

Coping with COVID-19 in Bangladesh

Assessment of Relief Delivery

Mustafizur Rahman
Towfiqul Islam Khan
Muntaseer Kamal
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Funded by
the European Union



OXFAM



CENTRE FOR
POLICY DIALOGUE

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Centre for Policy Dialogue (CPD)

House 40/C, Road 11 (new)

Dhanmondi, Dhaka-1209, Bangladesh

Telephone: (+88 02) 48118090, 55001185, 58156979

Fax: (+88 02) 55001181

E-mail: info@cpd.org.bd

Website: www.cpd.org.bd

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Foreword

Bangladesh deserves appreciation for its swift policy response to the fallouts of COVID-19 pandemic. While the first case of infection was diagnosed on 8 March 2020, the government rolled out its initial set of assistance by the end of March 2020. The four cornerstones of the government's pandemic impact mitigating policies were (i) enhanced public expenditure, (ii) incentives for the private sector, (iii) infusion of liquidity into the market, and (iv) targeted support to the disadvantaged people. As part of the targeted support to the pandemic affected people, particularly people from the disadvantaged communities, the government expanded the coverage of the existing social safety net programmes (SSNPs). Concurrently, new schemes were also introduced. These traditional and new SSNPs included food support as well as cash transfer.

In this connection, the present volume is dedicated to assess the effectiveness of a select set of SSNPs which were executed since the beginning of the pandemic. Three schemes were explored in this conceptually robust and empirically representative exercise during the first year of the pandemic. These include (a) cash support of Tk. 2500 each to 5 million households, (b) food (rice) distribution, and (c) cash transfer under Gratuitous Relief (GR). The field level coverage included 823 recipient households of the mentioned government support in 32 upazillas.

The field study of the selected SSNPs puts forward a number of important findings which have crucial implications for improving the effectiveness of the targeted public interventions. The

observations of the authors range from identification of “exclusion error” in beneficiary selection and leakages in the delivery chain of support to absence of grievance redress system in the institutional set-up. Such evidence-driven analytical observations have allowed the authors to put forward concrete policy recommendations. The recommendations have significant implications for protecting the entitlement of disadvantaged communities in Bangladesh. For example, the authors contend that public assistance programmes need to be prioritised based on the level of poverty incidence in the programme areas rather than being guided by their population size. Further, the authors have established that the rural poor were underserved, in comparison to their urban counterparts, by the public assistance disbursed during pandemic. We hope that the findings and recommendations contained in the volume will be taken into cognisance by the relevant authorities while dealing with the challenges of the second wave of the pandemic.

I congratulate Dr Debapriya Bhattacharya, Team Leader of the project, the authors led by Professor Mustafizur Rahman and other CPD colleagues who have contributed towards making this initiative a success.

Fahmida Khatun, PhD

Executive Director

Centre for Policy Dialogue (CPD)

Dhaka

June 2021

Preface

The COVID-19 pandemic has accentuated the pre-existing vulnerabilities of the marginalised group in Bangladesh. It has also caused new people to join the values of traditionally marginalised groups. All these people are in dire need of public policy support to cope with the adverse impacts of the pandemic. In many ways, the pandemic has disrupted the pursuit of Bangladesh's medium-term development agenda, including the Sustainable Development Goals (SDGs) and the Eighth Five Year Plan. To what extent the country will be able to successfully regain the lost momentum will hinge on its ability to extend the necessary support to the pandemic-affected people. It is the general practice of the Government of Bangladesh (GoB) to extend relief support as disaster response measures; the response to the COVID-19 pandemic has been no exception. The GoB has implemented several relief support programmes, both in cash and in-kind types, targeted towards the marginalised sections of the population. The local authorities involving local administration and concerned elected bodies were entasked to deliver these relief programmes at the local level.

In the delivery of public services, the role of local-level government functionaries is crucial since they provide 'access' to government services and productive resources and make these available in times of needs. Transparency and accountability in delivering these services are critically important for the proper addressing of the demands of the poor and the marginalised groups in need of emergency support. However, the gaps between policies and praxis on the ground in this connection remain quite formidable.

Their problems are also accentuated because they are unorganised, lack information and are deprived of legal rights. The gaps and shortcomings in delivering the safety net and relief support programmes in Bangladesh have been highlighted in various studies which have drawn attention to inadequacies in allocation and coverage, 'inclusion' and 'exclusion' errors, leakages, coordination failure among concerned implementing agencies, high administrative costs, and inefficiencies in delivery.

However, the pandemic is a special situation that calls for an assessment of public service delivery in view of the pandemic so that the attendant problems can be dealt with in a timely manner. To this end, the present study has focused on both gaps between policies and practices and outcomes and on ways and means to improve the quality and effectiveness of delivery of public services. Under the purview of the study, the delivery of three social safety net programmes has been assessed. These are food (rice) distribution and cash support under Gratuitous Relief (GR) and cash support of BDT 2,500 each to 5 million households. To this end, the study has come up with an analytical framework that involves five pillars: (i) Coverage Strategy and Promotion, (ii) Application, Selection, and Enrolment, (iii) Transfer/Receipt of Benefits, (iv) Information Management, and (v) Control Mechanism.

To elicit necessary data and insights, a nationally representative household survey was conducted in 16 districts of Bangladesh between late January and early February of 2021. Several in-depth discussions were also carried out with the participation of key stakeholders, including representatives of CBOs, CSOs and NGOs. The study has also benefitted from four sub-national dialogues held to discuss relevant issues where a large number of local-level state and non-state actors had taken part. Useful learnings and lessons learned in the course of the abovementioned exercises were documented. Several concrete recommendations have emerged in the process. The current study has put an effort to capture these in a comprehensive and systematic manner. The study has also made use of available official secondary data dealing with the aforesaid relief programmes.

The study comes up with a set of recommendations towards the effective delivery of social safety net programmes in Bangladesh. It has also tried to capture the determinants on which hinges the

satisfaction of the target beneficiaries of the selected programmes. It is expected that the findings and recommendations emerging from this study will be found useful by the policymakers for designing and implementing similar relief support programmes to address COVID-19 type crises in future, as also for implementing the general social safety net programmes in Bangladesh.

The study was conducted under the project titled 'Enhancing the participation of community-based organisations (CBOs) and civil society organisations (CSOs) in democratic governance in Bangladesh'. The project is being implemented jointly by Oxfam in Bangladesh and the Centre for Policy Dialogue (CPD), supported by the European Union (EU). The central objective of the project is to empower vulnerable individuals and communities by giving them a stronger voice in the design and execution of various public service programmes. Through this, the project aspires to strengthen the cause of accountable implementation of the sustainable development goals (SDGs) in Bangladesh. One hopes that this project will be able to advance the cause of overall good governance in Bangladesh towards better public service delivery outcomes.

Acknowledgements

The team members would like to register sincere appreciation to several individuals and institutions who have extended valuable support to ensure the successful implementation of the activities associated with the study.

The authors are thankful to Dr Debapriya Bhattacharya, Distinguished Fellow, CPD, for his constant guidance in all project-related activities and for his insightful comments and very helpful suggestions at different stages of the study. His inputs have helped the team to shape research questions and improve the analytical rigour of the study.

The authors are immensely grateful to several concerned government agencies which have shared relevant documents and data; the information they provided served as highly useful background material for the study. In this connection, mention may be made of the Bangladesh Bureau of Statistics (BBS), General Economics Division (GED) of Ministry and Planning, Ministry

of Finance (MoF), Ministry of Disaster Management and Relief (MoDMR), and Ministry of Food (MoFood).

Dr M Abu Eusuf, Professor, Department of Development Studies, University of Dhaka, has provided insightful comments and helpful suggestions on an earlier version of the draft report. The authors would like to convey their sincere appreciation to him.

The study team would like to thank Development Research Initiative (dRi) for conducting the household survey and for ensuring high quality of the information generated.

The authors gratefully acknowledge the insightful comments and suggestions offered by the participants of the expert group meeting (EGM) held on 15 September 2020. In this connection, the authors are profoundly grateful to Dr Hossain Zillur Rahman, Chairperson, BRAC, Former Advisor to the Caretaker Government and Executive Chairman, Power and Participation Research Centre (PPRC); Dr Ahsan Habib Mansur, Executive Director, Policy Research Institute (PRI), Bangladesh; Dr Zahid Hussain, Former Lead Economist, The World Bank, Bangladesh; Dr Imran Matin, Executive Director, BRAC Institute of Governance and Development (BIGD), BRAC University; Dr M Abu Eusuf, Professor, Department of Development Studies, University of Dhaka; Dr Mohammad Mahfuz Kabir, Research Director, Bangladesh Institute of International and Strategic Studies (BIISS); Ms Nazme Sabina, Chief Executive, DevResonance Ltd.; Mr Kazi Faisal Bin Seraj, Country Representative, The Asia Foundation, Bangladesh; Mr Gawher Nayeem Wahra, Founder Member-Secretary, Disaster Forum; and Dr Ramiz Uddin, Head of Results Management and Data, Access to Information (a2i) Programme, Government of Bangladesh. The valuable inputs received from the EGM participants were very helpful in firming up the study design.

The authors are indebted to the representatives of various stakeholder groups, and experts who took part in the national dialogue titled 'Relief Supports to Cope with COVID-19: How Effective Were They?' for their comments and suggestions. The dialogue was held (virtually) on 27 May 2021 to discuss the findings of the present study. In this regard, the authors would like to put

on record their deep appreciation of the valuable inputs provided by the Chief Guest at the event Dr Md. Enamur Rahman, Member of Parliament and Honorable State Minister, Ministry of Disaster Management and Relief, Government of Bangladesh. The team thankfully recalls the insightful comments and suggestions offered by Mr A B Tajul Islam, Member of Parliament and Chairman, Parliamentary Standing Committee on Ministry of Disaster Management and Relief, and Barrister Shameem Haider Patwary, Member of Parliament and Member, Standing of Law, Justice and Parliamentary Affairs, who attended the event as Special Guests. The team gratefully acknowledge the feedbacks received from Mr Anir Chowdhury, Policy Advisor, Access to Information (a2i) Programme, Prime Minister's Office.

Taking this opportunity, the study team would like to convey their sincere gratitude to the EU Delegation in Dhaka for their generous support in implementing the study and for extending full and continuing cooperation.

The study team would like to recall the excellent partnership between CPD and Oxfam in Bangladesh, which greatly facilitated the conduct of the study. The authors have greatly benefitted from the cooperation extended by colleagues from Oxfam in Bangladesh at every stage of preparing this report. In this connection, special words of appreciation are due to Dr Dipankar Datta, Country Director, who has been a pillar of support for this project. Colleagues from Oxfam in Bangladesh, Mr Soeb Iftekhhar, Head, Economic Inclusion and Justice, Ms Kazi Rabeya Ame, Rural Manager and Mr Saiful Alam, Programme Coordinator, have been extremely helpful and were always there when the team needed their support and cooperation.

The team is grateful to colleagues at the CPD who were involved with various project-related activities and provided valuable support in the course of the study. The team members would like to express their sincere gratitude to CPD Executive Director Dr Fahmida Khatun for her excellent support towards the successful implementation of all study-related activities. Mr Avra Bhattacharjee, Joint Director, Dialogue and Communication Division, CPD, and colleagues at the Division have helped organise various activities planned under this

study efficiently and by maintaining the highest quality. Without the hard work and support of the research team of CPD, the study report could not be readied for publication under such a tight time frame. The team owes a debt of gratitude to all of them collectively and individually.

Professor Mustafizur Rahman

Distinguished Fellow

Centre for Policy Dialogue (CPD)

Lead Researcher

Project "Enhancing the Participation of the CBOs and CSOs
in the Democratic Governance in Bangladesh"

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About the authors

Professor Mustafizur Rahman is currently affiliated with the Centre for Policy Dialogue (CPD) as Distinguished Fellow. Previously he had taught at the University of Dhaka where he is at present a member of the University Senate. He did Ph.D in Economics from Moscow State University, Russia and carried out research at several reputed academic institutions including the University of Oxford, UK as a Visiting Fellow, Yale University, USA as a Senior Fulbright Fellow and Warwick University, UK as a post-Doctoral Research Fellow.

As a public policy analyst, Professor Rahman's areas of current interest include Bangladesh's fiscal-monetary policies, trade policies and trade reforms, regional trade and connectivity in Southern Asian region, multilateral trading system and interests of low-income countries, implementation challenges of the Sustainable Development Goals (SDGs) in Bangladesh, and graduation challenges facing the LDCs. He has published widely in professional journals and in volumes brought out by reputed publishing houses including Routledge, Springer and Palgrave Macmillan.

Professor Rahman has served as member of a number of important national committees set up by the Government of Bangladesh including Regulatory Reforms Commission, Committee to Review National Sustainable Development Strategy and Core-committee on Transit and Connectivity. Dr Rahman has served as member of the Panel of Economists for Bangladesh's Sixth and Seventh Five Year Plans and First and Second Perspective Plans of the country. Professor Rahman is a member of Board of Trustees of BRAC

University. He is a member of Core Group of Citizen's Platform for SDGs, Bangladesh.

Mr Towfiqul Islam Khan is an economist and currently a Senior Research Fellow at the CPD. He has undertaken various research and published in a number of areas including macroeconomic policies, fiscal policy and fiscal transparency, governance, social protection, inclusive development and SDGs. Khan is a member of the 'SDG Working Team' constituted under the Prime Minister's Office, Government of Bangladesh. He is also a member of the 'SDGs NGO Sub-Committee' constituted under the NGO Affairs Bureau of Bangladesh. Khan received the Australian Leadership Award (ALA) in 2008 to carry out his post-graduation academic degree at University of Melbourne, Australia. Khan also obtained his Masters and Bachelors in the area of Economics from Jahangirnagar University, Bangladesh.

Mr Muntaseer Kamal is an aspiring economist and currently working as a Senior Research Associate at the CPD. His primary research interests are in the areas of macroeconomics and development economics, with particular focus on Bangladesh's development. His other areas of interest include international economics, inclusive development, SDGs and ICT issues. Prior to joining CPD, he received his Masters and Bachelors degrees in Economics from the University of Dhaka, Bangladesh.

Ms Marfia Alam is currently working as a Programme Associate at the CPD. Her areas of research interest include development economics, governance, SDG implementation, and topics under microeconomics. She aspires to develop her research career in the field of health economics or behavioural economics in the long run. Prior to joining CPD, she secured her Master of Science in Economics from the University of Greenwich, London, UK, with a dissertation focusing on the effect of globalisation on income inequality, using the KOF index and panel data analysis. She has acquired her first masters from North South University, Dhaka, Bangladesh, with a thesis focusing on the effect of mental health on economic output, using panel data analysis. Ms Marfia has obtained her Bachelor of Science in Economics from United International University, Dhaka, Bangladesh.

Md. Sabbir Hossain is working as a Programme Associate at the CPD. He has completed his Bachelor and Master in Statistics from Shahjalal University of Science and Technology, Sylhet, with an MS thesis focusing on climate change impact on agriculture. His primary research interests are in the areas of population and public health, especially environmental health and epidemiology, macroeconomics, and development economics. Mr. Hossain is a competent statistical programmer (R, STATA, and SPSS) with project management, scientific proposals, and report writing skills. Before joining CPD, he has worked as Research Assistant at Shahjalal University of Science and Technology, Sylhet. He obtains more than two years of research experience in public health, economics, agriculture, and banking sectors.

Mr Mostafa Amir Sabbih is a Development Economist by training and a former Senior Research Associate at the Centre for Policy Dialogue. He is currently working as a Social Protection Specialist at the World Bank. He previously carried out research for several international organisations like Oxfam and Mott MacDonald. He completed his Bachelors and Masters in Development Studies from University of Dhaka, Bangladesh. He also obtained another Masters in Development Policy with double concentration in Sustainable Development and Public Finance from KDI School of Public Policy and Management, Republic of Korea. He is a former member of 'National Data Coordination Committee (NDCC)' for SDGs, Bangladesh, hosted under the Statistics and Informatics Division of Bangladesh Bureau of Statistics. He has published a number of books, articles, book chapters, working papers and policy notes in the areas of public finance, sustainable development goals, social protection, education financing, service delivery at the local level, inclusive growth and data eco-system.

About the Project

The overarching objective of the project titled “Enhancing the Participation of CBOs and CSOs in Democratic Governance in Bangladesh”, funded by the European Union, is to promote the cause of transparency, voice and accountability in the implementation of Sustainable Development Goals (SDGs) in Bangladesh.

Bangladesh is at present working towards implementing the SDGs, which have set the global ambition of attaining 17 goals and 169 targets by 2030. A total of 193 countries including Bangladesh have committed to implement the 2030 Agenda for Sustainable Development with its global vision of economic growth, inclusive societies and sustainable development.

Transparency and accountability in public decision-making are key to ensuring that efforts at implementing the SDGs deliver the expected results. In this backdrop, it is critically important that the voices of the people, especially the marginalised, the women and the other left behind groups, are being heard and actions taken accordingly. However, oftentimes, it is seen that the demands of the marginalised groups remain unaddressed and their expectations are not reflected in national policies. There is thus an urgent need for participatory governance which will ensure meaningful participation of grassroots people through inclusion in decision making power structures.

The project’s aim is to contribute towards implementation of the SDGs in Bangladesh through enhanced participation of the community-based organisations (CBOs) and civil society

organisations (CSOs). Oxfam in Bangladesh and Centre for Policy Dialogue (CPD) have joined hands to implement the aforesaid project which seeks to strengthen the role of local CBOs and CSOs through capacity building to ensure that the demands made by people at the grassroots get heard and measures in view of this are implemented by policymakers at national level.

The project is making best use of the comparative advantage of the two collaborating institutions to achieve the expected results. Oxfam in Bangladesh is taking advantage of its extensive network to reach the local level to ensure engagement and capacity building of local communities and marginalised groups in support of SDGs implementation in Bangladesh. CPD, a leading think tank of the country, is contributing by undertaking research and through wide-ranging publication and advocacy activities. It is to be noted that, the CPD, the secretariat of the Citizen's Platform for SDGs, Bangladesh, connects the project activities with one of the most well-represented networks of non-state actors working towards implementing the SDGs in the country.

The project activities largely focus on a select set of riverine islands (Char in Bengali), wetlands (Haor in Bengali) and coastal areas belonging to 13 districts of Bangladesh. These are Barguna, Chattogram, Gaibandha, Jamalpur, Kishoreganj, Kurigram, Netrokona, Nilphamari, Pirojpur, Rangpur, Satkhira, Sirajganj, and Sumanganj. These are considered to be areas with high levels of poverty, suffering from remoteness, vulnerability to climate change and proneness to disasters. It is reckoned that the need for improved service delivery through transparency, accountability and good governance is of heightened importance and relevance as far as these marginalised and geographically handicapped areas are concerned. Winning the fight to achieve the SDGs, from the vantage point of leaving no one and no area behind will, without doubt, hinge on how successfully specific challenges faced by these communities and these areas are addressed adequately. It is also hoped that in the process the project will contribute towards implementation of the national five-year plans and the Vision 2021 Perspective Plan of the government.

The project's target groups include 50 thousand members belonging to 325 women-led CBOs/CSOs and 300 CSO representatives from

13 upazilas. Also, 450 local authority representatives and 650 local government officials will have an opportunity to enhance their knowledge and understanding about effective delivery of the SDGs. Project activities will focus on how best to deliver local level public services to the doorsteps of the beneficiaries. It is also hoped that project-related stakeholders will use the new knowledge to advocate the needs of local communities they serve and by working with local level communities will work to ensure delivery of public services at the local levels. Overall, the project is expected to benefit 175,000 people living in the 13 districts during the three and a half-year period of its implementation.

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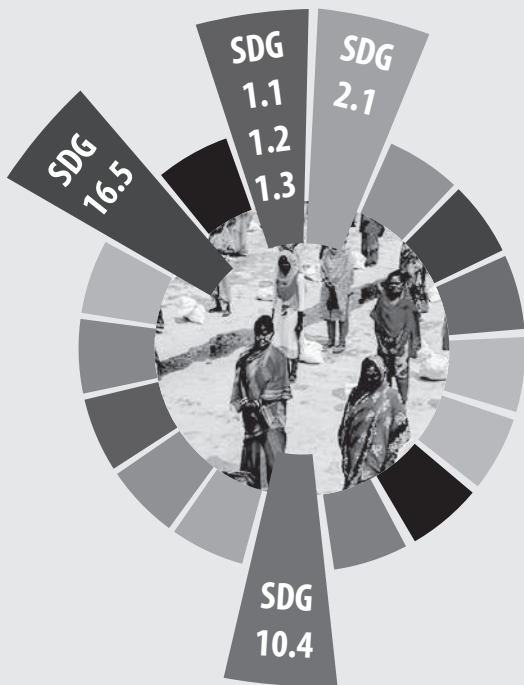
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Acronyms

7FYP	Seventh Five Year Plan
8FYP	Eighth Five Year Plan
AAY	Antyodaya Anna Yojna
ADB	Asian Development Bank
AUROC	Area Under the Receiver Operating Characteristic
BBS	Bangladesh Bureau of Statistics
BDT	Bangladeshi Taka
BIGD	BRAC Institute of Governance and Development
BRAC	Bangladesh Rural Advancement Committee
CBO	Community-Based Organisation
CFW	Cash for Work
CI	Confidence Interval
CNIC	Computerized National Identity Card
COVID-19	Corona Virus Disease 2019
CPD	Centre for Policy Dialogue
CSO	Civil Society Organisation
DBT	Direct Benefit Transfer
DC	Deputy Commissioner
DMIC	Disaster Management Information Centre
DRRO	District Relief and Rehabilitation Officer
EECP	Ehsaas Emergency Cash Programme
EU	European Union
FFW	Food for Work
FGD	Focus Group Discussion
FY	Fiscal Year
GDP	Gross Domestic Product

GED	General Economics Division
GoB	Government of Bangladesh
GOF	Goodness of Fit
GR	Gratuitous Relief
GRS	Grievance Redress System
HH	Household
HIES	Household Income and Expenditure Survey
ICC	Intra-Cluster Correlation
ICT	Information and Communication Technology
ID	Identification
IEDCR	Institute of Epidemiology, Disease Control and Research
ILO	International Labour Organisation
IMF	International Monetary Fund
INR	Indian Rupee
IT	Information Technology
KII	Key Informant Interview
LA	Local Administration
LDC	Least Developed Country
LFS	Labour Force Survey
LG	Local Government
LKR	Sri Lankan Rupee
MDG	Millennium Development Goals
MGNREGS	Mahatma Gandhi National Rural Employment Guarantee Scheme
MoHFW	Ministry of Health and Family Welfare
MIS	Management Information System
MoDMR	Ministry of Disaster Management and Relief
MoF	Ministry of Finance
MoFood	Ministry of Food
MT	Metric Ton
NADRA	National Database and Registration Authority
NGO	Non-Governmental Organisation
NID	National Identity Card
NITI	National Institution for Transforming India
NSAP	National Social Assistance Programme
NSER	National Social-Economic Registry
NSSS	National Social Security Strategy
OMS	Open Market Sales
PDS	Public Distribution System

PIO	Project Implementation Officer
PKR	Pakistani Rupee
PMGKY	Pradhan Mantri Garib Kalyan Yojana
PMJDY	Pradhan Mantri Jan Dhan Yojana
PM-KISAN	Pradhan Mantri Kisan Samman Nidhi
PMO	Prime Minister's Office
PMT	Proxy Means Test
PMUY	Pradhan Mantri Ujjwala Yojana
PPRC	Power and Participation Research Centre
PRI	Policy Research Institute
PSU	Primary Sampling Unit
PTV	Pakistan Television
QR	Quick Response
SDG	Sustainable Development Goal
SMS	Short Message Service
TCB	Trading Corporation of Bangladesh
UNDP	United Nations Development Programme
UNO	Upazila Nirbahi Officer
UP	Union Parishad
USD	United States Dollar
UZP	Upazila Parishad
VGD	Vulnerable Group Development
VGf	Vulnerable Group Feeding
WEF	World Economic Forum



Introduction

1. Introduction

1.1 Background

Bangladesh has achieved commendable success in attaining the targets of the Millennium Development Goals (MDGs); this has boosted its confidence to tackle implementation related challenges associated with attaining the targets of the Sustainable Development Goals (SDGs) by 2030. However, it is apprehended that the ongoing COVID-19 pandemic will leave a far-reaching mark on the development journey of Bangladesh, as also other countries across the globe. The anticipation is that in the least developed countries (LDCs) such as Bangladesh, COVID-19 will exacerbate the pre-existing vulnerabilities, add new ones, and disrupt the pursuit of the SDGs. An estimate by the Citizen's Platform for SDGs, Bangladesh (2020) suggests that due to COVID-19, the number of individuals afflicted by employment vulnerabilities had risen to about 13 million; this was about 20.1 per cent of the latest data available from the labour force survey (LFS 2016-17). CPD (2020) had estimated that COVID-19 had increased the proportion of people living below the national (upper) poverty line to 35 per cent in 2020 from 24.3 per cent in 2016. These new poor are estimated to be about 17.5 million in number. The situation was further aggravated owing to natural calamities in the forms of successive floods and cyclone *Amphan*.

Relief support programmes have long been used as a disaster response tool by the Government of Bangladesh (GoB) to help the poor and vulnerable to mitigate the negative effects. The government had taken several support measures, to be delivered

by the local authorities¹, targeted for the poor and the vulnerable sections of the population, to tackle the aforesaid situation originating from the COVID-19 pandemic. These included the following: free of cost food aid (rice) for those affected by sudden unemployment due to the coronavirus outbreak; direct cash support for selected families to buy dry food, children's food; direct cash transfer to selected vulnerable families nationwide whose income opportunities had narrowed down due to loss of employment opportunities, etc. These steps were indeed in line with the National Social Security Strategy (NSSS) formulated by Bangladesh.² The strategy envisaged that the GoB, through the Ministry of Disaster Management and Relief, would provide food support during and following any disaster (GED, 2015).

In view of the above, local-level government functionaries play a crucial role since they provide 'access' to government services and productive resources and make these available in times of needs. An enabling environment is important for delivering such services in an environment of accountability so that the poor and the marginalised can address their emergency needs. Although it is the government that is primarily accountable for delivering the SDGs, on an aggregate level, the actions by local authorities are critically important in this regard which has also been explicitly mentioned in the SDGs. Integrated community-level strategies are required to deliver at least 12 of the 17 SDGs (barring Goals 9, 12, 13, 14, and 17). The government-provided cash and food support programmes in response to COVID-19 are aligned with the objectives of three specific SDG targets under SDG 1, 2, and 10.³ To recall, according to the constitution of Bangladesh

¹LA include officials from local administration and local government representatives (upazila and union council chairpersons and members).

