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Corona and the Sahel
Lessons from Ebola

Who will lead the response to Covid-19 in areas of the Sahel where there is no functioning state? This policy brief uses lessons learned from the Ebola epidemic in West Africa to show how traditional authorities can help respond to Covid-19. In Sierra Leone, Liberia and Guinea, the position, legitimacy, and role of traditional authorities was instrumental to stem, control, and handle Ebola in their communities. They contributed to credible communication, managed rumours and marshalled bottom-up solutions where official recommendations were impracticable. This brief explores the conditions under which traditional authorities in northern Mali and western Niger may play a similar role. The brief finds that the existing role of traditional authorities in the Sahel is likely to be reinforced. This means that some are well placed to respond to Covid-19 (particularly those who already assume a mediating role) but others find themselves in a very difficult position as they are under pressure from armed groups or lack local legitimacy. Policy-makers should consider traditional authorities as a key resource in the response to Covid-19, but also consider carefully who can play such a role and who cannot.

Who will lead the response to Covid-19 in areas of the Sahel where there is no functioning state? While it is natural to look to the state, it is likely that traditional authorities – tribal and fraction chiefs, religious leaders – will take the lead in remote and border areas. The question is, under what conditions are they best placed to do so?

Policy makers should look at traditional authorities in responses to Covid-19 for three good reasons. First, the state in the Sahel is weak. It governs somewhat in the capital, sometimes in urban areas and is linked with some authorities in the periphery. Over the years it has become very clear that traditional authorities fill in this governance vacuum and are likely to do so in response to

Covid-19.[1] Second, traditional authorities are themselves deeply political actors, as they are linked to state agents, international actors and armed groups. Given that all of these actors will be affected by Covid-19, relationships are likely to change, and we should aim to understand the roles they could play.[2] A third reason is that Covid-19

1 Molenaar, F. et al. 2019. *The Status Quo Defied: The legitimacy of traditional authorities in the Sahel and Libya*. CRU Report, The Hague: Clingendael Institute: Available at: https://www.clingendael.org/sites/default/files/2019-10/legitimacy_traditional_authorities_mali_niger_libya.pdf.

2 Dewaal, A. 2020. *COVID-19: "Know your Epidemic, Act on its Politics"*, World Peace Foundation. Available at: https://sites.tufts.edu/reinventingpeace/2020/03/31/covid-19-know-your-epidemic-act-on-its-politics/.

is not the only and perhaps not the main crisis that the Sahel is grappling with. Solving crises in the Sahel requires working with and through local authorities and by local authorities themselves. No public health response can be truly effective in a technical vacuum. Perhaps we can develop a local Covid-19 response that also contributes to the start of a more general solution to governance in the Sahel.

But how can we know what role traditional authorities could play in a pandemic so unprecedented in scale?[3] We rely not on informed speculations but consider what a very recent epidemic in West Africa actually meant for traditional authorities: Ebola.[4] What can we learn from the 2014-16 Ebola epidemic in Sierra Leone, Liberia and Guinea about the possible role of traditional authorities in the Sahel?

This alert takes three steps. First, we show how Ebola consolidated existing spheres of local authorities. In areas where local authorities already played a governance role, their role expanded; in areas where local authorities were marginalised, they were pushed aside further. Subsequently, we look at four regions in Mali and Niger and show what role traditional authorities could play in each of them, particularly given the presence of armed groups as governance actors. Finally, we make suggestions to international policy makers

and show when traditional authorities are best placed to contribute to stemming Covid-19.

Ebola and local authorities: implications for the emerging health crises in the Sahel

Anthropologists called Ebola a 'disease of social intimacy'.[5] Ebola did not spread easily but transmitted through direct contact with bodily fluids. Direct-contact transmissions occurred particularly during the later stages of the disease. Family care for loved ones, professional care for patients by nurses, local doctors and healers, and post-mortem contact with the deceased during burial and secret society rituals all led to transmission in intimate settings. Therefore, the response to Ebola had to involve changes in intimate social behaviours, and it was important that the health messages were considered legitimate enough to achieve that goal. It was traditional authorities who held the local legitimacy, trust and authority that played a key role.[6] They dispelled rumours, installed curfew, put the chiefdom on lockdown and helped to change burial practices. We identify three lessons learned.

