

A study of the decentralised administrative arrangements between the central and local governments in Bangladesh during the COVID-19 pandemic crisis

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Abstract

Purpose – Decentralised administrative arrangements and the active function of local government organisations are essential to tackle crisis effectively. Using Bangladesh as a case study, this paper examines the central and local government administrative arrangements during COVID-19 pandemic.

Design/methodology/approach – This study applies qualitative content analysis and interviews to explore the local government's role in Bangladesh's COVID-19 management by interviews of 18 participants including government officials, experts, non-government organisations (NGOs) representatives, and the general public. This paper also analysed academic papers, policy documents and other publicly available documents, including newspaper reports.

Findings – The Constitution of Bangladesh intensified the active participation of local government in each administrative unit through decentralised administrative management. This paper however reveals that the administrative arrangement during the COVID-19 pandemic in Bangladesh was primarily a centrally led system. The local government was not sufficiently involved, nor had it integrated into the planning and coordination process. This indicated the absence of active decentralised administration.

Originality/value – This study fills the research gap of the administrative pattern and local relations in COVID-19 management by exploring the local government's role during the catastrophic situation and highlights the importance of decentralised administrative actions in managing the crisis.

Keywords Government administration, Local governments, Decentralisation, Crisis management, Bangladesh

Paper type Research paper



Introduction

The worldwide health catastrophe caused by COVID-19 pushed the world to a test (Dzigbede *et al.*, 2020; Li and Song, 2022). Though it is a health concern, nothing is outside the administrative and governance procedure; thus, it was also a test of administrative competence for countries. The epidemic had devastating global impact on government, governance and socio-economies (Greer *et al.*, 2020; Gauld, 2023; Farid Uddin, 2021). Because of the extremely high transmission of COVID-19 cases, governments in countries carried broad measures to battle the spread of the virus. Nevertheless, the lack of sufficient governmental actions also led to a surge in contamination rates and generated disastrous circumstances in some countries. Countries that neglected to instigate collaborative administration actions experienced more challenges and harsh situations (Anwar *et al.*, 2020; Biswas *et al.*, 2020; Gauld, 2023). It was evident that decentralised administrative arrangements and strong collaboration between central and local governments were essential to combat the COVID-19 crisis (Dutta and Fischer, 2021; Dzigbede *et al.*, 2020). An epidemic like COVID-19 is an inimitable crisis, and it is true that it may not happen often, nor it is an exclusive crisis. However, decentralised administrative actions and coordination between central and local governments are essential to tackle any crisis. This study looks at the central and local government administrative interactions and investigates the local government's involvement in managing COVID-19, using Bangladesh as a case study.

Along with the central government's key responsibilities, the role of local governments is considerably associated with the successful management of disasters (Dutta and Fischer, 2021; Dzigbede *et al.*, 2020). The hypothesis of this study is that the lack of decentralised administrative roles between central and local governments augmented COVID-19 hardships. It also assumes that a strong collaborative partnership between the top and bottom-level government tiers could have helped alleviate the COVID-19 challenges. The research questions include: 1. What is the administrative setup of the Bangladesh government's COVID-19 emergency response plan? 2. How intense are the local government units involved in the COVID-19 response plans?

Investigating the local government's role in managing COVID-19 has significant scholastic and practical significance. Regardless of socio-economic status, all countries face various crises or disasters. Exploring the COVID-19 pandemic situation can serve as an outline, and the lessons learned can help solve challenges and prepare for the future. Most importantly, countries that are surrounded by numerous limitations and difficulties, specifically developing countries, often struggle to manage disastrous situations. The experiences from COVID-19 are helpful for these countries to learn the lessons and look for evidence-based solutions through strong administrative collaboration. Furthermore, this study enriches existing research on COVID-19 by adding new perspectives. For instance, Farazmand *et al.* (2022) signify the government's initiatives to reduce COVID-19 hardships and raise concerns about transparency, accountability, and citizen participation. The research argues that a robust central-local partnership can establish transparency and accountability and ensure wider citizen involvement with government activities.

In addition, there is a considerable amount of research on COVID-19 from various policy and political perspectives (Li and Song, 2022; Greer *et al.*, 2020; Farid Uddin, 2021; Hossain, 2021). However, there is a scarcity of studies exploring the central-local government relations in COVID-19 strategic actions. Research on decentralised government actions is critical for academics, researchers and policymakers. This study fills the gap by exploring the local government's position during COVID-19 and highlights the local government's importance in managing the crisis.

Research methods

This study has applied the qualitative method with content analysis and interviews to investigate the local government's role in COVID-19 management and strategic approaches in Bangladesh. It also analysed academic papers, policy documents and other publicly available documents, including newspaper reports, to collect fundamental related information.

Interviews were conducted to obtain the perceptions of various stakeholders. Electronic tools have become a popular way to gather data conveniently during crises (Dahlin, 2021). The authors used electronic devices including e-mail and phone calls to reach the targeted informants. Regarding the size of samples, Lincoln and Guba (1985) endorse between 12 and 20 interviews for qualitative research. Other researchers do not suggest particular figures but recommend an adequate number (Onwuegbuzie and Leech, 2007). In this study, around 50 respondents across government officials, experts, non-government organisations (NGOs), and the general public were invited, of which 18 agreed to participate (Table 1).

The interviewees were e-mailed and asked to respond to structured questions about the COVID-19 state of affairs and the government's administrative positions. The interviewees are selected by using personal and peer networks, applying the snowballing method. Sixteen interviews were conducted using e-mail, and two were over the phone (15-30 minutes). The confidentiality of the interviewees was strictly followed by adopting codes.

