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Access to Primary Education of the Plain Land Ethnic Community Children in Bangladesh: A Case Study on Ranisankail Upazila

Sadia Sharmin*

Abstract

The plainland ethnic groups in Bangladesh generally live in the northern divisions of Bangladesh and are one of the most socially and economically disadvantaged and vulnerable sections of the population. The main focus of this study is to assess children's access to primary education in the local ethnic community in Bangladesh. This study followed a mixed-method approach that included a survey questionnaire of 276 ethnic guardians, a semi-structured interview of 20 teachers, and a KII of 2 government education officials and two managers of an NGO in Ranisankail Upazila of Thakurgaon District. The financial state, community, awareness about education, breakfast, and tiffin issue, proper guidelines about regular studies, motivation, language and culture, communication and response in classes, and availability of study materials are the major factors that impact the primary education of plain land ethnic community children. The Plainland ethnic community children lag behind in primary education mainly because of poverty, unawareness, illiteracy, different languages and cultures, and the lack of proper guidelines.

By conducting the Chi-square test (p<0.05), the overall result of the study is that the access to primary education of plain land ethnic community children is influenced by the location, community, and gender, and some factors are not influenced (p>0.05) by gender, location, and community. This study's main findings are the factors that mainly impact primary education, significant challenges and initiatives, and the overall scenario of the primary education of plain land ethnic community children. The study findings would be a substantial guideline for education experts, policymakers, teachers, government, and NGOs.

Keywords: Primary Education, Plain Land Ethnic Community, Bangladesh.

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Introduction

An ethnic group mainly indicates the social group or category of the population set apart from other groups in a society. There are approximately two million people from 27 officially recognized ethnic minority groups in Bangladesh. Two broad categories of ethnic minorities in Bangladesh exist: groups that reside in the Chittagong Hill Tracts (CHT) in the southeastern Chattogram Division and groups that reside in the northern divisions, often referred to as plain land ethnic groups (Azizul, 2014). The plain land ethnic groups in Bangladesh live primarily in the divisions of the north of Bangladesh within Rajshahi, Rangpur, Mymensingh, and Sylhet, and mainly the groups are Santals, Garos, Khasis, Manipuris, Oraons, Pahans, and Murmu. Mundas and Hajongs (Mocdonald, 2021). Most minority groups lag behind in land ownership, income, employment, health, and literacy compared to the mainstream people (Sarkar, 2020). One of the most substantial facts is that the ethnic minority children communicate in their mother tongue in their house. However, they are compelled to face Bengali texts in school, and the teachers are also from the Bengali community. The whole teaching method is in Bangla, and also they do not get proper support from the non-ethnic minority teachers and other classmates, which increases the tendency to drop out of primary school in the plain land ethnic community students. Poverty is also a factor for a lower rate of inclusion in primary education of the plain land ethnic community children. When they fail to lead a better life, parents prefer to employ their children in any work rather than sending them to school. These groups face prejudice, difficult living conditions, failing government services, and land dispossession built on historical discrimination (Sarkar, 2020). The GOs and NGOs try to take various cooperative initiatives to provide primary education to the children of the plainland ethnic communities to keep pace with the mainstream children.

The key objective of this paper is to assess the access to Primary Education of the Plain land Ethnic Community Children in Bangladesh with a focus on Ranisankail Upazila and some other targets, pointing out the current scenario of enrollment in Primary Education of plain land ethnic community children, analyzing the factors effect on entrance to primary education of plain land ethnic community children and also addressing the significant initiatives and challenges regarding access to primary education of the plain land ethnic community children with suggestions.

Literature Review

Ethnic minority children in Bangladesh from the northern part are among the country's least literate and at heightened risk of dropping out of school. They are one of the most vulnerable and socially and economically disadvantaged groups in society. Primary education mainly forms the foundation for a child's educational journey. It is not just about academic achievement but also promotes self-awareness and emotional regulation.

The inclusiveness of ethnic community children in primary education is really needed for their future flourishing. Macdonald (2021) focused on the challenges faced by the people of the plainland ethnic community in Bangladesh. This study showed that many plainland ethnic groups face difficult living conditions, including poor housing, unsafe drinking water, and insecurity. Government services and benefits are insufficient in some areas with large ethnic minority populations. This study recommended that the government and NGOs continue to press for the rights of the plain land ethnic community and assist Bangladesh's ethnic minorities in finding ways to advocate for themselves.

Rashid (2020) focused on the main problems faced by ethnic minority students in primary school and also the role of the NGOs engaged in Multilingual Programs, and the challenges they are facing in promoting education, language, and culture in the Chittagong Hill Tracts ethnic community. This study finds that the access to education of ethnic children has always been more complicated than that of the people of the plains. The lack of educational facilities and insufficient opportunities for learning in the mother language has resulted in significant backwardness of these ethnic communities. This study also finds that BRAC started an "Education for Ethnic Children" (EEC) unit for all the ethnic minorities in Bangladesh. The aim of this project was to provide qualitative education to every ethnic child according to their needs with an informal education system. This study recommends that the NGOs strengthen the ethnic minority education program, including mother tongue-based multilingual education, by involving minority-led institutions and other local actors.

Azizul (2014) examined the cooperation among various actors in primary education. This study indicates that NGOs believe that to mount a literacy movement successfully at all levels, it is crucial to have cooperation among different stakeholders, particularly the government, NGOs, and Civil Society like learners, teachers, teachers associations, researchers think tanks, community, development partners, etc. and other institutions that are dynamic and democratic. Primary education is a fundamental right for human beings that is obligatory for all. This study addressed the primary schools of NGOs that play a supplementary role in primary education, and their achievement is remarkable.

Hossen (2023) discussed BRAC's programs to provide non-formal education and their consequences. The study's evidence showed that BRAC established the Education for Ethnic Children (EEC) unit in 2001 to adapt its non-formal teaching model to meet the needs of Indigenous children who do not speak Bengali. Teachers explain lessons orally in ethnic mother tongues alongside Bangla using educational materials based on local culture and heritage. This method helps Indigenous children do better in class and

increase their participation. Reza (2022) examined some initiatives of six NGOs in promoting education in developing countries and explored their successes and challenges. It also highlights some factors that are the causes of children dropping out of primary school in the ethnic community. This study found that NGOs are now gaining widespread attention because they are often viewed as alternative resources that can promote greater awareness, change, and development in societies. This study addressed some challenges, including insufficient quality teachers. Poverty is another factor that prevents some students from continuing their education despite the support provided by the government and NGOs. Language barriers can also affect the quality of education.

Sarkar (2020) discussed the vulnerable situation of the plains' indigenous groups. This study addressed the fact that they cannot exert their ownership of their ancestral agricultural or residential plots. Influential mainlanders invariably grab their croplands. This study also addressed the fact that the grabbers do not have any qualms about evicting the indigenous people from their lands. These ethnic minority people can be defined as being the most helpless in Bangladesh. Hussein (2019) focused on the human rights of ethnic communities in Bangladesh. This study found that plain-land ethnic minorities suffer land deprivation largely because the provisions of the relevant land laws and regulations are not implemented. It is perceived that the successful implementation of the various initiatives by concerned stakeholders will enable all communities, large or small, of ethnic, religious, and cultural diversities, irrespective of differences of any kind, to live in peace and harmony in Bangladesh.

Ali (2023) has addressed the MLE (Multi-Language Education) method of education to facilitate quality education for the children of ethnic communities. This study has shown that most of the ethnic indigenous children lose interest in studies and leave school in a very short period because of language issues. Multilingual education programs are most often a part of a formal educational system, which includes the teaching and learning of multiple languages. This concept enables ethnic minority learners to achieve their educational goals without forcing them to sacrifice their linguistic and cultural heritage. The MLE project has already achieved remarkable success. This study highly recommended continuing this project for a longer term to remove the language barrier of ethnic minority children, especially in primary education.

Khaled (2013) has mainly focused on multicultural classrooms to develop the analytical thinking of learners by introducing sensational pedagogies. Multicultural education is a process of comprehensive school reform that ensures basic education for all students, primarily focused on ethnic minority groups. This study recommended the proper mechanisms that mainly assist teachers in helping minority students develop a positive group identity. Teachers are the significant factor that can support understanding among students so that they can relate to one another throughout their lives. Multiculturalism and the proper mechanisms are needed to ensure the education of the people of the ethnic community.

Zaman and Akhter (2023) addressed the root causes of social exclusion and reviewed the existing initiatives through value-based social work professionals regarding the people of the plainland ethnic community. The Plainland ethnic minority people are marginalized and discriminated against through social exclusion by the state and society and excluded from full participation in social, political, and economic life, hindering services, education, health, and resources, which are the key factors ensuring their fundamental rights, dignity, and well-being. This study mentioned the project 'Promotion of Rights of Ethnic Minority and Dalit's For Improvement Programs' (PREMDIP), which is implemented by Eco Social Development Organization (ESDO so that the Ethnic Minority would be empowered on land-related issues and able to create protection and prevention for further land grabbing or become land less. Through this project, the vulnerable condition of the plainland ethnic minority will be reduced.

Kabir and Nath (2005) have focused on the factors functioning in school culture and beyond economic conditions and community culture that have been causing the poorer performance of ethnic minority students and highlighted the factors that can improve the learning achievement of ethnic minority students. He mentioned the influential factors within and outside of school. Developing a good foundation in Bangla as a second language, raising the quality of classrooms, teaching and need-based curriculum reinforcement for slow learners, sensitizing teachers to issues specific to ethnic pupils, eradicating irregularities in the testing system, creating a space to facilitate increased interaction between ethnic and Bengali pupils and developing a comprehensive support system for general and slow learners can improve the learning system of the ethnic minority students.

Liu (2021) has focused on the key factors that influence students' access, participation, and outcomes in preparatory classes and also found out the factors' contribution to achieving educational equality for minority students. This study highlighted that language is the most crucial element in the composition of ethnicity, a vehicle for inheriting culture, and a communication tool among ethnicities. It also demonstrated the strong relationship between ethnic identities and academic achievement. Thuy and Huy (2023) have stated the factors that can ensure the quality education of

ethnic community children. Parental awareness, community customs and practices, geographic distance, costs for education, and institutional and policy factors are the main elements of quality education for minority students. This study recommended promoting quality education for ethnic minority groups in Vietnam.

Chairan (2020) has indicated the insufficiency of the teachers' training program to teach the ethnic minority children. The government has already taken the initiative that the ethnic minority students would learn exclusively in their mother tongue. With this aim, the government decided to publish textbooks in ethnic languages in 2012, but the problem is that most teachers can speak in ethnic languages but do not know how to read and write them. This study mainly recommended arranging intensive training on teaching to use textbooks easily while taking classes for ethnic minority students. Hoque (2023) has focused on the assessment of the cognitive achievement (learning outcome) of the students of the ethnic community students (Santal). This study also finds out the gross enrollment rate (GER) and net enrollment rate (NER) in the primary education of ethnic students. This study mentioned that the children of Santal are lagging behind mainstreaming students in academic achievement. It is essential to increase the educational achievement of the children of Santal at primary school to ensure inclusiveness and build up an equity-based society for the future generation.

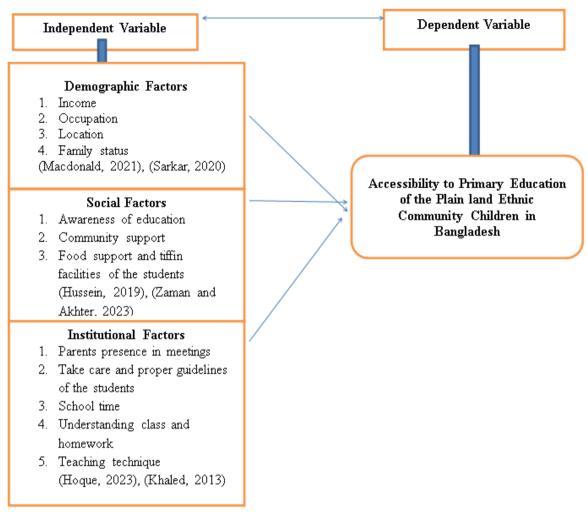
Research Gap

Most of the research showed the vulnerable situation of the ethnic community people and some NGOs' initiatives about their primary education. The articles also indicate that the children of plainland ethnic communities are lagging behind in primary education because of language problems and poverty. However, the articles fail to show the other factors clearly, which also impact the primary education of ethnic minority students. These articles also do not find the cooperative initiatives of GOs and NGOs for promoting primary education and reducing the dropout ratio of ethnic minority students.

This paper mainly identifies the gaps of previous research and tries to show the real scenario of the primary education of plain land ethnic community children clearly. It also finds out the other essential factors and the significant relations among the factors that affect primary education and also the proper solutions to ensure the primary education of the plain land ethnic community children.

Analytical Framework

Based on the literature reviews, this study identified the mentioned independent variables, which are demographic factors, social factors, and institutional factors. These variables help assess the access to primary education of the Plains Land ethnic community children.



Source: Author's Own Work

Methodology

This research follows the mixed-method approach, where qualitative and quantitative methods are used to get effective results regarding children's primary education in the plainland ethnic community. Quantitative data determines the guardians' opinions of the four unions. In contrast, qualitative data is used to determine the views of the teachers and the officials of GOs and NGOs. The study covered the Survey method, Semi-structured Interview, and KII.

Regarding this paper, both open-ended and close-ended questions were used in the questionnaire. During the survey, the maximum number of questions was kept for the respondents, who are the guardians of the plain land ethnic community children. The semi-structured questionnaire method was used, where both open-ended and close-ended questions were kept. Regarding this research, semi-structured interviews are taken with primary school teachers to get an idea about the inclusiveness of the Plainland ethnic community children in primary education. In KII, interviews were conducted with the officials of GOs and NGO managers.

This study used fieldwork, a Questionnaire, and a Pilot study to collect data, which were mainly secondary. Primary sources include survey

A Case Study on Ranisankail Upazila

questionnaires, semi-structured interviews, and KII. To get primary data, the four unions of the Ranisankail Upazila were visited. Some articles, journals, books, and websites were used to gather knowledge, which is mainly secondary data.

This research collected qualitative data through questionnaires, interviews, KII, open-ended questions, one-to-one interviews, process observations, and record-keeping methods. The quantitative data collection analysis is followed by SPSS, MS Excel, and Statistical Tools such as Descriptive Statistics (Frequency and Chi-square). However, initially, Google Forms was also used to input the raw data to get the primary results of the findings.

Area Selection & Population Size

This paper covers the four unions, including Bachor, Hossaingaon, Nekmarad, and Nanduar, of the Ranisankail Upazila of Thakurgaon District.

Table 1: Area selection of Ranisankail Upazila

Upazila	Demographic Area	Population
Ranisankail	Bachor	15884
	Hossaingaon	34109
	Nekmarad	23658
	Nanduar	24558
	Total Population	= 98209

Source: Bangladesh Population Census, 2011

Sampling and Respondents

In this study, probability and non-probability sampling are used. Cluster sampling, convenience sampling, and snowball sampling were used in this research. The cluster sampling is under probability sampling, where the four unions are selected among the eight unions of Ranisanksail Upazila. The unions are the Bachor, Hossaingaon, Nekmarad, Nanduar. In convenience sampling, the convenient people (ethnic guardians) who are easy to access in the specific areas are chosen as the respondents of the questionnaires. In this paper, the total sample size is 300, where the ethnic guardians are selected for the survey from each union, and the sample size of the ethnic guardians is 276. A total of 20 teachers from each union were selected for interview, and at last, the officials of GO and the managers of NGOs were considered KII, and the sample size for KII was 4.

Findings

Socio-demographic Profile

Table 3 provides information about the respondents who have provided valuable opinions about the primary education of Plains Land ethnic community children. It gives information about the gender, income, religion, educational qualification, and living area of the respondents.

According to this research, 32.2% of data are collected from the Hossaingaon Union. The Santal, Oraon, and Pahan are the major communities in Ranisankail Upazila, and the ratios are 26.4%, 23.9%, and 24.3%, and most of them are Hindu and Christian. The female respondents are 65.9%, and the male respondents are 34.1%. Most respondents are day laborers and housewives whose primary monthly income is less than 5000 taka. The pre-primary and class three school-going ethnic minority children are more than the other classes, and the percentage is 23.9%.

Table 2 shows the overall socio-demographic profile of the people of the local ethnic community.

Table 2: Demographic Profile of the samples (n=276)

Table 2: Demographic Proffle of	n(%)
Living Area	,
- Bachor	69 (25)
- Nanduar	69 (25)
- Hosseingaon	89 (32.2)
- Nekmorod	49 (17.8)
Gender	
- Male	94 (34.1)
- Female	182 (65.9)
Occupation	
- Day Laborer	176 (63.8)
- Housewife	92 (33.3)
- Businessmen	7(2.5)
- Govt. job	1 (.4)
Monthly Income	
- Less than 5000	129 (46.7)
- 5000-10000	118 (42.8)
- 10000-15000	27 (9.8)
- 15000- 2000	1(99.6)
Religion	
- Christian	134 (48.7)
- Hindu	142 (52)
Ethnic Community	
- Santal	73 (26.4)
- Oraon	66 (23.9)
- Pahan	67 (24.3)
- Munda	30 (10.9)
- Murmu	14 (5.1)
- Tudu	13 (4.7)
- Barman	13 (4.7)
Number of children	
- 1-3 in number	237 (85.9)
- 4-6 in number	36 (13)
- 7- more	3 (1.1)

Age of children	
- 1-5	79 (28.6)
- 6-10	206 (74.6)
- 11-15	98 (35.5)
- 16 -more	18 (6.5)
Education of children	
- Pre-primary	80 (29)
- Class 1	38 (13.8)
- Class 2	66 (23.9)
- Class 3	37 (13.4)
- Class 4	66 (23.90
- Class 5	67 (24.3)
- Other	27 9.8)

Enrollment and Participation Level in primary schools of ethnic children

Table 3 shows that 52.9% of guardians always send their children to school, 22.5% spend maximum time there, and only 0.4% never send their children to school. This table indicates that guardians are somewhat aware of regularly sending their children to school.

Table 4 mentions the opinion of the teachers about the participation rate of the plain land ethnic community children in school. 50% of teachers said that the participation level of ethnic minority children in the school is (60%-80%). And 15% of teachers said the participation rate is (20%-40%). One reason for not including the children in school is that the school-going children must care for their little brothers and sisters when their parents go out to work. Because of poverty, they engage their children in work with them, and the children cannot be present in the classes.

The two tables mainly highlight the opinions of the guardians and teachers about the enrollment and participation level of the Plains Ethnic Community children in school. From the tables, it is clear that the inclusiveness ratio in primary education of the Plains Ethnic Community children is quite better.

Table 3: Send children to school (Guardian's opinion)

	Never	Rarely	Sometimes	Often	Always
Send children	0.4	1.4	22.8	22.5	52.9
in school= (%)					

Table 4: Participation level in school of the students (Teachers perception)

Percentage	20-40%	40-60%	60-80%	80-moe
Participation rate	15	20	50	15
in school= (%)				

Time Duration at School of the Children

In Figure 1, 57.0% of guardians indicate that their children have to stay in school for 4-5 hours, and 31.4% of parents said that the students have to

stay in school (for 2-3) hours. The parents also informed that the school time is continued chiefly from 9 am to 3 pm where the (pre-primary- class 2) students stay from 9 am to 12 pm and the class (3-5) students have to stay from (9 am-3 pm) but the double shift school has some different timing. This chart indicates that most students remain in school (4-5) hours.

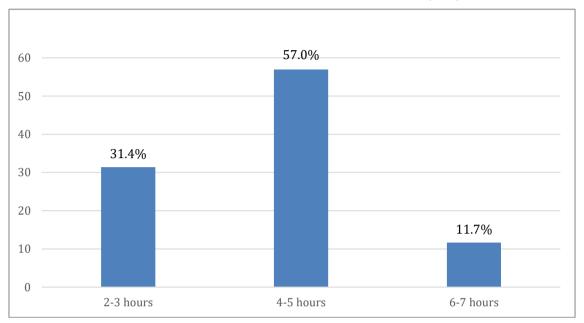


Figure 1: Time Duration at School

Regularity in Academic Activities

According to Table 5, it is shown that 55.1% of guardians ensure their children's breakfast before going to school, and 1.4% of guardians say that they never ensure breakfast for their children. 33.7% of parents never give tiffin to their children. Most said that children come home to eat lunch because the homes are near school, so they do not carry tiffin. Breakfast and tiffin are the most critical factors for attention in the class of the students. When the students are hungry, they cannot concentrate in the classes; this table indicates that the guardians are little concerned about the tiffin and breakfast of their children.

During the interview, one teacher said,

"Maximum time the ethnic students come to school without breakfast, sometimes they only take raw tea. Even they do not take tiffin, which causes them to remain hungry in class and cannot concentrate."

34.4% of guardians said that they always take care of their children's regular studies, and 1.8% never do. As most guardians are not literate, they cannot properly care for their children's studies.

34.8% of guardians said that they regularly participate in the parents' meeting, and 4.0% never join because they are busy. As most guardians are day laborers, they cannot manage their time easily.

Table 5: Regularities on academic activities (Guardian's perception)

Factors	Never	Rarely	Sometimes	Often	Always
	(%)	(%)	(%)	(%)	(%)
Ensure the	1.4	2.9	16.3	24.3	55.1
breakfast					
Ensure the tiffin	33.7	20.3	25.4	10.9	9.8
Taking care of	1.8	11.6	24.3	27.5	34.4
regular studies					
Participate in	4.0	15.6	28.3	17.4	34.8
parent meetings					

According to Table 6, teachers think children from the plainland ethnic community do not get proper care in their studies at home. 40% of teachers said that the guardians sometimes take care of their children's studies. 60% of teachers say that the guardians are present at the meetings at maximum time. 50% of the teachers stated that children from the Plains Land ethnic community rarely complete their homework. The teachers think that unawareness and lack of proper care are the factors for which ethnic minority children cannot improve their primary education.

In an interview, another teacher said,

"The parents cannot take care of the regular studies of their children because of illiteracy; even guardians do not want to participate in the meetings properly."

Table 6: Regularities on academic activities (teacher's perception)

Factors	Never	Rarely	Sometimes	Often	Always
	(%)	(%)	(%)	(%)	(%)
The guardians take	0.0	35.0	40.0	20.0	5.0
care of the regular					
studies at home.					
Guardians'	5.0	5.0	30	60	0.0
participation in					
meeting					
Ethnic community	0.0	50	10	25	15
students complete					
homework.					

