contribute towards the enhanced protection of the health and economic rights of ICBTs through the facilitation of continued trade during the COVID-19 pandemic. This interview will take roughly 30 minutes of your time. All the information shared will be confidential, not shared with anyone except to be used in the compilation of the report. You are free to adjourn the interview at any time and not to answer some of the questions in the questionnaire.

Will you want to participate in the interview?

 Y

 N

If no, thank the respondent and adjourn the interview.

### SECTION B: RESPONDENTS' DETAILS

1. DETAILS OF CROSS-BORDER				
1.1. Full name of the respondent (Optional)	a. Surname		b. First name	
1.2. Age in years		1.3. Sex	M	F
1.4. Residential town (Type in)				
1.5. What is your country of residence?	<input type="radio"/> Malawian <input type="radio"/> South African <input type="radio"/> Zambian <input type="radio"/> Zimbabwean <input type="radio"/> Others: _____ <input type="radio"/> Prefer not to say			

## ANNEXES

1.6. Which one is your most frequently used border post? (Single select and depends on what was selected above.)	<input type="radio"/> Beitbridge <input type="radio"/> Chirundu one-stop border post (OSBP) <input type="radio"/> Mwami/Mchinji
--	---

## 2. DETAILS OF THE CROSS-BORDER TRADERS' ASSOCIATION

Instruction: In the space provided below, please complete the details of your CBTA.

2.1. Are you a member of any CBTA?	Y	N
2.2. If yes, what is the CBTA's name? (Type in)		

## SECTION C: TRADE PROFILE

List by name, goods commonly traded (Before the COVID-19 pandemic and lockdown).

1.1. Are you currently involved in cross-border trading?	Y	N
1.2. If yes, in the space below, list by name all the goods that you frequently EXPORTED from (state country name) before the COVID-19 pandemic.	<input type="radio"/> Building materials <input type="radio"/> Fresh fruits and/or vegetables <input type="radio"/> Fresh meat and/or fish <input type="radio"/> Processed food products <input type="radio"/> New clothes and shoes <input type="radio"/> Second-hand clothes and shoes <input type="radio"/> Blankets/bed covers/bedsheets/pillows, etc. <input type="radio"/> Household items <input type="radio"/> Cosmetics <input type="radio"/> Handicrafts <input type="radio"/> Electricals <input type="radio"/> Others: _____	
1.3. In the space below, list by name all the goods that you frequently IMPORTED to (state country name) before the COVID-19 pandemic.	<input type="radio"/> Building materials <input type="radio"/> Fresh fruits and/or vegetables <input type="radio"/> Fresh meat and/or fish <input type="radio"/> Processed food products <input type="radio"/> New clothes and shoes <input type="radio"/> Second-hand clothes and shoes <input type="radio"/> Blankets/bed covers/bedsheets/pillows, etc. <input type="radio"/> Household items <input type="radio"/> Cosmetics <input type="radio"/> Handicrafts <input type="radio"/> Electricals <input type="radio"/> Others: _____	
1.4. Order placement and transaction methods of payment by informal cross-border trade		
(a) Do you have a smartphone?	Y	N

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AT CHIRUNDU/BEITBRIDGE BORDERS IN ZIMBABWE

(b) Do you have a mobile account?	Y	N
(c) Do you have a bank account?	Y	N
<b>1.5. Instruction 1: From the list given below, indicate your most commonly used method of order placement for the goods bought from the country of import.</b>		
Type of order placement method	Indicate your commonly used method by placing an X against it in the appropriate space provided below.	
<input type="radio"/> Order through online or Internet		
<input type="radio"/> Order through website address		
<input type="radio"/> Order through WhatsApp		
<input type="radio"/> Order through cell phone calls		
<input type="radio"/> Order through physical presence or person-to-person interaction upon crossing the borders for selling their exports or import goods		
<input type="radio"/> Other methods (Specify)		
<b>1.6. Instruction 2: From the list given below, indicate your ONE most common payment method used in buying goods from the country of import.</b>		
<input type="radio"/> Cash		
<input type="radio"/> Bank telegraphic transfer		
<input type="radio"/> Online payment		
<input type="radio"/> Money transfer agencies (e.g. Western Union)		
<input type="radio"/> VISA cards		
<input type="radio"/> Other payment methods (Specify)		
<b>1.7. Are you currently involved in cross-border trading?</b>	Y	N
(a) From the list of the goods you frequently export and import, do some of the goods require export and import permits or licences?	Y	N
(b) If yes, are these exports and import permits or licences issued centrally by one government department located at this BCP?	Y	N
(c) If yes, briefly explain where you get the import and export permits or licences.	Y	N
<b>1.8. Are you charged any fee to get these export and import permits or licences?</b>	Y	N
(a) If yes (1.8), what would you say about the amount of money charged as administrative fees to get these export and import permits or licence?		
<input type="radio"/> Affordable		
<input type="radio"/> High		
<input type="radio"/> Very high		

## ANNEXES

1.9. How are these exports and import permits or licences submitted to customs for processing at this border?		
<input type="radio"/> Manually as hard copy documents <input type="radio"/> As photocopied documents <input type="radio"/> Electronically processed in the customs computer system <input type="radio"/> Others (Please specify)		
1.10. Are you aware of any of the border and travel restrictions which were in place or which are still in place as a result of the COVID-19 pandemic?	Y	N
(a) If yes, kindly explain. (Tick whatever client states.)		
<input type="radio"/> Ban of people movement across the borders <input type="radio"/> Ban of movement of goods across borders (other than designated essential goods) <input type="radio"/> Mandatory requirement to produce a COVID-19 test certificate which is negative <input type="radio"/> Use of hand sanitizers <input type="radio"/> Washing of hands with soap <input type="radio"/> Maintenance of social distance <input type="radio"/> Maintenance of social distance <input type="radio"/> Others (Please specify)		
(b) If yes (1.10a), what is the effect of these restrictions on your informal cross-border trading and priority needs? (Please state all the responses.)		

## SECTION D: COVID-19 RESPONSE MEASURES

## 1.1. Impact of national COVID-19 response measures on cross-border traders

Instruction: In the space provided below, state any challenges that you commonly faced at the borders before the outbreak of COVID-19.

## (a) At the border control post level

(i) From the list below, indicate challenges you have faced at one time or another at this border.

- Standing in a long queue waiting for your turn to be cleared by the border officials
- Searches or physical verification of your goods by many border officials one after the other
- Cumbersome clearance processes
- Detention of your goods by Customs officials without clear explanation as to why
- Harassment from any of the border officials (Sexual harassment if women trader)
- Being cleared from the same place with commercial trucks, other motorists, etc.
- Shortage of water within the border premises (tapes, ablution facilities, etc.)
- Closed or decrepit toilet or ablution facilities
- Others (Please specify)

(ii) How frequently did you face any or a number of these challenges?

- Rarely
- Frequently
- Very frequently
- Every time I pass the through border

(iii) Have you ever received any border procedures and processes training from Customs authorities?