First, the role that traditional authorities could play varied and, crucially, depended on their existing relationship with the state. Because states in West Africa are weak, state representatives link up with traditional authorities. In some cases, traditional authorities are neglected, in some they are persecuted and in others

3   For a helpful overview of research, se: PSRP. 2020. *Conflict, Development, and COVID-19 Resources*. Available at : http://www.politicalsettlements. org/2020/03/25/conflict-development-and-covid-19-resources/.

4   For similar attempts, see: Le Marcis, F. 2020. *Coronavirus Seen From the Land of Ebola: Lessons learned, reflexivity and the people in Guinea*, African Arguments. Available at: https://africanarguments.org/2020/04/03/ coronavirus-seen-from-the-land-of-ebola-lessons-learned-reflexivity-and-population-in-guinea/. Richards, P. 2020. 'What might Africa teach the world? Covid-19 and Ebola virus disease compared', *African Arguments*. Available at: https://africanarguments.org/2020/03/17/ what-might-africa-teach-the-world-covid-19-and-ebola-virus-disease-compared/.

5   Richards, P. et al. 2015. 'Social pathways for Ebola virus disease in rural Sierra Leone, and some implications for containment', *PLOS Neglected Tropical Diseases*, 9:4, e0003567.

6   Kinsman, J. et al. 2017. 'Development of a set of community-informed Ebola messages for Sierra Leone', *PLOS Neglected Tropical Diseases,* 11:8: e0005742; Wilkinson et al. 2017. 'Engaging "communities": anthropological insights from the West African Ebola epidemic', *Phil. Trans. R. Soc. B*, 372:1721, 20160305; Lamboray, J.-L. and Sherlaw, W. 2016. 'Ebola, question de confiance', *Santé Publique*, 28:1.

they are co-opted into state structures.[7] The difference between Guinea and Sierra Leone provides some good examples of what this means for the role that traditional authorities can play. In Sierra Leone, traditional authorities are part of a system of indirect rule, as the weak state leaves much governance to them. As such, paramount chiefs were central in stemming Ebola. They were seen as more trusted messengers, provided credible communication, managed rumours, communicated trusted messages, engaged secret societies and formulated local solutions. In the Kailahun district, for example, paramount chiefs created a set of by-laws to restrict movement and limit transmissions independent of the state.[8] Because of decades of cooperation, chiefs in Sierra Leone (and Liberia) were able to use their position in the village and the resources from the state and international actors to limit the spread of Ebola. In Guinea, the state is also weak, but Ebola broke out in the *forestière* region where the state does not rely on traditional authorities but on imposed non-native

prefects and sub-prefects.[9] As a result, the role for traditional authorities was very controversial. The state funnelled resources through state agents who had little local legitimacy.[10] Traditional authorities in turn resisted state involvement: communal militias attacked state agents and (women) chiefs organised riots, concealing deceased loved ones and reinforcing the idea that Ebola was not 'real' but a ploy by the state to decimate the *forestière* population. Traditional authorities thus resisted the state-led effort and hampered the Ebola response.[11] Hence, a first factor for success would be the use of traditional authorities as credible brokers between the state and their communities.

A second contributing factor in the success of traditional authorities at halting Ebola was local legitimacy and power. As the epidemic progressed, all traditional authorities played large roles but some were more successful than others. In Sierra Leone, more powerful paramount chiefs (facing less competition) were more successful in reducing cases than those with less power and more contenders.[12] Those in Guinea and in Sierra Leone who collaborated with international mining companies or chiefs who did not reside in their chiefdoms were considered less legitimate and were less successful in limiting the spread of Ebola.[13] In some villages, chiefs considered to be too close to the central