The two tables mainly highlight the controversial opinions of the guardians and teachers about regular academic issues. Most of the guardians said that they are aware of their children's studies, but the teachers indicated that the guardians should be more aware of their children's education.

The Tendency of Children to Eat Out

In Figure 2, 50.36% of guardians say that sometimes their children want to eat out, so they must bear extra costs. Most of the time, they take unhealthy food from a street shop. On the other hand, 5.40% of children do not have the tendency to eat out because most of the time, they take their breakfast before going to school and also bring tiffin.

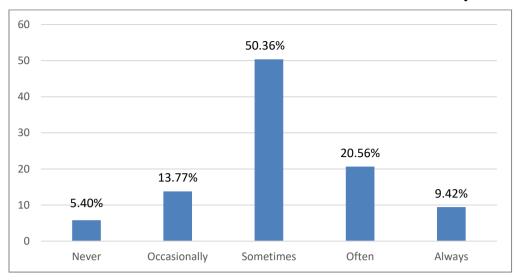


Figure 2: Tendency of children to eat out

Responsibility of the teachers to the students (Guardian's opinion)

Table 7 shows that 50% of guardians agree that teachers always take care of the students. (41.7%) Guardians strongly agree with this. Only 0.4% of parents disagree with this statement. They think that school management should be improved and teachers should be more responsible for the total management of all students. Overall, it can be said that guardians are satisfied with teachers' responsibilities.

One of the guardians said,

"Teachers do their duty best, but my child does not want to study, and his result is not good."

Table 7: Responsibility of the Teachers to the Students

	Strongly Agree	Agree	Moderate	Disagree	Strongly Disagree
Responsibility of the	41.7	50.0	8.0	0.4	0.0
teachers= n(%)					

Problems faced by the Ethnic guardians

Figure 3 indicates that 72% of parents do not face any problems ensuring their children's primary education. Thirty percent of parents highlight their problems with this issue. Financial problems, language problems, lack of proper guidelines, unwillingness of children to go to school, etc., are significant issues. This figure indicates that the majority do not face problems continuing their children's primary education.

During the interview, it was known that the GO and NGOs had taken various initiatives to ensure the primary education of the Plains ethnic community children, such as providing study materials, awareness programs, financial support, etc.

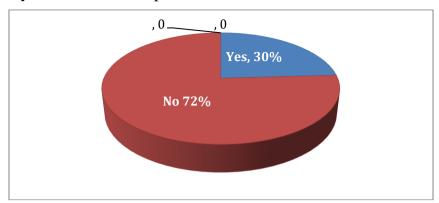


Figure 3: Problems faced by the guardians

The Chi-square Test is Based on Gender, Location, and Community and Includes the Following Factors

This research is about "Access to Primary Education of the Plain Land Ethnic Community Children in Bangladesh: A Case Study on Ranisankail Upazila." The study tries to determine the significance of independent and dependent variables.

Table 8 shows that 'gender' does not influence the 'awareness of sending the children to school', 'take care of regular studies', 'caring of teachers', and 'problem facing level' based on (p > 0.05). However, gender significantly impacts the 'joining parents meetings regularly' factor based on p < 0.05.

'Location' significantly influences the factors of 'sending children to school' and 'taking care of regular studies' based on p<0.05. On the aspects of 'joining the parent's meetings,' 'caring for the teachers', and 'problem-facing level,' the location has no impacts based on p>0.05.

'Community' significantly influences the first, second, third, and fifth factors based on p<0.05, which indicates that the alternative hypothesis is accepted. The community does not influence the 'caring of the teachers' factor based on p>0.05, so the null hypothesis failed to be rejected.

Table 8: Association between Gender, Location, and Community with Factors affecting Issues

Factors	Gender (p-value)	Location (p-value)	Community (p-value)
Awareness of guardians to ensure the children go to school regularly	0.137	0.016*	0.005*
2. Joining the parent's			
meeting	0.001*	0.223	0.025*
3. Take care of the regular			
studies	0.250	0.004*	0.002*
4. Caring for the teachers	0.065	0.084	0.146
5. Problem facing level	0.494	0.289	0.013*

The Cooperation between GOs and NGOs Regarding Ensure the Ethnic Primary Education

The GOs and NGOs collectively work to ensure the primary education of the children of the Plain land ethnic community. As NGOs mainly work at the field level, they can quickly identify significant problems for the people. From the KII session, it is stated that the NGOs mainly work at the field level to find out the critical issues or demands of the people of the plains and ethnic community. Then, they talk about the problems to the government officials. After that, the field-level administrators represent the demand to the government to take some initiatives and policies, and then the government initiatives are finalized by higher authority. After that, the government has to get the help of NGOs to reach out to the people of ethnic minority groups. NGOs also get the help of the government when taking any initiative. Through this process, the GOs and NGOs work together to solve this issue. The work is also easy when the GOs and NGOs can maintain a good relationship.

One Government Official Said,

"We jointly work with NGOs to improve the primary education of the plain land ethnic community children. The NGOs mainly find out the root problems and the demands of the ethnic minority and inform us about them, and we propose some initiative to the government."

The Challenges Mainly Facing the Ethnic Minority Children

The most common problem among students of the ethnic community is language. As they have their language, they cannot adjust to the classes in the language of Bangla easily. They have to face the challenges of keeping pace with mainstream children.

Another challenge for Plainland ethnic community children is financial insufficiency. Because of this, the parents cannot afford their study materials, such as books, uniforms, bags, shoes, etc. The children also have to work out with their parents, which hampered their education.

The ethnic community students have different cultures and communication systems. For this reason, they have to face challenges coping with the culture of mainstream children, which impacts education. Some students said they cannot communicate easily with mainstream children and cannot understand class lessons most of the time.

The survey and interviews found that many students attend classes without eating breakfast or taking tiffin. For these reasons, they must remain hungry and cannot concentrate and respond in class. The ethnic guardians cannot always afford breakfast and tiffin.

During the interview, the teachers said that most ethnic community guardians are illiterate, and they cannot take care of the regular studies of their children. Also, they are not aware of education, so the ethnic children lose interest in their studies.

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One reason for the lagging behind in primary education of plains ethnic minority children is the guardians' unawareness. As most guardians are day laborers, they cannot keep track of their children's studies and cannot attend parents' meetings. Family crises are also a factor impacting the education of the children.

During the Interview, one of the teachers said,

"The ethnic guardians are maximum day laborers. That's why they cannot regularly attend the guardian's meetings. They are not so aware of the education of their children."

The ethnic community teacher can precisely understand the gaps between ethnic children. The low recruitment rate of ethnic community teachers is a challenge for ethnic minority children in school. They cannot get proper direction because of their different cultures and languages, which the ethnic community teachers can ensure.

According to KII, the manager of the NGO said,

"The ethnic community children can be easy in classes if any ethnic teacher takes their classes, but there is a huge crisis of ethnic teachers in primary schools."

Discussion

The study aims to determine the current situation, some significant factors, initiatives, and challenges regarding the primary education of Plains Land ethnic community children.

From this research, it is found that the Plain Land ethnic community people lead a very challenging life because of their poverty, own language and culture, and illiteracy, which impacts the education of the Plain Land ethnic community children. The vulnerable situation of the ethnic community is also highlighted by Macdonald (2021), Sarkar (2020), Islam et al (2022) and Hussein (2023) in their studies. This study mainly focused on determining the factors related to the primary education of the children of the Plainland ethnic community. The most common factor is the different language cultures of the ethnic groups, which are also defined by Kabir and Nath (2005) and Liu (2021). The breakfast and tiffin of the students is another significant factor identified in this study. Unawareness, illiteracy, communication, and language problems are the critical challenges to inclusiveness in the primary education of ethnic minority children. NGOs take some eye-catching initiatives, as found in this study. Rashid (2020), Azizul (2014), and Hossein (2023) also mention some initiatives taken by NGOs, but those are different from this study.

This study mainly presents the overall educational situation of children in the Plains land ethnic community. The financial state, community, awareness about education, breakfast, and tiffin issue, proper guidelines about regular studies, motivation, language and culture, communication and

response in classes, and availability of study materials are the major factors of the primary education of plain land ethnic community children. Poverty, language, illiteracy, and unawareness are the most substantial reasons for lagging in the primary education of this group.

The findings about the current scenario are that the parents of the ethnic children have begun to understand the significance of primary education and become somewhat aware of it. Some initiatives can reduce the challenges regarding the primary education of the Plain land ethnic community children. According to the chi-square test, it is also clear that there are some significant relations among the dependent and independent variables that impact the primary education of the plain land ethnic community children. The government and NGOs have taken various initiatives jointly and separately to improve the children's primary education in the Plainland ethnic community. The initiatives taken should be implemented precisely to achieve the mission of ensuring the primary education of the ethnic community.

Conclusion

The main target of this paper is to access the primary education of plainland ethnic community children in Bangladesh. These groups live primarily in the northern divisions of Bangladesh and are among the most socially and economically disadvantaged and vulnerable sections of the population. This study has tried to find out the factors that are closely related to the primary education of ethnic children. The financial state, community, awareness about education, breakfast, and tiffin issue, proper guidelines about regular studies, motivation, language and culture, communication and response in classes, and availability of study materials are the major factors of the primary education of plain land ethnic community children. Poverty, language, illiteracy, and unawareness are the most substantial reasons for lagging in the primary education of this group.

The government and NGOs have taken various initiatives jointly and separately to improve the children's primary education in the Plainland ethnic community. The initiatives taken should be implemented precisely to achieve the mission of advancing the primary education of the ethnic community. The teachers can play an influential role in motivating ethnic students and taking extra care of them as they belong to different languages and cultures. The recruitment of ethnic community teachers is highly needed to encourage ethnic students. The government and NGOs should emphasize children's primary education in the plainland ethnic community. This study can be the future guideline for education experts, policymakers, researchers, teachers, government, and NGOs to know the overall condition, challenges, and initiatives about the primary education of the Plain Land ethnic community children.

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Ethnic people face financial problems most of the time, as they cannot afford to provide educational materials to their children, which is why the participation level of ethnic minority children in school remains low. Providing educational materials (books, pens, bags, notebooks, uniforms) will be helpful for the ethnic community children. Ethnic community children have their own languages and culture, which is totally different from mainstream children. They get help coping with the general language and culture when at least one teacher is recruited from an ethnic group. The ethnic teacher can identify the problem and give proper solutions to the ethnic community students. The home visit program should represent the importance of education to the guardians and also to the ethnic children, which will increase their awareness of primary education. As the ethnic students have their own language, they face the challenges of keeping pace with the Bangla language, for which they lag in class and cannot communicate easily. So, they should get extra facilities in primary education.

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Assessing Accessibility to Public Health Service Among Hijra Community in Bangladesh: A Study on Rangpur District

Tahmid Ahmed Azmir*

Abstract

The hijra/third gender is a socially excluded population in Bangladesh. Access is a key concept in the study of health services, which measures the capability of the health system to reach all levels of the population. Despite the legal recognition of gender identity, the third-gender community has limited access to avail health services, as various studies revealed. The study's key objective is to measure the accessibility of government health services among the Hijra Community in Bangladesh. This study collected and analyzed data from four Upazilas (Sadar, Taraganj, Badarganj, Pirgaccha) of the Rangpur district from January to October of 2023. Results show that public hospitals only offered male and female-oriented facilities, but no facilities were explicitly designated for patients recognized as hijra. The testing, treatment, and prevention facilities were insufficient and inconsistent. Moreover, the service providers were unwilling to effectively communicate with hijra patients because of their limited understanding of specialized health services for this community. To reduce discrimination and provide equitable health service services for the hijra community, this study suggests that hijra identity needs to be institutionalized as well as to promote appropriate, safe, and respectful health services in public hospitals, including training and education of health service personnel, modifying criteria for hijra care, and providing culturally competent health service.

Keywords: Accessibility, Public health, Hijra community, Rangpur.

Introduction

Hijra is a name used to describe individuals belonging to the third gender. The term 'Hijra,'" which has been in use for centuries, is widely used in the Indian sub-continent to refer to individuals who identify as transvestites,

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intersex, eunuchs, and transsexual men (Chakrapani, 2010). Hijras are one of the most vulnerable and impoverished communities in Asia. The hijra community has historically been socially isolated from mainstream culture (Hahm, 2010). The challenges they face are distinct from those experienced by other sexual identity communities (Khan et al., 2009). The Bangladeshi government has officially recognized hijras as the 'Third Gender'. January 26, 2014. However, mainstream society is unwilling to accept hijra individuals who fall between the binary gender ranges of 'male' and 'female'. As a result, their weaknesses, discontentment, and socio-political uncertainties receive little proper attention, and they discrimination in terms of their socioeconomic status, social connections, and ability to move freely. According to Article 16, the state must implement practical steps to enhance public health, specifically for individuals living in rural areas. Additionally, Article 18 of the Constitution mandates that the state must improve the nutritional status of its population and enhance public health as fundamental responsibilities (Ali, 2020). The impoverished economic state of the hijra population hinders their ability to access health service treatments from the private sector. Consequently, they primarily seek cost-free services from health centers founded by nongovernmental organizations (NGOs). Nevertheless, the health centers established by non-governmental organizations solely cater to the needs of hijra patients in terms of STI and HIV infection without offering any services for other health ailments (Sarkar, 2019). Accessing general health services is challenging for the hijra population because of their relationship with health services, as well as prejudice, stigma, harassment, ignorance, and institutional hurdles. In Bangladesh, a few studies have been conducted on the Hijra community. Several studies have examined social issues such as education, marital status, housing arrangements, habits, and religion. However, it has long been acknowledged that the Hijra community is consistently affected by health concerns, including infections, tumor formation, mental health disorders, and early mortality. They experiencing significant difficulties and obstacles in accessing health services due to unfriendly encounters and barriers posed by doctors and non-clinical hospital staff. Specialized health services are necessary to prevent these adverse effects. However, this issue is frequently overlooked in Bangladesh at both the zila and upazila levels. No previous studies or reports have been found that specifically address these health service issues and provide an understanding of the current condition in this community at the zilla and upazila levels. Hence, this study aims to investigate and evaluate the health service use among the hijra minority in Bangladesh and the challenges they encounter in accessing health services.

Literature Review

Khan et al. (2020) examined the obstacles that hinder individuals with disorders of sex distinction from accessing health services in Bangladesh. The study found that most individuals reported experiencing unfriendly interactions with health service professionals and physicians and limited access to treatment options. The study addressed the obstacles posed by administrative policies in health service facilities and proposed reforms to alleviate them. Sarker (2019) explored the issue of transgender discrimination in the context of accessing public health services. The study found that transgender groups often experienced harassment, insufficient and inconsistent allocation of resources, and substandard treatment in hospitals. The study recommended the institutional integration of hijra identification as a gender category into the health service system to reduce prejudice and enhance the provision of fair health services for the hijra community.

Mamun et al. (2020) discussed the issue of discrimination and social isolation faced by third-gender people. The study found that this minority population experiences profound social, cultural, political, and economic marginalization. In addition to that, they endure physical and psychological mistreatment and are denied proper medical and legal assistance. The study shows that providing social recognition and promoting financial independence may help to reduce discrimination against the third-gender community. Ahmed and Sifat (2021) focused a study on the enduring economic, mental, and emotional consequences of the lockdown imposed on Hijra villages. The study found that the hijra group is severely lacking in fundamental human rights, particularly in terms of access to health service services. The study recommended the provision of assistance and education regarding hijra populations to enhance awareness of mental health and eradicate stigma and discrimination.

Roy et al. (2021) examined the socioeconomic state of the Hijra Community. The research findings indicate that individuals identified as the third gender experience significant discrimination across several aspects of society, including socioeconomic, cultural, and political. The study emphasized the importance of accurately acknowledging and providing appropriate support to this sector, greatly enhancing their economic and social standing. Akter (2020) discussed the experiences of transgender individuals about the COVID-19 pandemic. The study found that the transgender community is facing significant challenges during the COVID-19 lockdown, social distancing measures, and other health-related restrictions. Safa (2016) studied the process of incorporating the specific needs and concerns of the Hijra population. The study found that the Hijra community is a significant concern due to society's isolation over their

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rights. The study addressed the idea that the Hijra population should be highlighted as a human rights issue, which is ruthlessly ignored in mainstream society.

Aziz and Azhar (2020) focused on the social isolation faced by the Hijra group in their study. The study's findings show that hijra individuals have not been able to officially register themselves under this category at local government offices. Moreover, institutional prejudice hinders their ability to secure lucrative jobs or fully avail themselves of health services. Matin et al. (2020) examined the susceptibility of Hijra populations to physical, emotional, and financial challenges. The result of the study showed that the presence of severe social stigma, discrimination, isolation, and segregation creates a prevalent negative perception of the transgender and Hijra population among people. Jalil et al. (2021) explored the mental health status of the hijra community during the lockdown. They examined the accessibility of health services and support for the hijras and how they cope with the stress and uncertainty caused by COVID-19. The study revealed that the abrupt cessation of income plunged them into immediate destitution. while their stigmatized position rendered them doubly marginalized in both social and political spheres. They became more susceptible due to their lifestyle, lack of income, and heightened discrimination.

Khan et al. (2008) conducted a study on the sexual experiences of transgender individuals; the author discussed the elevated prevalence of active syphilis among hijra individuals, which places them at a heightened risk of HIV transmission. The study examined the difficulties in promoting condom use, namely by ignoring the socio-cultural and socioeconomic norms surrounding sexual relationships and the sexiness of hijra-sexuality. Finally, the author suggests that interventions should avoid mechanizing the process and instead focus on humanizing and sensualizing the sexual life of the Hijra. Jebin and Farhana (2015) explored the legal entitlements of hijras. The study revealed that Bangladeshi culture imposes a taboo on the Hijra community, forcing them to either conceal their gender identity issue and conform or endure a life of extreme marginalization. The report proposes the implementation of constitutional recognition for transgender individuals to safeguard their rights and facilitate organizational reform. Sifat and Safi (2020) conducted a study that examined the many aspects of social isolation experienced by the hijra community. This study investigates marginalization of the hijra group by analyzing their limited involvement in social, economic, cultural, and political activities. The study revealed that the formal acknowledgment of Hijra as a distinct gender has failed to yield tangible improvements in their circumstances.

Ahmed et al. (2020) and Islam et al. (2024) focused on digital health and disparities in providing health services in their study. The study showed that insufficient knowledge, unease, deviations from routine health service-

seeking patterns, inadequate comprehension and proficiency, and proximity to a health service institution were the primary factors contributing to the non-utilization of digital health devices. Mohiuddin (2020) discussed patient satisfaction with health service treatments. The study addressed how failures might significantly influence patients' unfavorable attitudes and discontent toward health service providers and the health service system. Andaleeb et al. (2007) examined the quality of health services in Bangladesh. This study aims to ascertain the factors that influence patient satisfaction with public, private, and international hospitals, and it is crucial to evaluate the quality of health services in the country.

Ali (2020) focused on the existing laws and regulations governing health services in Bangladesh to identify any deficiencies in legislation and policy. The study's findings indicate that inadequate regulatory frameworks, accountability and transparency, prevalent corruption, inadequate monitoring systems, insufficient health financing, and disparities between rural and urban populations deny individuals the right to adequate medical services. Hossain (2016) studied how the longstanding cultural concept of the third gender was legally recognized as a distinct category. The study's findings revealed that legal recognition has required the simultaneous activation of a discourse on disability to establish Hijra as a citizen deserving of rights.

Research Gap

However, existing literature focused on discrimination and social exclusion, including socioeconomic status, education, health, marital status, living status, lifestyles, and religion. Analyzing the above information, research is needed to assess access to health services in the Hijra community. This research will identify the existing access to health services, the availability of government health services, the obstacles behind the delivery of services, and some strategic suggestions for improving service delivery in the health sector among hijra communities in Bangladesh.

Theoretical framework

To assess the accessibility of government health services for the Hijra Community in Bangladesh, the study applied the HEALTHQUAL model, developed by Camilleri and O'Callaghan in 1998 (Endeshaw, 2021). This model aims to enhance the contentment of those utilizing healthcare services (Nemati et al., 2020). Four criteria influence the perception of quality and subsequent satisfaction in the HEALTHQUAL scale (Mariano et al., 2022). It modified the scale by incorporating four variables that impact the overall quality. The elements encompassed in this study are as follows: (1) Tangible components of health care, (2) Efficiency, (3) Safety, and (4) Empathy.

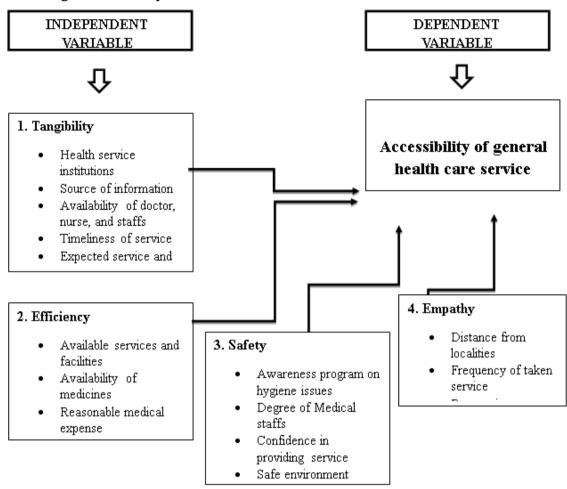


Figure 1: Analytical Framework (HEALTHQUAL Model)

These variables aim to assess the quality of health delivery and the level of satisfaction (Lee, 2016). This study uses the HEALTHQUAL model to evaluate service quality and user satisfaction and assess the accessibility of public healthcare services. This approach rigorously examines the psychometric scales as they specifically target managerial concerns in health services and propose effective operational ways to enhance treatment. Using modeling facilitates decision-making by bridging the gap between research and reality. Measurement models facilitate the analysis of complex phenomena by considering many variables and diverse contexts. The outcomes derived from these models can be used to inform proactive decisions.

Methodology

Research Design

This study followed a mixed methods approach that combines qualitative and quantitative research designs. This research involves a mixed method approach, which helped to get & analyze both qualitative and quantitative data to assess the exact scenario of accessibility of Public Health Service Among Hijra Communities in Bangladesh inside Sadar upazila, Taraganj Upazila, Badarganj Upazila and Pirgaccha upazila in Rangpur district which

directly goes with the use of the 'Mixed Method' research technique, which integrates both quantitative and qualitative data, has the potential to enhance comprehension of the subject under investigation

Research Method

The research method involves a survey and data collection technique, followed by the Survey Questionnaire Method and Key Informant Interviews (KII).

