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DHAKA TUESDAY MAY 11, 2021, BAISHAKH 28, 1428 BS

Support for the poor crucial to economic recovery

Quality of public expenditure must be improved

O protect the consumption of low-income groups and boost overall domestic demand, which has been hit hard by Covid-19, the Citizen's Platform for SDGs has called on the government to provide cash support to the poor and low-income groups. According to numerous studies that have come out over the past year, the number of people who have been pushed into poverty since the pandemic began is massive. Many of them have had to cut back on their daily consumption (of even the basic necessities) in order to make ends meet. This will have severe adverse long-term effects on the wellbeing of people as well as the economy, if not addressed quickly.

On the flip-side, one of the most important factors in relation to a quick economic recovery is to boost domestic demand—through increased consumption on the one hand and increased investment on the other. Since most people, particularly those belonging to lowincome groups, have seen their incomes drop due to the pandemic, while others have lost their jobs, domestic demand has taken a big hit over the last year. This means businesses have no reason to invest more, even if they have the means to, which most small businesses don't even have right now. Therefore, the government has to ensure that low-income groups receive adequate support and that small businesses—which make up the majority of businesses—have access to enough liquidity so that unemployment does not increase further.

When it comes to providing support to the poor, the government has had many struggles. Experts have been calling on the government to prepare a database of potential recipients so that government aid reaches those who truly need it—instead of others who are simply taking advantage it. This is the most basic step before disbursing any cash assistance.

With new budgetary preparations right around the corner, the government should keep in mind the alarming rise in economic inequality and expand social safety nets significantly. However, one of the biggest challenges ahead, according to experts, is improving the effectiveness of public expenditure—which has mostly remained poor. Given the existing fiscal constraints on the government, how the economy recovers depends a great deal on how much the government can increase the quality of its upcoming expenditures. This includes how quickly and efficiently funds reach the most

The pandemic has adversely affected every citizen of Bangladesh. However, it is obvious that the impact on the marginalised and disadvantaged has been devastating. Providing immediate support to them is not only a moral imperative for the government, but it also makes the most sense if we want our economy to recover as quickly as possible.

When the home calls, Covid-19 is moot

Are we prepared for a possible third wave?

■ INCE Friday, it has been dismaying to see thousands of people having to resort to any means possible to get to their hometowns before Eid, just as the second wave of Covid-19 has slowly started to see a dip in the country. No warnings (be it from the Prime Minister herself) or restrictions, nor the heat or lack of regular transportation, are able to stop people from trying to get to their home districts.

From jumping onto trucks, crossing the Padma on trawlers/small boats, renting private transportation for more money than they could afford to walking long distances, people are doing it all to be with their loved ones for Eid. In all this, it has been impossible to maintain any measure of physical distancing, as thousands thronged to the capital's bus terminals, and microbuses packed with 10 to 12 people left for the southern and northern districts. Adding another layer of despair, transport workers were seen taking advantage of the situation and charging extra fare.

Meanwhile, the shopping centres of the city have also remained crowded from morning until after Iftar, as people continued shopping for Eid while disregarding any need for maintaining health guidelines as basic as physical distancing.

On April 25, this daily reported Road Transport and Bridges Minister Obaidul Quader saying that "the government will be forced to impose strict lockdown again if people do not follow health guidelines once public transport services are resumed." Transport services within the cities resumed last Thursday, and so far, we have witness slight to no maintenance of "health guidelines" at malls, streets, ferry and bus terminals, and anywhere else ahead of Eid.

As the first case of the Indian Covid-19 variant was detected in Bangladesh, we are also dreading what to expect in the near future, in the very likely case that we see another devastating surge in the number of

infections following this pre-Eid fiasco.

While we understand the need to keep the shopping centres open so that businesses do not suffer financially, we wonder if this reopening of malls and resuming of public transport could not have been planned better. We wonder if more foresight, and wider and stricter deployment of law enforcement personnel across the city, could not have helped the government control these crowds better and helped ensure people's safety from the virus. We also wonder if during any future surges, our citizens will again have to face the horrific lack of oxygen supply and ICU beds that they saw only weeks ago. We would urge the government to make the safety of people from Covid-19 their priority in all areas, to employ as much manpower and resources as possible to monitor the situation, and to be prepared to tackle a possible surge.

Covid-19 preparedness: Is an Emergency Response System in place?



numbers of India are suffering the painful and deadly consequences of a second wave of Covid-19 infections. The images in the media are heartwrenching. It

appears that the health system in India had become complacent and did not anticipate the devastation that the lurking virus could inflict, surreptitiously at the beginning, while multiplying with the mathematics of exponents. More recently, Nepal has been placed on call. A lack of preparedness can be devastating there as

The global response to the Covid-19 catastrophe to aid the afflicted countries (India, Brazil and other hotspots) has been rather poor. Responses from within each afflicted country are beginning to emerge, with volunteers doing a remarkable job with limited resources. It is imperative for key UN/ global agencies, set up to battle major health crises, to step up with a global taskforce and coordinate their plans with local operations. Much as we would like to think otherwise, this is a global calamity—it must be fought decisively with global coordination and resolve. Otherwise, the menace will continue to circle the world with more deadly

While such coordinated effort may (or may not) come, countries neighbouring the hotspots must continue to observe and learn, in anticipation, from the experiences of the afflicted countries and adopt best practices if they are to stymie the devastation the virus can cause.