Y

N



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(iv) If yes, are you now fully knowledgeable and aware of border clearance procedures and processes that affect you as a cross-trader?	Y	N
(v) How often did you cross the border post? (State the frequency)		
(vi) On average, how many days would you spend in the foreign country?		
<b>(b) Highway and goods transportation level</b>		
(i) Do you pay transport fares for your goods from one country to the other?	Y	N
(ii) If yes, would you say the fares are:		
o Affordable		
o High		
o Very high		
(iii) Have you ever encountered roadblocks to check or verify on your imported goods?	Y	N
(iv) If yes, do you see the frequency of these roadblocks as:		
o Moderate and necessary		
o Too many and causing unnecessary delays		
(v) State any of the challenges you frequently face as a cross-border trader along the highway.		
<b>1.2. Instruction: In the space provided below, respond to the question concerning how the COVID-19 outbreak has impacted your life and livelihood as a cross-border trader.</b>		
<b>(a) Means of living and livelihood during the COVID-19 pandemic</b>		
(i) From the list given below, choose one main factor that influenced your decision to go into informal cross-border trade.		
o Basic survival reasons		
o To fend for my family (including extended family members)		
o Passing on of a breadwinner in the family		
o Lack of employment/high unemployment levels		
o It was the easiest thing for me to do soon after leaving school		
o To complement my monthly salaries		
o To start a personal business		
o Supply small-to-medium enterprises and downtown tuck shops		
o Others (Please specify)		
(ii) Is cross-border trade your only means of income and survival?	Y	N
(iii) If yes, what alternative livelihood have you switched to during this period of the COVID-19 pandemic outbreak? (Respondent to state all in the space provided below)		
1.		
2.		
3.		
4.		
5.		

## ANNEXES

(iv) Were you aware of the existence of the Government's COVID-19 National Stimulus Package or its equivalent?	Y	N
(v) If yes, state or give details of everything that you benefited through this programme.	Y	N
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		
9.		
10.		
(vi) Have you benefited from any other government assistance programme as a way to cushion your life and livelihood during the COVID-19 pandemic?	Y	N
(vii) If yes (vi), state or give details of everything that you benefited through this programme.		
1.		
2.		
3.		
4.		
5.		
(viii) From the list below, did you receive from any source any of the following benefits during this period directly in connection with the effects of the COVID-19 pandemic? (Tick the applicable.)		
Form of assistance	Tick in the space below if received	If received, state the source or from whom
Grant		
Loan		
Cash		
Food		
Groceries		
Medication		
Face masks		
Hand sanitizers		
PPEs		
Reduced rates of airtime		

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Reduced rates of Internet		
Google Classroom facilities for your college/school going dependents		
Suspended payment for any services (please		
Reduced municipality rates		
Suspended payment for any services (Please state)		
Others (Please state)		

### SECTION E: INFECTION PREVENTION AND CONTROL MEASURES

#### 1. HEALTH AND HYGIENE MEASURES

1.1. Were you educated on COVID-19 infection prevention and control measures? (Single response)	Y	N
1.2. If yes (1.1), how did you receive the knowledge/education on COVID-19 infection prevention and control measures?		
<ul style="list-style-type: none"> <li>o From media (TV, radio, Internet)</li> <li>o From friends, family</li> <li>o Local communities (Churches, WhatsApp groups, clubs, etc.)</li> <li>o From government officials</li> <li>o From a trader's association</li> <li>o From friends, family, government officials and trader's association</li> <li>o Others (Please specify)</li> </ul>		
1.3. If yes (1.1), when do you wash your hands with sanitizers – BEFORE and AFTER? (Single response – Cascade)		
<ul style="list-style-type: none"> <li>o Touching your eyes, nose or mouth</li> <li>o Touching your mask</li> <li>o Entering and leaving a public place</li> <li>o Touching an item or surface that may be frequently touched by other people, such as door handles, tables, gas pumps, shopping carts or electronic cashier registers/screens</li> <li>o Others (Please specify)</li> </ul>		
1.4. What infection prevention and control measures are at the border that you frequently use? (Multiple responses)		
<ul style="list-style-type: none"> <li>o Hand sanitizers</li> <li>o Face masks</li> <li>o Foot and wheel baths</li> <li>o Production of a valid negative COVID-19 certificate</li> <li>o Temperature checks</li> <li>o Border clearance queue space is enough for social distancing</li> <li>o Others (Please specify)</li> </ul>		

## ANNEXES

1.5. Are you aware of the presence of the following COVID-19 infection, prevention and control measures or provisions which are at this border? (Multiple responses)		
<ul style="list-style-type: none"> <li>o COVID-19 testing tent/room</li> <li>o Isolation/quarantine tent/room</li> <li>o Transport to take those tested positives to a health facility</li> <li>o Health personnel to do COVID-19 education</li> <li>o Health personnel to do COVID-19 testing</li> <li>o Health personnel to monitor those in isolation/quarantine</li> <li>o Others (Please specify)</li> </ul>		
<b>2. INFRASTRUCTURE MEASURES: HANDWASHING FACILITIES AT THE BORDER CONTROL POST</b>		
2.1. Is there a handwashing facility at the BCP? (Single response)	Y	N
2.2. If yes (2.1), is the handwashing facility labelled? (Single response – Cascade)	Y	N
2.3. If yes (2.1), is the handwashing facility accessible?		
2.4. If yes (2.1), have you used the handwashing facility? (Single response – Cascade)	Y	N
2.5. Is washing of hands done under running water?	Y	N
(a) If no (2.5), then what was the reason for not using it? (Multiple response)		
<ul style="list-style-type: none"> <li>o No water and sanitizer solution</li> <li>o Not functioning properly</li> <li>o Not educated on its use</li> <li>o Its location is far from other service provision points</li> <li>o People's queue to it was too long and there are only a few of them available</li> <li>o Others (Please specify)</li> </ul>		
<b>3. INFRASTRUCTURE MEASURES: TOILETS</b>		
3.1. Is there a toilet at the BCP? (Single response)	Y	N
3.2. If yes (3.1), is it usable? (Single response – Cascade)	Y	N
3.3. If yes (3.1), are there handwashing facilities within or at the entrance of the toilet? (Single response – Cascade)	Y	N
3.4. If yes (3.1), are the available ablution facilities adequate? (Single response – Cascade)	Y	N
3.5. Is washing of hands done under running water?	Y	N
3.6. If no (3.5), then what was the reason for not using it? (Multiple response)		
<ul style="list-style-type: none"> <li>o No water and sanitizer solution</li> <li>o Not functioning properly</li> <li>o Not educated on its use</li> <li>o Its location is far from other service provision points</li> <li>o Others (Please specify)</li> </ul>		
3.7. Are the border ablution/toilet facilities adequately constructed to cater for women's gender-sensitive needs and requirements?	Y	N

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**SECTION F: COVID-19 COPING STRATEGIES**

1. In the wake of COVID-19, what alternative means have you switched to for your livelihood during this pandemic?

Alternative livelihood	Viability of the alternative means
1.	<input type="radio"/> Unviable <input type="radio"/> Fairly viable <input type="radio"/> Very viable
2.	<input type="radio"/> Unviable <input type="radio"/> Fairly viable <input type="radio"/> Very viable
3.	<input type="radio"/> Unviable <input type="radio"/> Fairly viable <input type="radio"/> Very viable
4.	<input type="radio"/> Unviable <input type="radio"/> Fairly viable <input type="radio"/> Very viable

### Annex 3.2. Border post walk-through observation tool

#### BORDER POST WALK-THROUGH OBSERVATION TOOL FOR A RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE

Name of country	
Name of border control post	
Name of researcher	
Date	
Time	

BORDER POST PREMISES				
	Yes	No	Number	Notes
<b>1. BORDER PREMISES: INFECTION PREVENTION AND CONTROL MEASURES</b>				
Are the following prevention and control measures in operation and in place?				
1.1. Use of handheld thermometers				
1.2. Use of alcohol-based hand sanitizers				
1.3. Availability of handwash basin and soap				
1.4. Use of face masks/face shields				
1.5. Use of wheel baths and foot baths				
1.6. COVID-19 testing area/tent/desk/room				
1.7. Use of PPEs by border officials and front-line workers				
1.8. Use of paper, wall charts and other signages about COVID-19 written in English				
1.9. Use of paper, wall charts and other signages about COVID-19 written in local language				
1.10. Use of direction signages (If yes, comment on the extent and appropriateness.)				
1.11. Use of client charters outside and within the buildings/premises				
1.12. Others (Please specify)				
<b>2. MOVEMENT OF PEOPLE WITHIN AND ACROSS THE BORDER AT THE TIME OF OBSERVATION</b>				
2.1. Is there a clear demarcation in terms of the BCP layout on people who are exiting the country and those who are incoming?				
2.2. Were people wearing face masks?				
2.3. Was social distancing being observed?				

