

Transparency International Bangladesh Impact Assessment

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ABBREVIATIONS

ACC	Anti-Corruption Commission
AI-Desk	Advice and Information Desk
AL	Bangladesh Awami League
BAC	Bureau of Anti Corruption
BNP	Bangladesh National Party
CCC	Committee of Concerned Citizens
CE	Civic Engagement
DFID	Departments for International Development
EC	Election Commission
LG	Local Government
M&E	Monitoring and Evaluation
MIS	Management Information System
NGO	Non Government Organisation
NIP	National Integrity System
OPR	Output to Purpose Review
PO	Project Officer
PSC	Public Service Commission
RPO	Representation of the People Order
SMC	School Management Committee
TI	Transparency International
TIB	Transparency International Bangladesh
YES	Youth Engagement and Support

Executive Summary: Transparency International Impact Assessment

- I. Transparency International Bangladesh (TIB) is an accredited national chapter of the Berlin-based Transparency International, a global civil society organisation leading the fight against corruption. TIB began its activity as a trust in 1996 and became recognised by the Government of Bangladesh as an NGO in 1998. TIB works against corruption, not against the government of the day, nor any particular public sector department or named individual(s). Its work is broadly undertaken at two levels (macro and micro) through processes of civic engagement, research and advocacy.

- II. At the macro level its work is to strengthen, through encouraging transparency and accountability, the pillars of the National Integrity System (Executive, Legislature, Judiciary, Political Parties, Election Commission, Police, the Media etc). At the micro level TIB has established a network of 36 Committees of Concerned Citizens (CCCs) in 34 of Bangladesh 64 administrative districts. This is a social movement driven by volunteers who no longer accept that corruption must be part of their daily lives. This social movement features young people who form an essential and vibrant element of the CCCs organised around the mantra YES – youth engagement and support.

- III. TIB’s activities have significant direct and indirect impacts. These can broadly be summarised as follows:
 - TIB is now identified as being synonymous with tackling corruption in Bangladesh and, through its work, anti-corruption is part of the public discourse and central to the public policy agenda.
 - TIB has catalysed or been directly involved in key institutional and policy changes, the most notably of which are: their work to reform the Anti-Corruption Commission; ongoing work to reform the electoral process with the Election Commission; exposing major corruption in Chittagong Port; and the Caretaker Government’s ratification of the UN Convention on Anti Corruption.
 - Through TIB’s research and advocacy work, legislation against corruption has now been strengthened in the form of the Anti Corruption Act 2004 and corruption is now a punishable offence. This has been powerful symbolically and substantively as a number of very high profile figures in Bangladesh are now being investigated for corrupt practices.
 - TIB’s social movement in the 34 districts in which they work has created a mechanism through which the people at the grassroots in Bangladesh can channel their opposition to corruption. They do this by holding to account officials working in the delivery of public services in 3 sectors: health, education and local government where real changes can be observed in hospitals, schools and municipal services.
 - TIB has captured the social conscience of young people and provided them with a way of voicing their opposition to corruption, and engaging in volunteer work to improve transparency and accountability in their areas.

- IV. TIB started working under a political government which proved resistant to its activities and key messages on corruption. In this environment TIB exercised influence and exerted impact through engaging elites at the highest level and the general population in local level activities. Through their national research and advocacy work, TIB also made a significant contribution in moving Bangladesh to a situation where there is now a government which has anti-corruption as its headline agenda. In this supportive context at the national level, the impact of TIB's work has increased, with a positive response to their activities. The evidence shows that in both conducive and adverse political contexts, TIB can have and has had a significantly positive impact.

1. Introduction

- 1.1 Transparency International Bangladesh (TIB) is an accredited national chapter of Berlin-based Transparency International, a global civil society organisation leading the fight against corruption. TIB began its activities as a trust in 1996, and in 1998 the Government of Bangladesh approved its registration as an independent, non-partisan, not-for-profit, non-governmental organisation. TIB's vision for Bangladesh is a country in which government, politics, business, civil society and the daily lives of its citizens are free from corruption. To secure this vision, its mission statement is:

To catalyse and strengthen a participatory social movement to promote and develop institutions, laws and practices for combating corruption in Bangladesh, and to establish an efficient and transparent system of governance, politics and business.

- 1.2 The 'social movement' described in its mission statement takes the form of the *Making Waves* project. After the successful implementation of the first phase of the project entitled *The National Integrity Plan* (NIP phase 1) for the period 2000 – 2003, the *Making Waves* project is being implemented as the second phase of NIP (2003 – 2008).
- 1.3 TIB works against corruption, not against the government of the day, nor any particular public sector department. As a social movement TIB's task is to create a demand for effective policy reform and institutional change conducive to the reduction in corruption. It has no mandate or capacity to investigate or take action against individual cases or allegations of corruption, whether large or small. TIB is a co-stakeholder and a source of support to initiatives for reducing corruption and establishing transparent and accountable governance in Bangladesh including those by Government.
- 1.4 The political context in which TIB operates has been turbulent. The October 2001 elections produced a Bangladesh National Party (BNP) victory in the form of a 4-party alliance. The opposition party, Bangladesh Awami League (AL), refused to accept the result and from 2001-2006 their attendance at Parliament was sporadic, claiming discrimination by the BNP speaker. Since summer 2006 opposition

parties, led by Awami League claimed that the BNP-led government was seeking to manipulate the electoral infrastructure and announced in January 2007 a boycott of the general election. On 11th January 2007, the President declared a state of emergency and a reconstituted caretaker government was put in place. Violence, political strikes/hartals have accompanied the political turmoil. In August 2004, twenty people were killed and more than 100 injured in a grenade attack at the Bangladesh Awami League (AL) political rally. In January 2005 the former finance minister, Shah Kibria, was assassinated along with four colleagues and over 70 injured in an attack at an AL rally in Northern Bangladesh.

- 1.5 The position of Bangladesh in Transparency International’s Corruption Perception Index provides evidence of the scale of the problem. The results on a scale of 0 – 10 (1 = highly corrupt; 10 = highly clean) showed Bangladesh at the bottom of the list for 5 successive years from 2001 – 2005 (with a corruption index score of 1.7 in 2005). In 2006 and 2007 Bangladesh showed a marginal improvement with a corruption index score of 2.0. Data from worldwide governance indicators show Bangladesh less favourably.

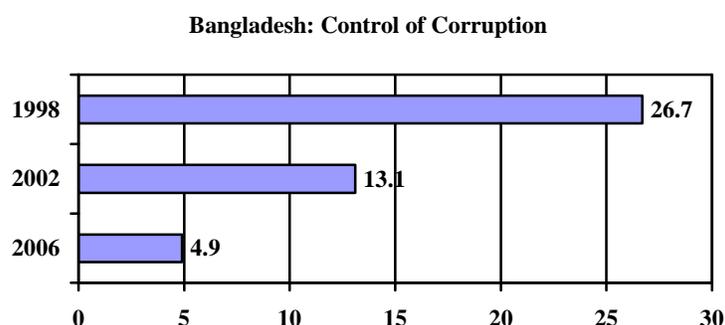


Figure 1.1: Country's percentile rank (0-100)

- 1.6 Figure 1.1 shows the percentile rank of Bangladesh measured on one (of six) dimensions of governance used by the World Bank¹. The ‘control of corruption’ indicator measures the extent to which public power is exercised for private gain, including petty and grand forms of corruption, as well as ‘capture’ of the state by elites and private interests. Percentile rank indicates the percentage of countries worldwide that rate below these countries. Higher values indicate better governance arrangements. In the case of Bangladesh therefore, only 4.9% of countries rate worse on the control of corruption in 2006.

2. Objectives of the Assignment

- 2.1 The overall objective of the assignment is to inform TIB’s emerging ‘*Strategy Paper*’ by assessing:

¹ Source of data: Kaufmann, D. Kraay, A. and Mastruzzi, M. (2007) *Governance Matters VI: Governance Indicators for 1996-2006*. Washington: World Bank.

- The impact of Making Waves on reducing corruption and generating accountability and transparency in service delivery institutions.
- The impact of Making Waves on accountability and transparency of Local and National Government
- Best practice interventions to reduce corruption in service delivery and raise accountability and transparency of local government.

2.2 The impact assessment will also guide a possible 5 year DFID funded ‘*Accountability*’ intervention currently at the concept note.

3. Making Waves Project

3.1 The Making Waves project is attempting to create circumstances in which participation in anti-corruption activities is substantially widened and strengthened. Ultimately the project is attempting to bring about conditions which will lead to poverty reduction and the enhancement in the quality of lives of vulnerable people in Bangladesh who tend to experience corruption most acutely. The **goal** of the *Making Waves* project, which commenced in January 2003, is:

More accountable governance in Bangladesh at all levels through greater transparency in public, non-profit and private sector transactions, leading to sustainable poverty reduction.

This is an ambitious and broadly cast goal which targets all sectors and makes explicit the link between corruption and poverty reduction.

3.2 To achieve this goal the **purpose** of the *Making Waves* project is:

Increased demand by men and women for transparency and accountability in public, non-profit and private sector transactions.

The stated purpose of *Making Waves* has a bottom-up orientation and fits well with TIB’s mission statement of a participatory social movement at the vanguard of combating corruption across the public, private and not-for-profit sectors.

The following five outputs are the means by which the purpose and goal of the project are expected to be achieved.

