









#### **The Feedback State:**

# Listening and Responding to Bangladesh's Citizens During the COVID-19 Pandemic

Research findings













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We hope that the findings from this study will be helpful for policy makers and policy influencers in constructing a better feedback mechanism system in Bangladesh.

#### Naomi Hossain

Study team Principal Investigator

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#### **Summary**

This report summarizes findings from research designed to assess how and how effectively different levels of the Bangladesh government listened and responded to its citizens during the COVID-19 pandemic, and what was learned about these mechanisms of feedback. The project was motivated by recognition that the health, social, and economic crises sowed by COVID19 in March 2020 are ongoing and mutating: rapid learning about what is working in pandemic response is particularly urgent in Bangladesh, where inadequate health services and a patchy social safety net left many people vulnerable. This report summarizes key findings from research that asked:

- Which mechanisms were used to gather citizens' feedback (about their health and social protection needs specifically) during the COVID-19 pandemic and how successfully?
- How did central government encourage or enable local government to respond?
- What have government actors learned about the value of citizen feedback in the pandemic response (and beyond)?

The background to the project includes recognition that the Bangladesh state has a strong record of learning from crises; before the pandemic, there had been a range of sweeping reforms to enable citizens to participate in the governance process, as well as investments in digital and face-to-face systems to enable feedback and communication between citizens and government actors. How successfully did these reforms and investments support the COVID-19 response? Did the Bangladesh state succeed in listening and respond to its citizens' needs regarding health and social protection during the pandemic? Four research components addressed these questions:

- 1. A policy process tracing component assessed national level policy processes through which local governance reforms were implemented and mechanisms introduced to gather and respond to citizens' feedback regarding health and social protection services during the pandemic.
- 2. A nationally representative sample survey gathered data about citizens' experiences with feedback and response during the pandemic.
- 3. Local level case studies explored the same questions in more depth in locations where local governments were identified as having successfully enabling citizen feedback and response during the pandemic.
- 4. The transnational accountability mechanisms component assessed how and the extent to which World Bank mandates to use citizen engagement and grievance redress mechanisms were deployed in COVID-19-related projects in Bangladesh. A nationally representative sample survey gathered data about citizens' experiences with feedback and response during the pandemic.

#### **Key Messages**

The research uncovered a generally positive appraisal of official efforts to gather feedback from citizens. Systematically listening to citizens was approved of as an aspiration by state officials and political representatives, development partners, and in particular, by citizens. This marks a significant cultural change in which the state was previously expected to broadcast and inform citizens (a top-down approach to communication), and this was largely accepted by the population. Our research identifies a shift towards a great expectation that the state should be more effective at taking proactive steps to listen and respond to citizens' perspectives and concerns. Evidence suggests that the pandemic also introduced a shift in ways of working and organizational culture within the government, notably towards more online and digital modes of operation. This appears to have sped up processes of information-sharing across different levels of government, in principle making it possible for citizen feedback to travel easily, rapidly, and in aggregate forms, from the frontline to the centre.

However, in practice, people's trust in formal feedback mechanisms in practice was weaker than their belief in the value of such practices. There appeared to be a broad consensus across sectors of society that official efforts to listen to citizens were in good faith, but that they were not (yet) very effective, for reasons that included people's preference for face-to-face and in-person interactions, and because people do not in general believe complaint will be effective. In the gap between aspiration and reality, individual and social initiatives to enable citizens to be heard and to have their needs responded to were visible.

Despite a strong and consistent emphasis on digital and online formal systems for citizen feedback and response, the research found that analogue and informal means of communicating concerns and requesting assistance remained the most important means of citizens providing their feedback. At the same time, there are valid concerns that the shift towards electronic modes of service delivery is not being matched by attention issues of rights to privacy and the scope for misuse of data and digital platforms for surveillance and/or harassment of citizens. Nevertheless, more than a decade's worth of investment in digitalization and online systems does appear to have paid off in terms of improving government capacities for internal communications and operations during the pandemic, for communicating with citizens, and in terms of the successful Surokkha application, which enabled people to register for the vaccine and helped track uptake.

Capacities for response and resolution of citizens' concerns remain uneven: The effectiveness of responses to citizens' concerns are determined by political priorities and state capacities for effective response. There is a proliferation and fragmentation of platforms for gathering citizen feedback and providing citizens with information which is challenging for both citizens to navigate and for state actors to use.

#### Recommendations

#### 1. Explore the scope for creating a unified system for citizen feedback and response.

The scope for effective citizen feedback and response may be enhanced by a unified system that would enable all types of feedback and complaint to be gathered, sorted, and monitored centrally. This has the potential improve both the citizen-user experience of giving feedback, and the government capacities to respond to the feedback by addressing individual grievances and concerns, and improving policies and programmes. It would help with public awareness of the system and ensure that people do not have to search for the right actor or platform to complain or request services. It would also help create transparency about the rates and nature of citizen feedback, as well as of the pace and type of government responses and resolutions to that feedback. The 333 hotline already plays something of this role, and its role should be assessed more systematically. Nepal's 'Hello Sarkar' system and Indonesia's Lapor system are both relevant examples for the Government of Bangladesh to study closely and learn from.

But there is also the need for stronger investment in capacities for response: there is limited value in listening to citizens better unless there is also the scope to respond, as citizens may get frustrated and lose faith in the system if they are invited to give their views but their concerns go unaddressed. The government needs to invest in supervision and management of the feedback systems, ensuring they receive a high priority and are protected from political interference or mal-governance. The government should also ensure that feedback feeds into a policy response, and that common complaints are investigated thoroughly and policy actions taken to prevent common problems from occurring in the first place.

#### 2. Strengthen frontline face-to-face systems for receiving and handling feedback.

A key finding is that the vast majority of citizen feedback is still conveyed through face-to-face interaction with trusted local authorities or state actors. This is not a surprising finding, given that trust is a crucial factor determining whether or not people feel they can safely or effectively seek services or register complaints. Analogue and offline interfaces must be strengthened in order to ensure a more effective feedback system overall. People currently make requests for services and make complaints informally. They can be encouraged to register their feedback formally so that their concerns can reach policymakers higher up in the system. Digital platforms, hotlines and other ICT-enabled systems are not yet able to receive or manage the majority of feedback. However, digital and online platforms will no doubt play a growing role, as people become more comfortable with sharing their feedback online. In addition, digital and online systems provide an effective means of gathering, processing and sharing data about the nature of feedback and the rate of resolution. However, attention must be paid to ensuring the ethical, legal, and rights-based approach to the collection and use of citizens' data, both online and off.

#### 3. Partner with citizen groups to raise awareness and support participation

In other countries such as India, it has been seen that citizen feedback systems work best when organized civic groups – local social organizations and civil society networks – are able to support citizens in their efforts to be heard or to complain. In particular, vulnerable and less-educated people who live with poverty or marginalization, including women and minority groups, require proactive support to register complaints and to ensure they receive redress. A key recommendation is for government to invite organized citizen groups and civic actors to partner with them to make the nascent feedback system more active and effective.