7   Boone, 2003; Christian Lund, 'Twilight institutions: public authority and local politics in Africa', *Development and Change* 37, no. 4 (July 2006): 685–705; Volker Boege, M. Anne Brown and Kevin P. Clements, 'Hybrid political orders, not fragile states', *Peace Review* 21, no. 1 (March 2009): 13–21; Tobias Hagmann and Didier Péclard, 'Negotiating statehood: dynamics of power and domination in Africa: negotiating statehood', *Development and Change* 41, no. 4 (16 August 2010): 539–62; Jean-Pierre Olivier de Sardan, *Researching the practical norms of real governance in Africa,* Overseas Development Institute, 2008; Ken Menkhaus, 'Governance without government in Somalia: spoilers, state building, and the politics of coping', *International Security*, 2007; K. Titeca and T. de Herdt, 'Real governance beyond the "failed state": negotiating education in the Democratic Republic of the Congo', *African Affairs* 110, no. 439 (1 April 2011): 213–31; Tom Goodfellow and Stefan Lindemann, 'The clash of institutions: traditional authority, conflict and the failure of "hybridity" in Buganda', *Commonwealth & Comparative Politics* 51, no. 1 (1 February 2013): 4.

8   Richards, P. 2019. *Ebola and chiefs in Sierra Leone,* LSE. Available at: https://blogs.lse.ac.uk/africaatlse/2019/06/28/ebola-chiefs-sierra-leone-research/.

9   Niang, C.I. 2014. 'Ebola: une épidémie postcoloniale', *Politique Étrangère,* hiver:4, pp. 97-109.

10 Wilkinson, A. and Fairhead, J. 2017. 'Comparison of social resistance to Ebola response in Sierra Leone and Guinea suggests explanations lie in political configurations not culture', *Critical Public Health*, 27:1, pp. 14-27.

11 In time some Guinean traditional authorities also helped to stem Ebola, particularly after they had first-hand experience of the disease and the state receded.

12 Van der Windt, P. and Voors, M. 2019. 'Traditional Leaders and the 2014-2015 Ebola Epidemic', Forthcoming, *Journal of Politics.*

13 Frankfurter, R. et al. 2018. 'Indirect rule redux: the political economy of diamond mining and its relation to the Ebola outbreak in Kono District, Sierra Leone', *Review of African Political Economy,* 45:158, pp. 522-540; Anoko, J.N. 2014. 'Communication with rebellious communities during an outbreak of Ebola virus disease in Guinea: an anthropological approach', *Ebola Response Anthropology Platform.*

state were bypassed by locals. Villagers hid Ebola patients or continued to provide care out of the sight of traditional authorities as they feared chiefs would invoke the army to impose their authority.[14] At the same time, these controversial traditional authorities are sometimes well known figures from resource-rich areas with good international contacts – hence, are most likely to receive the resources to respond to health crises. Therefore, while traditional authorities are likely to play a role, this should be a clear warning that some of them are better placed than others to respond to Covid-19.

Third, we also learned from Ebola that beyond traditional authorities, local figures with some form of legitimacy emerged.[15] The intimate nature of Ebola transmission rendered different forms of village authorities – from bike riders to women's collectives, health unions and secret societies – very important. They could give credible advice on personal protective equipment (PPE), provide information about symptoms and transmission, advise how to seek treatment when centres were far away, or rethink safe burial practices. They understood challenges and adapted impractical advice (how to use PPE when there are no supplies, how to reach a hospital without transport) to workable local solutions (using rise and plastic bags as protection; safe home care). It was traditional healers, youth groups, bike-riders collectives and football coaches who played a major role in stemming Ebola. For this reason, many conclude that the local response became a peoples' science. Non-customary forms of local authority learned to think as epidemiologists. Traditional authorities are well placed to respond to a health crisis, but one should not lose sight of the wider very local response they were part of which helped to stem Ebola.

Hence, we can learn three things from the Ebola epidemic for the Covid-19 response. First, traditional authorities are generally well placed to respond to a pandemic – but also, that those who are true community brokers between the state and the community are likely to be able to play a greater and more positive role than those traditional authorities who have been deliberately neglected by the state. Second, there are variations in how successful traditional authorities may be in stemming a disease depending on their legitimacy. Those with more power and legitimacy are likely to be more successful in responding to Covid-19 than those who are less legitimate (e.g. if they work with foreign private companies, are not firmly rooted in the community or are too deeply involved in national politics). Finally, despite the central role of traditional authorities, the response to a pandemic should remain inclusive and participatory, leaving room for other types of local authorities.