1. Citizens’ voices raised for improved standards of transparent and accountable governance.
2. Channels opened for communicating voices between citizens and institutions.
3. Enhanced accountability in the use of allocated resources in key service delivery.
4. Enhanced transparency in the use of allocated resources in key sectors of public service delivery.

5. Institutional capacity of TIB strengthened and its network enhanced towards a sustainable movement against corruption.

In practical terms TIB uses a range of mechanisms to achieve these outputs broadly categorised as: civic engagement, research and advocacy.

4. Methodology

- 4.1 The impact assessment adopted a mixed methods approach involving: secondary data analysis; interviews with key stakeholders; field work visits to, and case studies of, Committees of Concerned Citizens (CCCs); and focus group work with public service users and victims of corruption at case study locations (see schedule of activities: Appendix 1). Impact assessments are undertaken to estimate whether or not interventions produce their intended effects. In strict methodological terms, determining impact requires comparing, with as much rigour as is practicable, the conditions of targets/recipients that have experienced an intervention with those of equivalent targets/recipients who have not, using quantitative designs such as randomised experiments, quasi experiments, before and after studies and so on.

- 4.2 However, the revised *Making Waves* project proposal (Annex 4: pages 64 - 65) points assessors to a qualitative rather than quantitative design, noting:

Due to the complex and often hidden nature of corruption, quantitative methods for measuring impact will be limited... Most impact assessment will rely on narrative accounts and case studies using qualitative methodologies. In assessing impact, efforts should be made to record failures and lessons learned, as well as successes, and attention be given to the development of a range of flexible impact assessment strategies at local levels.

This advice therefore informed the work plan to complete the impact assessment of the Bangladesh *Making Waves* programme.

- 4.3 The selection of the CCC case study locations was a particularly important choice and we used the following criteria to inform the process:

- Accessibility of CCC areas within the timescale to complete the project
- The recent Output to Purpose Review (OPR) had conducted field work in South East Bangladesh – a different location was seen as preferable
- CCCs perceived to be ‘successful’ through to ‘less successful’
- Gender diversity
- Length of time CCCs had been established.

In addition, the terms of reference for the work required the assessors to ‘select the counterfactual for comparison in assessing impact’.

- 4.4 The case study areas selected to gather evidence of impact were:
- (1) Natore: Natore Sadar Hospital; Moshironnessa Government Primary School; and Laksmipur Union Parishad.
 - (2) Chapai Nawabgonj: Chapai Nawabgonj Sadar Hospital; Bidirpur Government Primary School; and Chapai Nawabgonj Municipality.
 - (3) Rajshahi: Rajshahi Municipality, Education Board and School Management Committee.
 - (4) Gazipur: Gazipur Municipality
 - (5) Naogaon: local hospital, primary school and NGO group (control area)
- 4.5 By its nature, a case study approach has inherent methodological weaknesses. The trade-off in securing depth and richness of qualitative information in 5 case study areas is lack of generalisability. That said, the selection of our case study areas was judicious and we used secondary data on CCCs which we did not visit to validate our findings. We have extrapolated financial estimates gathered in a select number of CCCs to all 36 areas. We do this with a health warning, stating the limitations of our analysis. In addition, researchers must be careful attributing changes/impacts to an intervention (before and after studies) without the benefit of an experimental design approach.

5. Committees of Concerned Citizens

- 5.1 The key mechanisms through which Making Waves impacts on reducing corruption and generating accountability and transparency in service delivery institutions and municipalities at the local level are: committees of concerned citizens; volunteer youth groups (YES – youth engagement and support); advice and information desks; report cards; and people’s theatre.
- 5.2 Committees of Concerned Citizens (CCCs) are local level watchdogs and a key pillar in TIB’s social movement against corruption. The CCCs are groups of citizens with a high degree of moral and social standing/credibility who motivate and mobilise citizens in various activities designed to curb corruption and promote good governance. Once the committees are formed, they draw up their own programme priorities and annual plan of work. TIB provides the technical and financial support in implementing the programmes. In financial terms TIB spends approximately 70% of its budget on field level activities and the remainder in Dhaka (see appendix 2 for a breakdown of the 2007 budget).
- 5.3 Apart from various anti-corruption awareness activities, the focus of the CCCs’ watchdog functions is normally on key public services such as education, health, and local government. Members of the CCCs are committed to the values, mission and code of ethics of TIB and work on a fully voluntary and non-partisan basis. Six Committees of Concerned Citizens were formed in the greater Mymensingh area in 2000. Based on their success, another 30 committees were

- formed in July 2006 – in total 36 CCCs are working in 34 districts across all 6 divisions in Bangladesh.
- 5.4 Volunteer youth groups of local students/young people (usually between 15 – 30 years old and unlimited in numbers) are mobilised and attached to the CCCs. They involve themselves in awareness raising activities. By undertaking various tailor-made programmes, these young people learn the core values of volunteerism and prepare themselves as future leaders of the anti-corruption social movement. They also develop the commitment and leadership qualities needed to expand and strengthen the anti-corruption constituency. The activities of these groups entitled *Youth Engagement and Support (YES)* include debating competitions, publications, anti-corruption campaigns, cycle rallies, human chains against corruption, and cartoon exhibitions.
 - 5.5 Advice and Information Desks (AI desks) provide access to information which is key to creating awareness and helping people to resist and become victims of corruption. TIB has set up advice and information desks attached to the CCCs and in satellite format. Members of the public are provided access to basic information and advice on key areas of public service. A number of fact sheets on their basic rights are also available. AI desks provide the route through which information flows between TIB, the CCCs and vice versa.
 - 5.6 CCC receives requests for information and assistance on issues that fall outside their remit. Many of these requests centre around domestic violence and land disputes and this has prompted the CCC to forge relations with other organizations specializing in legal aid, gender and women's rights, and land issues. This collaboration is usually at an informal level and CCCs maintain close contact with local representatives of BLAST, Mahila Parishad, BNWLA and ASK though BRAC, and with other locally based organizations such as MLAA and Rupantor. Most of these organizations have legal literacy and legal aid services including panel lawyers providing *pro bono* services. In many cases, CCC members have been instrumental in developing these collaborations and it was encouraging to meet a woman CCC member in Gazipur who was also a panel lawyer under BRAC's Human Rights and Legal Services Programme. Both CCC and YES members assist those making inquiries at AI desks by linking them to the above organizations. This allows CCCs to respond to local demand without extending their focus on issues other than those identified in health, education and local government sectors.
 - 5.7 TIB has recently joined a network of national NGOs working on land rights issues. This is a positive development and will have long lasting implications for establishing linkages on problems which CCCs deal with at the local level. The next logical step in alliance building is for TIB to consider what additionality it brings to such an alliance and vice versa – what does this (or any other alliance) bring to TIB table. The areas where TIB is yet to build alliances is on local government, health and education, though these are the main areas of TIB's work

- at the local level. Given the substantive work CCCs and YES groups have undertaken to ensure transparency and accountability of these three sectors, it seems to be a missed opportunity not to establish linkages with existing NGOs in health, education and local government.
- 5.8 Report card surveys are a useful tool to assess the content and quality of public services provided to people, and the nature, process and implications of corruption at local levels. Report cards are also an important means of creating national level benchmarks on specific issue areas. TIB uses report cards as instruments in advocating and demanding public accountability and also in providing a credible database to facilitate proactive civil society response. Subjects of report card surveys are chosen by the CCCs in consultation with local people. In most cases issues that affect citizens' lives most closely, such as health, education, land administration and local government are among the chosen subjects. The reports are widely covered by media and generate an extensive response from the authorities as well as members of the public.
- 5.9 People's theatre is one of the major advocacy tools of TIB which is used at the local level to build awareness against corruption, particularly amongst the most vulnerable and illiterate. Theatre groups have been working in Mymensingh, Nalitabari and Muktagacha CCC areas which produced a number of theatre productions. Young local activists are working in these groups on voluntary basis.
- 5.10 Raising women's voices in anti-corruption movement is an objective of TIB and it recognizes that in doing so women's voices also have to be raised within its delivery mechanism viz the CCCs and YES groups. Currently the percentage of women in both the groups stands at 24 percent which is close to its target of 25 percent under the current project. The process of raising women's voices within the CCC is more systematic through the creation of a gender sub-group under each CCC to help focus and guide the its work. Most of the conveners of the gender sub-groups are women (only three men out of 36) thus ensuring women in leadership positions within CCCs. YES (which is only a year old) is yet to develop a strategy to ensure women in leadership positions and is concentrating on increasing the YES membership.
- 5.11 The conveners of the sub-groups carry out a number of activities such as seminars involving civil society on gender and anti-corruption movement. For the first time, TIB organized a workshop with all the conveners of the gender sub-group that focused on them carrying out a brief self-assessment of the strengths and weaknesses of their work and ended with an action plan. Discussions with the conveners of the gender sub-groups during the field trips for the impact assessment exercise made it clear that they were in the process of further developing the action plan with the CCC members.

- 5.12 During the course of our work we probed interviewees on what characterised an effective CCC. We list these features in box 5.1 below.

