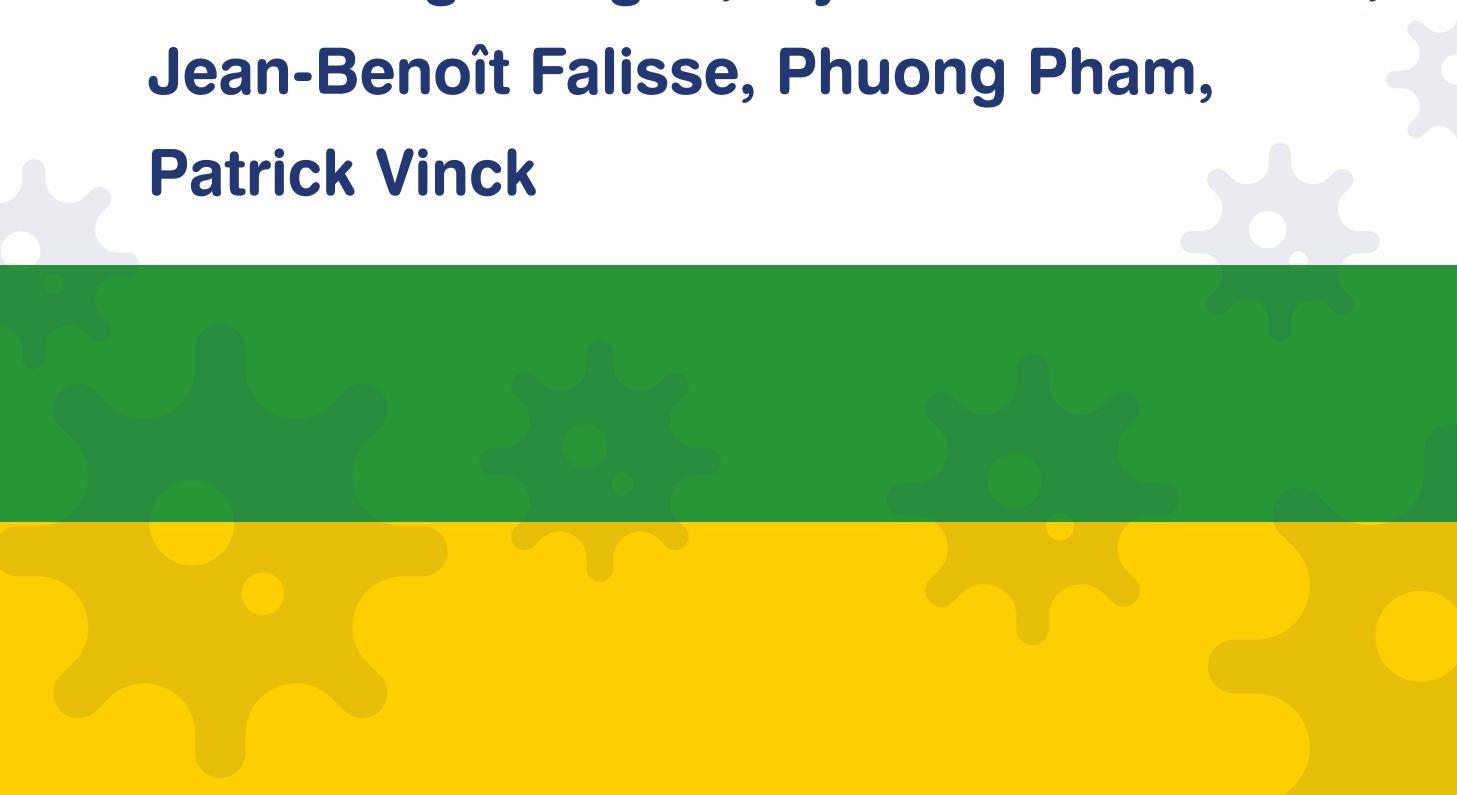




COVID-19 and Central African Republic's Elections

Alain-Serge Magbe, Mychelle Balthazard,
Jean-Benoît Falisse, Phuong Pham,
Patrick Vinck



About the Working Paper

This working paper was written as part of the 'African Elections during the COVID-19 Pandemic' project led by the University of Edinburgh's Centre of African Studies. The election in the Central African Republic (CAR) is one of three elections during the COVID-19 pandemic that have been followed by the project to examine risk mitigation, the effects on political participation, and epidemic spread.¹

Research on COVID-19 and the 2020 elections in CAR was led by the Central African non-governmental organization Echelle, which supports local development initiatives through research, training, and project implementation. The Harvard Humanitarian Initiative at Harvard University and Brigham and Women's Physicians Organization, and the University of Edinburgh's Centre of African Studies collaborated with Echelle on this research.

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Sources and Data

This working paper is based on a convergent design combining multiple data sources collected over a 9-month period between June 2020 and March 2021. The four main components include:

- **Media and political/official statement monitoring:** the research team systematically reviewed publicly available documents (e.g. press releases, media articles, official communiqués) mentioning COVID-19 and/or the 2020 elections to identify events, trends and developments over time.
- **Key informant interviews:** at various points during the electoral cycle, the research team conducted interviews with a cross-section of officials engaged in organizing the election. On election day, the researchers consulted 380 voters of different age groups, gender, and backgrounds, as well as 175 people involved in the organization of the elections. This later group comprised of national and international observers (89 in total), as well as members of civil society, and agents working for the Agence nationale des elections (National Elections Authority – ANE), including polling clerks and presiding officers.
- **Population-based survey:** This working paper draws on data from a nationwide population-survey implemented by Echelle and the Harvard Humanitarian Initiative with support of UNDP. A total of 5,297 interviews were conducted with randomly selected adult residents of CAR between November 23 and December 25, 2020. Detailed information about the sample is available separately.²
- **Field Observations:** The research team conducted field observations at polling stations to examine behaviours and protective practices in relation to COVID-19. On election days (December 27, 2020 and March 14, 2021), field observations were limited to 24 polling stations in the capital Bangui and its immediate periphery.