The concept of government

Government is an ancient term, an entity of a group of citizens with authority to govern a state. MacDonald (1961) explains government as bestowing power to one or many leaders and accepting and trusting them to govern according to the by-law. Besides, Badach and Dymnicka (2017) define government as the official and administrative organisation and a legitimate body exercising power and authority over the people (Fasenfest, 2010). With the changing pattern of society, the patterns of governments are also changing. The transformation of the government's role in the moving social, political, and economic contexts is a big challenge, and decentralisation is often considered the most appropriate measure to modify the role of government (Saito, 2008). Decentralisation is a reorganisation that changes the hierarchical government style of top-down management and delegates political decision-making authority to local-level small-size self-government units (Faguet, 2014; Bardhan, 2002).

Local government is an invention of decentralisation and a devolved administrative setup (Chikerema, 2013). It is considered a suitable form of decentralisation to ensure broader participation, growth-based redistribution, citizen-centric policies and strong governmental responsiveness (Saito, 2008). Local government is a formal institution operated by the elected representative to deliver a wide variety of services at the local level (Aminuzzaman, 2010). It is

<i>Groups</i>	<i>Background</i>	<i>Number of interviewees</i>
One	Politicians (Central politicians and elected local government representatives)	4
Two	Stakeholders (Local government experts and non-government organization representatives)	5
Three	Government officials (Field administration)	4
Four	Citizen	5
Total		18

Source: By authors

Table 1.
Summary of
interviewees

a semi-autonomous political institution with a small or large capacity to exercise political power (Kumar Panday, 2006). It contains a small geographical area that formulates an agenda, vision, and course of action to ensure advancement and welfare (Frantzeskaki *et al.*, 2014). Local government is crucial in establishing local-level democracy and ensuring citizen engagement in the government's development plans (Bhuiyan, 2011).

However, the government's nature, roles, structure, and responsibilities vary from country to country, and central-local relations are determined based on integrating their works and autonomy (Kumar Panday, 2006). In the federal system of government, the central government works at the centre level or nationwide, while the sub-national government works at the province or state level and the local government at the community level (Kin, 2009). In the unitary system, the central government operates at the national level, and local governments operate at the sub-national level (OECD/UCLG, 2016). Central and local governments share responsibilities to accomplish intergovernmental matters (Amnå and Montin, 2000). Local government is a fundamental component of government functionalities while local authorities carry out local services; however, the central government controls and assigns local authorities' functions (Aminuzzaman, 2010; Kumar Panday, 2006; Bhuiyan, 2011).

Bangladesh is a developing country in South Asia, with 166.5 million people (August 2022) (BBS, 2022) and 148,460 square kilometres. It has a historically instituted strong local government system (Khan, 2016; Bhuiyan, 2011). The Bangladesh Constitution (Ministry of Law, 1972) safeguards the public-oriented authority system and stresses empowered local government (Article 59.1 and Article 60). However, in reality, the administrative arrangements in Bangladesh have never been genuinely decentralised and local governments are not empowered and supported by the central government (Khan, 2016). In various countries, local governments have played substantial leadership and managerial role in managing the COVID-19 catastrophe (Dzigbede *et al.*, 2020; Greer *et al.*, 2020; Dutta and Fischer, 2021). Bangladesh's local government also has broad experience and leadership capacity in managing various disasters (Khan, 2016). It could play an active role in caring for vulnerable grassroots citizens, predominantly in remote areas. The COVID-19 pandemic administrative actions again reflected the conventional top-down administrative approach and missed the proper utilisation of decentralised administrative arrangements. Thus, the involvement and role of the local government in Bangladesh in managing COVID-19 deserve significant attention. The literature review informs this study in understanding the importance of decentralised administration and realising the interrelation between central and local governments.

Administrative arrangements in Bangladesh

Bangladesh has a legislative and unitary style of government system. The Government of Bangladesh has two sets of administration: central administration and field administration. The central administration is based mainly in the Bangladesh Secretariat, Dhaka, and works under the Cabinet Division. The Cabinet Division is the Prime Minister's executive office, which facilitates smooth business operations in Cabinet Ministries and assists in decision-making by ensuring coordination between ministries and departments. The field administrative setup of the Bangladesh Government is divided into several Divisions, which are divided into numerous Districts in the country. Then, every District is again split into several Upazilas (sub-districts), the Upazilas are segregated into Unions, and every Union is apportioned into 9 Wards (a Ward is a small area or a suburb).

The Cabinet Secretary is the head of the Cabinet Division, and the Secretary is the head of each Ministry or Division within vital Ministries. Besides, some subservient higher

administrators work under the Secretary at each Ministry or Division, such as Additional Secretary, Joint Secretary, Deputy Secretary, Senior Assistant Secretary and Assistant Secretary. Field Administration is scattered around various administrative entities, such as the Division, the District and the Upazila or Thana, and the Union, a local government entity comprising different villages. In field administration, a Commissioner leads the organisational unit of the Division. A Deputy Commissioner (DC) distributes government policy in their district administrative unit in backing with the other junior civil servants. Finally, the Upazila Nirbahi (Executive) Officer (UNO) operates the Upazila or Thana-level administrative unit. The Ministry of Public Administration (MoPA) positions and monitors the central and field administration officers. The Prime Minister is the existing Minister and is in charge of the Ministry of Public Administration with backing from a State Minister. The Ministry of Local Government, Rural Development (LGRD) and Cooperatives regulates local governments (Figure 1).