Box 5.1 A check list for effective CCCs

1. **Inclusiveness:** The convenor of the CCC needs to exercise good democratic control over CCC members encouraging participation and sharing of views. CCC should not try to ‘control’ YES group members.
2. **Staffing:** Good TIB staff are necessary at Assistant Programme Officer or Programme Organiser levels.
3. **Convenor:** Respect with which the Convenor is held in the local community is hugely important to gaining acceptance in working with public bodies in health, education and local government.
4. **Members of CCC:** selecting the ‘right’ members of CCC who are beyond reproach and have some local standing.
5. **Local community:** engage with the local community. Make the community aware of report cards, fact sheets, and action plans to ensure ownership and raise the profile of the CCC.
6. **Sustainability:** efforts at raising some income to support the activities of the CCC create a much greater sense of independence and the prospects of long-term viability

6. Impact of Making Waves at the Local Level.

- 6.1 We consider the impacts which TIB activities have at the local level under 3 broad headings.
- (a) **Type of impacts:** We discuss how the work of TIB impacts on public service provision and delivery across the three sectors in which it works: local government, health and education. We do this by setting out in tabular form a short description of the services provided before and after interventions by the CCCs and the nature of key impacts resulting.
 - (b) **Scale of the impacts:** We set out our best estimates of the scale of impacts at local level. This covers both the range of activities and the estimated savings associated with interventions undertaken by TIB. We do this by selecting 5 quantifiable variables in each of the three sectors where the work of CCCs has led to measurable improvements in public services and estimate the savings associated with these interventions. In addition we list additional areas where improvements have resulted but where the benefits are more difficult to quantify.

- (c) **Relative nature of impacts:** Finally, we set out a typology of the activities in TIB engage at both the local and national levels and list the relative contribution which each of the activities make to the overall impact of their work. This is based on our fieldwork, interviews with key stakeholders and our own judgement on the relative merits of each type of activity.

We consider each of these, in turn.

7. Type of Impacts

- 7.1 Through the case studies we met with CCC and YES members in all areas (except the control area), and a mix of groups ranging across: teachers, school management committees and mothers of students, victims of corruption, hospital users and health watch groups. We also held meetings directly with health providers, nurses, doctors, civil surgeons, school principals and elected representatives in each of the case study areas. We summarise the findings from the qualitative data gathered through interviews, focus groups and non-participant observation under the broad categories of health, education and local government.
- 7.2 **The Health Sector:** CCC members and the YES group have worked consistently with hospitals in the case study areas to improve health services. They have met with the authorities and identified gaps in their provision. They prepared information booklets about the nature and types of health care services available which they distributed through satellite advice and information desks. In addition, the YES group members have organised public theatre shows and exchanged views with people from the hospitals' catchment areas. As a result, there have been some significant developments in health provision such as an improvement in the ticketing system. Previously the price of a ticket for services in the out patients department was 4.40 taka, but patients paid 5.00 taka due to 'lack of change' being available. Now a fund has been created for patients in poverty with the extra 60 paisa received from each ticket.
- 7.3 Medicine supplies were also very low. Following the intervention by CCC and YES members, supplies have increased and the list of medicines available is on public display. The behaviour of doctors, nurses and ancillary staff towards patients has also improved. An ambulance service is available for which patients do not make additional payments, patients tests are carried out in the pathology departments of the hospitals (as opposed to a private clinic) and toilet facilities have been significantly improved. Finally, the issue of cleanliness is a higher priority although has still some way to go. Interesting though, the control hospital visited was displaying information on prices and medicine in response to a Ministry of Health circular requesting this in all hospitals.
- 7.4 **The Education Sector:** The CCCs actively engaged with primary schools in the case study areas, a key improvement being the significant number of eligible

students now enrolled. Student attendance had not been satisfactory and CCCs intervened to address this and other issues. They met with school management committees and guardians, organised workshops and promotional campaigns along with awards aimed at incentivising attendance. As a result, student enrolments have increased and text books are available for free distribution to students. The scholarship pass rate has also improved. Teachers, the school management committees and guardians are now jointly engaged in providing better education for the children in an accountable and transparent way. Teacher attendance and performance in their jobs are being closely monitored by CCCs.

- 7.5 **The Local Government Sector:** The work of CCCs in this sector tends to start with the publication of report cards which have highlighted mismanagement and attracted widespread and critical press coverage of local authorities. Following on from this, CCC members have actively engaged with elected bodies to take forward the recommendations outlined in the report cards. In addition, face-the-public meetings have been organised between senior officials of the Union Parishad/Municipality and local citizens during which information leaflets were distributed containing details of service available to the public.
- 7.6 A number of significant changes were cited in local government. These were variously reported as follows: a number of roads in a bad state of disrepair have been fixed; new tube wells have been set up in some areas and the water is now arsenic free. Tax collection has increased and the number of social benefits improved for the disabled, free-fighters, the elderly and widows. Extra money had to be paid to obtain a trade licence which has been now been stopped. The Union Parishad/Municipality budgets have been published for the first time. Local citizens were dissatisfied with the opaque process of distribution of VGF and VGD cards. The CCCs became involved in this issue resulting an increase in the numbers distributed and much greater transparency in the process.
- 7.7 Beyond these individual case study areas we conducted a secondary data gathering exercise on education, health and local government services in the remaining CCCs. We summarise our findings in terms of pre and post intervention changes and include a commentary on the impacts in table 7.1.

Table 7.1: Pre and Post Intervention in Health, Education and Local Government

Services before CCC intervention	Current status – CCC intervention	Impacts
Pre and Post Intervention in Health		
<ul style="list-style-type: none"> ▪ High level of dissatisfaction over services of public hospitals/health complex ▪ Corruption by doctors in terms of time spent outside hospitals on private work, irregular office hours, referring patients to his/her own private practice or specialised diagnostic centres ▪ Money charged for free services and extra money taken for different health services by doctors, nurses and ancillary ward staff ▪ Inadequate medical facilities such as beds, operating theatres, trolleys and ambulances ▪ Bribes demanded to issue medical certificates ▪ Medical representatives in doctors' offices during clinic hours ▪ Lack of cleanliness and hygienic environment ▪ Inadequate supply of medicines 	<ul style="list-style-type: none"> ▪ Doctors are coming to hospitals on time ▪ The availability of doctors has increased ▪ Information on ticket fees, service charges, fees for diagnostic tests etc are published on notice boards ▪ Published notices that patients should not pay extras for free services ▪ Extra money from fees for tickets is either deposited to welfare fund or returned to patients (e.g. Rangpur and Kurigram) ▪ Cleanliness improved ▪ Health officials (surgeons and doctors) are now more helpful both in terms of information transparency and gradual improvements in health facilities ▪ Updated list of medicines, and doctors & nurses rota is now on display 	<ul style="list-style-type: none"> ▪ There has been a general degree of co-operation following the release of the report card and ongoing engagement with the CCC ▪ Key health personnel such as the Civil Surgeon, superintendent, senior medical staff and ancillary staff participated in the report card press release and answered questions from journalists ▪ The report card findings received extensive publicity in the media ▪ Volunteers of the CCC regularly visit hospitals to monitor services and ensure patients receive the necessary support
Pre and Post Intervention in Education		
<ul style="list-style-type: none"> ▪ Extra money collected under the guise of various fees ▪ Lack of transparency in collecting money ▪ Anomalies in distributing stipends among poor students ▪ Teachers reluctant to take classes on time and to teach allocated class times ▪ School Management Committee inactive ▪ Absence of (or inactive) Parents Teachers Associations. 	<ul style="list-style-type: none"> ▪ Education authorities are aware of the anomalies which exist and have sought to address these ▪ Teachers' performance has improved including their time-keeping and maintaining class discipline 	<ul style="list-style-type: none"> ▪ School management committees are more active and willing to work with CCC to improve the quality of education services. In some areas (such as Sunamganj) they did not even know each other. ▪ Through events like Mothers' Gatherings and satellite AI-desks people have become more aware of their rights
Pre and Post Intervention in Local Government		
<ul style="list-style-type: none"> ▪ Low quality of services provided by local government ▪ Misappropriation of money 	<ul style="list-style-type: none"> ▪ Municipality/UP Chairs are more co-operative to civil society groups ▪ Staff numbers increased 	<ul style="list-style-type: none"> ▪ CCCs are gaining co-operation with Municipality/UP Chairs. The UP Chair of Khulna City

<p>allocated for development of the locality</p> <ul style="list-style-type: none"> ▪ Staff shortages to properly provide local government services ▪ Corruption in the tendering and procurement process ▪ Low level of monitoring, supervision and quality control of development works ▪ Extreme suffering experienced by vulnerable people 	<ul style="list-style-type: none"> ▪ Financial corruption appears to be reducing ▪ Complaint boxes have been installed ▪ Elected Chairs interaction with citizens has increased ▪ Elected politicians and officials acknowledge the problems identified in research reports and commit to working with CCC and TIB 	<p>Corporation, for example, has signed a Citizen's Charter prepared by the CCC of Khulna</p> <ul style="list-style-type: none"> ▪ Widespread print and electronic media coverage which impacts on people's awareness ▪ People are demanding their rights from local government. There are early signs that elected representatives will be held accountable at the polls if they fail to deliver
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8. Scale of Impacts

8.1 To establish the scale of the impacts associated with the work of TIB, we examine three key issues. First, we consider the mechanisms for delivery and the number of people involved as volunteers and beneficiaries. Second, we discuss the types of activities disaggregated by sector which the CCCs engage in to give some sense of the quantum of work involved at the local level. Third, we estimate the measurable savings associated with the work which TIB does across the 3 sectors.