1. Separate working papers on COVID-19 and 2020 elections in Tanzania and Ghana are available at <https://aecp.sps.ed.ac.uk/>

2. Vinck P, Balthazard M, Magbe AS, Pham PN. Peace, Justice and Security Polls, Report 6. (2021 - forthcoming). Harvard Humanitarian Initiative, United Nations Development Program

Overview: COVID-19 in the Central African Republic and the 2020 Elections

The Central African Republic Minister of Public Health and Population³ confirmed the first case of COVID-19 on March 14, 2020.⁴ The country, which in recent years had already started preparing for other epidemics such as the Ebola virus disease,⁵ had prepared for the likely outbreak of COVID-19 for several months, adopting four key pillars for its response:

- **Coordination:** Before the first case, the Ministry of Public Health (MoPH) established a coordination mechanism with key stakeholders such as the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), the Institute Pasteur de Bangui, and the United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic (MINUSCA).⁶ Following the outbreak declaration, the government established three complementary coordination committees (at the executive, technical, and strategic levels)⁷ to develop and implement the national response to COVID-19.⁸ These coordination committees are still in operation as of March 2021.
- **Communication:** Before the outbreak was declared, the MoPH and WHO started to give weekly joint press conferences on the COVID situation and protective measures. They appeared on radio and TV shows, distributed posters on protective measures, and provided daily updates on social media starting in March 2020. Communication has intensified since the outbreak was declared.
- **Surveillance:** While surveillance is a pillar of the response to COVID-19, testing has been limited. It mostly consists of mandatory testing at points of entry and voluntary testing elsewhere, depending on availability and accessibility. Surveillance and testing outside of Bangui is limited.
- **Case management:** Efforts were made to train and equip health professionals to manage COVID-19 cases, particularly during the recorded peak of the pandemic between May and June 2020. These efforts, however, have been largely limited to the capital Bangui, where a government treatment unit was set up in June 2020⁹ and other centres were opened by different organizations.¹⁰ At the same time, contact tracing has been implemented, with exposed people, contacts and suspected cases being put in quarantine and confinement for 14 to 21 days.¹¹

In addition to the above pillars, several non-medical interventions such as partial lockdowns and travel restrictions have been used to control the epidemic. By March 27, 2020, two weeks after the first case was reported, the country had gone into full lockdown, limiting air traffic and movement between prefectures (CAR's first tier administrative territorial units),¹² closing schools and setting limits to the number of people allowed to meet. The country gradually re-opened starting in July 2020.

There have been several challenges to the COVID-19 response. The country is facing important and repeated internal displacement that complicate public health interventions, and it has had to manage ongoing epidemics of other diseases

3. In this report, the Minister or Ministry of Public Health and Population is also referred to as the Minister or Ministry of Public Health or MoPH.

4. Rapport de Situation no.1 Epidemie du COVID-19 en Republique Centrafricaine, 15/03/2020, at <https://www.afro.who.int/fr/publications/covid-19-en-rca-rapports-de-situation>

5. World Health Organization, Central African Crisis, at <https://www.who.int/emergencies/crises/caf/en/>

6. Rapport de Situation no.1 Epidemie du COVID-19 en Republique Centrafricaine, 15/03/2020

7. The Crisis Committee, chaired by the President, a Technical committee, headed by the Prime Minister, and a Strategy and Method Committee, led by the Minister of Health.

8. UNICEF, Central African Republic, Coronavirus(COVID-19), Situation report, no. 10, November – December 2020, at <https://reliefweb.int/sites/reliefweb.int/files/resources/UNICEF%20Central%20African%20Republic%20COVID-19%20Situation%20Report%20No.%2010%20-%20November%20-%20December%202020.pdf>

9. CNC, les travaux démarrent pour un nouveau centre de traitement COVID-19 à Bangui dédié à la prise en charge des patients avec des formes sévères de la maladie, at <https://corbeaunews-centrafrrique.com/les-travaux-demarrent-pour-un-nouveau-centre-de-traitement-covid-19-a-bangui-dedie-a-la-prise-en-charge-des-patients-avec-des-formes-severes-de-la-maladie/>

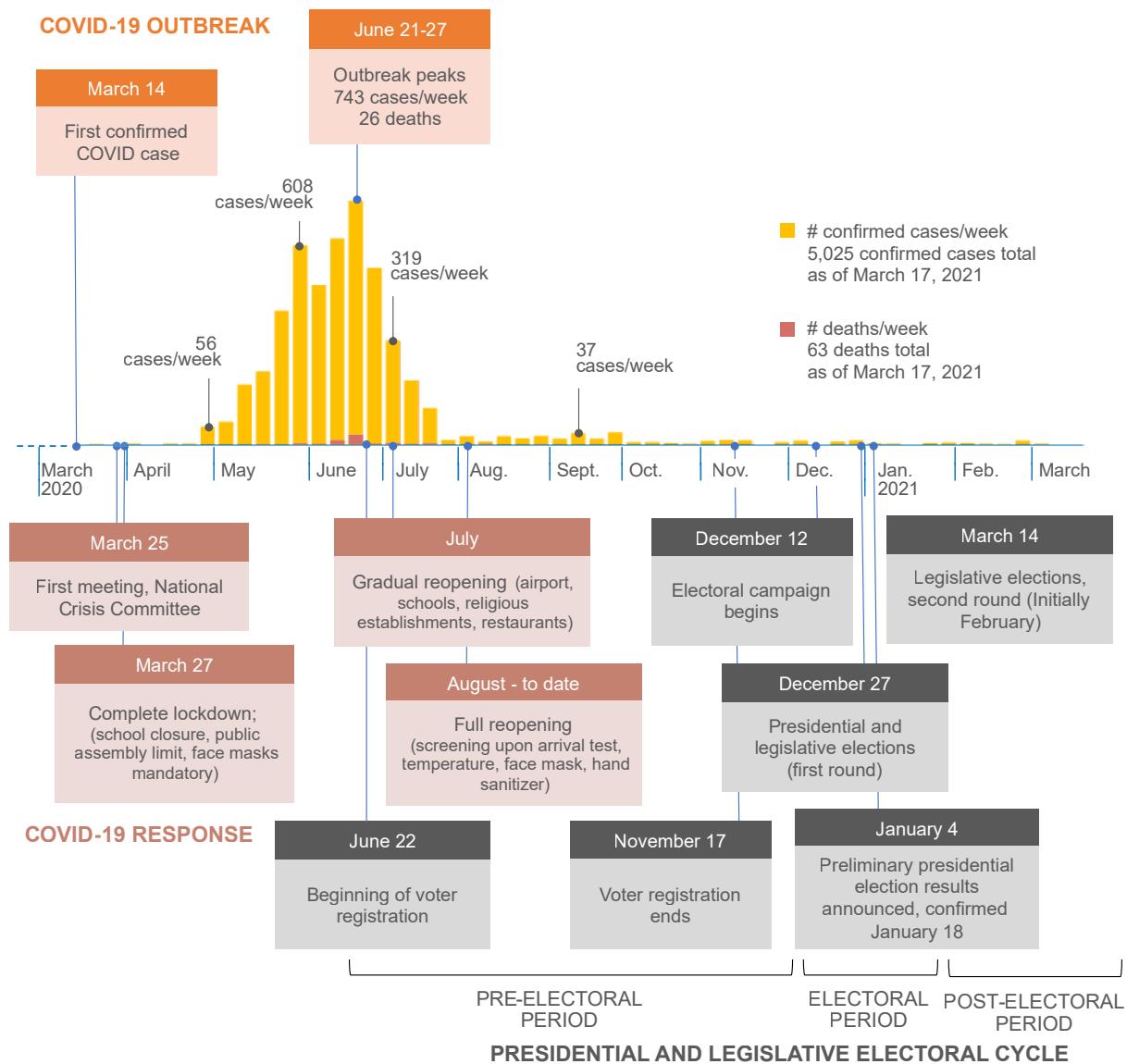
10. Rapport de Situation no.3 Epidemie du COVID-19 en Republique Centrafricaine, 29/03/2020, at <https://www.afro.who.int/fr/publications/covid-19-en-rca-rapports-de-situation>

11. Prise de Note d'instruction n°069/PM/DIRCAB.20 du 1er Ministre au Ministre de la Sante et de la Population; Rapport de Situation no.2 Epidemie du COVID-19 en Republique Centrafricaine, 21/03/2020, at <https://www.afro.who.int/fr/publications/covid-19-en-rca-rapports-de-situation>

12. This included restrictions of movement between Bangui, the capital, and the prefectures, as well as between prefectures.