Bangladesh has a decentralised administrative system operated by local government institutions and headed by elected public representatives. The local governments are organised into rural and urban clusters; the rural local governments include Union Parishads, Upazila Parishads, and Zila Parishads. The urban local government includes City Corporations and Municipalities (Pourashavas) operating in the city regions. The City Corporations, Pourashavas, and Union Parishads comprise a few Wards (a small area).

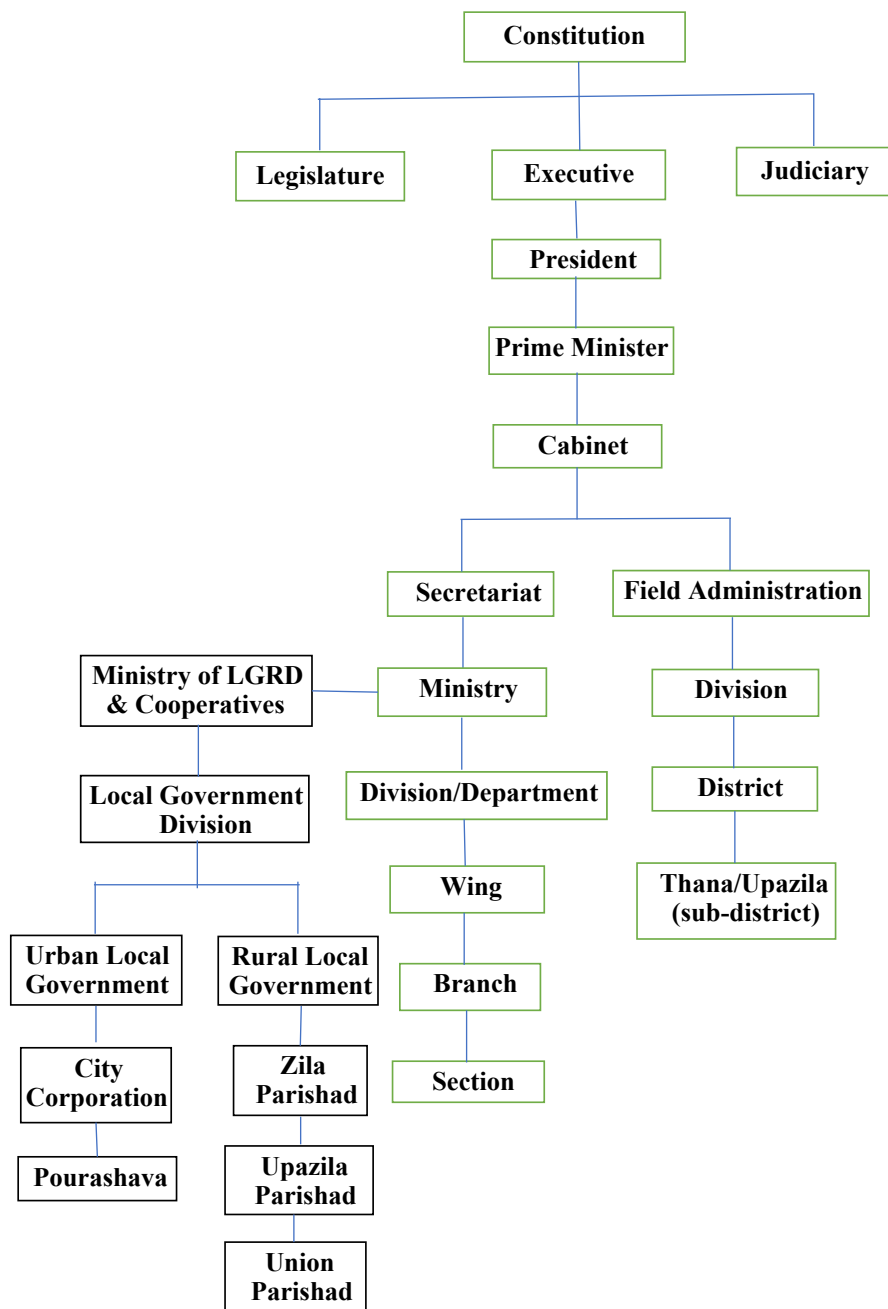
Bangladesh's government administrative arrangements in managing COVID-19

The first coronavirus incidents were confirmed in Bangladesh on 8 March 2020. On 23 March 2020, the government announced that all public and private offices would be closed from 26 March to 4 April 2020 to control the spread of the virus. By that time, Bangladesh started to experience community transmission on 25 March 2020. The number of COVID-19 cases spread to broader areas, and on 5 May 2020, the Bangladesh government confirmed that the contagious virus had spread all over the country.

The Bangladesh government announced the “National Preparedness and Response Plan (NPRP) for COVID-19, Bangladesh” on 10 March 2020 based on the World Health Organisations (WHO)'s “Global COVID-19 Preparedness Plan” issued in February 2020 and the “WHO Country Readiness Checklist”. This Preparedness Plan of WHO is an essential guide for developing a COVID-19 national plan in Bangladesh. The key aim of the plan was to control coronavirus and manage COVID-19 administrative activities in Bangladesh. It also specified preparedness, response activities, and priority issues to lessen the effect on well-being and the economy. Following the Response Plan, various committees were established at the national and local levels. However, no members from the local governments were included in the national committee, and minimal local government members were included in the local-level committees (Table 2).

