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Local Level Collaborative Governance for Pandemic Responses: Unpacking A Case in Bangladesh

Abstract

Responsive governance during the COVID-19 pandemic became a severe challenge for countries worldwide. With a relatively poor healthcare structure, Bangladesh performed moderately well in managing the first wave of the pandemic (March – December 2020). With substantive policy and decision-making support from the Centre, local governments collaborated with various relevant actors to enhance their pandemic-related services. In this background, this research used an integrative framework to study a case of local-level collaborative governance – the Satoria Model. Based on the authors' experience, reflections and review, this analysis explores various socio-economic and environmental factors behind the effectiveness of this collaboration in containment policies and providing support services to vulnerable groups. Findings indicate that coordination between state and non-state actors, resource mobilization, access and communication, community engagement and the adaptive capacity of the government are vital for making such collaborations work in a crisis. The lessons are valuable for prospective understanding and policy interventions.

Keywords:

collaborative governance; COVID-19; local administration; Satoria; Bangladesh

Introduction

Within several weeks of its first case being identified in China, the coronavirus disease (COVID-19) spread to 20 countries worldwide (Khanna et al., 2020). On 30 January 2020, the World Health Organization (WHO) recognized the outbreak

as a public health emergency (WHO, 2020). Following the exponential growth of global cases and deaths, the organization declared it a global pandemic on 11 March 2020 (Cucinotta & Vanelli, 2020). Governments across the world realized the severity of the consequences

the pandemic could cause to everyday life. Implementing containment measures and enhancing effective responses became a huge challenge for most low- and middle-income countries. In global pandemic situations, neither the government nor the public sector can tackle the monumental challenge alone (Grizzle et al., 2020; Mangai et al., 2022; Megawati et al., 2020). Previous evidence indicates that effective measures in such emergency pandemic situations require collaboration between state agencies and non-state actors (Coltart et al., 2017; Lai, 2012; Parker et al., 2020; Schwartz & Yen, 2017). These actors include government and non-government health service providers, local government bodies, law enforcement agencies, businesses and community leaders. In the COVID-19 pandemic, the containment measures included strict lockdown and social distancing practices which disrupted the lives and livelihoods of all people in a country. Providing essential services (e.g., food, transport, care) to marginalized and vulnerable groups and those in need were crucial. Citizen engagement during pandemic times is crucial for disseminating credible information to minimize panic, fear, and anxiety and facilitate informed decision-making (Graffigna et al., 2020; Maharani & Andhika, 2021).

In any emergency crisis, supplying social security to all citizens and ensuring government and societal capacity to perform under stress requires a whole-of-society approach (Parker et al., 2020). In this approach, while the government still plays the central role, its role surpasses the traditional bureaucratic boundaries to create a synergy in providing public services (Gao & Yu, 2020). In the case of the COVID-19 pandemic, studies reveal that such collaborative efforts have been reasonably effective in extending basic human needs in many national and urban governance contexts (e.g., Huang, 2020; Li et al., 2022). However, while all governments have practised such collaborative approaches, the

cases of local-level collaborative governance in developing countries have mostly remained underexplored. This study examines a case of local-level collaborative governance during Bangladesh's first wave of COVID-19.

Among the larger countries (which have over 10,000 square kilometres of land area), Bangladesh is the most densely populated country in the world, with about 1252 people living per square kilometre (Ritchie, 2019; Tama et al., 2018a). In 2019, this South Asian nation had approximately 20.5% of its population (164 million) living below the national poverty line (ADB, 2021). The coronavirus pandemic posed an unprecedented challenge to the country's governance when the first wave hit, with the first cases reported on 8 March 2020 (Islam et al., 2020). Then a strict nationwide lockdown imposed by the government adversely affected the livelihoods and income of many poor and low-income individuals (Bodrud-Doza et al., 2020; Hoque, 2020, 2021b; Islam & Hoque, 2022). The country was ranked 46th in global government effectiveness and 113th in global health security in 2019 (GHS, 2019; Global Economy, 2019). In this backdrop, Saha and Gulshan (2021) pointed out two critical aspects of Bangladesh's lack of preparedness in tackling this massive challenge – (i) inadequate healthcare facilities and infrastructures to perform detection, containment, and treatment of such a highly contagious virus (ii) providing support to those poor, marginalized, and vulnerable groups who have partially or completely lost their income and access to basic needs. At this critical juncture, the government undertook collaborative efforts at all levels (national to local) to minimize the consequences of the pandemic.

Upazila, a sub-district level administrative unit in Bangladesh, traditionally has a leading role for collaboration between central and local government bodies to deliver public services. During the pandemic, the Upazila Administration has played the central role of coordinating all actors

and stakeholders to create more comprehensive collaboration for achieving common goals. The first wave lasted till December 2020. As of 31 December (2020), 513,510 cases and 7,559 human deaths were reported (Worldometer, 2022). Analyses estimate that the real numbers could be much higher (Tabassum et al., 2020). However, these numbers were still significantly lower than many had anticipated. In this context, this study unpacks a collaborative governance case at an Upazila named *Saturia* to shed light on its effectiveness in tackling the challenges posed by the pandemic.