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AT CHIRUNDU/BEITBRIDGE BORDERS IN ZIMBABWE

2.4. Does the border clearance queue management (at Customs and Immigration offices) allow for safe and adequate social distancing as people wait to be served?				
2.5. Was there any informal cross-border trade (CBT) long queues waiting for immigration and customs clearances at the time of observation?				
2.6. Use of clearly positioned informal/small-scale CBT client charters				
2.7. Are client charters, signages, COVID-19 posters, etc., written in English?				
2.8. Are client charters, signages, COVID-19 posters, etc., written in local languages as well?				
2.9. Others (Please specify)				
<b>3. MOVEMENT AND CLEARANCE OF CROSS-BORDER TRADERS' GOODS</b>				
3.1. Are any of the following strategies used to lower the risk of transmission of the virus without compromising on border compliance requirements?				
<ul style="list-style-type: none"> <li>o Latex hand gloves</li> <li>o Non-intrusive inspection equipment (e.g. scanners, X-ray machinery)</li> <li>o Others (Please give details)</li> </ul>				
3.2. Are the surroundings secure and safe for the CBT's goods (e.g., security fence in place and intact, presence of hired/contracted security companies' personnel)?				
3.3. Are public notices on customs clearance procedures and processes clearly displayed? If yes, are they written in any of the local languages as well?				
3.4. Is the general physical layout and application of processes designed in line with the existing standard operating procedures in place?				
3.5. Are TIDOs/Information desks/counters visibly in place?				
<b>4. BORDER HYGIENE ASSESSMENT</b>				
4.1. Is tap water available/running?				
4.2. Are the toilets/ablution facilities available? If yes, comment on their cleanliness and suitability for use amidst the pandemic.				
4.3. Are the available toilets/ablution facilities gender-sensitive to women in cross-border trader's needs and requirements?				
4.4. Are the border premises clean and smart?				
4.5. Are points for the travellers to wash hands easily accessible?				
4.6. Are touch-free litter bins/receptacles available? (If yes, please comment on their adequacy and distribution.)				

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4.7. Are there any clear markings to assist with the observance of social distancing?				
4.8. Are there any health workers or their equivalent walking about assisting with monitoring and reminding people to wear their masks, maintain social distancing, etc.?				
4.9. Do border officials put on shields/masks while undertaking their duties?				
4.10. Are the border officials working in halls, offices, clearing counters behind glass screens or related preventative measures?				
Others (Please specify)				



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### Annex 3.3. Border market walk-through observation tool

IN-COUNTRY BORDER MARKET WALK-THROUGH OBSERVATION  
TOOL FOR A RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL  
CROSS-BORDER TRADE

Name of country	
Name of BCP	
Name of researcher	
Date	
Time	

	Yes	No	N/A	Notes
<b>1. IN-COUNTRY MARKETPLACE DETAILS</b>				
1.1. Is the name of the marketplace visibly displayed as you approach it?				
1.2. Is the marketplace secure/fenced right round?				
1.3. Are the COVID-19 guidelines/prevention measures publicly and clearly displayed for all to see?				
1.4. Are the COVID-19 guidelines/prevention measures displayed in English and local languages?				
1.5. COVID-19 emergency contact numbers publicly displayed at the border market				
1.6. Are there designated points of entry/exit into the market by foot?				
1.7. Are there designated points of entry/exit into the market by motor vehicles?				
<b>2. ARE THE FOLLOWING PREVENTION AND CONTAINMENT MEASURES BEING OBSERVED/ PRACTICED AT THE MARKETPLACE? (TICK IF APPLICABLE.)</b>				
2.1. No mask, no entry				
2.2. Compulsory wearing of masks throughout the period one is in the marketplace				
2.3. Compulsory temperature checks before each entry				
2.4. Compulsory hand sanitization before each entry				
2.5. Compulsory production of negative COVID-19 certificate				
2.6. Compulsory foot bathing				
2.7. Compulsory wheel bathing (for those using vehicles to enter the marketplace)				
2.8. Maintenance of social distancing				
2.9. Other COVID-19 sensitization materials displayed publicly at the border market in English				

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2.10. Other COVID-19 sensitization materials displayed publicly at the border market in local languages				
Others (Please specify)				
<b>3. BORDER MARKETPLACE HYGIENE ASSESSMENT</b>				
3.1. Is tap water available/running?				
3.2. Are the toilets/ablution facilities available?				
3.3. If yes, comment on their cleanliness and suitability for use amidst the pandemic.				
3.4. Are there any cleaners on site for periodic rounds of cleaning throughout the day within the marketplace?				
3.5. Are points for the buyers and sellers to wash hands enough and strategically placed?				
3.6. Are touch-free litter bins/receptacles available?				
3.7. If yes, please comment on their adequacy and distribution.				
3.8. Are there any clear markings to assist with the observance of social distancing?				
3.9. Are there any health workers or their equivalent walking about assisting with monitoring and reminding people to wear their masks, maintain social distancing, etc.?				
3.10. Do some people exchange cash for goods? (Comment if people sanitize hands after exchanging cash/goods.)				
3.11. Other observations (Please specify).				

Annex 3.4. Border stakeholder interview questionnaire

BORDER STAKEHOLDERS INTERVIEW QUESTIONNAIRE FOR THE  
RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL  
CROSS-BORDER TRADE

This questionnaire will be used to collect information that will enable the assessment of the following issues in relation to Customs/Revenue authorities during the COVID-19 pandemic.

- (i) Current border and travel restrictions which are in place at the time of the assessment.
- (ii) Border control post (BCP) specific multisectoral action plans/guidelines to support ICBTs within the context of COVID-19 national response.
- (iii) Whether informal cross-border trade (CBT) is taking place at the specific BCP at the time of the assessment. If it is, the volume nature and scale of informal CBT at the time of the assessment.
- (iv) Assess the potential opportunities and feasibility of technological solutions to support ICBTs and ICBTAs.
- (v) Key issues identified by government officials from a policy perspective regarding the issues relevant to the needs of informal cross-border traders (ICBTs).
- (vi) The effect these restrictions on informal CBT and priority needs of ICBTs, assuming that these restrictions are in place.
- (vii) Clear outline of the capacity-building needs at the BCPs, as well as priority health-related infrastructure requirements at BCP in light of COVID-19.
- (viii) Identification of relevant inter-agency and cross-border coordination mechanisms and needs at BCP level.
- (ix) Procedural guidance and training requirements for (health and non-health) front-line border officials to facilitate informal traders.