In Bangladesh, while the numbers of the afflicted (not always fully authenticated) are lower than in India, complacency can be costly not just in human lives lost, but with regard to other economic, social and environmental consequences. The country must prepare an emergency response system (ERS) with urgency if it has not already done so. Personally, I have not seen much by way of preparation (but I could be wrong).

As a basis for preparation, I outline what needs to be done to deal with a stealth Covid-19 attack and propose a 10-step ERS that requires ramping up—immediately. The critical elements are broadly placed for subsequent

NCOUNTABLE elaboration and fine-tuning by the authorities, vested with the responsibility of battling this nemesis, to prepare a coordinated defense.

The proposed steps to be activated, especially for urban population centres with high population densities and where hotspots can develop in the blink of an eye, are as follows.

The first order of business is to establish a command-and-control centre

trained in large numbers to provide the medical attention that is now being shouldered mostly by family members (as seen in India). In Bangladesh, the Directorate General of Health Services can work with selected hospitals to start up a training programme in short order in which health professionals will specify the three to five most needed skills that should be imparted to prepare the



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(CCC) to gather data, monitor outbreaks, and organise for possible outbreaks in different urban areas. The CCC must serve as the brain of the ERS, assessing, coordinating, deploying and measuring the results—continuously. The armed forces are probably the best equipped and most disciplined organisation to carry out this coordination task. However, the CCC must include other relevant experts, public servants, health personnel, law enforcement agencies, etc., to form a network of expertise to draw upon as needed. The CCC must come together and start working *now* to address the following.

Oxygen supply and inventories must be expanded rapidly as soon as possible and placed in strategic locations for quick access and distribution. A small taskforce ought to be assigned to work out the constraints and logistics. Industry may be required to give up a part of their oxygen

Hospitals are falling short of staff. This makes it impossible to handle caseloads.

paramedic force.

Crowding in the hospitals must not be allowed. A chaotic and messy environment (seen in other developing countries) can be very disruptive for service provision. In fact, it is also important to use (social) media to prepare the public on how to work in tandem with health service providers to facilitate their own treatment. Patients themselves have a significant role to play in enhancing the quality of care they need and can avail.

Spaces/facilities must be earmarked/ created to provide patient care if the Covid-19 tsunami strikes. It will likely overwhelm present hospital capacity. Sports complexes, parks, playgrounds, parade grounds, hotels and warehouses are all possible venues that must be easily convertible for potential large influxes of cases. Sanitisation plans for these facilities with adequate support personnel must be contemplated in advance and a phased approach be ready on paper. These care centres must be readily accessible and the

public notified of their location.

Small vehicles must be made ready and equipped with oxygen and other basic needs to transport patients quickly to the nearest care centre. These vehicles (each assigned a number and a cell phone) must be brought under the CCC to be directed for patient pick up. An Uber model would be useful here and universities with Computer Science and Engineering departments could begin to develop an app for this right away that must be simple to operate. The CCC will coordinate all deployments.

Check-in/check-out procedures must be established and handled by a paramanagement (students, volunteers) taskforce (not medical personnel). The process of checking in/out must be made as simple and efficient as possible with minimal paperwork. Patients cannot wait 10+ hours to be provided the access they need. Another app would be useful here.

Law enforcement personnel must be stationed at the care facilities in sufficient numbers to enable health workers to do their job instead of attending to distractions (such as crowd control, traffic control, checking in, etc.).

Plans must be in place to handle the deceased. How will the last rites be performed, where, and by whom must also be planned by another taskforce and delivered smoothly.

Financial resources will be needed to support many of the above tasks. Funds may come from patients, government, private businesses (as part of their corporate social responsibilities), as well as international donations. Banking industry experts ought to be mobilised to come up with a plan to receive, disburse and track the money raised on an ongoing basis. A separate taskforce needs to be in place to handle this important function.

Time is of essence. There must be a state of readiness, whether the virus arrives in a new avatar or not. The leaders must not be complacent, given the sudden and virulent behaviour of this invisible enemy. It is also important to remember the words of experts—more pandemics are on their way, whether we like it or not. Emergency preparedness is an absolute necessity, not an option. It is time to be proactive, not reactive. It is time to act now.

