

# Elected Local Governments and the Bureaucracy

by Hossain Zillur Rahman

**Effective local governments represent first and foremost a political process aimed at making and ensuring an expansion in the institutional and developmental choices available at the local level; they should not primarily be visualised as implementing arms of supra-local entities.**

## Administration

Empowering local government bodies such as Union Parishads may not in some critical senses imply a higher interface with local administration. Discussions on such an interface are frequently premised on a distinction drawn between regulatory and development functions within administration. Regulatory functions i.e. police, magistracy, judiciary and land administration, are commonly kept out of the purview of reform debates while the focus is mainly on 'development' functions. Yet, experience shows that the regulatory organs described above have an enormous influence over lives at the local level and in many ways define, restrict or disrupt the institutional momentum and growth possibilities of local government bodies such as the union parishads.

The issue here is not only one of commonly understood administrative limitations of union parishads vis-a-vis its developmental mandate but of a larger problem of negative externalities generated by the core regulatory organs of criminal judiciary, police and land administration. In such a context,

local government reform cannot meaningfully be restricted to 'local governments' and development functions but must simultaneously move beyond to regulatory functions and address dysfunctions within existing regulatory processes. If such an expansion of the agenda is easier said than done, a moot issue is whether the more meaningful alternative may not be to shift the focus from the interface between local governments and administration to the autonomous development of the local government bodies.

## Specific Powers

A specific aspect of the feebleness of local government bodies vis-a-vis administration is that the powers and responsibilities of the former are invariably defined in general but vague terms while the powers of the latter are enshrined in specific and precise terms. For example, the general power of the union parishad is to maintain law and order but the specific power in this context lies with the magistracy and the police in terms of powers of arrest, bail etc. At the ground level, it is always the specific power which carries the teeth while the general power is more a mere declaration of intent.

The specific sociology implied in the distinction drawn between general and specific powers in many ways lie at the root of the enfeeblement of local government bodies. Such enfeeblement is compounded by certain attitudes which attach disproportionately larger attention to representational issues at the expense of jurisdictional issues. Yet, elections by themselves cannot generate the 'powers' of local government bodies. The jurisdictional issues have to be addressed on their own terms.

## Quality of Representation

Whether the goal is autonomous growth of local government bodies or enhanced interface with administration, an associated but no less crucial issue is the quality of representation. Negative attitudes of the bureaucracy towards local governments are in no small measure fuelled by the negative images bureaucrats hold of elected functionaries. To an extent, such negative images may reflect bureaucratic prejudice but notwithstanding such prejudice, the quality issue demands independent attention.

There are three sets of issues pertaining to quality. The first has to do with existing proce-

dures of election based on simple majority and how well this reflects the popular will. A review of electoral procedures around the world suggests this as a significant area for reform. The second issue has to do with screening measures to keep out negative candidates. The third issue goes beyond screening concerns and touches on the more pro-active concern of improving the quality of choice available to the electorate. This third has less to do with any administrative initiative but more to do with civil society initiative at awareness-building, social mobilisation and leadership training.

Lastly, there is the related issue of quotas for women and the poor. While quota to enhance representation of women is a move in the right direction, the merit for any quota for the poor is much more questionable. This is precisely because the category of 'poor' is not made up of durable social characteristics which are inheritable such as caste. In such a case, the representational opportunity afforded by such quotas is greatly susceptible to manipulation and tokenism as indeed has been the case in the past. The more valid approach here is the social mobilisation of the poor with enhanced participation in local governments as one of the core goals of such mobilisation.

The author is an eminent economist and researcher.

# Medical Waste Disposal in Dhaka City : A Survey

by Salim Rasheed, PhD, Visiting Professor with students Jesmin Ahmed, M Mahfuz Kamal, Nafeez Fatima, Sharfuddin Ahmed Chowdhury and Asif Mahmood

THIS article reports on a survey done by North South University (NSU) students of some 20 health providers — 10 government hospitals and 10 private clinics — in order to see how hospital waste is currently disposed of and what scope there is for improvement. While none of the students or faculty involved in the survey possess any special clinical or public health expertise, the general picture we get is that the situation is potentially fraught with serious consequences. The principal failings are a lack of knowledge and of interest in safe waste disposal by most health providers; the absence of a budget to effectively implement what we do know about safe waste disposal; and the inadequacy of a suitably effective government policy to guide health providers and punish negligent offenders.