**CONSENT**

My name is ..... I am a research assistant for an IOM Rapid Situation and Needs Assessment of Informal Cross-Border Trade in [Country]. The aim of this rapid assessment is to gather important information that will inform activities of the IOM project, which aims to contribute towards the enhanced protection of the health and economic rights of ICBTs through the facilitation of continued trade during the COVID-19 pandemic. This interview will take roughly 30 minutes of your time. All the information shared will be confidential, not shared with anyone except to be used in the compilation of the report. You are free to adjourn the interview at any time and also not to answer some of the questions in the questionnaire.

Will you want to participate in the interview?

Y	N
---	---

If no, thank the respondent and adjourn the interview.

## ANNEXES

SECTION A: INTRODUCTION	
1. DETAILS OF THE INTERVIEWEE	
1.1. Name of research assistant in full	
1.2. Date of interview	____ / ____ / ____
2. IDENTIFICATION DETAILS	
2.1. Country (Single response)	
<input type="radio"/> Malawi <input type="radio"/> South Africa <input type="radio"/> Zambia <input type="radio"/> Zimbabwe	
2.2. Border post town (Single response – Cascade)	
<input type="radio"/> Beitbridge <input type="radio"/> Chirundu–Zambia <input type="radio"/> Chirundu–Zimbabwe <input type="radio"/> Mchinji <input type="radio"/> Musina <input type="radio"/> Mwami	

SECTION B: RESPONDENTS' DETAILS		
1. Name of the organization		
2. Representative details	Name	Surname
3. Gender	<input type="radio"/> Female	<input type="radio"/> Male
4. Years of work experience		
5. Position held in the organization		
6. Position of the immediate supervisor/ manager (Where respondent directly reports to within the organization)		

SECTION C
1. COVID-19 OUTBREAK AND THE RESPONSE MEASURES
1.2. At the time of COVID-19 outbreak, how ready was your organization for the pandemic?
<input type="radio"/> Ready and prepared <input type="radio"/> Unready and caught unaware
1.3. If ready and prepared, please specify and give details on the extent of your readiness and preparedness to the pandemic.
1.4. Soon after the COVID-19 outbreak, how were the small-scale cross-border traders (SSCBTs) or ICBTs affected by the national COVID-19 response measures that were put in place by the Government?

REPORT OF THE RAPID SITUATION AND NEEDS ASSESSMENT  
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<p>1.5. In response to the national COVID-19 measures that were adopted, outline any specific action plans or guidelines you did put in place to facilitate and ensure that SSCBTs or ICBTs continued to trade despite the outbreak of the pandemic?</p>
<p>1.6. What challenges did you face in trying to balance between the continuity of informal CBT facilitation and controlling the spread of the pandemic?</p>
<p>2. Is informal CBT and the movement of informal traders currently taking place through this border post?</p>
<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>3. If yes, state the COVID-19 measures or restrictions which are currently in place.</p>
<p>Type of COVID-19 measures or restrictions in place</p> <p>1.</p> <p>2.</p> <p>3.</p> <p>4.</p> <p>5.</p> <p>6.</p> <p>7.</p>
<p>4. If yes (2), what is the nature of the informal CBT? (Tick the applicable.)</p>
<p><input type="radio"/> Border clearance of goods is through manual processes</p> <p><input type="radio"/> Border clearance of goods is through electronic processes</p> <p><input type="radio"/> Importation and exportation of goods may be through illegal routes</p> <p><input type="radio"/> Importation and exportation of goods is through groupage of several informal traders' goods in one mode of transport through the border</p> <p><input type="radio"/> Others (Please specify)</p>
<p>5. If yes (2), how will you rank the current volume and scale of informal CBT through this border post?</p>
<p><input type="radio"/> High volume and large scale</p> <p><input type="radio"/> Low volume and small scale</p>
<p>6. What strategies are you currently implementing to ensure a safe and improved cross-border environment for the movement of the people who are involved in informal CBT?</p>
<p>7. What strategies are you currently implementing to ensure a safe and improved CBT environment for the movement of goods of the informal traders?</p>

<p>8. Do you have any manual processes currently in use in the clearance of movement of people and their goods across the BCP?</p>
<p><input type="radio"/> Yes <input type="radio"/> No</p>
<p>8.1. If yes (8 above), may you list or outline these manual processes currently being implemented.</p>
<p>8.2. Would you say use of technology or automated systems in replacing the above (8.1) manual processes is critical in improving and facilitating continuity of informal CBT amidst the pandemic?</p>
<p><input type="radio"/> Yes <input type="radio"/> No</p>
<p>8.3. If yes (8.2 above), how critical is the use of technology or automated systems in replacing the current manual processes in place?</p>
<p><input type="radio"/> Extremely critical <input type="radio"/> Not critical</p>
<p>8.4. If EXTREMELY CRITICAL (8.3 above), what are the challenges or key issues that are hindering the transformation of all the current manual processes into automated systems?</p>
<p>9. From a policy perspective, what are your recommendations to government or national policymakers that may improve informal CBT trading environment without increasing the risk of contracting or spreading the COVID-19 infection?</p>
<p>10. INFRASTRUCTURE AND OTHER MEASURES AND CONSIDERATIONS</p>
<p>10.1. In the space provided below, recommend your organization's capacity-building needs or requirements in the best interest of promoting and improving informal CBT environment amidst the COVID-19 pandemic.</p>
<p>10.2. What procedural guidance and training requirements for health and non-health front-line border officials can be offered in ways that will improve and facilitate informal CBT amidst the COVID-19 pandemic.</p>
<p>10.3. How will you rate the level of cooperation, information exchange and inter-agency coordination of all government border stakeholders at this border post in response to the impact of the COVID-19 pandemic on ICBTs?</p>
<p><input type="radio"/> Very strong <input type="radio"/> Very weak</p>
<p>10.4. If VERY WEAK (10.4 above):</p>
<p>(a) What could be the causes?</p>

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Causes of weak level of cooperation, information exchange and inter-agency coordination
1.
2.
3.
4.
5.
(b) What strategies or measures can you recommend for adoption and implementation in addressing the above stated causes? (Tick all that apply)
<input type="checkbox"/> Introduction of combined border management system
<input type="checkbox"/> Introduction of single window concept
<input type="checkbox"/> Introduction of One-Stop Border Post Concept (OSBP Concept)
<input type="checkbox"/> Harmonization and coordination of border processes and procedures across the bordering countries
<input type="checkbox"/> Automated systems that at the minimum relate and exchange basic information between the two bordering countries
<input type="checkbox"/> Others (Please specify in the space given below)
1.
2.
3.
4.
5.

### Annex 3.5. Cross-Border Traders Association data collection tool

#### CROSS-BORDER TRADERS' ASSOCIATIONS DATA COLLECTION TOOL FOR A RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE

This questionnaire will be used to collect information that will enable the assessment of the following issues in relation to informal cross-border trade (CBT) during the COVID-19 pandemic.

- (i) Mapping and profiling of Cross-Border Trade Associations (CBTA)/other relevant association.
- (ii) Number of traders registered with CBTA's/other trade-related associations on each side of the border, at the given border control post (BCP) at the time of the assessment.
- (iii) Estimated number of cross-border traders (by gender) registered by CBTA/ relevant other organization in the location of the specific BCP, number of informal cross-border traders (ICBTs) that has benefited from the COVID-19 stimulus packages and recommendations for consideration.
- (iv) Indication as to whether/how informal CBT is being considered by national governments as part of the post-COVID-19 recovery plans, policies and strategies.
- (v) Identification of relevant inter-agency and cross-border coordination mechanisms and needs including at national and BCP level.
- (vi) Impact of COVID-19 on informal CBT including the gender dimensions of the same (CBTA level).