– including a measles epidemic in January–April 2020.¹³ Other typical measures against COVID-19 such as travel restrictions are complicated to implement due to the porosity of CAR's borders and the fact that the landlocked country relies heavily on the commercial corridor with Cameroon for essential goods. Last but not least, the country's fragile health system is very limited in its ability to screen, test and manage cases, especially outside of the capital.¹⁴ Nevertheless, and according to available data, as of March 2021, mortality and morbidity have remained relatively low in CAR.¹⁵ By June 2020, the outbreak had peaked with about 700 confirmed cases a week. Since October 2020, the number of confirmed cases has been fewer than 20 a week. As of March 17, 2021, there had been a total of 5,025 confirmed cases and 63 deaths.¹⁶ Considering that testing and access to health care facilities are limited, the real extent of the pandemic is probably only partially known.¹⁷

Figure 1: COVID-19 and the Electoral Cycle



13. Organization mondiale de la santé, République centrafricaine, Rougeole en RCA : le Ministère de la Santé et de la Population déclare une épidémie de portée nationale, at <https://www.afro.who.int/fr/news/rougeole-en-rca-le-ministere-de-la-sante-et-de-la-population-declare-une-epidemie-de-portee>

14. Rapport de Situation no.4 Epidemie du COVID-19 en Republique Centrafricaine, 06/04/2020, at <https://www.afro.who.int/fr/publications/covid-19-en-rca-rapports-de-situation>

15. The larger context of COVID-19 in Africa has been addressed in the companion working paper on Tanzania: Victoria Lihiru, Robert Macdonald and Thomas Molony, COVID-19 and Tanzania's 2020 Elections (2021), African Elections during the COVID-19 Pandemic project working paper, <https://aecd.sps.ed.ac.uk/wp-content/uploads/2021/02/COVID-19-and-Tanzanias-2020-Elections.pdf>

16. There are some discrepancies between estimates, ranging from 5,025 (Johns Hopkins) to 5,064 (WHO) confirmed cases. We used the more conservative estimates here.

17. UNICEF, Central African Republic, Coronavirus(COVID-19), Situation report, no. 10, November – December 2020

While CAR was responding to COVID-19, it was also preparing for its 2020 presidential and legislative elections (see Figure 1). The first COVID-19 cases were announced over nine months prior to the scheduled elections, and, by the end of July, the outbreak was largely limited to fewer than 40 confirmed cases per week. Nevertheless, the peak of the outbreak coincided with the beginning of the challenging and sensitive voter registration process.

This working paper examines more closely how the COVID-19 outbreak and the 2020 electoral process interacted. It is structured along the three main phases of the electoral cycle, with an emphasis on December 27, 2020, the election day.

COVID-19 in the pre-electoral period

The most visible, public-facing aspect of the so-called 'pre-electoral' period, and likely the most sensitive in terms of spreading COVID-19, is the registration of voters. This section discusses election planning and organization (including training of key staff), with a special attention to voter registration.

When voter registration started on 22 June, the country had been under severe restrictions for almost three months. On 27 March, the government had announced drastic containment measures, including border closures, the closure of all educational establishments,¹⁸ restrictions on public gatherings (which were limited to 15 people or the immediate family in cases of religious ceremonies, marriages, or mourning).¹⁹ Bars and drinking establishments were closed. Restaurants, grocery, shops owners were enrolled to develop and implement health measures.²⁰ At the same time, there were efforts to disseminate information to the population on protective measures through the media, and in a massive campaign using posters, banners, paintings, pamphlets, and videos.

Hand washing stations were installed in Bangui, in major urban centres and in some rural areas. Face coverings, liquid soap, and hand sanitizers were distributed.²¹ Community teams and volunteers were trained to disseminate information on protective measures at the community level, both in Bangui and elsewhere. A free emergency and information hotline was put in place.²² In general, the messages reinforced protective measures such as hand washing, coughing into your bent elbow, using disposable handkerchief, not shaking hands, and wearing face coverings, and also addressed rumours and stigmatization which had notably been directed towards foreigners and white people.²³ To help counteract misinformation, the MoPH issued a code of conduct for reporting on the outbreak, and trained journalists.²⁴ The MoPH further enrolled local administrative authorities, religious leaders and several community groups to institute local crisis committees and to inform the population.²⁵

Despite these efforts, the country would see a peak in the number of COVID-19 cases on the week commencing 21 June. It is also during that week that voter registration started, a process that can potentially contribute to spreading the epidemic. However, just a couple of weeks later, and as the number of cases was going down, the country gradually reopened. Air traffic resumed with some restrictions on international arrivals (negative COVID test, temperature checks, obligation to wear a mask in public, and quarantine of 7 days, if needed). Domestically, some protective measures were kept in place, with a

18. Prise de Note d'instruction n°070/PM/DIRCAB.20 du 1^{er} Ministre au Ministre de l'Enseignement Primaire et Secondaire, de l'Enseignement Supérieur, de l'Enseignement Technique et de l'Alphabétisation

19. Prise de Note d'instruction n°067/PM/DIRCAB.20 du 1^{er} Ministre, au Ministre de l'Intérieur chargé de la Sécurité Publique ; Prise de Note d'instruction n°068/PM/DIRCAB.20 du 1er Ministre au Ministre de l'Administration du Territoire et de la Décentralisation

20. Prise de Note d'instruction n°062/PM/DIRCAB.20 du 1^{er} Ministre au Ministère du Commerce et de l'Industrie, and Prise de Note d'instruction n°071/PM/DIRCAB.20 du 1er Ministre au Ministre des Arts, de la Culture et du Tourisme

21. European Commission, En république Centrafricaine, l'UE s'engage contre le COVID-19, at https://ec.europa.eu/international-partnerships/stories/en-republique-centrafricaine-lue-sengage-contre-le-covid-19_en