The students who implemented the questionnaire visited a clinic or hospital in groups of two or three and asked questions of both management and low level office staff. The two sets of answers were not always consistent, with the lower level 'ayahs' generally giving more informed and apparently more realistic reports. In some cases the doctors showed no interest at all in the issue and simply directed the students to lower level staff; the staff in turn were quite cooperative until the word 'recycling' was mentioned. It appears that revenue is generated by the sale of some used medical instruments and paraphernalia, and the staff were scared that someone would close this extra source of income by the systematic implementation of 'recycling'. Indeed, there are said to be stalls which openly sell 'recycled' items such as saline bags etc. outside a government hospital. Exactly what is sold so openly and the implications for public health are questions the authorities may wish to look into. In one case, a public relations officer at a clinic was vehemently against any recycling because 'some virus never die, such as the AIDS virus.' This is quite false and reflects alarming ignorance. Perhaps the most worrisome point of this study comes from a non-response. The hospital that deals specifically with a very infectious disease repeatedly refused to provide any information at all. This is a second point the authorities may wish to look into at once.

A general description of the questionnaire is followed by a summary account of the responses.

1. What type of garbage do you generate?
  - Ans A1: Both clinical and non-clinical
  - 2. What is the proportion? (a. Clinical, b. Non-clinical, c. Others)
    - Ans A2: Varies across providers but half clinical and half other seems to be the mean.
    - 3. How frequently do you dispose of your garbage? (daily, weekly, monthly, others)
      - Ans A3: Daily everywhere.
      - 4. What is the quantity? (tons/kgs per day, week, month)
        - Ans A4: Varies widely, depending on the size of the respondent, from 400 kg/day to 20 kg/day.
        - 5. What do you do with it? (sell, burn-up, dump, others)
          - Ans A5: Mostly put in a dump.
          - 6. If sold —
            - a. Who are the buyers?
            - Ans A6(a): Saline bags are sold to plastic shops and so is X-ray.
            - b. What is the amount of revenue you earn from it?

Ans. A6(b): No answer. But they were sold through tender in one case.

7. Burned —

a. Where do you burn it up?

Ans. A7(a): Always in the premises.

b. Do you have any additional expenses for burning it up?

Ans. A7(b): None given. Basically, personal items, bed sheets and furniture reported burned by some respondents.

8. If dumped —

a. Where do you dump it?

Ans. A8(a): City Corporation dustbin.

b. Is there any special arrangements for dumping it?

Ans. A8(b): No.

9. What sort of transportation is used to dump the garbage?

Ans A9: Use a trolley.

10. Is there any common place to dispose of the garbage?

Ans A10: Only the Municipal dustbin.

11. In what form do you dump the garbage? (clinical, non-clinical)

Ans. A11: Both dumped in raw form i.e. without any treatment.

12. Do you suggest any improvement?

Ans. A12: Waste containers should be covered and sanitary.

13. What are the prevailing government policies with respect to disposal of the garbage?

Ans. A13: No one had any idea on this point.

14. Do you have special budget for managing of the garbage? (Yes. No. (if yes then what is the amount?))

Ans A14: No. With one exception — no budget given.

15. How do you account for utilizing garbage specially by recycling in existing framework? (Good. Bad. Not possible)

Ans A15: Most were against recycling — several thought some improvement of the existing system would suffice.

16. Do you think recycling is beneficial to you? (if it is provided by government?)

Ans A16: Central directives could be beneficial — not unanimous, but consensus.

Some general impressions of the entire investigative experience are as follows: (These are my edited notes after conversations with the student interviewers.)