Data Collection Method

The Data was collected from both primary and secondary sources. The primary data included information collected through questionnaires and interviews. The secondary data was collected from relevant books, journals, articles, etc.

Sampling Technique

The study is followed by probability sampling and non-probability sampling. Under probability sampling, the study has conducted cluster sampling. Following the cluster sampling, it has selected four upazila, including Rangpur Sadar, Taraganj, Pirgaccha, and Badarganj. Under the non-probability category, the study has conducted purposive and snowball sampling to select respondents who availed health services from Hijra communities. The study selected 65 respondents and 8 Upazila chairmen/Upazila Nirbahi officers (UNO)/NGOs from each of the four Upazila of Rangpur District.

Data analysis technique

The study conducted qualitative data analysis (Content analysis) and quantitative data analysis (Descriptive statistics, one-way ANOVA, and chisquare test). The Statistical Package for Social Sciences (SPSS) version 25 software (IBM SPSS Inc., Chicago, IL, USA) was used for statistical analysis. The study also conducted data validity using a data normality test, Kolmogorov-Smirnov (K-S) test, and Shapiro-Wilk. While analyzing data, the missing data was calculated using a series of means.

Findings

Socio-Economic Characteristics of the participants

The study was conducted in Rangpur Sadar, Pirgacha, and Taraganj Badarganj upazilas in Rangpur district. Approximately 470 members of the Hijra community reside in Rangpur district. Nearly 340 members are registered with the Ministry of Social Welfare (Ministry of Social Welfare, 2023). The study examines the respondents' demographic status, including location, age, educational qualifications, primary occupation, and living conditions, thereby providing insight into the economic and social needs of the Hijra community members. According to Table- 1, about 266 participants from four upazilas participated in the survey. The participants

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hail from Rangpur Sadar (32.3%), Pirgacha (23.7%), Taraganj (19.5%), and Badarganj (24.4%). Most participants were between 20 and 30 years old (54.5%).

Table 1: Socio-Economic Characteristics of the Participants

Characteristics (%)	
1. Location	
Sadar Upazila	32.5
Pirgacha Upazila	23.7
Taraganj Upazila	19.5
Badarganj Upazila	24.4
2. Age (years)	
10 to 20	3.4
20 to 30	54.5
30 to 40	29.3
40 to 50	11.3
50 to 60	1.5
3. Educational Qualification (Majority)	
Illiterate	41
Primary Level	10.9
JSC	13.2
SSC	18.4
HSC	9.8
Diploma	6
Graduation	0.8
4. Primary Occupation	
Money collection	83.5
Business	2.7
Worker	5.6
Entrepreneur	8.3

Source: Survey Interview

Most of the participants (43%) are unable to read or write. The rest (57%) have basic academic knowledge. The survey shows that they mainly live with community members. Some came into the territory willingly, though most were forced to leave their families. On the other hand, most respondents (83.5%) depend on money collection from shops, markets, wedding ceremonies, and the birth of newborn babies as their primary occupation.

Several respondents stated that,

The government provides a monthly allowance of 600 BDT, which applies only to hijra community members aged 50 and above. Unfortunately, the amount is insufficient, and no one has received the correct amount on time. (Survey Interview, 28 July 2023)

Existing Status to Access Health Service

According to Table 2, almost 91% of respondents stated they took services from local public service institutions. Nearly 55.6% of respondents said they took service once in six months, and 40.2% stated they took service once a year. It is because most of them suffer from colds, flu, headaches, and injuries such as minor cuts or burns. As a result, they didn't take service frequently. They took services from the head of community members called "Guru Maa" and local pharmacy health practitioners in situations in the early stages for the most straightforward and fastest access.

Table 2: Existing status to access health service

Accessibility to health service information	(%)
1. Take Services from local public health service institutions	
- Yes	91
- No	9
2. Most visited health service institution	
- Rangpur Medical College and Hospital	31.6
- Upazila Health Complex	68.4
- Community clinic	0.0
3. Frequently Take Health Service	
- Yes	16.5
- No	83.5
4. Frequency of receiving health services	
- Twice in a month	0.8
- One in a quarter month	3.4
- Once in a six-month	55.6
- Once in a year	40.2
5. Availability of doctor or health practitioner	
- Yes	88.7
- No	11.3
6. Most accessible health service provider	
- Specialist doctor	12
- MBBS doctor	60.8
- Medical assistant	1
- Nurse	26.3

Source: Survey Interview

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However, 68.4 % of respondents go to Upazila Health Complex, and the rest go to Rangpur Medical College and Hospital. Members from the Rangpur Sadar area mainly depend on Rangpur Medical College and Hospital. On the other hand, members of Pirgacha, Taraganj, and Badarganj upazila mainly depend on the nearby Upazila health complex. However, they must move to Rangpur Medical College and Hospital when the disease is more severe and needs more advanced treatment facilities. Though they mentioned Upazila Health Complex and Rangpur Medical College and Hospital, they didn't discuss the community clinic, the nearest institution to their locality. It has been observed that the Hijra community people are disappointed with the community clinic because they didn't get any services from there correctly. After all, the community clinic's health practitioners don't get adequate training to serve them. As a result, they showed unwillingness to serve. In emergencies, the Hijra individuals seek assistance at a nearby local private dispensary for medications and receive treatment from local quack for primary care. The table also highlights the accessibility of healthcare providers, with the majority of respondents receiving care from MBBS doctors (60.8%) and nurses (26.3%). Additionally, 12% of respondents reported having access to specialist doctors for serious illnesses. In more severe cases, they sought treatment at Rangpur Medical College Hospital to consult a specialist. Conversely, access to MBBS doctors during peak hours is limited. During these times, they receive care from nurses and medical assistants. Overall, their expectations were reasonable, as they have consistently found a doctor or other healthcare practitioner available in the hospital. Furthermore, respondents mentioned sources of health service information, including medical announcements, posters, social media, community members, and electronic media, to stay informed about health programs and services.

Source of Health Service Information

Table 3 Source of health service information

Sources	(%)
Mic Announcement	27.5
Poster	9.6
Social Media	10.7
Community Member	30.6
Electronic Media	21.5

Source: Survey Interview

According to Table 3, nearly 30.6% of respondents indicated they received most health service information from community members. The table also reveals that 27.5% of respondents obtained information from mic announcements, 21.5% from electronic media, 10.7% from social media, and 9.6% from posters.

A respondent from Taraganj Upazila stated that,

"In the past, we were largely reliant on microphone announcements. Now, we utilize smartphones and the internet more effectively. We can easily access health information by viewing advertisements and videos on smartphones and online." (Survey Interview, 29 July 2023)

Availability of health services among Hijra Community

According to Table 4, every respondent noted that the receptionist was responsive. The availability of doctors, nurses, and medical assistants in local hospitals is satisfactory. Approximately 88.7% of respondents reported that they could find a doctor or another health practitioner promptly. They also mentioned that they sometimes did not see the doctor on time and had to wait 40 to 50 minutes, although this was not common. Nearly 39% of respondents indicated they had to pay 10 BDT as a visiting fee at the ticket counter, but they received medications at no charge. Conversely, 61% of respondents stated they did not pay for the ticket. The receptionist at the ticket counter assisted them in obtaining free access. However, they must pay if they undergo any laboratory or diagnostic care as per the government-directed fees. 69.2% of respondents noted that all the services are cost-effective, while more than 30.8% also highlighted the unreasonably high diagnostic test costs.

A few respondents from Taraganj upazila stated that,

"We face too many difficulties when the doctor orders laboratory and diagnostic tests, which are prohibitively expensive. Many of us are unable to afford these tests and endure significant suffering. Some of them have died as a result vain." (Survey Interview, 1 August 2023)

They expect to reduce laboratory and diagnostic care costs or offer a 50% discount. The impression of timeliness in service delivery was very positive. Most respondents (93.6%) said they got on-time service delivery except for the emergency cases of non-hijra patients. They also added that people would give them service as early as possible. On the other hand, the hijra members also showed their willingness to assist the non-hijra patients as early as possible. Lastly, the table also mentioned the arrangement of safety and health awareness programs, where 96.6% of respondents stated that they hadn't seen such programs till now. They didn't even get any support from NGOs and government officials. However, they are expecting several programs on sanitation, nutrition, and intercourse.

A respondent from Badarganj Upazila stated that,

"Some government officers from the District Social Service office come yearly to survey us. We have requested them more than two or three times to arrange safety and awareness programs. Still, we didn't see any arrangement from the authority." (Survey Interview, 16 August 2023)

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Based on this argument, one of the government officials stated that,

"It is challenging for us to collect information to identify hijra community members' demands and expectations as we have a limited understanding of the culture, gender, and sexuality of the Hijra community. (Survey Interview, 19 August 2023)

Table 4: Extent of health service availability by the Hijra Community

Health service pre-conditions	(%)
Availability of doctor/ health practitioner	
- Yes	88.7
- No	11.3
Pay to receive service.	
- Yes	39
- No	61
Cost of service	
- Cost effective	69.2
- Cost ineffective	30.8
Timeliness of service delivery	
- On time delivery	93.6
- Medium time delivery	6.4
- Too late delivery	0
Arranged safety and awareness programs.	
- Yes	3.4
- No	96.6

Source: Survey Interview

Availed Health Services by Recipients

According to Table 5, approximately 40.2% of individuals seek primary care for conditions such as colds, flu, fever, headaches, and pharmaceutical care. Almost 27.1% of respondents utilized emergency care for injuries, minor cuts, or burns. They also receive ambulance services in emergencies. About 15% of respondents reported obtaining diagnostic care from the Upazila Health Complex, although they visited Rangpur Medical College and Hospital for advanced tests. As the Upazila Health Complex lacks sufficient equipment and services, the table also indicates low participation in specialized care (9.8%), encompassing mental health, dental care, behavioral support, sexually transmitted infections, cancers, contraceptive treatments, physical therapy, and nutritional care.

A respondent from Sadar Upazila stated that,

"We can avail ourselves of mental health care from a mental health specialist at Rangpur Medical College and Hospital. But it was quite impossible for us a couple of years ago." (Survey Interview, 25 August 2023)

Conversely, these mental health facilities are unavailable in the Upazila health complex, as noted by some respondents. Furthermore, the location of Rangpur Medical College and Hospital is considerably far from other Upazilas. As a result, many community members hesitated to seek this support due to the long distance. Lastly, the response rate for preventive care, including vaccinations, is 7.9%. People indicated they were unaware of its importance and the related events, although they acknowledged its necessity. During the COVID-19 period, they accessed vaccination services sufficiently. However, in the pre-COVID period, the majority could not access most preventive care. Additionally, they request a monthly "Door-to-Door Health Service Programme" and "Digital Mental Health Counselling."

Table 5: Availed health services by Hijra community

Types of health services	(%)
a. Primary care (Cold, flu, fever, headache, pharmaceutical care)	40.2
b. Special care (Mental Health, Dental care, Nutritional Support, sexually transmitted infections, Cancers, Contraceptive treatments, Physical Therapy)	9.8
c. Emergency care (Ambulance service, Cut and burns)	27.1
d. Diagnostic care (Cholesterol, Blood pressure, Dialysis)	15
e. Preventive care (Vaccination)	7.9

Source: Survey Interview

Level of Satisfaction among Hijra Community in Public Healthcare Management

According to Table 6, nearly 58.3% of respondents indicated they were moderately satisfied with the availability of facilities and services. However, over one-quarter of the respondents (35.3%) expressed dissatisfaction. Most respondents attributed this grievance to the Upazila health complex. The table also presents the availability rate of medicines, doctors, nurses, and other healthcare staff in a positive light. 50.8% of respondents reported being moderately satisfied with the availability of drugs. Nearly 88% expressed happiness with the availability of doctors in health service institutions. Additionally, 70.3% of respondents were pleased with the accessibility of nurses and other medical staff while receiving services. Most respondents (63.5%) are satisfied with the availability of health service information. Conversely, 61.3% of respondents are delighted with the timeliness of health services. Lastly, a significant proportion of respondents (71.7%) were dissatisfied with their locality's lack of safety and health awareness programs. Furthermore, Table 6 indicates that most respondents (85%) are satisfied with the responsiveness of doctors during service delivery. Respondents also noted that doctors try to engage in friendly interactions with them.

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Table 6: Satisfaction level of Hijra Community People on Healthcare Management (%)

Management (9		G 4 00 1		T	
Categories of Healthcare Management	Strongly Satisfied	Satisfied	Moderately Satisfied	Dissatisfied	Strongly Dissatisfied
Availability of facilities and services	0	1.1	58.3	35.3	5.3
Availability of medicines	0	49.2	50.8	0	0
Availability of doctors	1.5	88	10.5	0	0
Availability of nurses and other staff	19.5	70.3	10.2	0	0
Timeliness of services provided.	61.3	38	0.8	0	0
Available Health service information	2.6	63.5	33.8	0	0
Arrangement of a safety and health awareness program	0	0	8.6	71.7	18.6
Response from Doctors	3	85	12	0	0
Response from Nurse and Medical assistant	35.3	53.8	10.9	0	0
Service Providers make information obtainable to the patients	0	61.7	38.3	0	0
Behavior of the service providers	3	86.1	10.9	0	0
Distance from locality	0	0	72.6	27.4	0
Service delivery fee	0	0	61.3	29.3	9.4
Individual attention by service providers	0	35.7	64.4	0	0

Source: Survey Interview

The responsiveness rate of nurses and medical assistants is also commendable, with 35.3% of respondents stating they were delighted and 53.3% expressing satisfaction with their service and responsibilities. Conversely, 61.7% of respondents are satisfied with the service providers' efforts to make information accessible to individuals who identify as third gender. Lastly, Table 6 shows that approximately 86.1% of respondents are satisfied with the behavior of the service providers, while 64.3% feel moderately comfortable with the individual attention received from them. However, feedback regarding distance and service delivery fees is mixed, with about 72.6% of respondents stating they were moderately satisfied with the distance, while 27.4% expressed dissatisfaction. It has been observed that, in cases of severe diseases, doctors recommend that patients go to Rangpur Medical College and Hospital for advanced treatment, which is located 40 to 45 minutes from Sadar Upazila, Taraganj, Badarganj, and Pirgaccha Upazila. This distance creates dissatisfaction among patients during emergencies. A similar review occurs regarding service delivery fees, with 64.3% of respondents expressing moderate satisfaction and 29.3% citing dissatisfaction with the costs of diagnostic care. Lastly, 64.3% of respondents report moderate satisfaction with the individual attention received from service providers.

Barriers to Access to Healthcare Service

Barriers to accessing healthcare services encompass various obstacles that hinder individuals or communities from obtaining necessary medical care. These barriers significantly impact the ability to receive timely and appropriate healthcare. The study examined the barriers to access to health service delivery in Table 7 to get a clear view of existing problems in the health service system for hijra community members. The table highlights the required services, ticket counters, doctors' rooms, and waiting room challenges. While getting service, almost all the respondents (99.1%) faced the issue of not having specific ward facilities like other patients. It creates complexity and uncomfortable situations when sharing words with ordinary people. Almost half of the respondents (43.4%) faced an excessive congregation of general people around to see them when getting service, and the respondent added that it felt uncomfortable for them. About 32% of respondents stated that hospital staff suspects them of asking for charity instead of illness issues. One of the community members said,

"A few years ago, the authorities did not permit us to enter the hospital. They suspected we were seeking charity rather than addressing health issues. Some abused us both verbally and physically. At that moment, we had to fight to convince the authorities to resolve this misunderstanding. Currently, we typically have not encountered such problems before." (Survey Interview, 26 August 2023)

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Secondly, the respondent mentioned difficulties with ticket counters. Most (96.4%) respondents stated they were not formally entitled to services due to their unrecognized hijra identity. Almost one-fourth (24.5%) of respondents added that ordinary people sometimes abused them verbally and physically at the ticket counter.

Table 7: Barriers of Hijra Community members in access to healthcare service (%)

Service (70)	
Challenges to get required service	
- Non-friendly interactions by non-clinical hospital's staff	2.7
- Non-friendly interaction by physicians	4.8
- Public fright	2.3
- Excessive congregate of general people around to see Hiji	ra 43.4
patients	2.4
 Some physicians prefer to treat Hijra patients 	32
- Hospital's staff suspect to ask for charity instead of illnes	s issues 99.1
- No specific ward facilities	
Difficulties in ticket Counter	
- Not formally entitled for services due to the unrecognized	l hijra 96.4
identity	24.5
- Verbal and physical abuse in a queue.	2.6
- Complain of non-Hijra patients in receptionist	
Difficulties in doctor room	
- Less patience for Hijra Patients	7.2
- Doctors showed unwillingness to know in detail.	1.8
- Don't spent enough time for examine health problems.	24.7
Difficulties in waiting room	
	1.0
- Allowed to sit with non-hijra patients at the doctor's room	
- The doctors' assistant tried to skip hijra patients' serial nu	
- Showed favor towards non-hijra patients.	8 61.0
- Not welcoming in social interaction with non-hijra patien	ts 61.9 98.2
- No specific toilet for hijra	90.2

Source: Survey Interview

Thirdly, the respondent shared their experiences on difficulties in the doctor's room. About 24.7% responded that doctors didn't spend enough time examining health problems during rush hour. At that moment, they sought support from the nurses or medical assistants to understand their concerns and find solutions. Some Hijra members who have faced this kind of problem stated that,

"For not having gender specialized doctors, we can't express our problems properly. As a result, doctors don't give enough time to prescribe us." (Survey Interview, 26 August 2023)

Lastly, they discussed the difficulties faced in the waiting room. Almost all respondents (98.2%) noted the absence of a specific toilet for the third gender, which always left them unsure whether to use the male or female this washroom. Consequently, creates a very embarrassing uncomfortable situation in front of others. About 61.9% of respondents indicated that they were not welcoming during social interactions with nonhijra patients and often attempted to avoid them. While waiting, nearly 8% of respondents reported that hospital staff displayed favoritism towards nonhijra patients. However, in recent years, they have not encountered these issues and have received timely services, as mentioned by the respondents. It has been noted that general patients tend to avoid close interactions with hijra patients. The hospital authorities aim to prevent uncomfortable situations by causing delays or skipping serial numbers. Therefore, both general patients and hospital authorities strive to provide services as swiftly as possible.

From the analysis, it could be said that currently, the respondents are satisfied with the present state of timeliness of services, the behaviour of the service providers, health service information, the response from doctors and nurses, availability of medicines, doctors, nurses, and other stuff, obtainable information, and individual attention by service providers. On the other hand, as their disability rate is not in a good state, it could be said that Hijra community members are currently facing problems with the availability of facilities and services, location costs, and arranging awareness and safety programs. Based on geographical location, the health service delivery and hijra individual satisfaction level differed from place to place, highlighted by Khan et al. (2020) in their study. On the other hand, Mamun et al. (2022) highlighted that the government and public have less acknowledgement of the third gender/ hijra community members, including their unique cultural, traditional, recreational, and marital practices, which is the main reason for creating the problem in social acceptance. Sarkar (2019) also supported this statement in his study.

Table 8 represents the influence of health service user satisfaction on users' location and age range. Regarding the availability of facilities and services within the hijra community, the living area showed a significant effect (p=0.001), while the age range did not. Regarding distance from locality, no significant influence was found between location (p=0.798) and age ranges (p =0.088). In terms of cost of service, there is no significant influence found with location (p=0.551) as well as age range (p =0.564). In terms of the arrangement of awareness and safety programs, the table shows that there are no significant differences found with location (p=0.137) and age range (p =0.889).

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Table 8: Influence on Health Service User Satisfaction Against

Demographic Profile

	Location Location					Age			
Components	Sadar Upazila (%)	Taraganj Upazila (%)	Badarganj Upazila (%)	Pirgaccha Upazila (%)	p-value	Adolescent (10-20) years (%)	Young adults (20-40) Years (%)	Senior adults (40-60) Years (%)	p-value
Availability of facilities and services • Strongly						0			
Satisfied • Satisfied • Moderately	0 0 58.1	0 0 75	0 0 84.6	0 0 55.4	0.001	0 0 66.7	0 0 56.5	0 0 67.6	0.142
Satisfied	41.9	25	15.4	44.6		22.2	42.6	32.4	
Dissatisfied	0	0	0	0		0	0	0	
Distance from locality									
Strongly Satisfied	0	0	0	0		0	0	0	
SatisfiedModeratelySatisfied	0 72.1	0 76	0 75.4	0 68.3	0.798	0 88.9	0 69.1	0 91.2	0.088
DissatisfiedStrongly	27.9	24	24.6	31.7		11.1	30.9	8.8	
Dissatisfied	0	0	0	0		0	0	0	
Cost of service • Strongly Satisfied	0	0	0	0		0	0	0	
SatisfiedModerately Satisfied	0 65.1	0 55.8	0 56.9	0 65.1	0.551	0 66.7	0 62.3	0 52.9	0.564
DissatisfiedStronglyDissatisfied	34.9	44.2	43.1	34.9		33.3	37.7	47.1	
Arrangement of awareness and	0	0	0 0			0 0			

safety program	0	0	7.7	0		7.5	0	0	
 Strongly 	8.1	3.8		0			0	0	
Satisfied				15.9	0.137		9.7	94.1	0.889
 Satisfied 									
 Moderately 	91.9	96.2	92.3	84.1		92.5	90.3	5.9	
Satisfied	0	0	0	0		0	0	0	
 Dissatisfied 									
 Strongly 									
Dissatisfied									

Discussion

The Hijra community is an essential component of society, possessing a firmly established socio-cultural framework unique to their group. Hijras live on the fringes of society, holding a position of low social standing. Non-Hijra individuals in the mainstream community avoid forming social connections with hijras and limit their access to social institutions, resources, and services (Daize, 2019). The Hijra individuals, like their counterparts in various countries, face pervasive discrimination across multiple domains, including social, economic, cultural, and political spheres. This discrimination manifests in areas like healthcare, housing, education, employment, immigration, and legal systems, where their identities cannot be easily categorized as either male or female. Deviation from this norm has hindered their ability to establish a position in mainstream society with the opportunity for personal growth and stability (Cruz, 2014). The current demographic status of hijra community members of Rangpur district is below average. Almost half of the Community members still need to gain educational knowledge. This causes insincerity regarding their rights and demands. Hijra patients could not explain their problems and understand advice correctly due to a lack of education and societal manners. The study has identified no specific health allowance system for the Hijra community. The current allowance system needs to be integrated, as most members are out of this opportunity because of complex age restrictions. Moreover, the plan was corrupted because it did not get the proper amount. Another important finding is that the Hijra community can't avail itself of services from the nearby community clinics like Upazila Health Complex and Rangpur Medical College and Hospital. The service provider of the community clinic showed unwillingness to provide the service. It creates dissatisfaction in times of emergencies because of its distance from location. As a result, each hijra community member received Primary services from Guru maa and a local pharmacist. This led them to self-treatment by collecting medicine from a pharmacy shop without consulting any physician. This self-treatment might contribute to receiving the wrong medications, leading to adverse outcomes, including drug resistance. Moreover, the analysis shows that Hijra individuals get most of health information from community members announcements. As they use smartphones and the internet, getting more

information from social media platforms is possible. Currently, Hijra Individuals are satisfied with the present state of timeliness of services, the behaviour of the service providers, health service information, the response from doctors and nurses, availability of medicines, doctors, nurses, and other staff, obtainable data, and individual attention by service providers. Their disability rate is unreasonable regarding the availability of facilities and services, location costs, and arranging awareness and safety programs applicable for all Upazilas. However, from the hypothesis test, it is clear that residents of Sadar Upazila have comparatively better services than other Upazila residents. The study also finds that almost 61% of respondents said they did not pay for the ticket and got privileges from the ticket counter. The receptionist at the ticket counter helped them get free access. It has also been identified that the cost of laboratory and diagnostic care is ineffective due to their poor economic condition. The government and NGOs have arranged no safety and awareness programs, which have been demanded after the government's official recognition. They have no idea about the operations and services of Drop Centers, a recent government initiative to provide them with all kinds of support and assistance. Hijra Individual mostly avails of primary care for Colds, flu, fever, headaches, and pharmaceutical care). Specialized care like mental health, dental care, nutritional support, sexually transmitted infections, cancers, contraceptive treatments and physical therapy have been ignored to provide them effectively and efficiently. The study also identified that the status of the existing available facilities and services is not updated with advanced equipment. To avail of this, doctors influence them to go to private hospitals or clinics they can't afford or access. The study has found a lot of mismanagement in the delivery service. The government still hasn't taken any initiative to separate lines for the hijra community members at the ticket counter to avail themselves of tickets. They mostly faced Verbal and physical abuse in a queue from ordinary people. In terms of receiving services, there is no specific ward or toilet service for them. Moreover, doctors don't spend enough time examining health problems because they do not have enough knowledge to prescribe them. Still, government health institutions have no proper pre and post-test counselling services, free condoms, and lubricants for prevention and treatment practices of STI/HIV, which they suffer a lot.