In addition to the National Response Plan, the Health Services Division of the Health and Family Welfare introduced the “Bangladesh Preparedness and Response Plan for COVID-19 (BPRP)” in July 2020 (MoHFW, 2020b). This Response Plan outlined the formation of various committees (Table 3), their purposes, areas of exertion, and significant actions essential to breaking the spread of the virus, identifying the infectious people rapidly, coordinating the situations effectively, and controlling the pandemic as guided in the International Health Regulations 2005.

Furthermore, to prevent the coronavirus from spreading and manage the situation, the MoHFW formed various local government committees in March 2020 (Table 4). However, these committees' key objectives were to work under the direction of the National Committee on Coronavirus to create awareness, take the initiative on financial and logistics issues, and provide information to the National Committee on Coronavirus.



Source: By authors

Figure 1.
Structure of
governments in
Bangladesh

Committees	Committee composition	Local government's representation
National Committee for Prevention and Control of COVID-19	<ul style="list-style-type: none"> - Chairperson: Minister of MoHFW - Member Secretary: Secretary (Health Service Division), MoHFW - Other members: 30 members from other government departments, health professional associations, and donor agencies 	No member from elected local government units.
National Coordination Committee for Prevention and Control of COVID-19	<ul style="list-style-type: none"> - Adviser: Chief Physician of Prime Minister - Other members: 26 members from other government departments, health professional associations, and donor agencies 	No member from elected local government units.
National Technical Committee for Prevention and Control of COVID-19	<ul style="list-style-type: none"> - Twenty-four members from other government departments, health professional associations, and donor agencies 	No member from elected local government units.
Committee at Division Level for Prevention and Control of COVID-19	<ul style="list-style-type: none"> - Chairperson: DC, Member - Secretary: Divisional Director, Health - Other members: ten members from other government departments' field administration units 	No member from elected local government units.
The committee at District Level for Prevention and Control of COVID-19	<ul style="list-style-type: none"> - Chairperson: DC - Member Secretary: Civil Surgeon - Other members: 11 from other governmental departments field administration units, and two local government representatives 	Only two members from the vast elected local government units: Chairman Sadar Upazila Parishad and Mayor, Sadar Municipality. Besides, the Chairman of Zila Parishad acts as Advisor along with the Member of Parliament
The committee at Upazila Level for Prevention and Control of COVID-19	<ul style="list-style-type: none"> - Chairperson: UNO - Member Secretary: Upazila Health and Family Planning Officer - Other members: seven members from other governmental departments' field administration units and one local government representative. 	Only one member from the massive elected local government units: the Municipality Mayor

Source: Adapted from [MoHFW \(2020b\)](#)

Table 2. Structure of the committees and the role of local government in the National Response Plan

Committee	Composition
High-Level Multi-Sectoral Coordination Committee Sub-national multi-sectoral COVID-19 committees	Headed by the Minister for MoHFW, who advises the Prime Minister's Office on multi-sector intrusions to lower the spread of the virus. Subnational multi-sectoral COVID-19 committees at each Division, District, Upazila, City Corporation, Municipality, and Union Parishad manage and implement government advice.
National Technical Advisory Committee National Public Health Coordination Group	High-level National Technical Advisory Committee comprised of government and independent specialists to guide government policies. An 8-member national stage public health coordination group, i.e., one member for each of the eight divisions of Bangladesh, has been formed by MoHFW to manage the COVID-19 actions at the division level.

Source: Adapted from [MoHFW \(2020b\)](#)

Table 3. Committee's structure and role of local governments in the Bangladesh Response Plan

Types of Local Government	Local Government Units	Composition	Role of local governments
Urban Local Governments	City Corporation	<ul style="list-style-type: none"> - President: Mayor of the City Corporation - Member Secretary: Chief Health Officer of the City Corporation - Other members: eight members from various government departments 	To perform the guidance of the National Committee on Coronavirus; build consciousness, initiate financial and logistics support, and notify COVID-19 information to the National Committee on Coronavirus.
	Pourashavas	<ul style="list-style-type: none"> - President: DC - Mayor serves as a member of the COVID-19 Prevention Committee at the district level and a member of the Upazila committee under the Presidentship of the Upazila Nirbahi Officer 	
Rural Local Governments	Zila Parishad	<ul style="list-style-type: none"> - District Commissioner as a President - Civil Surgeon as Member Secretary - 9 other members from various government departments, including the Mayor and Chairman of the Sadar Upazila Parishad 	
	Upazila Parishad	<ul style="list-style-type: none"> - Upazila Nirbahi Officer as a President - Upazila Health and Family Welfare Officer as Member Secretary - 8 other members from various government departments, including the Mayor of that Upazila Parishad 	
	Union Parishad	<ul style="list-style-type: none"> - Union Parishad Chairman as President - Union Parishad Secretary as Member Secretary - Union Parishad Members as Member 	

Source: Adapted from Barishal District (2020), MoHFW (2020a), MoPA (2020)

Table 4.
Local government committees formed by MoHFW to assist the National Committee

Some existing national policies and laws were also applied during the COVID-19 disaster. For example, Bangladesh's Communicable Diseases (Prevention, Control, and Eradication) Act 2018 assisted in stopping, controlling, and eradicating COVID-19 virus infection and helped generate people's consciousness. In addition, the National Health Policy (NHP) 2011 was applied to set priorities, distribute resources, and ensure the healthcare needs of the citizens.