Medical waste management in Dhaka city is a neglected issue. In most places waste is disposed of in raw form. In government hospitals waste is thrown out in an open dustbin from which the waste is cleaned after one or two days. There are

hospitals where a municipality truck comes after every 2/3 days. So the waste has to be left open on the streets for quite a long time. Some of the clinical wastes which lie out in the open are frequently examined by scavengers and can be very harmful to human health and the environment. The clinical wastes (syringes, saline bags, cotton, ampoules) are usually dumped in raw form (except in BIRDEM where the saline bags are cut in middle and disposable syringes are broken). It is hard to accept the fact that parts of human bodies are left out in the dustbin (orthopedic hospital). In Shishu hospital a Japanese team is working in a waste management project where they burn the infectious wastes in closed chamber. Only in BIRDEM, has the hospital authority created a system where, through a tunnel, the waste is stored in the basement. The City Corporation collects waste from there.

It is not clear how the system is running. Infectious clinical wastes are not identified. Used syringes are sold again in some cases. The government does not have a well-defined waste management policy so many decisions are taken at the micro level. In one hospital (according to the sweeper) the wastes are blocking the drains. Clinical wastes are sold for 20 taka/kg in some places. No one uses special instruments which could make the task easier, more proper and thus safer. The whole thing is done manually using some simple buckets and polythene bags. Among the people we interviewed, we found no one happy with the present system. All of them want it to be improved. But it seems that none of them has the interest or the authority to perform the task.

In conclusion, we can summarise our findings: There is no specific framework for waste management and the hospital authorities are involved in this issue. There is a general lack of awareness of how potentially serious a matter this is. None of the hospitals has special budget for waste management. So the people who do the task have little interest in providing improved service. Great dissemination of information by the Public Health authorities, followed by guidelines to be issued by those who regulate health providers (this could be public or private or both), along with some enforceable measures unsanctioned by the City Corporation appear to be called for.

## Daring Flights

PILOTS can now fly daring low-level missions at night using Nightbird forward looking infrared (FLIR) imaging systems. The system has revolutionised the operational effectiveness of military aircraft and will soon add to safety in civil aviation. Demonstrated in a display at London's science museum FLIR is based on the fact that all objects in the world emit radiation at wavelengths of around 10 micrometres. It is so effective that pilot can taxi, take off, fly at low level with full maneuverability and land all in complete darkness.