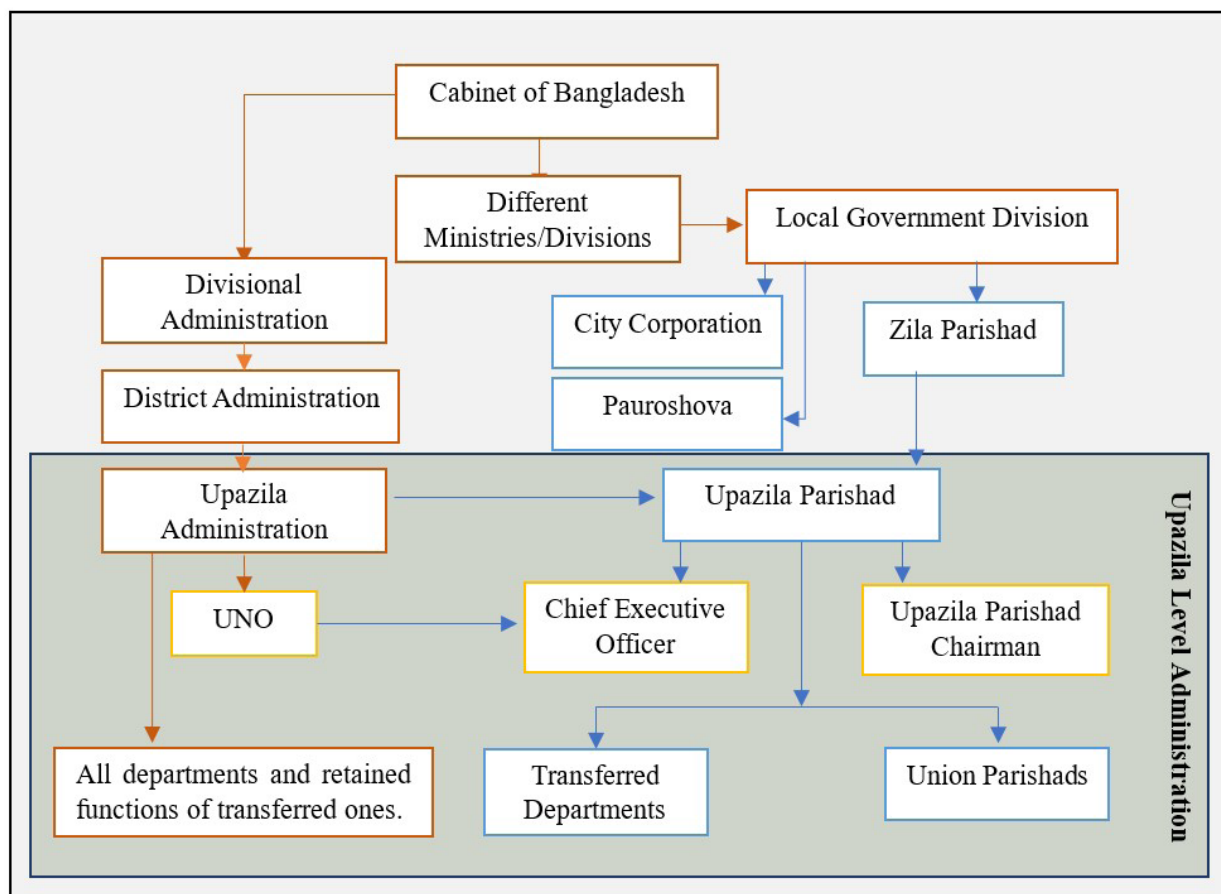
Governance System and Administrative Structure of Bangladesh

Bangladesh achieved its independence in 1971 and is a unicameral parliamentary

democratic system (Mollah, 2020). While the President is the head of the state, the Prime Minister (PM) serves as the head of the government (Executive Branch). The Cabinet of Ministers, led by the PM, administers the country's government processes (Alam & Ahmed, 2008; Hoque, 2018). The country is divided into eight Divisions, 64 Districts, and 492 Upazilas as administrative units (Alam, 2020). The Divisional, District and Upazila administrations function as the central/national government's local administrative bodies. The government appoints the *Commissioner*, *Deputy Commissioner* and *Upazila Nirbahi Officer* (UNO) to serve as the chief executive of these administrative units and bridge the government and citizenry (Khaton et al., 2018).

Figure 1 illustrates the administrative structure of Bangladesh. Article 59 and Article

Figure 1.
Administrative Structure of Bangladesh



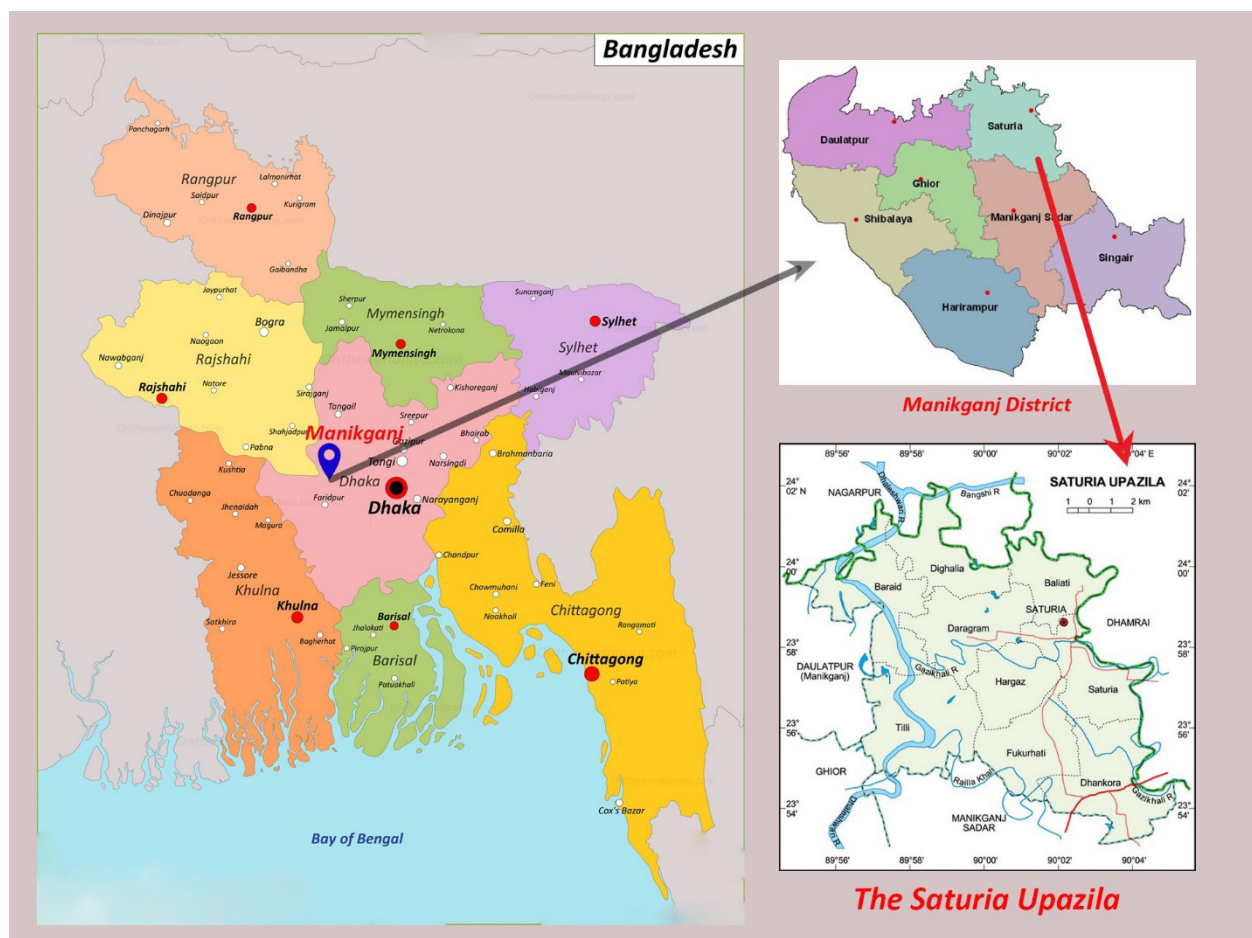
Source: Processed by authors

60 of the Constitution of the People's Republic of Bangladesh provide the foundation of the formation and functioning of local government bodies (GoB, 2022a; Islam & Islam, 2012; Shamim et al., 2020). The basic function of these bodies is to prepare and implement development programmes and deliver a selection of public services. Local governance system in urban city areas differs from those in non-urban areas. The urban local government system consists of *Paurashava* (municipality) and City Corporations, whereas the structure in the non-urban areas consists of hierarchical tiers of Union *Parishad*, *Upazila Parishad* and *Zila (District) Parishad* (Alam et al., 2022; Panday, 2011; Tama et al., 2021). Every Union has nine Wards (the lowest administrative village-level units). The Local Government Division (LGD) is responsible for