An analysis of central-local collaboration in COVID-19 administrative actions

National Health Policy identified 39 strategies to achieve better health services. Strategy 21 of the NHP emphasises the importance of incorporating local governments to ensure health

services to the broader people. However, the health system in Bangladesh is surrounded by various challenges (World Health Organization, 2015). This section evaluates the COVID-19 administrative actions by analysing the interviewee's perception of this study.

When COVID-19 struck Bangladesh, the Government was not sufficiently equipped to cope with the pandemic. Without a coordinated managerial approach, Bangladesh faced challenges in testing infected people, treating patients, and ensuring adequate protective measures, and as the days went by, bitter battles were evident in Bangladesh's COVID-19 management system. Consequently, COVID-19 worsened, and the virus spread throughout the country. One interviewee, who is a local government expert and academic, said,

The government did not have an effective policy. The number of COVID-19 infections has been on the rise in the country in recent days. The so-called lockdown was not effective, and the government failed to implement social distancing. Central and local governments did not have proper coordination. Due to a lack of coordination, the government could not stop community transmission.

The Constitution of Bangladesh strongly admits the importance of local governments, and local government is an inevitable organisational element (Aminuzzaman, 2010). Local government was expected to play a constructive role during the COVID-19 crisis (Dutta and Fischer, 2021). However, local governments in Bangladesh played a limited role in awareness building, relief distribution, and pre and post-lockdown responsibilities (Sohel *et al.*, 2022). Bangladesh's coronavirus management was primarily a centrally dominated approach, and the local government was not sufficiently involved (Table 2). The absence of decentralised administrative tasks and responsibilities was a fundamental problem for collaboration between the central and local governments. One interviewee, who is a Union Parishad Chairman, stated,

Government has been handling the COVID situation centrally. The local government is working as a separate entity. Sometimes, the government gives help packages for local people, which is not sufficient for all. The administration has the central authority to tackle COVID situations all over the country. So, the government plan has not been successful all-time.

The introduction of the local government is the remoteness of central authority, sharing the state's responsibility and a means to create a more reactive and effective government action through a decentralised administrative system (Bardhan, 2002). The local governments are more suitable than the central government for providing public services to the people far from the central government or their field administration (Saito, 2008). Bangladesh's National Preparedness and Response Plan for COVID-19 involved central and local administration amply in constructing the national and local level response committees. However, the local government had not integrated into the planning and coordination point. There was no member from elected local government units in the National Preparedness and Response Plan, which had three national and divisional committees. Besides, there were around 50-100 local government units at the District and Upazila level; however, the District and Upazila level National Response Plan incorporated only 2 and 1 members, which reflected poor local engagement. One citizen interviewee said,

As the central government has been dealing with this situation by its bureaucrats, i.e., UNO, SP (Superintendent of Police), DC and Secretary, there is very little scope for the local government, people's representatives as well. But I think local governments can contribute from their area and capacities, which will help face these challenges. However, in Bangladesh, we cannot see this scenario!

Local governments are the leading service sources to local people and initial respondents in times of catastrophe (Dzigbede *et al.*, 2020; Dutta and Fischer, 2021). In a time of crisis, it is essential to get accurate data to initiate the necessary actions. The Bangladesh government's

coronavirus numbers did not represent the exact COVID-19 condition as the government database only reflected the cases that came to the hospitals with COVID-19 signs. The individuals who died before diagnosis were not counted as COVID-19 deaths; many people who died with COVID-19 signs throughout the nation remained out of the record (Maswood, 2020). A contributor to the Bangladesh government's COVID-19 National Technical Advisory Committee claimed in Maswood (2020) that "the government's claim of 1.41 percent fatality rate does not represent the actual fatality rate. It is surprisingly low, and the rate misrepresented the actual scenario." To make a responsive plan, the representation of accurate information is essential. In this circumstance, local governments could collect actual data on COVID-19 infectious people, which would be very supportive for the administration of the pandemic situation.

As vital local influencers, local government units could also play a leading role in the risk prevention and communication stage. However, the local government institutions were not involved in the administrative risk communication process. One interviewee, who is a government officer positioned at the field administration, said,

The role of local governments in Bangladesh has been crucial in the lowest tier of public administration for every reason. The importance of the local government has been significant in every emergency of Bangladesh.

Central governments are frequently criticised for being too far and detached from the wider general population, and local governments are often believed to be essential to bringing about the country's aspirations, both egalitarian and progressive (Saito, 2008). Citizen confirms their participation in the government system through local government organisations (Khan, 2016). In a time of crisis, the role of government units is essential in implementing central government policies. Bangladesh has roughly 10 million people who work in various countries as migrant workers (Chowdhury and Chakraborty, 2021). As soon as the global economy had been knocked intensely by the COVID-19, before Bangladesh shut down its borders in March 2020, over half a million people came back home; instead of isolating themselves, they were roaming around the country, meeting friends and families, attending communal crowds (Anwar *et al.*, 2020; Chowdhury and Chakraborty, 2021). The government was unsuccessful in launching a well-operated isolation system, and the local administrations struggled to keep the connection of the communal spreads of the virus from the returned travellers, and fear dispersed across the community; subsequently, the COVID-19 dispersed quickly to the entire population (Anwar *et al.*, 2020). MoHFW formed various local government committees in March 2020 (Table 4); however, their involvement mainly was to implement the direction of the national committees. The local government had not been given sufficient authority to initiate independent actions to enforce lockdown, isolation, and other preventive measures. A local government expert interviewee said,

Local government bodies and representatives should be given the leadership role in implementing the programs. These bodies would have achieved more success in implementing lockdown programs, contract tracing and other needed COVID-19 protocols.