### 4. Development partners should proactively support the development of citizen feedback and redress mechanisms

As strategies for strengthening accountability, transparency, and service delivery, feedback and redress systems offer considerable promise for strengthening the relationship between citizens and their state. Development partners such as the World Bank require government projects to undertake citizen engagement and install grievance redress mechanisms, yet are not currently either actively encouraging them in this process, nor learning from their successes and challenges. The growth of citizen feedback and response systems within the Bangladesh govt. has marked a remarkable shift in the ways in which the state interacts with the people, and merits far more attention and support than development partners are currently providing.

The health, social, and economic crises sowed by the COVID-19 pandemic linger: learning about what works to respond to the pandemic is urgent in Bangladesh, where weak health services and a patchy social safety net left millions vulnerable. Yet he Bangladesh state has a strong record of learning from crises, and pre-pandemic, made reforms to enable citizens to participate in the governance process, including through strengthening mechanisms of feedback. So did the Bangladesh state succeed in listening and responding to its citizens' needs regarding health and social protection during the pandemic? What did it learn from how it listens and responds to citizen feedback that will help it govern future crises? The present report summarizes key findings from a research project, The Feedback State: hearing and responding to Bangladeshi citizens during the COVID-19 pandemic, which was designed to ask these questions, which are of core relevance to understanding the governance dimensions of successful pandemic response.

- Which mechanisms were used to gather citizens' feedback (about their health and social protection needs specifically) during the pandemic – and how successfully?
- How did central government encourage or enable local government to respond?
- What have government actors learned about the value of citizen feedback in the pandemic response (and beyond)?

The Feedback State: Listening and Responding to Bangladeshi Citizens during the COVID19 Pandemic. This project, funded by the Foreign, Commonwealth and Development Office (FCDO) of the UK government under the Institute of Development Studies' CLEAR program, asked the following:

- The policy process tracing assessed national level policy processes through which local governance reforms were implemented and mechanisms introduced to gather and respond to citizens' feedback regarding health and social protection services during the pandemic.
- A nationally representative sample survey gathered data about citizens' experiences with feedback and response during the pandemic.

- Local level case studies explored these questions in locations where local governments were identified as successfully enabling citizen feedback and response during the pandemic.
- The transnational accountability mechanisms component assessed how citizen engagement mechanisms were deployed in World Bank COVID-19 projects in Bangladesh.

The research project comprised four components which aimed to maximize the benefits of interdisciplinary research and mixed methodologies, harnessing in-depth insights from multi-sited qualitative research, with the breadth of evidence enabled by a nationally- representative sample survey. The four components were analyzed in conjunction with each other to answer the research questions.

#### **Component 1: Policy process tracing**

For Component 1 (policy process tracing), public administration experts traced the emergence and use of specific mechanisms for gathering and responding to citizen feedback during the pandemic, including policies and programmes developed under local government and other public administration reforms, as well as specific innovations such as the use of hotlines and online grievance redress systems. The research aimed to:

- Identify governance reforms (e.g., participatory budgeting, consultative forums, grievance redressal services, right to information law) that enabled citizens to seek information or claim health and social protection services during the pandemic
- Identify additional formal or informal mechanisms or tools used during the pandemic to elicit or respond to citizens' concerns (e.g., in-person requests, social brokers, digital platforms, telephone hotlines)
- Explore government actors' assessments of which mechanisms were successful and where, in informing policy responses and programmatic adaptations.
- Document the flow of information about citizens' needs between different levels of government, in particular committees established to address citizens' needs at central government, district and sub-district levels, respectively
- Identify official incentives and support for successful local policy innovations emerging from efforts to respond to citizens' concerns
- Explore what government actors have learned about how to listen to citizens, including identifying any changes in policy or implementation from policy learning during the pandemic.

The research team for Component 1 comprised experts and scholars of public administration and accountability mechanisms in Bangladesh, who drew on their extensive networks as well as their prior research to design and undertake the policy process analysis. They studied innovations and practices at the national level and in more depth in two selected divisions (Rangpur and Rajshahi), which they had previously identified as presenting contrasting examples of the involvement of civil society groups in activating official feedback mechanisms (S. Chowdhury 2018a). The research involved semi-structured interviews with key informants, observation, document review, and a small number of focus group discussions with local community members to verify and triangulate the findings. Several factors influenced our choice of two divisions for our research: the issue of good

connection, the focus on value for money, and the involvement of civil society organizations. Selecting Rajshahi and Rangpur divisions, along with their respective districts, sub-districts, and unions, allowed the researchers to explore the commonalities and differences in the decision-making processes between the central and local governments.

#### **Component 2: Nationally representative sample survey**

For Component 2 (nationally representative survey), data were collected in April 2023 through face-to-face interviews of around 30 minutes following a pre-determined structured questionnaire designed to explore people's experiences with feedback mechanisms in relation to health and social protection services during the pandemic. Computer-assisted personal interviewing (CAPI) tools were used. The sampling frame was the 2011 Population Census, and the sample comprised equal numbers of men and women over the age of 18. The survey followed a multistage stratified random sampling approach. The sample size for the survey was 2400, distributed randomly (proportionately according to division) across 33 of Bangladesh's 64 districts, reflecting the national urban-rural proportion of 60/40. The sample size for each stratum has been calculated using the standard formula as given below:

 $n=([Z_{\alpha/2}]^2\times P(1-P))/\epsilon^2\times DE....(1)$  where n is the minimum level of the sample size required.

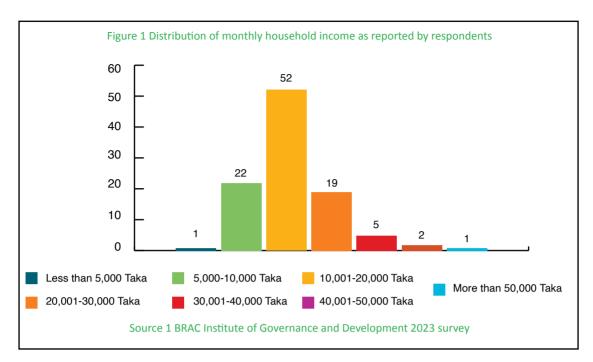
 $[Z_{\alpha/2}]^2$  is the critical value of a standard normal distribution with  $\alpha$  confidence level, DE is the design effect.

We used P=0.5,  $\varepsilon$ =0.05, [Z ( $\alpha$ /2)]^2=1.96.

Considering the design effect 1, by substituting all values in equation (1), the required sample size from each stratum becomes 384. Rounding up, we surveyed 400 households per strata. The country was divided into six large strata to generate information representative of geographical variation in the country10. As per the design, 400 samples were assigned per strata. From each stratum, we selected 40 Primary Sampling Units (PSU) through random sampling. Again, ten households were selected from each PSU by systematic random sampling. One person was interviewed from each household and male and female respondents were selected alternatively from households.

The survey collected information and experience on certain aspects of Covid-19 experiences based on recall. While using retrospective data, recall bias can always occur. However, as this survey did not collect detailed information on the health and safety net experiences of the interviewees, but more generic information, the risk of bias is reduced to some extent. The profile of the sample indicates a broadly representative range of Bangladeshi citizens.