22. The Ministry of Public Health has produced different reports on the COVID-19 situation. Those are available, at <https://www.afro.who.int/fr/publications/covid-19-en-rca-rapports-de-situation>

23. Pierre Somse and Patrick M. Eba, Lessons from HIV to Guide COVID-19 Responses in the Central African Republic, Health and Human Rights, Vol. 22, No. 1, SPECIAL SECTION: Mental Health and Human Rights (JUNE 2020), pp. 371-374

24. Lise Morje Howard, et &, Assessing the effectiveness of the United Nations Multidimensional Integrated Stabilization Mission in the Central African Republic / MINUSCA, Effectiveness of peace operation network (EPON), Norwegian Institute of International Affairs, 2020, p.125

25. Prise de Note d'instruction n°068/PM/DIRCAB.20 du 1er Ministre au Ministre de l'Administration du Territoire et de la Décentralisation

focus on volunteer testing, and case management, while outreach appeared to have abated.²⁶ In November 2020, a UNICEF survey in selected prefectures estimated that 90% of respondents had received information about COVID-19 prevention measures. About half indicated the most important control measures as social distancing (53%), wearing a mask (48%) and hand washing (44%). However, one-third (34%) thought that such measures are difficult to implement in their daily lives.²⁷

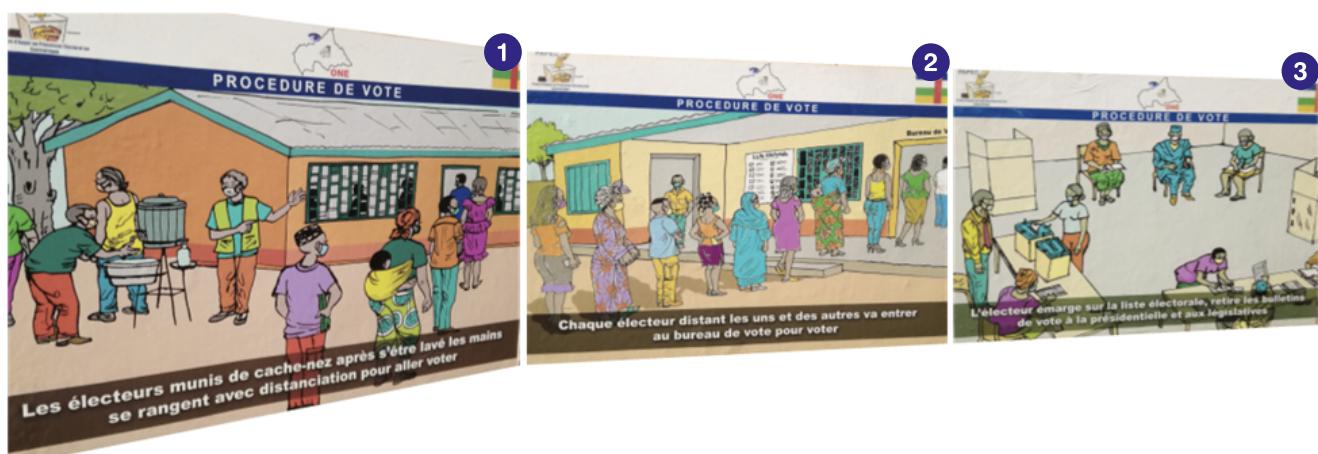
By then, registration was completed. An estimated 1.76 million of Central Africans registered to vote (46.5% of them women). In general, the 3,500 voter registration centres were operational and functioned as expected, apart from about 3% of the centres mainly located in the violence-prone western prefectures of Nana-Mambere and Ouham Pende.²⁸

Measures put in place for voters' registration

Although there were no publicly disclosed official directives outlining steps and measures to avoid the spread of COVID-19 during voter registration efforts, the ANE and the MoPH recognized the risks. One week after voter registration began, the MoPH distributed COVID kits (donated by the UNDP Elections Project) to all registration centres that were to be used during the process. At each registration centre, a “COVID agent”, trained by the Central African Red Cross, was present and hand washing stations were installed. The COVID agent was there to ensure that each person washes their hands before entering the registration centre. Some of the people registering and some officials were wearing face covering but not necessarily correctly. Social distancing was not respected.

At the same time, the ANE and the MoPH worked with partners to increase awareness of the risks of COVID-19 and the measures being introduced to reduce transmission. The UNDP Election Project sponsored paintings on voting protective measures on the walls of their main office located in one of the busiest streets in Bangui. Small posters were also distributed at each polling station. However, the extent to which these efforts reached outside Bangui is unknown. Key illustrations showed (1) voters wearing face coverings, washing their hands, and keeping their distance when queuing to vote, (2) voters physically distancing from others when entering polling stations, and (3) how voters signing the electoral list and taking their ballots.

Figure 2: Outreach on protective measures at the polling stations



Voting procedures:

- 1 Voters wearing masks, washing their hands, and physically distancing while lining up to vote
- 2 Each voter physically distancing from one another while entering the polling station to vote
- 3 Voters sign the registry and get ballots for the presidential and legislative elections

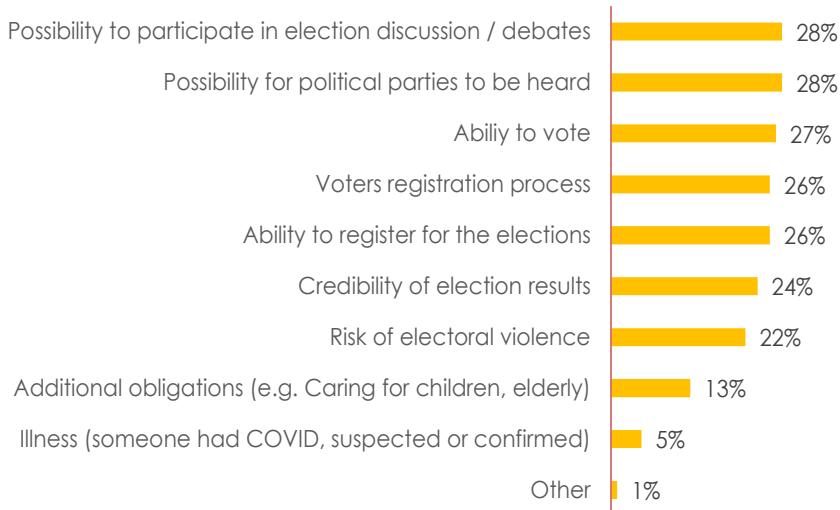
26. Tweet OMS/ Ministère de la santé, at <https://www.afro.who.int/fr/countries/central-african-republic>

27. Survey implemented in Bangui, Ouham Pende, Haute Kotto, Ouaka, Nana Mambere, and Mambere Kadei. UNICEF, Central African Republic , Coronavirus(COVID-19), Situation report, no. 10, November – December 2020