²NSSS was approved on 1 June 2015 with the long-term vision of building an inclusive social security system for all deserving Bangladeshis. The purpose is to effectively tackle and prevent poverty and inequality and contribute to broader human development, employment and economic growth.

³The targets include SDG 1.3 (Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable); SDG 2.1 (By 2030, end hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round); and SDG

(Article 59(2), the key responsibilities for socio-economic development, including “the preparation and implementation of plans relating to public services and economic development,” have been bestowed with the local administration (LA) and government bodies, particularly the union parishad (UP) and upazila parishad (UZP). Indeed, all national five-year plans have underscored the importance of local government (LG) as a critical institution for improving governance and development in Bangladesh. The right to receive relief-based social security has been enshrined in the constitution of Bangladesh. According to Article 15 (d) of the Constitution of the People’s Republic of Bangladesh, social security is the right of the citizens. Article 15 (d) declares that the State shall be responsible to attain:

“through planned economic growth, a constant increase of productive forces and a steady improvement in the material and cultural standard of living of the people, with a view to securing to its citizens..... the right to social security, that is to say, to public assistance in cases of undeserved want arising from unemployment, illness, or disablement, or suffered by widows or orphans or in old age, or in other such cases”.

In Bangladesh, LAs have been providing a variety of services either through social safety net mechanism or in the form of emergency relief support, both cash or in-kind, to cope with any shocks or natural disasters. However, when it comes to public service delivery to the most marginalised and the most disadvantaged population in Bangladesh, in most cases, the difference between the expectation and reality remains quit palpable. Moreover, people experiencing extreme or moderate poverty generally tend to be deprived of legal rights because they are not organised and lack adequate information. A number of studies have pointed out the various gaps and shortcomings in delivering the safety net and relief support programmes in Bangladesh. Of these, the most commonly observed are inadequacy in allocation and coverage, ‘inclusion’ and ‘exclusion’ errors, leakages, coordination failure among

10.4 (Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality).

the implementing agencies, high administrative costs and inefficiencies in delivery.

To recall, GoB had undertaken two direct transfer relief programmes to mitigate the sufferings of the seriously affected households in response to the devastating floods that occurred in 1998. During the initial period, immediate relief was provided to the affected households under the Gratuitous Relief (GR) programme. Evaluations of these programmes revealed a number of concerns that included low coverage, inclusion and exclusion errors, and low value of average benefits. Nevertheless, the two programmes had indeed been helpful in averting any possible major food crisis (GED, 2015).

The Eighth Five Year Plan (8FYP), which talks of alignment with the goals articulated in the NSSS, has urged for strong efforts towards full implementation of the stimulus and relief package announced in April-June 2020 (GED, 2020). To this end, the 8FYP recommended transferring an additional 2-3 per cent of GDP as income transfer on a temporary basis to assist the poor and vulnerable families who had lost income and employment due to COVID-19. In light of policy directions in the 7FYP and 8FYP, a number of programmes have been implemented in year 2020 in view of the COVID pandemic to mitigate the suffering of the people. An assessment of these programmes is important to understand the efficacy of public service delivery in times of crisis with a view to improving the outcomes in future.

1.2 Objective of the study

The current study focuses on public service deliveries from the perspective of the marginalised citizens of the country. It goes without saying that those who tend to be 'left-behind' are in a more vulnerable situation when affected by the COVID-19 type scenario. In view of the above, the current study aims to assess the effectiveness of delivering COVID-19 targeted support programmes by identifying the gaps between policies and practices and areas of improvement of the delivery of services. To this end, the current study focuses on three major support programmes in view of the COVID-19 pandemic. These are (i) cash support of BDT 2,500 each to 5 million households, (ii)

food (rice) distribution, and (iii) cash support under Gratuitous Relief (GR)⁴. The key objective of the study is to assess the effectiveness of delivery mechanisms of the aforementioned programmes by public delivery agents at the local level. The study intends to contribute to the implementation of SDG 16.6 (Develop effective, accountable, and transparent institutions at all levels from the broader perspective of advancing the causes of accountability and good governance in the development process of Bangladesh).

In undertaking the aforementioned exercise, the present study seeks to address the following research questions:

- i. Have adequate activities (e.g. awareness campaigns, mass media, community meetings, etc.) been undertaken for the dissemination of information related to the three selected programmes in the selected areas?
- ii. How were the beneficiaries selected (e.g. poverty targeting, proxy-means test, community-based targeting, geographic targeting, self-selection)? Has there been any mistargeting or selection bias⁵ involved in the process?
- iii. Have eligibility criteria been strictly followed during beneficiary selection? Are the target population able to correctly identify the eligibility criteria? Is the beneficiary list publicly available in the survey area?
- iv. Have the beneficiaries received the full amount of transfers that had been allocated? Have there been any error or leakages?
- v. How much transaction costs (e.g. number of visits, time spent, money paid, paper work required, etc) the selected families had to bear for purposes of application, enrolment and payment receipt?

⁴The Humanitarian Assistance Implementation Guideline (2020) of Bangladesh particularly specifies the guidelines to follow for distributing the GR (rice) and GR (cash) relief. There is no such formal guideline publicly available for the BDT 2,500 cash support programme. However, there are some common features for all of these programmes, particularly the targetted population (Byron, 2020).

⁵Mistargeting may refer to 'exclusion' or 'inclusion' errors arising from budgetary constraints, weak information bases, and elite capture or capture by dominant political classes (Rahman, Choudhury, and Ali, 2011).

- vi. How are beneficiaries of selected cash support programmes receiving payments (e.g. through bank deposits, mobile banking)? How long it takes to receive the payments? Is there any technological error involved in the case of receipt of payments from mobile financial services?
- vii. Is the management information system (MIS) being adequately taken advantage of (e.g., for automatic cash transfer and updating beneficiary information changes)? Are the designated hotline/mobile numbers being used adequately?
- viii. What is the nature of systemic control mechanisms (e.g., household information verification, database cross-checks, telephone hotlines)?
- ix. Is there a mechanism for monitoring the involvement of local dealers, payment agencies and tag officers in the delivery process?
- x. Is there an established 'grievance redress' mechanism in place? How long does it take to resolve a complaint after this is lodged by a beneficiary?

1.3 Layout of the report

Following the introduction, Chapter 2 presents the analytical framework and the methodologies used to undertake the study. Chapter 3 discusses the lessons and experiences of delivering COVID-targeted relief and humanitarian support in South Asian countries. Chapter 4 presents the key findings of the study. Chapter 5 presents the determinants of the quality of relief services delivery using quantitative technique. Chapter 6 concludes with a summary of findings and recommendations.



**An Analytical Framework to
Assess the Effectiveness
of COVID-Targeted
Relief Programmes**

2. An Analytical Framework to Assess the Effectiveness of COVID-Targeted Relief Programmes

2.1 Results chain of safety net programmes and scope of the study

Results chains can be useful to explain how the programmed outcomes of a project/programme can be attained through a logical sequence involving inputs, activities, and outputs as it considers behavioural processes as well as external factors. These are also helpful to establish the links between programme activities and outcomes. Results chains contribute to trace and track programme implementation by associating specific outputs to specific inputs and assessing whether the concerned intervention is delivering the envisioned results (Rubio, 2011).

For a cash assistance programme, a simplified traditional results chain framework may include four stages: inputs, process, output, short-term outcomes, and long-term outcomes (Rubio, 2011). Table 1 puts forward the four stages mentioned above in a summarised form.

The aforesaid four stages are associated with the implementation of several SDGs (Figure 1). The input stage is linked with SDG 1.3 (Implement nationally appropriate social protection systems and measures for all, including floors, and by 2030 achieve substantial coverage of the poor and the vulnerable) and SDG 10.4 (Adopt policies, especially fiscal, wage and social protection policies, and progressively achieve greater equality).

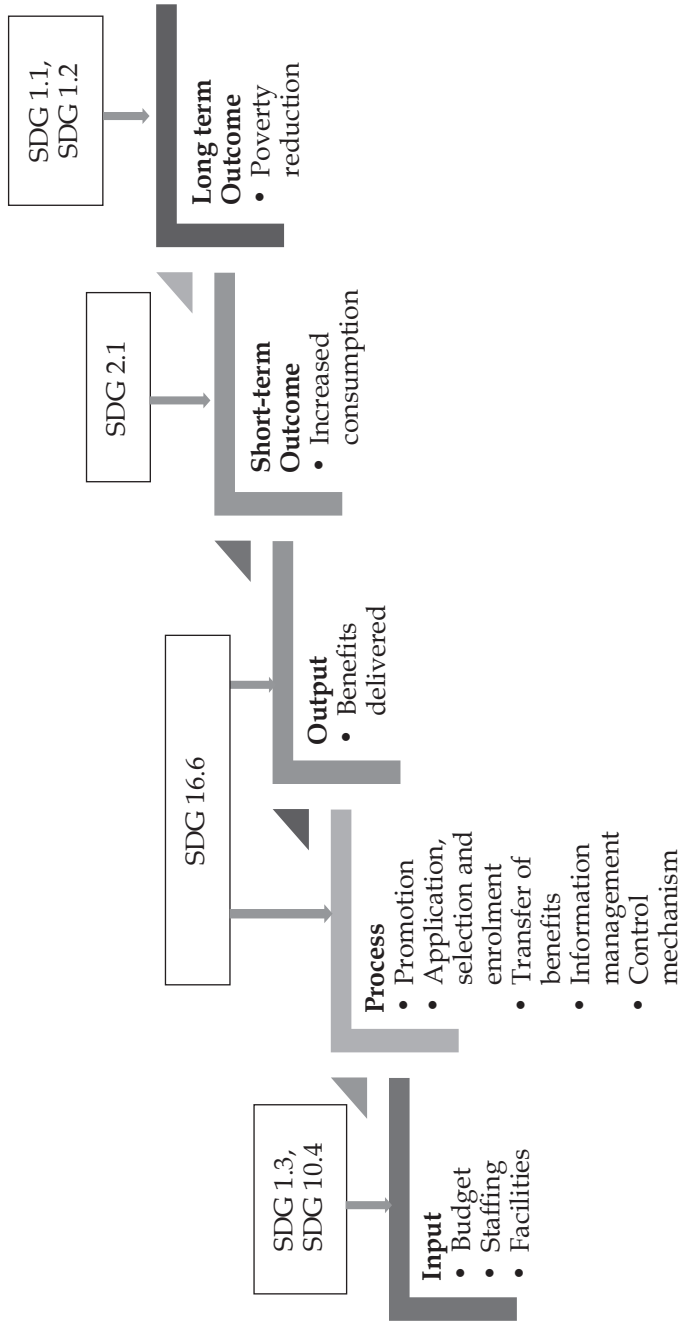
The governance-related issues in the process and output, which are associated with the following two stages of the results chain, are linked to SDG 16.6 (Develop effective, accountable, and transparent institutions at all levels). The outcome stage can be divided into two phases: short term and long term. Short-term outcome can contribute to the attainment of SDG 2.1 (End hunger and ensure access by all people, in particular the poor and people in vulnerable situations, including infants, to safe, nutritious and sufficient food all year round). Similarly, the long-term outcome can contribute to SDG 1.1 (Eradicate extreme poverty for all people everywhere, currently measured as people living on less than USD1.25 a day) and SDG 1.2 (Reduce at least by half the proportion of men, women and children of all ages

Table 1 Four stages of traditional results chain

Stage	Definition
Inputs	Inputs include relevant personnel from implementing agencies, the budget allocated for the intervention and the facilities from where the programme operates.
Processes/ Activities	Processes/activities cover all operational procedures necessary for implementing a programme which include, inter alia, outreach and application, beneficiary targeting and selection, payment delivery and periodic eligibility reassessment.
Outputs/ Applications	Outputs/applications are goods and services delivered through the programme activities.
Outcomes	Outcomes are the expected changes or impacts which are planned to be generated as a result of programme activities and outputs. For instance, the main outcomes of a social safety net programme could be improved household consumption in the short term and poverty alleviation in the long term. Besides programme activities, outputs and outcomes can also be influenced by other factors such as the economic situation of a country, and individual behaviour, and this need to be kept in mind.

Source: Authors' elaboration based on Rubio (2011).

Figure 1 Results chain of safety net programmes and linkages with different SDGs



Source: Adapted from Rubio (2011).

living in poverty in all its dimensions according to national definitions).

The current study did not cover all the aforementioned four stages of the results chain. The study only focused on the process activities and outputs involving the selected support programmes.

2.2 Pillars and performance indicators for assessing the effectiveness of process and outputs of selected COVID-19 targeted relief support programmes

As was noted, the study aims to assess the effectiveness of the relief programmes through identifying the gaps between policy and practice. To this end, the study identifies five pillars which include a total of 14 performance indicators following the framework articulated in Rubio (2011). The five pillars and the associated indicators are presented below.

Pillar I: Coverage Strategy and Promotion

Pillar I consists of two performance indicators that include:

1. *Consistency between coverage strategy and actual coverage.* This indicator assesses the uniformity between coverage strategy and the number and type (rural/urban, male/female) of beneficiaries. In other words, it demonstrates the gap between the intended number or type of beneficiaries and the actual number or type of beneficiaries that have been covered in practice under a certain scheme.
2. *Adequacy of activities and mechanisms for information dissemination.* This involves an assessment of the adequacy of activities and mechanisms for spreading information among beneficiaries for a certain scheme. In other words, it demonstrates the extent to which various activities or mechanisms such as awareness campaigns, mass media, and community meetings have been undertaken for alerting people as regards a particular scheme.

Pillar II: Application, Selection, and Enrolment

The performance of Pillar II can be assessed by evaluating the performance of four indicators. These include:

1. *Adequacy of targeting.* This refers to methods as to how beneficiaries are selected or targeted for a relief support scheme in a selected area. It answers the question of how the beneficiaries have been selected for a certain scheme. The basis of the targeting may include poverty targeting, community-based targeting, geographic targeting, and proxy means test or self-selection.
2. *Effectiveness of beneficiary selection or targeting.* This indicator measures potential gaps in targeting. That is, whether there has been any mistargeting or selection bias in the targeting process or whether the targeting has involved any 'inclusion' or 'exclusion' errors.
3. *Degree of transparency of eligibility criteria.* This indicates the extent to which beneficiaries can correctly identify the eligibility criteria for a certain relief support programme in the selected areas. The degree of transparency is associated with the public availability of information related to eligibility criteria in the selected areas where relief support is being provided. This indicator also measures whether the eligibility criteria have been strictly followed during beneficiary selection or there has been deviation or bias. If the eligibility criteria are strictly followed and beneficiaries can accurately identify their eligibility criteria, then it may be claimed that the degree of transparency of eligibility criteria is higher.

Pillar III: Transfer/Receipt of Benefits

Under the third pillar, there are four indicators which are as follows:

1. *Proportion of total transfers that are lost due to error or leakages.* This indicator assesses whether the beneficiaries have received the full amount of transfers that were allocated for them or there has been any leakage or error for which they could not receive the full amount of transfers. In other words, it measures the gap between the amount of transfers

the beneficiaries have received and the amount of transfers that have been allocated for them (Van Stolk & Tesliuc, 2010).

2. *Average transaction cost for receiving the benefits.* This indicator measures the average transaction costs of households for receiving benefits. That is the total number of visits, time spent, money paid, paperwork that the selected households, on average, require for payment receipt purposes. The reason behind this is that any additional monetary cost may reduce the interest of the potential beneficiaries in receiving the benefits. So, the less is the average transaction cost, the better is the participation of the beneficiaries.
3. *Average time for receiving benefits.* This refers to the average time taken to receive payments under a cash support programme. It depends on the designated channel of payments and errors associated with it. Any technological errors involved in the payments receipt process can raise the time for receiving benefits. Mobile financial services are more likely to suffer from this kind of trouble.
4. *Adequacy of benefits.* This indicator tries to capture whether the benefit is adequate or not to mitigate the crisis based on the perception of beneficiaries. It also encourages the beneficiaries to suggest the amount of benefits or transfers which they think would have been adequate and rational.

Pillar IV: Information Management

1. *Degree of use of MIS for transferring benefits and/updating changes in beneficiaries' information.* This indicator measures the degree of use of the Management Information System (MIS) for automatic cash transfer or for updating changes in beneficiaries' information, for instance, change of household composition (newborn/deaths) or change of address. MIS refers to a large infrastructure used by an entity where Information Technology (IT) plays the key role in the collection and transmission of data (Segal, 2019). Adequate use of MIS also refers to the appropriate use of IT for keeping and updating payment record and beneficiaries' information (Rubio, 2011). Proper use of MIS makes the process more automated, which helps control and analyse the operation more efficiently rather than the pure manual process.

2. *Percentage of beneficiaries using the designated hotline numbers.* This measures the percentage of beneficiaries using the designated hotline numbers or mobile numbers for receiving benefits under a particular relief support programme. This indicator assesses whether the designated helpline numbers have been adequately used for receiving benefits or not.

Pillar V: Control Mechanism

1. *Degree of systematic use of control mechanisms.* This indicator assesses the type and adequacy of mechanisms for verifying information submitted in the application process. Verification modalities may include database cross-check, random house visits (Rubio, 2011), telephone hotlines, etc. Thus, the indicator measures the degree to which different tools are available for households' information verification.
2. *Adequacy of monitoring and supervision.* This refers to the availability and adequacy of the monitoring mechanism. That is, how adequately any mechanism is available for monitoring the involvement of third parties in the delivery process. Third parties include local dealers, payment agencies, etc.
3. *Percentage of complaints that are resolved.* This indicator looks at the availability of any 'Grievance Redress' mechanism and assesses the time required to resolve a complaint after this was lodged by a beneficiary. It also measures the percentage of complaints that are resolved. The duration of resolving a complaint helps understand the operational effectiveness of a relief support programme.

Table 2 Pillars and performance indicators

Pillars	Performance indicators
Pillar I: Coverage strategy and promotion	1. Consistency between coverage strategy and number and type of beneficiaries (rural/urban, male/female, etc.)
	2. Adequacy of activities and mechanisms for information dissemination (awareness campaigns, mass media, community meetings, etc.)

(Table 2 contd.)

(Table 2 contd.)

Pillars	Performance indicators
Pillar II: Application, selection and enrolment	1. Adequacy of targeting 2. Effectiveness of beneficiary selection or targeting
	3. Degree of transparency of eligibility criteria (e.g., Percentage of the target population who correctly identify the eligibility criteria for receiving relief supports)
Pillar III: Transfer/ receipt of Benefits	1. Proportion of total transfers that are lost due to error or leakages
	2. Average transaction cost for receiving the benefits
	3. Average time taken to receive the benefits 4. Adequacy of benefits
Pillar IV: Information Management	1. Extent of use of MIS for transferring benefits and/updating changes in beneficiary information (e.g., household composition (newborns or deaths) or address changes) 2. Percentage of beneficiaries using the designated hotline numbers
Pillar V: Control Mechanisms	1. Degree of systematic use of control mechanisms (household information verification, database cross-checks, telephone hotlines, etc.)
	2. Adequacy of monitoring and supervision (local dealers, payment agencies)
	3. Percentage of complaints that are resolved

Source: Adapted from Rubio (2011).

2.3 Methodology, survey design and data collection

For assessing the gaps between policies and practices of the selected service delivery process, the study has deployed both quantitative and qualitative tools. The study primarily relies on descriptive statistical analysis for answering the research

questions. Adapting the framework of Rubio (2011), it undertakes a gap analysis (between policies and practices) by assessing the performance of 14 indicators under five pillars related to the delivery process and the actual outputs delivered. The study also identifies the weakest link in this connection. Multi-variant analysis was carried out on the basis of collected data with respect to respondents' ethnicity, gender, and geographical location (rural, urban, districts, upazilas, unions, and wards). However, the study also carried out inferential statistical analysis in the form of regression, association test (Chi-square test, t-test) and correlation test to answer such questions as which were the factors that most affected the quality of services delivered.

In order to carry out the analysis, the study has made use of both primary and secondary data sources. The study undertakes a detailed review of national and international literature related to the contextualisation of SDGs-focused relief supports in view of the COVID-19 in selected areas. Various national household surveys conducted by the Bangladesh Bureau of Statistics (BBS) as also administrative data kept with relevant ministries and departments served to identify the socioeconomic status of selected districts, list of beneficiaries, allocations for different support packages and distribution channels. Secondary literature, policy documents and data have been consulted for setting the standards or benchmarks specifically for the indicators under Pillar I and Pillar II.

To generate pertinent information, a survey was conducted with samples drawn from among recipients and providers of the COVID-19 targeted relief supports (both cash and in-kind) in selected districts. Data were collected with an aim to measure providers' performance based on clients' experience with service delivery. Through beneficiary household surveys, data were collected on individuals' knowledge, perceptions and practices, particularly in view of assessing the service quality for at least 10 indicators under Pillars I, II and III. Since relief supports were provided for multiple disasters in the course of the year, to collect information on COVID-specific relief supports, three separate time periods or phases are included in the questionnaire: i) before April 2020; ii) April-June 2020 (when

COVID-targeted relief supports were distributed in 2020); and iii) Survey period, i.e. January-February 2021.

The qualitative assessment involved focus group discussions (FGDs) and key informant interviews (KIIs) in the selected areas. This information complemented the data generated for at least four performance indicators under Pillars II and III. KIIs were conducted with the participation of service providers with a view to assessing the supply-side constraints and eliciting information for at least six indicators under Pillars I, IV and V. KIIs were conducted with intermediaries for acquiring important information for at least three indicators under Pillars I, II and V. An expert group consultation with the participation of academia, policymakers, and international development partners was held to avoid duplication, and validate the research questions and the methodology to be applied.

The study followed an integrated research approach that included both qualitative and quantitative tools and techniques. All data, qualitative and quantitative, were disaggregated by ethnicity, location, age, and sex.

Three steps are generally involved in calculating the required sample size for statistically valid estimates. The first is to determine the level of precision that is considered desirable and feasible. The second step, which is also related to the sampling process, is the adjustment for the design effect. Since the sample selection was made by (multi-stage) clustered sampling, the design effect was adjusted based on intra-cluster correlation. Finally, since the sample size was not more than 5 per cent of the total target population, finite population correction was not necessary in this particular case.

To calculate the sample for the beneficiary households, the approach for calculating sample size requirement for binary estimates (i.e. proportions) was used from a target population-

$$n = \frac{pqz^2}{D^2}$$

where, n stands for the sample size, p is the proportion or percentage estimate expected for specific indicators, q is the proportion who do not share the characteristics (i.e. $p=1-q$), z is the z-statistics for specific confidence level, and D is the absolute

level of precision. Using 0.2 (20.1 per cent) for p , and 95 per cent confidence level (i.e. z-score of 1.96) and absolute precision of 0.05 (i.e. 5 percentage points). This yielded the representative sample size of 247.

The 2nd step for this sample size calculation involved adjustment for design effect. As a multi-stage cluster sampling was used, the design effect is required to be adjusted to avoid sampling bias. The design effect estimate is done by multiplying the sample size calculated in step one with. $Deff = 1 + (M - 1) \times ICC$. Here M stands for the number of observations in each of the sampled clusters (assuming equal numbers), and ICC (intra-cluster correlation) is the level of correlation (or similarity) in the outcome indicator among the observations within the cluster. By assuming an ICC of 0.02 (i.e. relatively low level of correlation) and 25 observations (or households) per cluster, the design effect came to 1.48. Multiplying the sample size 247 with design effect 1.48, a sample size of 366 for each population group or stratum was derived. Considering a total of 7 (seven) employment sub-sectors/clusters to cover people from the various sectors of the economy, a sample size of 2,558 was desired. A total of 104 primary supply units (PSUs) were selected from the LFS Frame, while 25 households were selected from each PSU. This provided 2,600 households for the survey carried out for the study. National estimates that include all strata considered population weight factors based on labor force survey (LFS) and the stratification used in the sampling.

Data collection protocol and quality of collected datasets were strictly maintained by the concerned survey organisations. In addition, the data management steps (editing, coding, merging, etc.) were strictly followed. The dataset was checked for inconsistencies in data, and all STATA codes needed to reproduce the results were stored.

A range of qualitative approaches, including focus group discussions (FGDs), and key informant interviews (KIIs) were deployed as part of the survey.

A total of 24 FGDs were conducted as part of the present study. Participants included both beneficiaries (male and female) and eligible non-beneficiaries of the government support programmes

in eight districts of Bangladesh. In addition, a total of 53 KIIs were conducted with different stakeholders. These included Deputy Commissioners, members of COVID-19 prevention committees at district and upazila levels, local government representatives (i.e., upazila chairman, UP chairman, members), Upazila Nirbahi Officer (UNO), District Relief and Rehabilitation Officer (DRRO), Disaster Management Information Centres (DMIC) at the national level, and representatives from NGOs, CBOs, CSOs, and community leaders (i.e., Imams, School teachers).



Relief Supports in Response to COVID-19: Learnings from Country Experiences

3. Relief Supports in Response to COVID-19: Learnings from Country Experiences

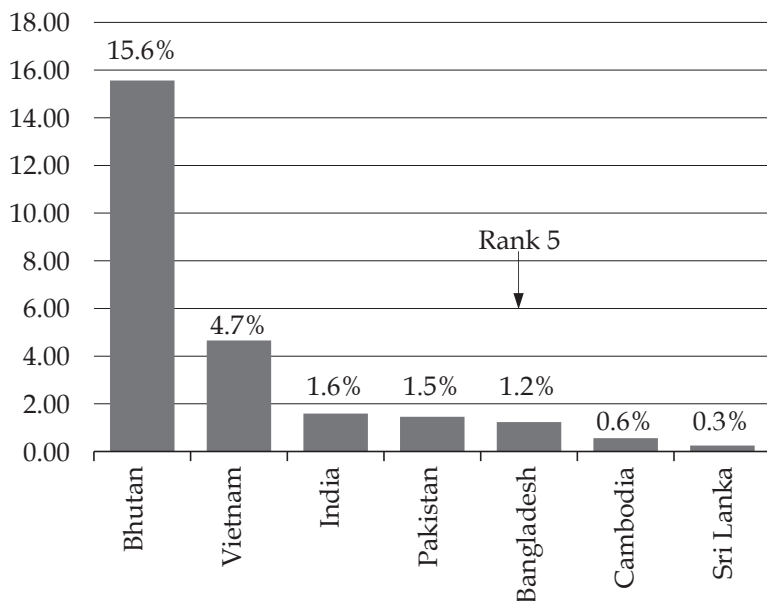
3.1 A general overview of relief support programmes in South Asia

COVID-19 pandemic is proving to be one of the most difficult tests faced by humanity in modern history. It has overwhelmed the health systems and damaged economies at an unprecedented pace and scale. Governments worldwide have taken various measures in view of this, either by expanding the existing social assistance programmes both vertically and horizontally and/or by introducing new social assistance programmes to provide additional coverage to vulnerable groups affected by the COVID-19 (IMF, 2020). In this regard, Bangladesh was ranked 5th and 4th respectively among the South Asian countries⁶ in terms of the size of the government's non-health income support as a share of GDP⁷ and per capita measure (Figures 2 and 3). Figure 2 demonstrates that Bangladesh provided 1.2 per cent of GDP as non-health income support (which includes cash transfers) following the outbreak of COVID-19; it is also seen that the share was significantly lower than its neighbouring countries such as Bhutan (15.6 per cent) and Vietnam (4.7 per cent). However, the share in the case of Bangladesh was similar to India and Pakistan, whose non-health income support was equivalent to 1.6 per cent

⁶No data was available for Maldives and Nepal and hence these could not be considered for comparison.