8.2 Table 8.1 sets out the delivery mechanisms, for example, the number of groups through which TIB work, active members of the groups and the beneficiaries of their services. The table is a summary of CCCs' activities, at a glance. A more detailed breakdown is given in appendix 3.

Table 8.1: Summary of key CCC activities: January 2003 – November 2007

	CCCs	YES groups (includes theatre)	Swajon groups ²	YES friends groups	AI-Desks & users	Satellite AI-Desks set up & users	Civic engagement
Number	36	36	3	3	36	209	Through
Males	364 (76%)	920 (76%)	97 (77%)	Not available	6,029 (85%)	20,728 (73%)	concerts, taking oaths,
Females	119 (24%)	291 (24%)	28 (23%)	Not available	1,093 (15%)	7,423 (27%)	art, debates and essay competitions
Total members or users	483	1,211	125	186	7,122	28,345	50,000 (approx.)

² Swajon Groups = Citizens for Transparency

8.3 The data in table 8.1 demonstrate the high level of usage experienced at advice and information desks within CCC offices and, more particularly, at the peripatetic or satellite advice and information desks. These desks act as a resource for citizens of Bangladesh on corruption issues and also provide a signposting facility for problems which CCC staff and volunteers cannot deal directly with, but refer to other NGOs and agencies. Because of the sheer volume and diversity of problems presented, the desks generate demand amongst CCC members to broaden the services they offer. This, however, must be balanced with the limited resource base available for their activities and the need to maintain a focus on their core business. The predominance of male activity across the groups and the beneficiaries is noteworthy. Figures for civic engagement activities are estimated. These activities have a high visibility and short-term impact but are particularly useful in raising awareness amongst the most vulnerable and illiterate who are unable to access written information.

Table 8.2: CCC Activities by Sector: January 2003 – November 2007

Primary Education		Health		Local Government		Miscellaneous	
Report cards released	22	Report cards released	21	Report cards released	19	Seminars	38
Report cards pending	14	Report cards pending	15	Report cards pending	2	Workshops	20
SMC meetings	83	Sat-AI Desk	25	Face the public on local government	82	Dialogue meetings and groups	126
Mothers' gatherings	44					Publications	20
Consultation meetings	14	Consultation meetings	14	Round tables	7		
Leaflets prepared on education	8	Leaflets prepared on health	19	Leaflets prepared on local government	9		
Changes effected through CCCs	20	Changes effected through CCCs	19	Changes effected through CCCs	14		

8.4 Table 8.2 disaggregates the activities of CCCs across each of the 3 main sectors. These data illustrate the high level of interaction between CCC/YES members and sectoral service providers. Engagement with school management committees, mothers' gatherings, face-the-public meetings in local government and dialogue groups testify to the proactivity of TIB at the local level. Our observations in the case studies field work demonstrated how effective this engagement process was. Local CCC members are well-known and respected. Their status within communities affords them access to each of the sectors at a high level of entry, and criticisms of public services, although unwelcome by providers, tend to be taken seriously. The data show that changes effected through CCCs are directly correlated with the publication of report cards highlighting deficiencies in services to the public.

8.5 In an attempt to quantify measurable changes in public services we selected 5 schools, 5 local government institutions and 9 hospitals to estimate savings achieved as a result of CCC activities on the ground. The figures assume that TIB's work will continue in three institutions (a school, hospital and municipality) in each of the 36 CCC areas during the period 2007 - 2015. This is a conservative assumption as CCCs are likely to expand their activities to other institutions within their geographical locations. We have selected 5 variables from each sector as the basis of our calculations from a longer list of benefits resulting from CCC interventions. The full list includes benefits which are more difficult to quantify. For example, in schools and hospitals there has been a noticeable improvement in cleanliness, safe water and toilet facilities following CCC interventions. For completeness we list the full list of variables from which we made our selection.

- **Education variables:** student enrolment; student attendance; free books distribution; stipends; examination fees; decrease in student drop-out rates; teacher attendance; school management committee meetings held; cleanliness, safe water and toilet facilities; and awareness of the role and responsibilities of guardians.
- **Health variables:** outdoor ticket fee; indoor admission fee; number of patients attended by doctors; medicines distributed; pathology tests; ambulance and trolley facilities; harassment by brokers; gynaecology facilities; cleanliness, safe water and toilet facilities; medical representatives delaying doctors; patient welfare funds; health education programme; patient/attendant awareness; complaint boxes; and information boards.
- **Local government variables:** nationality certificate; death certificate; tax collection; VGF & VGD cards; trade licence; birth registration; roads repairs, street lighting and sewerage facilities; arbitration services; open/transparent budgeting; water and sanitation provision; cleanliness; equality of participation by women; education awareness programmes; allowances for the disabled, widows, elderly and freedom fighters; complaint boxes; and information boards.

8.6 A summary of the measurable savings for the period 2007 – 2015 is set out in table 8.3 – a more detailed break-down is provided in appendix 4. The detailed calculations start with the 5 selected variables for each sector (local government, health and education) and using 5 municipalities, 9 hospitals and 5 schools to project savings as a result on CCC interventions over an 8 year period. The data highlight some interesting issues. It is clear, for example, that CCCs' interventions over issuing VGF and VGD cards are very significant in monetary terms. Given the target beneficiaries of these cards this is a key impact for CCCs. Greater transparency in the way in which cards are issued and targeting the ultra poor is a significant outcome.

8.7 Other impact areas in order of significance are: increased tax collection which, in turn, allows investment in public services; savings to hospital users on pathology services in hospitals; an increase in the number of patients seen by doctors; a reduction in the fees paid for outdoor tickets in hospitals and reinvestment in welfare funds; availability, transparency and distribution of medicines in hospitals; and an increase in student attendance at primary schools. Given the centrality of these services to the quality of peoples' lives in Bangladesh, these changes represent significant public sector improvements and are important outcomes from the work of the CCCs.

Table 8.3: Measurable Impacts by Sector

Institutions	Variables	Savings range per Unit	Beneficiaries per month	Projected savings (8 years)
Health (figures based on 9 hospitals)				
Hospitals	Outdoor ticket fee	0.50 – 0.60	4,260	6,194,073
Kushtia General Rangpur Medical College	Indoor admission fee	0.30	2,347	1,757,433
	No. of patient attended by Doctors	5	814	10,143,369
Chapai Sadar Natore Sadar	Distributed medicine (in Taka)	0.40 – 0.55	3,840	4,571,548
Jessore Sadar Khulna Sadar Satkhira Sadar Bagerhat Sadar Rajbari Sadar	Pathological facilities (X-Ray charged in Taka)	25 – 52.50	292	24,785,280
Extrapolation: Total savings over 8 years on 36 health centres				160,269,158
Local Government (figures based on 5 municipalities)				
Municipalities	National certificate (cost of service)	1 – 10	1,310	1,076,160
Baulai Union Parishad, Kishoreganj Gazipur Pourashava, Gazipur	Death registration (charge)	20 – 150	24	208,320
	Tax collection	-	386,450 pop.	81,380,120
Machhihata Union Parishad, Brahmanbaria Kushtia Pourashava, Kushtia Ranagachha Union Parishad, Jamalpur	VGf/VGD (No.)	27 – 233	2,040	20,189,260,800
	Trade Licence	-	386,450 pop.	1,249,600
Extrapolation: Total savings over 8 years in 36 local government institutions				145,966,860,000
Education (figures based on 5 schools)				
Schools	Student enrolment (no.)	40 – 150	2,589	99,312
Jafarganj Govt.	Student attendance	75 – 233	565	2,214,878

Primary School Rangpur. Bharaura Govt.	(no.) Free text book distribution (no.)	40 – 150	2,589	96,432
Primary School Sunamganj. West Chandana Govt.	Stipend (no. of recipients)	47 – 151	375	298,944
Primary School Gazipur. Baulai Govt. Primary School, Kishoreganj. North Govindi Govt. Primary School, Chandpur.	Examination fee (taka)	3 - 5	2,589	310,680
Extrapolation: Total savings over 8 years in 36 education centres				21,745,774

9. Impact of Making Waves at National Government level

- 9.1 The key mechanisms through which *Making Waves* impact on reducing corruption and generating accountability and transparency in service delivery institutions at the national level are: diagnostic studies/research, Parliament Watch, a corruption data base, a nationwide household survey, advocacy and media campaigning. We expand on these activities.
- 9.2 Diagnostic studies are in-depth analytical research on issues or institutions in which, through TIB's corruption database or other sources, the level of corruption is perceived to be high. Diagnostic studies usually determine the nature, extent and implications of corruption in a particular sector or institution and make specific recommendations for policy reform and/or institutional change.
- 9.3 Parliament Watch is one of the basic pillars of the National Integrity System. The key function of Parliament is to ensure accountability of the Government. Under Parliament Watch TIB has been monitoring the various activities of parliament, with an emphasis on its effectiveness as a whole but, in particular, its parliamentary committees. The main purpose is to facilitate greater awareness and sense of responsibility among Members of the Parliament as elected representatives of the people.
- 9.4 The corruption database is an on-going round-the-year effort by TIB to create a bank of information on the nature, magnitude, form, depth, spread and implications of corruption in Bangladesh. Reports on corruption in leading daily news papers published from Dhaka and outside are the key sources of information for the database. Analytical reports on the collected information are prepared on a half-yearly basis and reported for public information through roundtable conferences involving civil society, media, public officials and other stakeholders.
- 9.5 Household surveys on corruption in Bangladesh are nationwide surveys of the direct experiences of respondents regarding corruption. These are not about perception or opinion, but factual information provided by households on how

they have experienced corruption, its nature, dimension, types and implications. TIB has conducted four such corruption surveys so far. The first survey was conducted in 1997 on 10 public service delivery institutions. The second survey was conducted on 8 public service delivery institutions in 2002 and the third survey was conducted in 2005 on 10 sectors. The 2007 survey has been completed and the data are being analysed for release in December of this year.