Around 49% of respondents were aged 18-35; 37% were aged 36-55; and 14% were over 55. With respect to their socioeconomic status, 17% had no formal education; 32% had attained



primary schooling, while just over half (51%) had achieved higher secondary education; only 1% of respondents had university degrees or higher education. Three- quarters of the sample (75%) were from households whose reported monthly incomes were less than BDT 20,000, with the rest mostly in the range just above (up to BDT 30,000 per month) (see Figure 1). As a proxy for wealth and asset status, interviewees were asked what their houses were made of; some 44% reported living in houses made of brick, while 46% lived in houses with walls of corrugated iron. The remaining 10% are likely to have been classified as among the extreme poor, living in houses made of mud, bamboo, wood or other less robust materials. With respect to respondents' occupations, the single largest category was 'housewife' at 39%; however, as this is a common response by women who do not have formal professional jobs (such as teacher or doctor), this can be explained by the fact that most women report this as their occupation by default. One-quarter or 25% of all respondents were involved in various agricultural occupations (farming, livestock, fishing, poultry, agricultural day labour), 14% were involved in various occupations such as the transport sector or skilled craft and mechanical labour, while the remainder were spread across professional employment (e.g. teachers), business, being students, retirees, or unemployed persons.

#### **Component 3: local level case studies**

Component 3 (local-level case studies) involved in-depth comparative case study research using rapid ethnographic asssessment methodologies such as participant observation to observe instances of problem resolution and citizen feedback in two selected locations: Paba upazila (sub-district) in Rajshahi district in the northwest of Bangladesh, and Subarnachar upazila in Noakhali, in the south. These two distinctively different geographical locations (mainland and

char land, or alluvial floodplain lands, highly vulnerable to flooding) were selected to unearth differences in the social and political dynamics through which feedback about health and social protection services informed policy innovation and response. The findings were collected on the basis of discussions with government officials and community members, and sought specifically to identify local-level instances of 'success' in the COVID-19 response. Researchers focused on exploring local people's experiences with COVID-19 shocks, public knowledge of citizen charters and other public sector reforms designed to enable citizen feedback and response mechanisms, as well as on the behaviour, habitus and practices of local officials. The small research team of two postgraduate students and their professor worked in local community clinics, local bazar and upazila health complexes in the two case study areas.

#### **Component 4: Transnational Feedback Mechanisms**

Component 4 (transnational feedback mechanisms) explored how feedback mechanisms featured in World Bank COVID-19 projects in Bangladesh. Bangladesh borrowed over a billion US dollars for World Bank projects specifically to respond to the pandemic in the immediate term, including in health and social protection, and around USD 3 billion since the onset of the pandemic, including for projects to boost job creation and economic recovery<sup>11</sup>. World Bank projects are required under their own policies to enable citizen engagement in programme design and implementation, and to support the establishment of formal grievance redress mechanisms (World Bank 2018; Nadelman, Le, and Sah 2019; N. Hossain, Joshi, and Pande 2023). This research component examined how and the extent to which World Bank-supported projects enabled citizens to provide feedback and register grievances regarding world projects. The research for this component involved:

- Identifying appropriate projects
- Reviewing official documentation by the World Bank and the Government of Bangladesh for information about proposed and implemented stakeholder engagement and feedback or grievance redress mechanisms
- engagement and feedback in those projects<sup>12</sup>.

<sup>11</sup> See https://www.worldbank.org/en/country/bangladesh/coronavirus. Accessed 12 June 2023.

<sup>12</sup> Accessing the correct individuals was challenging, and there was some reluctance to be attributable for information provided. We were directed to official documents for citable evidence. For these reasons, this note draws in a limited way on those discussions, and chiefly to triangulate findings drawn from official documentation.

## Main feedback mechanisms in law, policy, and practice prior to the pandemic

#### Governance reforms enabling citizen feedback and response

Prior to the pandemic, the ruling party had set out an agenda for transforming the relationship between citizens and the state as part of its 2008 election manifesto Din Bodoler Sanad (Charter of Change). Among the relevant governance reforms that shaped capacities for citizen feedback and state response were the passage of laws and creation of agencies tasked with tackling corruption, promoting the right to information, and promoting human rights. Local government reforms introduced new mechanisms and platforms for citizens to engage with the frontline state in the form of participatory planning and budgeting processes, participation in public procurement processes, public hearings, the right to information, the application of a citizens' charter (which also established the Grievance Redressal Service, through which citizens were formally enabled to complain about public services and officials' behaviour), and a whistle-blower law, among others (S. Chowdhury and Panday 2018; Ahsan and Huque 2016). Local government reforms formally granted citizens a role in planning and budgeting processes, including procurement and managing the redress of grievances (S. Chowdhury and Hossain 2022). There is some evidence that these participatory processes helped improve public service delivery, scope for citizens to hold public authorities accountable, and social capital formation (Panday and Chowdhury 2020; Folscher 2007; Panday and Chowdhury 2021).

However, the implementation of these initiatives often fell short: citizens had limited knowledge of the Citizens' Charter before the pandemic, and few complaints were registered with relevant agencies through the information commission (Chowdhury 2015; Jamil 2011). Implementation of the right to information has been challenging (Panday and Rabbani 2017; World Bank 2020), and there has been little effort to raise popular awareness of the right, or evidence of any sanctions against failures to meet information requests (Baroi and Alam 2021; M. Chowdhury 2015). Public hearings to enable citizens to engage directly with frontline local governance have suffered from unequal power relations, with women in particular facing gender-based constraints to exercising voice. They have also faced resource constraints, and efforts to encourage citizens to engage have often been limited. In addition, budget allocations often fail to take into account the demands of participatory planning and budgeting, and the cost of engaging citizens in such processes (BIGD 2019; Chowdhury and Panday 2018; Panday and Chowdhury 2020).

#### Digitalization and feedback mechanisms

Digitalization and the promotion of online platforms and information communication technologies for the management of citizen-state relations were also prominent

features of governance practice prior to the pandemic. The 'Digital Bangladesh 2021' vision was also part of the Awami League government's 2009 manifesto, and it aimed for the improvement of public service delivery through the introduction of online platforms, digital cash payment systems and greater information communication technology (ICT) literacy in state and society, as well as to boost technology-based manufacturing and service industry (M. Hossain 2022). Reframed as the 'Smart Bangladesh' agenda aiming to transform society and economy by 2041 since 2021 (see Figure 2), the digitalization agenda is widely understood to have produced uneven effects to date. One reason has been the contradiction between effort to enable broad uptake of ICTs in a context of restrictions on civic space and free speech (Hussain and Mostafa 2016), in which 'netizens' have faced draconian crackdowns under the Digital Security Act, among other policy tools.

The mismatch between policy rhetoric and investments in capacities to design and deliver services has also been an issue. The establishment of Union Digital Centres (UDCs) in each of the country's 4,554 rural councils, the lowest tier of government, aimed to bring information and online service access directly to citizens, as well as creating transparency about government more broadly, through information about the Citizens' Charter, budget and financial



statements, development project lists, decisions, reports, and circulars of the union parishad. Much faith has been placed in the UDCs been seen as potentially providing important services and outreach directly to people otherwise unlikely to be able to access online services and information, with some millions of citizens understood to have used their services to date (M. Hossain 2022). A particularly innovative approach to using data and technology with personal outreach has been the 'Tottho Apa' project, which involves the recruitment of educated young women to provide information and health services directly to women at the upazila (sub-national) level (Sodsriwiboon 2023). However, evidence of who uses these centres and services, and how, has been limited to date, and merits further analysis (S. Chowdhury 2018b; S. Chowdhury and Panday 2018).