supervising and effectively functioning all the local government bodies.

At the Upazila level, several government departments implement policies and schemes of the national government. Representing the government, UNOs supervise and coordinate the activities of these departments. Some departments implement different development plans and programmes at the local level. Some selected functions of most of these development-oriented departments are transferred to Upazila Parishad (UZP). UZP is the local government body, headed by an elected Chairman. An Upazila has several Unions under its geographical and administrative jurisdiction. Elected Chairman(s) of these Unions are de facto members of the UZP. The respective Member of Parliament (MP) is an advisor to the UZP. UZP is mainly responsible for planning and

Figure 2.
The Location of Saturia Upazila



Source: Processed by authors

supervising the development activities executed by the transferred departments (Ahsan, 2018). According to the Upazila Parishad Act, 2009 (Amended in 2011), UNO, as the Chief Executive Officer (CEO) of the UZP, provides secretariat services to UZP (Bhattacharya et al., 2018). Thus, a UNO heads the Upazila Administration and performs as the CEO of UZP simultaneously. It means, a UNO must coordinate all the local government bodies and departments functioning in an Upazila in a relatively complex system.

The Collaborative Governance Case of Saturia: Why?

While responding to a sudden and quirky public health crisis, the government cannot be the sole provider but must work with multiple stakeholders (Gao & Yu, 2020). In such health emergencies (e.g., a viral disease that can affect and infect the whole population of a community in a short period), the local governments and administration need to act within and beyond jurisdiction to interact with parallel organizations, upper and lower level of governance institutions and international agencies to generate a multi-level response (Gao & Yu, 2020). At the district levels, as Dutta and Fischer (2021) note, local administration in any context has a critical role in bridging the policy measures and local realities for generating coordinated responses.

Upazila Administrations (UAs) in Bangladesh, as the central policy implementing body at the local level, played a similarly critical role during the COVID-19 pandemic. This was an unprecedented crisis in the country's history, and the national government had no or little experience in managing such a situation. UAs across the country came up with innovative and collaborative initiatives within their administrative jurisdiction, which contributed to minimizing the negative consequences of the pandemic. The uncertainty and ambiguity were prevalent, and governance practices were not entirely uniform

across different Upazilas. As shown in Figure 2, Saturia is one such Upazila in the district of Manikganj, about 60 kilometres from the capital city Dhaka. Because of its geographical proximity to the Capital's crowded industrial zones, the human mobility in Saturia is higher than that of the most Upazilas in the country. According to the 2011 Census, the population of Saturia is 171,494, and the population density is 1,223 per square kilometre (GoB, 2022b). The literacy rate is 47.3%, and the number of beds in the Upazila government health facility is 50 (GoB, 2022b). Considering the potential of collaborative governance in managing an emergency by engaging multiple stakeholders, the UA of Saturia adopted a collaborative governance framework to bring synergy into the fight against the coronavirus pandemic. The case of Saturia is significant for two reasons. First, among all UAs, Saturia's efforts to collaborate with all actors were motivated by planning and innovation. Second, the unique demographic characteristics of Saturia make it an interesting case to explore. The case offers valuable insights and learning for academics, practitioners, and decision-makers.

Research Questions

Exploring the case of UA in Saturia allowed the authors of this study to understand how such collaborative work functions to create positive impacts in fighting a pandemic in a local governance context. As mentioned above (also highlighted in the following research gap section), to the best of the authors' knowledge, very few studies have focused on such local-level collaborative governance cases to reveal its effectiveness in managing a global pandemic or identifying the impediments and challenges in doing so. By studying the case of Saturia, this study aims to produce knowledge, insights, and lessons valuable not only to lay out a template for fighting future pandemics but also to create guiding references for new administrative government

officials aspiring to use such collaborative frameworks in achieving more effective responses in similar emergencies. Therefore, this research set out to address two questions – (i) how did UA of Sauria apply collaborative governance in tackling the first wave of the COVID-19 pandemic? (ii) what were UA's impediments and challenges during this application?

Collaborative Governance for Pandemic Response

The concept of governance is defined and understood in a variety of ways. Kaufmann et al. (2009, p. 5) defined governance as "the traditions and institutions by which authority in a country is exercised." However, the concept of governance has evolved over time, and collaborative governance has drawn considerable scholarly attention in recent years – especially in crises when good governance demands engagement from various actors. Ansell and Gash (2007) define collaborative governance as a collective formal decision-making process in which public agencies involve non-state stakeholders to implement public policies. Emerson et al. (2012) define it more broadly as the arrangement and process of decision-making which effectively involves actors across all levels and boundaries of government and public, private, and civic engagement. This broad approach acknowledges the application of formal and informal mechanisms in the practice of collaboration.