9.6 From the key intervention mechanisms outlined above we have selected the diagnostic reports conducted by TIB as having a significant impact on accountability and transparency of National Government. We highlight some examples as follows:

- **Chittagong Port:** Chittagong Port's reputation has been tarnished from many years due to a number of irregularities arising from corruption, bureaucratic complexities and lack of safety for ships. It had become known as one of the most expensive and unsafe ports in the world. The port management had been held captive by an unscrupulous alliance of: corrupt officials, employees of the port and customs, dock workers, stevedores and others. In short, Chittagong Port Authority and the Customs Department of Bangladesh were systemically corrupt. Many of the retired dockers were still being paid and labour organisations were politically influenced. Up until 2007, almost 20% of land belonging to the port was under illegal possession. TIB's diagnostic study conducted in 2004/05 highlighted these irregularities and corrupt practices. As a consequence a team from the Anti-Corruption Commission visited the port. Since then there have been significant improvements.
- **Passport Delivery Service:** Widespread corrupt practices existed in the process of obtaining a passport in Bangladesh. There was collusion amongst passport officials, middlemen and the police. The latter, for example, were paid bribes during the police verification process. The whole system of issuing passports lacked adequate the necessary administrative and logistical support required. TIB's diagnostic study on the corruption led to a radial shake-up. Almost 60 brokers were arrested and their general influence diminished. A computerised system has been introduced which makes the police verification process more transparent and signboards with information regarding the procedures involved are now displayed.
- **Dhaka Medical College Hospital:** TIB diagnostic report on Dhaka Medical Hospital revealed many corrupt practices by doctors and misconduct by other staff. These included having to pay bribes to see a doctor, referrals to their private clinics, and poor attention to patients when in need of tests. Authorities had to be bribed to secure a bed in the hospital and free medicines were unavailable. TIB received little co-operation from the hospital during the research and afterwards. However a committee was formed by the Health Directorate and allegations of corruption made against 3 employees of the hospital, including taking bribes for recruitment and trading in dead bodies.

- They have subsequently been transferred out of Dhaka. In addition, patient information is now well posted throughout the hospital and there has been an improvement in the quality of health care on offer by doctors.

9.7 We summarise in tabular form some of the more high impact diagnostic reports in table 9.1.

Table 9.1: Pre and Post Intervention at National Government level

Pre-intervention	Post intervention	Impacts
Election Commission (EC)		
<ul style="list-style-type: none"> ▪ Election manipulation and corruption in favour of the ruling party lead to the erosion of trust in the accountability, transparency and integrity of the Election Commission. ▪ Dependence of the Election Commission on Prime Minister’s Office and Ministry of Finance ▪ Lack of infrastructure and efficient manpower ▪ Irregularities and corruption in recruitment, promotion, and transfer ▪ Financial misappropriation in procurement and misuse of funds ▪ No reform measures undertaken although voice is raised by civil society and other stakeholders 	<ul style="list-style-type: none"> ▪ Allegedly partisan Chair of Election Commissioners resigned ▪ Controversial Secretary to the Election Commission Secretariat was replaced ▪ New Chair of Commission appointed ▪ Appointment of 300 Upazila Election Officers cancelled ▪ Initiatives undertaken to amend RPO 1972 and other electoral laws ▪ Political party registration with Commission has been made mandatory ▪ Separation of Election Commission Secretariat is under way ▪ Project of providing national ID cards undertaken ▪ Commission to sit with political parties before finalisation of reforms 	<ul style="list-style-type: none"> ▪ A policy brief based on the study findings provided to the Caretaker Government and the Chair of the Election Commission ▪ All key recommendations of the study are either being implemented or considered by the Caretaker Government and Election Commission ▪ Feedback provided on the RPO 1972 amendments proposed by the Commission with consultation of experts ▪ Participated in a meeting organised by Commission on its reform ▪ Commission is asking for help and assistance from TIB ▪ Received huge coverage in the media
Public Service Commission (PSC)		
<ul style="list-style-type: none"> ▪ Lack of transparency procedure for appointment of chair and members. Lack of eligibility criteria and lack of specific accountability measures ▪ Absence of any capacity development for its staff ▪ Inadequate human resources 	<ul style="list-style-type: none"> ▪ The controversial Members resign ▪ Newly appointed Chair has reshuffled Commission and Secretariat ▪ Joint force and team of corruption investigators are now exploring the irregularities which occurred ▪ Government cancelled the viva voce result of 	<ul style="list-style-type: none"> ▪ PSC and present Caretaker Government have started implementing some of the key recommendations of the study ▪ TIB report and articles published in national newspapers – these have drawn attention of policy makers, candidates and the general public

<ul style="list-style-type: none"> ▪ Lack of modern technical support ▪ Internal recruitments, disciplinary and administrative issues of the PSC influenced by the government ▪ Archaic exam system lacking the scope of proper assessment of the competency of the candidates ▪ Examinations lacking transparency, accountability, and credibility, creating scope for irregularities and corruption ▪ Candidates barred from appealing decisions related to Commission or any other exam conducted by the Commission ▪ Absence of access to information by the candidates 	<p>the 27th Bangladesh Civil Service examination. The viva voce was started afresh from 29th July 2007</p> <ul style="list-style-type: none"> ▪ PSC has taken the initiative to produce guidelines for conducting viva voce in a credible way ▪ PSC authority has decided to give candidates the opportunity to challenge any decision related to exams conducted by it ▪ Present Chair has declared that Commission candidates will get mark sheet by paying the necessary fees ▪ The Secretariat of the PSC has been reorganised ▪ Steps have been taken to make the exam system more transparent and credible ▪ Government has also decided to set up a separate Commission (Civil Service Commission) to manage and control civil service related activities 	
Anti-Corruption Commission (ACC)		
<ul style="list-style-type: none"> ▪ The Bureau of Anti-Corruption was proven to be an inactive and discredited government body ▪ Corruption, mismanagement and irregularities were widespread in this institution as it was part of the Executive 	<ul style="list-style-type: none"> ▪ After a sustained advocacy campaign the ACC was formed in November 2004 but it was handicapped by government influence/interference. ▪ TIB's advocacy campaign continued and in February 2007, the ACC was reconstituted. Since then it has taken some tough high profile measures 	<ul style="list-style-type: none"> ▪ On the basis of a study on the former Bureau of Anti-Corruption, TIB recommended the establishment of an independent Anti-Corruption Commission and the abolition of the Bureau of Anti Corruption. ▪ TIB put forward a draft law for establishment of the ACC ▪ ACC has sought collaboration with TIB (see extract from letter below*)

***Extract** from letter written by Lt. General Hasan Mashhud Chowdhury (Retired) Chairman of the Anti-Corruption Commission to

Dr. Iftekharuzzaman, Executive Director TIB (dated 15th May 2007):

The Anti Corruption Commission is keen to launch a multi-pronged nation-side communication, outreach and citizens' engagement initiative. Prevention of corruption being the ultimate goal, the main objective of the initiative is to contribute to building a robust and sustainable anti-corruption edifice based on social resistance against the menace.

In view of the TIB's thrust on social movement against corruption we would welcome any opportunities of working with your organisation at national and local levels that may facilitate and complement this initiative. Your support in the form of sharing technical and organisational experience and expertise related to the above would be valuable. But we would also be keen to explore the possibility of joint programming and sponsorship of the above initiative in full or components.

10. Relative nature of impacts

10.1 One aspect of assessing the impact of the work of TIB is to provide some understanding of the relative contribution their various activities make to the log frame outcomes. During the course of our work we were asked 'which activities have most impact' on the outcomes of TIB's work? We have struggled to answer this question. At the broader level, for example, it is even difficult to make a judgement call on whether TIB's top-down (macro level) work is more or less effective than the bottom-up (micro level) CCC work.

10.2 What is clear is that both have an impact but in different ways. The macro level work has been very influential in helping to tackle some of the worst cases of institutional corruption and in building relationships with organisations which can drive change (e.g. Anti-Corruption Commission). But similarly, the work of the social movement on the ground has more immediate impacts on people facing day-to-day corrupt practices as part of their daily lives. With this caveat we have attempted in table 10.1 to illustrate the relative importance of the various activities at the macro and micro levels.