#### Informal and quasi-formal mechanisms for citizen feedback

Documented evidence about the use of informal feedback mechanisms in health and social protection services is limited. However, available analysis suggests that face-to-face modes of requesting services, usually from local government officials such as union chairmen or

members (Rahman Rezvi 2021; N. Hossain 2010b; 2010a), or through the mediation of local elites (N. Hossain and Matin 2007) are typical of how citizens attempt to claim their entitlements to social safety net or health benefits (see also Ayliffe, Schjødt, and Aslam 2017). Requesting assistance to be placed on the list for allowances and benefits is particularly widely reported anecdotally. Such informal practices are in effect institutional-

Figure 3 'Tottho Apa' officials who provide information and health monitoring services to local women, combining technology with personal outreach





Source 3 Photo credit: Naomi Hossain, Rajshahi, 2023

ized within local political systems structured by practices of patronage (Hassan 2013; Lewis and Hossain 2019). Prior to the pandemic there was evidence that few people used formal complaints mechanisms, if they even knew they existed (Shelley 2015).

#### Lender requirements for citizen feedback

Also prior to the pandemic, World Bank-financed projects were formally required to undertake citizen engagement activities in programme design and implementation processes, and to support the establishment, implementation, and monitoring of formal grievance redress mechanisms (World Bank 2018; Nadelman, Le, and Sah 2019; N. Hossain, Joshi, and Pande 2023). As Bangladesh borrowed over a billion dollars for COVID-19 related projects, feedback mechanisms would be expected to have been in place for substantial government investments in addressing the pandemic. However, as COVID-19 programmes were mainly designed and implemented during the pandemic, it is reasonable to expect that social distancing and lockdown provisions may have limited the extent of face-to-face engagement.

#### The use of feedback mechanisms during the pandemic

Evidence suggests that citizen feedback became a relatively more important feature of governance during the pandemic. Citizens sought more information and services from government during this time, reflecting the novel and fearsome nature of the pandemic. Although the range of different mechanisms and practices makes it difficult to measure with any rigour, there are signs that people were more likely to register their grievances regarding public services, albeit mainly informally. Within government there were also signs of recognition of the importance of citizen feedback, and of sharing feedback across state actors and institutions.

#### Pandemic and health services information

People urgently sought information about the COVID-19 virus and health and social protection services they could access to protect against the disease or impacts on their livelihoods. The research uncovered considerable consensus among policymakers and citizens that several

initiatives were successful means of responding to people's information needs. The government's messaging and broadcasts about the nature of the pandemic and health services including vaccinations were in general considered trustworthy and helpful. However, people continued to rely on in-person sources and familiar forms of media for their information. For instance, almost half of all respondents (48%) first heard about the pandemic directly from people they knew (see Figure 4). Despite much public discussion of social media posts during the pandemic, only 10% of respondents first heard of COVID-19 from Facebook (etc.), while an even tinier 1% each heard about it first from newspapers or loudspeaker ("miking") announcements. More traditional media such as television were common sources of initial information, with some 40% of all respondents first hearing about the pandemic from television.

Government was an important provider of information about the pandemic, but people accessed government information through a range of channels (see Figure 4). Television was the most important source of information about the pandemic for Bangladeshis, with some 70% of respondents getting their pandemic information from their government through non-state channels, and 34% hearing official COVID-19 information from the state broadcaster, BTV (Bangladesh television). Social media and telephone-based messaging (either from the mobile phone operator or through government SMS) were sources for a further 39% of respondents. Trusted local sources were again prominent sources, with almost 37% of respondents receiving information from local government representatives or via "miking".

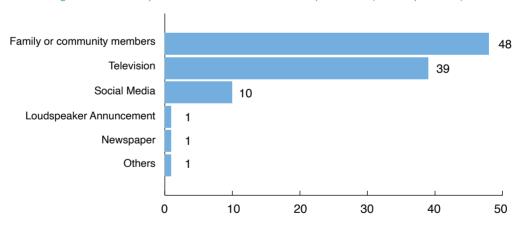
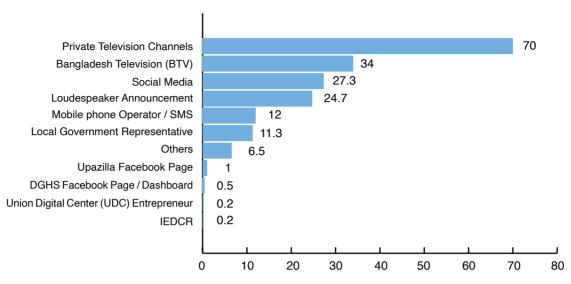


Figure 4 Where did you first hear about the COVID-19 pandemic? (% of respondents)

Source 4 BRAC Institute of Governance and Development 2023 survey

Figure 5 Sources through which people accessed government information about the pandemic (% of respondents)



Source 5 BRAC Institute of Governance and Development 2023 survey

Figure 6 Branding and information for the telehealth service Shastho Batayon 16263



Source 6 Website of the app developer: https://synesisit.com.bd/16263; accessed August 28 2023

Just over one-third of respondents (36%) reported having personally or for their family accessed government health services during the pandemic, and 2% reported having used the (much-praised) telemedicine services. The Shastho Batayon telephone health service logged almost 11 million calls during 2020, and over three million in 2021<sup>13</sup>. The phone line is also used to collect complaints and information about service conditions from users, which feed into the management information system of the Ministry of Health and Family Welfare (MOHFW) and the Directorate General Health Services (DGHS) (on which more below).

The 333 toll-free hotline number for people seeking help or information about government

services and other issues is also believed to have seen greatly expanded use during the COVID-19 pandemic. Originally set up in 2018 after a pilot phase, the platform was designed and run by the a2i (Aspire to Innovate) unit of the Cabinet Division and Information and Communication Technology Division. Some 84 million calls have apparently been made to the 333 number since then, on issues ranging from "filling up forms, allowance, child marriage, land-related issues, food and health assistance and other issues related to government services" Our research team's efforts to collect data about the use of the 333 hotline during the pandemic uncovered that more than providing assistance and information, the system had been turned into the default platform for gathering complaints about public services across the different agencies and ministries. Individual ministries and projects also collect and track grievances and feedback on their own systems. The proliferation and fragmentation of feedback mechanisms may make it difficult for responsible actors to track feedback or to undertake appropriate reforms in response.

#### Experiences with Surokkha: the vaccine registration app

The most effective platform for enabling the state and its citizens to connect over vital services during the pandemic has been the Surokkha application, through which people registered for the COVID-19 vaccine. Although unavailable on its web browser at the time of writing, at the height of the pandemic the application was accessible and useable. Of the 99% of people surveyed who had received the COVID-19 vaccine, a remarkable 86% reported having registered through the Surokkha application (see Figure 9). The remaining almost 15% of respondents registered in-person during mass vaccination drives or at the facilities where they received the vaccine.