⁷All the measures have been calculated based on the GDP value of 2019.

Figure 2 Government income support as a percentage of GDP for South and South-East Asian countries



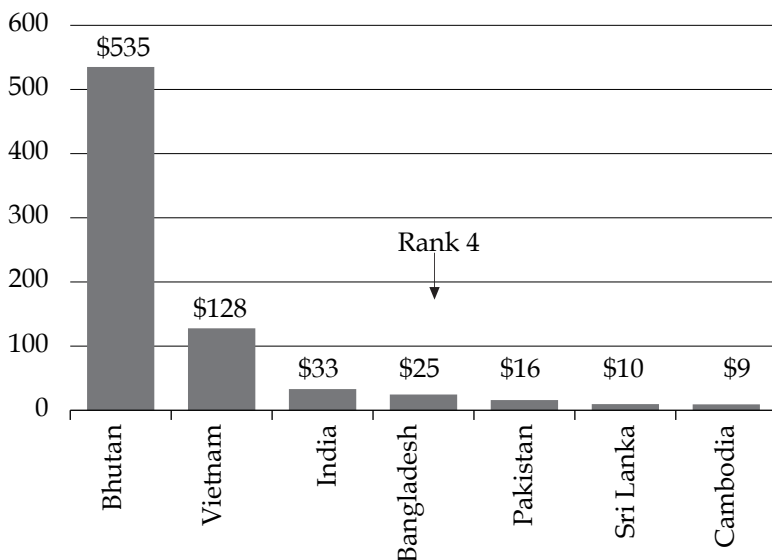
Source: Authors' estimation based on ADB (2020b).

and 1.5 per cent of their GDP, respectively. Cambodia and Sri Lanka were the laggards in this regard; only 0.56 per cent and 0.25 per cent of their GDP was allocated for non-health income support, respectively.

In terms of per capita public transfer of non-health income support, Bangladesh, on average, provided USD24.6 to individuals and households; its position was between India (USD33.1) and Pakistan (USD15.9). The per capita transfer value was significantly higher for Bhutan though (USD535.10) and also Vietnam (USD127.75). Sri Lanka had the lowest per capita transfer (USD9.63), followed by Cambodia (USD9.23).⁸

⁸The population size of all the South Asian countries, according to their ranking, is as follows: India: 1,353 million; Pakistan: 212 million; Bangladesh: 161 million; Vietnam: 96 million; Nepal: 28 million; Sri Lanka: 22 million; Cambodia: 16 million; Bhutan: 0.8 million; and Maldives: 0.5 million (ADB, 2020).

Figure 3 Per capita transfer (USD) of government income support for South and South-East Asian countries



Source: Authors' estimation based on ADB (2020b).

3.2 Review of GoB's COVID-targeted relief supports

The GoB has taken several actions to limit the spread of the novel COVID-19. The Ministry of Health and Family Welfare (MoHFW) and Institute of Epidemiology Disease Control (IEDCR) are working jointly, and control rooms have been activated in the Prime Minister's Office (PMO) and the Health Ministry's office in this regard.

Relief Initiatives pursued in Bangladesh to address COVID-19

Open Market Sales (OMS)

At the initial stages of COVID-19, special OMS programmes were introduced following the Ministry of Food's directives of April 1, 2020. The government had fixed the price of BDT 10 per kilogram of rice at the consumer level when this was sold through OMS while the market price being BDT 30 (MoFood,

2020a). In view of the COVID-19, under changed circumstances, a new notice regarding OMS activity was introduced on April 5, 2020; rules and regulations to be followed during the implementation of the special OMS programme were issued (MoFood, 2020b). Trading Corporation of Bangladesh (TCB), a state-run agency, had intensified its sale of edible oil, sugar, and lentil under its OMS scheme since March 26, 2020, when the 10-day public holiday was announced by the GoB (Irani, 2020).

Relief support programmes

In view of COVID-19, humanitarian supports such as GR (rice) and GR (cash) were provided to 64 districts of the country with a view to give succour to daily wage earners, day labourers, rickshaw pullers, van drivers, transportation labourers, restaurant workers, street hawkers, tea hawkers, beggars, vagabonds, following the directives from the Prime Minister's Office (MoDMR, 2020a). Until March 30, 2020, the total allocation of GR (rice) and GR (cash) was 39,667 metric ton and BDT 11.24 crore, respectively (MoDMR, 2020b). As of September 30, 2020, a total of 2,11,017 metric ton GR (rice) and BDT 95.84 crore GR (cash) have been disbursed as relief among 496 Upazilas (MoF, 2020). The government has also paid attention to those who belonged to the low-income group and were embarrassed to receive relief support standing in line. It was instructed to prepare a priority list of these people for the delivery of relief support to their households (MoDMR, 2020c). A 31-point guideline regarding healthcare, quarantine, law and order, relief distribution and corruption was issued by the GoB on 3 April 2020. The directive stated about the continuation of existing safety net programmes, maintaining no/zero tolerance as regards anomalies and corruption regarding implementation of relief works (MoDMR, 2020d). According to a circular published on 6 April 2020 by the Ministry of Social Welfare (MoSW), the Ministry has allocated BDT 3 crore from its own funds and BDT 22.87 crore from Bangladesh National Social Welfare Council's funds to be distributed among the poor, disabled and needy through food aid, financial support, and other forms of support at the field level in view of the COVID-19.

Expansion of the existing safety net programmes

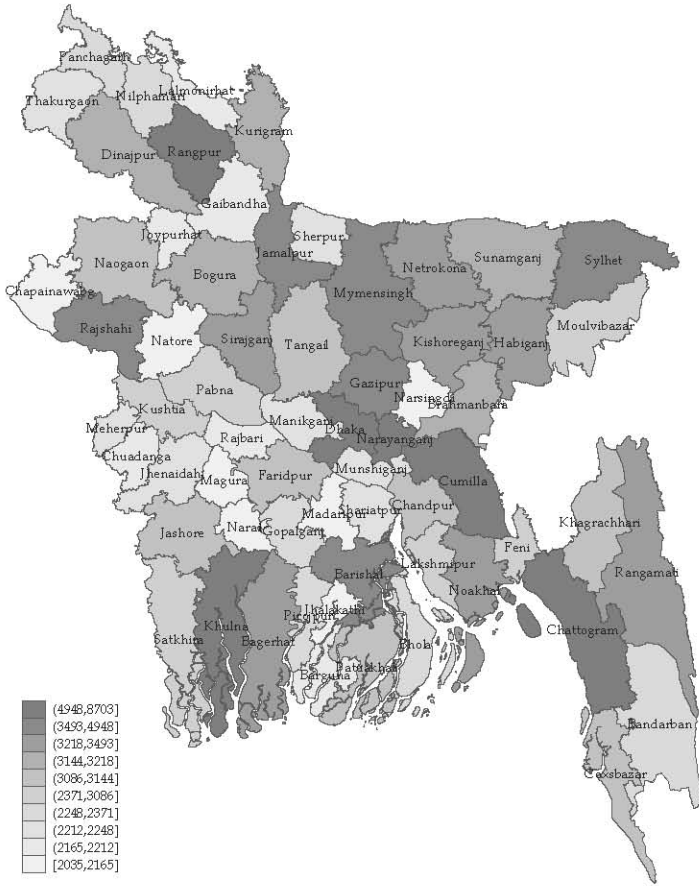
GoB has announced a range of measures in support of the marginalised people, through the extension of old ones and the introduction of new ones. Vulnerable Group Development (VGD) and Vulnerable Group Feeding (VGF), and food support were extended for six months under social safety net programmes at the district levels. However, guidelines were not issued for expansion and ‘scaling up’ of the VGD and VGF programmes. It is to be noted that the government had reduced, albeit not to any significant extent, social safety net allocation in FY2020 compared to that of FY2019. Provision of assistance through the “Return-to-Home” (Ghore Fera) programme was announced by the Bangladesh Government under which homeless and landless people were to be provided homes free of cost, and cash and food assistance were to be provided for six months (Islam, 2020).

Allocation of GR (rice)

The geographical heat-map shows that big cities and divisional districts such as Dhaka, Chattogram, Cumilla, Narayanganj, Khulna, Rangpur, Rajshahi, Sylhet, Mymensingh, Barishal, Gazipur, Jamalpur, and Bagerhat had received the highest amount of GR (rice) allocation; the allocations ranged from 3,493 to 8,703 metric ton. On the other hand, Shariatpur, Thakurgaon, Manikganj, Meherpur, Munshiganj, Jhenaidah, Sherpur, Lalmonirhat, Gaibandha, Barguna, Rajbari, Joypurhat, Chuadanga, Madaripur, Natore, Chapai Nawabganj, Jhalakhati, Narshindi, and Narail districts had the lowest amount of GR (rice) allocation; the allocation ranged from 2,035 to 2,248 metric ton of GR (rice) (Figure 4).

Figure 4 District-wise allocation of GR (rice)

(in MT)



Source: Authors' elaboration.

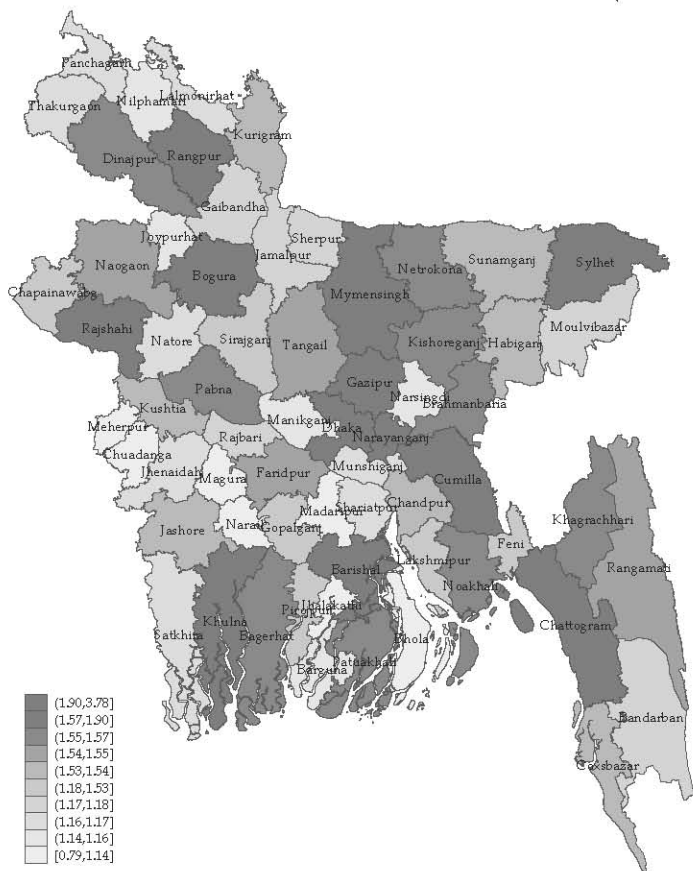
Allocation of GR (cash)

A similar scenario may be observed as regards the allocation of GR (cash). Dhaka, Chattogram, Cumilla, Narayanganj, Khulna, Rangpur, Rajshahi, Sylhet, Mymensingh, Barishal, Gazipur, Jamalpur, Bagerhat, Netrakona, Rangamati, Noakhali, Habiganj, Kishoreganj, Sirajganj, Bogura, Brahmanbaria, Sunamganj, Dinajpur, Kurigram, and Jashore districts had the highest

allocation of GR (cash), ranging from BDT 1.6 crore to 3.8 crore. On the other hand, Nilphamari, Bhola, Bandarban, Shariatpur, Thakurgaon, Manikganj, Meherpur, Munshiganj, Jhenaidah, Sherpur, Lalmonirhat, Gaibandha, Barguna, Rajbari, Joypurhat, Chuadanga, Madaripur, Natore, Chapai Nawabganj, Jhalakhati, Narsingdi, Narail, and Magura districts had the lowest allocation of GR (cash), ranging from BDT 0.79 crore to 1.17 crore (Figure 5).

Figure 5 District-wise allocation of GR (cash)

(in BDT Crore)



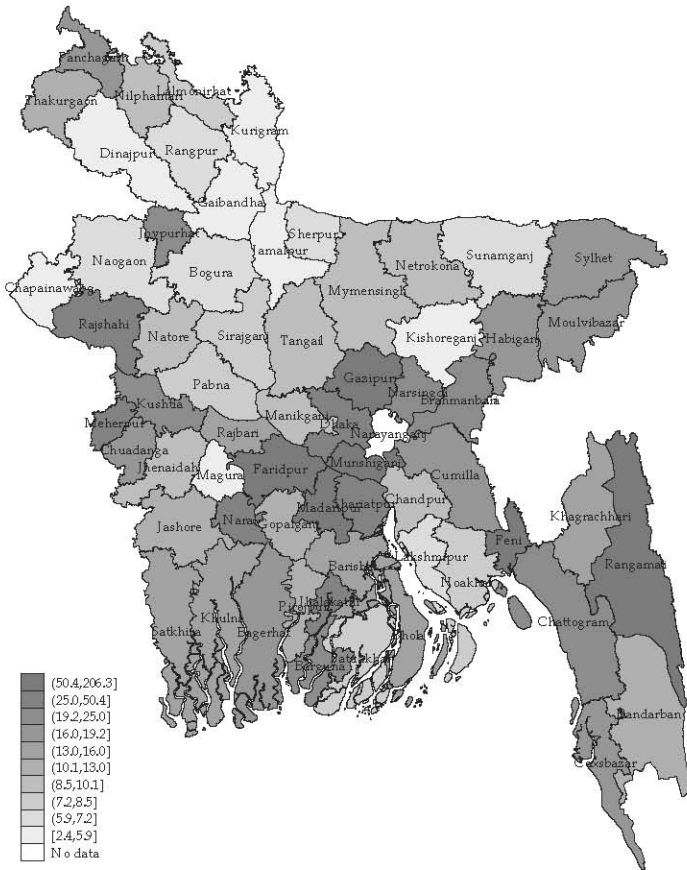
Source: Authors' elaboration.

Allocation of GR (rice) per extreme poor

Madaripur, Munshiganj, Gazipur, Feni, Rangamati, Faridpur, Narail, Dhaka, Shariatpur, Jhalakhati, Meherpur, Rajshahi, and Joypurhat districts had the highest amount of GR (rice) allocation per extreme poor, ranging from 25.0 to 206.3 kg of GR (rice). On the other hand, Pabna, Lakshmipur, Bogura, Sherpur, Sunamganj, Naogaon, Rangpur, Magura, Chapai Nawabganj, Jamalpur, Kishoreganj, Gaibandha, Kurigram, and Dinajpur

Figure 6 District-wise allocation of GR (rice) per extreme poor

(in Kg)



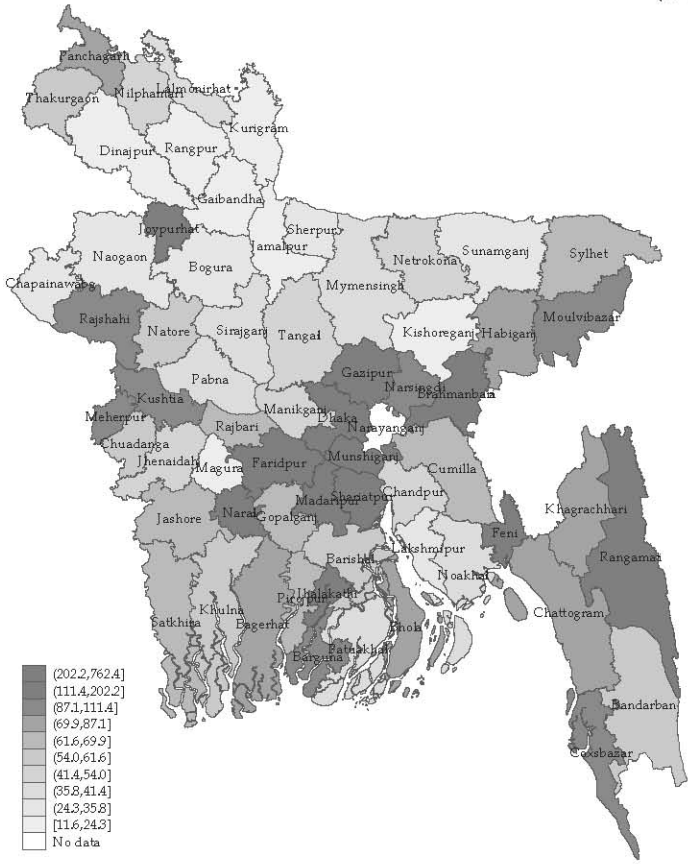
Source: Authors' elaboration.

districts had the lowest amount of GR (rice) allocation per extreme poor, ranging from 2.4 to 7.2 kg of GR (rice) (Figure 6).

GR (cash) allocation per extreme poor

Madaripur, Munshiganj, Gazipur, Feni, Faridpur, Rangamati, Shariatpur, Narail, Dhaka, Joypurhat, Brahmanbaria, Jhalakhati, and Kushtia districts had the highest amount of GR (cash) allocation per extreme poor, ranging from BDT 111.4 to 202.2. On the other hand, Patuakhali, Lalmonirhat, Sirajganj,

Figure 7 District-wise allocation of GR (cash) per extreme poor (in BDT)



Source: Authors' elaboration.

Mymensingh, Noakhali, Pabna, Sherpur, Bogura, Lakshmipur, Naogaon, Sunamganj, Chapai Nawabganj, Rangpur, Magura, Gaibandha, Kishoreganj, Jamalpur, Kurigram, and Dinajpur districts had the lowest amount of GR (cash) allocation per extreme poor, ranging from BDT 11.6 to 41.4 (Figure 7).

3.3 A comparative assessment of selected relief packages of four South Asian countries

Country specific relief schemes

GoB had allocated cash support of BDT 2,500 each to 5 million households along with three types of transfers: 1) GR (cash): cash and cash support for necessary materials such as pulses, oil, salt, molasses, chira, baby food, potato, vegetables required for living life under special circumstances. 2) GR (rice): 20 kg rice grain per household each month. 3. Baby Food (cash) as COVID-targeted Humanitarian Assistance Programme.

The Indian government provided INR 1.70 trillion (approximately USD23 billion) relief package under the relief programme Pradhan Mantri Garib Kalyan Yojana (PMGKY) to support over 320 million individuals (30 per cent of India's population) through direct cash transfer (Soyer & Bacil, 2020; World Bank, 2020a) and many more individuals with other forms of support in view of the massive economic turmoil caused by the COVID-19. This amount has been disbursed under a number of pre-existing schemes with provisions of additional foodgrains and direct cash transfer to women, farmers and construction workers; insurance to health workers; and benefits to formal sector workers in general (World Bank, 2020a).

Pakistan launched the 'Ehsaas Emergency Cash'⁹ Programme (EECP) to provide a total of PKR 203 billion cash (USD1.23

⁹The EECP was established under the new multi-sectoral poverty alleviation framework of Pakistan Government, 'Ehsaas', which was built in 2019 with an in-built digital infrastructure (Nishtar, 2019). The digital infrastructure included new biometric payment system, and a desk-based-self-registration system. Also, a demand side SMS and web service were developed as part of the new infrastructure development. A new wealth-profiling data analytics mechanism was established to exclude serious inclusion errors and false claimants in social protection lists using unique identity number as the peg.

billion) (Nishtar, 2020) to approximately 10 (Kidd et al., 2020a) to 12 million households (67 million individuals) who were at risk of extreme poverty (Gentilini et al., 2020); 10 to 12 million beneficiary households included 5 million existing 'Ehsaas Kafaalat' beneficiaries (all women) and 11.9 million new, temporary beneficiaries who were either uncovered or ineligible before the pandemic; the beneficiaries also included minority and transgender citizens (Arif & Markhof, 2020). Under the EECF, PKR 12,000 was allocated to each household on average (World Bank, 2020b).

In Sri Lanka, the government provided support of LKR 55 billion (USD 0.29 billion)¹⁰ as government's emergency support in response to COVID-19 under the country's biggest pre-existing social assistance or cash transfer scheme - 'Samurdhi'¹¹ and a new scheme particularly focused on self-employed workers affected by the crisis. The existing social assistance schemes 'Samurdhi' was expanded both horizontally and vertically to include people who were on the schemes' waiting list and by increasing the amount of payment for some of the existing 'Samurdhi' beneficiaries (Franciscon & Arruda, 2020).

For pillar-wise comparison, 'COVID-targeted Humanitarian Assistance Programme' of Bangladesh, 'PMGKY' of India, 'EECF' of Pakistan and 'Samurdhi' programme of Sri Lanka have been considered. Implementation guidelines of Bangladesh's COVID-targeted three selected relief packages were consulted for this analysis. In this regard, pillar-wise comparisons are limited to only those countries and indicators where Bangladesh had available information in its guideline.

¹⁰LKR 1= US\$ 0.005 (based on USD against LKR exchange rate in April, 2020).

¹¹Samurdhi is a social assistance scheme or cash transfer programme under Samurdhi poverty alleviation programme, which was introduced by the Government of Sri Lanka in 1995. The Samurdhi programme operates through two main components: 1. Relief programme, which includes cash transfers (subsidy approach), and 2. Employment programme. The relief programme is the social assistance scheme that provides cash to different groups of people under various sub-schemes (Ramos et al., 2020).

Pillar-wise comparison based on implementation guidelines

Pillar 1: Coverage Strategy and Promotion

Coverage strategy

Bangladesh government has expanded its social assistance system to protect the vulnerable groups affected by the COVID-19 pandemic. The humanitarian assistance supports were particularly targeted to the extreme poor individual/households and to those who have been previously employed but suddenly lost their job during the COVID period. Such people included floating people, slum dwellers, autistic people, old people, beggars, vagabonds, existing unemployed labours, public transport workers, restaurant workers, hawkers, tea sellers, tea-stall owners, daily labourers, rickshaw pullers/van drivers, divorced women/widows, snake charmers, Hijra community, street children, distressed people, lower-middle-income people and all the citizens who were eligible for humanitarian aid. However, the humanitarian support excluded the beneficiaries of Food Friendly Programmes/OMS/VGD programmes, beneficiaries of humanitarian aid programmes which was specific to Jatka catching fishermen, and beneficiaries of VGF programmes (who were banned from catching fish in marine water during a window of 65 days each year).

A total of around eight categories of beneficiaries were covered under the PMGKY relief package programme of India (WorldBank, 2020a). These include: i) All the existing recipients (households) of 'Antyodaya Anna Yojna' (AAY) whose number was increased for PDS¹² allocations (1kg pulses per household and 5 kg wheat or rice per individual) for three months (World Bank, 2020a; Soyer & Bacil, 2020); ii) 87 million farmers under Pradhan Mantri-Kisan Samman Nidhi (PM-KISAN) scheme¹³ who were allocated a top up of INR 2,000 for three months (Soyer & Bacil, 2020; World Bank, 2020a); iii) 27.5 million

¹²PDS stands for Public Distribution System. This is a programme that provides subsidized food grains through a network of over half a million fair price shops (FPSs) across India (World Bank, 2020a).

¹³PM-KISAN is a cash transfer scheme which supplements farmers' income and supports agriculture-related expenses (Soyer & Bacil, 2020).

existing registered workers of Mahatma Gandhi National Rural Employment Guarantee Scheme (MGNREGS)¹⁴ with daily wage rates increasing from INR 180 to INR 202 (Soyer & Bacil, 2020; World Bank, 2020a); iv) 35 million existing beneficiaries (elderly people, widows and disable people) of National Social Assistance Programme (NSAP) who were allocated INR 1,000 (World Bank, 2020a); v) 200 million account holders of Pradhan Mantri Jan Dhan Yojana (PMJDY) (financial inclusion) who were given INR 500 per month for three months (Gentilini et al., 2020; World Bank, 2020a); vi) Around 83 million poor households of Pradhan Mantri Ujjwala Yojana (PMUY) scheme who were given free cylinders for three months (Gentilini et al., 2020; World Bank, 2020a); vii) 23 million construction workers who were provided financial support from the Building and Construction Workers' Fund managed by state governments, with a one-time cash benefit ranging between INR 1,000 and INR 5,000 (Soyer & Bacil, 2020); and viii) Health care workers and registered workers of Employees' Provident Fund (Soyer & Bacil, 2020).