Local government can be specified as the junior-level government organised locally, and it promotes central government in the distant areas of a country (Bhuiyan, 2011). Alternatively, local governments also act as local managers of the central government in the periphery. The strategy in combatting the spread of COVID-19 is the more rigid social distancing rules, strict lockdowns, higher testing, tracking the infectious people, encouraging contaminated people to take treatment, and institutional quarantine system. When COVID-19 hit Bangladesh, the local government could not influence these strategies due to the absence of substantial involvement. However, the government considered it a health issue and emphasised communities with professionals. A citizen interviewee said,

Local government as an extension or representative of central government may assist the central government from every aspect, especially from an awareness-building point of view. Local government stays closer to the mass people, among whom most are unaware of the consequences of a pandemic or may be indifferent toward the gravity of the problem. The local government may actively assist the central government in this regard.

The functions of sub-national government units are viewed as an operational resolution to current heightened difficulties for real-time and practical adherence to specific neighbourhood circumstances (Saito, 2008; Dutta and Fischer, 2021). Bangladesh has vigorous local government ranks to include the entire state. Local governments may operate for the efficiency of the progressive measures of the central government (Khan, 2016). The participation of the masses is vital to executing protective measures. In the COVID-19 challenging situation, local governments were nearer and attached to the public, thus adept at traversing situation-specific community measures (Dutta and Fischer, 2021). The local governments tried communicating and engaging with the people and the government departments during COVID-19 through their digital unit; however, local governments are constrained by resource limitations (Hossain, 2021). However, concerning the vulnerabilities of COVID-19, the benefit of complying with the government actions and people's deliberate conformity with the government guidelines, the central government has been unsuccessful in getting along with the broader people (Biswas *et al.*, 2020). One interviewee, who is a member of a major political party, said,

The Coronavirus epidemic is a catastrophe where prevention is essential. In that case, personal health awareness, maintaining social distance, preventing free movement, in some cases taking lockdown or shutdown measures are controlled. And the local government is more effective than the central government in managing or controlling these measures.

The motivation of local leaders is critical to policy formulation and implementation (Aminuzzaman, 2015). The ability to enforce lockdown was demonstrated to fail when over 100,000 people showed up for a funeral during the COVID-19 crisis (Dhaka Tribune, 2020). Local governments could be functional and productive in implementing government response plans. As the local government institutions were closer to the local people, connecting and making people more informed about this pandemic was easier. At the same time, it was challenging for the central government to communicate effectively with remote citizens who were far away during times of crisis. A central politician interviewee, said,

Working closely with local government bodies will make it easier to implement epidemic response projects and achieve success in a short time.

Bangladesh's local government organisations are prominent, considering their implication and effectiveness (Aminuzzaman, 2010). Local governments' representative participatory approach confirms citizens' active engagement and, consequently, a platform to produce a persuasive and functional managerial action (Khan, 2016; Bardhan, 2002). Besides, local governments are the most critical informers to the community and preliminary contact points (Dzigbede *et al.*, 2020). Gao and Yu (2020) argue that local governments remain crucial participants in instigating the COVID-19 public health emergency administration process. Central and local governments in various countries have indicated the importance of local governance during the pandemic. For example, Dutta and Fischer (2021) study on Kerala (An Indian state) shows strong local governance and coordinated and integrated central-local attempts to manage the pandemic. Evidence from Kerala reveals that the central government declared clear policies to the states and field administrations for concrete measures to be commenced by involving local governments and other local stakeholders. Their study identifies practical local and central government actions in ensuring local governance, including urgent mobilisation of activities, cross-sectoral and multi-scalar integration,

target-driven administrative activity, social security and control, and volunteerism and support. In addition, [Dzigbede et al. \(2020\)](#) outline local government resiliency in managing the COVID-19 pandemic in the United States. The research identifies that local governments have confronted pandemic challenges with leadership, management, determination, knowledge sharing and previous experiences. The lack of appropriate involvement of local government units incapacitated the central administration in Bangladesh; thus, it contributed to the surge in infection rates as the government failed to convey the devastating impacts to the broader people. The critical action that could assist in managing the COVID-19 condition was to ensure an active decentralised administration and to connect with the citizens fruitfully through the local governments' strong engagement in all aspects of government committees and plans for prompting evidence-based decisions. In the COVID-19 critical time strong organisational coordination between central and local government could enable quick managerial action and efficiency.

Conclusion

Bangladesh is an emerging country with considerable human resources and citizens. It has the sharpest expanding economy amongst the South Asian countries and has yielded significant social and economic progress in slashing hardship, constant monetary progress, social values, increased life expectancy, enhanced learning levels, and better food making ([The World Bank, 2020](#); [Chakravorty, 2018](#); [Chowdhury and Chakraborty, 2021](#)). The COVID-19 pandemic has substantially overwhelmed Bangladesh's socio-economy. It has also reflected the poor local government's role and signified that stronger central-local relationships were essential to combat vulnerability.

This study found that Bangladesh's coronavirus administrative arrangement was primarily a top-down and centrally-controlled approach. No local government institutions were involved in the National Preparedness and Response Plan and the administrative risk communication process. Local government institutions were included in the sub-national level committees. However, they were not included in the planning and coordination level of the COVID-19 District and Upazilla Response Plan. Also, the representation of local government members in numerous committees was inadequate, considering the proportions.