Table 10.1: Relative Impacts of TIB’s activities

Key TIB/CCC Activities	Nature of Impact	Relative Importance
Micro Level		
Advice and information Desks (fixed and satellite) Report cards	Public face of TIB/CCC on-the-ground activities Key instrument in highlighting the deficiencies in public services	High, ongoing, wide ranging impact High, issue/sector specific impact – quality of report cards will influence impact
Peoples’ theatre groups	Raises awareness, particularly amongst the ultra poor, of their rights and the services offered by CCCs	Immediate but short-term impacts which need follow-up work. Particularly important in targeting the most vulnerable and illiterate
Civic engagement activities	Creates high public visibility of the work of CCCs to larger audiences	Tend to be one-off events and hence impact will vary depending on the nature of the activities. Can be very effective in raising awareness
Mothers’ gatherings	Encourages mothers as active stakeholders in their children’s education	Medium, ongoing, sector specific impact which depends on the capacity of mothers involved
School management committees	Demands more active involvement by management committee in the work of the schools	Medium, ongoing, sector specific impact which depends on the capacity of members of the SMC involved
Engaging municipalities and face-the-public meetings	Holds to account elected representatives and helps prioritise the most pressing needs of the community	Potentially high, ongoing impact activities which require proactive efforts by CCCs to maintain public accountability
Macro Level		
Diagnostic studies/research	Key investigative mechanism use to highlight corrupt practices	High ongoing impact resulting from a strong evidence base used to challenge corrupt institutions and practices
Parliament Watch	Accountability mechanism for a key pillar of the National Integrity System	Long term, less obvious impact, which demands an ongoing vigilance over the institutions of governance
Corruption data base	Captures Bangladesh-wide media reporting of most corrupt practices	Impact is ongoing and around public aware raising. Immediate impacts are difficult to assess as it is about keeping corruption on the policy agenda
Nationwide household survey	Robust evidence on peoples’ experiences (rather than perceptions) of corruption throughout Bangladesh	High quality data that are used for advocacy purposes. Direct impact is difficult to quantify but longitudinal studies provide evidence of effectiveness in tackling corruption
Advocacy and media campaign	Uses research and evidence to advocate change with key policy makers and by mobilising public opinion through the media	Impact of advocacy and media campaign tend to be issue specific and ongoing.

- 10.3 Our judgements in table 10.1 on the relative merits of the various activities of TIB should not be interpreted as a kind of ranking list in which those which are not described as ‘high impact’ should be cut. Rather, what we have attempted to demonstrate here is that ‘the whole of TIB/CCC activities is greater than the sum of the parts.’ It would be crude in the extreme to conclude, for example, that because a civic engagement function such as an art competition in a fairly remote CCC district did not immediately impact on tackling corruption in Bangladesh that it was without value. Hence, we would urge caution in the interpretation of table 8.1 and emphasise the subjective nature of the relative importance ascribed to the activities shown.

11. Impact Assessment Findings

- 11.1 The recent (October 2007) Output to Purpose Review (OPR) completed by DFID staff (Tom Crowards and Zeenat Perveen) on TIB Making Waves concluded that ‘a number of output targets have already been met, with over one year of the project still to go. Other targets are well on track to be completed within the project period’. The OPR scored the project at ‘2’ meaning ‘good progress towards purpose completion and most outputs have been achieved, particularly the most important ones’. Give the closeness of the OPR to the impact assessment, it is not too surprising to note that we are similarly positive and indeed reinforce in our recommendations some issues already picked up by DFID officials.
- 11.2 It is clear from our work with influential stakeholders in Bangladesh (politicians, NGOs, government officials and media reports) that TIB has become synonymous with the fight against anti-corruption. One interviewee captured this by saying ‘TIB is now a brand name against corruption – those who read the newspapers in Bangladesh cannot miss the important work which TIB does in this area’. A key impact is that TIB has placed anti-corruption at the centre of public discourse. This is an important outcome of their work, not only in terms of raising awareness of the issues, but also because of the centrality of anti-corruption to the public policy agenda in Bangladesh.
- 11.3 Allied to the above is both the direct and indirect impacts of the work which TIB has had on institutional and policy reforms. The most obvious (but not an isolated) example in this regard is their influence on reforming the Anti-Corruption Commission. Their diagnostic research study on the Bureau of Anti-Corruption provided evidence of the ineffectiveness of this body and how discredited it was in the eyes of the public. TIB’s research and advocacy work raised the demand for an independent alternative and put forward a draft law to the (then) Government for the establishment of the Anti-Corruption Commission. When it was reluctantly set up in November 2004 through the Anti-Corruption Act, it was constrained through financial and administrative limits placed on it by the Government. In addition, the political influence on the selection of the Commissioners failed to secure public confidence in their work. Through TIB’s

advocacy, the Commission was reconstituted in February 2007 with much greater capacity and judicial clout. Other worthy institutional and policy reforms include TIB's research and advocacy work in relation to the Election Commission, Chittagong Port and the Caretaker Government's ratification of the UN Convention on Anti-Corruption.

- 11.4 The institutional changes in the Anti-Corruption Commission catalysed by TIB have led to important legal avenues to tackle corruption which have both substantive and symbolic impacts. Through the Anti-Corruption Act of 2004 the Commission has the powers to enquire into any allegation of corruption on its own initiative or upon an application filed by an aggrieved person. On the basis of this enquiry if, for example, the person is found to own property which is not consistent with his/her sources of income, the law dictates that prison terms ranging from 3 – 10 years can be given and the property confiscated. The ACC has already arrested a large number of high profile individuals suspected of involvement in corruption and special tribunals have been established to ensure speedy trials. TIB's work has been significantly influential in creating legal powers whereby corruption has become a punishable offence.
- 11.5 TIB's social movement against corruption at the local level has impacted on both the transparency and accountability of key public services through the 36 Committees of Concerned Citizens (in 34 districts) now in place. The establishment of CCCs has created a mechanism through which the wave of anti-corruption sentiment can be channelled to hold government officials to account in their delivery and performance in the core services of health, education and local government. The energy and commitment of these committees was palpable through our case study work. Their capacity to challenge and engage with authorities is testament to the standing with which the committee members have in their local communities. Importantly, the degree of volunteerism associated with this movement is significant. The extent to which can be sustained in the longer term is something which we return to in our recommendations.
- 11.6 An integral element of the fight against corruption at the local level are the activities of the Youth Engagement and Support groups (YES). TIB's work has impacted on the social conscience of young people in Bangladesh. The degree of enthusiasm and youthful vitality we encountered in our field work demonstrated that young people no longer accept that corruption has to be part of their daily lives. YES activities have provided a mechanism through which they can, in a small way, demonstrate their rejection of the status quo. The impact of their work is a key element in the effectiveness of CCCs as a local initiative in fighting corruption.

12. Recommendations

- 12.1 Given our findings on the significant impact of the work of TIB, it follows that our first recommendation is that they continue with their current work. The

important rider to this however is that they do it in a more focussed way. Given TIB's incremental growth, the changing and turbulent political environment in which they operate, it is not surprising that some of their work has been reactive. It is now time to take stock and plan in a more strategic way for the next 4 - 5 years. One important consequence of the impact TIB's work is that it has perpetuated a public demand for its involvement in a more diverse range of activities. For example, we heard during the course of our field work of the need for TIB to extend its remit into areas of land reform, water, banking, the lower judiciary etc. Moreover, TIB itself points to its role in looking at corruption, not only in the public sector but also the NGO and private sectors. Their concentration thus far has been on the public sector with the exception of their most recent report on corruption in NGOs. We recommend against this wider expansion in their portfolio which will leave TIB stretched in terms of its resources and, of necessity, limit its ability to provide depth research, advocacy and engagement with all these sectors. In short, we recommend that TIB 'drill down' rather than scale-up.

- 12.2 Given the above recommendation we suggest a greater emphasis on the work of TIB outside of Dhaka. There have been unanimous calls by all of the CCC convenors and the TIB field staff in the regions that the social movement extend to all 64 districts in Bangladesh. As one interviewee put it 'to raise our voices against corruption the whole of Bangladesh should roar'. The TIB Chair trustees and the Executive Director whom we interviewed expressed the view that they were constantly under pressure from existing convenors of CCCs and activists from other districts to expand their presence throughout Bangladesh. We can see how compelling this argument is for those energised by the concept of a social movement. Realistically however it is clear from our observations in the field that this level of volunteerism cannot be sustained in the medium to long term. It also prompts the question of the precise role of the social movement and how best to use resources efficiently and effectively in the future. We recommend that the primary role of the CCCs should be to assist in the better delivery of public services in health, education and local government within their existing 36 locations, but to deepen and expand their work therein. There is real potential for the CCCs to move beyond their work with an individual hospital, school and local government entity in a Union Parishad or Municipality to neighbouring provision throughout the Upazila/District. This will demand strengthening the capacity of the CCCs and additional resource support (personnel and financial) from the central budget. The alternative is to increase TIB's presence in a phased way (say an increase in the number of CCCs by 50% over the next 4 years). TIB is supportive of this alternative arguing that the Anti-Corruption Commission wants to work with existing CCCs in a complementary way but can only do so in 34 districts.
- 12.3 There is a positive sense of frustration amongst field staff in the CCC areas that they cannot meet the huge demand for the problems (e.g. domestic violence, land disputes) which are presented at their AI desks. To attempt to cater for the

diversity of issues would detract from the focus of TIB's work. However, there is clearly scope, in a much more formal way, for TIB to work with its NGO alliance which has a dedicated brief for some of these problems at the local level. We recommend that TIB forge stronger links with existing alliance NGO members and establish relationships with new NGOs most frequently mentioned during our field work in the three areas of local government, health and education. For example on education, CAMPE has a long and proven history of policy advocacy and regularly publishes the Education Watch Report focusing on quality, transparency and accountability issues. The Commonwealth Education Fund and its partners - Action Aid, Oxfam and SCF-UK also focus on improving education services through a number of local organizations. On health for example Health for All network is an alliance for TIB to consider. This year 27 NGOs have come together to collectively demand greater transparency, accountability and responsiveness in local government under the leadership of a local NGO called WAVE. These are examples of alliances already existing for TIB to consider. Inherent in this consideration is the earlier point of TIB identifying its additionality – its competency that it will bring to these alliances. We endorse the collaborations CCCs have established at the local level and recommend that TIB extends institutional support to these collaborations through formal agreements, if necessary.