#### CONSENT

My name is ..... I am a research assistant for an IOM Rapid Situation and Needs Assessment of Informal Cross-Border Trade in [Country]. The aim of this rapid assessment is to gather important information that will inform activities of the IOM project, which aims to contribute towards the enhanced protection of the health and economic rights of ICBTs through the facilitation of continued trade during the COVID-19 pandemic. This interview will take roughly 30 minutes of your time. All the information shared will be confidential, not shared with anyone except to be used in the compilation of the report. You are free to adjourn the interview at any time and also not to answer some of the questions in the questionnaire.

Will you want to participate in the interview? 

Y	N
---	---

If no, thank the respondent and adjourn the interview.

#### IDENTIFICATION DETAILS

Country (Single response)	<ul style="list-style-type: none"> <li><input type="radio"/> Malawi</li> <li><input type="radio"/> South Africa</li> <li><input type="radio"/> Zambia</li> <li><input type="radio"/> Zimbabwe</li> </ul>
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REPORT OF THE RAPID SITUATION AND NEEDS ASSESSMENT  
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SECTION A: INTRODUCTION	
<b>1. MAPPING AND PROFILING OF CBTA/OTHER RELEVANT ASSOCIATION: DETAILS OF THE CROSS-BORDER TRADERS' ASSOCIATION</b>	
In the space provided below, please complete the details of your CBTA.	
1.1. CBTA's name	
1.2. CBTA's physical address	
1.3. CBTA's cross-border address (If any)	
1.4. State year in which the CBTA was formed	
1.5. Full name of the representative/interviewee	
1.6. Position held in the association by the representative/interviewee (e.g., spokesperson, administrator)	
1.7. Contact details	
(a) Do you keep and maintain membership register? (Select response)	
<input type="radio"/> Yes <input type="radio"/> No	
If yes, state all the details pertaining to your members that you keep and maintain in your registers apart from payment of subscription fees.	
1.	
2.	
3.	
4.	
5.	
6.	
7.	
If no, what are the challenges?	
1.	
2.	
3.	
4.	
5.	
How do you keep information of your membership? (Tick the appropriate.)	
<input type="radio"/> Manually <input type="radio"/> Electronically <input type="radio"/> Both manually and electronically (Please specifically state information kept manually and electronically in the table below.)	

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Details of information stored and maintained in manual registers
Details of information kept and maintained in electronic form
(b) State all the methods you use to communicate or update your membership on developments in your sector in response to the impact of COVID-19 pandemic.
1.
2.
3.
4.
5.
6.
7.
8.
9.
10.
1.8. Briefly state your operational roles and responsibilities as an association formed out of and for the ICBTs.
1.9. State how your country's national COVID-19 response measures have impacted on your operational roles and responsibilities to your informal CBT membership?

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1.10. State names of border towns in which your CBTA has representatives. (If any, state the border town names only)

---

1.11. How has COVID-19 national response measures adopted by your country impacted on the operations of your CBTA representatives or sub-office located in the BCP town at each BCP? (State the name of the BCP)

(a) Name of BCP (Under this study) .....

Impact on its CBT operations:

---

(b) Name of BCP (Under this study) .....

Impact on its CBT operations:

---

1.12. What platforms or dialogue engagement strategies are you using to influence and engage government/policymakers at national level?

---

1.13. What platforms or dialogue engagement strategies are you using to influence and engage Customs border authorities/their equivalent at organization or border post level?

---

**2. IDENTIFICATION OF RELEVANT INTER-AGENCY AND CROSS-BORDER COORDINATION MECHANISMS AND NEEDS AT CBTA LEVELS**

Relationship with other CBTAs nationally or in other countries or regions

2.1. Do you have any common discussion or meeting platforms with CBTA from other countries which your cross-border traders export to or import from or transit through?	Yes	No
---	-----	----

2.2. If yes, state the names of the respective CBTAs and respective name of countries they are found in the columns provided below.

Name of the CBTA	Country
i.	i.
ii.	ii.
iii.	iii.
iv.	iv.
v.	v.

2.3. To date, have there been any bilateral or regional CBTA meetings (virtual or otherwise) to discuss the impact of respective national COVID-19 policy response measures among the SSCBTs and ICBTs?

Yes	No
-----	----

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2.4. If yes, briefly outline the details of the outcomes or resolutions arrived at.	
2.5. Do you have any common discussion or meeting platforms with other local CBTAs herein? (State name of country, e.g. Zimbabwe.)	
Yes	No
2.6. If yes, state the names of the respective local CBTAs.	i.
	ii.
	iii.
	iv.
	v.
2.7. To date, have there been any local inter-CBTA meetings (virtual or otherwise) to discuss the impact of the country's adopted and implemented national COVID-19 policy response measures on small-scale and informal CBT?	
Yes	No
2.8. If yes, briefly outline the details of the outcomes or resolutions arrived at?	
2.9. In the space provided below, state how the country's COVID-19 national response strategies has impacted and continues to impact on your operations as a specific CBTA at the bilateral or regional CBTA levels.	
2.10. In the space provided below, state any additional comments, information or remarks you would like to make on any of the issues discussed so far.	

## SECTION B: CROSS-BORDER TRADERS ASSOCIATION MEMBERSHIP and COMPOSITION

### 1. MEMBERSHIP COMPOSITION: THE DEMOGRAPHICS OF THE CBTA

Membership composition by gender

1.1. What is the total number of your membership to date? (Please state the number only. If number is estimate, indicate so.)

1.2. What is the total number of women in your association to date? (Please state the number only. If number is estimate, indicate so.)

1.3. What is the total number of men in your association to date? (Please state the number only. If number is estimate, indicate so.)

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2. Membership composition by age group and gender		
Please provide the total numbers of women and men from your CBTA against each age group given below. (If exact numbers are not available, state the estimate numbers and indicate accordingly.)		
Age group	Total number: Women	Total number: Men
<b>Younger than 25 years old</b> (Excluding those who are 25 years old)		
<b>Between 25 and 35 years old</b> (Note: Those who are 25 and 35 years old should be included in this age group.)		
<b>Between 36 and 50 years old</b> (Note: Those who are 36 and 50 years old must be included in this age group.)		
<b>From 51 years old and above</b> (Note: Those who are 51 years old must be included in this age group.)		
3. Membership composition by employment status		
Total number of women	Total number of male	Indicate
		a) A if the figures provided are actual numbers  b) E if the figures provided are estimates
Depending on ICBT only		
Self-employed elsewhere but involved in informal CBT		
Employed formally in the private sector		
Employed formally in the public sector		
SECTION C: PEOPLE'S CROSS-BORDER MOVEMENT AND TRADE PROFILE		
1. Frequently used border posts by gender in (State name of country)		
Using the scale of 1 to 10 (where 1 is the most frequently used border post and 10 is the least frequently used border post), rank your country's border posts using this scale as it applies to women and men cross-border traders accordingly.		
Name of border control post	Frequency of use by women cross-border traders	Frequency of use by men cross-border traders
2. List by names of products commonly traded by women.		