Integrative Framework for Collaborative Governance

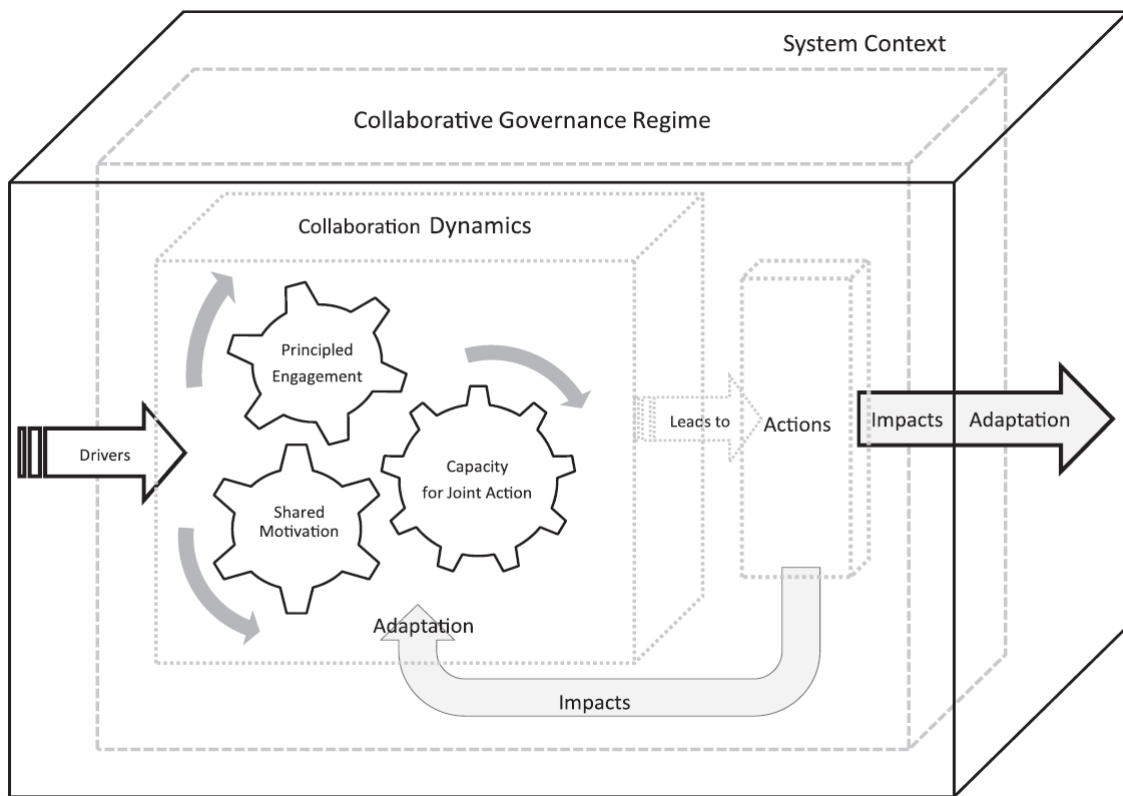
Bryson et al. (2006) argue that cross-sectional collaboration for effective governance may be necessary and desirable, but making it happen is complex and dependent on various favourable factors and conditions. In recent years, several frameworks have been developed to study, understand, and look at collaborative governance practices. Some mentionable frameworks are – the collaborative planning

model (Bentrup, 2001), collaborative model of public management (Agranoff & McGuire, 2001), cross-sector collaboration framework (Bryson et al., 2006), collaborative governance model (Ansell & Gash, 2007), integrative model for collaborative governance (Emerson et al., 2012), and performance matrix of collaborative governance (Emerson & Nabatchi, 2015). However, while studying a specific set of collaborative governance practices and only those practices, it is critically important to choose a contextually functional framework (Batory & Svensson, 2019). Considering all factors and dimensions of this case, this study adopted Emerson et al.'s (2012) Integrative Framework for Collaborative Governance (IFCG), which is comprehensive and methodical in nature.

As Emerson et al. (2012) describe, and Figure 3 shows, IFCG is built on three-dimensional contexts – general system context, collaborative governance regime (CGR) and, collaborative dynamics and actions. The system context denotes the structural forces (outlined with bold black lines), including political, socio-economic, environmental, and legal factors. CGR, the central feature of the framework, encompasses the dominant pattern of actions and activities regarding public decision-making. The box placed in the middle represents CGR. The innermost box portrays the collaborative dynamics comprised of three components – principled engagement, shared motivation, and capacity for joint action. This system context influences the dynamics and actions of collaboration over time and helps to commence and set the direction for CGR.

System Context and Drivers: According to Emerson et al. (2012), the structural forces from the system context (e.g. resource conditions, socio-economic and political factors, network connectedness, level of conflict/trust) create opportunities or challenges for CGR. While collaborating, the regime can affect these forces. They identify four essential drivers to unfold

Figure 3.
The Integrative Collaborative Governance Framework



Source: Emerson et. al. (2012)

a collaboration - leadership, consequential incentives, interdependence, and uncertainty. The leader must commit to collaborating to solve the problem, determine not to impose decisions, and demonstrate impartiality regarding the preferences and choices of the participants (Bryson et al., 2006). Consequential incentives are internal or external problems and prospects that incentivize collaborative efforts. Interdependence refers to when an actor or organization cannot accomplish something by themselves and serves as a condition for collaboration (Thomson & Perry, 2006). Finally, uncertainty is the main issue, the solution of which requires actors to collaborate to reduce and share the risks.

Collaborative Dynamics: While the essential drivers persuade groups to collaborate, the iterative interactions among its three components are collaborative dynamics. Emerson

et al. (2012) explain these components. *Principled engagement* occurs when actors with varying identities and motivations engage across respective organizational and institutional boundaries to create shared value that may resolve conflicts and solve problems. *Shared motivation* is defined as a "self-reinforcing cycle consisting of four elements: mutual trust, understanding, internal legitimacy, and commitment" (Emerson et al., 2012, p. 13). The *capacity of joint action* is a newly generated capacity that could not be achieved separately, and it sustains the shared purpose among the collaborating entities.

Collaborative Actions: Collaborative actions are the primary outcomes of CGR, and it remains at the core of any practical collaborative governance framework. The process in which collaborative actions generate as outcomes are tied together. Emerson et al. (2012) note that effective

and successful CGRs must establish a fresh system for joint action defined by collaboration partners according to their implied or expressed theory of action to accomplish their desired outcome.

Impacts and Adaptation: Impacts created by collaborative actions are the intended state changes within a system's context. According to Emerson et al. (2012), these impacts include creating new social value or technical innovation and can be physical, social, economic, environmental, and political. They may have short- or longer-term impacts and can be specific or discrete. Adaptation is the capacity to transform when needed. Such adaptive capacity is critical to making any collaboration successful.

Ten Propositions of IFCG: Emerson et al. (2012) feature their framework in ten propositions (see Table 1), highlighting various conditions of its effectiveness.

Situating the Study in the Existing Literature

Many argue that the engagement of non-state actors in governance is nothing new (Bryson et al., 2006; Donahue & Zeckhauser, 2011).