CSE/Down To Earth Features

# Transforming Destitute Women into Entrepreneurs

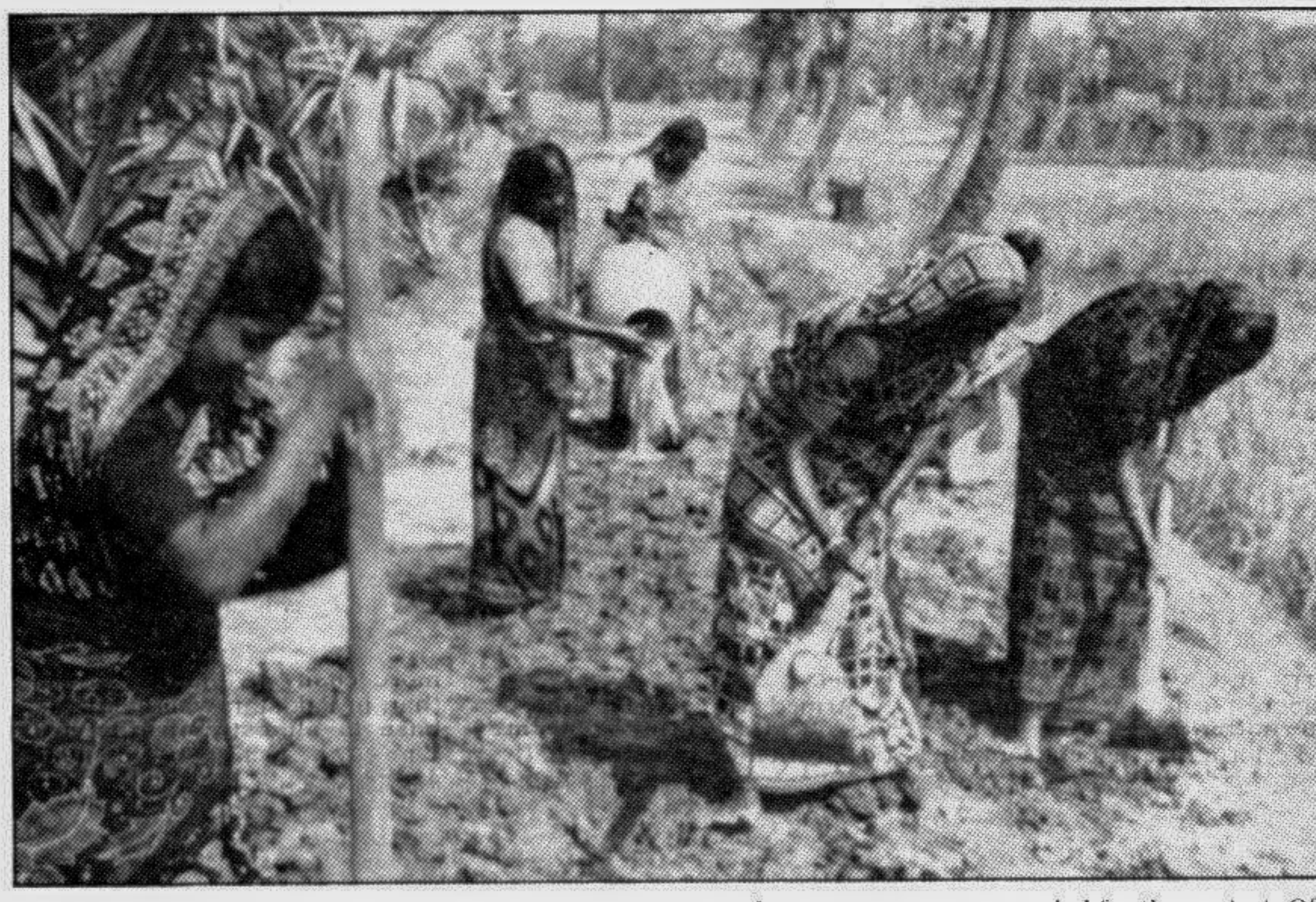
by Qayyum Khan Milon

RURAL Maintenance Programme (RMP) is one of the most successful projects of CARE in transforming the destitute women into small entrepreneurs in the rural areas of Bangladesh. The programme has focused on making those women skilled energetic, self-reliant and assertive in choosing their livelihood or profession. Above all, CARE has handled it with care for creating job-opportunities in the rural Bangladesh.

The RMP is a massive labour-intensive rural road maintenance programme. It is backed by Canadian International Development Agency (CIDA). This programme is funded jointly by the governments of Bangladesh and Canada. CARE has been implementing this project in Bangladesh since 1983 and is systematically handing it over to respective entities.

The RMP has accomplished significant developmental and social changes since its inception in 1982. It has worked with over 60,000 destitute women per year on the maintenance of rural roads. This work covered nearly 76 per cent of the existing rural road network in Bangladesh. Through the Road Maintenance Component (RMC) of RMP, up to 60,000 women were provided with cash income for their labour. By establishing Road Maintenance Association (RMA) women have been given an opportunity to negotiate and self-manage maintenance activities supervised by Union Parishads (UPs). Consequently, the previously abandoned and socially marginalised women have got an important and productive role to play for creating significant results regarding economic security, social status, mobility, decision-making and self-esteem.

RMP is designed for the women who are the principal earning members of the household with dependents and are



either divorced, separated or abandoned, or whose husbands are ill.

Every year 36,000 women are being employed to maintain up to 72,000 kms of rural roads. They are hired on a four-year cycle. In the last nine months of their tenure the women are prepared for self-supporting income-generating activities. Every year up to 10,000 women graduate from the programme with improved economic security, social status and self-managing skills. A new batch of 10,000 women are taken in.

The continuous maintenance of rural roads has a positive impact on movement of goods and services and as a whole on the well-being of rural areas. Thus RMP provides year-round steady income to one of the poorest segments of society.

This performance is of a considerable economic and social utility to the community.

The third phase of this project (1995-2001) aims at developing sustainable and cost-effective maintenance of rural roads employing rural destitute women and providing them life management skill training. This will enable them to earn a living after their graduation from RMP.

The objective of the third phase of RMP is to transfer the Road Maintenance Component (RMC) to the LGED and the Income Diversification Component (IDC) to local indigenous entities.

The RMP is spread over 61 out of 64 districts in Bangladesh under which there are 417 thanas and 3,604 UPs. CIDA provides 75 per cent of the

money needed for the project. Of the rest amount, the government provides 15 per cent and UP 10 per cent.