All the beneficiaries under the 'EECP' of Pakistan were divided into five categories based on several specific categories. 'Category 1' included the existing five million 'Ehsaas Kafaalat' beneficiaries who were women from families with a Proxy Means Test (PMT) score of 0 to 16.1 out of 100 in the National Socioeconomic Registry (NSER). These women were the regular recipients of PKR 2,000 monthly stipend under the Kafaalat programme. Under the Ehsaas Emergency Cash programme, these women were eligible to receive a total of PKR 12,000 stipend covering four months with a monthly increment of PKR 1,000 (Kidd et al., 2020b; Nishtar, 2020). 'Category 2' included 4 million 'new poor' including both men, women and transgender who were affected by COVID-19, and people within the PMT scoring band of 16 to 38. These people were eligible to receive PKR 12,000 as one-time assistance under this category (Nishtar, 2020). 'Category 3' included 3.5 million 'new poor' including men, women and transgender and this category has been made specially to include individuals who might have been left out

¹⁴MGNREGS is a scheme that guarantees 100 days of wage employment in the course of the financial year to a rural household whose adult members volunteer to do unskilled manual work.

of the database in 'Category 2' because the National Socio-economic Registry (NSER) was not completely updated during the time of beneficiary selection under 'Ehsaas programme'.¹⁵ All the people who had PMT score between 16 and 38 and had six months of phone bill less than PKR 100 were selected under this category (Nishtar, 2020). 'Category 3a' included beneficiaries who were to receive benefits in the provinces where the provincial administrations were responsible for providing the benefit by committing their own budget. Punjab was the only province to avail this option for 0.7 million additional beneficiaries. 'Category 4' was composed of another group of beneficiaries who applied through Prime Minister's Ehsaas Labor web portal hosted on website of the PMO (Prime Minister's Office, 2020). These beneficiaries were the people who lost jobs/livelihoods due to COVID-19 including men, women and transgender. People with the eligibility criteria of 'Category 3' were eligible for the 'Category 4' as well except for the people who had self-declared their income above PKR 30,000 (Nishtar, 2020). 'Category 5' was made to capture all the spill over eligible beneficiaries of category 2 and category 3; beneficiaries belonging to this group were selected by the same selection criteria as in category 3 (Nishtar, 2020).

In Sri Lanka, the total amount of relief was disbursed over two time periods (April and May), partially through the sub-schemes (Senior Citizen's Allowance, Disability Allowance, Chronic Illness Allowance, Farmers' Pension, and Fisherman's Pension) of 'Samurdhi' programme to provide support to senior citizens, people with disability, people suffering from chronic illness (Kidney Disease), farmers, and fishermen, respectively (Franciscon & Arruda, 2020; Kidd et al., 2020a). The remaining amount was disbursed through the new scheme, which was particularly established to include all self-employed workers (two million) affected by the COVID crisis (Franciscon & Arruda, 2020), along with unemployed graduates and pre-school teachers (Kidd et al., 2020a). In Sri Lanka, all the recipients under the 'Samurdhi' scheme, both the existing and new ones, were given LKR 5,000 per month in addition to their monthly benefit.

¹⁵The NSER was only updated by 30 per cent in 2020; the PMT score was based on this NSER.

The recipients of the Senior Citizen's Allowance were given an additional LKR 3,000 to their monthly benefit of LKR 2,000 to provide a maximum transfer value of LKR 5,000 (Kidd et al., 2020a). Self-employed workers and pre-school teachers under the new scheme were given LKR 5,000. Unemployed graduates under the new scheme received LKR 20,000 instead of LKR 5,000 (Kidd et al., 2020a; Kidd et al., 2020b). Beneficiaries under the new scheme were given the payment as a one-off transfer (Kidd et al., 2020b).

Promotion and information dissemination

In Bangladesh, Upazila Committees, Municipality Committees, Union Committees, and Ward Committees were responsible for campaigns to disseminate information about relief programmes through 'hotline' activation using multiple mobile numbers and mike announcements.

In India, the Government of India initiated an awareness campaign to address the information gap and alerted PMGKY beneficiaries about the status of their benefit delivery so that they could get the cash transfer once they received an alert (World Bank, 2020a). Community radio networks were expanded in India to provide reliable information about COVID-19 and government benefits to people living in remote areas. In rural areas, frontline workers, word of mouth, and LGs were the main sources of information, whereas, in urban areas, the main sources of information were print and broadcast media. SMS was a crucial channel for information dissemination in India.

In Pakistan, a national-wide awareness campaign was launched for alerting the citizens about the eligibility criteria and application methods and for encouraging them for self-enrolment. The campaign used a number of media formats, including the state broadcaster, private news channels, PTV, English language print outlets, and vernacular, as well as social media campaign by the government and ruling party's social media cell (Khan & Javed, 2020). Instructional paid advertisements were run on national television and in newspapers by the Ministry of Information. Public announcements were made through media and community channels to alert the recipients of category - 2 about the EECP. For beneficiaries of category 3, a guideline

was circulated across various districts outlining the profile of eligible recipients.

Pillar 2: Application, Selection and Enrolment

Beneficiary selection or targeting

In Bangladesh, it was mentioned in the Humanitarian Assistance Implementation Guideline (2020) that households who were distressed and extremely poor were to be selected. For the GR (rice), it was particularly mentioned to target households that had lost their income during the pandemic and were suffering from a food crisis. This group of people included the most vulnerable, including floating people and beggars, lower-middle-income people, and various informal workers, such as rickshaw puller, van puller, etc. It can thus be assumed that, in general, the instruction was to target beneficiaries based on poverty level/income level, employment status during the COVID-19 period, and prioritising the most vulnerable.

India, instead of creating a new social assistance scheme, had used its pre-existing safety nets. Thus, beneficiaries were identified through pre-existing national programmes which were tried and tested. All poor and vulnerable households for in-kind food assistance were identified by the Public Distribution System (PDS), and overall identification of beneficiaries relied on India's near-universal programmes, supplemented by digitised Socio-Economic Census data, state-level databases and Aadhaar digital ID¹⁶ network (World Bank, 2020a). The PMGKY relief package was operated mostly through the existing pro-poor targeted National Social Assistance programmes (ILO, 2020) aimed to protect the poor, vulnerable and disadvantaged groups, including women affected due to the lockdown. As a result, a sizeable share of destitute persons and lower-middle-income people were possibly left out of the PMGKY relief package (World Bank, 2020a). Beneficiaries under the MGNREGS scheme were self-targeted as the MGNREGS was designed to be based on self-targeting (Agrawal et al., 2020).

¹⁶Aadhaar is a 12-digit unique identity number that can be obtained voluntarily by citizens of India.

In Pakistan, the targeting mechanism for beneficiaries involved a hybrid approach combining emergency assistance for the existing or known vulnerable people with demand-based support for the 'new poor'. Only one individual was eligible in each family for receiving the benefit. In general, the targeting mechanism for the 'new poor' involved poverty targeting based on Proxy Means Test (PMT) score in the NSER. The beneficiaries under category 3 were selected based on the self-selection mechanism at the district level, given the eligibility criteria (Nishtar, 2020). Instruction was issued by the Prime Minister to ensure that disbursement of the financial aid be made without any political biases (Zameen blog, 2021). In Pakistan, the beneficiaries were identified through 4-digit short SMS code service '8171'¹⁷ where the beneficiaries were asked to make a request for the service by texting their Citizens' National Identity Card (CNIC) number to 8171. The eligibility criteria for the applicants were confirmed through data analytics using the unique national identification numbers, National Socio-economic Registry and various wealth proxies. Following this, confirmation was sent to the beneficiaries by the same SMS service. A web portal was also used for service requests and registration. The eligibility checking and selection mechanism were end-to-end, data-driven, fully automated, transparent, and neutral. Moreover, all filters were applied for the selection of the beneficiaries under category 1 and 2 data pool. For the beneficiaries of category 3, duplications were removed with respect to category 1 and category 2, as well as family duplications. It was anticipated that there wouldn't be any selection bias in the beneficiary selection mechanism, especially for beneficiaries of category 1 and category 2.

In Sri Lanka, Local Administrations (LAs) were used to identify applicants (ILO, 2020) and community leaders were assigned to identify and make the lists of workers (Kidd et al., 2020a). Local government officers were rapidly mobilised for registering the new recipients and self-employed workers (Kidd et al., 2020a). The pre-existing beneficiaries under the social assistance scheme

¹⁷Ehsaas joined with Pakistan's National Database Registration Authority (NADRA) for implementing the Ehsaas Emergency Cash and the beneficiary identification method was through an SMS service on 4-digit short number "8171".

'Samurdhi' were poverty targeted (Kidd et al., 2020a; ILO, 2020), and hence the beneficiary selection process of the new beneficiaries of 'Samurdhi' were also poverty targeted.

Pillar-3: Transfer/Receipt of Benefits

Transaction costs for receiving benefits

According to the Humanitarian Assistance Guideline (2020) of Bangladesh, since the humanitarian aid was a relief, it was not subjected to any Vat/tax. Thanks to this, associated costs were expected to be reduced in terms of money paid.

In India, as a method of triangulation, the national Direct Benefit Transfer (DBT) system was responsible for coordinating and developing standard operating procedures to ensure quick delivery of PMGKY cash payment to those in need (Sengupta, 2020; World Bank, 2020a). Ministry of Finance of the Government of India had issued guidelines to all banks to waive ATM use charge for customers to lower transaction costs in accessing PMGKY cash payments.

Payment through secure channel/transfer distribution mechanism

In Bangladesh, mobile financial service (MFS) operators were designated to transfer the BDT 2,500 to each of 5 million families. Nagad, a joint venture of the postal division, and a private firm were directed to disburse the highest amount of BDT 425 crore. Market leader bKash was mandated to disburse BDT 375 crore while Rocket and SureCash were directed to disburse BDT 250 crore and BDT 200 crore, respectively. The cash component of GR was to be disbursed either directly to the hands of beneficiaries or the beneficiaries were required to collect goods purchased with the cash from distribution centres.

Instead of creating new pipelines for cash transfer and food assistance, India has scaled up through existing national programmes for social assistance during COVID-19. Hence, it has provided a stable and functional pipeline to transfer cash to households as the delivery systems were pre-tested (World Bank, 2020a). Cash was mandated to be transferred directly into the bank account of beneficiaries identified by five of the

country's most extensive cash transfer programmes through India's well-developed Direct Benefit Transfer (DBT) system (World Bank, 2020a). Cash was designated to be transferred using digital payment technology vehicle, Public Financial Management System (PFMS) under Central Schemes (CS) and Centrally Sponsored Schemes (CSS). As accessing cash from the bank was rather challenging given the COVID situation, especially in remote and rural areas, different states have applied different approaches for delivering cash assistance based on specific circumstances. For example, Kerala has delivered the cash through post office personnel for delivering payments directly to beneficiaries' doorsteps. In other states, micro-ATMs and the Fair Price Shop networks were activated for ensuring cash benefit and food assistance to the beneficiary households (World Bank, 2020a).

In Pakistan, payment under 'EECP' was made through branchless banking platforms of two commercial banks and their 1,800 biometrically enabled ATMs. All cash transfers were to be made after biometric verification of each beneficiary through NADRA. Money was mandated to be deposited in limited mandate accounts; an SMS was to be sent to the eligible beneficiaries with instructions to collect payment from biometric touchpoints on a specific given date. The available cash-out points in 2,270 campsites were more than 11,500 covering an area of over 881,000 square kilometres (Nishtar, 2020). There was also the option to collect cash from the Point of Sale (POS) of biometrically enabled branchless banking operations and biometrically enabled ATMs. In addition, provincial governments were requested to provide open space for cash disbursement arrangements and permission to keep retail POS agents open.

In Sri Lanka, the Samurdhi Bank/Samurdhi Authority was authorised to pay monthly allowances to the new and existing recipients of 'Samurdhi' programme (*Daily News*, 2020). In the initial stage, the new recipients, as well as the regular recipients, received payment at their homes via the Post Office system (Kidd et al., 2020a). Graduates were provided with their payment through bank accounts (*Daily News*, 2020).

Pillar-4: Information Management

Use of Management Information System (MIS)

In Bangladesh, it was mentioned in the Humanitarian Assistance Guideline (2020) to create an accurate database through creating a Quick Response (QR) code-based card for each beneficiary based on the information collected from beneficiaries' national identity (NID) card or birth registration certificate, and mobile phone. It was also mentioned that the relief would be distributed against the QR card. Upazila Committee and Municipality Committee were responsible for ensuring the online entry of the information of the enlisted beneficiaries. It was also mentioned in the guideline that, till the central database under the a2i programme was not fully ready, relief distribution would be continued according to the list prepared by the LG manually.

In India, the five main national cash transfer programmes under the PMGKY package had their own Management Information System (MIS) portals for reporting transactions and delivery of benefits (World Bank, 2020a).

Pillar-5: Control Mechanisms

Control mechanisms

In Bangladesh, according to the Humanitarian Assistance Guideline (2020), the 'Union Committee' had the responsibility to ensure that the beneficiaries' list composed by the 'Ward Committee' is saved and sent to the 'Upazila Committee' for approval after verification and sorting. Besides, respective tag officers were required to be physically present all the time during the distribution of the relief materials to prevent any kind of disruption. In India, all the national programmes and their delivery of in-kind food and cash assistance under the PMGKY relief programme were under the supervision of the Development Monitoring and Evaluation Office of the NITI Aayog¹⁸. A strong

¹⁸The NITI Aayog is a policy think tank of the Government of India, established with the aim to achieve sustainable development goals with cooperative federalism by fostering the involvement of State Governments of India in the economic policy-making process using a bottom-up approach. Indeed, the Niti Ayog has replaced the erstwhile plan system in place in India.

monitoring and evaluation framework had been placed through MIS, which allowed daily progress monitoring and reporting across all schemes (ADB, 2020). In Pakistan, the poverty status of category 3 was validated by cross-checking their Citizens' National Identity Card (CNIC) numbers with Proxy Means Test (PMT) score.

Grievance redress system

In Bangladesh, the Humanitarian Assistance Guideline (2020) mentioned that the Upazila Committee, Municipality Committee, and Union Committee would be responsible for disposing of affairs. In India, there was no or less communication about the grievance redress mechanism. Moreover, there was no acknowledgement of complaint registration and no mechanism to register feedbacks. Beneficiaries of social protection programmes were not aware of where and whom to complain (Graham et al., 2020). There were specified helpline numbers for grievance resolution. Beneficiaries mostly contacted the frontline workers to get immediate queries resolved. Frontline workers had mostly used WhatsApp for information sharing and complaint resolution (Graham et al., 2020). In Pakistan, there was a complaint handling software available, and necessary adjustments were made to the software to enable the request processing system faster. An inter-agency *cybercrime elimination group* was formed to monitor risks regarding cyber-crime (Fake SMS messages, fake websites, fake currency, and hacking of biometric website) for the digital payment system on a weekly basis. There was also a 'helpline' service which was provided by the government of Pakistan for queries and complaints about this initiative.

Key Lessons from the South Asian Experience

All the comparator countries suffered from the 'missing middle' problem in varying degrees as far as their coverage strategies were concerned.

All the three comparator countries - India, Pakistan, and Sri Lanka—had leakages in the coverage strategy as regards the inclusion of the 'missing middle', which generally constitutes urban poor and informal workers. In India, the PMGKY package

intended to tackle many of the existing fault lines in the current system involving migrants, informal workers and last-mile delivery challenges (World Bank, 2020a). However, the existing safety net programmes were constrained by internalising the unorganised and informal workers (Mehra, 2020), and many of the schemes were only limited to rural areas and country residents (Agrawal et al., 2020). As a result, many urban/semi-urban (Agrawal et al., 2020) households, informal workers and migrants belonging to the middle segment of the spectrum were excluded (Mehra, 2020; Soyer & Bacil, 2020).

In Pakistan, National Socio-Economic Registry (NSER) data had been used to target the beneficiaries of the first two categories under the 'EECP'. NSER is particularly rural biased and utilises 'annual consumption' and 'asset ownership' as proxies to calculate the poverty score of households. As NSER was partially updated between 2018 and 2020 (World Bank, 2020b), it helped identify the persistently vulnerable people. However, it failed to capture a large number of informal workers and urban poor, including seasonally migrant workers, nomadic, waste-pickers, street vendors, hawkers who had suddenly lost their job due to the outbreak of COVID-19. This suggests that a well-targeted cash transfer scheme was needed in Pakistan to capture the plight of a large number of informal and urban workers, which has been considered in the selection mechanism for category 3 and category 4.

In the case of Sri Lanka, the bifurcated system of the existent social protection scheme, which either captures the formal sector workers through civil service pension and retirement benefits or captures the poorest members of society through poverty targeted social assistance programmes, has been the primary reason to miss the large amount of the informal sectors lining in the middle (Franciscon & Arruda, 2020). 'Samurdhi', which was the main tool to provide social assistance during the pandemic in Sri Lanka, was targeted at the poorest members of society. As a result, it excluded around 31 per cent of informal workers in the middle quantile of different income groups (Franciscon & Arruda, 2020). Social assistance with such high targeting errors to respond to COVID-19 was associated with

the exclusion of a large part of the intended recipients (Kidd et al., 2020a; ILO, 2020).

The comparator countries had clearer 'promotion and information dissemination' guidelines relative to Bangladesh.

In the case of Bangladesh, the 'hotline' number was the main tool for campaigning as per the implementation guidelines. However, the use of hotline number for campaigning was not adequately implemented in practice in many areas. Bangladesh could have focused more on the use of print and broadcast media based on its existing capacity, as was the case with India and Pakistan.

The other countries had a more established and efficient targeting mechanism in place when compared to Bangladesh.

In Bangladesh in view of targeting, the beneficiaries of the relief programmes were to be selected by the LGs at a community level. This created a scope for selection bias and mistargeting. Here, targeting was not the issue; rather, the community-based targeting strategy, pairing with lack of transparency in the implementation system, caused the exclusion of beneficiaries from enrolment in a number of cases. There should have been a strong monitoring system at the local government level, along with an accountable and transparent law enforcement system to mitigate any fraudulent activities involving the service providers. According to Khan & Javed (2020), Pakistan was successful in clamping down a number of fraudulent activities through quick registration of FIRs and arrests. For India, the targeting strategy has not been an issue as the beneficiary identification process in India was reliant on its pre-existing near-universal programmes, supplemented by digitalised database and ID network (state-level database, digitalised Socio-Economic Census data, and Aadhaar digital ID network).

Following the beneficiary identification process of India, another aspect of the identification process came out; this is completely missing in Bangladesh. Government officials at the national and sub-national level, along with the community leaders, were responsible for making the list of beneficiaries in Bangladesh.

There was no pre-existing database for identification, listing and registration. Hence, the entire application process had limitations. A comprehensive database of programme participants using Information and Communication Technology (ICT) and incorporating digital identity in the database for identification, listing and registration could be helpful to avoid leakages in the application process (Ahmed, 2021).

Sri Lanka may have partially suffered from the same problems as Bangladesh. The community leaders were responsible for making the list of informal workers manually (Kidd et al., 2020a). In this context, in all possibility, Pakistan and India had performed better compared to Bangladesh and Sri Lanka.

All the comparator countries suffered from some degree of inadequacy of benefits in their respective scheme designs.

In the case of the adequacy of benefits, several national and international studies suggested, and also ADB (2020) data indicated that the benefit amounts (both cash and in-kind) were not adequate; it would be more beneficial for the recipients if the size of the transfers would have been larger. In this context, both Sri Lanka and India have been criticised on various grounds. In India, some of the measures under the PMGKY did not address the shortfall in incomes; instead, the payments were simply frontloading the benefits that the recipients would have received any way (Agrawal et al., 2020). For example, farmers under the PM-KISAN scheme have been simply frontloaded the instalments that were due later in the year. Similarly, the MGNREGA workers' wage was due for an upward revision in view of inflation adjustment (Mehra, 2020). As for Sri Lanka, the amount paid to the households was only 12.8 per cent of the usual household expenditure of an average household, and the flat amount of LKR 5,000 per household suggests that the effective transfer value per person varied across different households. However, for a family with a large number of members, it was rather small if there was no other source of income (Kidd et al., 2020a). Furthermore, as the emergency transfers were only for two months, supplemental consumption for households may have been very limited (Franciscon & Arruda, 2020). To sum up, for Bangladesh, India, and Sri Lanka, the inadequacy of the size

of the total transfer was a key issue which indicates that the total allocated amount for the relief programmes should have been bigger than what was actually disbursed.

All the comparator countries were able to successfully establish a secure channel for transferring cash benefits, but more efforts are needed for the digital-poor and other left-behind groups.

In the case of the use of the secure channel for receiving cash transfer, all the three countries (Bangladesh, India, and Pakistan) were able to use mobile banking or bank account for delivering benefits. Bangladesh has been quite successful in this regard with the extensive use of mobile financial services. However, digital illiteracy and lack of access to mobile phone/internet service and the associated benefits caused the exclusion of a large number of beneficiaries, particularly living in remote areas. Pakistan made use of the biometrically enabled branchless banking operation and biometrically enabled ATMs, which was a praiseworthy initiative. However, the pre-requisite of biometric fingerprint has been an issue in the case of receiving benefits (Nishtar, 2020). India has been successful in this regard as cash transfer was provided directly to the bank account of beneficiaries through the Direct Benefit Transfer (DBT) system under existing national programmes (World Bank, 2020a). However, the cash transfer was a challenge for the 18 per cent inactive bank account holders in India (Agrawal et al., 2020). The use of mobile banking and bank transfer indeed ensures the systematic delivery of cash transfers. However, in this instance, digital literacy, access to mobile financial services and maintaining a bank account are key requirements; the absence of these can, to a large extent, disrupt the operation. The countries could have been benefitted more with additional instrument (such as using the post-office network) for ensuring door-step cash delivery for people who lack access to the aforementioned tools.

Most of the comparator countries suffered from the lack of any established 'Grievance Redress' mechanism.

With respect to 'Grievance Redress', the absence of any proper guideline and system and an appropriate technological tool have undermined the overall effectiveness of the relief programmes in

Bangladesh during the COVID-19 crisis. Pakistan had performed better by launching complaint software and hotline services; the organisation of a national press conference for seeking volunteers to assist was also helpful in this regard (Nishtar, 2020). India, on the other hand, had lower performance in this case. Even if they had specific 'helpline' numbers for grievance redress, the government failed to get the confidence of its citizen for taking recourse to this option (Graham et al., 2020).



**An Assessment of the
Effectiveness of COVID-Targeted
Relief Programmes**

4. An Assessment of the Effectiveness of COVID-Targeted Relief Programmes

The government has taken several support measures for the poor and vulnerable population to tackle the emergent situation originating from COVID-19. Among various relief programmes, the present study only identifies the gaps between policies and practices relating to three important relief programmes – GR (rice), GR (cash) and cash support of BDT 2,500. The next sections aim to analyse the gaps considering the aforementioned indicators based on the survey results.

4.1 Coverage strategy and promotion

Adequacy of coverage

The number of respondents who have not been covered for any of the three relief programmes is significantly high, 76.5 per cent. The survey conducted under this study shows that only about 23.4 per cent of households received at least one of the three relief packages considered under this study (Table 3). It has also

Table 3 Percentage of respondents who received the three relief supports

Reception of Relief	At least one of thre three relief programmes
Received relief	23.45
Did not receive relief	76.55
Total	100.00

Source: Authors' calculation based on household survey data.

been estimated that 3.4 per cent of total households received at least two or all three of the relief packages.

Barishal division had the lowest coverage (5.8 per cent), and Mymensingh division had the highest (20.8 per cent), followed by Chattogram division (17.9 per cent) as regards to the coverage for at least one of the three relief programmes (Table 4).

Table 4 Division-wise distribution of the three relief benefits among beneficiaries

(in per cent)

Division	At least one of the three relief programmes
Barishal	5.79
Chattogram	17.85
Dhaka	14.22
Khulna	10.67
Mymensingh	20.81
Rajshahi	11.72
Rangpur	11.13
Sylhet	7.81

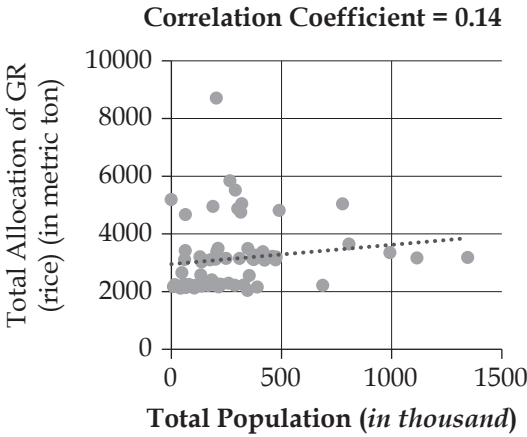
Source: Authors' calculation based on household survey data.

Note: Respondents were allowed to give multiple responses. As such, the sum of all the shares could be greater than 100.

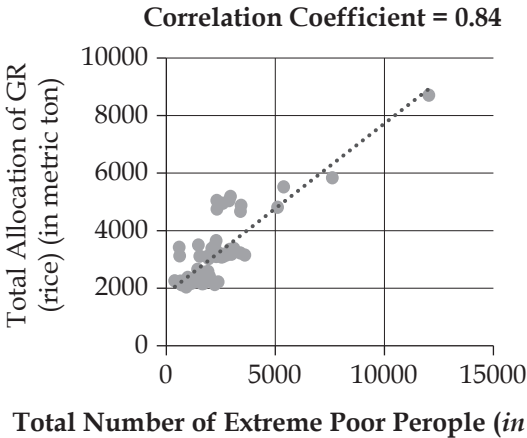
It is evident from the following scatter plot diagrams (Figures 8a and 8b) that there are positive relationships between the number of extreme poor people and GR (rice) allocation and between the total number of population and GR (rice) allocation. This may indicate that the districts with a higher number of extreme poor people and a higher number of people have been allocated a higher amount of GR (rice) in general. However, the correlation coefficient values¹⁹ between the two pair of variables suggest, GR

¹⁹Correlation coefficient value ranges from (-1) to (1). For correlation, an absolute value of 1 indicates perfectly linear relationship where change in one variable is perfectly followed by the change of another variable. Hence, higher correlation coefficient value implies stronger linear relationship between the variables. Correlation coefficient value close to '0' implies no linear relationship between

Figure 8



A. Scatter Plot of Total GR (rice) allocation (in metric ton) in relation to the total number of extreme poor people (in thousand)



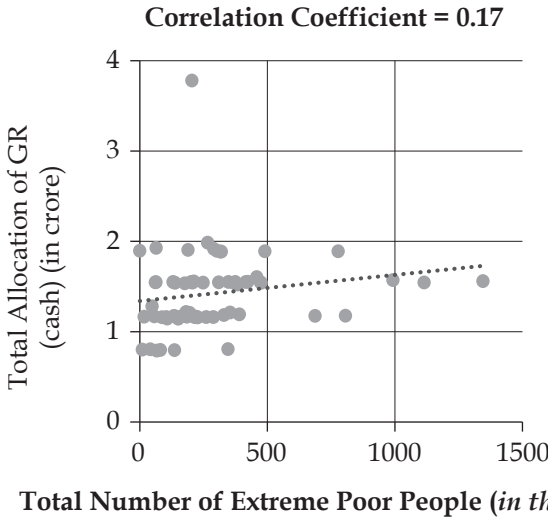
B. Scatter Plot of Total GR (rice) allocation (in metric ton) in relation to the total population (in thousand)

Source: Authors' calculation based on MoDMR (2020e), BBS (2019), and BBS (2015) data.