However, the scholarly recognition and theoretical development of collaboration for effective governance started in the 1990s (Ansell & Gash, 2007). The academic scholarship on collaborative governance mainly focuses on national-level governance in response to emergencies, including natural disasters (e.g., Jayasinghe et al., 2020), environmental crises (e.g., Kallis et al., 2009), conservation needs (e.g., Subatin & Pramusinto, 2019) and public health predicaments (e.g., Bivona & Noto, 2020). Recently, two pandemics – the 2003-2004 outbreak of Severe Acute Respiratory Syndrome (SARS) in East Asia and the 2013 – 2016 Ebola outbreak in West Africa – have drawn the attention of governance scholars. For instance, Schwartz and Yen (2017) explored the effectiveness of Taiwan's collaborative governance during the SARS outbreak, while Vaz et al. (2016) studied the Nigerian government's collaborative mechanisms to tackle the 2014 Ebola outbreak. The COVID-19 global pandemic has generated extraordinary collaborative practices among national entities in many countries. Many studies have also employed various perspectives and

Table 1.
Ten Propositions of IFCG

Propositions	
One	<i>One or more drivers of leadership, consequential incentives, interdependence, and/or uncertainty, are prerequisites for the CGR to start.</i>
Two	<i>The effectiveness of the principled engagement largely depends on the interactive process of discovery, definition, deliberation, and determination.</i>
Three	<i>Iterative and quality interactions will help promote mutual understanding, trust, and shared commitment resulting in positive shared motivation.</i>
Four	<i>Shared motivation helps to enhance principled engagement and vice versa in a "virtuous cycle".</i>
Five	<i>Principled engagement and shared motivation will accelerate the advancement of institutional arrangements, leadership, knowledge, and resources, eventually generating and sustaining capacity for joint action.</i>
Six	<i>The required levels for the four components of capacity for joint action are determined by the purpose, shared action, and desired outcomes.</i>
Seven	<i>The quality and magnitude of collaborative dynamics rely on the dynamic and self-reinforcing interactions among principled engagement, shared motivation, and the capacity for joint action.</i>
Eight	<i>Collaborative actions are more likely to be executed if, (i) a shared theory of action is recognized clearly among the collaboration partners, and (ii) the collaborative dynamics function to make the needed capacity for joint action.</i>
Nine	<i>The impacts derived from collaborative action are expected to be closer to the desired outcomes with fewer unintended adverse consequences.</i>
Ten	<i>CGRs will be more sustainable when they adapt to the type and level of impacts resulting from their joint actions.</i>

Source: Emerson et. al. (2012)

frameworks to examine the effectiveness of many national collaborative governance cases. For instance, Hsieh et al. (2021) assessed Taiwan's whole-of-nation approach to combat COVID-19; Klimovsky et al. (2021) explored the challenges of collaborations during the coronavirus pandemic in the Czech Republic and Slovakia; Criado and Guevara-Gómez (2021) studied the open innovations and collaboration practices in Spain during the recent lockdown. Some cross-national studies have also compared collaborative models of more than one country in a region. For example, Cyr et al. (2021) compared the collaborative performances of countries in Latin America during the COVID-19 pandemic, and Mao (2020) did the same for East Asian countries. However, few studies have focused on such local-level collaborative cases. In one of the few, Megawati et al. (2020) investigated the effectiveness of the collaborative dynamics, collaborative actions, and the impacts of collaboration in containing the spread of Covid-19 in Surabaya City, an Indonesian city.

A few notable studies have also explored governance challenges regarding tackling COVID-19 in Bangladesh. Marking the Bangladesh government's inconsistent and incoherent management during the early days of the pandemic, Uddin (2021) suggests the government must boost its capacity to contain the infection and achieve faster socio-economic recovery. Khan et al. (2021) recommend the country chooses an adaptive strategy to create a network of organizations that can collectively minimize pandemic-induced loss of lives and livelihoods. In contrast, Akanda and Ahmed (2020) recognized elements of collaborative response and found that the government's policy measures were helpful to some extent in controlling the pandemic in Bangladesh. An online survey conducted by Hossain (2021) revealed the local government's positive role in managing the COVID-19 pandemic in the country. The work notes that innovative

use of ICT means in pandemic responses enabled effective participation of common people. However, no empirical research has solely focused on understanding collaborative governance practices in tackling the COVID-19 pandemic in Bangladesh. This study, focusing on a local level case of collaborative governance in a developing country context, addresses this research gap in the literature.

Methods

This investigation used a mixed qualitative approach to conduct this case study and address its questions. A qualitative approach allows researchers to explore and analyze processes, views, beliefs, and phenomena to obtain deeper insights into real-life problems (Hoque, 2021a; Tenny et al., 2022). A qualitative case study examines space and time-bound phenomenon that allows the investigator(s) to collect detailed and in-depth data from multiple sources (Alpi & Evans, 2019; Creswell & Poth, 2018). The authors undertook multiple methods to collect and analyze data for this single-case qualitative study. Data were analyzed mainly per the themes of IFCG described previously. Subatin and Pramusinto (2019), while studying the collaboration process of the off-site anoa conservation through the Anoa Breeding Center in Indonesia, used a four-component framework combining Ansell and Gash (2007) and Emerson et al. (2012). These chronological components are – (i) dialogue and communication, (ii) trust-building, (iii) internal legitimacy, and (iv) shared commitment. This research aligned its findings and analyses to these components too.

Critical Reflective Practice

The *Reflective Practice* is a widely adopted research method which allows researchers to learn through participation (Bilous et al., 2018). This practice was initially exercised as part of student learning in teacher-education

settings (Jones & Jones, 2013). However, this work-integrated learning process is helpful in critically reflecting on the researchers' first-hand experiences and actions for continuous learning in the social sciences (Coulson et al., 2010; Fook, 2011). The data collection process in this method includes keeping notes of actions and observations in a journal and generating critical reflections while participating or at a later stage. Regarding this case study, while working as the Upazila Nirbahi Officer (UNO) of Saturia Upazila, the first author utilized prior knowledge of IFCG to initiate collaboration with many local state and non-state actors to tackle the challenges during the first wave of the COVID-19 pandemic in 2020. The first author played a central role in this collaborative exercise during this collaboration. The author regularly noted reflections in a journal and kept collecting documents for further analysis. Later, in 2021, the first author was transferred to another position in the capital city. After leaving Saturia Upazila, the author collaborated with the second author to transcribe those reflections and conduct further research on the case to produce this output.

Desk Review

Besides the first author's personal experience and critical reflections, a desk review was conducted to meet the data needs of this study. Several documents (i.e., reports, meeting minutes, official letters, notifications and so forth) and scholarly articles were reviewed. The document review helped this research validate, compare, and confirm the notes and reflections recorded in the journal. Meanwhile, the purposive review of literature informed this research about existing academic understanding and evidence regarding the practice of collaborative governance in tackling various pandemics, including COVID-19. Reviewing the merging evidence and literature regarding pandemic governance in Bangladesh was useful for collecting data that could examine

the comparative effectiveness of Saturia's collaborative governance model.