Lastly, all the findings assure that an unequal power relation between service providers and hijra patients exists, and this relation has been an obstacle to healthcare delivery. Here, stigmatizing attitudes of service providers constitute inequality in systems, contributing to health disparities. Non-Hijra Patients, Policymakers, and service providers are from mainstream society and have prejudice about hijra culture and health needs. As a result, they still can't adequately be recognized or accepted. It also creates non-interaction and misunderstanding between them, such as suspicion of asking for charity instead of illness issues.

Conclusion

Hijras, being cognitive entities, possess the same entitlement to rights as other individuals of the human species. Hijras possess the inherent entitlement to lead a life of respect and honor, irrespective of their legal, social, or political standing. This study emphasizes the immediate necessity of creating and enforcing policy standards that guarantee the recognition of 'hijra' gender identity and their access to public healthcare. The government ought to implement inclusive policies that explicitly prohibit prejudice and discrimination on the basis of gender identity. The hospital administration gender-specific registration and implement documentation procedures for hijra patients, as well as provide separate or inclusive restroom and patient wardroom facilities to cater to their special needs. Additionally, the hospital should address various health requirements specific to hijra individuals. The inclusion of 'Hijra culture and healthcare' should be integrated into the regular curriculum of medical and nursing colleges, ensuring that doctors and nurses are equipped to deliver proficient treatment to hijra patients. Furthermore, hospital administration must offer comprehensive training or workshops on hijra sexuality, sexual practices, health issues, therapies, and management to enhance the proficiency of all healthcare workers. It is necessary to establish an effective partnership with hijra community-based organisations (CBOs). In addition, the government should raise awareness among non-hijra and hijra individuals regarding the health rights of hijras and the rules of hospital services for them.

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Attaining Sustainable Development: Bangladesh's Progress in SDG Localization

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Abstract

Bangladesh has realised the importance of localisation of Sustainable Development Goals (SDGs). Without incorporating the concerned people in planning and implementing through localisation, the SDGs remains unattained. Localisation of the SDGs means defining the scopes, planning out strategies for actions and implementing the SDGs at the local level. The objective of the study is to explore Bangladesh's approach for and progress in attaining sustainable development indicating challenges. The study has followed integrative literature review as a method as it offers insights from different literature and data sets to draw a logical conclusion by assessing outcomes. In Bangladesh, government has taken initiatives for localisation. The country has chalked out a framework for localisation and included localisation components in annual and five-year plans at the national and the sub-national level. It has boarded on a course of localisation of 12 SDGs signifying 40 (39 national plus 1 local) priority indicators. Further efforts include extensive awareness campaigns, the development of action plans at the local level, formation of coordination committees at LGIs, and the organization of workshops at different levels. Bangladesh's approach to enable local government bodies like divisions, district councils, and Upazila Parishads to implement effective methods and allocate resources to achieve targets of SDGs have seen progress over the years but requires more decentralization in terms of authority and resources. However, challenges like resource mobilisation, inadequate skills, weak participatory culture, lack of political commitment, insufficient collaboration, and unfavourable legal framework impede smooth localisation of SDGs. Therefore, the government must empower the local government with qualified personnel along with the development of analytical frameworks to implement SDGs.

Key words: SDGs, Localisation, Bangladesh, SDG achievement, NGOs

Introduction

The Sustainable Development Goals (SDGs) emerged from a worldwide aspiration to create a more favourable global environment, officially embraced by the United Nations in 2015. This framework encompasses 17

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distinct goals along with 169 specific targets. Notably, the SDGs represent an enhanced version of the Millennium Development Goals (MDGs), which primarily followed a top-down approach. In contrast, the implementation and successful realization of the SDGs promote a bottom-up strategy, acknowledging the capabilities of local and regional governments. This approach aims to harness the strengths of these entities to ensure the effective attainment of SDG targets. It is so because global institutions, supranational organizations, regional and national governments with their abundant resources, extensive capacities, and formal authority, face significant challenges in effecting meaningful change independently due to their limited ability to connect with, rally, and involve citizens and local stakeholders. Likewise, achieving substantial progress toward SDGs cannot be solely dictated from the top-down (Ansell, Sørensen, & Torfing, 2022).

The importance of localization of the SDGs have been upscaled on the success and lessons of the outcomes of the MDGs. To plan and execute at the local level involving local government institutions (LGIs) and other closely related organizations, developing, and implementing localization framework is important. In Bangladesh, the implementation of SDGs has seen success to some extent thanks to the strong, resilient, and resourceful people of Bangladesh, tackling challenges like poverty, education, and public health and more. However, climate change, global warming, coastal cyclones and floods, corruption, shortcomings of local governance, institutional lacking, gender discriminations, rising inequality and recent devastating effects of Covid-19 pandemic and Ukraine War have significantly affected the otherwise steady progress on achieving SDG targets.

Bangladesh's approach to enable local government bodies like district councils, Upazila Parishads (UZPs) and Union Parishads to implement effective methods and allocate resources to achieve targets of SDGs have seen progress over the years but requires more decentralization. The 8th Five Year Plan of Bangladesh elaborates on recovering from Covid-19, focusing on GDP growth, mitigating the effects of climate change, and building on the progress of the 7FYP to attain the SDGs. While the action plan to achieve SDGs has been properly distributed to different institutions in an effective manner, Bangladesh struggles to recover from the huge economic impact of the Ukraine-Russian fight on the economy and the rising price of commodities. A lot of new people have been driven into poverty and most of them are in the rural areas and the recovery of the country depends a lot on the local government (Hossain, 2020). Within this context it will be interesting to see efforts of Bangladeshi actors to implement localisation of SDGs. In this respect, the answers to the following questions will give an insight to Bangladesh's efforts to SDG localisation and bridge that gap in literature on such crucial issue. what approach Bangladesh has adopted to localise SDGs? What were the achievements of Bangladesh across the all 17 goals of the global goals? and what are challenges which posing threats to localisation of SDGs in Bangladesh?.

Research Methodology

This chapter is based on the secondary data gathered from related literature: articles, books, newspapers, websites, and other relevant sources. Review of literature was used as a method because there were ample opportunities to draw a logical conclusion based on existing literature on SDG localisation in Bangladesh though few in numbers. Moreover, the integrative data helped to gain insights through assessing localisation process and achievement so far. The existing literature on SDGs localisation and implementation narratives and documents on national action plan, current progress and challenges, impact of covid-19 and Ukraine war were studied and reviewed to gain data for a better understanding of the information gathered and synthesized to establish an analysis.

SDGs in Brief

SDGs is well branded as Sustainable Development Goals, adopted by the United Nations in 2015 with a resolution to ensure world peace, resolve global hunger and eradicate poverty by 2030. This was a call to action agreed upon by all the UN member countries and stakeholders involved based on the 5Ps- People, Planet, Prosperity, Peace, and Partnership (COAST, 2022). The SDGs are all-encompassing, extensive, focused on people, interconnected, and applicable worldwide. To set the world on a path of sustenance and greater resilience, 17 Sustainable Development Goals and 169 targets were announced as the 2030 Agenda for Sustainable Development. The 17 SDGs are interconnected, recognizing that action in each of these sectors will influence results in others and the improvement ought to build equilibrium in social, economic, and ecological sustainability (United Nations, 2015). The goals emphasise that economic development plays a crucial role in alleviating poverty. They encompass a wide range of societal needs, including education, health, social safety nets, and employment opportunities, and tackle climate change and environmental concerns. Inequality is one of the crucial obstructs highlighted by the SDGs (Jahan, Ferdous, & Hasan, 2022).

Countries and stakeholders have decided to emphasise improvement for the people who are left utmost behind. The SDGs aim to put an end to extreme poverty, global hunger, health issues, discrimination against women and girls and ensure equality, inclusiveness, sustainable energy, and overall prosperity of the people. The knowledge, technology, creativity, expertise, and financial properties from the entire humanity is required to attain SDGs across the different demographics.

Upscaling from MDGs to SDGs

MDG stands for Millennium Development Goals. The Millennium Development Goals were a set of eight international points developed in 2000 by the United Nations. They aimed to tackle major challenges and advance life of people all around the world. The MDGs focused on achieving said eight objectives by 2015 (SDGF, n.d.). These eight goals covered various interconnected issues - Eradicate Extreme Poverty and Hunger, Achieve Universal Primary Education, Promoting Gender Equity and Empowering Women, Reduce Child Mortality, Improve Maternal Health, Combat HIV/AIDS, Malaria, and other Diseases, Ensuring Environmental Sustainability, Developing a Global Partnership for Development

The MDGs marked an important milestone in global development efforts, emphasizing the significance of setting specific targets and mobilizing resources to address key challenges. They also laid the foundation for ongoing endeavours to tackle poverty, inequality, and other critical issues through the SDGs and subsequent initiatives. According to Ashraf et al. (2019) Bangladesh showed success areas of MDGs including dropping extreme poverty, decreasing frequency of underweight children less than 5 years, lowering under-five child mortality, enhancing primary school enrolment, accelerating proportion of girls to boys in primary and secondary education and improving maternal health.

Localisation of SDGs

Localisation represents an approach to addressing local needs by harnessing local resources and fostering local partnerships (Ahmed, 2022). Localisation of the SDGs means defining the scopes, planning out strategies for actions and implementing the SDGs on a local level. The idea of 'localization' came from the knowledge of the MDGs that integrated top-down method ignoring wish for inclusive development. It acknowledges that one-size-fits-all approaches may not effectively address the complex and diverse challenges faced by different localities (United Nations, 2018). Localising the SDGs ensures that their implementation is context-relevant, participatory, and inclusive (UNDP, 2019).

"Localizing" refers to the practice of reflecting local situations when working toward the goals and targets delineated in the 2030 Agenda. This includes not only outlining objectives and methods of implementation but also utilising indicators to assess and track growth (Oosterhof, 2018). Localization involves utilizing the SDGs as a framework for local development policies and enabling local and regional governments to contribute to the achievement of the SDGs through grassroots actions. It emphasizes that the SDGs can guide local development policies effectively.

It allows for more responsive and accountable governance, fosters ownership and engagement among local stakeholders, and facilitates the allocation of resources where they are most needed (Baker Melecky, & Silva, 2020).

Although the SDGs are global in nature, their successful attainment relies on the ability to implement them at the sub-national and regional levels. These governments have related duties, mostly in service delivery, to all the SDGS. This is why these governments play a crucial part in implementing the 2030 Agenda. Based on importance given on them, the local bodies become central players to implementation and success of global goals.

What can drive LGIs to achieve SDGs? Ansell, Sørensen, and Torfing (2022) identified seven (7) key factors which motivate LGIs to move forward to implement SDGs at the local level.

Table 1: Aiding Factors for LGIs to Localise SDGs

- (1) Reputation building
- (2) Concrete problems
- (3) Pragmatic problem solving
- (4) Resource interdependence
- (5) Avoiding red-tape
- (6) Flexible participation
- (7) Social and political capital

Firstly, attainment of SDGs at the local level accrues reputation for the LGIs and involved actors. Secondly, participation of local people makes problem visible and concrete rather than abstract. Thirdly, local actors can avoid conflicts and imminence of problems steer pragmatic solutions. Fourthly, though LGIs can work alone theoretically, they are actually dependent on other stakeholders to address local issues. Fifthly, at the local level, the decision and action stay close and that helps LGIs to avoid curse of red tape. Sixthly, in local governance, participation of the inhabitants is easy in terms of time and commitment because of proximity and less difficulties. Finally, participation of local people in localities assist them to develop social and political capital, which in turn removes isolation, and build political or NGO carrier for some (Ansell, Sørensen, & Torfing, 2022). These points infer that LGIs, and other local stakeholders have some concrete motivating factors to engage with activities that spur achievement of SDGs.

However, challenges like lack of awareness and capacity, limited data and monitoring, and coordination and stakeholder engagement slow the progress of SDG localisation. Many local governments and communities lack awareness of the SDGs and the necessary capacity to implement them effectively. This knowledge gap can hinder progress in localizing the goals (UNDESA, 2020). Data availability and quality can be significant challenges in tracking progress towards localized SDGs. Developing robust

monitoring and evaluation systems at the local level can be resource-intensive and demanding (World Bank, 2019). Coordinating various shareholders, comprising government agencies, civil society organizations, and the private sector can be complex. Effective engagement and collaboration are essential to ensure that everyone works towards a common vision (UNDP, 2019).

The review of literature discussed origins of global goals in the world stage and spread all over the world. Additionally, the transformation from MDG to SDG identify the importance of localisation efforts. Localization of SDGs means integrating SDG targets and indicators in local planning and project implementation. Here in Bangladesh very few other studies focus on localisation efforts, therefore this study shed light on the issues to explore and make visible Bangladesh's efforts for SDG localisation and progress so far made.

Initiatives of Bangladesh to Achieve SDGs and Localisation of SDGs

The Government of Bangladesh has undertaken numerous significant measures at the national level to effectively execute the SDGs. As part of these efforts, the government established a 20-member Inter-Ministerial Committee for SDGs realization headed by the Principal Coordinator (SDGs Affairs) of the prime minister's office. General Economic Division (GED) of the Finance Ministry provides support to coordinate at policy level, monitor and report SDGs as the secretariat to the committee (COAST, 2022). Bangladesh has tried to mainstream SDG implementation in three phases.

In the first phase, the country conducted first voluntary national review-2017, mapped ministries and other actors, analysed data gap, developed SDG monitoring and evaluation framework and aligned 8FYP with SDGs (Islam, 2022). In the next phase, the government formulated SDG action plan, tracker, financial strategy, collaboration framework for government and the UN agencies, module for foundation training of civil bureaucrats and school curriculum inclusive of SDGs. Moreover, committees for national data coordination, implementation and coordination of SDGs at division, district, and Upazila levels were formed, programmes for public administration skill improvement were implemented and conferences for SDGs implementation review 2018 and 2022 were held. Governances Innovation Unit (GIU) of office of the PM started localisation in 2018 (GIU, 2023). Firstly, through different workshops with ministries, departments, and organisations, GIU set 39 indicators at national priority from 17 goals. Secondly, through workshops at 64 districts and 492 Upazila the GIU finalised 64 and 492 +1 indicators for each district and Upazila. These 39 national indicators and +1 local indicator formulated 39+1 priority indicators. These 39+1 set up is considered as Bangladesh SDGs localisation model (GIU, 2023).

In the third phase, Bangladesh treated SDGs with the whole of society approach to include NGOs, private sectors, and citizens, particularly the youths. Additionally, the country conducted second voluntary national review, 2020, included SDGs in annual performance agreement, five-year plans, and DELTA plan, 2100 (ibid).

In Bangladesh, the majority of initiatives aimed at achieving SDGs are primarily spearheaded by the central government. While there is a strong commitment from the central government to advance SDGs, these efforts often fall short in terms of the quality of interventions and their ability to effectively reach the intended audiences, thus undermining the principle of 'leave no one behind.' Henceforth, the localization of SDGs, with a special emphasis on addressing the underdeveloped areas, is of paramount significance. While Bangladesh has earned international recognition for its progress in SDG implementation, there are still lingering issues that demand attention. A significant obstacle to successful SDG implementation is the unequal distribution of development across regions (COAST, 2022). To tackle this challenge effectively and bolster development outcomes, adopting a localization approach is both prudent and promising.

To achieve the 2030 agenda, Bangladesh has started setting goals and targets, determining the means of carrying out and operating indicators to measure and monitor progress for better implementation of 'localization' considering subnational contexts. The process of localisation responds to these two significant approaches, (i) how the SDGs can serve as a framework for shaping local development policies and (ii) how the subnational-level institutions (e.g., local governments, non-government and civil society organisations) can contribute to the attainment of the SDGs by activities progressing upward from the lowest levels (GED, 2022). Thus, keeping localisation at the heart of the 2030 Agenda, Bangladesh has boarded on a course of localisation of 12 SDGs (1, 2, 3, 4, 5, 6, 7, 8, 10, 11, 15 and 16) among 17 SDGs by setting integrated measures at the community level for which direct measure are highly required to prevail over the interconnected challenges related to poverty, health, environment and society (GED, 2022). For localization, all ministries/divisions and especially the Local Government Division (LGD) have been implementing necessary measures. LGD is the most prominent Division in respect of granting development budget for the rural areas (GED 2022).

The Constitution of Bangladesh also plays a vital role by placing significant liabilities for development of society and economy, including 'the preparation and implementation of plans relating to public services and economic development' at local level with local bodies, particularly the UPs, the institutions nearest of local people [Article 59(2)(c)]. Bangladesh has secured that SDGs are fully interlinked at the national level to carry out national development plans and strategies.

The government has undertaken numerous initiatives to advance localisation of the SDGs. These include extensive awareness campaigns, the prioritization of SDGs indicators, the development of action plans at the local level, and the organization of workshops at the district level (Islam, 2022). In such context, an 'SDG Localization Framework' was prepared by GED of the Bangladesh Planning Commission, which focused on the localization of the SDGs in all the UPZs of Bangladesh. The GED devised SDG localization framework entails several crucial steps. It is evident from this framework that the initial phase of localisation involves developing short and long-term plans centred around the SDGs (Alam, 2020). This process aims to determine the required resources at UPZ, district, and divisional stages to attain regional targets effectively. To accomplish this, it is essential to establish an SDG plan that aligns with local priorities and objectives. The government plays vital roles in the SDG localization process, necessitating the initial planning of localization initiatives at the UPZ level. Subsequently, these efforts can be extended to UPs. With the help of current organisational structure of the government, localisation activities need to begin at the district and UPZ levels and extended to UP Level. The government has selected at least one underdeveloped district from each of the eight divisions, resulting in a total of nine such districts, for SDG localization pilot project (COAST, 202). In these 9 districts, localisation workshops have played a pivotal role in identifying priorities specific to different sectors and individual Upazilas. However, presence of a guideline that outlines the development and implementation of an SDG localisation plan at the UPZ level, along with a consolidated plan at the district level (Rokiba & Hussain, 2021).

Under the leadership of the Cabinet Division, a team has been formed at each level of UPZ, district, and division to oversee the implementation and coordination of SDGs. Member of parliaments and UPZ chairman will play the role of advisors (Islam, 2022). At the Upazila level, Upazila Nirbahi Officer (UNO) has got responsibility of coordination of localisation process among government agencies and local governments (GED, 2022). The primary responsibility of this committee is to adopt an action plan, ensure the execution of SDG initiatives, coordinate efforts, and monitor progress, with a focus on the SDG prioritise of the country. SDG localisation has already commenced at district level in Natore District using current set-up of localisation team (Rokiba & Hussain, 2021). However, for Upazila level there is no development and at UP level, an NGO, The Hunger Project, has come up with SDG Union to implement SDGs.

The Natore Model of SDG localisation

Despite the challenges, an exemplary case of SDG localization can be seen in the Natore Model, implemented by the local administration in the Natore District. The Natore Model, also known as the SDG District Action Plan, aims to align all local government offices and stakeholders with the 2030

Agenda (Rokiba & Hussain, 2021). It addresses local issues, potentials, and action programmes across government agencies. Recognized as a model by the Government of Bangladesh, it has the potential for replication in other administrative units.

The fruitful operation of SDGs in Bangladesh relies on effective integration of them into national planning and localization efforts at the district, UPZ and UP levels. National plans and other documents have already incorporated Agenda 2030. However, additional steps are necessary to ensure inclusiveness and reach marginalized populations. The General Economics Division (GED) of the Government has projected a localization framework, which has been discussed in depth in the SDGs Implementation and Review Committee. The decision was made to have the UPZ level coordinators for local government and other relating organisations to oversee the implementation of this localisation model. The objective is to enhance coordination among stakeholders, optimize the distribution of public resources based on SDG targets, and prioritise marginalised groups. The localisation approach also emphasises incessant efforts for developing capability and marshalling resources for local organisations (Rokiba & Hussain, 2021).