A UP selects 10 destitute women heads of household to form the Road Maintenance Association (RMA) through lottery. The RMA is a self-managed and self-regulated group. The RMA is accountable to the UP for its performance. The RMA can be dismissed for its poor performance. Each RMA is responsible for maintenance of about 20 kms of the most important roads of the union. The roads are selected by the UP.

The UP is accountable for the management of the road maintenance work in the union. If the UP does not contribute its share of crew wages and if the UP's road maintenance performance is poor,

then the project is withdrawn from the union. The UP monitors visit once a fortnight to measure performances and assign tasks.

Under the four-year term of appointment of destitute women, they are given special training to make them skillful and self-reliant in the last nine months. The evaluation of their work is made through examination by giving them marks every fortnight at UP level. This component is called the Income Diversification Component (IDC). The training and follow-up activities will assist them in developing and implementing a 'survival plan' which include a feasibility analysis of possible investments. IDC is meant to use the savings and skills that women have accumulated from the RMC employment in the best way possible.

After being trained by this programme, the skilled women become small entrepreneurs who invest money from their savings and borrowings. They become owners of grocery shops, road-side vendors and other income-generating establishments.

A worker or crew gets Taka 34 a day out of which Taka 6 is her forced-saving. She is allowed to use only Taka 28 to meet her daily expense. In this way, she gets Taka 392 in cash and Taka 84 in savings fortnightly. Under this programme in the 3rd phase (1995-2001) 78,000 skilled crew will be ready to earn their livelihood.

The main objective of RMP is to develop the rural road communications, to create job opportunity for destitute women and to make them self-managed and self-respectful entrepreneurs and to develop rural socio-economic structure.

In conclusion it can be said that household income generation, women employment and empowerment, and education development are featured in the RMP of CARE which will set an example of soothing woes for the rural destitute.

## The Daily Star Entertainment Guide

### Wednesday 9th April

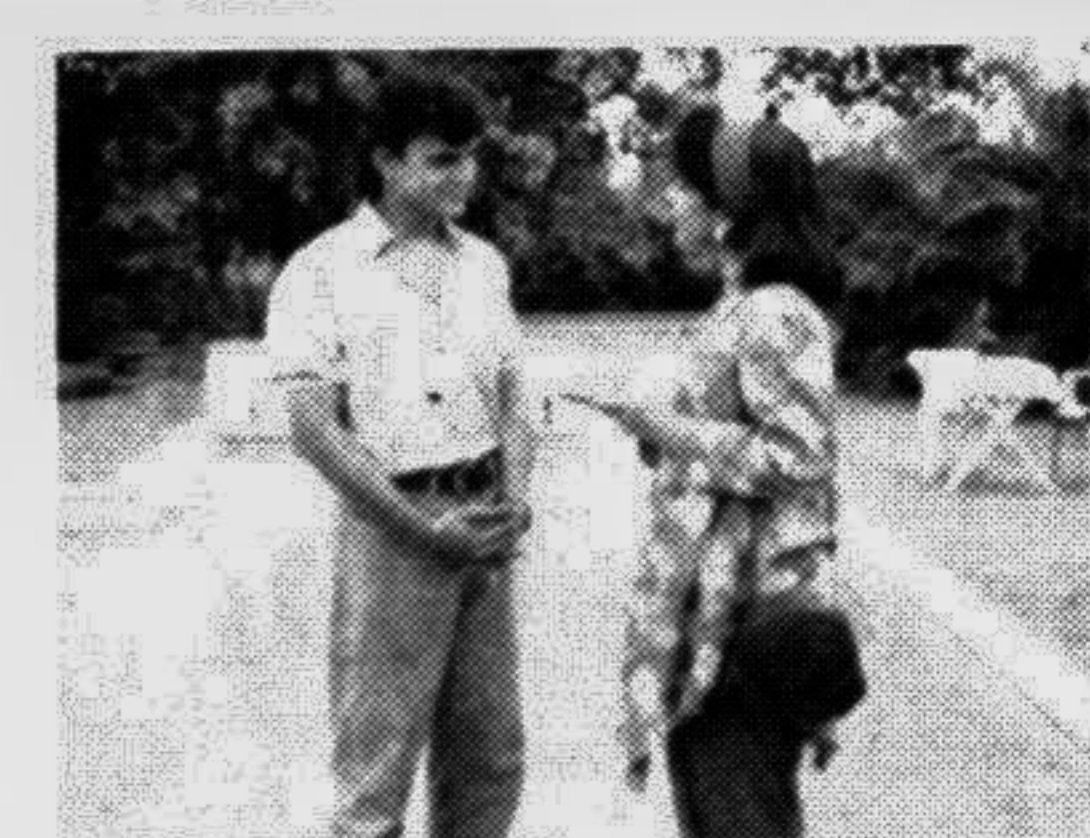
(All programmes are in local time. There may be changes in the programmes)