Limitations

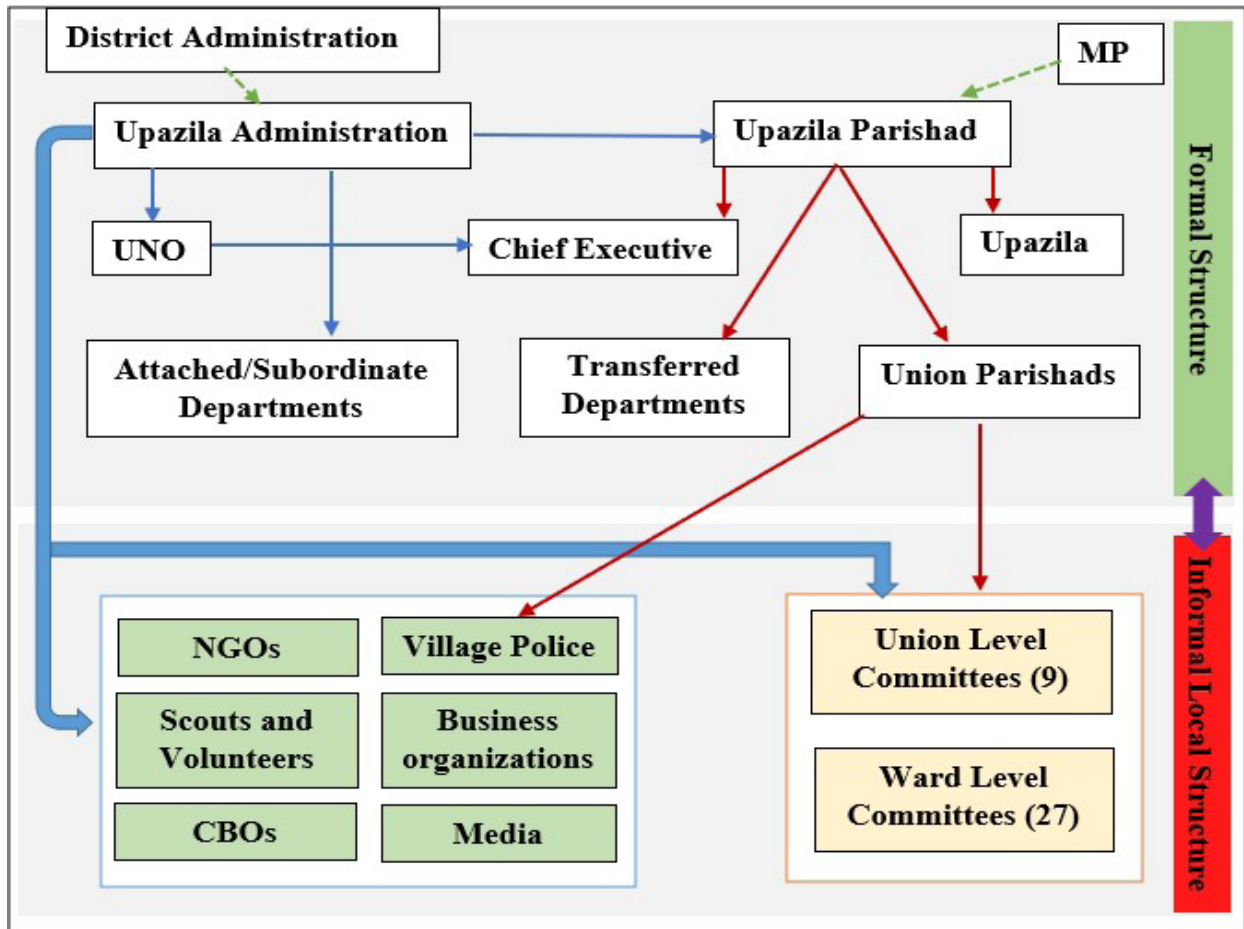
The readers must know a few critical limitations while reading and using this research. First, the findings and interpretation of this study largely depend on the critical reflections of personal experiences and a review of purposively selected documents. This leaves a risk of researchers' confirmation bias. Second, one must know that many unexplored external factors affected the consequences of the pandemic in Saturia Upazila. This research only focused on the collaborative practices that aimed to minimize the negative impacts of the pandemic in a specific period.

Results and Discussion

After coronavirus was declared an international public health concern on 30 January 2020, the government of Bangladesh followed the progress regarding the spread of the virus. On 1 March 2020, the government formed a 26-member national committee headed by the Health Minister to implement and review strategies and issue new directives to tackle the pandemic (Habib & Adhikary, 2020). Subsequently, the Ministry of Health and Family Welfare formulated the "National Preparedness and Response Plan for COVID-19" and formed several other committees at different levels. These committees are – (i) National Coordination Committee, (ii) National Technical Committee, (iii) Committee in Division Level, (iv) Committee in District Level, and (vi) Committee in Upazila Level for Prevention and Control of COVID-19 (GoB, 2020).

The UNOs were given the responsibility to lead the Upazila level committees. Integrating the formal administrative structure for governance (see Figure 4), UA of Saturia formulated a collaborative governance framework with different non-government stakeholders, including non-government organizations (NGOs), Community-

Figure 4.
Integrated Collaborative Governance Framework of Saturia (The Saturia Model)



Source: Authors' illustration

based Organizations (CBOs), volunteers, scouts, business organizations, news and social media organizations, community leaders, and individuals from different walks of life. This was initiated in the second week of March 2020, following the first case reported of COVID-19 in the country. As the bottom part of Figure 4 shows, this CGR combined formal and informal structures. This collaboration between the government and other actors was named "Team Saturia" to instil a sense of belonging. UA invited these actors to join and work for the team. These initial activities that triggered this collaborative framework took place during the second and third weeks of March 2020. Although a nationwide lockdown was declared in the last week of March, people in many areas in the country self-imposed social distancing

even earlier. Therefore, the collaborative actions took place through non-formal communication channels (e.g., social media, phone call, and informal meetings). At the same time, the District Administration of Manikganj officially formed Union and Ward level committees for the prevention and control of COVID-19. This was helpful for UA to execute this collaboration at the extreme grassroots level. The village police force, which Union Parishad supervises, was also ready to serve and help. UZP also received advice from local Members of Parliament (MP) when required.