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<p>3. In the space below, list by name the goods that are frequently EXPORTED by ICBTs by gender and the most common countries they are exported to.</p>	
<p>3.1. Name of goods commonly exported by women from [Country name]</p>	<p>Name of countries to which the goods are commonly exported to</p>
<p>Name of goods</p>	<p>Name of destination country</p>
<p>i.</p>	
<p>ii.</p>	
<p>iii.</p>	
<p>iv.</p>	
<p>3.2. Name of goods commonly exported by men from [Country name]</p>	<p>Name of country(s) to which the goods are commonly exported to</p>
<p>Name of goods</p>	<p>Name of destination country</p>
<p>i.</p>	
<p>ii.</p>	
<p>iii.</p>	
<p>iv.</p>	
<p>v.</p>	
<p>3.3. In the space below, list by name the goods that are frequently IMPORTED by ICBTs by gender and the most common countries they are sourced or imported from</p>	
<p>Name of goods commonly imported by women from [Country name]</p>	<p>Name of country(s) from which the goods are commonly imported from</p>
<p>Name of goods</p>	<p>Name of source country</p>
<p>i.</p>	
<p>ii.</p>	
<p>iii.</p>	
<p>iv.</p>	
<p>v.</p>	
<p>3.4. Name of goods commonly imported by men from [Country name]</p>	<p>Name of country(s) from which the goods are commonly imported from</p>
<p>Name of goods</p>	<p>Name of source country</p>
<p>i.</p>	
<p>ii.</p>	
<p>iii.</p>	
<p>iv.</p>	
<p>v.</p>	

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**SECTION D: COVID-19 RESPONSE MEASURES**

**1. Infection prevention and control**

1.1. Are there national-level and BCP-specific multisectorial action plans/guidelines to support ICBTs within the context of COVID-19 national response that you are aware of (Example: COVID-19 National Stimulus Packages)? (Single response)	Y	N
1.2. If yes (1.1), kindly describe them, if possible citing examples? (Single response – Cascade)		
1.3. Are the facilities outlined in 1.2 above practically in place and adequately operational at the BCPs?		

**IMPACT OF COVID-19 INFORMAL CROSS-BORDER TRADE INCLUDING THE GENDER DIMENSION OF THE SAME**

**2. Impact of national COVID-19 response measures on small-scale and informal CBT in [Country]**

Instruction: In the space provided below, state the challenges being faced by CBT because of the country's adopted and implemented COVID-19 national response measures at the following levels.

- (a) At the BCP level (Examples: ban of people movement, ban of movement of non-essential goods)

In view of the challenges outline in 2(a) above, what are your recommendations?

- (b) Highway and transport logistics level (Examples: high transport costs, ICBTs are charged by private, public and commercial trucks to move their export and import goods)

In view of the challenges outlined in 2(b) above, what are your recommendations?

- (c) Financial inclusion of small-scale and informal CBT level (Example: accessibility to bank loans, insurance companies, money lenders, etc., especially for women cross-border traders)

In view of the challenges outlined in 2(c) above, what are your recommendations?

- (d) Small-scale and informal CBT business and economic welfare level (Examples: SSCBT and CBT's business turnover; client base etc. during this pandemic)

In view of the challenges outlined in 2(d) above, what are your recommendations?

- (e) Family responsibilities and social welfare (Examples: survival means, sustainability of extended family responsibilities, payment affordability of monthly rentals and rates)

In view of the challenges outlined in 2(e) above, what are your recommendations?

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<p>(f) Cost of compliance and health welfare (Examples: impact of cost of COVID-19 testing, period of validity of the certificate, accessibility of PPEs including sanitizers and masks on SSCBTs and CBTs)</p>	
<p>In view of the challenges outlined in 2(f) above, what are your recommendations?</p>	
<p>(g) Government/National policy level</p>	
<p>In view of the challenges outlined in 2(g) above, what are your recommendations?</p>	
<p><b>3. Indications as to whether/how informal CBT is being considered by the National Government as part of the post-COVID-19 recovery plans and strategies</b></p>	
<p>(a) Are there any policy indications to the effect that ICBTs and SSCBT are being considered by the Government under its post-COVID-19 recovery and strategies?</p>	
<p>Yes</p>	<p>No</p>
<p>(b) If yes, briefly outline these positive indications in the space provided below.</p>	
<p>(c) Use the space provided below to state any other additional comments or recommendations that you would like to make for consideration by the national policymakers.</p>	
<p><b>4. What policy reforms to improve and keep the informal CBT operational amidst the pandemic now and going into the future will you recommend for immediate government consideration?</b></p>	
<p>Name of</p> <p>(a) Country.....</p> <p>(b) Recommendations</p>	
<p><b>5. What administrative, procedural and border processing reforms that will improve and keep the informal CBT operational amidst the pandemic now and going into the future will you recommend for immediate border authorities' consideration?</b></p>	
<p>(a) Name of BCP.....</p> <p>(b) Recommendations</p> <p>(c) Name of BCP.....</p> <p>(d) Recommendations</p>	
<p><b>6. Any other contribution you might want to make that may have not been covered in this discussion which is in the best interest of improving and maintaining informal CBT operational amidst the pandemic now and in the future.</b></p>	



### Annex 3.6. National stakeholders: Ministry of Industry and Commerce interview questionnaire

#### NATIONAL STAKEHOLDERS: MINISTRY OF INDUSTRY AND COMMERCE INTERVIEW QUESTIONNAIRE FOR THE RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE IN ZIMBABWE

This questionnaire will be used to collect information that will enable the assessment of the informal cross-border trade (CBT) during the COVID-19 pandemic in Zimbabwe.

#### CONSENT

My name is ..... I am a researcher for an IOM Rapid Situation and Needs Assessment of Informal Cross-Border Trade in [Country]. The aim of this rapid assessment is to gather important information that will inform activities of the IOM project, which aims to contribute towards the enhanced protection of the health and economic rights of informal cross-border traders (ICBTs) through the facilitation of continued trade during the COVID-19 pandemic. This interview will take roughly 10–15 minutes of your time. All the information shared will be confidential, not shared with anyone except to be used in the compilation of the report. You are free to adjourn the interview at any time and also not to answer some of the questions in the questionnaire.

#### SECTION A: INTRODUCTION

Date of interview \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

#### SECTION B: RESPONDENT'S DETAILS

1. Name of the ministry/organization/etc.		
2. Representative details	Name	Surname
3. Gender	<input type="radio"/> Female	<input type="radio"/> Male
4. Years of work experience		
5. Position held in the ministry		
6. Position of the immediate supervisor/manager (Where respondent directly reports to within the organization)		

#### SECTION C:

7. May you briefly give an outline or walk-through of the roles or responsibilities and functions of your department/organization/ministry etc. in the context of the COVID-19 pandemic.

8. In the Southern African Development Community (SADC), informal cross-border trade (CBT) is significant, accounting for between 30–40 per cent of total intra-SADC trade, with an estimated value of USD 17.6 billion. May you outline the economic importance and the role of informal CBT in Zimbabwe's economy. (Include statistics in your response if available.)