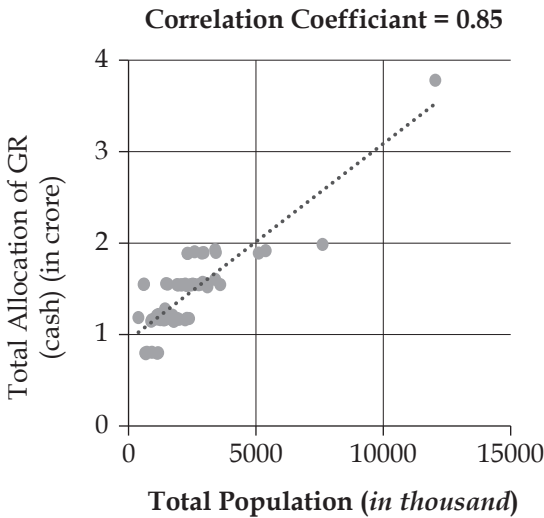
(rice) allocation has a weak correlation (only 0.14) with the total number of extreme poor, while it has a very strong correlation (0.84) with the total number of population. These results indicate that, in practice, the GR (rice) allocation has been made based on the population size and not on the size of people in poverty.

the variables. A correlation coefficient of (-1) indicates perfectly linear negative relationship between the variables as the sign of the coefficient indicates the direction of relationship.

Figure 9



A. Scatter Plot of Total GR (cash) Allocation (in Crore) in relation to total number of extreme poor people (in thousand)



B. Scatter Plot of Total GR (cash) Allocation (in Crore) in relation to total population (in thousand)

Source: Authors' calculation based on MoDMR (2020e), BBS (2019), and BBS (2015) data.

Similar to GR (rice), positive relationships between the total number of extreme poor people and GR (cash) allocation and between the total number of population and GR (cash) allocation

can be observed (Figure 9a and Figure 9b). However, similar to GR (rice), the correlation (only 0.17) between the total number of extreme poor and GR (cash) allocation is significantly weaker than the correlation (0.85) between population size and GR (cash) allocation. These results indicate that the GR (cash) allocation has also been made based on population size. Districts with larger populations were allocated a higher amount of GR (cash).

BDT 2,500 per family for 5 million families

Adequacy of the BDT 2,500 cash support programme provided by the GoB has been assessed (in terms of magnitude, coverage, and frequency) by comparing this with the various proposals made by national and international think tanks and research organisations (such as CPD, PPRC-BIGD, PRI, UNDP, and WEF). With respect to the size of the monthly allowance, the one-off provision of BDT 2,500 per household was lower than all the proposed amounts made by other institutions. Indeed, the various proposed amounts ranged from BDT 3,000 per household (BDT 738.9 per person) per month to BDT 32,553 per household (BDT 8,018 per person) per month (Table 5). The size of the total allocated amount (BDT 1,258 crore) (MoF, 2020) was equivalent to only 0.04 per cent of GDP (FY2020), which was significantly low.²⁰

In the case of coverage of beneficiaries, the GoB has covered a lower number of beneficiaries than the numbers proposed by independent analysts. While the Government aimed to cover 0.5 crore households (2.0 crore individuals), all institutions had proposed to cover households in the range of 0.82 crore (3.31 crore individuals) to 1.9 crore (7.6 crore individuals)²¹. Most of the institutions proposed that the frequency of cash support provision should be more than once. For example, CPD (2020) had proposed for two times or two months of provision. PRI

²⁰The size of monthly allowance for each household was calculated by multiplying the amount of allowance proposed or allocated to per person with 4.06 (average number of persons per household according to HIES, 2016).

²¹The total number of persons proposed by the institutions have been converted into total number of households by dividing the number of persons proposed by the average number of persons (4.06) in each household in Bangladesh (according to the HIES Survey, 2016).

Table 5 Compilation of cash support proposals by different institutes as an immediate response to COVID-19 for the poor and vulnerable groups

Organisations	Monthly allowance (BDT)	Basis of allocation	Time period/frequency (months)	Coverage of beneficiaries (Core)	Basis of coverage	Total amount requested (In crore BDT)	% of GDP (FY2020)
CPD	8,000 (for each HH per month)	Inflation adjusted national weighted average poverty line (lower) for 2020	2	1.7 (HHs) (6.84 persons)	Considering self-employed with monthly income being less than BDT 10,000 along with day and paid labour (lower case)	27,200	0.94
				1.9 (HHs) (7.57 persons)	Considering self-employed with monthly income being less than BDT 11,000 along with day and paid labour (upper case)	30,400	1.05
PPRC -BIGD	1,441 (person per month)	Average of amount assessed only by extreme poor (rural + urban)	1	3.31 (persons)	Total poor people in country	10,086	0.35

(Table 5 contd.)

(Table 5 contd.)

Organisations	Monthly allowance (BDT)	Basis of allocation	Time period/frequency (months)	Coverage of beneficiaries (Core)	Basis of coverage	Total amount requested (In core BDT)	% of GDP (FY2020)
PRI	3,000 (for each HH per month)	Based on the expenses related to the basic minimum needs (according to BRAC assistance programme)	3	3.69 (persons)	'New Poor' (vulnerable nonpoor whose income fell below poverty line post COVID-19)	10,800	0.37
			6	1.20 (HHs)	Estimated loss of employment by households	21,600	0.75
UNDP	2,100 (person per month)	Inflation adjusted national weighted average poverty line (lower) for 2020	1	6.53 (persons)	Considering population under national poverty line (lower)	13,713	0.48
	4,879 (person per month)	Half-median rate (equivalent to roughly USD2 a day, considered as the median value of poverty lines among countries in both South Asia and sub-Saharan Africa)				31,862	1.10

(Table 5 contd.)

(Table 5 contd.)

Organisations	Monthly allowance (BDT)	Basis of allocation	Time period/frequency (months)	Coverage of beneficiaries (Core)	Basis of coverage	Total amount requested (in crore BDT)	% of GDP (FY2020)
	13,926 (person per month)	Uniform rate (equivalent to roughly USD5.50 a day)				90,937	3.15
WEF	8,018 (person per month)	Corresponds to the minimum wage for the formal sector in Bangladesh	3	5 (persons)	Informal sector workers	120,270	4.17

Source: Authors' compilation based on CPD (2020), PPRC-BIGD (2020), PRI (2020), UNDP (2020), UNDP (2020), WEF (2020).

(2020) proposed for three to six months of support, and WEF (2020) had proposed for three months. However, the cash support programme was provided only one time with a much lower amount (Table 5).

Findings from FGDs and KIIs indicated some idea regarding the coverage of the three specific relief programmes. According to the service providers of Netrakona, 70 per cent of people have received the cash support of BDT 2,500. Urban beneficiaries and stakeholders in Khulna stated that 20 to 50 per cent of impoverished families had received relief goods in their areas. Service providers and stakeholders of Dhaka stated that the government relief could hardly cover 50 to 70 per cent of the beneficiaries. In Chattogram, the LG found it difficult to cover all the eligible people without the contribution of rich people. Only in the case of Rajshahi, a somewhat different observation was made. As per the LA and LG in Rajshahi, there was excess relief in the relief centre in some places, but nobody came to get the support. In this case, lack of information may be a factor. However, the overall performance of Rajshahi is satisfactory (as per qualitative findings), which is reflected in the statement of stakeholders. That is, all the eligible people benefitted with the combined effort of themselves and the government. As a cause of low coverage in other districts, service providers and stakeholders had blamed insufficiency of government relief, while the community leaders were found to blame nepotism and factionalism of service providers. One community leader in Khulna stated that *well off people got help more than once but not the people who were in desperate need*. One community leader in Chattogram stated that *the relief was for a shorter duration and people struggled to manage in the emergency*. Altogether, the qualitative findings suggest that coverage failed to meet a hundred per cent of the demand put forward by most regions.

To summarise, both the GR (rice) and GR (cash) have been allocated depending on the population size. Qualitative assessment obtained from a number of districts also supports this finding and additionally claims that allocations for all the three relief packages have been made based on the population size. For instance, it was obtained from FGDs and KIIs in Sirajganj, Pirojpur (undertaken on 28 December 2020 and 31 January 2021,

respectively), Chattogram and Rajshahi that the reliefs were allocated based on population size rather than the poverty rate. As a result, few sub-districts/upazila which had the lowest poverty rate had a higher percentage of allocated relief. Mention may be made of the 'Mothbariya' in Pirojpur, and Sirajganj Sadar and Ullapara in Sirajganj in this connection. On the other hand, some sub-districts/upazila with relatively higher poverty rate had a lower percentage of allocated relief. Some examples are Kaulia, Najirpur and Indurkani in Pirojpur, and Shahadatpur and Belkuchi in Sirajganj. However, since the problems during the COVID crises were multifaceted, the attendant factors should have been considered before determining the coverage strategy for the relief packages. For example, people have also suffered from flood during the pandemic, and in many areas, especially the remote char areas, they were already vulnerable due to their topography. Moreover, many sub-districts/upazilas have a significantly higher poverty rate (up to 50 or 60 per cent of the population) compared to the national poverty rate. Because of these specific reasons, a recommendation has been made to allocate reliefs with special assistance and also taking cognisance of factors other than population size. Indeed, a number of such factors were highlighted by stakeholders and other studies in view of designing coverage strategy. These included poverty rate, unemployment rate and population density rate.

Adequacy of activities and mechanisms for information dissemination

As mentioned earlier, it was stated in the Humanitarian Assistance Guideline (2020) that the LG would be responsible for undertaking extensive campaigns to disseminate information as regards the relief programmes; 'hotline' activation and miking were to be deployed in this connection. Survey data shows that about 80.9 per cent beneficiaries of GR (rice), 75.9 per cent beneficiaries of GR (cash), and 74.5 per cent beneficiaries of the BDT 2,500 cash support programme were informed about the programmes by the chairman/secretary/member of the UP committee/guard (Table 6). The second-highest percentage of beneficiaries were informed by family, friends, and neighbours. Local influential persons also played a key role in spreading the information about the assistance programmes, especially in the

case of GR (cash) and BDT 2,500; about 20.6 per cent and 18.3 per cent of the beneficiaries were informed by the local influential persons, respectively. However, very few beneficiaries were informed by other designated and formal channels and sources, such as miking, newspapers, radio programme, community meeting and social media (Facebook). Indeed, on average, less than 1 per cent of beneficiaries were informed through these channels if all programmes are considered. Some beneficiaries received information from a television programme – about 4.2 per cent for GR (rice), 4.5 per cent for GR (cash), and 9.0 per cent for BDT 2,500 (Table 6). This would indicate that among all the broadcast media (TV, radio, social media) that were designated for information dissemination, television programme was found to be the most successful one.

Table 6 Sources of information about the programmes

(in per cent)

Sources	GR (Rice)	GR (Cash)	BDT 2,500
Chairman/secretary/member of the union parishad committee/guard	80.90	75.85	74.48
Friend/family/relative/neighbour	17.18	17.59	15.71
Local influential person	11.11	20.62	18.27
Miking	0.35	0.73	0.00
Mobile message/call	0.46	0.87	2.35
Newspaper	0.09	0.00	0.82
Radio programme	0.04	0.00	0.11
Television programme	4.21	4.54	9.05
Teacher or member of school committee	1.47	2.81	3.01
NGO/CSO workers	0.00	1.17	1.89
Community meeting	0.39	0.06	0.63
Social media (Facebook)	0.22	0.00	0.89
Do not remember	1.30	0.62	0.24

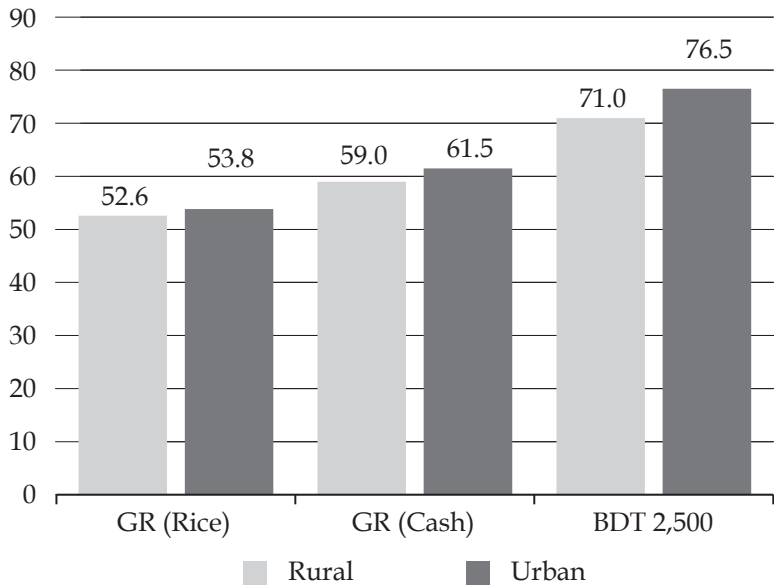
Source: Authors' calculation based on household survey data.

Note: Multiple responses were allowed. Hence, the sum of all the shares could be greater than 100.

These findings were also reflected through the FGDs (that took place at different times in 2020) with the participation of service recipients. CBO members of Rangpur District opined that there were no miking or awareness campaigns before the selection of beneficiaries took place. Also, backyard meetings and participation of the affected people during the beneficiary selection process were absent. However, somewhat different observations were made during the KIIs with the service providers. According to LA in Sirajganj and Pirojpur, there was a regular press release on the part of the Deputy Commissioner as regards the overall Corona situation and service-related campaigns with the help of social media. In Netrakona, social media has been used by LA for disseminating service-related information and 'hotline' number. It has been found from the LAs and community leaders of Dhaka, Chattogram, Rajshahi, and Khulna that people were informed about the relief programmes mostly through miking and social media (Facebook). Apart from these, television, newspaper, and oral communication either by approaching personally or using different people (such as neighbours) have been found to be sources of information dissemination in those areas in general, according to the LA, community leaders or stakeholders. In Dhaka, a local newspaper (*Dainik Fulki*) announced the place and time in advance in some cases. One community leader (Imam, School teacher) of Chattogram stated that *the news and details of relief have been through 'word of mouth' in his area*. The LAs of Rajshahi mentioned about community meeting and a Facebook page named 'COVID-19, Humanitarian Relief', which was authorized by the district office as part of the relief programmes campaign. In Khulna, there was also a separate website for campaigning named 'Bangladesh Directory'.

In general, more than half of both rural and urban beneficiaries of GR (rice) and GR (cash) programmes had knowledge about the programmes before participation, with the urban areas faring better. In the case of the BDT 2,500 cash support programme, the percentage was much higher: 71 per cent for rural area and 76.5 per cent for the urban area (Figure 10).

Figure 10 Percentage of beneficiaries who knew about the relief supports in advance before the participation (by geographical area)



Source: Authors' calculation based on household survey data.

Note: Multiple responses were allowed. Hence, the sum of all shares could be greater than 100.

However, the scenario regarding the knowledge about 'hotline' numbers among beneficiaries is very unsatisfactory. Only 1.6 per cent of the beneficiaries were aware of the 'hotline' numbers associated with the assistance programmes (Table 7). Among these beneficiaries, 39.0 per cent were informed through SMS or mobile call, 32.9 per cent were informed by family, friends, and neighbours, and 31.0 per cent were informed by TV programmes. None of the respondents was found to be informed by NGO/CSO workers, community meetings, social media, miking, newspaper, or radio programs. These findings were also reflected through the FGDs (undertaken at different points in 2020) with service recipients. The CBO members of Rangpur, Netrakona, Pirojpur and Sirajganj were not generally aware of the specified hotline number (333) for relief programmes. It was found from

the CBO members that there was a lack of adequate campaign as regards the 'hotline' numbers at union or subdistrict/upazila level. Community leaders of Dhaka, Chattogram, Rajshahi, and Khulna stated that they were unaware of any public campaign to popularise the hotline numbers by government officials or local representatives. Similar observations were also made by urban beneficiaries of Khulna and CBO members of Rangpur, Sirajganj, and Netrakona. According to the LAs and CBO members of Rangpur, Sirajganj, and Netrakona, less awareness about the hotline number was associated with digital illiteracy, lack of access to mobile usage, lack of access to internet usage and limitation of mobile network, particularly for the people in char area. However, somewhat different observations came during the KIIs with service providers. According to the city corporation/municipality corporation representative, LGs and LAs of Dhaka, Chattogram, and Rajshahi, people were informed about hotline numbers through television, newspaper, miking, banner, posters, and with the help of volunteers, local representatives, non-governmental organisations (NGOs) or local organisations. Besides, in Rajshahi, the hotline number was broadcast to local people by phone, and some people were informed during the time of house visit for relief. Local educators and elderly people in Dhaka were requested to publicise orally for hotline numbers. However, in Khulna, service providers at various levels admitted that the hotline numbers were not fully functional in their areas though LAs and stakeholders had tried to inform people through local or neighbourhood meetings, Facebook page, writing, etc. One local government of Khulna stated that the *hotline was a modern conception for people and so was not adopted by local people at the desired level*. NGO workers of Dhaka and Chattogram stated that they had their own hotline numbers and distributed them among their members, and in some cases, they used the sub-district/upazila hotline number.

Overall, the fact that a large number of beneficiaries were aware of the relief programmes prior to the distribution reflects that information has been disseminated with considerable success, though not highly satisfactorily/though it was still insufficient. In this regard, the prominent role played by the LG and the use of miking in many cases indicated that the implementation

Table 7 Percentage of beneficiaries who were aware of ‘hotline’ numbers through various means

Sources	Percentage
Do not know about the hotline numbers	98.40
Mobile message/call	39.00
Friend/family/relative/neighbour	32.93
TV programme	30.96
Chairman/secretary/member of the UP committee/guard	25.79
Local influential person	1.73
Teacher or member of school committee	1.32
Miking	0.00
Newspaper	0.00
Radio programme	0.00
NGO/CSO workers	0.00
Community meeting	0.00
Social media (Facebook)	0.00
Do not remember	0.00

Source: Authors’ calculation based on household survey data.

Note: Multiple responses were allowed. Hence, the sum of all shares could be greater than 100.

guidelines were followed well by the local government representatives. However, it has also emerged that the use of promotion of hotline numbers (the main tool for information dissemination as per the guideline) was highly inadequate. There is a need to take urgent steps for the wider dissemination of information about the hotline.

4.2 Application, selection and enrolment

Adequacy of targeting

As per instructions in the Humanitarian Assistance Guideline (2020), support was to be provided to the extreme poor and lower-middle-income households, and need-based food aid was to be given to those who were dependent on daily income or

had lost their jobs during COVID-19 or to the most vulnerable, including floating people and beggars. According to the government's guideline, targeting of beneficiaries should have been made based on poverty level, livelihood situation, income level and employment status in view of the COVID-19 crisis.

Survey data shows that the majority of the beneficiaries for all the programmes belonged to the lower-middle-income households, 38.1 per cent for GR (rice), 36.6 per cent for GR (cash), and 40.8 per cent for BDT 2,500 cash support programmes, respectively (Table 8). The second-largest number of beneficiaries of all the programmes belonged to extreme poor households: for instance, 22.2 per cent for GR (rice), 22.3 per cent for GR (cash) and 23.3 per cent for the BDT 2,500 cash support programme. The third-largest number of beneficiaries of all programmes were day labourers: 13.7 per cent for GR (rice), 15.9 per cent for GR (cash) and 16.8 per cent for the cash support programme. Disaggregation of rural and urban beneficiaries also shows similar outcomes with some discrepancy, as is evident from Annex Table 1 and Annex Table 2. For example, the number of low-middle income people for the cash support programme was higher in the urban area (53.3 per cent). In contrast, the number of day labourers for the cash support programme was higher in the rural area (20.4). Overall, the number of extreme poor households was higher in rural areas than in urban areas. The fact that a large number of lower-middle-income households, extreme poor households and day labourers have been targeted for the three relief packages indicates that the guidelines had been followed to some extent. However, in the case of targeting the unemployed population, the government had failed to implement the guidelines in practice. The results in this connection suggest that in the urban areas, very few unemployed people were targeted for the relief packages; for the rural areas, none of the beneficiaries belonged to the unemployed category. Similar observations were made in the case of urban beneficiaries of Dhaka, Chattogram, Rajshahi and Khulna. They stated that many people went back to the village, but they had remained unemployed and stayed home during the lockdown period. Some had survived on government aid; some did not receive any help from the government despite being in a financial crisis. However, stakeholders and community leaders of these regions were of the view that people

who went back to villages after losing jobs were beneficiaries of relief assistance.

According to the quantitative analysis, very few beneficiaries of both rural and urban areas were from slum dwellers, rickshaw pullers, van drivers, tea-stall workers, beggars, or households with physically challenged or elderly-headed members (Annex Table 1 and Annex Table 2). However, somewhat different observations came during the FGDs and KIIs (conducted at different times in 2020) with beneficiaries and service providers. According to the urban beneficiaries, service providers (such as, the city corporation/municipality corporation representatives, LG, and LA), community leaders, and stakeholders of Dhaka, Chattogram, Rajshahi and Khulna, selection has been conducted based on prioritising the potential candidates who were most in need, such as physically challenged, impoverished, slum dwellers, day workers, rickshaw pullers, van drivers, middle-scale or marginal farmers, beggars, and low-income people as well as middle-class families. In Khulna, priority was also given to grocery shop owners, widows, poverty-stricken women, poor freedom fighters, boatman, and small traders whose earnings were reduced during the lockdown period. For physically challenged people, a number of commendable findings came out from the FGDs and KIIs (conducted at different times in 2020). According to rural and urban beneficiaries of Dhaka, Chattogram, and Khulna, the physically challenged and handicapped people of respective areas received support in various forms. A deaf person was provided a van for work in an urban area of Dhaka division. However, a group of rural and urban non-beneficiaries disagreed with this observation. Thus, according to the qualitative findings, targeting was made based on prioritisation.

Quartile distribution data shows that about one-third of the beneficiaries belonged to the first income quartile (Table 9). In general, the results suggest that there was a hint of 'inclusion error'. In all cases, more people could be included from lower income group.

It is evident from Table 10 that, in the lowest quartile, 24.8 per cent of the population have received at least one of the three relief programmes, and 10.9 per cent have received at least

Table 8 Categories/Groups of beneficiaries of the three relief programmes

(in per cent)

Categories/Groups	GR (Rice)	GR (Cash)	BDT 2,500
Lower-middle class households	38.09	36.55	40.79
Individual/HHs in misery or extreme poverty	22.20	22.30	23.30
Day labourer	13.73	15.89	16.82
Floating population	0.74	1.40	0.00
Slum dwellers	2.18	2.94	0.68
Households with disabled members or members unable to work	1.20	0.11	1.58
Elderly-headed household	1.99	1.89	3.08
Beggar	0.00	0.71	0.00
Unemployed labourer	0.98	0.00	1.14
Transport worker	3.98	1.61	3.86
Restaurant worker	0.50	0.62	0.00
Tea-stall worker	0.00	0.54	1.25
Tea-stall shop-owner	1.37	0.46	1.45
Rickshaw/Van puller	4.52	4.28	1.23
Widow/divorced/separated women	2.48	2.88	0.46
Bede or Hijra (transgender)	0.20	0.00	0.00
Does not belong into any of the above groups	5.86	7.84	4.37
Total	100.00	100.00	100.00

Source: Authors' calculation based on household survey data.

one of the other social protection programmes provided by the government. These results indicate that majority of poor households have not been covered by the three selected relief programmes neither by other programmes; only about 35.0 per cent of the poorest households have received some form of assistance. These findings are similar to Rahman et al. (2020), which indicated that the SSNPs of Bangladesh are able to cover

Table 9 Share of beneficiaries across different quartiles of the income distribution (based on per capita income)

(in per cent)

Income Group	GR (Rice)	GR (Cash)	BDT 2,500	At least one of the three programmes
1st quartile	33.03	35.40	35.63	34.03
Rest of the three quartiles	66.97	64.60	64.37	65.97

Source: Authors' calculation based on household survey data.

only 32.5 per cent of the poor households in Bangladesh. This would imply that the COVID-19 response programmes could not overcome the traditional and common challenges afflicting the delivery of social safety net programmes in Bangladesh.

Table 10 Quartile-based income distribution of respondents for the three selected programmes (based on per capita income)

(in per cent)

Income Group	At least one of the three programmes	At least one of other programmes	Did not receive any benefits from any programmes
1st quartile	24.78	10.94	64.29
Total	23.45	8.09	68.47

Source: Authors' calculation based on household survey data.

Note: Multiple responses were allowed. Hence, the sum of all the shares could be greater than 100.

Additionally, some service providers and stakeholders involved in the selected relief programmes have claimed during the KIIs (conducted in 2020) that households that received benefits from other programmes have been excluded from the three relief packages. For instance, it was obtained from LA in Khulna that people who received other allowances were excluded from the beneficiaries' list. It was also learned from the LAs and LGs of a number of districts that the physically challenged people and their families were given priority in receiving relief unless

they were listed under other government allowances. Even if this argument is considered, it is seen that a large number of households have not received any benefits under any of the programmes. For example, 64.3 per cent of respondents from the first quartile and 67.2 per cent of respondents from the second quartile have not been covered by any relief programmes provided by the government (Table 10). This finding is also reflected through a qualitative assessment where it was found that some people, including the elderly ones, have neither received any allowance under any programme nor have they received support under any of the three relief programmes.

It is evident from Table 11 that, among the rural participants, only 19.6 per cent beneficiaries belonging to the lowest quartile have received support from at least one of the three relief programmes. The scenario is reverse for urban beneficiaries, as a large number of respondents of the lowest quartiles have received at least one of the three programmes in the urban area: for instance, 43.3 per cent for the first quartile (Table 12). For other programmes, the percentage of beneficiaries belonging to the lowest quartile in both rural and urban areas was not much different. Overall, the coverage was higher in the urban areas compared to the rural areas, particularly for the three relief packages dedicated for COVID-19. Regrettably, 70.2 per cent of households belonging to the first quartile did not receive any government support during the COVID-19 crisis in rural areas.

Table 11 Quartile-based income distribution of rural participants for the three selected programmes (based on per capita income)

(in per cent)

Income Group	At least one of the three programmes	At least one of the other programmes	Did not receive any benefits from any programmes
1st quartile	19.63	10.14	70.23
Total	18.85	8.85	72.30

Source: Authors' calculation based on household survey data.
 Note: Multiple responses were allowed. Hence, the sum of all shares could be greater than 100.