The objectives of creating this framework were to share information, ensure effective quarantine, create awareness among people, help impose social distancing rules, manage infected cases, provide door-to-door support to

vulnerable groups, and so forth. This framework has been used during this pandemic management in Saturia Upazila. These sections illustrate the reflections and discussions on the collaborative dynamics, actions, impacts, and adaptations of the Saturia Model.

Quarantine and Isolation

On 9 March 2020, the government instructed all administrative units (including UAs) to create a comprehensive list of all foreign expatriates in their area of jurisdiction and to enforce home quarantines for those who have recently entered Bangladesh. The task was difficult, but Saturia was prepared with a freshly established network of actors. Helped by volunteers and the village police force, the UA could immediately list 22 recently arrived foreign expatriates and ensure home quarantine facilities for them with the assistance of the Upazila Health and Family Planning Office and Saturia police station. Thus, the collaborative network helped UA to trace the expatriates and keep them in home quarantine.

UA, along with the village police force, volunteers, government officials, elected persons, and local community leaders, kept monitoring the location and movement of expatriates to ensure that they strictly followed the quarantine rules. If found otherwise, someone from the active network would quickly report to the control room established by UA. This quick reporting helped UA strictly implement the conditions of quarantine. Initially, UA encouraged the expatriates to follow quarantine rules. However, many did not realize the importance of quarantine. Then, a team led by UA (with maintaining social distancing) visited them individually to warn them strictly not to break the imposed quarantine rules. Those still breaking the rules received their due punishments enforced by designated mobile courts. On 15 March 2020, the UNO-led mobile court introduced a penalty of 10,000 Bangladeshi Taka to anyone violating quarantine rules under

section 269 of the Penal Code, which was the first punishment for violating quarantine rules in Bangladesh (Bdnews24, 2020). Moreover, as part of the neighbourhood awareness campaign, large posters were placed in front of the houses of the persons in quarantine.

Coronavirus spread fast within two weeks (by 25 March 2022) across several districts, including the capital city Dhaka. Saturia UA was prompt in taking measures to implement quarantines for those coming from the affected districts. Following the government's declaration of nationwide lockdown, UA consulted with other actors to explore how the virus spread could be restricted on Saturia. Meanwhile, following several newspaper reports from India about Tablighi Jamaat being a super spreader of COVID-19, the leaders in Bangladesh postponed the activities of Tablighi Jamaat in Bangladesh (Chisthi, 2021). This forced many followers of Tablighi Jamaat to return to their village homes across the country and created a possibility of spreading the virus. Sensing this possibility, Team Saturia quickly set up check posts in three entry points of Saturia Upazila. Within two days, the team led by UA enforced quarantine on 79 Tablighi followers (Daily Bangladesh, 2020a).

Implementing Lockdown Policies

The greatest challenge for UA of Saturia was administering the government's lockdown policy effectively and taking measures to ensure that general people have access to essential daily goods. A few factors made enforcing strict lockdown and social distancing policies critically challenging for implementers. First, the general population was ignorant about the virus' vicious potential and kept ignoring the rules (Mahmud, 2020). Second, being a densely populated nation, social distancing was challenging for many people, including urban slum dwellers, commuters, and poor daily wage labourers (Anwar et al., 2020). Third, online sales and home delivery of goods

facilities were unavailable in the country's semi-urban and rural areas. Many people still had to travel to supply and purchase essential goods and services (e.g., medicine, food, care).

Team Sauria regularly monitored and strictly implemented the lockdown policy in its jurisdiction. UA formed separate teams for each Union to work to raise awareness about government rules regarding lockdown, social distancing, and public health. These nine teams comprised government officials, elected representatives, members of the Ward Committee, the village police force, and volunteers. The members of these committees visited houses in their respective areas, encouraged residents to follow suggested health guidelines, and debunked disinformation regarding COVID-19. After this campaign, UA remained vigilant of any violation of government rules and was prompt in taking legal action against those who violated the rules. This helped to enforce the lockdown policies.

Bazar Online and on the Wheel

As lockdown was implemented, regular supplies of essential daily goods to residents needed to be ensured. On 28 March 2020, UA introduced a mobile Bazar on pick-up vans to deliver goods. The initiative proved effective in keeping people inside their houses. However, the first case of COVID-19 was identified in Sauria on 24 April 2020. In the following weeks, the number of cases rose sharply in three Unions: Sauria Sadar, Dhankora, and Fukurhati (Daily Bangladesh, 2020b). Due to the high transmission rates, the Directorate of Health marked these unions as "Red Zones".

On 15 June 2020, a complete shutdown was declared across the identified red zones. As a result, residents of these areas could not get out of their houses. UA set up an online Bazar application named "Nitya Bazar" to collect home delivery orders for essential goods and deliver them to residents. Several volunteers were employed

to deliver the ordered goods across these red zones. During this one-month shutdown period, over six hundred orders were placed from red zones through the application and volunteers delivered goods against all those orders. Several local newspapers reported positive feedback from those who received products through this service. On 5 December 2020, as part of the International Volunteers Day celebration, three volunteers from each Union were recognized with the "Best Volunteer" award by UA for their voluntary and courageous contribution during the pandemic.

Quick Response and Support Mechanism

The government provided vulnerable and distressed people with food items and financial support during the lockdown period. For this purpose, UA, after careful observations and scrutiny, prepared a comprehensive list of potential recipients for each Union. While people on these lists received one-off and regular support, many well-off people struggled to meet their emergency needs. UA formed a separate "Quick Response and Support Team" (QRST) to reach people requiring emergency support. This team comprised public servants and volunteers who had motorbikes (which could be used for delivery purposes) and proven skills in driving fast on bumpy rural roads. Daily demands for immediate support were collected from three sources – the national hotline number (333), District Administration's control room, and UA's control room. The members of QRST ensured the delivery of these demands within 24 hours.

UA received emergency aid from various government, non-government, and community organizations. Therefore, it was crucial to manage and distribute these aid resources efficiently. Team Sauria set out several measures to ensure those aid resources reach people in need in time. First, aid distribution teams comprising government officials were set up for each Union. Each team was regularly in contact with the

respective Union committee to monitor and supervise the distribution process. Second, local volunteers were engaged in targeting and selecting beneficiaries. They regularly received advice from the Union Parishad chairman in this process. Third, local schoolteachers and scout members periodically verified the list of beneficiaries to ensure transparency and accountability. The lists were also regularly posted on social media platforms for comments and suggestions from netizens. Finally, local non-government and community organizations provided UA with their lists of beneficiaries. Combining all lists, a master computerized database avoided overlapping. These coordinated and collaborative efforts made the process effective.