Localisation Efforts in Long-term Plans

Furthermore, building on the progress of the 7FYP, 'The 8th National Five-Year Plan of Bangladesh' was formulated and accepted by the Government of Bangladesh. The 8FYP has six core themes and it includes the attainment of the SDGs in its core.

Achievement during 7FYP

During the period of 7FYP there were significant improvements in LGIs, ranging from capacity building, governance improvement, basic service delivery, rural employment generation to formulating master plan (GoB, 2020). For building capacity of the LGIs, the government worked for institutionalising transparency and accountability, digitalisation of Union centres, ensuring access to information, arranging training for officials, supplying technical assistance, and connecting with local citizens (ibid). The government has launched numerous initiatives aimed at enhancing the governance and financial transparency of LGIs. These efforts include implementing Public Financial Management reforms, which have led to enhancements in the frequency and quality of audits. Additionally, webbased financial reporting systems have been introduced for UPs. These efforts continued to quality of audit, upgrading service delivery, predictable fiscal transfer, project implementation and people's engagement including women. LGIs took initiative to improve basic service delivery, such as reducing use of arsenic contaminated water, enhancing facilities for water supply, drainage, and sewerage in urban areas with planning, gradual maintenance, and improvement.

Additionally, LGIs and other actors, like Bangladesh Rural Development Board with 'Link Model' concept took initiatives to create rural employment opportunities and generate income, which ultimately lead to reduction of rural poverty. Different projects, providing crossbreed cattle, training, promoting self-employment and capacity building for action research were some of the ways of intervention. The government also assisted LGIs to develop Master Plans. In these endeavours, 254 Municipalities and 2 City Corporation had their Mater Plan prepared and another six were underway (GoB, 2020). However, several changelogs including unclear functions and responsibilities of LGIs, limited own revenue, dependency on national government, limited personnels, poor engagement of people and weak accountability, insufficient transfer of power for efficacy in service delivery, and weak resource mobilisation and fiscal centralisation during 7FYP slowed the attainment of SDGs in localities. Data of 16 developing and 26 developed nations reveal that local bodies contribute to 19% of the overall government expenditure in developing nations and 28% in industrialized nations, whereas this figure stands at a mere 7% in the case of Bangladesh in 2000s (GoB, 2020). Similarly, LGIs' taxes make up 11.4% of the total tax revenue in 16 developing nations and 22.7% and in 24 industrialized nations averagely; and for Bangladesh, this figure is merely 1.6% (ibid).

Localisation Plans in 8FYP

Identifying challenges of the previous plans, for LGIs, the 8FYP incorporate three key objectives—establishing good governance in LGIs, resource among coordination national mobilisation and and sub-national governments and delivery of necessary services to the people (GoB, 2020). For ensuring good governance the plans are to align local plans with national plan, define responsibilities of LGIs, build capacity, ensure people's participation, deliver performance-based grants, conduct action study, and empower women (GoB, 2020). Promotion of effective and quality service delivery will be taken through developing social and physical infrastructure, delivering appropriate services, ensuring safe water and sanitation facilities, improving e-governance, increasing social safety nets recipients, and extending healthcare services (ibid). Efforts will also be made to strengthen resource mobilisation and coordinate central and local governments. For this, national system of fund transfer will be reformed to make it criteriabased and predictable and for increasing own resources of LGIs, focus will be given on property taxes and recover of service cost (ibid).

Moreover, special attention will be given to empowering women and achieving gender equality in rural communities. Different organisations will provide training, ongoing support following training, establish market connections, foster leadership development, and promote income-generating endeavours, among others (GoB, 2020). Collaborative actions with relevant stakeholders will be undertaken to combat issues such as dowry reduction, prevention of child marriages, and addressing the menace of eve-teasing.

Additionally, to bolster community capacity, concentration will be given on nurturing human resources, fostering networking among all pertinent stakeholders in rural areas, cultivating leadership skills, and enhancing institutional capabilities. The aim for rural residents to have the ability to establish their community objectives, take proactive measures to attain them, and assess their progress effectively.

The key strategies of the government are to reform laws, formulate policies, incorporate best practices, introduce National Integrity Strategy (NIS) to reduce corruption, improve public finance management, develop short-, long-term and master plans transparently, increase capacity of LGIs for resource mobilisation. Furthermore, revenue sharing mechanism, intergovernmental fiscal transfer, staffing such as budget and IT officer, monitoring, auditing, taxation authority and collection process will be improved. National accounting and budgeting software- IBAS++ will be introduced at the local level. Initiatives will also be taken to implement National Rural Development Policy-2001 and build capacity of UPs through coordination, staffing, resource supply, introducing guidelines for service delivery (GoB, 2020).

Achievements and Setbacks of SDG in Bangladesh

As per Sustainable Development Report 2022, Bangladesh ranks 104th among 163 nations on the overall performance index on the 2030 Agenda. The country score of Bangladesh is 64.2, slightly below the regional average of 65.9 (Sachs et al., 2022). However, in 2023 the country is placed at 101st position scoring 65.9 among 166 nations, much ahead of Pakistan (128th) and India (112) (The Business Post, 2023; Sachs et al., 2023). Bangladesh exhibits high level of commitment to SDGs and moderate level of efforts, incorporates SDGs into sectoral action plans, coordinates SDGS at the national level, starts online SDGs reporting but does not integrate SDGs in national budget (Sachs et al., 2023: 49, 72). Goal wise progress, achievements and setbacks have been presented below.

Average Performance of Bangladesh 2022 (left) and 2023 (right).

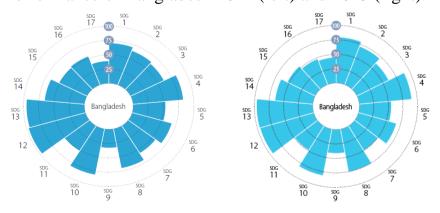


Figure 1: Average Performance by SDG (Bangladesh) (Sachs et al., 2022 and 2023).

Bangladesh's Progress in SDG Localization

Table 2: SDG Dashboard and Trends 2023

Trends	Decreasing	Stagnating	Moderately	On track /	Information
Tichus	Decreasing	Jugnanng	improving	maintaining	unavailable
			Improving	SDG	unavanaoic
C1 11				achievement	
Challenges	CDC 14	CD C 11	CDC 2 C 1	acine venient	
Major	SDG 14	SDG 11	SDG 3 Good		
Challenges	Life below	Sustainable	health &		
	water	cities &	wellbeing		
	SDG 15	communities	SDG 6		
	Life on	SDG 17	Clean water		
	land	Partnership	& sanitation		
	SDG 16	for the goals	SDG 7		
	Peace,		Affordable		
	justice &		& clean		
	strong		energy		
	institutions				
Significant		SDG 5	SDG 1 No		SDG 10
Challenges		Gender	poverty SDG		Reduced
		equality	2 Zero		inequalities
		SDG 8	hunger		
		Decent work	SDG 9		
		& economic	Industry,		
		growth	innovation,		
			and		
			infrastructure		
Challenges				SDG 4	
remain				Quality	
				Education	
SDG				SDG 12	
Achieved				Responsible	
				consumption	
				&	
				production	
				SDG 13	
				Climate	
				action	

Source: Adopted from Sachs et al., 2023.

The table 2 informs that Bangladesh has done well on goal 12 and 13. Regarding SDG 1 the country's performance is commendable, however facing significant challenges. Like SDG 1, SDG 2, 5, 8, 9, and 10 are encountering significant challenges. Specifically, the SDG 5, in one hand facing significant challenges, on the other hand, struggling with a condition of stagnation and is not improving. Unlike SDG 5, SDG 3, 6, 7, 11, 14, 15, 16, and 17 fall in the red zone with major challenges, while SDG 14, 15 and 16 show decreasing trend (Sachs et al., 2023). Overall, Bangladesh SDG performance demonstrates a lower or middle lower tendency as 30.9% SDGs achieved or on track, 41.2% SDGs progressed limitedly, and 27.9 SDGs seemed worsening (Sachs et al., 2023). More, on the performance on specific goals are given below.

Goal 1- End Poverty in all its forms Everywhere

Bangladesh is among the countries that has showed success in decreasing extreme poverty. The poverty headcount ratio at \$1.90/day was 20.17 per cent in 2010. By 2022, the ratio has dropped to 3.46 per cent (Sachs et al., 2022). In 2023, at \$2.15/day (2017 PPP, %) the ratio increased slightly to 3.8%. Although challenges remain, Bangladesh has reduced extreme poverty, marking that Bangladesh is maintaining the SDG achievement.

Then again, the poverty headcount ratio at \$3.20/day has dropped to 28.17 percent in 2022 from 57.62 percent in 2010 (Sachs et al., 2022). In 2023, at \$3.65/day (2017 PPP, %) the ratio reduced to 18.9%. Major challenges remain in decreasing the proportion of population staying below the upper limit of poverty while extreme poverty has been tackled with success.

Goal 2- End Hunger, Achieve Food Security and Improved Nutrition, and Promote Sustainable Agriculture

Bangladesh has achieved SDG 2 in the following areas: Cereal yield was 4.8 tonnes (per hectare of harvested land) in 2018, Prevalence of obesity, BMI \geq 30 has seen a steady rise and Human Trophic Level has also been maintained 2019 (Sachs et al., 2022). In brief, moderate improvements have been seen in achieving SDG 2, the goal of ending hunger problems in Bangladesh. The prevalence of undernourishment went down by 5 per cent in the span of 10 years. In 2019, the value stands at 9.7 per cent, right on the track to maintain the SDG achievement (Sachs et al., 2022).

On the other hand, the occurrence of stunting in children under 5 years of age was 28.0 per cent and the occurrence of wasting in children under 5 years of age was 9.8 per cent in 2019 (Sachs et al., 2022). Major challenges remain in securing these objectives. Additionally, the Sustainable Nitrogen Management Index hasn't seen any significant progress as well.

Goal 3- Ensure Healthy Lives and Promote Well-Being for all at all Ages

Most of the progress of SDG 3 is before Covid-19 Pandemic. The maternal mortality rate was 173 per 100,000 live births in 2017, less than half of the mortality rate that was in 2000. Neonatal mortality rate was 17.5 per 1,000 live births and mortality rate under-5 per 1000 live births was 29.1 in 2020 (Sachs et al., 2022). WHO recommended vaccine was received by living babies at pleasing level. All four indexes indicate that Bangladesh has been on track.

The incidence of tuberculosis and new HIV infections have not been seen notable change over the years. The number of deaths in people aged between 30-70 years for chronic diseases such as cancer, heart and lung disease, diabetes has seen a steady decline, indicating progress in healthcare and facilities (Sachs et al., 2022).

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Traffic deaths did not see much improvement, the rate has been almost same over the years, raising public concern. Life expectancy at birth has seen minor increase, adolescent fertility rate has dropped steadily, the rate of births helped by trained health personnel gradually increased over the decade but witnessed a sharp decline in 2018 (Sachs et al., 2022). The subjective well-being also improved in recent times, indicating that Bangladesh is on the right track with the progress being made. There are still many challenges to be tackled in achieving all the targets of SDG 3.

Goal 4- Ensure Inclusive and Equitable Quality Education and Promote Life-Long Learning Opportunities for all

The increase of literacy rate in Bangladesh is quite notable. The percentage has increased nearly 17 per cent over a decade and the value was 94.5 percent in 2020. Net primary enrolment rate was at 95.0 percent in 2010 and participation rate in pre-primary organized learning was 77.5 percent in 2019. Although significant challenges remain in achieving the target value, the lower secondary completion rate of 88.0 per cent in 2018 indicates that Bangladesh is doing well to ensure inclusive and quality education (Sachs et al., 2022).

Goal 5- Achieve Gender Equality and Empower all Women and Girls

Establishing gender equality and women empowerment (Goal 5) has been one of the key challenges in Bangladesh. The government is a strong advocate for gender equality. In 2016, for empowering women, Prime Minister of Bangladesh was awarded UN's Planet 50-50 award (Afia, 2020). Government's continuous efforts for decreasing gender discrimination and ensuring gender equality are epitomised in education, child marriage, family planning, labour force participation and women in parliament.

Bangladesh SDGs Progress Report 2020 (GED, 2020) suggests that the gender gap between enrolment and completion of primary education and secondary education has reduced. The rate of literacy among women has significantly improved, contributing to their empowerment and economic participation. The report further specifies that child marriage dropped from 51.4% in 2011 to 50.3% in 2017-18.

As of 2019, modern methods of family planning received by 77.4 percent of women aged 15 to 49 years (Sachs et al., 2022). The proportion of female-to-male mean years of education received has been almost steady over the years and still requires resolving significant challenges. The rate of female-to-male labour force involvement percentage was 44 in 2020 (Sachs et al., 2022). Moreover, it has been seen presence of a steady number of women in national parliament. Bangladesh SDG progress report (GED, 2020) indicates increasing trend in percentage of seats held by female member in the legislature from 20% in 2016 to 21% in 2019. The country currently ranks 19th globally regarding women's representation in parliament.

However, the Sustainable Development Report 2022 claimed that the progress is not at the satisfactory level and presently going through a period of stagnant with significant challenges to overcome (Sachs et al., 2022). Among the challenges gender violence, low proportion of women in decision-making and leadership position at subnational and national level, and inadequate appreciation of unpaid care and domestic work done by women are prominent.

Goal 6- Ensure Availability and Sustainable Management of Water and Sanitation for all

Bangladesh has achieved the target of Freshwater Withdrawal, which was 5.7 per cent of available freshwater sources in 2018 (Sachs et al., 2022). However, Bangladesh lags behind in treating wastewater, the percentage sits at 0.0 according to data until 2018 (Sachs et al., 2022).

As high as 97.7 per cent of the population received services of drinking water in 2020, marking that Bangladesh is maintaining the SDG 6 achievement. On the other hand, sanitation service was received by 54.2 percent of people indicating that there are challenges that need to be tackled and improvements to be made in sanitation services (Sachs et al., 2022).

4.1.7 Goal 7- Ensure Access to Affordable, Reliable, Sustainable, and Modern Energy for all

According to data in 2019, 92.2 and 23.0 percent of people have access to electricity and clean fuel and technology for cooking in Bangladesh respectively (Sachs et al., 2022). Significantly, emission of CO₂ reduced steadily in electricity production. There is still room for further improvement, but Bangladesh is on the right track with the reduction of carbon emissions. But the portion of renewable energy was low.

In such circumstances, Bangladesh prioritises two targets under SDG7:

- 1. ensure access to electricity for 100 per cent population; and
- 2. increase renewable energy share in total final energy consumption to 10 percent.

Bangladesh is doing well with the priority one. Currently, electricity is accessed by 95 percent of people as indicated by Bangladesh Power Development Board (BPDB). Regarding priority number two, Bangladesh needs much improvement. The country targets for 20 percent of renewable energy, however, it produces only 3.25 percent (Hossain & Bhuiyan, 2020).

Goal 8- Promote Sustained, Inclusive, and Sustainable Economic Growth, Full and Productive Employment, and Decent Work for all

Bangladesh has achieved the SDG 8 target of Adjusted GDP Growth and reduced the number of victims of modern slavery to a minimal margin. Fatal work-related accidents are almost non-existent. In 2017, 50.0 percent of people have account with bank or other financial institutions, and it means

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the country on the track to achieve the SDG 8 (Sachs et al., 2022). On the other hand, the Unemployment Rate stands at 5.23% in 2022 (ibid.), and it has been steadily rising over the years, raising serious concerns. Fundamental labour rights are not effectively guaranteed, and the score has been declining as well.

Goal 9- Build Resilient Infrastructure, Promote Inclusive and Sustainable Industrialisation and Foster Innovation

Although the number of people using the internet in Bangladesh has reached 24.8 per cent in 2020 and 52.8 per cent people have Mobile Broadband Subscriptions, significant challenges remain as communication systems and infrastructure require drastic improvement (Sachs et al., 2022). Then again, excellence of trade and transport-related structure is on the track to maintain SDG achievement. However, the minuscule number of articles published in academic journals or the lack of data on expenditure on research and development indicates that Bangladesh needs to a lot to achieve SDG 9.

Goal 10- Reduce Inequality within and among Countries

Tow indicators are used to show inequality, one is Palma Ratio, and another one is Gini Coefficient. Bangladesh has a Palma ratio of 1.28, while the target is 0.9. Then again, the Gini Coefficient of Bangladesh was 32.40 in 2016 with a target of 27.5 (Sachs et al., 2022). According to both Palma Ratio and Gini Coefficient, Bangladesh faces significant challenges to achieve the country's long-term targets to minimise inequality within geographic boundary of the country.

Goal 11- Make Cities and Human Settlements Inclusive, Safe, Resilient and Sustainable

According to the data, in 2018, the portion of urban population living in slums was 47.6 percent (Sachs et al., 2022). The percentage has declined gradually in the last two decades. The percentage of population who have access to quality water sources was only 35.2. A good number of people (78%) showed their satisfaction on transportation. Concentration of particulate matter (less than 2.5 micron diameter) has slightly decreased in recent years (Sachs et al., 2022). The mentioned figures denote that Bangladesh has to do a lot to make the human settlement inhabitable as designed by the global goals.

Goal 12- Ensure Sustainable Consumption and Production Patterns

Bangladesh has fulfilled all the target metrics to achieve SDG12 (Sachs et al., 2022). Municipal solid waste, electronic waste, production-based SO₂ emissions, SO₂ emissions embodied in imports, production-based nitrogen emissions, nitrogen emissions embodied in imports, exports of plastic waste, all these indexes indicate that Bangladesh is on the right track to achieve SDG12. Sachs et al. (2022) in SDR 2022 also confirm that Bangladesh has been doing well in fulfilling targets of the SDG 12.

Goal 13- Take Urgent Action to Combat Climate Change and its Impacts

Among climate vulnerable countries, Bangladesh falls among the top nations and faces cyclones, drought, flood, rising sea and other disasters. Although Bangladesh has successfully maintained low carbon emission rates to maintain SDG achievement, the concerns still remain high due mostly to high cost of the climate change (Sachs et al., 2022). For example, cyclones cost Bangladesh almost 1 billion dollars. Factors like heat, humidity and effects on health may increase the cost of environmental degradation and natural disasters (Sachs et al., 2022). In such scenario. Bangladesh needs more climate financing. World Bank (2022) reported that Bangladesh needs \$12 billion (3% of GDP) for mid-term climate financing. Different sources like carbon taxation, extra funds from budget, and external funding can reduce the climate financing gap. Bangladesh needs immediate actions to address climate related disasters.

Goal 14- Conserve and Sustainably Use the Oceans, Seas, and Marine Resources for Sustainable Development

Bangladesh announced its Marine Protected areas and integrated in National Action Plan in 2019 to control illegal fishing. It is 8.8 percent of its Exclusive Economic Zone (Sachs et al., 2022). In another move, Ship Recycle Act, 2018 was amended for maintaining compliance with the Hong Kong Convention for safe recycling by 2023. Moreover, production and use of one-time useable plastic shopping bags were banned by the government of Bangladesh (TBS, 2022).

Goal 15- Protect, Restore and Promote Sustainable Use of Terrestrial Ecosystems, Sustainably Manage Forests, Combat Desertification, and Halt and Reverse Land Degradation and Halt Biodiversity Loss

The protection and preservation of Bangladesh's terrestrial forest lands, wetlands, ecosystems, mountains, and biodiversity, as well as the prevention of deforestation, desertification, and ecological degradation are the key challenges to achieve SDG 15. According to the SDR report 2022, in terrestrial sites, 41.5 per cent of the mean area is protected that significant for biodiversity. On the other hand, the percent of the mean area protected in freshwater sites that are crucial to biodiversity is 0.0 in 2020 (Sachs et al., 2022). Major challenges remain in fulfilling these targets as the improvement over the years has been minimal. Furthermore, permanent deforestation rate has increased, and existence of the Red List Index of species went

Goal 16- Promote Peaceful and Inclusive Societies for Sustainable Development, Provide Access to Justice for all and Build Effective, Accountable, and Inclusive Institutions at all Levels

The acts passed on local governments in 2009 changed scenario in local governance that experienced provisions for citizens' engagement and accountable government with good governance. In case of the Union

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Parishad, the act assigned 40 activities to it to formulate strong governance to fulfil needs of the people in the areas of infrastructure, justice, social welfare and so on (Jahan, Ferdous, & Hasan, 2022). However, for establishing peaceful societies the country needs more focus in the areas of safety-security, well-being and social harmony (Khan, Saha, & Bhuiyan, 2018).

Goal 17- Strengthen the Means of Implementation and Revitalize the Global Partnership for Sustainable Development

Bangladesh actively participates in various regional and international organizations and initiatives such as BBIN, BCIM, SAARC, BIMSTEC, APTA, WTO, and WCO. However, the successful achievement of the SDGs relies heavily on meaningful international partnerships and the availability of resources, including external assistance. The ASEAN (Association of Southeast Asian Nations) is often regarded as an exemplary model for utilizing potential opportunities and accelerating regional integration. Bangladesh can consider adopting their development mechanisms to expedite the progress towards SDG attainment (Ahmed & Karim, 2022).

Challenges of Localisation of SDGs

Despite the prioritization of SDG localization by the Government of Bangladesh (GoB), there is a lack of clear institutional mechanisms involving LGIs for effective implementation of the 'Agenda 2030.' The absence of dedicated budgetary allocations at the national level for SDG implementation at the local level hinders the efforts of LGIs (Rokiba & Hussain, 2021). Khan, Saha and Bhuiya (2018) have identified the need for contextualisation of SDG targets relevant to local governments.

Table 3: Challenges of Local Government to Achieve SDGs

- (1) Need of dedicated budgetary allocation and skills
- (2) Lack of contextualisation of SDGs
- (3) Lack of local resource mobilisation
- (4) Weak culture of participation and absence of transparent planning
- (5) Lack of consistent flow of data
- (6) Weak sense of community and political commitment
- (7) Poor adjustment in governance, financial management and policy formulation
- (8) Lack of Coordination and collaboration
- (9) Lack of effort to present topics easily for local actors
- (10) Limiting rules and regulations

Local resource mobilisation has been a critical problem. In Bangladesh, LGIs taxes make up only 1.6% of the total tax revenue, while it is more than 22% in developed countries (GoB, 2020). In such context, the local bodies depend totally on the national level. However, due to lack of formula-based allocation and unpredictable grant LGIs struggle to match with the plans and implementation. The LGIs in Bangladesh need enhanced endeavours to mobilise own income to implement SDGs.