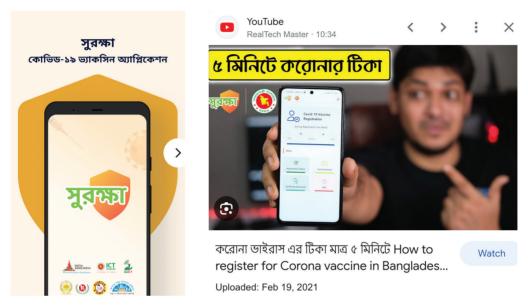
The success of the platform for connecting citizens with the vaccine service merits attention, not only because delivering vaccines was the single most important response of the Bangladesh government to the crisis. The success of the vaccine platform also presents an opportunity for learning more about how the state may be more effective in engaging with its citizens to achieve common goals. It should be noted that the vaccination program had been slow to start, partly due to supply shortages as vaccine-producing countries withheld exports to prioritize

13 The Shastho Batayon telephone health advice system has attracted considerable praise from health policymakers and practitioners, and also appears to be popular with users (Chowdhury, Sunna, and Ahmed 2021; Khatun, Ahmed, et al. 2023; Khatun, Sheikh, et al. 2023). With 2% of respondents stating they or household members personally used the system during the pandemic (not shown in Figure 1), that implies approximates roughly 3.5 million households. But as this is based on recall rather than logged data, it may underestimate the numbers of individuals involved or the numbers of calls actually made. during the pandemic period. In addition, the system receives calls for a range of issues not specifically to do with health advice, and people may have called for other information. These percentages of reported use are provided here only to enable a sense of the proportions of people reported to be using the different health services available. For more information about Shastho Batayon, see http://16263.dghs.gov.bd/report/report. php [accessed August 3 2023].

<sup>14</sup> See https://www.undp.org/bangladesh/announcements/5-years-national-helpline-333-creating-pathway-smart-bangladesh (accessed August 29 2023).

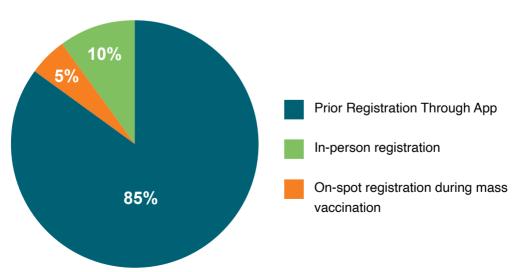
the immunization of their own population; not even 4 per cent of the population had received a single dose by the end of April 2021 (Tayeb 2021). But by 2022, Bangladesh was regarded as one of the most successful countries in terms of delivering COVID-19 vaccines (Rahaman 2022; Nazmunnahar et al. 2023; Al Amin 2023). The vaccine programme has been lauded in particular by Bangladesh's development partners: officials from the World Bank, which helped finance the programme, viewed it as a model for other countries to learn from.

Figure 7 Left: image of the Surokkha app; right, explainer by popular YouTuber RealTech Master



Source 7 Left: authors' image from app store; right: https://youtu.be/hH8UIMmazlw?si=nd47fL0s6JiNNdOj; accessed August 28 2023

Figure 8 Use of the Surokkha app (% of respondents)



Source 8 BRAC Institute of Governance and Development 2023 survey

People were able to register for the vaccine with relative ease: although of those who registered through the app, only 5% managed it without help from others, 76% successfully sought help from a local computer store to register, and 6% were helped by the Union Digital Centers (UDCs). Only 6% of respondents were unable to register, but the challenges faced by these people are important to understand, as they are likely to be among those most vulnerable and marginalized. The challenges they faced included that they had no internet (almost half), with almost one-fifth reporting that the appointed intermediary of the computer shopkeeper asked for more money to help them. For a small proportion the process was too complicated, they could not get help with registration, and around one-fifth of respondents reported a range of different challenges (see Figure 9).

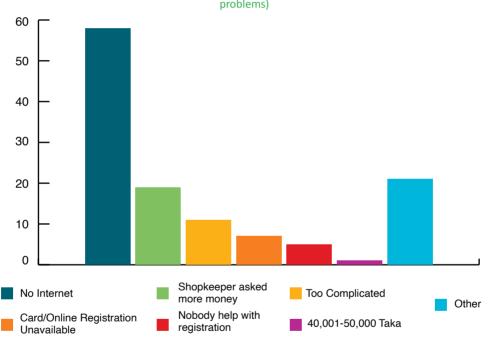


Figure 9 Problems that prevented people from registering with the Surokkha app (% of the 6% who faced problems)

Source 9 BRAC Institute of Governance and Development 2023 survey

A vital reason for the success of the vaccine programme, including the Surokkha registration system, is strong political leadership from the top. Bangladesh has a good track record with immunization programmes (K. Jamil et al. 1999; Adams et al. 2013). A small, densely-populated and relatively homogenous population, and an effective, vertical 'campaign-style' approach to delivering immunization coverage have enabled rapid, almost universal, uptake of vaccination against common childhood diseases. Unlike other approaches to managing the pandemic such as lockdown and social distancing, mass vaccination was an approach which had been successfully

tried and tested in Bangladesh. Interviews undertaken with senior policymakers as part of Component 1 for this study confirmed that vaccination was assigned the highest of priorities by the political leadership, which directed different arms of the state to cooperate to enable the vaccine programme to be rolled out and monitored effectively, inclusively, and as a matter of urgency. As one committee member explained:

Interviews with policymakers indicated that lessons had been learned in senior policy circles, including the need for high-level political support to ensure speedy policy collaboration: innovation and international recognition helps sustain political support; and effective monitoring is a crucial element of accountability and ultimately of policy success. In contrast to more generalized systems for gathering feedback and complaints, including the Grievance Redressal Service(s) and hotlines and helplines, the Surokkha system was a highly focused and specific service required at a particular moment in time.



Our honorable Prime Minister played a crucial role in securing vaccines for the entire nation, earning recognition from the United Nations as a "vaccine hero." Ensuring equitable vaccine distribution, prioritized vaccination in both rural and urban areas. To monitor this process effectively, the Bangladesh Army and various information technology institutions collaborated to develop the Surokkha application. This user-friendly tool efficiently included everyone in the vaccination database, leading to global recognition and an award from the Global Alliance for Vaccines and Immunization (GAVI). The Surokkha application stood out as an outstanding social accountability tool in the fight against the pandemic.



(Interview with a member of one of the central government committees set up to manage the pandemic in 2023).

#### Feedback and grievance redress mechanisms

While the state developed new means of responding to citizens' needs for pandemic-related information during the pandemic, the crisis may have spurred a broader shift in the use of formal citizen feedback mechanisms such as hotlines and online and in-person feedback and complaints registration systems. One finding from the research is that there are many such platforms and systems, several dedicated to specific concerns and sections of the population (see Figure 9). Even a research team dedicated to studying mechanisms of citizen feedback over several months was unable to confidently catalogue the full range, scope, operation, or effectiveness of these feedback mechanisms.