28. The ANE predicted it would register 2 millions of people including 16,281 in 13 foreign countries. Whereas the government put in place procedures for diaspora registration, it did not implement similar plans for the over 250,000 Central African refugees in neighboring countries. See also International Peace Institute, Security Council Report and STIMSON, Prioritization and Sequencing of Security Council Mandates: The Case of MINUSCA, November 2020, at https://www.stimson.org/wp-content/uploads/2020/11/The-Case-of-MINUSCA_Nov-2020.pdf

Although voter registration began at the peak of the outbreak, most of the registration occurred later, at a time when the number of cases was rapidly declining and country was re-opening. However, about one in four respondents to the nationwide HHI-UNDP survey noted that COVID-19 had a high or extreme impact on their own ability to register (28%), and to vote (27%), and the registration process (26%).²⁹ The survey was conducted in November and December 2020, prior to the elections. A similar percentage of respondents noted a high or extreme impact of COVID-19 on the ability for political parties to be heard (28%) and more generally on respondents' ability to participate in discussions and debates about the elections (28%). Perhaps as a result, one in four respondents believed that COVID-19 affected the credibility of the elections (24%) and the risk of electoral violence (22%).³⁰

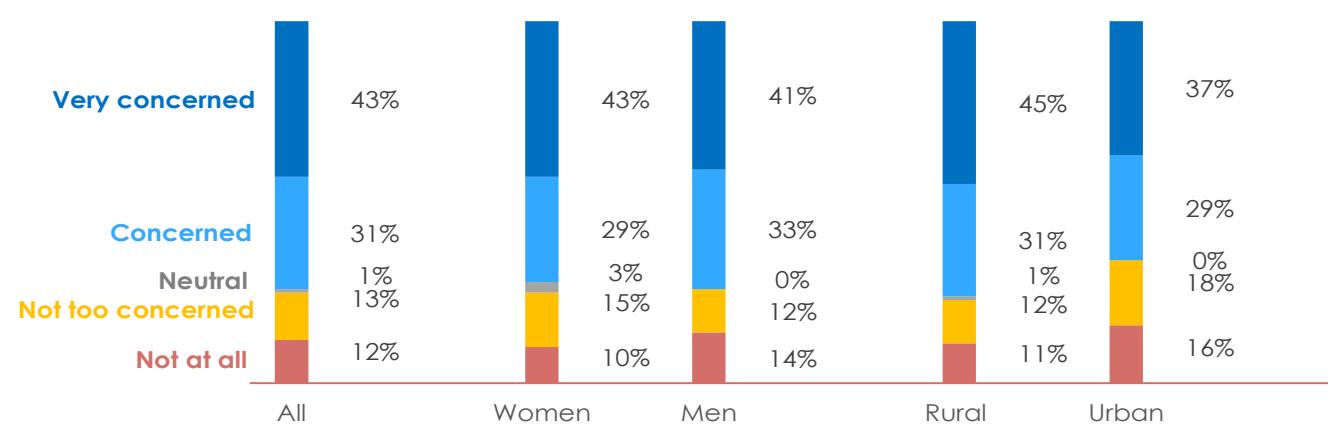
Figure 3: Perceived impact of COVID-19 on the electoral process (self-reported, % high / extreme impact)



At the time of the survey, and despite the few confirmed cases, concerns about the risks of COVID-19 remained high, with 74% being concerned or very concerned about the risk to themselves and/or somebody in their households.³¹ These concerns may have heightened the perceived impact of COVID-19 on the electoral process.

Figure 4: Perceived risks of COVID-19

(How concerned are you that you or somebody in your household might contract COVID-19?)



Other challenges to the preparation of the elections

COVID-19 was not the only challenge during the pre-electoral period. In October, preliminary electoral lists were displayed in registration centres in all prefectures, with the exception of the capital Bangui for which the list was not complete. The Coalition for Democratic Opposition (Coalition de l'Opposition Democratique – COD) organized a press conference and

29. HHI, UNDP survey, November-December 2020, op. cited

30. HHI, UNDP survey, November-December 2020, op. cited

31. HHI, UNDP survey, November-December 2020, op. cited

expressed concerns regarding the coming elections. They subsequently demanded an independent audit of the electoral lists and accused the government of corruption. The COD also contested the election of new ANE members and demanded their resignation. Both requests were denied, fuelling tensions between the ruling party and the opposition.

In December, the CAR Constitutional Court published the list of candidates. Their ruling invalidated the applications of 5 candidates for the presidential election (out of 22)³² and 78 candidates for the parliamentary elections (out of more than 1,500 applications).³³ They gave reasons that were mostly related to incomplete applications, unpaid fees, or links to unrecognized political parties. Nine applications for the parliamentary elections and, importantly, the application of the former president Francois Bozize for the presidential elections, were rejected on the grounds that the candidates have a case before a national or international court, are the subject of an arrest warrant, were involved in the 2013 crisis, or are currently involved with one of the many armed groups in the country.

Following the invalidation of Bozize's candidacy, a number of armed groups joined together to form a new coalition of armed groups – the Coalition des Patriotes pour le Changement (CPC). The CPC asked for the elections to be postponed. The request was denied and violence ensued. By mid-December, the CPC launched several offensives in the East and North and in the West towards Bangui. The Central African Armed Force (Forces armées centrafricaines – FACA), the MINUSCA's peacekeepers, and bilateral allies, such as the Rwandan and Russians eventually slowed the CPC's progress towards Bangui but not before they had managed to attack and/or occupy several cities and towns in the Centre, in the West and in the East.³⁴

COVID-19 and the electoral period

As violence raged, campaigning and voting were disrupted. Out of the 140 constituencies, elections were possible in only 118.³⁵ Despite the disruption, the ANE made a preliminary announcement on January 4, 2021 that the incumbent President Faustin Archange Touadera had won the elections. The CAR Constitutional Court upheld the result on January 18, 2021. President Touadera received 53% of the ballots cast, but with a turnout of only 35% of registered voters.³⁶ A second round of the legislative elections was held on March 14, 2021 in those areas where voting had not occurred due to insecurity on December 27, 2020.

While violence and insecurity were the primary concerns during the electoral period, the ANE shared concerns that the elections could become a COVID-19 “super-spreader”. In public communication – but not in an official text – a strategy revolving around four core elements was devised and disseminated on posters and paintings (see Figure 2), and on radio stations across the country. It consisted of (1) the presence of a COVID-19 agent to guide and educate voters, (2) the availability of hand washing stations at polling stations, (3) the wearing of masks, and (4) respecting of a physical distance of one metre before entering the polling station (as well as a distance of one metre inside the station). Our research shows that the compliance with and the reach of these measures was, at best, limited.