### BTV

3:00 Opening Announcement  
3:10 News in Bangla 3:15 Patriotic songs 3:20 Recitation from the Geeta 3:25 Drama Serial: 4:30 Cartoon film: Top Cat 5:00 News in Bangla 5:40 Geetabitan: Tagore Song 6:10 Marner Katha 6:50 Open University 7:00 The News 8:00 News in Bangla 8:45 Package Drama 10:00 News in English 10:25 Muktaharat 11:30 News in Bangla 11:20 Thursday's programme 11:40 Close down

### BBC

6:00am BBC World News 6:30 Time Out: Film 7:00 BBC World News Inc. World Business Report/Asia Today/24 Hours 10:30 BBC World News 10:30 World Focus: Britain in View 11:00 BBC Newsdesk 12:00 BBC Newsdesk 12:30 Hard Talk 1:00 BBC World News 1:30 World Focus: Britain in View 2:00 BBC World News 2:30 Time Out: Tomorrow's World 3:00 BBC World News 3:30 Hard Talk 4:00 Film 5:00 BBC Newsdesk 6:00pm BBC Newsdesk 6:30 World Focus: Britain in View 7:00 BBC World News 7:15 World Business Report 7:30 BBC Newshour Asia & Pacific 8:30 Time Out: The Clothes Show 9:00 BBC World News 9:30 Hard Talk 10:00 BBC World News 10:30 Time Out: Fasten Your Seat Belt 11:00 The World Today 12:00 The World Today 12:30 Hard Talk 1:00 BBC World News 1:30 World Focus: The Money Programme 2:00 BBC World News 2:30 Time Out: Top Gear 3:00 BBC Newsdesk Inc. World Business Report/24 Hours



Bonegi Apni Baat on Zee TV to night at 9-30

4:00 BBC Newsdesk Inc. Asia Today & World Business Report 5:00 BBC World News 5:10 Newsnight

### CHANNEL V

6:30am VJ Alessandra 7:00 Rewind VJ Sophia 8:00 Frame by Frame 11:00 The Vibe VJ Luke 12:00noon Rewind VJ Sophia 1:00 By Demand VJ Treya 2:00 Frame by Frame 2:30 Liberty First Day First Show 3:00 Fashion Police 3:30 Soul Curry 4:00 Planet Ruby 4:30 Big Bang VJ Alessandra 6:00pm Rewind VJ Sophia 7:00 By Demand VJ Treya 8:00 Planet Ruby 9:00 The Vibe 9:30 Videocon Mangta Hai 10:00 Liberty First Day First Show 10:30 Soul Curry 11:00 House of Noise VJ Luke 12:00noon Rewind VJ Sophia 1:00 Haysah 2:00 By Demand VJ Treya 3:00 Big Bang VJ Alessandra 4:30 V Spot 5:30 Speak Easy

### STAR PLUS

6:30 Ninnad 7:30 Good Morning India 9:30 Aerobics Oz Style 10:00 Madeline Cooks 10:30 Extreme Close-Up 11:00 Kate & Allie 11:30 The Oprah Winfrey