Traditional authorities in the Sahel

In remote areas of the Sahel, the state is often unable to provide local communities with basic security and services. Therefore traditional authorities in the Sahel play 'an important symbolic role as representatives of community identity, unity, continuity and stability'.[16] Like in Liberia, Sierra Leone and Guinea, traditional authorities often enjoy local legitimacy, trust and authority.[17] They provide some form of political order: they engage in forms of taxation, distribute rents, conduct local censuses, act as key points of coordination for humanitarian organisations, and provide local justice and

14 Parker, M. et al. 2019. 'Ebola and public authority: saving loved ones in Sierra Leone', *Medical Anthropology,* 38:5, pp. 440-454.

15 Parker et al. 2019. 'Ebola and public authority: saving loved ones in Sierra Leone', *Medical Anthropology,* 38:5, pp. 440-454; Enria, L. and Harris, D. 2017. 'Ebola: How a people's science helped end an epidemic', *African Affairs,* 116:463, 356-357.

16 Logan, C. 2013. 'The roots of resilience. Exploring popular support for African traditional authorities', *African Affairs,* 112:448, 353-376.

17 Logan *ibid;* Molenaar, F. et al. 2017. *A Line in the Sand: Roadmap for sustainable migration management in Agadez.* CRU Report, The Hague: Clingendael Institute.

conflict resolution.[18] But the 2012 Malian conflict and its spill-over to neighbouring Burkina Faso and Niger has altered the situation, as armed groups have capitalised on state neglect to work with traditional authorities. The question is: what role can Sahelian traditional authorities play in the response to Covid-19 in this challenging context?

Building on the lessons from Ebola in West Africa, we explore northern Mali (Ménaka and Kidal regions) and western Niger (Tillabéri and Tahoua regions), two areas of state weakness or absence. But we do so with three differences between Ebola and Covid-19 in mind.

First, the few hundred reported Covid-19 cases and dozens of deaths in the Sahel (as of April 2020)[19] are much lower than the 29,000 Ebola cases and 11,000 Ebola deaths in Guinea, Liberia and Sierra Leone.[20] While many suggest the low Covid-19 caseload in Africa is because of inadequate testing facilities due to scarce resources and poor healthcare systems,[21] others have advanced the theory that low population density, less movement, less proportion of old people, good communal health-seeking behaviours or possible immunity due to existing diseases could be keeping the overall caseload low (so far), particularly as countries with more advanced healthcare infrastructures have

faltered in tackling the pandemic.[22] This alert is a scenario for if and when Covid-19 becomes a health crisis in the Sahel.

Second, Ebola required changing very intimate social behaviours such as care for loved ones and burial rituals. But where Ebola was a disease of social intimacy, Corona is a virus of the masses that also transmits outside of social intimate relationships.[23] It is likely that local responses will permeate less deeply into intimate spheres and instead, heavy-handed policies and policing might be sought. Largescale sequestration and isolation, roadblocks and curfews could put a premium on state and armed group structures to enforce such policies.

Third, unlike Ebola, Covid-19 discriminates: it affects the elderly more. In most Sahelian societies it is the elders who rule (gerontocracies). It is possible that attempts by elder rulers to protect themselves may put other community members at risk – for example, by monopolising medical supplies or lockdown communities without ensuring that basic commodities are available to all. More than with Ebola, we could see tensions within communities. Historically marginalised groups, particularly women and young people, already reject the elite status quo and the contemporary traditional structures that still reflect in large part precolonial exclusionary hierarchies.

Ménaka and Kidal: complex variations

In Ménaka and Kidal (Mali), state representatives are formally present at regional level (both governors and interim authorities, as part of the peace process).[24]

18 Molenaar et al. 2019. *The Status Quo Defied: The legitimacy of traditional authorities in the Sahel and Libya.* CRU Report, The Hague: Clingendael Institute; Bodian, M., Tobie, A. and Marending, M. 2020. *The Challenges of Governance, Development and Security in the Central Regions of Mali*, SIPRI. Available at: https://www.sipri.org/sites/default/files/2020-03/sipriinsight2004_3.pdf.

19 Due to the dynamic nature of the pandemic, for the latest number of Covid-19 cases go to https://coronavirus.jhu.edu/map.html.

20 CDC, 2014-2016 Ebola outbreak in West Africa: Available at https://www.cdc.gov/vhf/ebola/history/2014-2016-outbreak/index.html.