Effective localising of the SDGs relies on transparent and accountable planning, which hinges on active involvement of community members, CSOs and NGOs. Nevertheless, in many instances, local residents lack awareness and access to information when their informed opinion and leadership are cherished. Moreover, the culture of participation and welcoming people's voice in decision-making mark poor. Both supply and demand side actors have not been habituated with such practices. In this situation, they require assistance from both governmental bodies and NGOs to enhance their political awareness, fostering greater engagement, monitoring, and oversight of local plans and projects. A coordination among citizens, CSOs, NGOs and local representatives, trust and mutual accountability of them will produce better results. It is of paramount importance to promptly share results with the public.

For precise and effective policy formulation, a consistent stream of upto-date, accurate, and timely data is crucial. Unfortunately, local institutions and their personnel often do not possess the necessary quality standards to serve as reliable data sources. To address this issue, training programs and the implementation of action research can play a pivotal role in generating timely information that supports evidence-based policy development and planning.

The successful realisation of the 2030 Agenda depends significantly on the presence of unwavering local ownership and political determination and consistent bureaucratic backing. In some cases, the attachment of local people with the local bodies is weak and they lack commitment, time, and energy to be involved. On the other hand, in numerous instances, the prominence of good governance and development at the local level are direct results of the resolute commitment demonstrated by political and bureaucratic leaders. Without strong commitment from local people, political and bureaucratic actors achieving SDGs at local level will be difficult.

To effectively localise the SDGs, substantial systemic changes in local government administration and local institutions are imperative. Reform initiatives of local governance in Bangladesh fail to produce expected outcomes due to lack of unwavering political commitment (Panday, 2011). Moreover, LGIs show weakness in management of financial affairs with poor skills. However, SDG localisation demands adjustment in governance, financial management and policy level.

Varied stakeholders, including diverse government ministries, NGOs, international non-governmental organizations, and private sector entities, are involved in rural development efforts. Unfortunately, there is a notable absence of effective coordination among these actors, leading to project duplication and a failure to address underserved regions. The prevailing circumstances underscore the urgent need for improved coordination and collaboration among all parties engaged in local development initiatives.

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Various studies, such as the one conducted by Mojumder and Panday (2019), have clearly shown that local residents often have limited education and encounter challenges in accessing written information. Additionally, certain information is highly technical and difficult for these individuals to comprehend. Given this scenario, there is a pressing need for proactive efforts on the supply side to ensure that documents related to SDGs are presented to local residents in a simple and comprehensible manner.

Bangladesh has indeed enacted specific laws for each tier of local government; however, there are still noticeable gaps in certain areas. For instance, issues related to resource allocation and financial autonomy for local governments warrant further attention. Consequently, despite the legal framework in place, there is a need for ongoing reform and refinement to strengthen the functionality and impact of local governance in Bangladesh.

Additionally, there is a lack of literature on SDG localization and LGIs, indicating limited academic research on SDGs at the local level in Bangladesh. Lastly, national funds primarily focus on infrastructure development in urban areas like Dhaka, neglecting other areas' needs. To achieve effective SDG localisation, these chronic problems need to be addressed, with a particular emphasis on strengthening LGIs to align their programs with SDG targets, national plans, and local contexts.

Conclusion

The core theme of Sustainable Development Goals is to 'leave no one behind.' Like other countries, Bangladesh has also formulated specific metrics tailored to its local contexts. Bangladesh has selected a set of 40 indicators under the guidance of the SDG Working Committee of The Prime Minister's Office to achieve SDGs within shortest possible time. By selecting the most relevant targets and prioritizing them, GoB has been actively keeping track of the progress on SDGs with the help of different government and private organisations. Key government organisations are Statistics and Informatics Division (SID), Cabinet Division, office of the Prime Minister, Bangladesh Bureau of Statistics (BBS), General Economics Division (GED). With their assistance, SDG tracker has been developed to monitor the progress of SDGs on local levels.

The 8th FYP plan has been distributed between institutions specifically to responsible authorities for carrying out projects that fall under their jurisdiction. Despite the setbacks created by natural disasters, Covid-19 pandemic, Ukraine War, Inflation and severe economic damages, people of Bangladesh have the resilience to stand back up and the local governments can closely work with people at the root level to achieve the prioritized targets of SDG.

To alleviate the increase in poverty inflicted by the disasters in recent years, the local governments should be further enforced with human, infrastructural and economic resources. To that end, the rapid economic recovery of Bangladesh should be taken to the next level. The rise in poverty was mainly caused by lack of jobs, rise in the prices of commodity and import, losses in export. Bangladesh needs to focus on training more people and strengthening the human resources while working with international development partners to create a better economy for the people. To tackle climate changes and natural disasters, more funds are required, and international negotiations should be prioritized for increased assistance. The government must empower the local government with qualified personnel along with the development of analytical frameworks to implement SDGs.

The major lack of this chapter is that it is dependent on secondary literature and data. But the analysis and studies put together in this document can serve policymakers, researchers and concerned stakeholders to conduct further research and collect primary data on this field to enhance the knowledge on the topic.

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The 2024 Quota Reform Movement: A Catalyst for Restoring Democracy in Bangladesh

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Abstract

The 2024 Bangladesh Quota Reform Movement marks a significant case in the study of digital-age social movements, illustrating how modern communication technologies and strategic social networking catalyze political change. This article employs Manuel Castells' network theory of social movements and causal process tracing to explore the dynamics that contributed to the movement's success. Specifically, it examines the roles of digital media in organizing and amplifying public dissent, alongside the external political and social conditions that influenced the movement's outcomes. The study finds that the Quota Reform Movement leveraged digital platforms not only to mobilize support but also to create resilient, adaptable network structures capable of withstanding government pressure and rapidly shifting tactics in response to political developments. These networks enhanced the movement's visibility and sustained engagement both locally and internationally, exerting significant pressure on the government to address the demonstrators' demands. Additionally, the research highlights the critical role of global solidarity and international media in influencing domestic policy changes. The movement's ability to draw global attention played a pivotal role in its success, suggesting that modern social movements must consider both local and global dimensions in their strategies. The article concludes with recommendations for future social movements and policy frameworks, emphasizing the importance of digital literacy, networked organizational structures, and proactive government engagement with digital platforms. This case study not only contributes to our understanding of social movements in the digital era but also informs ongoing discussions about the intersection of technology, politics, and society.

Keywords: Quota Reform, Movement, Democracy, Bangladesh

Introduction

Bangladesh experienced a profound social and political transformation triggered by the quota reform movement in 2024. Originally initiated to

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address grievances associated with the government's job quota system, the movement rapidly escalated into a significant mass uprising that culminated in the resignation of the Prime Minister. This pivotal event marked a crucial moment in the nation's political landscape, illustrating the power of coordinated social action in driving substantial change (Amnesty International, 2024).

The movement began as a response to longstanding dissatisfaction with the government's quota system, which was perceived as unfair and non-meritorious by a large segment of the population, particularly the youth and students. The quotas, initially designed to ensure representation from freedom fighters families and the marginalized groups of society, had increasingly come to be seen as a barrier to employment for the general populace, creating a volatile foundation for social unrest. As the protests grew, the government's attempts to suppress dissent only fueled the fire, leading to a broader critique of governance and political accountability in the country. The movement's ability to mobilize and sustain such widespread participation was indicative of deeper social networks and the strategic use of digital communication technologies. These elements transformed traditional protest approaches into a dynamic, interconnected movement capable of challenging and eventually changing the status quo(Amnesty International, 2024; The Diplomat, 2024).

The success of the 2024 Bangladesh quota reform movement raises important questions about the nature of social movements in the digital age: How do specific strategies and external conditions converge to make a social movement successful? What role do modern communication technologies play in organizing and amplifying public dissent? This article aims to unpack these questions by applying Manuel Castells' network theory of social movements and the methodological approach of causal process tracing. By examining the causal pathways that led to the movement's success, this study provides insights into the dynamics of social mobilization and strategic action in achieving significant political outcomes.

Literature review

Bangladesh Quota Reform Movement to New Govt

The historical origins of the quota system in Bangladesh date back to the early 1970s, following the country's independence in 1971. Over time, policy makers designed the quota framework to address developmental disparities and include groups considered underrepresented in the civil service. Researchers have traced how changing political priorities, social pressures, and legal interventions repeatedly shaped, challenged, and modified these policies. By 2024, the quota reform debate had turned into a widespread public movement, drawing attention from both national and international observers. This literature review examines the major phases of quota policy and the protests that evolved in each period(Dhaka Tribune, 2024).

Post-1971 Context and Initial Quotas

In the aftermath of Bangladesh's Liberation War in 1971, the government faced the task of reconstructing a war-ravaged economy and building new administrative structures. The introduction of a quota system aimed to compensate individuals and families who suffered disproportionately during the war. Special provisions were established for freedom fighters, waraffected women, and disadvantaged districts. Scholars agree that these policies helped to ease social tensions in the new state by recognizing sacrifices made in the war. Throughout the 1980s and 1990s, reforms steadily adjusted the scope of quotas, adding new groups and redefining district-based slots. Policy documents from that period show that each change addressed specific social or regional demands, such as ensuring jobs for indigenous communities. While the changes aimed to promote inclusivity, they often complicated the recruitment process. Another strand of research indicates that political administrations sometimes used quotas to win favor with voter bases, thereby blending policy considerations with electoral calculations(Dhaka Tribune, 2024).

Emergence of Discontent

From around the early 2000s, a growing number of university graduates began to question whether the quota system still matched the realities of a more diverse and educated population. Critics suggested that the system might undervalue merit if too large a percentage of positions were reserved. Rival arguments stressed the continued need for affirmative measures to help marginalized groups. These debates set the stage for small-scale protests, culminating in broader discontent by 2013. Students used campus networks to highlight perceived inequities, producing a wave of public discussion on whether the benefits of quotas outweighed their drawbacks. Scholars often mark the 2013 protests as a turning point, when job seekers and students in several major universities demanded reforms. Government representatives initially dismissed these protests as isolated events. However, a more intense movement emerged in 2018, drawing large crowds to urban centers. Digital platforms played a vital role in amplifying grievances. At this point, the government responded by announcing changes that drastically reduced quota allocations for top-tier civil service positions, hoping to appease protestors. Yet, some groups criticized the decisions, pointing out that those with legitimate needs for affirmative support could be overlooked(Dhaka Tribune, 2024).

The 2024 Movement

In 2024, frustration reignited when a High Court ruling reversed the government's earlier decision and restored many of the previous quotas. Within months, nationwide protests erupted, led by coalitions of students, civil society activists, and professionals. The fierce street demonstrations were the largest since Bangladesh's early years, reflecting not just anger over the quota issue but also longstanding economic challenges, such as

youth unemployment and wage stagnation. Protesters were well-organized, using social media to coordinate tactics and disseminate live updates. Analysts also note that government crackdowns during this period further fueled discontent, leading to an outcome where state concessions evolved into broader political shifts(Prothom Alo, 2024c; The Daily Star, 2024a).

Social Movements and Social Media

Social movements have significantly evolved with the integration of digital platforms, fundamentally altering how information is disseminated and actions are coordinated. The advent of social media has introduced new dynamics into traditional social movement theories, prompting a reevaluation of how collective action is understood in the digital age. The literature on social movements traditionally revolves around theories of collective action, resource mobilization, and framing processes. Researchers like Tilly and Tarrow emphasize the importance of resource availability and political opportunities in mobilizing groups for collective action. However, with the rise of social media, scholars such as Castells have shifted focus towards the concept of "networked individualism," where digital platforms enable decentralized communication and coordination without hierarchical structures(Castells, 2015, 2024).

A pivotal theme in contemporary literature is the role of social media in reducing the costs of communication and eliminating geographical barriers. Platforms like Facebook, Twitter, and Instagram serve not only as tools for spreading information but also as spaces for virtual assembly and protest organization. This has been particularly evident in movements like the Arab Spring, where social media played a crucial role in mobilization and strategic planning. Social media significantly enhances the visibility of social movements, reaching a wider audience more rapidly than traditional media channels. This instant visibility helps in drawing immediate public attention and support, which is critical in the early stages of a movement. Furthermore, the interactive nature of social media allows for a higher engagement level, encouraging active participation and real-time feedback from supporters(Castells, 2015).

Quota Reform Movement

The Quota Reform Movement in Bangladesh is an exemplary case of social media's influence on social movements. Originating from grievances against the outdated and arguably unfair quota system in government jobs, the movement gained momentum through vigorous campaigns on various social media platforms. Activists used these platforms to organize protests, share news, and mobilize support across the country, highlighting social media's role in operationalizing and amplifying social movements. Despite its advantages, the reliance on social media for social movements is not without challenges. The spread of misinformation, the risk of surveillance, and the potential for ephemeral commitment are significant concerns.

Additionally, critics argue that social media might encourage 'slacktivism', where individuals feel satisfied by mere online participation without engaging in substantive offline action(The Daily Star, 2024b; The Guardian, 2024).

Theoretical Framework

Manuel Castells' theory of networked social movements (Castells, 2015, 2024) forms a cornerstone of contemporary social movement analysis, particularly in the context of movements that heavily utilize digital communications technology. Castells posits that the power of these movements lies in their ability to create and operate within networks that transcend traditional geographic and social boundaries. This theoretical framework is particularly relevant for understanding the dynamics and impact of the 2024 Bangladesh quota reform movement, which effectively utilized digital platforms to mobilize, coordinate, and amplify its political demands.

Core Concepts of Castells' Network Theory(Castells, 2015, 2024)

Networks of Outrage and Hope: Castells describes social movements as networks of outrage against oppression and hope for achieving change. These networks are fueled by the collective emotions and shared consciousness of injustice among participants, which are amplified by digital communication tools. In the context of the Bangladesh movement, the outrage was directed against the perceived inequities of the existing quota system in public sector jobs, and hope was embodied in the collective aspiration for a more meritocratic system.

The Role of Digital Media: According to Castells, digital media play a crucial role in the formation and sustainability of social movements. They facilitate the dissemination of information, mobilization of support, and coordination of action across dispersed geographical locations, which are essential for maintaining the momentum of social movements. In Bangladesh, social media platforms, blogs, and online forums served as vital spaces for discussion, planning, and broadcasting the movement's activities and demands.

Autonomy of Networks: Castells emphasizes the autonomous nature of social networks in the digital age. These networks operate independently of traditional institutional controls and can often challenge and circumvent state mechanisms and media censorship. This autonomy enhances the capacity of social movements to engage in non-conventional forms of protest that can be highly adaptive and resilient.

Transformation of Social Space: The network theory also discusses the transformation of social space through the processes of "timeless time" and "space of flows." The instantaneous nature of digital

communications allows movements to operate in a time frame that is unbound by traditional chronological constraints, and the space of flows refers to the networked social spaces that transcend physical distances between the nodes (participants) in the network.

Multi-modal Connectivity: Castells identifies the importance of multi-modal connectivity, where different forms of digital communication intersect to enhance the outreach and impact of social movements. For instance, live streaming of protests, viral hashtags, multimedia sharing, and real-time updates play synergistic roles in mobilizing support and sustaining engagement.

Application to the 2024 Bangladesh Quota Reform Movement

Applying Castells' network theory to the Bangladesh quota reform movement provides insights into how digital networks were effectively used to challenge the status quo and demand changes. The movement leveraged online platforms to circumvent government censorship, mobilize rapid mass protests, and maintain a sustained campaign against the quota system. The networked nature of the movement allowed for a dynamic and flexible mobilization strategy, which adapted quickly to changing situations and maximized impact by engaging a broad spectrum of participants from various parts of the country(Castells, 2024).

In summary, Castells' network theory of social movements offers a robust framework for understanding the structural dynamics and communicative strategies of the 2024 Bangladesh quota reform movement. By framing the movement within this theoretical context, the analysis can explore the intricate interplay between digital technology and social activism, providing deeper insights into the mechanisms that led to the movement's success.

Broader Theoretical Implications

Research on these collective actions is often framed within social movement and network theories. Scholars like Castells stress the role of digital communication in mobilizing and unifying discontented youth who feel disenfranchised by traditional power structures. The Bangladesh context, where high unemployment intersects with strong student networks, offered fertile ground for these movements to grow and remain resilient. Process tracing studies, such as Beach and Pedersen show how recurring legal and political reversals shaped activists' strategies. These events also highlight how policy vacillations and repeated government interventions can inadvertently bolster the resolve of protest groups(Castells, 2024).

From the 1970s to 2024, Bangladesh's quota system has experienced significant shifts. Initially conceived to promote equity for war-affected communities and marginalized regions, it expanded through multiple amendments and later became the subject of widespread contention. In response to persistent unemployment and evolving societal expectations,

organized protests questioned the balance between affirmative action and merit, prompting the government to adopt changing stances over time. By 2024, the Quota Reform Movement had transformed into a major force, pointing to deeper undercurrents of social and economic dissatisfaction. The literature consistently underscores the complex interplay of historical obligations, societal needs, and shifting policy aims. These changes have provided fertile ground for large-scale mobilizations, revealing both the strengths and vulnerabilities of quota policies. Taken as a whole, scholarship on the Quota Reform Movement illustrates that while quotas can address historical injustices, they can also spark significant public unrest if perceived as outdated or misaligned with the nation's evolving aspirations.

Methodology

This study uses a qualitative approach and draws on secondary data to investigate how the 2024 Bangladesh Quota Reform Movement achieved its goals. The design centers on a single-case study, combined with an Explaining Outcome Process Tracing (EOPT) strategy, to uncover and detail the mechanisms that led to the movement's success(Beach & Pedersen, 2019; Bennett, 2010; Collier, 2011). Each methodological step is described below.

Research Design: Qualitative research is chosen to capture the depth and complexity of social processes behind the quota reform movement. It allows the study to address how and why key events unfolded, rather than simply measuring their frequency or correlation.

Case Selection: The 2024 Bangladesh Quota Reform Movement is examined as a single case. This movement presents an extreme example of rapid political mobilization, culminating in the resignation of a Prime Minister and sweeping policy reform. Focusing on one case enables the research to investigate the intricate causal pathways within a clearly bounded context.

Qualitative methods emphasize context-specific analysis. This is vital for understanding the historical, cultural, and political environment in which the movement emerged and gained momentum.

Data Collection

Data Sources: The study gathers information from multiple sources, including:

- Newspaper Articles and Online Publications: Offer real-time perspectives on public opinion and government response.
- o Government Documents and Press Releases: Provide official statements on policy decisions and details of the quota system.

- Academic and Policy Reports: Deliver expert analyses on Bangladesh's socio-political structure and public sector employment practices.
- Social Media Posts and Digital Archives: Reveal grassroots organization tactics and participant reactions.

Selection Criteria: Data were included if they:

- Directly addressed events related to the quota reform movement.
- Documented actions by movement leaders, participants, or government officials.
- Provided detailed coverage of key turning points (e.g., major protests, negotiations, policy announcements).

Data Management: A systematic coding system was developed to categorize and store the collected documents. This coding indexed events, participants, strategies, government actions, and outcomes, ensuring consistency and ease of retrieval during analysis.

Single-Case Study Design: A single-case design is well suited to explore a unique or critical case in great depth. It offers a focused lens on the movement's progression without the complexity of cross-case comparisons. The advantages are:

- o **Rich Contextual Insight**: Examining one case in detail captures nuances that might be overlooked in larger comparative studies.
- Theory Building: Insights from this case may inform broader theories on how social movements force political change in similar contexts.

However, there is one issue, generalizability. Findings mainly illuminate the Bangladeshi context, though they may still inform studies of other movements if parallels exist.

Causal Inference through Explaining Outcome Process Tracing

- 1. **Explaining Outcome Focus**: The research aims to clarify how the final outcome—a successful reform and the Prime Minister's resignation—came to pass. EOPT centers on mapping each step that led from initial grievances to significant political upheaval.
- 2. **Identifying Key Mechanisms**: The process tracing includes:
 - Mapping Sequences: Outlining critical stages of mobilization and state response.
 - o **Uncovering Mechanisms**: Identifying the specific actions, strategies, and events that shaped the outcome (e.g., decisions by student leaders, shifts in public sentiment, and the government's use of force or concessions).

- 3. **Evidence Assessment**: EOPT relies on tracing causal pathways and testing them with relevant evidence:
 - Linking Data to Hypotheses: Data gathered are checked against hypothesized causal links, such as the role of digital mobilization or international scrutiny.
 - o Confirming or Eliminating Pathways: The method tests competing explanations, ensuring that only well-supported causal chains remain in the final narrative.

4. Outcome Explanation

- Sequencing: The methodology arranges events in chronological order, uncovering how early steps shaped later choices.
- o **Checking Rival Explanations**: Alternative explanations are explored (e.g., economic factors, elite splits) and either integrated or excluded based on empirical support.

Ensuring Rigor in the Analysis

- 1. **Triangulation**: Cross-verification of events, official records, and participant accounts reduces the risk of bias and strengthens the credibility of findings.
- 2. **Transparency**: Full disclosure of data sources and analytic steps helps other researchers assess the study's reliability.
- 3. **Reflexivity**: Awareness of potential researcher bias is maintained, particularly when interpreting politically charged materials.

The chosen methodology—qualitative single-case analysis supported by Explaining Outcome Process Tracing—enables a detailed exploration of how the Bangladesh Quota Reform Movement achieved far-reaching political outcomes. By gathering diverse secondary data and systematically mapping the causal steps, the study aims to provide a clear, evidence-based account of why and how this movement succeeded. This approach offers both an in-depth understanding of the case and broader insights into the dynamics of social movements that transform political structures.

Results

The 2024 Bangladesh Quota Reform Movement achieved significant political outcomes, including the withdrawal of longstanding quota systems in government job allocations. The movement's success can be attributed to a confluence of strategic mobilization, the adept use of digital platforms for coordination and communication, and a strong alignment with political and social contexts conducive to change(Arnab Biswas & Ali Ahsan, 2024).

Strategic Mobilization and Network Theory: Applying Manuel Castells' network theory of social movements, this analysis identifies that the decentralized yet connected network structure enabled by social media was pivotal. The movement leveraged these networks to organize protests,

disseminate information quickly, and sustain engagement without the need for traditional hierarchical organization structures. Data collected from various digital platforms showed a surge in activity correlating with major offline events, suggesting that online mobilization effectively translated into real-world action(Al Jazeera, 2024; Prothom Alo, 2024a; The Daily Star, 2024b).