Table 12 Quartile-based income distribution of urban participants for the three selected programmes (based on per capita income)

(in per cent)

Income Group	At least one of the three programmes	At least one of the other programmes	Did not receive any benefits from any programmes
1st quartile	43.25	9.50	47.25
Total	34.76	6.20	59.04

Source: Authors' calculation based on household survey data.

Note: Multiple responses were allowed. Hence, the sum of all shares could be greater than 100.

Share of households that faced income losses during the COVID-19 crisis and received one or more of the three relief packages is presented in Table 13. It is notable that although almost 77.3 per cent of the households experienced income erosion as a result of COVID-19, they did not receive any of the three relief supports provided by the government. These results reveal that a large number of households that lost their jobs/income during the pandemic were excluded from the three relief packages; this speaks of a targeting error. Capturing this segment of the population was a major objective of the government as per the guideline. Some observations may be made based on the qualitative findings. For instance, many city dwellers who lost income simply went back to villages; however, they did not receive any benefits under the three relief programmes due to a lack of communication with LG (stated by community leaders of Khulna). This reflects that selection/targeting was based on whether they were known to the LG. This, in turn, means that local government representatives used traditional methods of targeting with its in-built weaknesses. This caused the exclusion of a large number of households whose income has decreased. Local administration representatives of Chattogram stated that *not all the internal migrants lost their jobs; hence, they had to exercise caution while providing relief.*

Table 13 Share of beneficiaries whose income has decreased during the pandemic

(in per cent)

Reception of Benefits	At least one of the three relief programmes
Income decreased and received benefits	22.69
Income decreased but did not receive benefits	77.31
Total	100.00

Source: Authors' calculation based on household survey data.

In the case of distributing benefits among the ones whose income has decreased after COVID-19, the majority of the beneficiaries belong to the lowest quartile. Indeed, a large number of such beneficiaries of the higher income quartiles have been covered for at least one of the three relief programmes. These results suggest that, for the relief programmes, the distribution of relief benefits has not been entirely conducted based on per capita income distribution. In other words, there is not much disparity in the number of poor and non-poor households as regards being covered by at least one of the three relief programmes after income reduction due to COVID. The qualitative findings found from the CBO members of various districts suggest that many people who lost their jobs and income during the pandemic had not received any support even when they were compelled to move from city to village; also, many potential beneficiaries of BDT 2,500 cash support programme have not received the relief even after being enlisted. It was found from rural beneficiaries of Khulna that some households which lost their job during the pandemic resorted to some other livelihood opportunities, such as farming. On the other hand, a community leader in Dhaka stated that his family members tried to cope with reduced income by using whatever savings they had.

Apart from the three relief programmes, the GoB has also provided other assistance programmes, particularly for those who didn't have any income or whose income had reduced drastically during the pandemic. It is found that the percentage

of beneficiaries was higher in the fourth quartile for OMS and old age allowance compared to the first one, which again suggests that the distribution of the benefits has not been entirely conducted based on per capita income distribution for these two programmes. In the case of the fishermen under VGF programmes, very few beneficiaries of the first quartile have been selected. In the case of VGD programme and widow allowance, the distribution of benefits has been conducted based on income distribution to some extent as per the data; as for both these programmes, more of poor, and less of non-poor beneficiaries have been covered. However, the percentage of beneficiaries in the lowest income quartiles is very low for these two programmes, only 2.88 per cent.

Effectiveness of beneficiary selection or targeting

Table 14 demonstrates the share of beneficiaries that were selected for the three humanitarian assistance programmes, according to methods and agents. It is seen that about 89.0 per cent of GR (rice) beneficiaries, 79.3 per cent of GR (cash) beneficiaries, and 83.0 per cent of BDT 2,500 cash support beneficiaries were selected by the LG. Local influential persons also played a major role in beneficiary selection as 9.5 per cent of GR (rice) beneficiaries, 22.2 per cent of GR (cash) beneficiaries and 16.6 per cent of cash support beneficiaries were selected by the local influential persons such as community leaders, *Imams* and school teachers. The share of beneficiaries that had applied on their own and got selected was significantly lower, accounting for only 1.4 per cent for GR (rice), 1.5 per cent for GR (cash) and 7.6 per cent for BDT 2,500. It is found that there was a rather insignificant scope for self-selection for the relief programmes. The findings were in line with the qualitative findings collected through FGDs (conducted at different points in 2020). In Rangpur district, the FGD participants felt that there was no opportunity for voluntary application and self-selection.

Figure 11 reveals the percentage of beneficiaries who provided opinions regarding the transparency of the selection process. Most of the beneficiaries either claimed that there was a lack of transparency in the selection process, or they were unaware of the transparency of the selection process. Only a small number

Table 14 Share of beneficiaries selected through various agents*(in per cent)*

Process of Selection	GR (Rice)	GR (Cash)	BDT 2,500
Chairman/secretary/member of the UP committee	89.03	79.30	82.96
Local influential person	9.52	22.24	16.62
Applied and got selected	1.37	1.46	7.56
Pursued/referred by someone and selected	2.49	3.04	2.98
Teacher or member of school committee	1.87	3.23	2.15
Community meeting	1.40	0.70	1.37
NGOs/CSOs	0.30	1.23	0.00
Other	0.35	1.16	0.00
Do not know	1.62	1.75	0.00

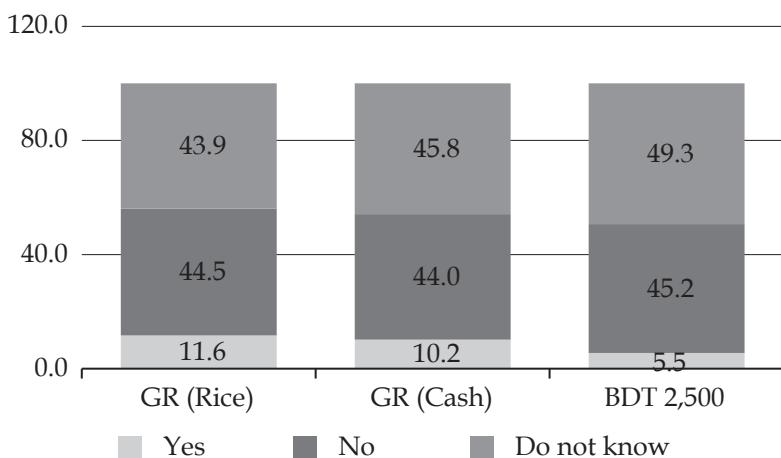
Source: Authors' calculation based on household survey data.

Note: Multiple responses were allowed. Hence, the sum of all shares could be greater than 100.

of beneficiaries said that the selection process was transparent: 11.6 per cent for GR (rice) programme, 10.2 per cent for GR (cash) programme, and only 5.5 per cent for the BDT 2,500 programmes. These findings are also corroborated by qualitative findings (obtained from FGDs and KIIs with the participation of beneficiaries/non-beneficiaries, service providers and stakeholders). CBO members of the Rangpur district stated that LGs had selected their own party members in a subtle manner; there was clear evidence of nepotism in the beneficiary selection process. However, it was also found in the course of the FGDs that affected and eligible people were selected for GR (rice) distribution in Rangpur. For example, in one village in Rangpur, among the 10 beneficiaries, six retail traders and four autorickshaw pullers were selected who had lost their jobs during the lockdown/general holiday period. In Netrakona, Pirojpur, and Sirajganj districts, it was stated by district and

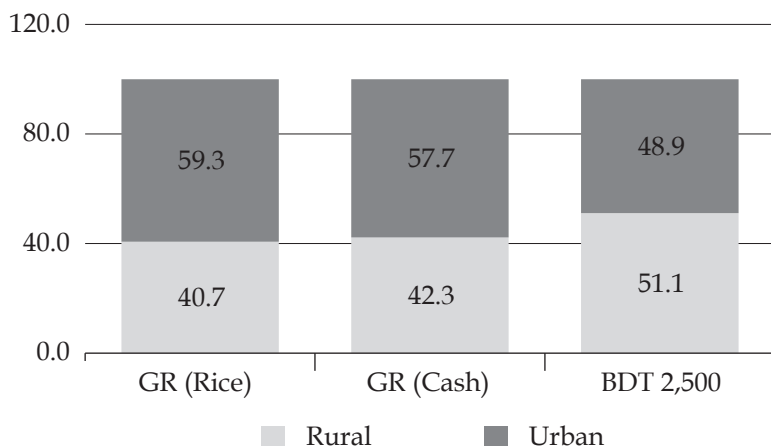
Figure 11 Opinion about transparency in the selection process

(in per cent)



Source: Authors' calculation based on household survey data.

upazila administration level officials that the specified district committee, upazila committee and union committee had selected and enlisted the beneficiaries in a fair manner. But according to the general people who participated in the FGDs, complaints about nepotism and political favouritism were reported in view of the beneficiary selection process, particularly in the case of GR (rice) and BDT 2,500 programmes. Many people in Sirajganj and Pirojpur had not been enlisted even when they were eligible. According to the beneficiaries and stakeholders in Khulna, the selection process was reported to be entirely biased towards party members of political leaders, LAs and LGs, and they received relief support multiple times while the actual eligible people received very little. According to both urban beneficiaries and non-beneficiaries of Dhaka, many people were not enlisted or did not receive assistance even though they were very poor. Moreover, voters took precedence over non-voters in the selection process. According to rural eligible non-beneficiaries of Chattogram, there was favouritism in the selection process; the impoverished and the needy people were not enlisted.

Figure 12 Knowledge about eligibility criteria*(in per cent)*

Source: Authors' calculation based on household survey data.

Degree of transparency of eligibility criteria

It is seen from Figure 12 that 59.3 per cent of beneficiaries of GR (rice) and 57.7 per cent of beneficiaries of GR (cash) programmes did not have knowledge about the eligibility criteria to participate in the programmes. For the BDT 2,500 cash support programme, the share was lower.

In the case of the GR (rice) programme, a greater number of rural beneficiaries (44.7 per cent) had knowledge about the eligibility criteria compared to the urban beneficiaries (35.1 per cent). In contrast, the urban beneficiaries (61.5 per cent) of BDT 2,500 cash support programme had better knowledge about the eligibility criteria than the rural beneficiaries (46.8 per cent). In the case of the GR (cash) programme, the results were almost the same for both urban and rural areas (Table 15).

Public availability of beneficiaries' list is yet another strong indicator to measure the transparency of the eligibility criteria. From Figure 13, it is seen that a large number of beneficiaries either reported that the beneficiaries' list was not available publicly or they were not aware of the list. Only 7.7 per cent of GR (rice), 7.2 per cent of GR (cash), and 3.2 per cent of BDT 2,500 beneficiaries

Table 15 Percentage of beneficiaries who were aware of the eligibility criteria (by geographical area)

Area	GR (Rice)	GR (Cash)	BDT 2,500
Rural	44.69	42.36	46.78
Urban	35.12	42.39	61.52

Source: Authors' calculation based on household survey data.

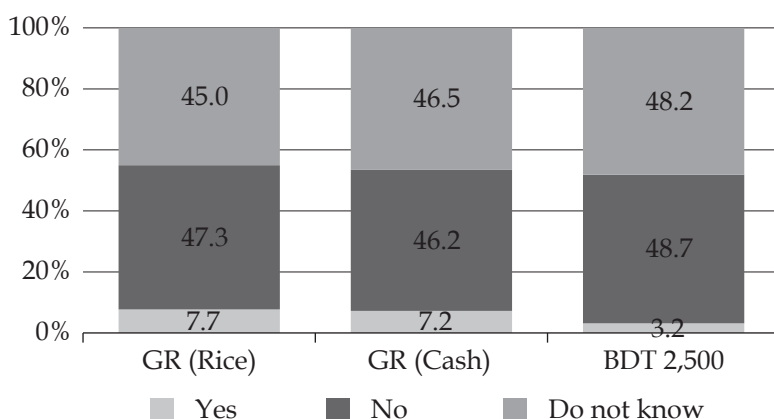
Note: Multiple responses were allowed. Hence, the sum of all shares was greater than 100.

had reported that the beneficiaries' list was publicly available. Qualitative findings obtained from the FGDs (conducted in December 2020) in Netrakona provides some insights to this end. The local government officials at UP had informed that the *list of beneficiaries was hung in their respective Union Parishad offices in Netrakona*. However, community volunteers contradicted this and stated that the list was not hung at the UP offices. However, if someone wanted to see it, it would be made available.

The beneficiaries were asked about their perception of the appropriateness of targeting and selection. According to the survey results presented in Table 16, the majority of the

Figure 13 Public availability of beneficiaries' list

(in per cent)



Source: Authors' calculation based on household survey data.

beneficiaries (39.1 per cent) thought that only a fraction of the vulnerable and eligible people had been targeted. However, a large share of beneficiaries (31.1 per cent) were of the opinion that the majority of the poorest had been targeted.

Table 16 Perception of beneficiaries about targeting the poorest

(in per cent)

Perception/Opinion	Percentage
Just some of them have been targeted	39.13
Most of them have been targeted	31.12
Do not know	2.68
None of them has been targeted	1.79
Yes, all of them have been targeted	1.17
Total	100.00

Source: Authors' calculation based on household survey data.

To sum up, as regards the adequacy of targeting, quantitative findings suggest that there was an exclusion error in the selection process. A large number of eligible and poor households were excluded from the relief programmes. The main purpose of the Humanitarian Assistance Programme implemented by the GoB was to cover the 'new vulnerable' or 'new poor' groups who had lost their jobs and income during the COVID-19. It is true that there was indeed a time constraint for undertaking appropriate planning of the programme and design of its implementation and operationalisation. As a result, population size, area (as found in qualitative and quantitative findings), and traditional methods of selection (with inbuilt possibilities for leakages) were used for beneficiary targeting in both rural and urban areas. This had failed to capture the 'new poor'. Even though information dissemination was in general satisfactory, a large number of people were excluded from the relief programmes due to a lack of adequate information dissemination. These were particularly people living in remote areas who lacked access to mobile network/internet. Thus, it can be said that the targeting was not adequate if operationalisation of the implementation guidelines is considered. Qualitative findings of the study are

in contradiction to quantitative findings, at least to some extent. Evidence indicates that there was an initiative to capture the most vulnerable based on prioritisation. However, prioritisation itself was inadequate and led to the exclusion of some of the eligible individuals. As regards the effectiveness of targeting, both the qualitative and quantitative findings suggest that there was almost no scope for self-targeting. Targeting and selection methods suffered from political favouritism and nepotism. This was particularly the case concerning the cash support programmes. About the transparency of eligibility criteria, the findings indicate a gap in the level of knowledge among people in rural and urban areas.

4.3 Transfer/receipt of benefits

Part of the transfers was lost due to leakages

According to the Humanitarian Assistance Implementation Guideline (2020), 20-kilogram rice (from May 2020) and BDT 500 or equivalent goods were to be given to the beneficiaries of GR (rice) and GR (cash). Apart from the humanitarian assistance programmes, BDT 2,500 were to be given to the 5 million families as cash support. Table 17 shows the quantity/amount and the frequency of provision of relief packages for the beneficiaries. It was found that each household received one-time allocation of 10.4-kilogram rice and BDT 485, on average. Cash support of BDT 2,500 was also provided as a one-off provision. According to 30 September 2020 report of the MoF, the total number of GR (rice) receiving beneficiaries households was 2.54 crore. Based on the survey result and taking into consideration the total number of beneficiaries, the total amount of disbursed rice is estimated to be 26 crore 42 lakh kilogram (or about 2.64 lakh tons). If 20-kilogram rice was disbursed to each household, the total disbursed amount would be 50 crore 80 lakh kilogram (or about 5.08 lakh tons). It is thus clearly visible that there was a gap of about 2.4 lakh tons of rice during the distribution period. These findings were also reflected through the FGDs and KIIs (which took place at different times in 2020) with beneficiaries/non-beneficiaries and service providers. It was found, on the basis of discussion with the government administration officials, that there was no definitive amount stated in this regard. In

some places (such as in Rangpur), the rice distribution had initially started with 10 kg rice per family; and the same family was given another 10 kg of rice after 10 days. In most cases, the CBO members had received 10 kg rice per family. It was found from the LAs and community leaders of a number of districts that there was excess demand for the GR (rice) and that the relief was not adequate. As a result, it was not possible to provide relief to every eligible person according to their needs or at the same time. In some places, the relief was increased later (such as in Rajshahi), and in some other places (such as in Khulna) LA had tried to substitute the cash support of BDT 2,500 with food relief since the limited relief amount was not enough for a large number of beneficiaries. In some areas of Chattogram, the beneficiaries have been divided into several categories on a priority basis. In general, service providers in most of the areas had claimed that there was a shortage of supply vis-à-vis demand, and they had to prioritise selecting the eligible people. Thus, both the quantitative and qualitative findings revealed that there was about a 50 per cent shortage in food relief compared to the demand.

Table 17 Quantity and frequency of provision

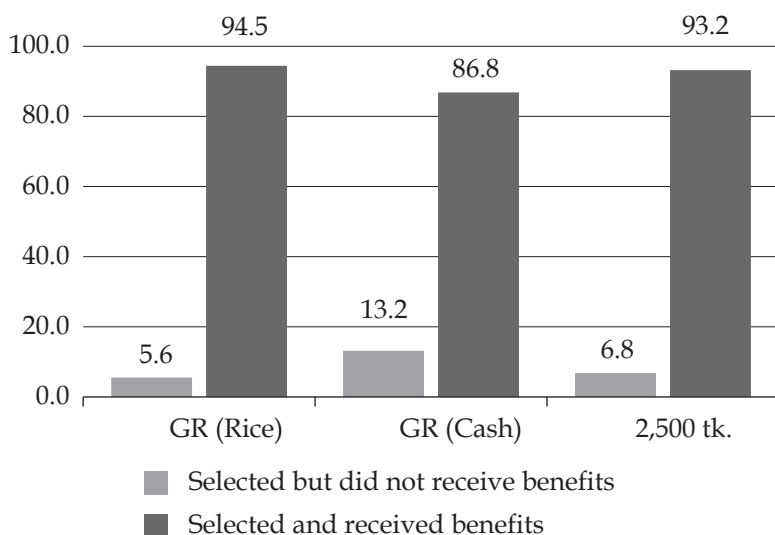
Relief Programmes	Quantity (Average) (in Kg)	Amount (Average) (in BDT)	Frequency (Average)
GR (Rice)	10.4	-	1.16
GR (Cash)		485	1.14
BDT 2,500		2,500	1.00

Source: Authors' calculation based on household survey data.

Reported cases of errors or leakages in terms of 'being selected but have not received the benefits' were on the lower side, ranging from 5.6 per cent to 13.2 per cent. Figure 14 shows that 5.6 per cent beneficiaries of GR (rice), 13.2 per cent beneficiaries of GR (cash) and 6.8 per cent beneficiaries of the BDT 2,500 cash support programme did not receive the allocations despite having been selected for these programmes.

Figure 14 Share of beneficiaries who were selected but had not received the benefits

(in per cent)



Source: Authors' calculation based on household survey data.

Average transaction cost for receiving the benefits

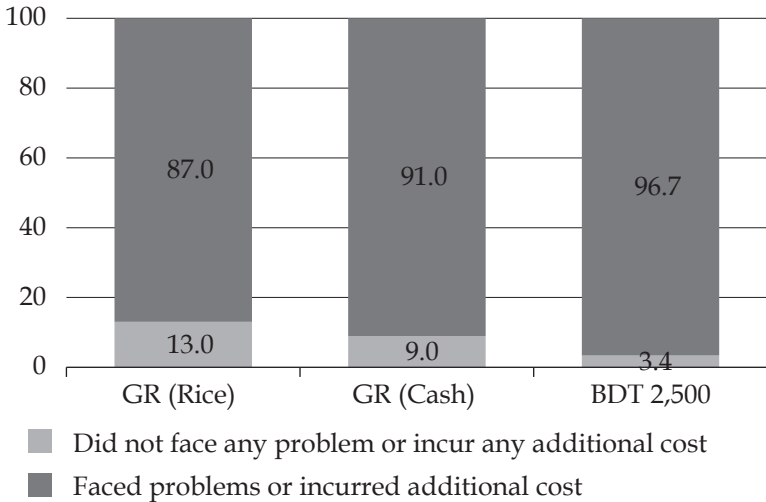
The majority of the beneficiaries (40.3 per cent) of GR (rice) and GR (cash) had received in-kind provisions from upazila/municipality/UP distribution centres (Table 18). It is worth mentioning here that a large number of beneficiaries (30.73 per cent) received in-kind goods at their doorstep since these were directly home-delivered. On the other hand, 18.52 per cent of beneficiaries collected the in-kind goods from nearby schools.

It was mentioned in the Humanitarian Assistance Guideline (2020) that the relief would not be subjected to any Vat/Tax; this was done to keep the costs low in accessing the relief benefits. Figure 15 suggests that 13 per cent of GR (rice) beneficiaries and 9 per cent of GR (cash) beneficiaries either faced problems or had to incur additional costs when accessing the benefits; 3.4 per cent of BDT 2,500 cash support beneficiaries also had to incur additional costs for accessing the benefits.

Table 18 Methods of receiving in-kind benefits*(in per cent)*

Methods	Percentage
From UZP/Municipality/UP distribution centres	40.25
Goods were delivered at home	30.73
From nearby schools	18.52
Other	10.37
Not applicable	0.12

Source: Authors' calculation based on household survey data.

Figure 15 Problems or additional costs faced by the beneficiaries in accessing benefits*(in per cent)*

Source: Authors' calculation based on household survey data.

Table 19 reveals the different types of problems faced by the beneficiaries in getting the benefits. It is found that a large number of beneficiaries, 95.9 per cent for GR (rice) and 92.9 per cent for GR (cash) programmes, had to incur transportation cost to reach the upazila/municipality/up distribution centres for

Table 19 Types of problems faced by the beneficiaries*(in per cent)*

Type of problems	GR (Rice)	GR (Cash)	BDT 2,500
Transportation costs for collecting benefits	95.91	92.86	17.02
Paying extra money for receiving benefits	1.76	1.05	45.77
Sufferings and complications during withdrawing benefits	9.83	5.43	0.00
Others	3.50	7.14	37.20
Total	100.00	100.00	100.00

Source: Authors' calculation based on household survey data.

collecting the provisions. This shows that for the beneficiaries accessing provisions involved cost and time (especially in the case of rice grains) since relief centres were at some distance. Surprisingly, 17 per cent of the cash support beneficiaries had to incur transportation cost for receiving BDT 2,500 even though the cash transfer has been provided through mobile banking. It was encouraging to find that very few beneficiaries of GR (rice) and GR (cash) had to spend additional/extra money for collecting the benefits, 1.8 per cent and 1.1 per cent, respectively. However, the percentage of BDT 2,500 cash support beneficiaries who spent additional/extra money was significantly higher at 45.8 per cent.

These findings are in line with the FGDs (conducted at different times in 2020) with service recipients. Beneficiaries in Rangpur district stated that their transaction costs were noteworthy in terms of time spent, physical distress and the money paid. For example, beneficiaries had to spend 30 to 40 minutes to reach the upazila council office for collecting the Food Relief (rice grain). Moreover, the beneficiaries had to bring the rice on their back and on foot as public transportation was closed due to the COVID-19 situation. As a result, the beneficiaries, especially the elder people and women, had to suffer physical distress in collecting the relief. Additionally, each beneficiary was charged

an additional BDT 10 for each sack of rice (sack of 1 kg rice). Thus, each group of 5 beneficiaries had to spend an additional BDT 50 for 5 kg rice. FGD participants in Sirajganj also shared a similar experience. Ward councillors of Dhaka North City stated that they were given GR (cash) for buying potato and they had to pay BDT 5 per kilogram of potato as 'out of pocket payment' (as they found the actual price of potato was BDT 25 per kg instead of BDT 20 per kg) plus conveyance.

Average time for receiving benefits

The overall time involved in providing the benefits (from selection to delivery) varied from zero days to six months for GR (rice) programme, zero days to two months for GR (cash) programme, and a minimum of five days to a maximum of five months for cash support programme, on an average (Table 20). Half of the GR (rice), GR (cash) and BDT 2,500 cash support beneficiaries received the benefits within five days, within seven days, and within 30 days, respectively.

Table 20 Time interval between the selection process and collection of benefits

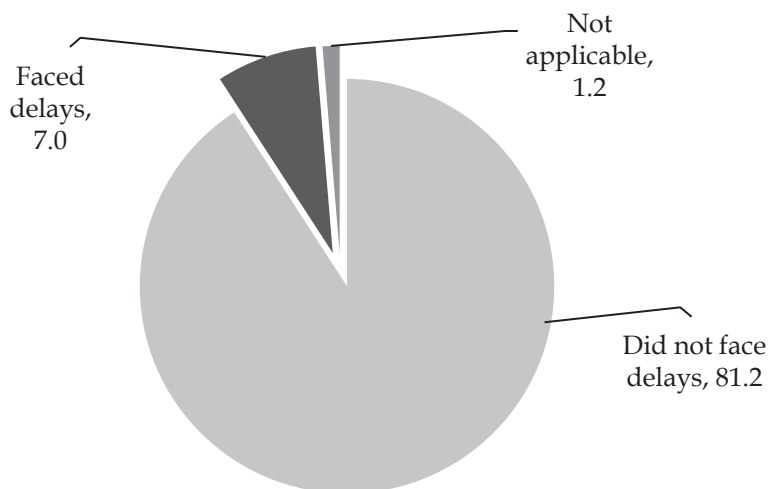
(in days)

Relief Programmes	Time Interval	Median Time
GR (Rice)	0-180	5
GR (Cash)	0-60	7
BDT 2,500	5-150	30

Source: Authors' calculation based on household survey data.

The majority of the beneficiaries (81.2 per cent) did not face any delay in receiving cash transfer of the GR (cash) and BDT 2,500 cash support programmes (Figure 16). Among the people who faced delay (7.0 per cent), the majority of these (18.5 per cent) had faced a challenge in opening a bank account. About 15.1 per cent of beneficiaries faced a delay in receiving cash due to technological error in mobile financial services. Apart from this, lack of NID number/mobile number or wrong NID number/mobile number had hindered the verification process and hence

Figure 16 Percentage of beneficiaries who faced delays in receiving cash



Source: Authors' calculation based on household survey data.

caused a delay in receiving cash; this was true for 12.9 per cent and 5.6 per cent beneficiaries, respectively (Table 21).

Table 21 Causes of delay in receiving cash

(in per cent)

Causes of Delay	Percentage
Delay in account opening	18.54
Technological error from mobile financial services	15.07
Delay in verification due to lack of NID or mobile number	12.89
Wrong NID or mobile number	5.61
Do not know	4.79
Total	100.00

Source: Authors' calculation based on household survey data.