Zimbabwe vs Pakistan 2nd Session From Sharjah Cricket Stadium 7:30 Australia vs South Africa 5th One-Day Int'l Highlights 8:30 India Tour West Indies 4th Test Match Day 5 Highlights 9:30 Roshani 9:30 Banegi Apni Baat 10:00 Andaz 10:30 The News 11:00 Parampara 11:30 Karz 12:00 Salaab 12:30 TV Sa Re Ga Ma 1:00 Vakaal 1:30 Raahat 2:00 Zee Horror Show 2:30 TMM 4:00 Parivartan 4:30 Khana Khazana 5:00 Surtal 5:30 Suno Bhai Sadho

### STAR MOVIES

7:30am Classic: Flying Deuces PG (Arabic Subtitles) 9:30 Comedy: Amos And Andrew 15 (Arabic Subtitles) 11:30 Family: Asterix And The Big Fight PG (Hindi Subtitles) 1:30 Action: F/X 2 15 (Hindi Subtitles) 3:30 Family: The Fabulous Adventures of Baron Munchausen 12 (Hindi Subtitles) 5:30 Family: The Return of Tommy Tricker PG (Hindi Subtitles) 7:30 Film Club: A Sliding In Fulham Country 9:30 The Movie Show 10:00 Double Bill: Madeline Stowe Blink 15 (Hindi Subtitles) 12:00 Double Bill: Madeline Stowe China Moon 18 (Arabic Subtitles) 4:00 Comedy: A Snifful Life 18 (Arabic Subtitles) 4:00 Thriller: Fearstalk 15 5:30 World Cinema: La Baule Les Pins 15 (English Subtitles)

### ZEE TV

6:00 Jagran 6:30 ZED 7:00 ZED 7:30 Ghoornia Aaina 8:00 News 8:30 Insight 9:00 Disney Hour 10:00 Gaane Anjane 10:30 9 Malabar Hill 11:00 Hum Zameen 11:30 Shapath 12:00 Bourvita Quiz Contest 12:30 Hi Zindagi Bye Zindagi 1:00 Ek Duj Ke Liye 1:30 Sitsila 2:00 Hum Parah 2:30 Tara 3:00 Raahat 3:30 Celeste 4:00 Aur Shama Jalti Rahe 4:30 Dhara Zalka Ka Safar 5:00 Siaram's Cine

Hamara Sehat 5:55 Kitab Quiz 6:25 Aou Courses 7:00 Taranum 7:05 Felix The Cat 7:30 Such Gup 7:45 English News 8:00 Morvan Gold Raceway 8:25 Jawan Rang 8:55 PTV Gold 9:00 Break for Headline News 9:20 Aap Ki Anwar Maqsood 10:00 Khabarnama & Commercial News 11:00 Tes Asmaan 12:00 NYPD Blue 12:45 Khas Khabrain/Close down

### EL TV

12:30 HFF 2:00 Rajni 2:30 Zandu Balm Dance Mania 3:00 Ortem Punkshehra 4:00 HFF 7:00 Music Capsules 7:30 Stand By 7:40 Music Capsules 8:30 Hasseen Pal 8:40 Scandal 9:00 Awaz Naye Andaz Wahe 9:30 V3- 10:00 HFF 1:00 Superhit Hungama 1:30 Gujarati Band 3:00 Shadyantra 3:30 Sorry Meri Lom 4:00 Road 4:30 ZED 5:00 HFF 7:50 Hassan Pal 8:00 Akhri Dao 8:30 Yumkeenz Mast Mast Show 9:00 Shatrang 9:30 Amar Prem 10:00 Archies Top of the Tops 10:30 Stand By 10:45 HFF

### PTV

8:00am Tilawat Aur Tarjuma/Hamd/Naat 8:30 Cartoon 8:30 Khabrain 8:45 Mansoobajait Barai Khud Kaffalat 9:00 Sur Savaria & Sehra Ka Safar & Sada-E-Kasim 9:40 Shana Ba Shana 9:50 Aaj Ki Kitaab-Aik Nazm 10:05 Boor Kay Ladoo 10:30 English Film: Chip And Dale 10:55 Milli Naghma 11:00 Khabrain 11:10 Ali Baba (Drama Serial) 11:35 Naghmazaar (Drama Serial) 12:00 Urdu Khali 12:55 Quran-e-Hakeem 1:02 Bismillah 1:15 Ghoan (Drama Serial) 2:00 Insha (Drama Serial) 2:50 The Earth Revealed 3:20 Aarshi Puda 3:40 Natani World 4:35 How Things Work 5:00 Yeh Mumk In Hae 5:25