32. Nadia Chahed, RCA/ Présidentielle: 4 candidatures sur 22 rejetées par la cour constitutionnelle - Dont celle de l'ancien président François Bozizé, 03. 12. 2020, at <https://www.aa.com.tr/fr/afrigue/rca-pr%C3%A9sidentielle-4-candidatures-sur-22-rejet%C3%A9es-par-la-cour-constitutionnelle/2064723>. The article mentions that four candidates were invalidated. By the Constitutional Court. However, our monitoring of the elections indicates that five candidates were invalidated.

33. A detailed list is available at CNC, Législatives 2020-2021: sur 1580 dossiers enregistrés, la Cour Constitutionnelle invalide 78. Qui sont-ils?, <https://corbeaunews-centrafrrique.com/legislatives-2020-2021-sur-1580-dossiers-enregistres-la-cour-constitutionnelle-invalide-78-qui-sont-ils/>

34. UNICEF, Central African Republic, Coronavirus(COVID-19), Situation report, no. 10, November – December 2020

35. Jack Losh, BBC, Central African Republic: A disputed election and a strange rebel alliance, January 7, 2021, at <https://www.bbc.com/news/world-africa-55558642>; BBC, Central African Republic, CAR holds election re-run after rebel attacks

36. PBS NewsHour, Court upholds Central African Republic's election results, January 18, 2021, at <https://www.pbs.org/newshour/world/court-upholds-central-african-republics-election-results>

Figure 5: Key COVID-19 control measures at polling stations and field observations

MEASURES	COVID-19 Agents	Hand Washing	Physical distance	Masks
REALITY	<ul style="list-style-type: none"> Absent at all visited stations, not seen by any of the 555 people interviewed on elections day No willingness to assume this function 	<ul style="list-style-type: none"> Absent at all visited stations, except 2 where it was unused before or after voting 	<ul style="list-style-type: none"> Not enforced, except in relation to jumping the line 	<ul style="list-style-type: none"> Not enforced, largely absent (not more than 5% / a handful)

COVID-19 Agent

The COVID-19 agent, who was meant to be at the very heart of the system, was notably absent in the 24 polling stations covered by the research. Anecdotal information gathered throughout the city suggests that the situation was similar in the other polling stations, and that this part of the strategy had simply not been put in place. In general, only a minority of officials seemed aware of the existence of specific instructions for the elections. The ANE staff, including the polling clerks, explained that it was not their role to ensure that the anti-COVID-19 measures are respected. They rejected any form of responsibility: "we do not have this mandate" elaborated a middle-aged clerk. The ANE training appears to have not included COVID-19:

"During the training, we were not given any instructions regarding the COVID. This is why we cannot impose things here on the voters" (ANE polling station officer)

However, it is worth noting that some of the agents did receive COVID-19 training in the earlier stages of the electoral process, in particular during the preparation of the registration of voters when the Central African Red Cross supported the ANE. It does not mean that they took COVID-19 prevention matters into their hands: as one ANE agent explained: "everyone has their responsibility, I regret the absence of the COVID agent". Others explained that they do not have the competence or even the right to enforce the procedures, for example this polling station presiding officer:

"Not everyone follows the *gestes barrières* [the COVID-19 safety procedures]. There are only some observers and members of the polling station who use masks. I do not have the authorization to react".

Most ANE agents appeared perfectly aware of standard safety procedures in their private capacity, in part because many come from public services or executives of non-governmental organizations that have set up their own protocols. An illustrative example comes from this polling station presiding officer who explained, after clarifying that he was not doing anything COVID-19 related at the polling station, that "I am a college teacher and a Red Cross volunteer. I was trained by the Central African Red Cross on COVID-19 and the protective measures for the prevention of this disease."

Hand washing

Only 2 out of 24 polling stations were equipped with a hand washing device: one was a simple bucket without soap or chlorine (the water in the bucket was not changed throughout the observation period). The other, also a bucket but equipped with soap, was provided by the local health centre rather than by the ANE. At these two polling stations, nobody washed their hands before entering, and no instructions or signage invited voters to do so. Only 3 out of 24 offices had posters on COVID-19, and they were not being prominently displayed. The only observed use of the water buckets that were in place was by some voters who washed the ink stain on their finger as they walked out of the polling station.

The research team found that, on average, two to four voters entered polling stations every ten minutes, although some places were busier. No social distancing was observed in the queues, and voters hugged and greeted each other as usual. ANE teams present at the polling stations also did not respect social distancing. The biggest turnout was in the late morning, after morning church services, with one line stretching up to a hundred meters at a polling station in the 6th arrondissement. The day was very hot, forcing some voters to take shelter in the shade while awaiting their turn, which caused unrest and stampedes at some polling stations. The long wait and the presence of individuals attempting to jump

the queue contributed to jostling, and in total nearly half of the sites monitored there were scrums. In this context, almost nobody seemed to have the ability or the will to enforce the safety distance of one metre between voters in the queue. In one of the sites, a voter made a brave attempt, but without receiving any support from the other voters and only to be told by the presiding officer of the polling station that if the distance of one metre were to be respected, the line would extend to the neighbouring road, cut it, and cause troubles. In the 2nd arrondissement, in the only other polling station where an attempt to enforce the distance of one metre was reported, it was masked monks who were responsible, with a success that lasted for the time of their presence at the polling station.

The non-ANE parties involved in the organization of the elections, such as observers, MINUSCA staff, and members of the Constitutional Court, blamed the ANE for the lack of COVID-19 measures. They all explained that intervening would be overstepping their role.

Masks

Mask wearing was very limited among the voters. According to our observations, it was likely that "not more than 5%" complied with the measure. Those wearing masks were mostly senior citizens as well as "a more respectable category of people" and "important personalities". In only 3 of the 24 polling stations, were polling station officers wearing masks - although frequently on the chin, especially in the hot afternoon.

The limited wearing of masks among voters can be explained in different ways. The main reason given by voters is that they did not believe that COVID-19 is a big enough problem to justify wearing a mask. The virus is often seen as distant and largely alien in CAR, as one young woman explains: "yes, it is a disease that is prevalent everywhere, especially among whites. But with us, we are spared". Another man, of middle age conveys the general feeling:

"according to the news, COVID-19 should kill a lot of people in the Central African Republic because the protective measures are not respected. But in my opinion, this disease has not yet arrived in the Central African Republic".

However, a strong minority of people questioned, remains concerned about the virus, gives financial reasons for not wearing a mask, highlights the difficulty of going against the mainstream opinion, and worries about being associated with those who politically support the wearing of masks. A woman in her forties explained:

"I took my mask but I am not wearing it for fear that the others will call me President Touadera's dog. Everyone trivializes the COVID-19 and yet this disease is there."

On their side, the ANE staff cited the lack of equipment as key reason. As an clerk explained:

"No, we are not fully equipped. We are exposed to the risk of contamination from COVID. We have no mask, no gel, no gloves, no water".