Adequacy of benefits

Sixty-five per cent of the beneficiaries reported that the relief packages were somewhat adequate to cope with the sufferings caused by COVID-19 (Table 22). Only 3.2 per cent of beneficiaries felt that the relief packages were fully adequate to address the adverse effect of the crisis, while 15.7 per cent of beneficiaries felt that these were not at all adequate.

Table 22 Adequacy of relief supports to mitigate the COVID crisis

(in per cent)

Level of Adequacy	Percentage
Somewhat adequate	65.27
Somewhat inadequate	15.79
Not adequate at all	15.74
Absolutely adequate	3.19
Total	100.00

Source: Authors' calculation based on household survey data.

About 95 per cent of the beneficiaries felt that the transfer amount of both in-cash and in-kind benefits should have been more than what was actually provided (Figure 17). They had proposed that BDT 500 per month support should have been increased to BDT 7,000 in the case of cash transfer, and 5 kg rice per month support should have been increased to 60 kg rice in the case of in-kind transfer (Table 23).

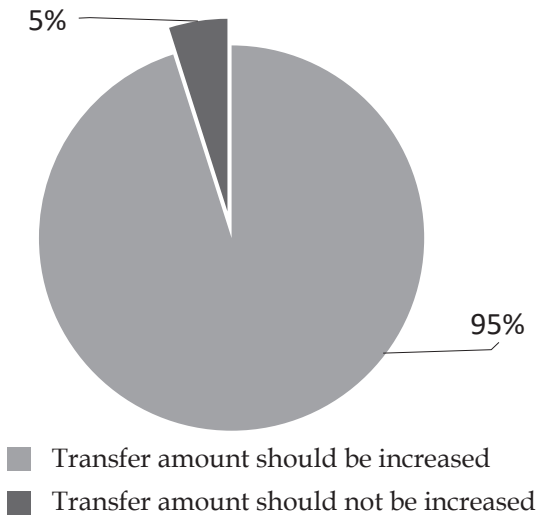
Table 23 Amount of cash or in-kind benefits that should be increased as suggested by beneficiaries

Benefits	Suggested Amount per Month (in range)	Median Value
Cash (in BDT)	500-7,000	2,000
Rice (in kg)	5-60	20

Source: Authors' calculation based on household survey data.

Figure 17 Perception of beneficiaries as regards increasing transfers

(in per cent)



Source: Authors' calculation based on household survey data.

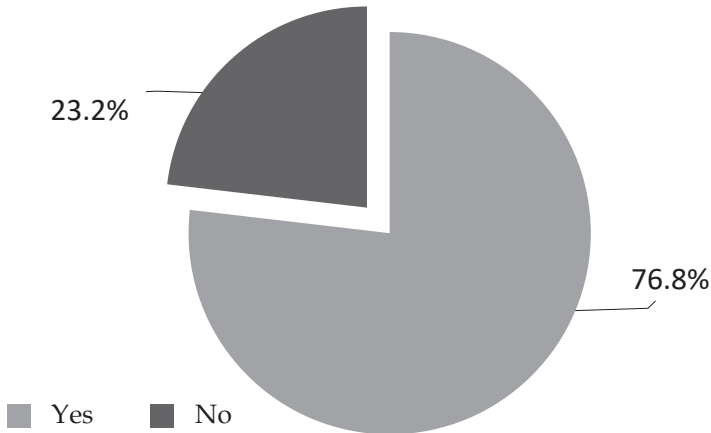
Overall, this pillar performed better in respect of the success in delivering or transferring benefits to the beneficiaries with minimal errors/leakages and with no unwanted delays. However, there had been cases of unnecessary transaction costs incurred by the beneficiaries in receiving the benefits. Furthermore, the magnitude of the benefits was found to be inadequate, as reflected through the perception of both service providers and service recipients.

Perception about receiving the benefits

It is evident from Figure 18 that 76.8 per cent of the respondents felt the necessity of relief support programmes. According to 92.2 per cent of the respondents, relief support programmes contributed to the consumption smoothing of the households. For some (9.9 per cent), such supports also contributed to the continuation of children's education or their enrolment (Table 24).

Figure 18 Opinion of the respondents about the necessity of the three relief supports

(in per cent)



Source: Authors' calculation based on household survey data.

Table 24 Types of benefit the relief supports have contributed to

(in per cent)

Types of Benefit	Percentage
Contributed to consumption smoothing of households	92.16
Short-term economic support during unemployment	42.46
Contributed to the continuation/enrolment of children in schools	9.86
Total	100.00

Source: Authors' calculation based on household survey data.

4.4 Information management and use of technology

Degree of use of MIS for transferring benefits and/updating changes in beneficiary information

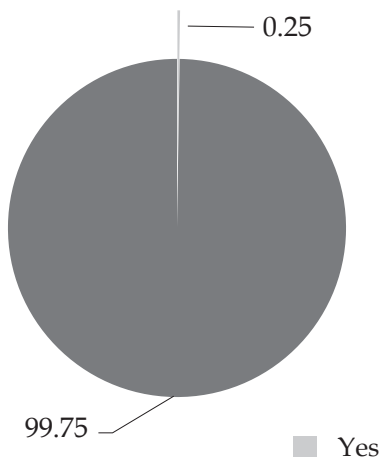
As mentioned earlier, according to the Humanitarian Assistance Implementation Guideline (2020), an accurate database must be created with a quick response (QR) card for every beneficiary (based on the information collected from beneficiaries' national identity card/birth registration certificate and mobile number) for the relief programmes. The QR card was to be created and distributed to the beneficiaries with the assistance of the a2i programme. Relief was to be distributed against the QR card if the central database under the a2i programme was fully ready. Otherwise, relief distribution was to be continued according to the list prepared by the LG manually. However, both urban and rural beneficiaries of Dhaka, Chattogram, Khulna and Rajshahi informed that they were not aware of any central database for any programmes, nor for the gratitude relief programmes, neither for the cash support programmes. The relief was distributed according to the list that was manually constructed by government officials of these districts. Some of them stated that *they were aware of being enlisted, but they knew nothing more than that*. In this regard, service providers at various levels also affirmed that there was no central database for any relief programmes. However, some service providers (LG and LA) of these districts (except Chattogram) said that only the cash support of BDT 2,500 was provided using a central database under the Prime Minister's Office. In the case of Khulna, it was stated by a city corporation/municipality corporation representative that there was indeed a database for all the beneficiaries. However, stakeholders of Khulna could not affirm this and claimed that there was no database available to the beneficiaries.

Percentage of beneficiaries using the designated hotline numbers

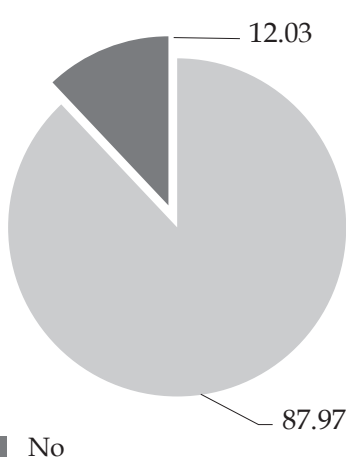
The Humanitarian Assistance Implementation Guideline (2020) suggests that a hotline service must be activated with an ascertained telephone number, and information about this was to be widely disseminated to enable people to seek help regarding the relief services. However, it was found that only one-fourth (0.25 per cent) of the beneficiaries have used the

Figure 19

A. Percentage of beneficiaries who called on hotline numbers to seek relief supports



B. Percentage of beneficiaries who received a response from service providers



Source: Authors' calculation based on household survey data.

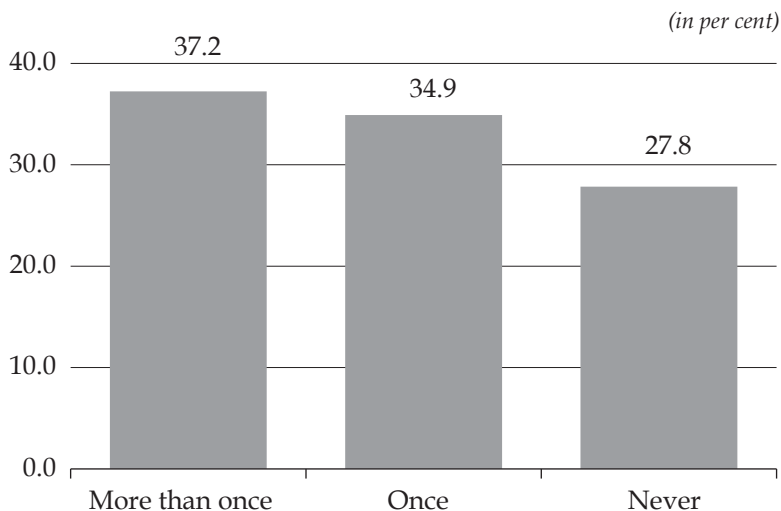
designated hotline numbers to seek relief supports (Figure 19a). The absence of any awareness campaigns, lack of digital literacy, and lack of access to mobile network/internet, especially in remote areas, appear to be the underlying reasons. However, about 88 per cent of the beneficiaries received a response from the hotline when they had called up; this, no doubt, is quite impressive (Figure 19b).

4.5 Control mechanisms and grievance redress (Monitoring, supervision and systematic control mechanisms)

Degree of systematic use of control mechanisms

As was noted earlier, according to the Humanitarian Assistance Implementation Guideline (2020), the LG at the union level were designated to verify the list prepared by the 'Ward Committee' and send this to the LG at the upazila level for approval. No specific instructions were given in the guideline regarding the verification of information provided by the households.

Figure 20 Verification/Crosscheck of households' information



Source: Authors' calculation based on household survey data.

However, in practice, the majority of the beneficiaries stated that the government officials had verified the information/NID/telephone numbers in the course of the support provisioning period. Information provided by about 37.2 per cent of the beneficiaries were verified more than once. However, 27.8 per cent of beneficiaries claimed that their information was never verified (Figure 20). These quantitative findings are in line with the qualitative findings where it was found that verification was conducted by the service providers in Dhaka, Chattogram, Rajshahi and Khulna. This was done either by verifying Voter ID card/NID or by visiting house to check the eligibility of enlisted beneficiaries (in the case of Dhaka and Khulna) or by crosschecking beneficiaries' list by Tag officers and NGO workers.

Adequacy of monitoring and supervision

As mentioned before, the Humanitarian Assistance Implementation Guideline (2020) requires a constant presence of the respective tag officers during relief distribution to ensure the successful operation of the relief programmes. Both qualitative and

quantitative findings reveal that the guidelines were implemented to varying degrees. Survey data shows that a large share of the beneficiaries (75.9 per cent) reported the presence of UP chairman/members during the benefits distribution process. This is quite satisfactory. Secondly, about 23.5 per cent of beneficiaries reported that some tag officers were present during the distribution process (Table 25). Qualitative findings obtained from Sirajganj and Netrakona reveal that tag officers had always been present at the relief distribution spots to ensure that food relief distribution was carried out in a proper manner. However, it was also found that 10.4 per cent of beneficiaries were not aware of the presence of any government officials at the time of the relief distribution.

Table 25 Presence of government officials and LGs at the time of relief distribution

(in per cent)

Categories	Percentage
UP chairman/members	75.91
Tag officers	23.49
Do not know	10.37
None of the aforesaid groups	6.52
DC/UNO/DRRO	1.05
NGO/CSO members	0.33
Total	100.00

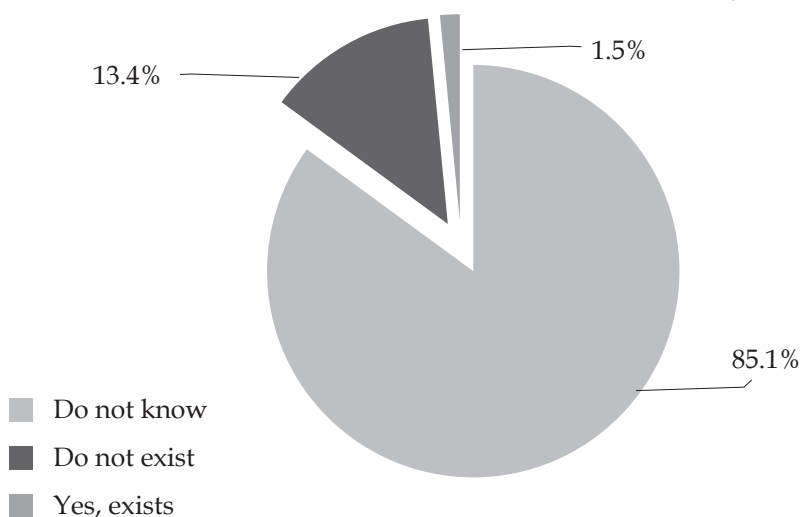
Source: Authors' calculation based on household survey data.

Grievance redressal system

The Humanitarian Assistance Implementation Guideline (2020) states, and this was noted earlier that LGs would be responsible for disposing of any complaints and grievances. It is evident from Figure 21 that the majority of the beneficiaries (85.1 per cent) were not aware of any grievance redress system in connection with the three assistance programmes, and some (13.4 per cent) stated that no such system was available. Very few beneficiaries, only about 1.5 per cent, were indeed aware of any such system. However, almost all of them stated that they

Figure 21 Existence of 'Grievance Redress System' (GRS)

(in per cent)



Source: Authors' calculation based on household survey data.

did not submit any complaint, and neither did they even know of anyone who had submitted such complaints as regards relief assistance programmes.

The very few beneficiaries had indeed submitted complaints pertaining to the three assistance programmes, this was done by using 'hotline' numbers (Table 26). All such beneficiaries (100 per cent) had asserted that their problems were not resolved by the service providers (Table 27).

The aforementioned quantitative findings are corroborated by qualitative findings obtained from FGDs and KIIs (conducted at different points in 2020) with beneficiaries and service providers. It was learned from the CBO members of Rangpur, Sirajganj, Netrakona, and Pirojpur that no specific measure or mechanism was in place for relief-related complaints and their disposal. Such tools as 'hotline' service were not expanded or technologically upgraded. However, beneficiaries could contact the upazila office directly if they had any complaint (but not in Rangpur). Two FGD participants in Rangpur, who were

Table 26 Methods of submitting complaints by the beneficiaries*(in per cent)*

Methods of submitting complaints	Percentage
Using 'hotline' numbers	100.00
In the complaint box	0.00
Directly through oral communication	0.00
Directly in written form	0.00
Online application	0.00
Do not know	0.00
Total	100.00

Source: Authors' calculation based on household survey data.

Table 27 Status of resolving complaints made by the beneficiaries*(in per cent)*

Status of Resolving Complaints	Percentage
Not resolved at all	100.00
Absolutely resolved	0.00
Partially resolved	0.00
Do not know	0.00
Total	100.00

Source: Authors' calculation based on household survey data.

selected for the BDT 2,500 cash support and had received the confirmation message, did not get the exact amount of money that the message informed about. They were told to wait and get in touch with district officials for lodging complaints. However, they did not receive the full payment even after two months. They did not know who was the right person to go to lodge complaints. They have lost any hope of getting the money and remained frustrated. Respondents in Dhaka, Khulna, and Chattogram informed that there was no dedicated 'grievance redress' mechanism. A large part of the problems was solved by LG or LA through discussion and meeting. However, in the case

of beneficiaries, most of them were not aware of how to lodge a complaint and who to approach. Those who have lodged a complaint stated that their problems were not resolved. They mentioned misbehaviour and also nepotism on the part of political leaders when such complaints were received.

In Chattogram, the LA claimed that there was a 'hotline' number available in some places and that the communication service for 'grievance redress' was good. In some places of Chattogram, the UNO's mobile numbers were used as the 'hotline' number. However, very few beneficiaries were aware of it, and those who had knowledge about the number were reluctant to call. In the case of Rajshahi, the observations were somewhat different. For instance, there was a relief operation and management committee in the district and sub-district/upazila level for receiving complaints and their disposal. Also, there were website, social media, Facebook page and 'hotline' numbers for lodging complaints, according to the stakeholders. Besides, there was also a service-related complaint box. However, in Rajshahi, the beneficiaries claimed that they were unaware of how and whom to complain.

4.6 Innovative approaches by service providers

With a view to forestall duplication in the transfer of benefits and increase coverage of the relief programmes, a number of innovative approaches were pursued by concerned stakeholders in a number of districts. Following is a brief description of such initiatives.

In Pirojpur district, authorities at Pirojpur municipality and Sadar upazila, with assistance from the local statistics office and election office, jointly worked to prepare the list of GR beneficiaries. The prepared list was exchanged and verified by relevant authorities of these two entities. This helped prevent beneficiaries from collecting relief from multiple places and multiple times. As a result, it was possible to ensure, to a large extent, that deserving beneficiaries were able to receive government assistance at least once. Local authorities also collaborated with the NGOs to avoid duplication in the beneficiary list. A similar strategy was also followed by local authorities of Sirajganj district.

The Deputy Commissioner's (DC) Office in Netrakona introduced different coloured cards for the beneficiaries of different relief programmes. The DC Office initially prepared a list of 18,000 households affected by the COVID-19 pandemic. Depending on the extent of the pandemic's impact, households in the aforesaid list were distributed under three relief programmes viz. Open Market Sales (OMS), GR and cash transfer. OMS beneficiaries were given a blue coloured card, and GR beneficiaries were given a green coloured card. The beneficiary list was disaggregated up to the ward level, and local officials verified the distributed cards against the beneficiary list to ensure proper ward-wise relief distribution. With the help of different coloured cards, the DC Office in Netrakona was able to carry out the relief distribution process for different groups of beneficiaries (OMS and GR) on different dates. This has led to a reduction of instances whereby some are able to collect relief every day from different places, while others fail to get anything at all.

In the case of Dhaka district, several initiatives were taken to avoid duplication of beneficiaries. For example, in some instances, beneficiaries' NID cards were collected while distributing relief, and these were returned only after the distribution was over. Token-based distribution was carried out in some places, and cards with the seal and signature of a community leader (in this particular instance a madrasa teacher) were given to the beneficiaries which were taken back once the relief had been given. Local administration officials in Dhaka reported that people could call on the hotline number '333' to ask for relief support. If their existing stock of rice was below five kilograms, relief support would be provided at their doorsteps.

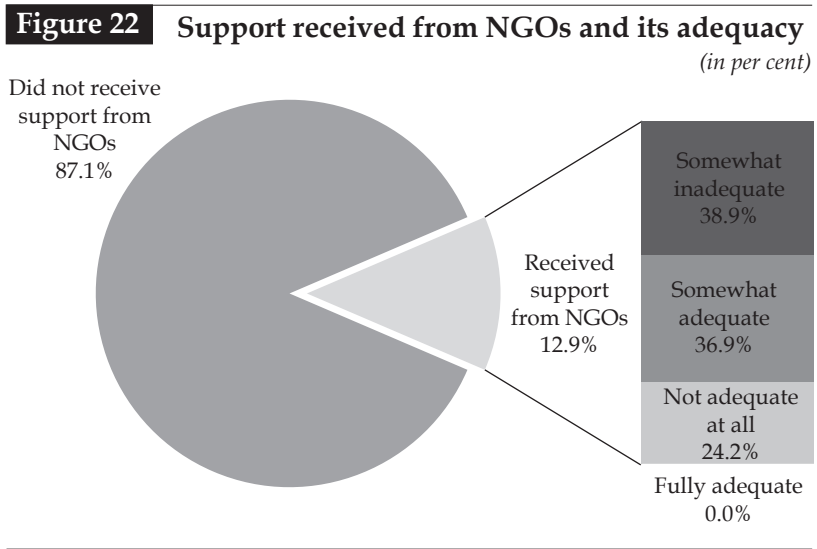
Several approaches were undertaken in different parts of Chattogram district with a view to avoiding duplication. These included, among others, categorisation of beneficiaries based on occupation, verification of mobile number, visiting the relief centre without notice and interviewing the beneficiaries on-spot for cross-checking. Besides, NGOs had exchanged their beneficiary lists with each other and also shared those with the Union Parishad for cross-checking and avoiding duplication.

In Khulna district, local government representatives of some places stated that a dedicated list containing beneficiaries'

mobile number and NID number was prepared for ease of verification. In other places, beneficiaries were instructed to bring photocopies of their NID cards for cross-checking before providing relief. In some instances, a primary beneficiary list was prepared by the local government representatives. The list was then double-checked by the LAs to avoid duplication. Use of NID card to accurately identify beneficiaries was also observed in Rajshahi. Besides this, collecting fingerprints and taking photos of the beneficiaries were also reported in the case of Rajshahi.

4.7 Role of NGOs and CSOs and coordination

It is somewhat surprising that only 12.9 per cent of the household survey respondents had received any assistance from the NGOs. Among the respondents who received support from NGOs, 38.9 per cent felt that the assistance was ‘somewhat inadequate’, while 36.9 per cent stated that the support was ‘somewhat adequate’. About 24.2 per cent of the respondents reported that the support received from NGOs was not adequate at all (Figure 22). To note, none of the respondents, who received support from NGOs, mentioned the assistance to be fully adequate. This



Source: Authors’ calculation based on household survey data.

perhaps indicates that there is ample opportunities for the NGOs to scale up their activities, particularly in view of the increasing demand in the backdrop of the ongoing pandemic.

Qualitative findings from the FGDs and KIIs evinced some useful insights as regards the role of the NGOs. As could be gleaned from the statements of a number of respondents, NGOs have played a supportive role during the pandemic and were able to reduce the burden of the government to some extent in relief distribution, but not in all districts. A number of NGOs carried out a wide range of activities in a number of study areas; mention may be made of Dhaka, Khulna, Chattogram, and Rajshahi. These activities were related to inter alia, food distribution, cash transfer, promotion and distribution of health safety measures, and water and sanitation.

In general, the qualitative study found that the NGOs have contributed to the cause of avoiding duplication by exchanging and cross-checking the list of beneficiaries. Moreover, they have also facilitated the relief distribution process by communicating with and by providing information to the beneficiaries. In some places, NGO volunteers have helped to give relief goods at beneficiaries' doorsteps. Curiously, whenever local administration officials were asked about the role of NGOs during the pandemic, in most cases, they mentioned that the NGOs were not very active. This is perhaps indicative of weak communication between the NGOs and the government administration at the local level, particularly at the beginning of the 'general holiday' period.



**Determinants of Effective
Delivery of COVID-Targeted
Relief Supports**

5. Determinants of Effective Delivery of COVID-Targeted Relief Supports

5.1 Factors affecting the quality of service delivery: A literature review

From the survey of the literature, three key factors and 11 associated sub-factors/variables may be identified, which are likely to impact the effectiveness of service delivery. The three key factors are strategic location, institutional characteristics, and monitoring and evaluation. A brief description of these and the associated sub-factors is presented below.

Influence of strategic location on service delivery

Service delivery points have implications for the quality and efficiency of the delivery of the concerned services. A robust system provides services at locations that are accessible and satisfy the needs of recipients of services (Jones and Gessaman, 1974). Drezner et al. (2012) argued that services should be delivered at the demand points. Thus, public services must be accessible and acceptable to the citizens or to the people for whom the services are intended in the first place. From this discussion, two sub-factors can be identified which may influence the quality of the service delivery. These include:

- i. It takes less time to reach the location of service centres
- ii. It takes no additional cost to access the service centres

Influence of institutional characteristics on services delivery

According to Ngorobi (2015), institutional characteristics influence service delivery. These characteristics include inter

alia, employee skills and competence, level of professionalism, attitude, and incentives. If the service providers are skilled, well-motivated and competent, then it becomes possible to achieve the target of effective service delivery. If the above discussion is taken into cognisance, then the following six sub-factors would have a significant impact on the quality of service delivery. The sub-factors under this pillar are:

- i. Service providers adequately disseminate service-related information (e.g. eligibility criteria, allocation amount, place and method of service distribution etc.) to the citizens
- ii. Service providers adequately promote the use of technological innovation (e.g. hotline numbers)
- iii. Service recipients are selected based on their eligibility, rather than their 'connectivity' (e.g. political identity, friendship, relation) with the selectors
- iv. Beneficiaries are able to register in the programmes easily
- v. Service providers provide updates about the date and time of delivery of transfers/benefits
- vi. Service providers are responsive to complaints

Influence of monitoring and evaluation on service delivery

Monitoring and evaluation is a critical component for successful implementation of any service to be delivered. When monitoring and evaluation are weak, service delivery is compromised and undermined and/or the service may not serve its intended purpose. The key area of focus in government service delivery is connecting contracting and management standards to yield assessment, including service delivery and cost. In view of the above, the sub-components under this *pillar* are:

- i. Designated officials always remain present at the site of service delivery.
- ii. Higher ranked public officials regularly visit the site of service delivery to ensure proper monitoring.
- iii. Systemic control mechanisms (e.g., household information verification, database cross-checks, telephone hotlines) are taken advantage of on a regular basis.

5.2 Results and discussion

In order to identify the determinants of effective delivery of COVID-targeted relief supports, a logistic regression model was employed. Details pertaining to this exercise is provided in the Technical Annex. Based on the discussion in section 5.1, ten variables associated with the aforementioned three key factors were selected to carry out the exercise. At the same time, five variables pertaining to the socio-demographic status of the survey respondents were taken into consideration. It was assumed that these 15 variables would have an impact on the effectiveness of delivery of the three selected programmes, GR (rice), GR (cash) and BDT 2,500 transfer, implemented by the GoB during the Corona period.

Pearson Chi-square test (where the null hypothesis states that there exists no association between the two variables under consideration) was used to evaluate the fundamental relationship between the dependent variable (quality of service delivery) and the abovementioned 15 independent variables. Tables 28, 29, and 30 present the factor-wise relationship between beneficiaries' perception (satisfaction or dissatisfaction) and the quality of delivery of the three selected programmes.

From Table 28, the insignificant influence of strategic location on service delivery can be observed as Chi-square P-value is greater

Table 28 Influence of strategic location on service delivery

Variables	Satisfied (%)	Not Satisfied (%)	P-value of Chi-square Test
<i>Distance of service centre from the residence</i>			
Far	12.70	4.47	0.40
Close	54.98	27.85	
<i>Faced any type of problems or incurred additional costs</i>			
Yes	7.17	4.03	0.32
No	61.88	26.92	

Source: Estimated from household survey data.

than 0.10 (10 per cent level). Despite this, approximately 55 per cent of the beneficiaries had felt satisfied when their residence was closer to the distribution centres. While receiving the transfers (rice and other goods), 61.9 per cent of the beneficiaries did not face any problems (such as suffering and complications during withdrawal of benefits, additional transportation cost, etc.). Hence, according to their perception, the delivery process was satisfactory.