### DD 7

10:30 Janmadin 10:35 Classical Music 11:00 Folk Song 11:15 Adhunik Gaan 11:30 Parliament Hour 12:30 Parichay/Monorama Cabin 1:00 Janmadhumi (Serial) 1:30 Trishna (Serial) 2:30 More Rekho More Gaan (Serial) 3:00

### Shalibani Katha (Serial) 3:30

Chetana (Serial) 5:05 Nepali Programme 5:30 News 5:35

'Chiching Fank 6:00 Pali Katha 6:30 Amargesh 7:00 Drama 7:30 Bangla Sambad 8:00 Prasangi

8:30 Sushastha 9:00 Janmadhumi (Serial) 9:30 Parichay (Serial) 10:00 Bengali Movie Club Film Show 1:00 Closed

### SONY ET

8:30 Rangeela Re 9:00 The Three Stooges 9:30 Dennis The Menace 10:00 I Dream Of Jeannie 10:30 Bewitched 8:30 Take Five 9:00 Boggie Woogie 9:30 Special Lata Mangeskar Concert 11:30 The Young And The Restless 12:30 5 Star Xpress 1:00 Pehchaan 1:30 Janekaha Mera Jigar Gaya Ji 2:00 Surf-Wheel Of Fortune 2:30 Premier 3:00 Closed

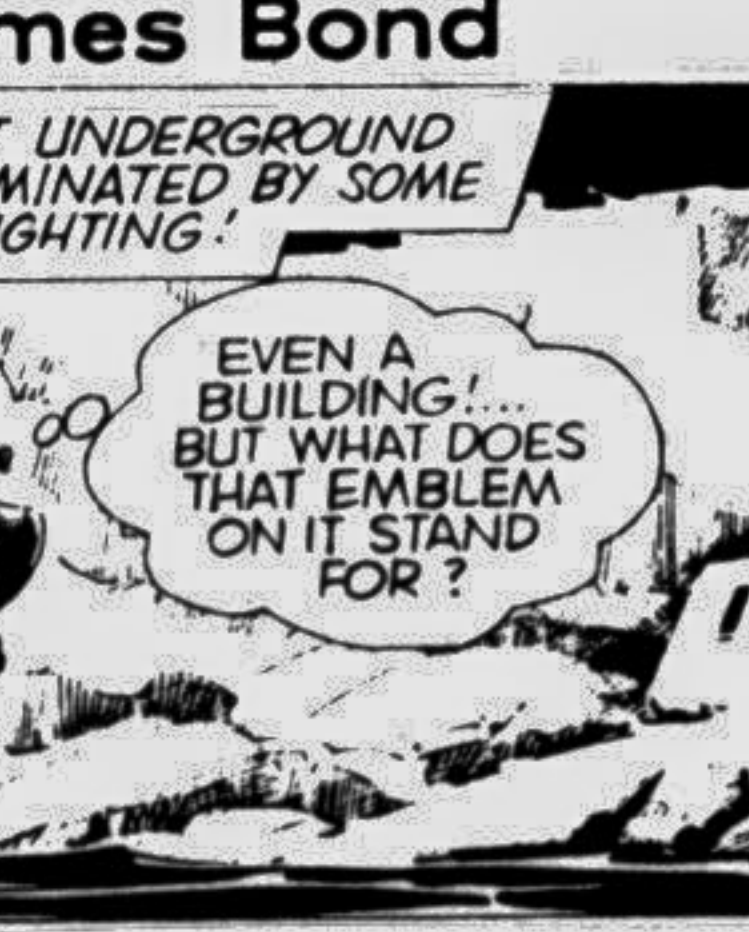
### Tom and Jerry



### James Bond

BOND SURFACES IN A VAST UNDERGROUND CAVERN—OBVIOUSLY ILLUMINATED BY SOME MAN-MADE SYSTEM OF LIGHTING!

### UNKNOWN TO BOND—HIS PRESENCE HAS BEEN DETECTED BY AN UNDER-WATER ALARM SYSTEM!



### By Hanna-Barbera



### DRAWN BY JOHN MCLUSKY