The contrast with observers (e.g. international, MINUSCA, Arc-en-Ciel network, Economic Community of Central African States - ECCAS) as well as high-ranking officials (including members of the Constitutional Court), special security forces, and staff of United Nations agencies such as UN Women, is blatant. They generally observed safety precautions and came to the polling station with masks and personal bottles of sanitizing gel. The nearly 90 observers had a good understanding of the dangers of COVID-19 and observed the safety measures most of the time. Observers, both national and international, explained that they "learned the instructions during their training" and specified that "yes, we are well equipped with a badge, a mask, and a hand gel". A gradient was observed: ANE office agents only rarely wore masks, local observers often wore them, mobile ANE officials and international observers wore them even more regularly, and the staff of international aid agencies and key political figures always had them on.

Perception of measures, and their absence

As pointed out earlier, the vast majority of voters (three quarters according to the survey), ANE executives, and observers did not perceive the pandemic as having an effect on the electoral process. A small minority point to delays, especially in the enrolment of voters and in the distribution of voter cards, but most explained that the election was not affected. One ANE agent explains: "COVID has no impact on the organization of the elections, we thought at the beginning that it will upset the course but it is the opposite [it does not upset anything]". One possible explanation for this lack of impact is, of course, the lack of visible measures in the public space after July.

Opinions diverged on the reasons as to why there were not more visible measures at the polling stations. They fall into four main categories:

(1) Those who did not see the value of these measures because, in their opinion, the coronavirus was not, or no longer, a problem in CAR. Some, like this clerk, explained that "no measure has been taken in the polling stations because we have mentally turned the page on COVID in the Central African Republic" but for others the lack of measures is the confirmation of conspiracy theories about the virus. "The government and the ANE have not been able to take the COVID-19 disease seriously, it proves that they invented it to get help" explained one man. Another agrees: "So they were lying that COVID-19 was in Bangui, this [lack of measures] is proof that there is no COVID-19 in Bangui".

(2) Those who thought the virus is potentially a problem, but just not CAR's primary problem, and who explained the lack of action by the fact that, as a middle-aged person with disability put it: "it is not a priority for them [the government], given the current tensions in the country".

(3) Those who felt that the absence of measures was a consequence of the country's lack of resources. For example, one young man explained that: "We believe that, due to lack of resources, the government and the ANE have not been able to implement the necessary protection measures".

Finally, (4) the most substantial proportion condemns, sometimes in harsh terms, the attitude of the ANE: "Oh! my brother, the barrier measures are for them not for us. How can the ANE organize elections without taking into account barrier measures or hand washing devices?".

Older voters, who are more vulnerable to the virus, shared diverse views on COVID-19, including for some the idea that "it is a disease of white people" or that "God spared CAR". Among those interviewed, only three out of the 16 elderly people expressed a fear of going to vote, but they explained that it was offset either by the fact that, at their advanced age, they were "at the mercy of everything" anyway, or by the importance of civic duty.

It is important to note that among the sizable proportion of voters who believed that COVID-19 is potentially a significant health problem, few failed to notice the risk of bringing people together for elections. Reflecting the spirit of many interviewees, a woman in her fifties explains, "I am not protected in the exercise of my civic duty. This is when we can contract COVID-19 and therefore devices must be installed". As we did not interview non-voters it is harder to ascertain if they did not vote due to fear of COVID-19. However, few seem to give credit to this hypothesis - perhaps because, as one lady confided to us: "better that the COVID is killing us instead of being killed by the rebels".

COVID-19 and the post-electoral period

Violence continued following the elections, ultimately reaching the outskirts of Bangui, affecting food supplies, and displacing hundreds of thousands of people.³⁷ Over the next months, however, the national security forces gradually repelled the attackers,³⁸ and relative calm resumed in Bangui.

With the president elected, a second round of voting was organized for the legislative elections in areas affected by violence at the time of the first round, and in areas with run-offs. The vote, held on March 14, 2021, was preceded by two weeks of electoral campaigning at the beginning of February. The electoral campaign lasted two weeks in areas where the vote was hampered by violence, and lasted one-week in areas with run-offs

Protective measures were notably absent during the electoral campaigns at least in Bangui, and limited during voting. The MoPH urged Central Africans to respect all protective measures during the vote, and there were arguably some improvements compared to the first round of voting. However, many problems persisted. Observations in 25 voting centres indicate that even when hand washing stations were available at polling stations, people were not using them systematically

37. TRTWorld, News/ Africa, Central African Republic votes amid tight security in second round of polls, 14 January 2021, at <https://www.trtworld.com/africa/central-african-republic-votes-amid-tight-security-in-second-round-of-polls-44993>

38. UN News, Central African Republic: Respect final results of the election, UN and partners urge, 5 January 2021, at <https://news.un.org/en/story/2021/01/1081362>

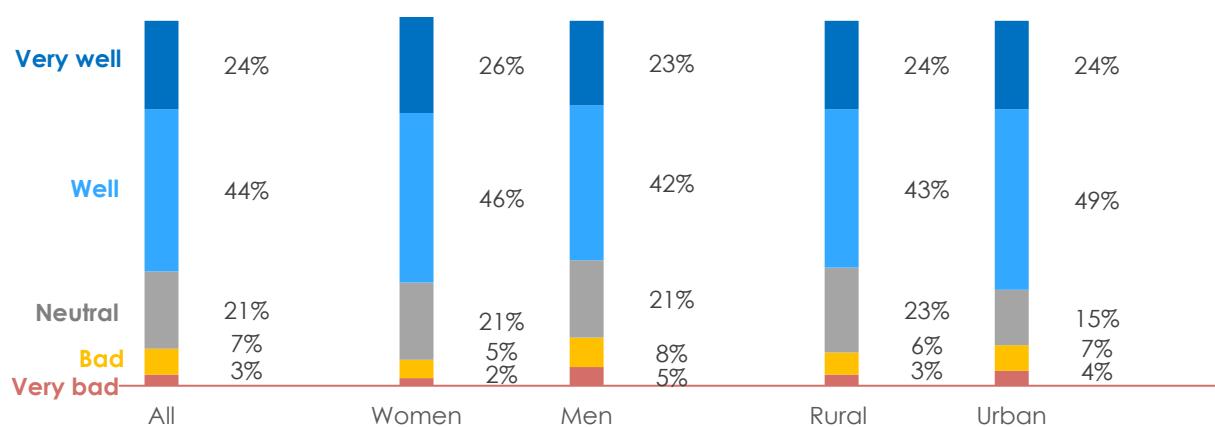
or were using them after voting. Additionally, at all visited polling stations, a COVID-19 agent was present but was mainly focused on the level of water in the buckets rather than encouraging people to wash their hands. Some people and officials were wearing masks but not necessarily correctly.

With the elections now over, the MoPH has announced the opening of a new COVID-19 treatment centre in Bangui and asked all Central Africans to visit the centre for a COVID-19 test. The attention of the MoPH is now turning towards vaccination with China providing the first 100,000 doses.