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<p>9. (a) At the time of the COVID-19 outbreak, how ready and prepared was the ministry for the pandemic? (If others, please give details in the space below.)</p>	<ul style="list-style-type: none"> <li>o Ready and prepared</li> <li>o Unready and caught unaware</li> <li>o Others (Please specify)</li> </ul>
<p>9. (b) If ready and prepared, please outline the specific details on the extent of your readiness and preparedness or prior response strategies to the outbreak of the pandemic in the country.</p>	
<p>10. Soon after the COVID-19 pandemic outbreak in this country, the Government immediately responded by adopting and implementing national COVID-19 response measures. Which of these national policy response measures would you say impacted directly on the informal cross-border or small-scale cross-border traders as a sector and how?</p>	
<p>11. What was the Government's intention or aim in coming up with the above policy measures you have just outlined (if any)?</p>	
<p>12. Subsequently, what measures or strategies or policy consideration were put in place to specifically cushion or assist informal CBT in the interim, if any? Please give details.</p>	
<p>13. How have these measures or strategies or policy consideration ultimately benefited or assisted informal CBT as a sector? Please give details.</p>	
<p>14. Compared to their male counterparts, women in cross-border trade (WICBT) are more vulnerable; they face time and mobility constraints due to family obligations. What gender-sensitive national policy measures or action plans have been or are being put in place to assist WICBT from the Ministry of Industry and Commerce's angle amidst the COVID-19 pandemic?</p>	
<p>15. How has regional COVID-19 agreements and guidelines (for examples, SADC and COMESA) on ICBTs and informal cross-border traders associations influenced the extent to which Government is or will facilitate resumption of safe small-scale CBT amidst the pandemic?</p>	
<p>16. What indications are there today to the effect that informal CBT as an economic sector is being considered by the ministry or Government under the post-COVID-19 recovery plans, policies and strategies? Please give details.</p>	

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17. During the field visits to the BCPs, some of the key issues identified by government border stakeholder officials for improving informal CBT environment included use of technology to automate existing manual systems and infrastructural development of the border premises. What role is being played or what role can be played by the ministry to influence towards automation of majority of the current manual border processes at Chirundu and Beitbridge?

18. (a) Malawi, Zambia, Zimbabwe and South Africa are all active SADC member States. COVID-19 Regional SADC Guidelines equally apply to these countries. From the ministry's regional engagements, are there any specific bilateral or regional efforts put in place towards cross-border coordination mechanisms in the best interest of creating and promoting a safe cross-border trading environment for ICBTs? (Please give details, if any)

(b) If none, what would you say are the challenges?

(ii) Please suggest any ways how these challenges may be redressed.

(c) In your view, what policy recommendations would you proffer to improve CBT for ICBTs during the current COVID-19 pandemic at the following levels?

(i) National level (Please include gender-specific recommendations with respect to WICBTs' needs or requirements or expectations).

(ii) Border control post level (Please include gender-specific recommendations with respect to WICBTs' needs, requirements or expectations).

(iii) Marketplace level (Please include gender-specific recommendations with respect to WICBTs' needs, requirements or expectations).

### Annex 3.7. National stakeholders: Ministry of Women Affairs interview questionnaire

#### NATIONAL STAKEHOLDERS: MINISTRY OF WOMEN AFFAIRS INTERVIEW QUESTIONNAIRE FOR THE RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE IN ZIMBABWE

This questionnaire will be used to collect information that will enable the assessment of the following issues in relation to Customs/Revenue authorities during the COVID-19 pandemic.

#### CONSENT

My name is..... I am a researcher for an IOM Rapid Situation and Needs Assessment of Informal Cross-Border Trade in [Country]. The aim of this rapid assessment is to gather important information that will inform activities of the IOM project, which aims to contribute towards the enhanced protection of the health and economic rights of informal cross-border traders (ICBTs) through the facilitation of continued trade during the COVID-19 pandemic. This interview will take roughly 10–15 minutes of your time. All the information shared will be confidential, not shared with anyone except to be used in the compilation of the report. You are free to adjourn the interview at any time and also not to answer some of the questions in the questionnaire.

#### SECTION A: INTRODUCTION

Date of interview \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

#### SECTION B: RESPONDENT'S DETAILS

1. Name of the ministry/organization/etc.		
2. Representative details	Name	Surname
3. Gender	<input type="radio"/> Female	<input type="radio"/> Male
4. Years of work experience		
5. Position held in the ministry		
6. Position of the immediate supervisor/ manager (Where respondent directly reports to within the organization)		

#### SECTION C:

7. May you briefly give an outline or walk-through of the roles or responsibilities and functions of your department/organization/ministry etc. in the context of the COVID-19 pandemic.
8. In the Southern African Development Community (SADC), informal cross-border trade (CBT) is significant, accounting for between 30–40 per cent of total intra-SADC trade, with an estimated value of USD 17.6 billion and women make up approximately 70 per cent of these ICBTs. In the context of your ministry, please outline the role or importance and contributions of women in cross-border trade (WICBTs) in the economy of Zimbabwe. (Include statistics in your response if available.)

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9. Prior to the COVID-19 outbreak in Zimbabwe, what would you say were the major challenges faced by small-scale cross-border traders (SSCBTs) or ICBTs?
10. Soon after the COVID-19 pandemic outbreak in this country, the Government immediately responded by adopting and implementing national COVID-19 response measures. How did these response measures specifically affect small-scale cross-border traders (SSCBTs) and WICBTs?
11. In your view, what was the Government's intention or aim in coming up with the above policy measures you have just outlined (if any)?
12. Subsequently, what measures or strategies or policy consideration have the ministry or the Government put in place to specifically cushion WICBTs amidst the pandemic? (Please give details, if any.)
13. How have these measures or strategies or policy consideration ultimately benefited or assisted WICBTs? (Please give details that include number of women that benefited and what they actually benefited.)
14. Would you say there is any gender and COVID-19 management policy or guidelines or action plans in Zimbabwe within the context of small-scale CBT or informal CBT at the:
- (a) National level (If so, please give details.)
  
  - (b) Border post level (If so, please give details.)
15. Compared to their male counterparts, WICBTs are more vulnerable; they face time and mobility constraints due to family obligations. From the position of the ministry, what policy measures or action plans have been or are being put in place to specifically redress these specific gender imbalances so as to cater for the safe and continued trading by WICBTs amidst the pandemic at the:
- (a) National level?
  
  - (b) Border control post level?

## ANNEXES

16. Majority of SSCBTs and ICBTs, particularly WICBTs are said to be generally ignorant about their rights and as a result are taken advantage of at most borders as they cross, import or export. What strategies or measures have the ministry or Government taken to redress this? (Include measures that have been taken to redress this in the past, if any.)
17. What indications are there today to the effect that informal CBT as an economic sector dominated by women traders is being considered by the ministry or Government under the post-COVID-19 recovery plans, policies and strategies? (Please give details.)
18. During the recent field visits to Chirundu and Beitbridge border posts, some of the key issues identified by both Border Stakeholders and WICBTs was the inadequacy or lack of gender sensitive facilities to women's needs and requirements (for example ablution/toilet facilities) while within the border premises. What plans are in place or what may the Ministry do to assist in the redressing of these issues in view of the current pandemic?
19. (a) Malawi, Zambia, Zimbabwe and South Africa are all active SADC Member States. COVID-19 Regional SADC Guidelines equally apply to these countries. From the ministry's regional engagements, are there any specific bilateral or regional efforts put in place towards cross-border coordination mechanisms in the best interest of creating and promoting a safe cross-border trading environment for ICBTs? (Please give details, if any)
- (b) If none, what would you say are the challenges?
- (i) Please suggest any ways how these challenges may be redressed.
20. In your view, what policy recommendations would you proffer to improve cross-border trade for ICBTs during the current COVID-19 pandemic at the following levels?
- (a) National level (Please include gender-specific recommendations with respect to WICBTs' needs or requirements or expectations)
- (b) Border control post level (Please include gender-specific recommendations with respect to WICBTs' needs, requirements or expectations)
- (c) Border towns flea marketplace level (Please include gender-specific recommendations with respect to WICBTs' needs, requirements or expectations)

### Annex 3.8. National stakeholders: Ministry of Social Development interview questionnaire

#### NATIONAL STAKEHOLDERS: MINISTRY OF SOCIAL DEVELOPMENT INTERVIEW QUESTIONNAIRE FOR THE RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE IN ZIMBABWE

This questionnaire will be used to collect information that will enable the IOM rapid assessment of the various issues in relation to the anticipated safe continuity of informal CBT in Zimbabwe amidst the COVID-19 pandemic.