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Bringing in citizens' voices in decision making: The DIMAPPP experience

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N June 2019, the members of a citizen group in Jessore's Keshabpur upazila called their upazila engineer to inform him that the contractor who was building their village road brought lowquality bricks for the purpose, instead of the higher quality ones he was supposed to. The engineer promptly visited the site to verify the incident and ordered the removal of the bricks in question. The contractor complied. This was possible because of the unique model of citizen engagement the government has been implementing within the exemplary

World Bank award committee, the project is a "most innovative, collaborative and impactful governance global practice operation". While we celebrate the achievement, it is useful to look back and reflect on its journey to understand the process better, recognise the factors behind its success, and identify the remaining challenges in the domain of public procurement in the country.

As of Fiscal Year (FY) 2019-20, the government of Bangladesh spent about 85 percent of its annual development budget on public procurement, which is 45 percent of its annual budget and eight percent of GDP. Better governance of

the Central Procurement Technical Unit (CPTU) as a nodal body to steer the reform, developed and operationalised a unified legal procurement framework, and strengthened the management capacity of the procurement entities. All these initiatives were aimed at ensuring transparency, accountability, fairness, and better value for money in the procurement processes. Introducing digitised or the electronic government procurement (e-GP) system has been another crucial piece in achieving the aims of the reform. Last but not the least, the reform attempted to institutionalise the voices of the citizens, arguably the most important but generally ignored actor in the system, by allowing them to engage in monitoring development projects.

Despite some challenges, e-GP has so far improved the transparency and efficiency of the procurement process and, more importantly, enhanced competition in procurement with the participation of more tenderers. Consequently, it improved the timeliness of procurement and reduced the costs. According to a recent World Bank report, procurement costs in e-GP have decreased by 13 to 20 percent compared to those in manual procurement. BRAC Institute of Governance and Development (BIGD) conducted a cost-benefit analysis of using e-GP over manual procurement and found that it is one of the most costeffective investments for the government. Given the amount spent on public procurement in Bangladesh, e-GP thus holds astronomical potential benefits.

The government started DIMAPPP, the award-winning project, in July 2017 with an objective of overall improvement in public procurement management. The project also aims to expand the depth of e-GP by developing and adopting the electronic contract management system and digitising the project monitoring process. Institutionalising citizen engagement in the public procurement process is yet another crucial DIMAPP agenda for fulfilling the aims of the overall reform.

BIGD has long been engaged in this reform process; particularly, it the model in 48 upazilas through (CEP) for field implementation. In this model, local citizens are mobilised to

monitor construction projects or contracts in their locality. To do this, engineers of the local procurement entities form site-specific local citizen groups and provide relevant information and quick orientation to the group on elementary evaluation skills for judging the quality of the projects. The groups monitor the projects and inform the authority if they find any irregularity.

Through this initiative, 285 small-scale development contracts on road, primary and secondary school, bridges, and upazila and UP complexes were brought under citizens' monitoring as of March 2021. The responsiveness of the local procurement agencies also helped. So far, citizens raised 253 complaints, out of which 236 have been resolved. The local Government Engineering Department (LGED) is the key agency which welcomed this innovative strategy. More recently, other procurement entities such as the Education Engineering Department and the Health Engineering Department also agreed to try out this citizens' monitoring model in their local projects.

The citizen engagement component has played a critical role in paving the way for bringing in the voice of the citizen in the public procurement system. Simultaneously, it created an opportunity to demonstrate how research can help effective policymaking. In 48 DIMAPPP intervention upazilas, with support from CPTU, BIGD has been systematically evaluating the process to understand it better, identify specific pain points, and suggest improvements. Besides, BIGD is carrying out a rigorous impact evaluation, a randomised control trial, to determine if this model of citizen monitoring makes a difference in the project quality. The government and the global public procurement community can use these research findings in the future to make informed decisions in scaling up or replicating the model.

As we have graduated to a middleincome country, it is critical that government policymakers increasingly rely on high-quality research evidence for decision making. We believe innovative initiatives like DIMAPPP will indeed act as a role model for effective policymaking using research, helping us realise the cherished dream of a prosperous

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initiative Digitising Implementation Monitoring and Public Procurement Project (DIMAPPP).

The Central Procurement Technical Unit (CPTU) of the Government of Bangladesh (GoB) was awarded the prestigious World Bank's Directors Award on March 23—a fitting coincidence with Bangladesh's 50th Independence Day celebrations—as recognition for its leadership in institutionalising a highly innovative and citizen-friendly public procurement practice in the country through DIMAPPP. According to the

this greatly consequential process is vital for using public money more effectively and accelerating economic growth and enhancing citizen welfare.

In the GoB initiated public procurement reforms in 2002 through the Public Procurement Reform Project (PPRP), the development partners, especially the World Bank, played an important role in this process by providing technical support and funding. In two phases of the PPRP, the government made far-reaching legal and administrative reforms. It created

has been playing an instrumental role in developing a model for citizen engagement in the public procurement process. DIMAPPP is now implementing BIGD, which has partnered with BRAC's Community Empowerment Program