Effects on the elections' outcome

The research on COVID-19 and the presidential elections in CAR is largely focused on how risks were managed and the extent to which the electoral cycle was affected. Protective measures were in place during the voter registration process, but compliance was low during all stages of the electoral and post-electoral periods. There is no evidence of an increase in cases directly following the voter registration or the elections, although testing remains limited. However, selected results and observations point to indirect ways in which the pandemic may have affected electoral outcomes. One key dynamic observed is that, just weeks before the elections, participants in the HHI-UNDP nationwide survey were very satisfied with the way the government had managed the outbreak.³⁹ While the COVID-19 response was certainly not the only factor considered in voting choices, the positive perception may nevertheless have benefited the incumbent president seeking re-election.

Figure 6: Satisfaction with government's management of the outbreak (% respondents)
(How well do you think the country is doing in fighting COVID-19?)

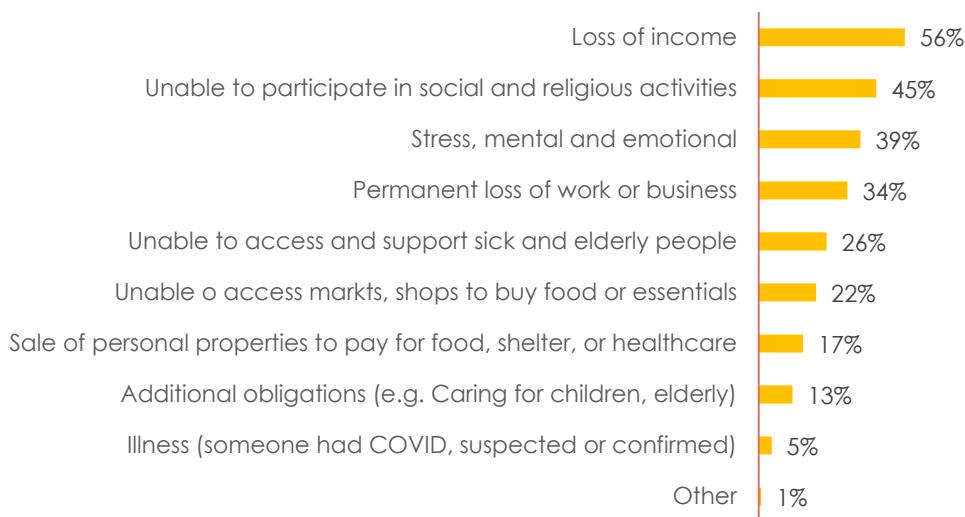


While the perceived performance of the government may have been to the benefit of the incumbent, other effects of COVID-19 may have played a negative role. Respondents most frequently highlighted the negative economic consequences of COVID-19 when asked about the effects of the pandemic. Over half noted income losses (56%), while smaller percentages noted loss of work (34%). Nearly half the respondents also noted social effects such as being less able to take part in social events (45%).⁴⁰ Both economic conditions and social dynamics are not only important considerations in voting, but they are also important risk factors for electoral violence, highlighting the potentially complex effects of COVID-19 in the CAR.

39. HHI, UNDP survey, November-December 2020, op. cited

40. HHI, UNDP survey, November-December 2020, op. cited

Figure 7: Effects of the pandemic (self-reported, % respondents)



As noted in the findings on the pre-electoral period, about one in four Central African respondents identified an impact of COVID-19 on their ability to participate in discussions and debates about the elections. COVID-19 may more generally have hindered the ability of people to participate in political events, and this, in turn, may have hindered the perception of electoral inclusiveness. While it is unknown how inclusive the electoral process would have been perceived in the absence of COVID-19, the sense of inclusion was relatively low (30% said they felt included in the electoral process), which has likely had implications for participation and voting choices. Importantly, more than half the respondents did not attend any political rally in a context where they are a prime way of sharing and obtaining information on candidates (internet and phone penetration rates in CAR remain among the lowest in the world).⁴¹

Together, these results suggest that the COVID epidemic might have had some indirect effects on the electoral process, which warrants further research.

Figure 8: Hand washing stations at polling stations on March 14, 2021



41. HHI, UNDP survey, November-December 2020, op. cited

Conclusions and lessons learnt

This working paper is not intended to provide definitive conclusions and recommendations. Rather, it is a working document meant for further discussion and engagement. Nevertheless, we note some general findings that are relevant for other countries preparing for elections.

The COVID-19 pandemic in CAR was met with a comprehensive response that included communication, coordination, surveillance, and case management. Within weeks of the first declared cases, the country went into a three-month long lockdown. There were, however, **few election-specific related measures and plans**. During the electoral process (e.g. registration and voting), COVID-19 measures focused on general outreach about protective measures and limited equipment at registration and voting stations (hand-washing stations or staffing with COVID-19 agents). These measures, however, were rarely implemented and/or complied with. Furthermore, this research found little to no training for poll workers in general, plans for contingency staffing or effort to adapt the location of registration and polling stations so protective measures could be implemented/enhanced.

It is possible that low confirmed case numbers created a sense that there were limited risks of COVID-19 during the electoral process. Furthermore, concerns over COVID-19 became secondary to the arguably more pressing and tangible emergence of political violence and armed conflicts. Perhaps as a result there was **limited ownership and leadership** on COVID-19 prevention in relation to the electoral process. COVID-19 agents were a major element of the COVID-19 electoral response, yet these agents were found to be generally missing or unable to enforce protective measures during the vote. Perhaps more importantly there is no clear chain of responsibility over these agents. **Future efforts must clearly identify chains of commands and responsibilities** over key actors in charge of ensuring safe elections from a public health point of view. This must be achieved through close and **formal collaboration between electoral and public health authorities**, which should jointly ensure the implementation of and respect for protective measures during the election process.

Importantly, the process of **implementing safe elections during a pandemic must necessarily include efforts to promote behaviour-change** in order to ensure that protective measures are adopted. In CAR, there is limited evidence that a systematic effort was considered to facilitate and ensure the adoption of behaviours such as face covering, hand washing or social distancing. Outreach strategies heavily relied on top-down communication which have had limited success in promoting behaviour change. Yet, experience elsewhere in response to infectious disease outbreaks have shown that success can be achieved through **the involvement of community members and consideration of local norms and practical needs**, as well as systematic efforts to **understand barriers to behaviour changes, build trust and control misinformation**. These should become central to future efforts.

Beyond the practicalities of organizing safe elections from a public health perspective, **electoral bodies and stakeholders must consider the far-reaching consequences of the COVID-19 pandemic on the country's socio-economic fabric**. While it is unlikely that these factors played a significant role in the onset of violence in CAR, deteriorating social and economic conditions are nevertheless important risk factors for social breakdown that must be addressed by all actors involved.