#### CONSENT

My name is..... I am a researcher for an IOM Rapid Situation and Needs Assessment of Informal Cross-Border Trade in [Country]. The aim of this rapid assessment is to gather important information that will inform activities of the IOM project, which aims to contribute towards the enhanced protection of the health and economic rights of informal cross-border traders (ICBTs) through the facilitation of continued trade during the COVID-19 pandemic. This interview will take roughly 10–15 minutes of your time. All the information shared will be confidential, not shared with anyone except to be used in the compilation of the report. You are free to adjourn the interview at any time and also not to answer some of the questions in the questionnaire.

#### SECTION A: INTRODUCTION

Date of interview \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

#### SECTION B: RESPONDENT'S DETAILS

1. Name of the ministry/organization/etc.		
2. Representative details	Name	Surname
3. Gender	<input type="radio"/> Female	<input type="radio"/> Male
4. Years of work experience		
5. Position held in the ministry		
6. Position of the immediate supervisor/ manager (Where respondent directly reports to within the organization)		

#### SECTION C:

7. May you give a detailed outline or walk-through of the roles or responsibilities and functions of your department/organization/ministry etc. in the context of the COVID-19 pandemic.
- 
8. Prior to the outbreak of COVID-19 in Zimbabwe:
- (a) What measures or strategies or action plans were put in place in preparation and anticipation of the outbreak of the pandemic at:
    - (i) Beitbridge border post

(ii) Chirundu one-stop border post

(b) At the end and in your view, how effective were these measures?

9. May you:

(a) Briefly outline how COVID-19 is being managed or handled in terms of the distribution of the testing laboratories, quarantine facilities and testing facilities with specific reference to Beitbridge and Chirundu border posts/border towns.

(b) With reference to your responses above, what are the specific challenges being faced in this regard at:

(i) Beitbridge border post or town? (Please give details of the challenges.)

(ii) Chirundu one-stop border post or town? (Please give details of the challenges.)

(c) In your opinion, how may these challenges be differently and effectively addressed?

10. Beitbridge and Chirundu are the busiest ports of entry due to high numbers of people including local ICBTs who frequently cross them for their basic survival and livelihood. From the time COVID-19 broke out in Zimbabwe up to date, what do your statistics say about the incidences of COVID-19 at or through:

(a) Beitbridge border post? (If actual numbers are not available, please provide estimates in terms of total number of cases handled.)

(b) Chirundu one-stop border post? (If actual numbers not available, please provide estimates in terms of number of cases handled.)

(c) How exactly are you coping under the given prevailing circumstances? (Give details.)

11. Government has just re-banned informal CBT (among other new policy measures) due to increasing numbers of recorded COVID-19 cases. In your view, what possible strategies or action plans may you recommend to Zimbabwe, Zambia and South Africa policymakers – from a social welfare's point of view – which will allow safe continuity of informal CBT but without compromising the safety of the people's health in the process?



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12. From a social development and health perspective, COVID-19 is real, deadly and destructive. On the other hand, ICBTs especially women traders, rely heavily on CBT for their basic livelihood. What long-term plans, strategies or action plans are available or if not available can be put together to ensure that a break-even point is achieved in the future given that COVID-19 may be with us now and into the medium- to long-term future?

13. Would you say the COVID-19 management approaches take into consideration gender-related issues starting from the national level to the border control post level.

(a) National level (Please give details.)

(b) Border control post level (Please give details.)

### Annex 3.9. National stakeholders: Ministry of Health and Child Care interview questionnaire

#### NATIONAL STAKEHOLDERS: MINISTRY OF HEALTH AND CHILD CARE INTERVIEW QUESTIONNAIRE FOR THE RAPID SITUATION AND NEEDS ASSESSMENT OF INFORMAL CROSS-BORDER TRADE IN ZIMBABWE

This questionnaire will be used to collect information that will enable the IOM rapid assessment of the various issues in relation to the anticipated safe continuity of informal cross-border trade (CBT) in Zimbabwe amidst the COVID-19 pandemic.

#### CONSENT

My name is..... I am a researcher for an IOM Rapid Situation and Needs Assessment of Informal Cross-Border Trade in [Country]. The aim of this rapid assessment is to gather important information that will inform activities of the IOM project, which aims to contribute towards the enhanced protection of the health and economic rights of informal cross-border traders (ICBTs) through the facilitation of continued trade during the COVID-19 pandemic. This interview will take roughly 10–15 minutes of your time. All the information shared will be confidential, not shared with anyone except to be used in the compilation of the report. You are free to adjourn the interview at any time and also not to answer some of the questions in the questionnaire.

#### SECTION A: INTRODUCTION

Date of interview \_\_\_\_\_ / \_\_\_\_\_ / \_\_\_\_\_

#### SECTION B: RESPONDENT'S DETAILS

1. Name of the ministry/organization/etc.		
2. Representative details	Name	Surname
3. Gender	<input type="radio"/> Female	<input type="radio"/> Male
4. Years of work experience		
5. Position held in the ministry		
6. Position of the immediate supervisor/manager (Where respondent directly reports to within the organization)		

#### SECTION C:

7. May you give a detailed outline or walk-through of the roles or responsibilities and functions of your department/organization/ministry etc., in the context of the COVID-19 pandemic?

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8. Prior to the outbreak of COVID-19 in Zimbabwe:

(a) What policy measures or strategies were put in place by the ministry or Government in preparation and anticipation of the pandemic?

(b) In your view, how effective were these? (Please include specific details.)

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9. From the Ministry of Health's service provision:

(a) May you briefly outline how COVID-19 is being managed in terms of the distribution of the testing laboratories, quarantine centres and testing facilities with specific reference to Beitbridge and Chirundu border towns or border posts.

(b) What challenges is the ministry facing in this regard?

(c) In your opinion, how may these challenges be resolved?

10. Beitbridge and Chirundu are the busiest ports of entry due to high numbers of people including local ICBTs who frequently cross them for their basic survival and livelihood. From the time COVID-19 broke out in Zimbabwe up to date, what do statistics say about the incidences of COVID-19 at or through:

(a) Beitbridge border post? (If actual numbers are not available, please provide estimates in terms of total number of cases recorded to date, total numbers recovered, number of people who has died, etc.)

(b) Chirundu one-stop border post? (If actual numbers are not available, please provide estimates in terms of total number of cases recorded to date, total numbers recovered, number of people who has died, etc.)

11. The Government has just re-banned informal CBT (among other new policy measures) due to increasing numbers of recorded COVID-19 cases. In your view, what possible strategies or action plans may you recommend to Zimbabwe, Zambia and South Africa policymakers – from the Ministry of Health's point of view – which will allow safe continuity of informal CBT but without compromising the safety of the people health in the process?

12. From the health perspective, COVID-19 is real, deadly and destructive. On the other hand, ICBTs, especially women traders, rely heavily on CBT for their basic livelihood. What long-term plans, strategies or policies are available or are being put together to ensure that a break-even point is achieved in the future given that COVID-19 may persist into the medium to long term?

13. What measures or strategies or policy consideration or actions plans have the ministry or the Government put in place to specifically cushion or assist women in cross-border trade amidst the pandemic? (Please explain in detail, if any.)

14. Would you say the ministry's COVID-19 management approaches take into consideration gender-related issues at:

(a) The national level? (Please give details.)

(b) Border control post level? (Please give details.)

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