Such a proliferation and fragmentation of entrypoints for registering complaints may make it challenging for citizens to know how best to register their feedback, and for policymakers to

make most effective use of feedback to improve programmes and policies. The policy process component of this research found, however, that the 333 hotline was increasingly being use de facto as a platform for receiving all manner of citizen feedback. A recommendation from this research is for the government to assess the scope, costs and benefits of for more systematic use and promotion of the 333 hotline and related platforms and mechanisms as a centralized platform for feedback management across all sectors, ministries and agencies.

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There is a great deal to learn from. The health sector has a well-developed feedback system. World Bank officials indicated that the integrated system for feedback and complaints handling by the Ministry of Health and Family Welfare (MOHFW) and the Directorate General of Health Services (DGHS) had been highly effective at enabling a fast and systematic tracking of complaints and other forms of feedback. At the height of the pandemic, most feedback regarded access to the

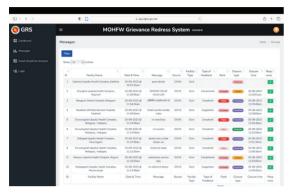


vaccines. At present (August 2023), there is a wider range of grievances, compliments and other feedback registered with the system (see Figure 11 and Figure 12).

The system is transparent, with the nature of feedback, timing, location of the facility about which feedback is being provided, and the actions or resolutions taken all available to view in real-time. Feedback is received in-person, through online portals, and via the Shastho Batayon or other hotlines and helplines. The system seems to be well-designed to enable policymakers to view and respond to problems in the system, both at the local or facility-level (e.g., cleanliness of facilities, shortages of drugs) or at the policy level (the single biggest complaint being the absence of or lack of appointed staff in facilities). What would be valuable to understand is how

this system is being used post-pandemic by health officials to raise the standards of health care, including how complaints and other feedback feed into policymaking centrally.

Figure 11 The Ministry of Health and Family Welfare's Grievance Redress System



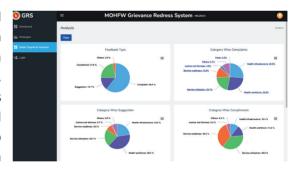
Source 11 https://app.dghs.gov.bd/complaintbox/index. php/dashboard/analysis.asp; accessed 30 August 2023

Other sectors and areas of government service provision such as social protection, do not as yet have such integrated and well-developed feedback mechanisms (World Bank 2021). However, the research found these were under development in some sectors and agencies. Frontline social welfare officials reported receiving and addressing complaints about misuse or mis-targeting of social protection relief payments during the pandemic. Local community members similarly reported making complaints that were addressed at the local level. However, these local examples of

successful grievance resolution may not be formally recorded, and if so, will not contribute to the policy feedback loop.

Government officials of the Local Government Engineering Department (LGED) responsible for the second of the two major COVID-19 related World Bank-financed projects<sup>15</sup> have been developing a grievance redress mechanism for urban infrastructure-related projects, with the support of World Bank staff. This has included developing an operational manual and addressing complaints and feedback. To date these have been received mainly through in-person or physical complaints entered into complaints boxes or to project staff at the

Figure 12 Internal (public) analysis of health grievance redress system



Source 12 https://app.dghs.gov.bd/complaintbox/index. php/dashboard/analysis.asp; accessed 30 August 2023

local level, mostly relating to the location or quality of infrastructure, as well as to do with procurement.

<sup>15</sup> The USD 300 million Local Government COVID-19 Response and Recovery Project (LGCRRP). (https://projects. worldbank.org/en/projects-operations/project-detail/P174937; government website: https://oldweb.lged.gov.bd/ProjectHome.aspx?projectID=1008).

#### Challenges facing citizen feedback

Annual reports (intermittently available on government websites) suggest that the health sector's grievance redress service is receiving increasing levels of feedback. However, with roughly 12,500 individual complaints, comments, or compliments registered in the first 9 months of 2023, registered feedback from a population of 170,000,000 potential health system users remains a fraction of all possible feedback and of all likely complaints<sup>16</sup>. The national survey and in-depth local case studies conducted for this study help explain why meaningful citizen feedback remains limited to date. Three key findings stand out:

- Lack of awareness of formal procedures for registering complaints
- A belief that complaint may be futile
- To the extent that people attempt to resolve problems with public services, they mainly
  do so through in-person contact with local officials or political representatives.

The highly successful Surokkha app was widely used, as noted above. Of the small proportion of potential users who faced problems when registering, even fewer tried to address those problems; of these most personally sought help from local government officials or community leaders. However, a quarter of all respondents were aware of mechanisms for registering problems with the service. When it came to the vaccination process itself, 30% of respondents reported problems, with an overwhelming 93% of these relating to long queues and excessive waiting times. Of those who faced problems, only a10% took action to address them, and again, direct feedback to local facility staff or local political representatives were by far the most popular options, with the use of the hotline or other online facilities such as the Facebook page barely reaching 1% of all actions taken (see Figure 13). Encouragingly, almost two-thirds of those who complained about the problems they faced said the issues were resolved.

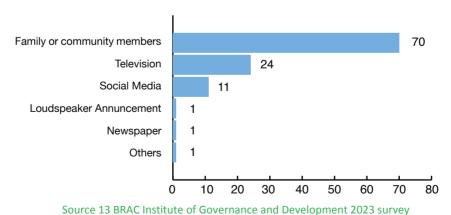


Figure 13 How people resolved problems with receiving the COVID-19 vaccine (multiple answers possible)

Source 13 Brac institute of dovernance and Development 2023 survey

<sup>16</sup> User satisfaction surveys of health services in Bangladesh indicate a generally low level of satisfaction (Cockcroft et al. 2007).

By contrast with the successful COVID-19 vaccination services, citizens showed even less interest in official feedback mechanisms in more general health or social protection services (specifically, COVID-19 relief, in this instance). Only 18% of respondents reported facing problems accessing health services during the pandemic, but of these only one-fifth took any action to address them, with the remainder claiming that it was futile to complain (53%); they did not know whom to approach (17%); there was nobody there to complain to (13%); or that they did not have the time to complain (9%). Respondents were also asked about how they would complain in a hypothetical scenario in which they faced problems accessing services. A clear majority indicated that they preferred to solve their problems with people they are familiar with, such as the responsible person in the facilities, a local medical professional, or a local government representative. A far smaller proportion would consider contacting the civil surgeon or formal mechanisms for complaint.

With respect to social protection services during the pandemic, a remarkable 59% of all respondents knew someone who had received support, 75% of them food aid, and 51% digital cash. However, 34% of the respondents said that they understood there had been irregularities in the social protection delivery process. As Figure 14 indicates, these were chiefly errors of exclusion (eligible people not included on the beneficiary list) or of inclusion (ineligible people included on the beneficiary list).