Harvesting Plans and Support for Farmers

Agriculture remains the primary livelihood for people living in the rural areas of Saturia. The main crops are rice, maize and vegetables (Tama et al., 2018b). Also, there was a severe labour shortage during the rice harvesting season (June 2020) because of the prolonged lockdown. A warning of early floods from the Bangladesh Meteorological Department was circulated. On 30 May 2020, Team Saturia wrapped up the rice harvesting by 10 June 2020. Several coordinated measures were taken to achieve this target. First, it was decided to use machines to do the harvesting. However, there was only one machine in the Upazila. Assisted by the Upazila Agricultural Department, UA contacted neighbouring UAs and collected seven more machines. These machines were assigned in specific areas for harvesting purposes, and the operators' contact details were shared with the respective farmers. UA fixed the cost of harvesting according to per decimal of land. This information was also published on social media platforms. Second, volunteers and members of Ansar (i.e., a national law enforcement force) and Village Defense Party were employed to help farmers with harvesting. Moreover, skilled

volunteers also participated in this programme. Farmers were asked to pay a fixed wage (600 Bangladesh Taka per day) to each individual labourer. The wage was BDT (Bangladesh Taka) 200 lower than the standard. Finally, some poor, vulnerable widows, and physically challenged farmers could not bear the wages. Upon receiving a request from UA, the volunteers and Ansar/VDP teams helped their harvesting at no cost. Eventually, the harvesting was accomplished by the deadline.

Effectiveness of the Saturia Model

Saturia's collaborative governance framework adopted Emerson et al.'s (2012) IFCG model, and this evaluation of the model has been carried out based on its ten propositions (refer to Table 1).

The COVID-19 pandemic brought unprecedented uncertainty for all. As this disease is highly contagious and no remedy had been invented, collective efforts were critical to handling the pandemic. The leadership of UA was evident as the institution involved multiple parties of Saturia. Collaboration of this scale was a novel phenomenon. Clearly, three drivers (Proposition One) were present to begin CGR in this case. The effectiveness of the principled engagement was decided by the interactive process of revealing mutual interests, building shared meaning through articulating common objectives, finding the good from individuals' interests, and substantive determination (Proposition Two). UA actively engaged all stakeholders in all pandemic-related activities and responses. This was done by highlighting common interests, setting common short- and long-term objectives, placing the best common agenda, and generating consensus in actions.

After the initiation of principled engagement among different stakeholders, shared motivation created quality interaction among them and a virtuous cycle. Mutual respect, trust, and

commitment toward achieving common goals were the key to model delivery (Proposition Three and Four). Joint actions achieved the intended outcomes (e.g., delivering daily essential items, harvesting), and its capacity was determined by CGR's purpose, guided action, and desired deliverables (Proposition Five and Six). Interactive and self-reinforcing engagements were created through several platforms, including regular interactions, virtual meetings, and social media platforms. These collaborative dynamics were helpful in boosting common motivation (Proposition Seven). Within the established rigid administrative framework, it was hard to make all the decisions locally, make sufficient institutional arrangements, and allocate necessary resources to continue the collaborative dynamics effectively. Despite these limitations, UA implemented the decisions from the government by translating the government's decisions into local shared interests, defining the standard theory of actions (Principle Eight). The pandemic was a new challenge for the management. It is hard to determine or compare the positive or negative outcomes. However, Saturaia was recognized with the district's best management award. It indicates that the adverse outcomes were less in Saturaia than in other Upazilas (Proposition Nine). The model proved its adaptive capacity on several occasions. For example, the team had to adapt to this unique situation and provide the poor and vulnerable farmers with free-of-cost harvesting services (Proposition Ten).

The model can also be aligned with the four-components analytical framework processed by Subatin and Pramusinto (2019). In the initial stage of the crisis, dialogue and communication led by UA ensured the engagement of all stakeholders, followed by trust-building activities among the actors. The internal legitimacy was reflected in the collaboration led by the common interests of the actors, making it sustainable through the crisis. The voluntary participation of all actors

was motivated by their shared commitment. But the reflections further revealed critical limitations of the model.

Challenges and Limitations

As a sub-district level administrative unit, UA of Saturaia responded promptly with a collaborative governance framework to this unprecedented pandemic situation. Although the applied framework delivered good results, reflecting on key challenges and limitations of this collaboration can generate critical lessons.

A significant challenge was to manoeuvre the coordination among state and non-state actors. Most partners did not participate in national decision-making but were instead engaged in implementation. Therefore, local customization and convergence of their goals were challenging. Another challenge was the level of consciousness of the people. Ordinary citizens are guided by their religious and social beliefs. Many do not take cognizance of the empirical evidence. Many in the rural areas did not believe in the virus and its fatality due to their superstitions and religious beliefs. Such socio-cultural context made the implementation of the lockdown, quarantine and isolation, and the management of COVID patients utterly challenging.

The scarcity of necessary resources was also a significant constraint. At the beginning of the spread of the virus, there was hardly any protective equipment (e.g., PPE, hand gloves, goggles, N95 masks). Moreover, support from the government was limited to the local demands. The lack of experience of health personnel in dealing with COVID patients and managing the consequences of the pandemic by the government at all levels was another severe challenge.

Conclusion

Although the pandemic was primarily a public health concern, the consequences challenged all spheres of state and society.

Responding to such a situation required strong coordination among stakeholders like health service providers, local administration, all levels of government, law enforcement agencies, local businesses, and communities. Bangladesh had serious concerns about managing this pandemic with a big population, relatively weak government effectiveness, and poor health structure. As key policy implementing institutions at the local level, UAs in Bangladesh responded quickly and performed innovative and collaborative functions within the administrative jurisdiction, yielding positive results across the country.

Saturia UA, as illustrated above, effectively used a collaborative governance framework to ensure quarantine and isolation, implement lockdown policy, support vulnerable groups, and so forth. The outcomes of this strategy were, to a large extent, effective. However, coordination between and among state and non-state stakeholders, scarcity of resources, and limited access to the local body in national decision-making processes were some of the regime's key challenges.

Future research and aspirant UAs can consult the lessons generated in this case. However, they must know some critical features. First, effective collaboration in countries like Bangladesh requires multiple communication channels and platforms for interaction. Second, Bangladesh's decision-making and implementation process mostly follows a top-down approach. To make such a collaboration model effective, the partners must be included at all decision-making stages to cultivate a feeling of shared governance. Third, resources will always be insufficient. The regime must be prepared to optimize the use of limited resources. Finally, local social, religious, and cultural beliefs play a critical role in such situations. Therefore, any interventions must be cognizant of local contexts and involve community participation.

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