Among the five institutional factors, acquaintance with selection committee members and beneficiaries' ease of registration for the programmes had a significant association with the service delivery effectiveness (Table 29). Only 1.4 per cent of the beneficiaries were found to be satisfied because service-related information had been extensively disseminated by service providers in their respective areas through miking, campaigning, mobile message, or advertisement. Only a few beneficiaries (0.9 per cent) perceived the service delivery to be satisfactory as

Table 29 Influence of institutional factors on service delivery

Variables	Satisfied (%)	Not Satisfied (%)	P-value of Chi-square Test
<i>Service-related information has been disseminated adequately</i>			
Extensively disseminated	1.36	0.93	0.43
Moderately disseminated	16.10	4.53	
Somewhat disseminated	24.53	11.69	
Not Disseminated at all	21.57	10.28	
Do not know	5.49	3.52	
<i>Awareness of hotline numbers for relief support</i>			
Yes	0.88	0.72	0.32
No	68.17	30.23	
<i>Acquaintance with selection committee members</i>			
Yes	11.53	2.71	0.060*
No	57.52	28.24	

(Table 29 contd.)

(Table 29 contd.)

Variables	Satisfied (%)	Not Satisfied (%)	P-value of Chi-square Test
<i>Beneficiaries' ease of registration for the programme</i>			
Easy	43.76	15.76	0.004**
Difficult	25.29	15.19	
<i>The service provider updated the date, time, and place of services delivery</i>			
Yes	50.11	22.85	0.78
No	18.94	8.10	

Source: Estimated from household survey data.

Note: Here (**) indicates 'significant' at 5 per cent level (<0.05), and (*) indicates 'significant' at the 10 per cent level (<0.10).

majority of them were not aware of the specific hotline numbers for seeking relief supports. This statement also reveals that the service providers have not adequately disseminated service-related information to the potential beneficiaries. Among the household heads (beneficiaries) who had acquaintance with any of the selection committee members, 11.5 per cent perceived the service delivery to be satisfactory, while only 2.7 per cent responded otherwise. About 43.8 per cent of beneficiaries of these specific programmes were satisfied with the service delivery because they found the registration system easier. About 50 per cent of the beneficiaries expressed their satisfaction as they were informed beforehand by service providers about the date, time, and place of service delivery (Table 29).

The presence of local administration was found to be significantly associated with the quality of the service delivery (Table 30). About 19 per cent of the beneficiaries were satisfied with the presence of local administrations, such as DC, UNO, PIO, and tag officers, at the time of relief distribution, while only 5.7 per cent stated the opposite. Similarly, when the local government representatives (Union Parishad chairman/members) were present during the distribution process, beneficiaries of these specific programmes were more pleased with the service delivery. However, the presence of local government officials was found to have an insignificant association with the

Table 30 Implications of monitoring and evaluation for service delivery

Variables	Satisfied (%)	Not Satisfied (%)	P-value of Chi-square Test
<i>Systematic control mechanism (that is, presence of govt. officials, verification of/cross-checking households' information/NID/telephone numbers)</i>			
Once	22.71	12.24	0.52
More than once	26.30	10.87	
Never	20.04	7.84	
<i>Presence of local administrations (DC/UNO/PIO, Tag officers) during the distribution of services</i>			
Yes	18.71	5.70	0.017**
No	50.34	25.25	
<i>Presence of local governments (UP chairman/member) during the distribution of services</i>			
Yes	51.49	24.52	0.29
No	17.56	6.43	

Source: Estimated from household survey data.

Note: Here (**) indicates 'significant' at 5 the per cent level (<0.05).

effectiveness of service delivery. When government officials verified or cross-checked households' information/NID/telephone numbers at least once, beneficiaries were more satisfied with the service delivery.

Table 31 reveals that household heads' educational level has a significant association (p-value being less than 0.05) with the effectiveness of service delivery. At the disaggregated level, about 25.0 per cent of household heads, who have attained primary education (class/grade1-5), were satisfied with the service delivery. Similarly, about 23 per cent of household heads without education (illiterate) and 18.6 per cent of household heads having secondary education recognised the service

Table 31 Socio-demographic variables influencing the quality of service delivery

Variables	Satisfied (%)	Not Satisfied (%)	P-value of Chi-square Test
<i>Education Level of household head</i>			
None	22.98	8.94	0.020*
Pre-primary	1.14	1.01	
Primary	24.96	12.87	
Secondary	18.57	6.64	
Higher Secondary	0.92	1.45	
Tertiary	0.50	0.02	
<i>Income level (based on per capita income)</i>			
1 st quartile	22.80	11.23	0.35
2 nd quartile	14.03	8.11	
3 rd quartile	17.23	6.52	
4 th quartile	14.99	5.08	
<i>Area</i>			
Rural	41.14	15.99	0.28
Urban	27.91	14.96	
<i>Division</i>			
Barishal	3.95	1.84	0.51
Chattogram	11.83	6.02	
Dhaka	10.21	4.01	
Khulna	6.86	3.81	
Mymensingh	13.52	7.29	
Rajshahi	9.95	1.77	
Rangpur	7.48	3.65	
Sylhet	5.24	2.57	
<i>Current employment status</i>			
Employer	0.49	0.45	
Self-employed	31.80	14.80	

(Table 31 contd.)

(Table 31 contd.)

Variables	Satisfied (%)	Not Satisfied (%)	P-value of Chi-square Test
Contributing family member	0.55	0.00	
Paid employee	9.33	3.97	
Day labourer	24.90	11.43	
Domestic worker	1.92	0.16	
Others	0.19	0.00	

Source: Estimated from household survey data.

Note: Here (*) indicates 'significant' at the 10 per cent level (<0.10).

delivery as satisfactory. In general, household heads with lower educational attainment were more satisfied with the service delivery quality than the households with higher academic qualifications. This implies that total years of schooling is inversely related to the beneficiaries' satisfaction level. This may also indicate that it is easier (difficult) to satisfy those with less (higher) levels of education.

The beneficiaries who belonged to the lowest income quartile (22.8 per cent) or rural areas (41.1 per cent) were more pleased with the service delivery. However, these variables exhibit an insignificant association with the effectiveness of service delivery. Beneficiaries who were employed as day labourers or self-employed were more pleased with the quality of service delivery. The major proportion of satisfied and dissatisfied beneficiaries were from Mymensingh (13.5 per cent and 7.3 per cent, respectively) and Chattogram (11.8 per cent and 6 per cent respectively) divisions.

As can be evinced from Tables 28, 29, 30 and 31, only four out of the 15 variables were significantly associated with the effectiveness of service delivery of the three specific programmes. Disaggregation of these variables and their respective odds ratios observed from the logistic regression model provide insights into the influence of certain variables on services delivery.

From Table 32, it can be observed that the household heads who were admitted in primary school but did not pass grade

Table 32 Factors that are significant in affecting the quality of services delivery

Variables	Odds Ratio	P-value	95% Confidence Interval (CI)	
<i>Education level of household head</i>				
None	1.00 ^a			
Pre-primary	0.41	0.07*	0.16	1.06
Primary	0.76	0.27	0.46	1.25
Secondary	1.06	0.80	0.66	1.71
Higher Secondary	0.25	0.01**	0.08	0.74
Tertiary	5.06	0.15	0.52	48.68
<i>Acquaintance with selection committee members</i>				
Yes	2.14	0.07*	0.93	4.93
No	1.00 ^a			
<i>Beneficiaries' ease of registration for the programme</i>				
Easy	1.50	0.04**	1.02	2.20
Difficult	1.00 ^a			
<i>Presence of local administrations (DC/UNO/PIO, tag officers)</i>				
Yes	1.57	0.05*	0.99	2.48
No	1.00 ^a			

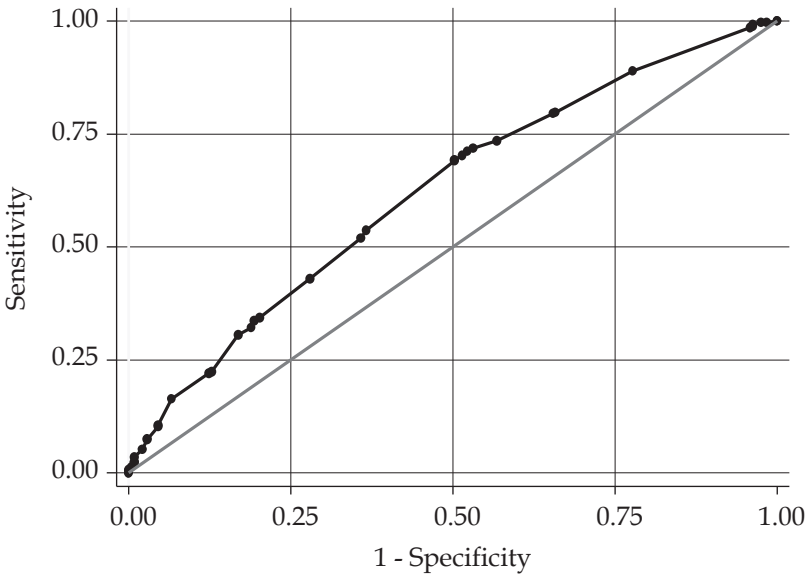
Source: Estimated from household survey data.

Note: (**) indicates 'significant' at 5 the per cent level (<0.05) and (*) indicates 'significant' at the 10 per cent level (<0.10).

one (pre-primary) were 0.6 times less satisfied with the quality of service delivery than the beneficiaries who did not have any education.²² Here the association between pre-primary level education and satisfaction about service delivery is significant at 10 per cent level. Similarly, household heads with higher secondary level education were 0.8 times less satisfied than the ones without education. Beneficiaries who had acquaintance with the selection committee members were 2.1 times more

²²When 'Odds Ratio' is greater than 1, it implies increased occurrence of an event. When it is less than 1, it implies decreased occurrence of an event.

Figure 23 AUROC curve for the logistic regression model



Area under ROC curve = 0.6222

Source: Estimated from household survey data.

satisfied with the quality of service delivery than those who did not have any relation with the selection committee members. Beneficiaries who found the registration process easier were 1.5 times more satisfied than those who did not find it easy. Finally, beneficiaries who stated that LAs were present during the distribution process were 1.6 times more satisfied with the quality of service delivery than those who did not.

From Figure 23, it can be observed that the Area Under the Receiver Operating Characteristic (AUROC) curve value is 0.6. This implies that the classification accuracy of the fitted logistic model is relatively good. Moreover, the Hosmer-Lameshow goodness-of-fit (GOF) test (test value=0.33, P-value=0.95) indicates no evidence of poor fit in the model. Hence, it can be concluded that the model is correctly specified.



Conclusion

6. Conclusion

Pandemic specific relief programmes were meant to be significantly different from the traditional social safety net programmes. These targeted programmes were taken amidst a crisis that had adversely affected almost every aspect of life and livelihood in Bangladesh. There were no pre-existing mechanisms or planning in place to confront a crisis of such overwhelming magnitude. The government needed to roll out the relief programmes under a severe time constraint and, thus, unsurprisingly, had to face considerable difficulties. Indeed, the intensity of the crisis, urgency and time constraint, lack of pre-determined instruments, in addition to the built-in structural and operational weaknesses, have made the GoB's task enormously complex and challenging. This, in turn, had implications for the success and effectiveness of the emergency relief programmes that were put in place.

Based on the assessment in the previous sections, a summarised performance under the five pillars considered under the analytical framework of the present study is presented in Table 33. Among the five pillars, performance under Pillar II (application, selection, and enrolment) was found to be particularly unsatisfactory. Weaknesses in the areas of beneficiary targeting, the scope for self-selection, transparency in the selection process, and public availability of beneficiaries' list contributed to this end. Similarly, the performance as regards Pillar IV (information management and use of technology) was also found to be unsatisfactory due to inadequate information management. The performance under the remaining two pillars (I and III) was found to be somewhat in between. One would

have expected that in the areas of Pillar V (control mechanisms and grievance redress), a functional ‘grievance redress system’ would be put in place, given the specificity of the situation. But this was not the case.

There is no doubt that the coverage and adequacy in view of the significantly increased support required for the marginalised

Table 33 Assessment of performance of the five pillars:
A Dashboard

Pillars	Performance indicators
Pillar I: Coverage strategy and promotion	1. Consistency between coverage strategy and number and type of beneficiaries (rural/urban, male/female, etc.)
	2. Adequacy of activities and mechanisms for information dissemination (awareness campaigns, mass media, community meetings, etc.)
Pillar II: Application, selection, and enrollment	1. Adequacy of targeting
	2. Effectiveness of beneficiary selection or targeting
	3. Degree of transparency of eligibility criteria (e.g., Percentage of the target population who correctly identify the eligibility criteria for receiving relief supports)
Pillar III: Transfer/ Receipt of Benefits	1. Proportion of total transfers that are lost due to error or leakages
	2. Average transaction cost for receiving the benefits
	3. Average time taken to receive the benefits
	4. Adequacy of benefits

(Table 33 contd.)

(Table 33 contd.)

Pillars	Performance indicators			
Pillar IV: Information Management	1. Extent of use of MIS for transferring benefits and/updating changes in beneficiary information (e.g., household composition (newborns or deaths) or address changes)			
	2. Percentage of beneficiaries using the designated hotline numbers			
Pillar V: Control Mechanisms	1. Degree of systematic use of control mechanisms (household information verification, database cross-checks, telephone hotlines, etc.)			
	2. Adequacy of monitoring and supervision (local dealers, payment agencies)			
	3. Grievance redressal system			
Very Unsatisfactory	Unsatisfactory	Neutral	Satisfactory	Very Satisfactory

Source: Authors' elaboration.

people would be an important issue of concern in the backdrop of the pandemic. The study revealed that a large number of eligible beneficiaries, including the 'new poor', were excluded from the specific relief programmes. In this context, coverage strategy, inadequate information dissemination, targeting error, and lack of transparency in defining eligibility criteria were the primary challenges that were accentuated by pre-existing and embedded weaknesses. Major improvements are necessary in case of other indicators such as promotion of 'hotline' numbers and reducing transaction costs such as transportation cost for receiving GR (rice), and paying additional money for receiving the BDT 2,500 cash support.

The study brings forth a number of lessons for government policy actions. First, *allocation matters*. Higher allocation in terms of both coverage and the amount of support provided to the affected population is a necessary condition in any emergency situation. During the pandemic, service providers had to select eligible beneficiaries under difficult circumstances and subject to the allocation of limited resources. Indeed, fiscal constraints should not be any reason for inadequate relief when emergency support for the poor and 'new poor' are involved at times of unprecedented disasters such as the pandemic. Capacity to assess the needs of the newly marginalised, and providing support in an expeditious manner, means the difference between some comfort and extreme deprivations during an emergency situation.

Second, *spatial dimensions matter*. Relief benefits tended to be allocated based primarily on population size, without proper consideration of factors specific to the area concerned. Other concerns such as flood and cyclone and the topography of disaster-prone areas (such as char, haor and coastal areas) had accentuated sufferings caused by the pandemic. Every disaster has local dimensions. These local specificities either mitigate or accentuate the adverse impacts of the disasters. Spatial features of impacts ought to inform interventions, both in terms of quantity and the type of supports.

Third, *consideration of new dimensions of vulnerability matters*. Targeting has been mostly conducted based on income level, at a time when nature of destitution had been changing at a very fast pace. This led to exclusion of a large number of unemployed people and 'new poor' from the relief programmes. Limited scope for self-selection, familiarity with local government representatives, and non-transparent selection process have further aggravated the targeting error and led to both errors of 'exclusion' and 'inclusion', leaving behind a large group of eligible beneficiaries, both old and mostly new. Higher unemployment, income erosion, switching to new jobs with lower pay and new dimensions of vulnerability such as emergence of 'new poor' during COVID type emergencies should guide both targeting and allocation. Furthermore, there should be scope for self-selection at a time when disaster scenario changes on a daily basis.

Fourth, *access to information matters*. Major improvements are necessary in the case of promoting the 'hotline' numbers. Government will be able to reach out to many more people if some of the pre-existing weaknesses are addressed which include digital illiteracy, lack of access to internet usage/mobile usage and limitation of mobile network, particularly for people in remote areas. A massive awareness campaign about the hotlines should be launched at the earliest.

Fifth, *transparency matters*. Lack of adequate knowledge about eligibility criteria was pervasive. Making the beneficiary list public, both locally and nationally, and ensuring transparency as regards eligibility criteria, with the help of digital platforms, must be the norm. Service providers must be provided with clear guidelines in view of implementing particular relief programmes and the concerned selection criteria. For example, during the distribution of GR (rice and cash), in some areas, it was mentioned that if a household has a beneficiary from other social safety net programmes, it would not be included in the list of beneficiaries. However, the relevant guideline does not mention such a provision. Similarly, a lack of clarity on how to execute BDT 2,500 cash transfer among the service providers constrained the delivery of the programme. Transparency in selection criteria is a necessary factor for delivering any relief programme effectively. Digital platforms can be useful in this regard where provisions should be posted for all to access and make use of.

Sixth, *costs involved in accessing services matter*. Transportation costs and additional costs associated with receiving benefits should be taken care of so that it does not create an additional burden for low-income marginalised groups at a time when they are deprived of cash income. This is important also because, during pandemic-type crises, the financial burden involved in accessing public services may mean accessing with difficulty and not accessing at all. The slogan should be: "Take services to the doorsteps of needy people; needy people do not have to come to us."

Seventh, *timing matters*. Adequate preparations should be there to avoid delays in delivering transfers and benefits. The lessons

from delivery of agriculture inputs and implementation of cash transfer (BDT 2,500) should be a pointer and a lesson to this end. Timely delivery of cash transfer is also important for triggering a response in the economy in the form of rise in aggregate demand and triggering the consequent supply-side response, which would lead to income augmenting employment creation.

Eighth, *innovation matters*. Many government officials and local government representatives have put in admirable efforts to raise the efficacy of services delivered. These related to disseminating information, verifying beneficiaries' information, and monitoring and supervision of the distribution process. These innovative practices should be encouraged and incentivised, and should be scaled up through cross-learning exercises involving delivery agencies.

Ninth, *redress of grievance matters*. There is a lack of a functional grievance redress mechanism for relief related complaints and also an absence of follow-up mechanisms. There should be a transparent and accountable grievance redress system with designated responsibilities vested with individual officials. There should be a repository of concerned documents to access and verify the actions taken.

Tenth, *whole of society approach matters*. Bangladesh has a long tradition of active involvement of non-state actors - NGOs, CSOs, CBOs - in times of natural disasters. It is the government's responsibility to pursue a whole of society approach in dealing with the pandemic and in the delivery of relief support programmes. Such collaboration could cover a range of activities at the local level ranging from beneficiary selection, information dissemination, database creation, verification of beneficiaries and delivering of services at the doorsteps of especially the marginalised people. Policymakers need to appreciate that taking advantages of non-state actors could only be to the benefit of the government.

Eleventh, *zero tolerance matters*. At the outset of launching of the COVID-related relief programmes, the Hon'ble Prime Minister had sent out a cautionary note about pursuing a 'zero tolerance' policy as regards corruption and malpractices in relief delivery. The general experience based on field level investigation was

that in the case of GR rice and GR cash, there were no serious allegations of corruption. However, in the case of cash support programme, there were many complaints. Indeed, these led to the discontinuation of the cash support programme, although this had proved to be most effective during pandemic times, in Bangladesh and across countries. The government has now planned to initiate more programmes of similar nature in future. In this backdrop, it will be important to enforce the 'zero tolerance' policy in all earnest and with the backing of necessary enforcement support.

Twelfth, *reliable data matters*. Absence of an up-to-date database proved to be the government's Achilles heels during the pandemic. In spite of the best of efforts, ensuring proper targeting in the absence of a reliable database of eligible beneficiaries, reflecting real-time situation on the ground, has proved to be extremely difficult. In the absence of this, in many instances, the old and outdated database had to be used by the concerned officials. Development of a reliable database maintained centrally but with local disaggregation, being updated on a regular basis, should be given the highest priority by policymakers.

The COVID-19 pandemic is far from over. Indeed, Bangladesh is passing through the second wave of the pandemic in May 2021. The lessons articulated above will hopefully be found useful in designing and implementing similar social safety net programmes to address current and future emergent situations. These recommendations will also be relevant in dealing with the weaknesses generally faced in implementing social safety net programmes in Bangladesh in normal times.

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Technical Appendix

Logistic regression model

Logistic regression is a widely used statistical method for modelling a binary response variable. This method examines the relationship between a binary outcome (dependent) variable and predictor (independent) variables. The outcome variables can be both continuous and categorical. Such variables may include perception about the quality of service delivery (whether the beneficiaries are satisfied/dissatisfied with the quality of service delivery of the three selected programmes).

If $x_1, x_2 \dots x_n$ denote n predictor variables, Y represents the satisfaction ($Y=1$) or dissatisfaction ($Y=0$) with service delivery, and p indicates the probability of satisfaction (i.e. the probability that $Y=1$), then the following equation describes the relationship between the predictor variables and p :

$$\log\left(\frac{p}{1-p}\right) = \beta_0 + \beta_1 x_1 + \dots + \beta_n x_n$$

Where β_0 is a constant term and $\beta_1 \dots \beta_n$ are the regression coefficients of the predictor variables respectively. $x_1, x_2 \dots x_n$ These regression coefficients are estimated from the available data. The probability of satisfaction as regards service delivery p can be estimated with this equation. The parameters of the logistic regression are estimated by maximising the logarithmic likelihood function. Logistic regression model generally includes only the variables that are considered "important" in predicting an outcome variable. A detailed description of the variables (both dependent and independent) is presented in Annex Table 3.

Analytical strategy

For the present exercise, the variable selection process was carried out in two stages. In the first stage, the Pearson Chi-square test was utilised to identify the factors that primarily affect the quality of service delivery. A maximum of 10 per cent level of significance was allowed while conducting this test. In the second stage, a binary logistic regression was performed with the variables selected in the first stage. The most significant factors, alongside their respective odds ratios, were extracted at a five per cent level of significance. The 'Area Under Receiver Operating Characteristic' (AUROC) curve was used to evaluate the predictive accuracy of the final model. The higher AUROC indicates a better performance of the model. The Hosmer and Lameshow goodness-of-fit (GOF) test was also carried out to test the final model's overall fit.

Annex Tables

Annex Table 1 Distribution of rural participants among different categories for three relief programmes

(in per cent)

Categories/Groups	GR (Rice)	GR (Cash)	BDT 2,500
Lower-middle class households	38.91	36.81	35.06
Individual/household in misery or extreme poverty	24.46	24.78	29.34
Day labourer	13.37	15.16	20.37
Floating population	0.93	0.21	0.00
Slum dwellers	1.65	1.46	0.00
Households with disabled members or members unable to work	0.98	0.00	1.93
Elderly-headed household	2.08	3.73	3.50
Beggar	0.00	1.55	0.00
Unemployed labourer	0.00	0.00	0.00
Transport worker	4.26	1.24	3.66
Restaurant worker	0.86	0.81	0.00
Tea-stall worker	2.11	0.00	1.20
Rickshaw/Van puller	5.07	4.97	1.79
Widow/divorced/separated women	2.64	4.28	0.00
Does not belong to any of the above groups	2.68	5.01	3.15

Source: Authors' calculation based on household survey data.

Note: There were multiple responses available for one respondent. Hence, the sum of all the share could be greater than 100.

Annex Table 2 Distribution of urban participants among different categories for three relief programmes

(in per cent)

Categories/Groups	GR (Rice)	GR (Cash)	BDT 2,500
Lower-middle class households	36.96	36.35	53.25
Individual/household in misery or extreme poverty	19.09	20.22	10.15
Day labourer	14.21	16.50	9.10
Floating population	0.47	2.40	0.00
Slum dwellers	2.90	4.17	2.15
Households with disabled members or members unable to work	1.51	0.20	0.81
Elderly-headed household	1.87	0.36	2.17
Beggar	0.00	0.00	0.00
Unemployed labourer	2.32	0.00	3.62
Transport worker	3.59	1.93	4.32
Restaurant worker	0.00	0.46	0.00
Tea-stall worker	0.00	0.99	3.99
Tea-stall shop-owner	0.36	0.84	1.97
Rickshaw/Van puller	3.76	3.69	0.00
Widow/divorced/separated women	2.25	1.70	1.45
Bede or Hijra (transgender)	0.48	0.00	0.00
Does not belong to any of the above groups	10.24	10.20	7.03

Source: Authors' calculation based on household survey data.

Note: There were multiple responses available for one respondent. Hence, the sum of all the share could be greater than 100.

Annex Table 3 Description of variables used in Logistic Regression model

Variables	Values
Dependent variable	
Perception on the quality of services delivery	Satisfied, Dissatisfied
Explanatory variables	
<i>Influence of strategic location on service delivery</i>	
Distance of service centre from the residence	Close, Far
Facing any types of problem or incur any additional cost	Yes, No
<i>Influence of institutional factors on service delivery</i>	
Service-related information has been disseminated adequately	Extensively disseminated, moderately disseminated, somewhat disseminated, Not disseminated at all, Do not know
Awareness of hotline numbers for relief support	Yes, No
Acquaintance with committee members	Yes, No
Beneficiaries' registration	Easy, Difficult
Service providers update the date, time and place of delivery services	Yes, No
<i>Influence of monitoring and evaluation on the delivery</i>	
Systematic control mechanism (e.g. verify/cross-check household information/NID/telephone numbers)	Once, More than once, Never
LA (DC/UNO/DRRO; Tag officers) present during the distribution of services	Yes, No
LG (UP chairman/member) presents during the distribution of services	Yes, No
Common explanatory variables	
Income level (Quartile Per Capita Income)	1 st quartile, 2 nd quartile, 3 rd quartile, 4 th quartile

(Annex table 3 contd.)

(Annex table 3 contd.)

Variables	Values
Area	Rural, Urban
Division	Barishal, Chattogram, Dhaka, Khulna, Mymensingh, Rajshahi, Rangpur, Sylhet
Education level	None, Pre-primary, Primary, Secondary, Higher Secondary, Tertiary
Current employment status	Employer, Self-employed, Contributing family member, Paid employee, Day labourer, Apprentices/intern/trainee, Domestic worker, Others

Source: Authors' elaboration based on household survey data.

Note: Income level was measured by calculating per capita income and then categorized into four quartiles.

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