Many eligible people were Many ineligible people Transfer never arrived

Figure 14 What kinds of problems were experienced with social protection during the pandemic? (multiple responses permitted; % of those who reported problems in the process)

Source 14 BRAC Institute of Governance and Development 2023 survey (Component 2)

Problem on receiving

money on the phone

were on the list

Assistance was delayed

Others

The policy process component of the research found that efforts to ensure the correct beneficiaries

not included in the list

the assistance would be

given

No information about when

were on the list and received the benefits were challenging. In particular, close observation at the union and upazila levels found that the introduction of ICT-based systems of verification improved transparency, efficiency and accuracy of the preparation of beneficiary lists. This was crucial in a context in which the verification process left citizens seeking information from elected politicians, who did not have the authority to access databases maintained by administrative officials. During the pandemic, ministry officials were actively involved in monitoring the delivery of social protection, in particular the preparation of beneficiary lists. However, the increased use of technology in the verification of beneficiary lists could also make it harder for citizens to complain, if errors were introduced in the preparation of lists, or if citizens themselves had limited literacy and numeracy, or found it difficult to provide accurate mobile phone numbers, national IDs, or consistent data. The use of technology has not eliminated corruption, and the process of resolving complaints continues to involve close personal engagement with the actors, as one case uncovered in the research found. An official explained:

An encouraging finding is that, in contrast to the health sector, some 43% of respondents believed there were procedures for registering complaints about problems in the social protection programme; 52% believed there were no such procedures, and 5% did not know. When asked what those procedures were, it became clear that a tiny minority would in the first instance call the hotline or take to social media or other online platforms (around 4%) to register their complaints (Figure 15). By far the majority said they would inform a local government representative or local community leader (84% and 23% respectively), with a further 15% saying they would go to the unelected administrative officials in the locality.

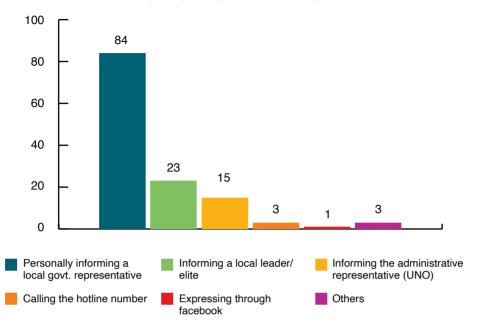
People who believed there had been irregularities in social protection programmes were asked why they did not complain. The results were informative, and did not vary greatly by education level or socioeconomic class: as Figure 16 shows, most people thought complaining about such matters was futile, but some also feared they might face reprisals for complaining.



Our social welfare office currently lacks a formal grievance register, but we make sure to listen to the public and respond to their concerns. An incident came to our attention where a man manipulated another woman's card by providing his own number and misappropriated 4,500 taka from her allowance. Investigations revealed that the man had connections with a former elected member in the area. Upon receiving the woman's complaint, we took immediate action against the accused individual. He was fined 9,000 BDT as a penalty, and strict measures were put in place to prevent any future occurrences of such fraudulent activities. This example serves as a testament to our commitment to addressing grievances and ensuring accountability within our social welfare services.

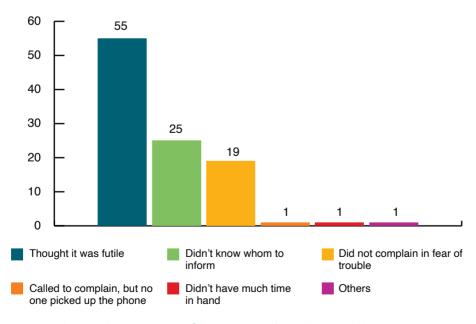


Figure 15 How would you go about complaining about any problems with social protection programmes? (Multiple responses permitted; % of responses)



Source 15 BRAC Institute of Governance and Development 2023 survey

Figure 16 Why did you not complain about irregularities in the social protection programme? (% of responses)



Source 16 BRAC Institute of Governance and Development 2023 survey

#### Feedback mechanisms informing government operations

Although they are neither fully functional nor widely used, it seems that citizen feedback mechanisms are already playing some role in informing policy and programmes. This finding emerges in two ways: from citizens' generally positive appraisal of these mechanisms (in theory), and from government officials' positive appraisal of these mechanisms, and faith in their efficacy in informing policy and practice.

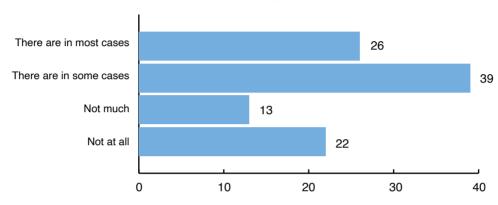


Figure 17 Do government services have grievance resolution mechanisms?

Source 17 BRAC Institute of Governance and Development 2023 survey

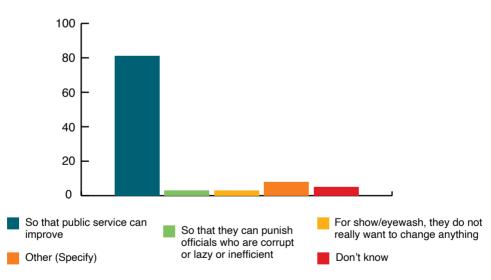


Figure 18 What is the aim of government's grievance redressal system?

Source 18 BRAC Institute of Governance and Development 2023 survey

From the citizens' perspective, while many people are not convinced that complaining is worth the time or effort, many are aware of feedback mechanisms for at least some government services (see Figure 17). While some 65% of respondents knew there were feedback mechanisms in at least some public services, 60% thought that citizens' feedback was taken seriously or

'somewhat seriously'. However, a substantial 40% thought their views were not taken seriously, or not very seriously.

Interestingly, most people appeared to believe that government was sincere in its efforts to gather their feedback, with over 81% of respondents reporting that government had established such mechanisms in order to improve public services (see Figure 18). Two-thirds of interviewees (67%) thought these systems were effective to some extent, compared to 28% who did not agree. Nevertheless, when asked what they would themselves do when faced with a problem with government services, only 32% said they would complain and try to resolve it, with a majority (53%) saying they would do nothing about it, and 16% said they try to resolve it without any direct complaint.

While citizens broadly appear to believe that the state is interested in their feedback in order to improve its performance, government officials held similar views, and viewed the pandemic as having advanced them towards this goal. Government and World Bank officials concurred that the pandemic had spurred a rapid move towards the uptake of ICTs in government business, including the use of electronic filing, cloud computing, emailing (as opposed to paper-based file transfers) and virtual meetings. This shift also enabled innovations in official communications and information dissemination, including electronic and print media, social media platforms like WhatsApp, Instagram, and Telegram, as well as public announcements emerged as a new trend in official communication processes. One public official explained that:



The implementation of the home office concept has brought about significant digital benefits. It has led to changes in the office management system, allowing for efficient use of tools like e-mail, e-filing, and conducting meetings through platforms like Zoom. These digital advancements have expedited the existing communication process.



World Bank officials thought that this shift had made it far easier for feedback to travel across different levels and agencies and institutions of the state. Government officials noted that in particular in the early stages of the pandemic, government actors including senior political leaders engaged government officials and political representatives across the country in online dialogues in an effort to hear from people facing the pandemic across the country. The prime minister herself participated in a remarkable 1600 online meetings to engage with state actors across the country. The a2i (Aspire to Innovate) unit of the Cabinet Division was believed to have played a key role in supporting this pandemic-induced technological advance.



It is good. It is everywhere now. Government recognizes that [people's complaints] are an issue, and they want to resolve them. The World Bank and donors also want it. But we have learned now. People are affected [by our projects and policies]. They need to have a space for saying that they are facing problems, and then they can understand the project too. We have to have a system maintained to do it properly, give them warning [about infrastructure projects]. They must have the chance to monitor the repair work – to check if the right materials are not being used, if procedures are not being followed. People have learned. These things are in the news now, and the local people gossip, they know. Journalists are everywhere.