- 12.4 Given our recommendation on deepening and widening the work of the CCCs within the existing administrative districts, it is clear to us that there is a lack of explicit connection between what is happening at local level and some of the work at the national level (the National Integrity System). Whilst the activities of the CCCs and YES groups are very laudable at the local level, there is a limit to how far they can impact on improving public services because of major under-funding in the health, education and local government sectors. There is a real opportunity for TIB to advocate at the national level for better resources for these core public services. They could do this by using their research, advocacy and engagement in the 36 CCCs as showcase areas where they have made a real difference. Without exception our case studies elicited pleas from professionals working in health, education and local government for more funding. We witnessed examples of two different year group classes being taught in one small class room where teachers gave lessons from opposite ends of the same room, inaudible to their own students and disruptive to the other class. Those hospitals which we visited were overcrowded, understaffed and lacked basic facilities. However effective the work of CCCs is in promoting accountability and awareness raising around corruption, there is a more fundamental problem of resourcing public services. We recommend that TIB connect their CCC field work at the local level to national advocacy campaigning. These should be mutually reinforcing.
- 12.5 The work of TIB has achieved a huge degree of acceptance under the Caretaker Government, including work which cannot, due to its sensitivity, enter the public domain. The challenge for TIB is to gain ongoing acceptance under a political government. There remains ongoing and important work to fulfil at the national

level in strengthening the National Integrity System. Examples include the work with the Election Commission, monitoring the government's performance against the standards of UN Convention on Anti-Corruption, working closely with the Anti Corruption Commission and ongoing work to secure an Ombudsman's institution (a Parliamentary Ombudsman with a subdivision of specialist Ombudsmen in health, education and so on). We recommend that TIB's work at the national level continue with particular reference to strengthening the pillars of the National Integrity System. This work should position TIB well in the transition to an elected Government.

- 12.6 There are clearly resource implications associated with our recommendation to deepen and widen TIB's work at the local level. We recognise, for example, that the addition of one TIB officer at the field level translates into 36 additional staff. In addition, there will be a need for logistical and technical support at the field/central levels. Should our recommendation receive support, we feel this will lead to much greater impact in a focussed way at the local level. Further decentralisation of field staff also requires TIB to rethink how best to organise its central resource base of advocacy, civic engagement and research. It may have to consider whether it is more effective to relocate some of these posts to the regions as their work in these areas increases. Staff from Dhaka travelling to the field and those working in the regions use public transport, some over very long distances. TIB should consider whether some alternative arrangements could be put in place to assist staff in carrying out their work.
- 12.7 We were struck by the active role played by YES members in the regions. They are a huge source of energy and commitment to the social movement against corruption. Whilst valuable induction and training activities are already provided to YES members by TIB, there is a need to build their capacity further if work in the regions is to be strengthened. The theatre and satellite AI desk work they perform is high profile awareness raising particularly amongst the illiterate and poor. We recommend further resources be devoted to supporting their work, including the possibility of paying expenses for their volunteer efforts (travel and subsistence). Not only would this acknowledge in a small monetary way their work but it will also act as an incentive for the continuance of their commitment to fight corruption as they become future role models in Bangladesh.
- 12.8 We recommend TIB consider training and orientation on gender issues as that will encourage women into YES leadership roles and the inclusion of gender related issues in the CCC fact sheets. To institutionalise gender mainstreaming, we recommend the development of guiding principles (extrapolated from the TIB gender strategy) to guide the research agenda which will ensure gender disaggregated information in the analysis of issues in TIB's reports. We further recommend that TIB strengthens its support to the CCCs by ensuring the implementation of action plans of CCC gender sub-groups.

- 12.9 TIB and associated CCCs and YES groups are busy entities with lots of activities going on all of the time. What is lacking is an integrated approach to monitoring and evaluating these activities. TIB commissioned a report by an independent consultant³ on establishing a monitoring and evaluation system which was recently published (October 2007). The report offers very useful guidance to TIB staff in capturing outputs and outcomes from their work, including data collection proforma and a framework for monitoring and evaluation. We recommend that the findings of this report be implemented so that impact analysis becomes an integral and ongoing part of the work of TIB.
- 12.10 At this juncture in the development of TIB, as they consider their strategy over the next 4 – 5 years, the question of sustainability of their activities must feature in their plans. With greater devolution/decentralisation to the regions, sustaining the ongoing work of CCCs will therefore be central to their future strategy. Some ideas have already been considered by trustees. Setting up an endowment fund was one suggestion, but potential private sponsors seemed less attracted to contributing to a fund compared to sponsoring events. TIB must be cautious however about its sources of private sector funding lest they have been derived from ill-gotten gains! They have considered targeting Bangladesh citizens working abroad as a potential source of financial support. Other suggestions include TIB doing research work on contract for other bodies (ministries, NGOs and the private sector). They have a very skilled research unit which could be commissioned for survey work, for example. Equally, government makes demands on TIB for information on a regular basis which they could consider charging for. We therefore recommend that the issue of sustainability be addressed in the emerging strategy paper.
- 12.11 Finally, and on a personal and subjective note, our assignment gave us the opportunity to work with and evaluate the impact of the activities of TIB. What we witnessed was a group of professionals and volunteers totally dedicated to tackling the insidious and destructive problems of long-term corrupt practices in Bangladesh. We wish them well in this important task at a major juncture in the country's political history.

³ Santi Ranjan Howlader 'Review and Finalisation of Monitoring and Evaluation System of TIB' (6th October 2007)

Appendix 1
Impact Assessment Work Plan

Transparency International Bangladesh



Impact Assessment of Making Waves Project by DFID

28th October-8th November, 2007

Date	Time	Programme	Venue
28.10.07, Sunday	2:00 pm - 5:00 pm	Meeting with TIB Official's and finalize the schedule	
29.10.07, Monday	9:00 am – 10:45 am	Meeting with DFID	
	11:00 am - 1:00 pm	DAF, CE & YES	
	2:00 pm - 3:00 pm	Research & AI-Desk	
	3:00 pm - 5:00 pm	Advocacy, Theatre, Policy & Training	
30.10.07, Tuesday	9:00 am - 2:00 pm	ED, M&E, Gender, A&F, HR	
	3:00 pm - 4:00 pm	Faruq Khan Ex-MP, Awami League	
	4:00 pm - 5:00 pm	TIB Office	
31.10.07, Wednesday	9:30 am - 10:30 am	Rashed Khan Menon Ex-MP, Workers Party	
	11:30 am - 1:00 pm	G. M. Kader Ex-MP, Jatiya Party	
	2:30 pm - 3:30 pm	Khushi Kabir, Executive Director, Nijera Kori	
	3:30 pm - 4:30 pm	Prof. Muzaffer Ahmad, Chairman, TIB	
	4:30 pm - 5:30 pm	TIB Office	
01.11.07, Thursday	9:30 am - 10:30 am	Shaheen Anam, Executive Director, Manusher Janno (MJ)	
	11:00 am - 11:45 pm	Samson H. Chowdhury, Civil Society	
	12:00 pm - 1:00 pm	Hafizuddin Khan, NGO Foundation	
	1:30 pm – 2:30 pm	Dr. Saadat Husain, Chairman, Public Service Commission (PSC)	
	3:30 pm – 4:30 pm	Lieutenant General Hassan Mashhud Chowdhury, Chairman, Anti Corruption Commission (ACC)	
	4:30 pm – 5:00 pm	TIB Office	
02.11.07, Friday	9:00 am - 10:00 am	Meeting with TIB's Field Staff at Hotel Abakash, Mahakhali, Dhaka	
	10:30 am - 1:00 pm	Investigative Journalism Awards at BRAC Centre, Mahakhali, Dhaka	

Date	Time	Programme	Venue
	2:30 pm – 3:15 pm	Meeting with CCC's Conveners at Hotel Abakash, Mahakhali, Dhaka	
	3:30 pm – 5:35 pm	Lecture on Corruption: Global Roots, Global Solutions at BRAC Centre, Mahakhali, Dhaka	
02.11.07, Friday	7:30 pm	Dinner to meet Dr. Huguette Labelle , Chair, Board of Directors Of Transparency International at Hotel Lake Shore, Gulshan 2, Dhaka	
03.11.07, Saturday	6:30 am	<i>Start for Natore from TIB Office and reach at 11:00 am</i>	
	11:30 am - 12:30 pm	Meeting with UP chairman and local citizens	Laksmipur UP Office
	12:40 pm - 1:30 pm	Meeting with health authority and visit to Hospital	Natore Sadar Hospital premises
	1:30 pm - 2:00 pm	<i>Lunch at Natore</i>	
	2:00 pm - 2:45 pm	Meeting with health watch group	CCC office, Natore
	3:00 pm - 4:00 pm	Meeting with Mothers, SMC members, Teachers at Primary School	Musirunnesa Govt. Pri. School, Natore
	4:15 pm - 5:00 pm	Meeting with victims of corruption (Land)	CCC Office, Natore
	5:00 pm - 5:30 pm	Meeting with YES members	CCC office, Natore
	5:30 pm - 6:00 pm	Meeting with CCC members	CCC office, Natore
	6:00 pm	<i>Start for Rajshahi and reach at 7:00 pm Dinner and night halt at Rajshahi</i>	
04.11.07, Sunday	8:00 am	<i>Start for Chapai Nawabganj and reach at 9:00 am</i>	
	9:00 am - 10:00 am	Meeting with Municipal authority	Chapai Nawabganj Municipal Office
	10:30 am - 11:30 am	Meeting with Mothers of students	Bidirpur Govt. Primary School
	12:00 am - 12:30 pm	Meeting with service recipients of Sadar Hospital	CCC Office, Chapai Nawabganj
	1:00 pm - 2:00 pm	Meeting with hospital authority and hospital Visit	Chapai Nawabganj Sadar Hospital
	2:00 pm - 3:00 pm	Meeting with CCC and YES followed by lunch	CCC Office, Chapai Nawabganj
	3:00 pm	<i>Start for Rajshahi and reach at 4:00 pm</i>	
	4:30 pm - 5:30 pm	Meeting with local citizens (cross section of people)	CCC Office, Rajshahi