21 Gilbert et al. 2020. 'Preparedness and vulnerability of African countries against importations of COVID-19: a modelling study', *The Lancet*, 395:10227, pp. 871-877, available at: https://www.thelancet.com/journals/lancet/article/PIIS0140-6736(20)30411-6/fulltext#%20.

22 "How do we explain the low Covid-19 caseload in Africa (so far)?", *Maverick Citizen*, 13 April 2020: Available at: https://www.dailymaverick.co.za/article/2020-04-13-how-do-we-explain-the-low-covid-19-caseload-in-africa-so-far/.

23 Although transmission very often occurs within households.

24 UN Security Council. 2019. *Situation in Mali. Report of the Secretary-General,* S/2019/262.

But state structures are extremely weak. In most instances, traditional authorities have seen the number of their tasks increased, making many of them key local governance actors – even though they are not formalised in state structures.[25] In both regions, armed groups are present and traditional authorities are compelled to work with them. This leads to three distinct arrangements.

First, in a limited number of urban areas, traditional authorities share power with state representatives – e.g. the mayor. This arrangement depends largely on the community's degree of urbanisation. Urban settings allow for more direct contact between state representatives and traditional authorities and give traditional authorities a sense of security, as they are less prone to be targeted by armed groups for being state proxies. For example, in the city of Ménaka – an important urban centre – the mayor is quite powerful and enjoys a complementary relationship with traditional authorities. But in general, this is an uncommon constellation.

Outside of urban centres, traditional authorities are often the sole providers of any type of governance. But there is no one-size-fits-all scenario and urbanisation does not determine all arrangements. For example, in the same Ménaka region, the smaller town of Alata has a much larger role for traditional authorities, as the mayor resides in Ménaka city and governs from a distance. Traditional authorities in Alata conduct everyday governance tasks such as coordinating humanitarian aid. In Kidal, where the 2012 rebellion first began, the rebellion and its aftermath eroded state power more than elsewhere. State security forces only came back to the city early in 2020, and despite the formal presence of the governor and a mayor, the CMA (Coordination of the Azawad Movement) rules the city. While the mayor is still in place, his relevance is negligible and has in practice been replaced by his counsellors (traditional actors). While physically present, most state representatives have de facto limited power or influence and must be seen through the lens of marginalisation. As such, traditional authorities are often unable to work with state representatives because they lack the physical presence and capabilities.

A third arrangement, which is most prevalent given the spread of conflict, is some form of power sharing between traditional authorities and armed groups. In both the Ménaka and Kidal regions, traditional authorities have allied with armed groups to protect their position against new armed contenders or to ensure their own security and ability to govern. These associations are instrumental and born out of necessity. But armed groups and traditional authorities do not operate on a level playing field. To a large extent, particularly in Kidal but also increasingly in Ménaka, traditional authorities have become more and more inseparable from armed actors.[26] The relationship is best understood as an unequal competition for competences. Armed groups are eroding the power and legitimacy of traditional authorities all the while working in close relationship with them and harnessing traditional leaders' legitimacy. Armed groups recognise traditional leaders and rely on them but do not give them much leeway and they also define the scope of traditional leaders' activities. Variation does exist, however. In Kidal and Ménaka, traditional figures on the higher end of the echelon, such as the Amenokal, have greater powers and competences due to their close links with armed leadership, whereas lesser authorities – such as village chiefs – do not possess the power necessary for equal relationships.

What do these three arrangements mean for the role of traditional authorities in the response to Covid-19 in Mali? First and foremost, there will be different roles for different settings. We can expect a greater role for traditional authorities where there is cooperation with the state – for example, in some urban centres. But it is difficult to imagine the state extending its reach into

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25 While they are named in the constitution, they are not formally part of the state like in Niger or Sierra Leone.