Role of Communication Technologies: Modern communication technologies played a dual role: as tools for spreading awareness and as platforms for real-time coordination. The analysis of social media traffic, hashtags, and content sharing patterns revealed that specific calls to action, such as protest dates and locations, reached wide audiences rapidly. Furthermore, the ability to share real-time updates during protests helped maintain momentum and adapt to dynamic conditions on the ground(Al Jazeera, 2024; Arnab Biswas & & Ali Ahsan, 2024).

External Conditions and Public Sentiment: The external political and social conditions also aligned favorably for the movement. The public's growing dissatisfaction with the existing quota system, amplified by incidents of perceived injustice, created a ripe environment for mobilization. Media analyses indicate that coverage of these incidents heightened public sentiment, which was further galvanized by influential social media campaigns that narrated personal stories and highlighted systemic issues(Prothom Alo, 2024a).

Causal Pathways to Success: Causal process tracing identifies several key pathways that contributed to the movement's success(bdnews24, 2024; Dhaka Tribune, 2024; Prothom Alo, 2024a, 2024c, 2024d, 2024b; The Daily Star, 2024a; The Guardian, 2024):

- Rapid Information Dissemination: The use of social media for quick information spread enabled widespread awareness and engagement.
- Adaptive Tactics: The movement's leaders used real-time feedback from online platforms to adjust tactics and respond to government actions, enhancing strategic flexibility.
- **Unified Messaging:** Despite the decentralized nature of the movement, there was a coherent message that resonated across diverse demographic groups, facilitated by shared digital content.
- **International Attention:** The digital footprint of the movement drew international media attention, which put additional pressure on the government to address the protestors' demands.

The success of the 2024 Bangladesh Quota Reform Movement underscores the transformative potential of integrating modern communication technologies with traditional social mobilization strategies. By forming dynamic networks that efficiently utilize digital platforms for collective action, social movements can achieve significant political outcomes even in challenging environments.

Discussion

Integration of Digital Tools in Social Mobilization: The success of the 2024 Bangladesh Quota Reform Movement provides a clear demonstration of how digital tools can be integrated into the fabric of social mobilization strategies. The movement's use of social media not only for coordination but also for narrative control shows a shift towards more decentralized and participatory forms of activism. This aligns with Manuel Castells' assertion that the power of networked communication lies in its ability to bypass traditional media and governmental filtering, creating a direct channel to the public (Castells, 2015).

The Role of Communication Technologies: The significant role of modern communication technologies in this movement highlights a paradigm shift in how social movements strategize and execute their campaigns. The real-time exchange of information allowed for a dynamic response system where strategies could be adapted almost instantaneously based on situational needs and government responses. This agility enhanced the movement's capacity to maintain public engagement and pressure, which were crucial for its sustainability and eventual success(Castells, 2024).

External Conditions Facilitating Movement Success The external political and economic conditions acted as a catalyst for the rapid spread and acceptance of the movement's objectives. Public dissatisfaction, driven by perceived injustices and economic hardships, was effectively channeled into collective action through strategic communication efforts. This suggests that the success of social movements is not only dependent on their internal capabilities and strategies but also heavily influenced by the broader sociopolitical context(bdnews24, 2024).

Strategic Implications of Network Theory: Applying network theory to understand the movement's structure reveals that the flexibility and resilience of informal networks can provide significant strategic advantages in social movements. These networks can mobilize resources, information, and human capital more fluidly than rigid hierarchical organizations. However, they also pose challenges in maintaining coherent strategies and message fragmentation, which the movement managed preventing effectively through centralized messaging and decentralized execution(Castells, 2015).

Causal Process Tracing: Insights into Strategic Actions: The use of causal process tracing in this analysis helped uncover the specific actions and decisions that were pivotal in achieving the movement's goals. For instance, the strategic decision to escalate the protests following specific government actions or public sentiment shifts was crucial. This methodological approach provides a nuanced understanding of the 'how' and 'why' behind the movement's success, offering valuable lessons for future activism.

Global Implications and the Role of International Attention: The international attention garnered by the movement through digital platforms played a non-trivial role in shaping the government's response. This aspect of the movement's strategy underscores the growing importance of global public opinion in national political affairs, facilitated by the borderless nature of information flow on social media platforms.

The discussion around the 2024 Bangladesh Quota Reform Movement illustrates the complex interplay between technology, societal structures, and individual agency in the modern age of activism. By leveraging digital tools, adapting to dynamic external conditions, and strategically mobilizing a decentralized network, the movement not only achieved its immediate objectives but also set a precedent for future social movements worldwide. This case study enriches the theoretical and practical understanding of digital-age activism and its potential to effect substantial political change.

Conclusion

The 2024 Bangladesh Quota Reform Movement represents a seminal example of how digital technologies and networked communication can catalyze significant social change. By applying Manuel Castells' network theory of social movements and the methodological approach of causal process tracing, this study has identified key elements that contributed to the movement's success. These include strategic use of digital media to mobilize and sustain public support, adaptation to shifting political landscapes, and effective leveraging of global attention to pressurize local political structures.

The movement's success underscores the transformative potential of social media as a tool for political and social empowerment. It highlights the shift from traditional, hierarchical modes of protest to more fluid, decentralized network structures that can adapt rapidly to changing circumstances and maximize impact.

Recommendations Based on the insights gained from this study, several recommendations can be made to guide future social movements and policy responses:

1. Enhance Digital Literacy

- For Activists: Develop workshops and resources to improve skills in digital communication, security, and privacy to protect activists and enhance their effectiveness.
- For the Public: Promote digital literacy to help the broader public critically evaluate information and engage effectively in digital platforms.

2. Strengthen Network Structures

 Encourage the formation of decentralized, flexible organizational structures that can operate effectively under pressure and adapt quickly to external changes.

3. Policy Engagement

- Develop clear channels for dialogue and negotiation between social movements and government bodies to address grievances before they escalate into major conflicts.
- Implement policies that ensure transparency and accountability in government actions, particularly in response to public dissent.

4. Leverage International Support

 Utilize international platforms and social media to garner global support and attention, which can offer additional leverage in negotiations with local governments.

5. Research and Documentation

- Continue to document and study social movements to understand their dynamics and refine strategies for mobilization and advocacy.
- Invest in research that explores the impact of social media on political engagement, particularly in non-Western contexts.

6. Legal and Ethical Frameworks for Digital Activism

- Develop legal protections that ensure the rights to free speech and assembly online while balancing concerns around security and misinformation.
- Encourage ethical guidelines for digital activism to prevent the spread of misinformation and enhance the integrity of movements.

Future Implications

The findings from the 2024 Bangladesh Quota Reform Movement indicate that as digital platforms become increasingly integrated into daily life, their role in facilitating social and political activism will likely grow. Future movements can learn from this case by strategically integrating digital tools to enhance communication, organization, and impact. Governments, on the other hand, may need to adapt their approaches to governance and public engagement to better address and incorporate the voices of a digitally-empowered populace. In conclusion, the Quota Reform Movement not only reshaped policy in Bangladesh but also contributed to the broader discourse on the power of digital media in modern social movements. By understanding and leveraging these tools, future movements can enact meaningful change in their societies, while policymakers can foster a more inclusive and responsive political environment.

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Measuring Efficacy of the Vulnerable Group Development Program in Bangladesh: How Far We Achieved Service Process Simplification?

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Abstract

A Vulnerable Group Development program aiming at sustainable socioeconomic empowerment mobilizes women's communities to achieve poverty reduction, food security, and skills development. The study's main objective was to evaluate to what extent the women enrolled in Vulnerable Group Development programs effectively ensure Service Process Simplification. The study followed a mixed-method survey that included a survey questionnaire for the 384 service recipients and a face-to-face semistructured interview with the 3 UP Chairman, 3 UP members, and 10 service recipients of Savar Upazila. By conducting the Chi-square test (p< 0.05), the overall results of the study revealed that the effectiveness of using Service Process Simplification (SPS) in the VGD program by service recipients was very low. Only 3% of the service recipients admitted to their knowledge about online self-application for VGD, but no one had applied themselves yet. Evidently, participants in the study followed the traditional registration method to avail themselves of the service from Union Parishad. The study did not find a significant influence (p < 0.05) of the VGD service concerning perceived usefulness, perceived ease of use, attitude toward use, and intention to use. The study's findings pointed to significant challenges

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How Far We Achieved Service Process Simplification?

in information gaps, miscommunication, deceptive behavior by the recipients, and delays in service delivery. The study's findings will assist social policymakers, local government authorities, and practitioners in rethinking how to overcome challenges in simplifying VGD services.

Keywords: Service Process Simplification, Vulnerable Group Development, Women, Bangladesh.

Introduction

The government of Bangladesh has implemented the social safety net program known as "Vulnerable Group Development" (VGD) to raise the living standards of the most vulnerable groups in the nation. VGD emerged from the Vulnerable Group Feeding (VGF) program after the famine of 1974 and has since been expanded to cover all 64 districts in Bangladesh. With assistance from the World Food Program (WFP), the Ministry of Women and Children Affairs (MOWCA) implements the program. It was revised to "increase the self-reliance of the most disadvantaged women" as one of its new aims. The program provides a range of services to the targeted women, including food assistance, healthcare, literacy and life skills training, and microfinance support (Hossain, 2007). In order to qualify for VGD, a prospective recipient must satisfy at least four of the following conditions: the individual is either widowed, separated, deserted, or divorced, and their age should be between 20 and 50 years. Alternatively, they may have a husband who is unable to work. They experience extreme food insecurity and either do not own any land or possess less than 0.15 acres of land. Their family income is very low and inconsistent, and they work as casual laborers. They also belong to a household where a woman is the head. A woman is eligible to receive benefits as a VGD recipient only once and cannot concurrently get benefits from other development programs (Begum, 2018).

The most destitute individuals are not eligible for VGD because of their advanced age, limited physical capabilities, and lack of ambition. The transfer of VGD implementation from the Ministry of Disaster Management & Relief (MoDMR) to the Ministry of Women and Children Affairs (MoWCA) initially impacted program management due to insufficient presence in the field. As a result, MoDMR had to offer field support during the initial years of the transition. Coordinating between different ministries occasionally posed a hurdle. Service Process Simplification (SPS) equips civil servants with a tool to simplify access to public services, thereby reducing the time, cost, and number of visits (TCV) required for citizens to access them. The government of Bangladesh included SPS in the VGD program to increase the empowerment of the most vulnerable rural women. Before 2013-2014, VGD service was totally manual. At that time, the government could not cover vulnerable people because it could not include SPS in the VGD program (Kasem et al., 2022). Considering this, the study seeks to enhance the impact of the VGD Program by analyzing the dimension of service process simplification.

Literature Review

Vulnerability

Kirby's (2006) concept of vulnerability assisted in identifying threats to the poor's social well-being, such as the deterioration of assets like education, health, and land. These anxieties originate from a lack of assets and anxiety about surviving in unpredictable circumstances. Consumption, debt. and the appearance of success are all causes. The lack of a social compact and the market's priority generated identity politics, with social groups forming Vulnerability may based shared interests. analyze neoliberal globalization's broader cultural, psychological, environmental, and political consequences, often outperforming traditional poverty study methodologies. Vulnerability is a state of insecurity, and susceptibility to risks, shocks, and stress is not synonymous with poverty. It involves both external dangers and internal defenselessness, leading to significant losses. Loss can manifest in various ways, such as physical debilitation, financial destitution, social reliance, humiliation, or mental damage. Recognizing and addressing this vulnerability is crucial to prevent poverty (Chambers, 2009).

Vulnerable Group Development (VGD) Program in Bangladesh

Mannan and Ahmed (2012) found that the VGD program positively impacts beneficiaries below the poverty line, improving income, food consumption, and housing access. It focuses on disadvantaged women, ensuring food providing earning opportunities, and promoting women's security. empowerment. The program also helps men become economically stable, encouraging social empowerment. However, the study found some negative aspects, such as the exclusion of eligible poor women due to inadequate coverage and financing and political bias in the selection committee. Pradhan and Sulaiman (2014) found that the VGD program significantly increased per capita consumption among beneficiary households in the Sylhet division, reducing food shortages and diversifying nutrition. The program provided protection, increased savings, durable commodities, productive assets, and modest commerce. Beneficiary households also had higher child enrollment rates than non-beneficiary households. The VGD program successfully eradicated poverty by improving beneficiary households' quality of life and production capacity. The VGD program, aimed at improving living conditions for impoverished individuals, has significantly impacted income, expenditure, and food intake. The program allows VGD participants to allocate funds for personal expenses or save for future use, ensuring access to necessities and reducing physical harm and loss of lives. It also enhances living standards and dignity within families and contributes to food security and economic growth. The VGD program also enhances women's circumstances despite variations in socioeconomic features among participants (Badhan et al., 2019). Begum (2018) reported that VGD helps decrease landlessness, increase homestead land ownership,

decline in begging, and increase dignity and social status within the community. The study shows that 52 percent of the IGVGD participant households sent their children to school, compared to only 23 percent of non-participant households. The school attendance rate of children from IGVGD participant households was 80 percent, while the corresponding figure for non-participant households was 34 percent. The study also shows how poor people were excluded from the VGD program, and some leakage and corruption were noted in food aid and participants' savings. Hossain et al. (2019) examine the impact of the VGD program on the socio-economic status of women in Bangladesh. The study found that the program has significantly improved women's economic and social status by increasing their access to credit, training, and employment opportunities. The primary factors influencing the demands and support for the program are the incumbent government's desire for political legitimacy, pressure from donors for economic reform, food insecurity, the emergence of the 'womenin-development' concept in development discussions, and prevailing social ideologies and norms. The VGD program has transformative impacts on society, and the feedback has played a crucial role in fostering an appropriate climate for future policy decisions and ensuring the program's viability (Datta & Kundo, 2016). Khatun and Rahman (2016) focus on women's participation in the VGD program in Bangladesh. The study found that the program has significantly increased women's participation in decision-making and economic activities and improved their overall empowerment and well-being. Bangladesh's population remains below the poverty threshold, but the VGD program provides food subsidies to needy people. Bribes may be used for inclusion, but the program benefits recipients by increasing their food and medicine expenditures, regardless of cash or in-kind allowances. This program positively affects the underprivileged (Hossan et al., 2017). The Government of Bangladesh launched the VGD Program, which primarily targets underprivileged women and aims to uplift them by offering financial assistance, skill development, and healthcare services. The program has evolved over time to incorporate feedback and address emerging challenges, emphasizing the importance of understanding its historical context and evolution. Participants experienced increased economic independence and enhanced abilities within their households. decision-making These underscore the program's potential for socio-economic change (Ahmed, 2017). The VGD program has created jobs and accelerated economic expansion, ensuring food availability. However, it faces challenges like inconsistent political commitment, inadequate administration, resource loss, beneficiary selection challenges, fund distribution delays, and inadequate monitoring. The program is implemented by multiple government and NGO departments, leading to redundancy, overlap, and inefficient resource utilization (Barkat-e-Khuda, 2020).

Service Process Simplification of the Vulnerable Group Development (VGD) Program

Uddin (2014) discusses the social elements and human traits contributing to the inclusion and exclusion errors in the VGD program in Bangladesh. He explains that the program is implemented as a political distribution scheme. with information and incentive distortions, inadequate governance, and the influence of elites through patron-client relationships contributing to inclusion errors. The VGD program relies on donations; if donors refuse, the government will continue to implement it to maintain voting sensitivity. Uddin also highlights corruption and inadequate governance as the primary obstacles to the program's efficacy. The VGD program faces irregularities due to inadequate monitoring and misallocation issues. The government has implemented the Grievance Redress System guideline 2015 to address these irregularities. However, the lack of a complete database on impoverished areas and the lack of coordination among departments contribute to the inefficient allocation of funds. The poor capacity of local government institutes, such as the politically biased UP chairman and members, hinders the program's implementation and prevents significant improvements. (Mahmuda, 2018). Islam et al. (2020) evaluate the effectiveness of the VGD program in achieving sustainable development goals in Bangladesh. The study found that the VGD program has significantly contributed to reducing poverty, improving food security, and enhancing the well-being of vulnerable countries. Despite a 24-month timeframe for family food security, food insecurity remains prevalent in many regions. The VGD program, aimed at supporting target populations, is compromised by leakage, bribery, misallocation, and distribution below prescribed levels. This is due to a lack of transparency, social accountability, and poor participation from the local population. Powerful officials, local government representatives, and intermediaries leak information while vulnerable people struggle to break free from this cycle (Das & Nahar, 2014). Maniruzzaman (2019) specifically examined the extent of coverage of social safety net programs, with a particular emphasis on the Vulnerable Group Development (VGD) program. Despite the overall improvement in coverage, certain individuals living in extreme poverty have not yet been reached, while a small number of others have gotten aid from various programs. The World Bank's Project Information Document for the Bangladesh National Social Protection Project emphasizes the presence of significant redundancy and duplication in program implementation. It also mentions the involvement of multiple ministries with overlapping goals and targeting beneficiaries but with limited coordination. Shamsuddoha and Khanam (2020) provide a comprehensive review of the achievements and challenges of the VGD program in Bangladesh. The study found that the program has made significant progress in empowering women, reducing poverty, and improving food security. However, the program faces several challenges, including inadequate resources, a lack of sustainability, and inadequate

monitoring and evaluation. The food access, availability, and stability of the VGD program were considered satisfactory, but the nutrition, quality, and quantity of food consumption were subpar. The beneficiaries expressed their satisfaction with the convenience and consumption of food. However, they encountered challenges such as insufficient provision, delayed delivery of food supplies, poor food quality, rigorous regulations, and distribution in distant locations. The overall performance in achieving food security was disappointing despite improving food access, availability, and stability (Afrad & Barau, 2018). The VGD program is not consistently allocated to impoverished and susceptible demographics, with over half of recipients failing to meet essential criteria. Insufficient resources and staff lead to insufficient monitoring and verification processes, excluding eligible beneficiaries. The UP authority lacks proactive evaluation and regulation (Sultana, 2023). Beneficiaries of the VGD program are unaware of the enrollment requirements, and bias based on party affiliation, bribery, and nepotism affect the process. Initiatives like job development, food distribution, and healthcare access fail to reach the disadvantaged. Factors contributing include imprecise targeting, inadequate coverage, and regional disparities in political interest, administrative competence, and performance (Golam et al., 2023). VGD's effectiveness is attributed to its alignment with existing political interests rather than opposing them. Local political rivalry has led to favorable outcomes for impoverished rural women. However, VGD is not a positive example of democratic political agreements benefiting the poor. It emphasizes the importance of local democratic influences and requires extremely impoverished and vulnerable women to actively engage and advocate for themselves (Hossain, 2010).

Methodology

This study follows a mixed-methods approach conducted through surveys and key informant interviews (KIIs). In this study, written questionnaires, in-person interviews, and focused-group discussions are conducted for surveys. Data collection techniques include both open-ended and closed-ended questionnaires and semi-structured interviews. This study used probability sampling, which includes simple random sampling, and non-probability sampling, which includes purposive sampling, to collect the primary data of 400 participants from 12 unions of Savar Upazila. The secondary sources include books, articles, documents, journals, websites, reports, etc.

The study calculated the sample number using the formulas of Yamane (1967) and Krejcie & Morgan (1970) with a 5% statistical sampling error.

n =Of the 400 respondents, 384 were service users, and 10 were service recipients interviewed by several Savar Upazila unions. Furthermore, 6 Key Informant Interviews (KIIs) were conducted with experts, including the Chairman and UNO from Savar Upazila. Technical instruments have been applied to justify the data and ensure its validity for this study. It was

determined that the data were not normally distributed (following Kolmogorov-Smirnov and Shapiro-Wilk tests). Right after that, the value of skewness and kurtosis has been measured. This study also includes a Whisker boxplot, histogram, and Q-Q plot to identify the outlier and extreme observations in the dataset. Lastly, the missing values for the data set were determined by coding 999 and computing the series mean.

Findings and Analysis

Socio-Demographic Profile of the Participants

The study was conducted with data from 400 people living in the Savar Union. From Table 1, it is seen that most of the respondents are aged between 31-40, with a percentage of 48.5%. Of the participants, 43.25% had junior secondary-level educational qualifications. Among them, 52.25% are homemakers, and 89.25% are married. 93.25% of people belong to the Islamic religion. Almost half of the participants have a monthly income between tk. 1000 to tk. 5000.

Table 1: Socio-economic profiles of the participants (n=400)

_participants(n=400)			
Demographic Characteristics	<u>n (%)</u>	Mean	Standard
Age			Deviation
- 20-30	68 (17.0)	36.85	7.369
- 31-40	194 (48.5)		
- 41-50	138 (34.5)		
Educational Qualification			
- No Literacy	40 (10.0)		
- Primary	146 (36.5)		
- Junior Secondary Level	173		
- S.S.C.	(43.25)		
- H.S.C.	40 (10.0)		
- Honors' and above	1 (0.25)		
	0(0.0)		
Profession			
- Housewife			
- Garments Worker	209		
- Domestic Worker	(52.25)		
- Factory Worker	133		
- Others	(33.25)		
	35 (8.75)		
	15 (3.75)		
	8 (2.0)		
Household Size			
- 2-4			
- 5-7	167		

- 7 and above	(41.75) 214 (53.5)	5.08	1.762
	19 (4.75)		
Monthly Income	· · · · · · · · · · · · · · · · · · ·		
- No Income	42 (10.5)		
- 1000 to 5000	157		
- >5000 to 10000	(39.25)		
- >10000 to 15000	166 (41.5)	5642.50	3513.625
- >15000 and above	32 (8.0)		
	3 (0.75)		
Marital Status			
- Married	357		
- Unmarried	(89.25)		
- Widow	11 (2.75)		
- Divorced	23 (5.75)		
- Prefer not to say	9 (2.25)		
	0 (0.0)		
Religion			
- Islam	373		
- Hindu	(93.25)		
- Christians	25 (6.25)		
- Buddhists	1 (0.25)		
- Others	0 (0.0)		
	1 (0.25)		

Frequency of Service Delivery

Figure 1 shows that the study collected 60% of participants from 2021–2022, 30% from 2019–2020, and 10% from 2017–2018. So, it can be said that most respondents are from the recent cycle, and the involvement rate is increasing in the VGD program.