This study argues that the COVID-19 pandemic crisis showed new challenges, and conventional top-down administrative approaches appeared insufficient to tackle the situation effectively. Bangladesh has many possibilities, and an effective local government system is mandatory to resolve various difficulties. COVID-19 was not solely a public health, administrative, law enforcement, or disaster concern but an all-inclusive matter. Thus, considering the COVID chaos as a lesson, the study suggests establishing a solid partnership between central and local governments. The local government of Bangladesh could also play a vital role in managing the COVID-19 situation. This research highlights the need for a decentralised administrative pattern to face any crisis.

The central government should abide by the spirit of the constitution and enable a decentralised administrative framework by involving the local government in governmental matters and considering the local governments as active partners instead of junior or subordinate bodies. The central government has to ensure a collaborative relationship with the local government as they have a strong and extensive network. Local government's active participation is essential in developing governance and democracy in Bangladesh; thus, the central government must facilitate them and take the necessary initiative to remove difficulties towards decentralised administration. Finally, the local governments' active involvement can help achieve the central government's plans and policies and help effectively manage any crisis.

This study contributes to the literature as broad investigations that explore the central-local association in COVID-19 management plans are scarce. It shows that local governments

were overlooked by the central government and its field administrations. Furthermore, this study briefly explores the doomed role the central government gave to the local governments in the COVID-19 response plans. This study also highlights the importance of local government organisations in the COVID-19 response process and emphasises the need for a decentralised government system to improve administrative capacity. A collaborative approach is proposed to ensure that local governments can respond effectively to the challenges.

References

- Aminuzzaman, S.M. (2010), "Local government and development in Bangladesh lessons learned and challenges for improving service delivery of Union Parishad (UP)", Local Governance Support Project-Learning and Innovation Component (LGSP-LIC), Local Government Division, Ministry of Local Government, Rural Development and Co-operatives, Government of People's Republic of Bangladesh, pp. 1-18.
- Aminuzzaman, S.M. (2015), "Dynamics of public policy: determinants of policymaking and implementation in Bangladesh", Jamil, I., Aminuzzaman, S.M. and Haque, S.T.M. (Eds.), *Governance in South, Southeast, and East Asia: Trends, Issues and Challenges*, Springer Cam, Heidelberg, pp. 211-228.
- Amnå, E. and Montin, S. (2000), *Towards a New Concept of Local Self-government? : Recent Local Government Legislation in Comparative Perspective*, Fagbokforlaget, Bergen.
- Anwar, S., Nasrullah, M. and Hosen, M.J. (2020), "COVID-19 and Bangladesh: challenges and how to address them", *Frontiers in Public Health*, Vol. 8, pp. 1-8.
- Badach, J. and Dymnicka, M. (2017), "Concept of 'good urban governance' and its application in sustainable urban planning", *IOP Conference Series: Materials Science and Engineering*, Vol. 245, pp. 1-9.
- Baradhan, P. (2002), "Decentralization of governance and development", *Journal of Economic Perspectives*, Vol. 16 No. 4, pp. 185-205.
- Barishal District (2020), *Coronavirus Prevention Committee*, Bangladesh National Portal, Cabinet Division, Government of the People's Republic of Bangladesh, Dhaka.
- BBS (2022), "Population & Housing Census 2022, preliminary report", Bangladesh Bureau of Statistics, Statistics and Informatics Division, Ministry of Planning, Government of the People's Republic of Bangladesh, available at: <https://bbs.gov.bd/site/page/47856ad0-7e1c-4aab-bd78-892733bc06eb/Population-&Housing> (accessed September 2022).
- Bhuiyan, M.J.H. (2011), "Local government system in Bangladesh: an assessment", *Journal of the Indian Law Institute*, Vol. 53 No. 1, pp. 96-108.
- Biswas, R.K., Huq, S. and Afiaz, A. (2020), "Relaxed lockdown in Bangladesh during COVID-19: should economy outweigh health?", *International Journal of Health Policy and Management*, Vol. 9 No. 11, pp. 488-490.
- Chakravorty, N.T. (2018), "The development surprise of Bangladesh: its implications for other Bay-of-Bengal and Andaman Sea Rim Nations", *South Asian Survey*, Vol. 25 No. 1-2, pp. 1-26.
- Chikerema, A.F. (2013), "Citizen participation and local democracy in Zimbabwean local government system", *Journal of Humanities and Social Science*, Vol. 13 No. 2, pp. 87-90.
- Chowdhury, M.B. and Chakraborty, M. (2021), "The impact of COVID-19 on the migrant workers and remittances flow to Bangladesh", *South Asian Survey*, Vol. 28 No. 1, pp. 38-56.
- Dahlin, E. (2021), "Email interviews: a guide to research design and implementation", *International Journal of Qualitative Methods*, Vol. 20, pp. 1-10.
- Dhaka Tribune* (2020), "Social distance rule turned on its head by funeral crowd", *The Dhaka Tribune*, available at: <https://www.dhakatribune.com/bangladesh/nation/2020/04/18/thousands-join-janaza-in-brahmanbaria-flouting-social-distancing-rule> (accessed 18 April 2020).