26 Olivier de Sardan, J.-P. 2013. 'The "Tuareg question" in Mali today', *Cahiers du Mapinduzi 3*, pp. 25-38.

peripheral areas in the absence of both physical presence and resources. Outside of urban centres, armed groups and traditional authorities will, in effect, be the sole governance providers in any type of health response. The biggest uncertainty for Mali pertains to situations where armed groups share power with traditional authorities. Will armed groups continue working through traditional authorities or will they use Covid-19 to compete and establish their own governance structures? On the one hand, traditional authorities are well placed to respond to Covid-19 and gain leverage. Armed groups will likely not be able to escape the hierarchically structured society in which they and traditional authorities exist – village chiefs and fraction chiefs in nomadic territory. Strong leaders such as the Amenokal may therefore strengthen their position. Furthermore, if the pandemic goes very deeply into communities, armed groups may be forced to rely on traditional authorities. On the other hand, traditional authorities may also come under more pressure from armed groups. One reason is that the response may be more heavy handed (e.g. contact tracing, isolation of cases and curfews) and suit armed actors better. Another is that armed groups have over the past years eroded the role of traditional authorities, as dependence on armed groups has reduced traditional authority legitimacy. Research has documented that community members increasingly raise their queries to armed groups and thus sideline traditional actors, even on community matters.[27] Community members may request that armed groups, rather than traditional authorities, formulate a response to Covid-19.

Tillabéri and Tahoua: complex variations

Like in Mali, the state has a very limited presence in Tillabéri and Tahoua (Niger), and traditional authorities are often the only existing governance provider. They are closer to their communities than any other governing authorities and enjoy the trust and legitimacy needed in a pandemic.

Traditional authorities are in a power-sharing arrangement with the Nigerien state. The chieftaincy in Niger is not an isolated institution but is deeply connected to the state administration. The nomination and responsibilities of traditional authorities and chiefs are by and large regulated and formalised into the state's administration (like in Sierra Leone).[28] For example, the Ministry of Finance pays emoluments and expenditures and in return relies on them for tax collection. Another important task they have been ascribed is to act as key points of coordination for humanitarian organisations active in their communities. Hence, they enjoy both local legitimacy and closeness to the people as well as a formal status within the state which makes them relevant as intermediaries between the state and their communities. Prefects, for example, are often outsiders, sometimes with little mastery of the local language, and far from the bases and resources of the state. Without the chiefs, they cannot achieve much. Hence, certain chiefs are key state brokers in Tillabéri and Tahoua, particularly when their role is understood in collaboration with other authorities.

Other traditional authorities are challenged by armed groups. The spill-over from armed conflict in Mali to the Tillabéri and Tahoua regions has hit communities and the chieftaincy. Since 2018 there have been systematic assassinations of community leaders – especially among lower-ranking

27 Molenaar et al. 2019. *The Status Quo Defied: The legitimacy of traditional authorities in the Sahel and Libya.* CRU Report, The Hague: Clingendael Institute.

28 Tidjani Alou, M. 2009. 'La chefferie au Niger et ses transformations: de la chefferie coloniale à la chefferie post coloniale', *LASDEL | Etudes et Travaux,* no.76.

chiefs.[29] This strategy aims at intimidating traditional leaders to weaken the hold of the state on those remote areas, so that armed actors may set up their own governance systems to fill the power vacuum. As a result, some chiefs have fled their communities while others have joined armed groups or tried to lie low. This fragile environment has left remaining chiefs between a rock and a hard place. As representatives of both warring local communities and state administration, chiefs are by definition suspected of being agents of both antagonists. They end up being the targets of threats and abduction from armed groups, as well as being accused of collaborating with armed groups and targeted by state security forces.

For Tillabéri and Tahoua, this means that the role of traditional authorities in stemming Covid-19 may take one of two directions. More than in Mali, some traditional authorities are well placed to respond and may see their role expanded. These are chiefs who continue to have ties to the state and can draw on a history of coordinating humanitarian organisations. Like in Sierra Leone, their combined proximity to people and formality makes them good channels to stem, control and devise local responses to the challenges posed by Covid-19. But other traditional authorities, those that were chased away and reside in the capital but also those under pressure from armed groups and state forces at the same time, will be less well placed to respond. They may be replaced by alternative governance structures as armed groups appoint new rulers and set up some form of local governance. Overall, these traditional authorities are ideally well placed to help stem Covid-19 but will find themselves in an impossible dilemma; collaborating with either armed actors or the state as part of any response to Covid-19 will put them at risk and further cement the difficult position they are in.

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29 Molenaar et al. 2019. *The Status Quo Defied: The legitimacy of traditional authorities in the Sahel and Libya.* CRU Report, The Hague: Clingendael Institute. pp. 71-72.