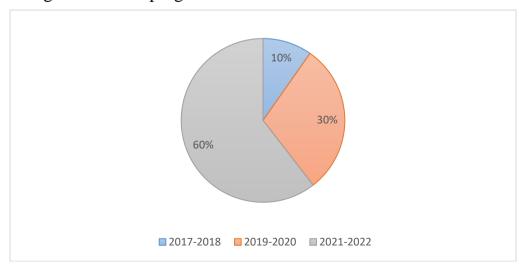


Figure 1: Service Recipients' Response Timeframe

Knowledge about the Application Procedure

Figure 2 shows that 59% of participants knew about the VGD program application procedure. Only 41% do not know about the application procedure because Union Parishad did their whole process. That is why they do not know about the application process.

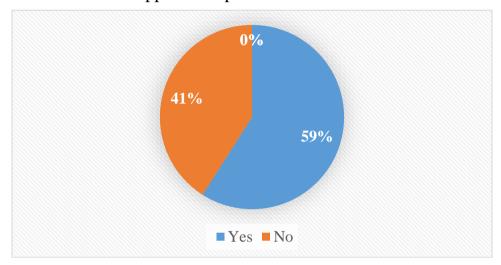


Figure 2: Application Knowledge Recipients' Response

One of the VGD recipients shared his opinion while taking the interview,

They are not familiar with the online VGD application procedure. They never faced the online application procedure for VGD enrollment. The chairman and members of the Union Parishad told them to give their NID certificate, passport-size photos, and relevant papers to the Union Parishad for VGD registration. They then receive VGD service for 24 months after the UP authority conducts the electronic application process and enrolls them. They never conduct online self-application procedures. UP conducts the whole procedure on their behalf.

Another recipient opined that.

Though they never conduct online self-application procedures, Union Parishad conducts the whole procedure on their behalf, but they know the whole VGD application procedure is conducted online. They only know it but do not know how the process is conducted. Only Union Parishad authorities know about the internal things.

The VGD program shows that people are not that familiar with the technology, even though it is online-based enrollment. Most participants (94.25%) knew about the VGD program from their union's chairman or members.

One of the VGD service recipients replied during an interview-

We do not need to do anything. The UP authorities gave us an application form for VGD. They just told us to fill out the form and submit our NID, passport-size photos, and other relevant papers. We

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submitted it. Then, after a few days, they called us and let us know that we were enlisted for VGD service and told us to collect our VGD card from UP. So, we have no idea about internal procedures.

One of the VGD service providers (KII) replied during an interview.

The government instructed us to ensure the application procedure. However, most of the VGD participants are illiterate. They do not even know about technology. So, we do the online application procedure ourselves so they don't get left out. We give them a manual application form. They must complete the form and submit their NID, passport-size photos, and other relevant papers. Then, we registered for them and selected the most vulnerable women who needed VGD. We do the application by UP authorities to make the VGD procedure smooth so that they do not have to face any difficulties.

Participant's Satisfaction on Benefits of VGD Program

In this study, the effectiveness of SPS on the VGD program is dependent on the responses of VGD recipients on whether they are getting VGD services correctly or not, their level of satisfaction, perceived usefulness, perceived ease of use, attitude towards using, and intention to use VGD services.

Table 2 reflects the positive response of participants in receiving different VGD services.

Table 2: Respondents' VGD benefits

Services	Yes	No
Services	n (%)	n (%)
Rice/ Wheat (30kg)	400 (100.0)	0 (0.0)
Skill Development		
Training on Income		
Generation Activities	323 (80.75)	77 (19.25)
(IGAs)		
Credit and Savings	400 (100.0)	0 (0.0)
Facilities	400 (100.0)	0 (0.0)
Vulnerable Group	224 (56.0)	176 (44.0)
Formation	224 (30.0)	170 (44.0)
Training on Livelihood	209 (74.5)	102 (25.5)
Development	298 (74.5)	102 (25.5)

Level of Satisfaction of VGD Recipients

Table 3 shows that VGD recipients' satisfaction depends on their perception of receiving VGD services and whether the VGD program solves their problems.

Table 3: Participants' Satisfaction

Services	SS	S	MS	D	SD
Services	(%)	(%)	(%)	(%)	(%)
Rice/ Wheat (30kg)	100.0	0.0	0.0	0.0	0.0
Skill Development Training on	0.0	72.25	27.25	0.5	0.0

Income Generation Activities					
(IGAs)					
Credit and Savings Facilities	2.5	62.0	35.5	0.0	0.0
Vulnerable Group Formation	0.0	25.0	57.5	17.5	0.0
Training on Livelihood Development	0.0	30.5	53.0	16.5	0.0

Strongly Satisfied= SS; Satisfied= S; Moderately Satisfied= MS; Dissatisfied= D; Strongly Dissatisfied= SD

According to getting rice or wheat (30 kg), all the respondents (100%) were strongly satisfied. For skill development training on income generation activities (IGAs), 72.25% were satisfied, 27.25% were moderately satisfied, and a few 0.5% were dissatisfied. For credit and savings facilities, 62% were satisfied among a total of 400 respondents; 2.5% were strongly satisfied, and 35.5% were moderately satisfied. According to the vulnerable group formation, 57.5% were moderately satisfied, 25% were satisfied, and 17.5% were dissatisfied. According to dissatisfied participants, vulnerable groups were never formed. For livelihood development training, 30.5% were satisfied, 53% were moderately satisfied, and 16.5% were dissatisfied. So, it is clear that people are more satisfied with getting rice or wheat. But for other services, either they are neutral or dissatisfied.

Table 4: Measuring Relationship of Satisfaction of VGD Program Participants in relation to Age, Educational Qualification, Marital Status, Household Size and Monthly Income

	Significance (P-value)						
Level of Satisfaction	Age	Educational Qualification	Marital Status	Household Size	Monthly Income		
Rice/ Wheat (30kg)	0.655	0.160	0.006*	0.000*	0.000*		
Skill Development							
Training on Income	0.000*	0.074	0.850	0.000*	0.062		
Generation Activities	0.000	0.074	0.050	0.000	0.002		
(IGAs)							
Credit and Savings	0.038*	0.115	0.245	0.000*	0.000*		
Facilities	0.036	0.113	0.243	0.000	0.000		
Vulnerable Group	0.000*	0.110	0.141	0.000*	0.000*		
Formation	0.000	0.110	0.171	0.000	0.000		
Training on							
Livelihood	*0000	0.060	0.277	0.000*	0.000*		
Development							

p = < 0.05

Firstly, Table 4 shows that there is no correlation between age and level of satisfaction with the effectiveness of the VGD program in Bangladesh. According to the chi-square test, P-value >0.05 for the variable of getting rice or wheat (30 kg) shows that age has no significant influence on the satisfaction level of getting rice or wheat (30 kg). So, the service of 30 kg of

rice or wheat in the VGD program is equally important for all women of all ages. On the other hand, the p-value < 0.05 shows that age significantly influences the satisfaction level for skill development training on income generation activities (IGAs), credit and savings facilities, vulnerable group formation, and livelihood development. The VGD program is not equally important for women of all ages. Secondly, there is no correlation between educational qualification and the level of satisfaction with the VGD program in Bangladesh. P-value > 0.05 for all the variables shown in the table means that educational qualifications do not significantly influence satisfaction. The VGD program is equally important for all women with different educational qualifications. Thirdly, there is no correlation between profession and level of satisfaction. P-value <0.05 for all the variables means that profession significantly influences the satisfaction level. The VGD program is not equally important for all levels of professionals. This program is more important for unemployed women than employed women. Fourthly, there is no correlation between household size and level of satisfaction. P-value <0.05 for all the variables shows that household size significantly influences the satisfaction level. The VGD program is not equally important for all sizes of households. This program is more important for women whose households are larger than those of other women. Lastly, there is no correlation between monthly income and level of satisfaction for all variables. P-value >0.05 for the skill development training on IGAs shows that monthly income does not significantly influence the satisfaction level of skill development training. The training on skill development and income generation activities (IGAs) of the VGD program is equally important for all women with different monthly incomes. However, on the other hand, p-value < 0.05 shown in the table for other variables means that the monthly income has a significant influence on the satisfaction level for skill development training on income generation activities (IGAs), credit and savings facilities, vulnerable group formation, and livelihood development, which means the VGD program is more important for low-income groups than high-income groups.

Service Process Simplification of VGD program

Table 5 shows the correlation between the Service Process Simplification (SPS) and components of the TAM model - perceived usefulness, perceived ease of use, attitude toward using, and intention to use the VGD program.

Table 5: Perceived Usefulness of VGD Program

Services	5 (%)	4 (%)	3 (%)	2 (%)	1 (%)
Online VGD application is easier for beneficiaries	0.25	52.5	47.0	0.0	0.0
Online VGD application has saved efforts of the VGD beneficiaries	2.5	94.0	3.5	0.0	0.0

Online VGD application has reduced cost of application	18.75	81.0	0.25	0.0	0.0
Online VGD application has saved time of the VGD beneficiaries	0.25	24.0	58.75	14.75	2,25
Overall VGD program is useful to meet daily needs of my family	3.25	91.25	5.5	0.0	0.0

Strongly Agree= 5; Agree= 4; Neutral= 3; Disagree= 2; Strongly Disagree= 1

Table 6 describes that p-value >0.05 for the variables of meeting daily needs for age, profession, and educational qualification, the null hypothesis failed to reject. So, age, profession, and educational qualification have no significant influence on the perceived usefulness of meeting daily needs. But on the other hand, p-value < 0.05 shown in the table indicates that the other variables have a significant influence on VGD services. So, age, profession, and educational qualification have a significant influence on the perceived usefulness of the VGD program for understanding the application procedure, receiving all the information from the government, knowing the technology, and making monetary transactions flexible. Household size has no significant influence on the perceived usefulness of the technology. For P value>0.05, the table shows that the monthly income has no significant influence on the perceived usefulness of meeting daily needs. Conversely, p-value < 0.05 shows monthly income has a significant influence on the other variables of perceived usefulness, which means the VGD program is more useful for low-income women than for the high-income women.

Table 6: Association of Demographic Profiles with Perceived Usefulness of VGD Program

	Significance (p-value)							
Perceived usefulness	Age	Educational Qualification	Profession	Household Size	Monthly Income			
Online VGD								
application is easier for	0.000	0.005	0.000	0.115	0.223			
beneficiaries								
Online VGD								
application has saved the efforts of the VGD	0.741	0.013	0.000	0.000	0.140			
beneficiaries								
Online VGD application has reduced the cost of the application	0.092	0.044	0.084	0.323	0.067			
Online VGD application has	0.000	0.000	0.000	0.000	0.000			

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saved time for the VGD beneficiaries Overall, the VGD program is					
helpful in meeting	0.534	0.088	0.005	0.000	0.303
the daily needs of my family					

Table 7 states participants' responses on the perceived ease of use of the VGD program.

Table 7: Perceived Ease of Use of VGD Program

Services	5	4	3	2	1
	(%)	(%)	(%)	(%)	(%)
I found available information about the VGD program from the government	1.0	56.75	42.25	0.0	0.0
I found a transparent credit and debit money process	6.75	34.5	58.75	0.0	0.0
I found the monetary transaction flexible	1.75	55.25	43.0	0.0	0.0
I found the overall procedure of VGD simple	0.75	56.5	42.75	0.0	0.0

Strongly Agree= 5; Agree= 4; Neutral= 3; Disagree= 2; Strongly Disagree= 1

From Table 8, p-value >0.05 for the variable of easy VGD enrollment application shows that the null hypothesis failed to reject. So, age, educational qualification, profession, and monthly income do not significantly influence the VGD application process. So, the VGD program makes applications easy for women of all ages, educational backgrounds, professions, and incomes. On the other hand, the p-value < 0.05 shows that age has a significant influence on the perceived ease of use in the case of the VGD program because there is no additional payment for getting the VGD card, no interference during application, easy money transactions, and VGD enrollment with others' assistance. Conversely, a P-value <0.05 means that that profession significantly influences the perceived ease of use of the VGD program. VGD program services in terms of ease of use differ from profession to profession. P-value >0.05 in the table for no interference during application shows that household size has a significant influence on perceived ease of use. In addition, the p-value < 0.05 shows that monthly income has a significant influence on the other variables of perceived ease of use, which means the VGD program's ease of use varies according to monthly income.

Table 8: Association of Demographic Profiles with Perceived Ease of Use of VGD Services

	Significance (p-value)						
Perceived ease of use	Age	Educational Qualification	Profession	Household Size	Monthly Income		
Availability of VGD information	0.000	0.000	0.000	0.000	0.366		
Transparent credit and debit money process	0.001	0.000	0.000	0.000	0.000		
Flexible monetary transaction	0.561	0.190	0.037	0.006	0.066		
simple overall VGD procedure	0.037	0.000	0.000	0.910	0.000		

Table 9 shows the participants' responses to attitudes toward using the VGD program.

Table 9: Attitude toward Using VGD Service

Services	5 (%)	4 (%)	3 (%)	2 (%)	1 (%)
Online application for VGD is good	0.0	26.25	72.75	1.0	0.0
VGD Application is user friendly	0.5	59.5	40.0	0.0	0.0
VGD application assessment is transparent	1.25	48.25	48.0	2.5	0.0

Strongly Agree= 5; Agree= 4; Neutral= 3; Disagree= 2; Strongly Disagree= 1

From Table 10, p-value < 0.05 shows that age has a significant influence on the attitude towards using the VGD program. The attitude towards using the VGD program is equal for women of all ages. P-value > 0.05 shows that educational qualification does not significantly influence attitude towards using. P-value > 0.05 for the variable of interest increasing towards electronic enrollment shown in the table means that profession has no significant influence on attitude towards using. The attitude towards using the internet is equal for all women. P-value <0.05 shows that profession significantly influences attitude towards using. VGD program services use attitudes that differ from profession to profession. The P-value <0.05, as shown in the table, shows that household size significantly influences attitude towards using. P-value >0.05 shows that the null hypothesis failed to be rejected. All women with different monthly incomes have the same attitude that online applications are suitable in terms of their attitude towards using. Conversely, p-value < 0.05 shows that monthly income significantly influences the other variables of attitude towards using VGD.

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Table 10: Association of Demographic Profiles with Attitude Toward Using of VGD Program Services

	Significance (p-value)					
Attitude toward using	Age	Educational Qualification	Profession	Household Size	Monthly Income	
Online applications are good	0.848	0.166	0.000	0.000	0.683	
VGD Application is user-friendly	0.136	0.000	0.000	0.031	0.023	
VGD application assessment is transparent	0.570	0.000	0.000	0.000	0.029	

Table 11 states the participants' responses to intention to use VGD service.

Table 11: Intention to Use VGD Service

Services	5	4	3	2	1
Services	(%)	(%)	(%)	(%)	(%)
I tend to get accustomed to the existing online procedures	0.0	0.75	92.0	7.25	0.0
I tend to use the VGD program as a tool for empowerment	6.25	92.5	1.25	0.0	0.0
I show my interest in electronic enrollment in the VGD program	0.0	1.5	90.5	8.0	0.0

From Table 12, p-value < 0.05 shows that age, profession, and educational qualification significantly influence the intention to use the VGD program. Regarding profession, education level, and intention to use VGD programs, the p-value > 0.05 for the variable of women's skill is enhancing. Every woman's intention is the same towards skill enhancement. P-value <0.05 shows that household size significantly influences attitude towards using. The intention of using the VGD program differs from household to household because larger households are more likely to use the program. Lastly, there is no correlation between monthly income and intention to use. P-value >0.05 in the table shows that monthly income has no significant influence on intention to use.

Table 12: Association of Demographic Profiles with Intention to Use VGD Service

	Significance (p-value)						
Intention to use	Age	Educational Qualification	Profession	Household Size	Monthly Income		
I tend to get accustomed to the existing	0.085	0.084	0.965	0.119	0.933		
online procedures I tend to use	0.002	0.001	0.505	0.119	0.733		
the VGD program as a tool for empowerment	0.046	0.817	0.000	0.868	0.817		
I show my interest in electronic enrollment in the VGD program	0.091	0.000	0.000	0.951	0.000		

Challenges to Avail VGD Service

A total of 400 participants were involved in the surveys. My observations on some common challenges participants face in availing of the VGD program are highlighted here. Most participants agreed that they faced no challenges in availing the services. According to them, the service procedure for the VGD program is very smooth and flexible. They have all the facilities under the VGD program, and the service providers cooperate with them. There were no interferences, additional payments, or intermediaries when availing of the service. A few participants stated that sometimes vulnerable people do not get the service they need most. There is a lack of a complete database on impoverished areas, a lack of coordination among departmental contributions, insufficient resources, a lack of sustainability, inadequate monitoring and evaluation, imprecise targeting, inadequate coverage, and regional disparities in political interest that affect the services. For these reasons, the service providers cannot reach them. So, sometimes, many vulnerable people get excluded from the program.

One of the VGD recipients shared his opinion during the interview.

Recipients have to maintain good relations with the chairman and members of the Union Parishad. Sometimes, they need to do some work for the UP chairman and members for enrollment in the VGD list. If they do not maintain a good relationship, they are not approved for the VGD list after eligibility. While properly capable people maintain good relationships, they are listed in the VGD program. Internal corruption,

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political distribution schemes, and regional disparities are significant challenges to VGD service availability. As a result, sometimes eligible candidates do not get the VGD service they need most.

Also, a few participants who belonged to the age group 41–50 stated that some of them are diabetic patients, so rice is prohibited for them. Though the Union Parishad was instructed to give rice or wheat, wheat has never been provided; always, rice has been provided to the VGD cardholders. So, for those who have diabetes, this rice isn't that beneficial for them.

Discussion

Perceived Usefulness of the VGD Program

The study found that the p<0.05 makes the perceived usefulness of the VGD program very low. Except for some minor variations, the age distribution also affects the usefulness of the VGD program, especially regarding knowledge and using technology. The profession does not affect the VGD program. Monthly income is considered to be an important indicator of poverty. 39.3% of service recipients whose income was between TK. 1,000 and TK. 5,000 and 41.5% of service recipients whose income was between TK. 5,000 and TK. 10,000 found the VGD program more valuable than others. The study findings suggest that a significant majority of beneficiary households have been able to increase household income. This implies that in terms of income poverty, beneficiary households found VGD more beneficial in meeting their daily needs, knowledge, monetary transactions, etc. Mannan and Ahmed (2012) show that monthly income and age similarly impact whether people feel the VGD program is helpful. Beneficiary households live on a monthly income that does not exceed Tk. 2000, found the VGD program more beneficial in meeting their everyday necessities.

Perceived Ease of Use of VGD Program Services

The procedure for choosing recipients is a crucial aspect of the VGD program. The study found that 3.9% of recipients did not face any interference, 0.48% did not have to pay additional fees, and 30.25% were neutral about taking others' assistance. Individuals who are not impoverished and individuals who fail to meet the selection criteria sometimes get chosen. Instances exist where individuals are chosen based on their connection to the officials responsible for implementation. Several people were required to pay a fee to enroll in the program. Recipients are being chosen based on political considerations by the chairman or members of the UP. As a result of political complexities, VGD cannot offer consumers easy access to its services. According to independent indicators, p< 0.05 negatively affects the perceived ease of use of the VGD program. Pradhan and Sulaiman (2014) showed a parallel relationship with this study, namely that the exclusion of eligible impoverished women results from insufficient coverage and funding and political bias within the selection committee.

Attitude toward Using the VGD Program

According to the independent indicators, the study found that p<0.05 makes the attitude toward using online enrollment in the VGD program very low. Ahmed and Bakhtiar (2023) found that many beneficiary households still have low incomes, live in poor housing conditions, and suffer from food inadequacy for a significant part of the year. That is why they depend on the UP chairman and members for the VGD enrollment. Their main priority is earning rather than education. This makes them feel disinterested in electronic enrollment in the VGD program.

Intention to Use VGD Program

The study found that 92% were neutral about the statement that they get accustomed to the existing online procedures, and 7.25% disagreed. The major factors in using the VGD program are monthly income and educational qualification. P-value < 0.05 showed that monthly income significantly influences intention to use, meaning income-wise intention gets changed to use VGD services, but they are not accustomed to the online procedure. Because they did not do self-applications online. Upazila Parishad authorities complete the application procedure on behalf of them. Chowdhury (2022) depicted similar findings: recipients intend to use the VGD program but not through online enrollment alone.

Service Process Simplification of VGD Program in Bangladesh

The study (p< 0.05) demonstrated that the application of Service Process Simplification (SPS) by service receivers in the VGD program was highly ineffective. The study participants followed the traditional registration process in order to utilize the services provided by the Union Parishad. Participants were requested to provide their perspectives on the rationales behind distributing VGD cards to those who did not meet the eligibility criteria. The main obstacles mentioned by respondents include nepotism, selection committee prejudice, influence from local elites, limited coverage, and so on. The study also found that the VGD program has effectively handled the poverty situation in the recipient homes. The family's food security has dramatically improved due to enhanced earning and employment prospects. The prevalence of households experiencing chronic food shortages has dramatically diminished. Currently, most families can have three meals per day during most months of the year. In contrast, these families lacked sufficient access to food in the past and often experienced chronic undernourishment. Sabbih and Coudouel (2021) also examined the parallel results on the effectiveness of the VGD program in Bangladesh. He showed that the Vulnerable Group Development (VGD) program is highly effective as a social safety net. However, the program also faces specific issues, such as concerns regarding its targeting effectiveness.

Conclusion

The study's overall findings reveal that service receivers' adoption of Service Process Simplification (SPS) in the VGD program was highly inefficient and unsatisfactory. However, the progressive steps of SPS implication in this regard by the government of Bangladesh are praiseworthy. The government should prioritize the implementation of the digitalization of the Vulnerable Group Development program and reduce its reliance on the Union Parishad to facilitate the adoption of electronic enrollment among the population. The findings of the study show a doorway for the policymakers to give special attention to ensuring transparent mechanisms to accurately identify the most vulnerable individuals, developing user-friendly platforms to reduce dependency on Union Parishad, and enhancing program delivery through better monitoring and evaluation. To support the digital transition of the VGD program, the government should invest in awareness building and training to empower beneficiaries so that Service Process Simplification (SPS) is ensured properly. In doing so, the government can collaborate with local institutions to conduct different public campaigns and training sessions that will familiarize beneficiaries with the digital processes of the VGD program and ensure the effectiveness of the program. As Bangladesh is on the verge of LDC graduation, it is high time to accelerate the present status of the VGD program to reach the apex of effective implementation of SPS.

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