Government officials also reported that after the pandemic, the use of feedback mechanisms had become more important. One senior ministry official said of the importance and value of grievance redress mechanisms:

In other words, government actors face both internal incentives to develop and respond to grievance redress mechanisms, because they make their programmes more effective, and external pressures to do so, from donors and from citizens and the media.

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The main finding regarding citizen feedback during the pandemic is that feedback became a relatively more important feature of governance in Bangladesh, in several key respects. There was some evidence that citizens were more likely to use formal mechanisms such as telephone hotlines to get information about public services or information from government, but also to be heard by political representatives or administrative officials. There were also some signs that government actors had become more attuned to gathering and responding to such feedback than in the past, in which change the urgency and novel situation of the pandemic are likely to have played a role. The research uncovered some trust in government as a potential source of information and redress or resolution: a majority of citizens reported that the government and its constituent agents and institutions were willing to listen to their concerns, and indicated that they believed their feedback could - in theory inform policy and practice. Yet this positive appraisal of feedback systems was not matched by practical experience or concrete evidence that citizens were in practice using formal systems to be heard by state actors. Citizens broadly agreed that in practice, they tend not to register complaints about public services because they rarely believe it will be worth the effort. In other words, there is optimism about the scope for citizen feedback to make a difference in general, without actual or specific personal experience of successfully doing so. This apparent cognitive dissonance suggests that the novelty of state openness to citizen feedback has not yet worn off, but that it has not yet been matched by experience or knowledge of successful mechanisms to gather citizens' views or address their registered concerns.

In this context, informal and quasi-formal or institutionalized face-to-face means of communicating concerns about health and social protection services remained the dominant mode of feedback in which people had confidence. The emphasis in government communications remained that of broadcasting information to citizens, rather than receiving and responding to citizens' concerns (or hearing from citizens). Perhaps not surprisingly, given that it was an emergency situation, policy decision-making became more centralized. Centralization was also fostered by the nature of the crisis, including the pressure for technocratic solutions, social distancing and lockdowns, all of which reduced the likelihood that people could be directly consulted or engaged in participatory processes. There was limited evidence of deliberate efforts to consult with people about their needs or concerns. At the same time, evidence suggests that the pandemic introduced a particularly sharp shift in ways of working and organizational culture within the government, notably towards more online and digital modes of operation. This shift appears to have sped up processes of information-sharing across different levels of government, in principle making it possible for citizen feedback to travel easily, rapidly, and in aggregate forms, from the frontline to the centre.

While the changes detected in processes of citizen feedback are not all measurable, there is one qualitative change that merits attention. The pandemic witnessed, and may have accelerated, a shift in the nature of the relationship between citizens and state from one characterized by top-down command-and-control, to one of greater openness to horizontal and mutual communication, in which state actors are, at least on the face of it, more accessible and responsive to citizens than in the past. This marks a new phase in an ongoing process of organizational cultural change in the Bangladeshi state, one which was shaped by the urgent pressure of a crisis in which people's needs for information and services were particularly acute. However, the limitations of these processes of feedback in practice confirm that Bangladesh has far to go before the formal mechanisms through which citizens can provide their feedback to and about state services and actors are fully functional, either for citizens to use effectively, or to provide the framework and information flows through which the state can respond to citizen concerns. In addition, there are concerns about the scope for ICT-based communications with citizens to turn into surveillance and to be used for control and reprisal. Questions of data privacy and rights to privacy are not being adequately addressed in the shift to digital forms of governance and service delivery.

## Explore the scope for creating a unified system for citizen feedback and response.

The scope for effective citizen feedback and response may be enhanced by a unified system that would enable all types of feedback and complaint to be gathered, sorted, and monitored centrally. This has the potential improve both the citizen-user experience of giving feedback, and the government capacities to respond to the feedback by addressing individual grievances and concerns, and improving policies and programmes. It would help with public awareness of the system and ensure that people do not have to search for the right actor or platform to complain or request services. It would also help create transparency about the rates and nature of citizen feedback, as well as of the pace and type of government responses and resolutions to that feedback. The 333 hotline already plays something of this role, and its role should be assessed more systematically. Nepal's 'Hello Sarkar' system and Indonesia's Lapor system are both relevant examples for the Government of Bangladesh to study closely and learn from.

But there is also the need for stronger investment in capacities for response: there is limited value in listening to citizens better unless there is also the scope to respond, as citizens may get frustrated and lose faith in the system if they are invited to give their views but their concerns go unaddressed. The government needs to invest in supervision and management of the feedback systems, ensuring they receive a high priority and are protected from political interference or mal-governance. The government should also ensure that feedback feeds into a policy response, and that common complaints are investigated thoroughly and policy actions taken to prevent common problems from occurring in the first place.

### Strengthen frontline face-to-face systems for receiving and handling feedback.

A key finding is that the vast majority of citizen feedback is still conveyed through face-to-face interaction with trusted local authorities or state actors. This is not a surprising finding, given that trust is a crucial factor determining whether or not people feel they can safely or effectively seek services or register complaints. Analogue and offline interfaces must be strengthened in order to ensure a more effective feedback system overall. People currently make requests for services and make complaints informally. They can be encouraged to register their feedback formally so that their concerns can reach policymakers higher up in the system. Digital platforms, hotlines and other ICT-enabled systems are not yet able to receive or manage the majority of feedback. However, digital and online platforms will no doubt play a growing role, as people become more comfortable with sharing their feedback online. While people still on the whole prefer face-to-face systems, the investments in digitalization over the past decade and a half evidently paid off, in terms of enhancing capacities for government internal communications and operations during the pandemic, in communicating with citizens, and in terms of

the successful Surokkha application, which enabled people to register for the vaccine and helped track uptake. In addition, digital and online systems provide an effective means of gathering, processing and sharing data about the nature of feedback and the rate of resolution. However, attention must be paid to ensuring the ethical, legal, and rights-based approach to the collection and use of citizens' data, both online and off.

#### Partner with citizen groups to raise awareness and support participation

In other countries such as India, it is has been seen that citizen feedback systems work best when organized civic groups – local social organizations and civil society networks – are able to support citizens in their efforts to be heard or to complain. In particular, vulnerable and less-educated people who live with poverty or marginalization, including women and minority groups, require proactive support to register complaints and to ensure they receive redress. A key recommendation is for government to invite organized citizen groups and civic actors to partner with them to make the nascent feedback system more active and effective.

### Development partners should proactively support the development of citizen feedback and redress mechanisms

As strategies for strengthening accountability, transparency, and service delivery, feedback and redress systems offer considerable promise for strengthening the relationship between citizens and their state. Development partners such as the World Bank require government projects to undertake citizen engagement and install grievance redress mechanisms, yet are not currently either actively encouraging them in this process, nor learning from their successes and challenges. The growth of citizen feedback and response systems within the Bangladesh government has marked a remarkable shift in the ways in which the state interacts with the people, and merits far more attention and support than development partners are currently providing.

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