What response for international policy makers?

From the above, it follows that traditional authorities in northern Mali and western Niger could have a role in responding to Covid-19 – similarly to that played by traditional authorities in Sierra Leone, Liberia and Guinea for Ebola. But there is much variation in the conditions that could enable traditional authorities to effectively have a positive role. What specific lessons does this give for (international) policy makers?

First, policy makers should realise that traditional authorities are often in a very good position to stem, control and handle Covid-19 in their communities. While their positions, legitimacy and roles are very different, traditional authorities across the board tend to be closer to their community and enjoy more legitimacy than state representatives and armed groups. Lessons from Ebola in Sierra Leone, Guinea and Liberia show how involving trusted traditional and legitimate authorities was key in formulating workable and acceptable solutions. In the case of Covid-19, traditional authorities could offer credible communication about hand washing or how the virus is transmitted, manage rumours, provide trusted messages and engage local communities in bottom-up solutions where official recommendations on the use of PPE is impractical (e.g. as of 27 April mask-wearing will be mandatory in Burkina Faso despite insufficient stocks). Efforts at local level through traditional authorities might build a foundation of trust and stability that could subsequently be scaled up and contribute to the start of a more general solution to governance in the Sahel.

Second, policy makers should realise that the legitimacy, power and possibilities of traditional authorities vary due to existing arrangements between the state, armed groups and traditional authorities. Traditional authorities that share power with remaining state structures may be well placed to respond to Covid-19 (in the Sahel conflict setting this is, however, an uncommon arrangement). It is uncertain what role traditional authorities would play

when they (are forced to) share power with armed groups. Conflict in both Mali and Niger has eroded the power and legitimacy of traditional authorities and there is likely to be both entanglement and competition between armed actors and traditional authorities, especially as containing Covid-19 might require both local trust and legitimacy (traditional authority) and more heavy-handed responses such as curfews, banning social gatherings including religious events, and blocking routes (armed actors). One observation from Ebola is that existing arrangements are likely to be reinforced meaning that organisations with an already solid knowledge of who's who and which chief can get things done, are likely on the right track if they stick to their assessment. As such, existing conflict-sensitivity plans are still a good starting point. In any case this means that there is no one-size-fits-all solution on how to deal with traditional authorities under armed group governance. The situation is fluid and there are no clear-cut geographic clusters. If anything, policy makers need more than ever a greater understanding of local intricacies and must put context at the forefront of the Covid-19 response in the Sahel. For example, local authorities caught between the warring state and armed groups can be put at risk if they obtain resources from donors, as both state forces and armed groups may be tempted to co-opt or victimise them. Covid-19 interventions should find the middle ground between ensuring an effective response and not place a target on the head of traditional authorities.

Third, policy makers should leave room for local structures beyond traditional authorities. Ebola teaches us that very local authorities that were neither part of the state, armed groups or traditional governance structures (traditional healers, market cooperatives, bike riders, football coaches and other small players) were key in formulating a locally acceptable health response.[30] Combatting Ebola became a people's science where non-customary local authorities started to think as epidemiologists. And while that is no panacea, and is likely to be effective only after the state, armed groups and traditional authorities have failed, it might be good to think of ways in which this people's science can be strengthened. While controversial – as it may put local authorities at risk – policy makers may consider direct cash transfers to local communities in an effort to sponsor an emerging people's science by aiding the development of provisional PPE and maintaining or generating livelihoods.[31] Likewise, closely monitoring the local solutions that emerge and which could be supported (e.g. providing plastic bags as PPE), should be part of the policy maker's toolkit. But above all, the main lesson from Ebola for the response to Covid-19 in the Sahel is that traditional authorities are well placed to contribute and should – where possible – be supported.

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30 For researchers and academics, this also means building upon the existing burgeoning literature on the role of traditional authorities in governance in the Sahel, and also considering local authorities that are not part of hierarchical systems as key micro-governance actors with untapped potential.

31 Sthrom, R. 2020. *Africa's corona response rests on two things: markets and money transfers*, African Arguments. Available at: https://africanarguments.org/2020/04/02/africa-coronavirus-response-rests-on-two-things-markets-money-transfers/.

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