- Dutta, A. and Fischer, H.W. (2021), "The local governance of COVID-19: disease prevention and social security in rural India", *World Development*, Vol. 138, pp. 1-11.
- Dzigbede, K.D., Gehl, S.B. and Willoughby, K. (2020), "Disaster resiliency of US local governments: insights to strengthen local response and recovery from the COVID-19 pandemic", *Public Administration Review*, Vol. 80 No. 4, pp. 634-643.
- Faguet, J.-P. (2014), "Decentralization and governance", *World Development*, Vol. 53, pp. 2-13.
- Farazmand, A., De Simone, E., Gaeta, G.L. and Capasso, S. (2022), "Corruption, lack of transparency and the misuse of public funds in times of crisis: an introduction", *Public Organization Review*, Vol. 22 No. 3, pp. 497-503.
- Farid Uddin, K. (2021), "COVID-19 pandemic is about more than health: a state of governance challenges in Bangladesh", *South Asian Survey*, Vol. 28 No. 1, pp. 72-91.
- Fasenfest, D. (2010), "Government, governing, and governance", *Critical Sociology*, Vol. 36 No. 6, pp. 771-774.
- Frantzeskaki, N., Wittmayer, J. and Loorbach, D. (2014), "The role of partnerships in 'realising' urban sustainability in Rotterdam's City Ports Area, The Netherlands", *Journal of Cleaner Production*, Vol. 65, pp. 406-417.
- Gao, X. and Yu, J. (2020), "Public governance mechanism in the prevention and control of the COVID-19: information, decision-making and execution", *Journal of Chinese Governance*, Vol. 5 No. 2, pp. 178-197.
- Gauld, R. (2023), "A review of public policies on COVID-19: the New Zealand experience", *Public Administration and Policy*, Vol. 26 No. 1, pp. 10-20.
- Greer, S.L., King, E.J., da Fonseca, E.M. and Peralta-Santos, A. (2020), "The comparative politics of COVID-19: the need to understand government responses", *Global Public Health*, Vol. 15 No. 9, pp. 1413-1416.
- Hossain, A. (2021), "Local government response to COVID-19: revitalizing local democracy in Bangladesh", *International Journal of Sustainable Development and Planning*, Vol. 16 No. 4, pp. 701-712.
- Khan, N.A. (2016), "Challenges and trends in decentralised local governance in Bangladesh", *ISAS Working Papers*, No. 222, Institute of South Asian Studies, National University of Singapore, Singapore, pp. 1-19.
- Kin, L.W. (2009), "The relationship between central and local governments under the unitary state system of China", Oliveira, J.C. and Cardinal, P. (Eds.), *One Country, Two Systems, Three Legal Orders-Perspectives of Evolution*, Springer, Berlin/Heidelberg, pp. 527-540.
- Kumar Panday, P. (2006), "Central-local relations, inter-organisational coordination and policy implementation in urban Bangladesh", *Asia Pacific Journal of Public Administration*, Vol. 28 No. 1, pp. 41-58.
- Li, Y. and Song, Y. (2022), "Towards effective temporary organizing in crises: a tale of a control command in responding to COVID-19 in China", *Public Organization Review*, Vol. ahead-of-print, pp. 1-22. doi: [10.1007/s11115-022-00670-5](https://doi.org/10.1007/s11115-022-00670-5).
- Lincoln, Y.S. and Guba, E.G. (1985), *Naturalistic Inquiry*, Sage, Newberry Park, CA.
- MacDonald, H.M. (1961), *Rule of Law*, Southern Methodist University Press, Dallas.
- Maswood, M.H. (2020), "Deaths with symptoms go unrecorded", *The Daily New Age*, 18 September, available at: <https://www.newagebd.net/article/116571/deaths-with-symptoms-go-unrecorded> (accessed 20 February 2021).
- Ministry of Law (1972), *The Constitution of The People's Republic of Bangladesh*, Government of Bangladesh, Dhaka.
- MoHFW (2020a), *Coronavirus Prevention Committee*, Health Services Division of the Ministry of Health and Family Welfare, Government of the People's Republic of Bangladesh, Dhaka.

- MoHFW (2020b), *National Preparedness and Response Plan for COVID-19*, Health Services Division of the Ministry of Health and Family Welfare, Government of the People's Republic of Bangladesh, Dhaka.
- MoPA (2020), *Coronavirus Prevention Committee*, Ministry of Public Administration, Government of the People's Republic of Bangladesh, Dhaka.
- OECD/UCLG (2016), *Subnational Governments around the World: Structure and Finance. A First Contribution to the Global Observatory on Local Finances*, OECD and United Cities and Local Governments, Paris, pp. 1-69.
- Onwuegbuzie, A.J. and Leech, N.L. (2007), "Validity and qualitative research: an oxymoron?", *Quality & Quantity*, Vol. 41 No. 2, pp. 233-249.
- Saito, F. (2008), "Decentralization and local governance: introduction and overview", Saito, F. (Ed.), *Foundations for Local Governance, Decentralization in Comparative Perspective*, Physica-Verlag, Heidelberg, pp. 1-24.
- Sohel, M.S., Ehsan, S.M.A., Zaman, N.T., Hossain, B., Shi, G., Sarker, M.N.I. and Ali, H.M. (2022), "Understanding rural local government response during COVID-19-induced lockdown: perspective from Bangladesh", *SN Social Sciences*, Vol. 2 No. 216, pp. 1-21.
- The World Bank (2020), "Bangladesh: overview", Dhaka, The World Bank in Bangladesh, available at: <https://www.worldbank.org/en/country/bangladesh/overview> (accessed 16 January 2021).
- World Health Organization (2015), *Bangladesh Health System Review*, WHO Regional Office for the Western Pacific, World Health Organization, Manila.

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