

The problem of residential voting and overseas voting

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The early voting ratio of the April 15, 2020 general election was 26.6 percent, compared to the 46 percent rate of all voters. Nearly half of the voters are participating in early voting. This trend is expected to increase in the upcoming March 9 presidential election. This is due to the recent revision of the Public Official Election Act that makes it easier for those living abroad to vote and expanded the subject of residential voting.

The revision to “expand overseas polling stations” in the election law (January 11, 2022) allows additional overseas polling stations to be opened in areas with more than 30,000 Korean nationals living overseas, allowing two more stations in areas with 60,000 Korean nationals and three more in areas with 90,000 Korean nationals. In addition, if you did not participate in more than two consecutive elections while living overseas, the regulation that requires that voters from being removed from the list of eligible overseas voters have also been revised. In the February 16, 2022 revision of “expanding the number of people subject to residential voting,” COVID-19 confirmed patients were also included in the “residential voting” list, which allows mail-in voting from hospitals or homes. In addition, COVID-19 confirmed and quarantined patients are being asked to vote at a separate polling station, not the same polling station as the general public, from 6 p.m. to 7:30 p.m.

These amendments and new measures to the election law have the following issues:

First, the possibility of election manipulation has increased in the name of convenience. In the case of residential voting, there are problems with the reliability and safety of voting, such as proxy voting, voting interference, obstruction of voting, loss and damage of ballots, the uncertainty of confirmation of receipt of the residential voting ballot papers, and the lack of secret voting. However, with this new revision, this problem has been increased.

Second, it is not clear why confirmed patients should participate in residential voting. For example, the application period for residential voting for the 20th presidential election is from February 9 to 13. However, the quarantine period is 7-10 days, and all previously applied confirmed patients will be cleared before election day.

Third, the reliability of early voting was further undermined by expanding overseas polling stations without safety protocols and equipment in place. During the April 15, 2020 general election, the number of overseas voters was higher than the actual number of registered voters, and countless suspicions of digital manipulation were raised. For example, 66,402 people were registered in the list of confirmed overseas voters for the April 15 general election, but the number of voters was 146,289 counted by the National Election Commission. That is a difference of 73,247 people between the two counts. How will the NEC explain this difference?

Fourth, measures to prevent election manipulation (installation of CCTVs, saving and storing video files, observers accompanying storage boxes, and preserving computer networks) supplemented by the revision of the election law are formal and ineffective. (1) The mandatory CCTV installation was not observed during the previous election, and (2) saving and storing video files is meaningless if the requirements to disclose such files are difficult and expensive, and there is no means to force to disclose if it's postponed indefinitely. (3) Observers accompanying the ballot boxes from the early voting station to the postal process but being part of the delivery process have been omitted. (4) Computer network protection measures cannot be effective preventive measures unless vote counting and hacking prevention program source codes are allowed to be viewed in real-time and real-time monitoring of servers is allowed.