Date	Time	Programme	Venue
	6:00 pm - 7:00 pm	Meeting with CCC and YES members	CCC Office, Rajshahi
05.11.07, Monday	7: 00 am	<i>Start for Naogaon and reach at 9:00 am</i>	
	9:00 am - 12:00 pm	Meeting with different school and hospital authority, local citizens	Naogaon
	12:00 pm	<i>Start for Dhaka and reach at 08:00 pm with a half an hour lunch break on the way</i>	
Date	Time	Programme	Venue
06.11.07, Tuesday	10:00 am	<i>Start for Gazipur and reach at 11:00 am</i>	
	11:00 am – 12:30 am	Meeting with Municipal body	Municipal Office, Gazipur
	1:00 pm - 2:00 pm	Meeting with CCC and YES members <i>followed by lunch</i>	CCC Office, Gazipur
	2:00 pm 4.00 pm 8.00pm	<i>Start for Dhaka and reach at 3:00 pm</i> Staff briefing TIB Dinner with donors and DFID	
07.11.07, Wednesday	9:00 am - 5:00 pm	Report/Outstanding issues and writing draft report	
08.11.07, Thursday	9:00 am - 5:00 pm	Present Draft IA 2007 Report	

Appendix 2

**Transparency International Bangladesh
2007 Budget**

Transparency International Bangladesh

Making Waves Programme

Total Budget and Expenditure for the year 2007

Expenditure Heads	Budget	Expenditure	Remarks
	Jan to Dec 07	Jan to Sep 07	
Comittees of Concerned Citizens	46,691,000	29,329,993	100% field based budget
Advice & Information Centre	7,349,000	3,040,405	100% field based budget
Advocacy & Campaigning	24,149,000	12,927,910	50% related to field support
Research & Documentation Centre	14,332,000	11,550,285	50% related to field support
Dhaka Cost Centre	34,708,000	24,263,515	40% related to field support
GRAND TOTAL (BDT)	127,229,000	81,112,108	

Appendix 3

Transparency International Bangladesh

CCC Activities: 2003 - 2007

Transparency International Bangladesh

CCC Activities: Duration: January 2003-November 2007

Basic information	Frequency	Issue based information	Frequency
Area covered	6 div. and 34 dist.	Issue 1: P. Education	
Total no of CCCs	36	Issue selected in CCCs	36
CCC member total	483	RC release on PE	16*
CCC member male	364 (76%)	RC release on PE pending	15
CCC member female	119 (24%)	SMC meeting	83
No of YES group (including theatre)	36	Mothers gathering	44
YES member total	1211	Consultation meeting	14
YES member male	920 (76%)	Prepare leaflet on education	8
YES member female	291 (24%)	Changes occurred at CCCs	20
No. of Theatre group	34	Issue 2: Health	
Total member of theatre	510 (appr)	Issue selected in CCCs	36
No of cultural group	3	RC release on health total	21
No of Swajon group	3	RC on health pending	15
Number of Swajon member total	125	Sat-AI-Desk on health issue	25
Swajon member male	97(77.6%)	Prepare leaflet on health	19
Swajon member female	28 (22.4%)	Changes occurred at CCCs	19
No of YES friends group	3	Issue 3: Local government	
Total number YES friends	186	Report card on LG release	19
Civic Engagement through concert, oath taking, art debate and essay competition and in partnership with various institutions	50000 (appr.)	Report card on LG pending	2
No of AI-Desk established	36	Face the public on LG	82
AI-Desk user total	7122	Prepare leaflet on LG	9
AI-Desk user male	6029	Changes occurred at CCCs	14
AI-Desk user female	1093	Others:	
Total no. of Sat. AI-Desk conducted	209	Seminar	38
Sat. AI-Desk user total	28345	Workshop	20
Sat-AI-Desk user male	20728 (73%)	Round table	7
Sat AI-Desk user female	7423 (27%)	Dialogue	126
Area specific fact sheets total	41	Consultation meeting	14
Total leaflet/vajpatro	84	Publications	20
Sub-Committee	Frequency	Sub-Committee	Frequency
Education	22	Appointment	5
Health	20	Report card	5
UP	14	Environment	1
Municipality/city corporation	6	Publication	6
Land	9	Planning/implementation	4
YES (Volunteer and theatre)	35	Police Administration	1
Gender	35	Students affairs activity	1
AI-Desk	16	Finance	11
Procurement	27	Network	2
Sustainability	2	Day observance	3
Secondary education	2	Disability	1

Abbreviations: RC= Report card, LG = Local Government, PE = Primary Education, UP = Union Parishad
CCC = Committee of Concerned Citizens, YES= Youth Engagement and Support, *Swajon* = Citizens for Transparency
AI-Desk= Advice and Information Desk, Sat. AI-Desk = Satellite AI-Desk, SMC= School Management Committee
* Another 6 Report cards were released in 2006 in greater Mymensingh - CCCs are still working on these

Appendix 4

Impact Changes in Health, Education and Local Government

Measurable changes in the Health Sector

Measurable change in 9 CCC areas and projection, if TIB continues to replicate this activity and practice in one health centre in each of 36 CCCs

Note: a) Figures are estimates only, b) Only 5 variables considered out of 15.

Sl. No.	Name of Hospital/ Health centre	Service	Amount/ Frequency of services		Savings per unit	Approximate number of beneficiaries/ users per month	Savings per month	Savings per year	Projection of savings for 7 years	Remarks
			Before CCC intervention	After CCC intervention						
1	Kushtia General Hospital	Out door ticket fee	4.40	5.00	0.60	400	6,240.00	74,880.00	599,040.00	
		In door admission fee	7.70	8.00	0.30	120	936.00	11,232.00	89,856.00	
		No. of patient attended by Doctors	200	300	5.00	100	13,000.00	156,000.00	1,248,000.00	Before intervention Doctors attend 50% out door patient in a day. Doctor attendance of outdoor patient increased 75% in a day
		Distributed medicine (in Taka)	0.60	1.00	0.40	400	4,160.00	49,920.00	399,360.00	
		Pathological facilities (X-Ray charged in Taka)	90.00	62.50	27.50	24	17,160.00	205,920.00	1,647,360.00	
2	Rangpur Medical College Hospital	Out door ticket fee	5.50	6.00	0.50	750	9,750.00	117,000.00	936,000.00	
		In door admission fee	7.70	8.00	0.30	1000	7,800.00	93,600.00	748,800.00	
		No. of patient attended by Doctors	450	548	5.00	98	12,675.00	152,100.00	1,216,800.00	Before intervention Doctors attend 60% out door patient in a day. Doctor attendance

										of outdoor patient increased 73% in a day
		Distributed medicine (in Taka)	0.50	1.00	0.50	750	9,750.00	117,000.00	936,000.00	
		Pathological facilities (X-Ray charged in Taka)	115.00	62.50	52.50	45	61,425.00	737,100.00	5,896,800.00	
3	Chapai Sadar Hospital	Out door ticket fee	4.40	5.00	0.60	450	7,020.00	84,240.00	673,920.00	
		In door admission fee	7.70	8.00	0.30	100	780.00	9,360.00	74,880.00	
		No. of patient attended by Doctors	225	360	5.00	135	17,550.00	210,600.00	1,684,800.00	Before intervention Doctors attend 50% out door patient in a day. Doctor attendance of outdoor patient increased 80% in a day
		Distributed medicine (in Taka)	0.50	1.00	0.50	450	5,850.00	70,200.00	561,600.00	
		Pathological facilities (X-Ray charged in Taka)	95.00	62.50	32.50	27	22,815.00	273,780.00	2,190,240.00	
4	Natore Sadar Hospital	Out door ticket fee	4.40	5.00	0.60	450	7,020.00	84,240.00	673,920.00	
		In door admission fee	7.70	8.00	0.30	130	1,014.00	12,168.00	97,344.00	
		No. of patient attended by Doctors	225	360	5.00	135	17,550.00	210,600.00	1,684,800.00	
		Distributed medicine (in Taka)	0.60	1.00	0.40	450	4,680.00	56,160.00	449,280.00	

		Pathological facilities (X-Ray charged in Taka)	90.00	62.50	27.50	32	22,880.00	274,560.00	2,196,480.00	
5	Jessore Sadar Hospital	Out door ticket fee	4.40	5.00	0.60	450	7,020.00	84,240.00	673,920.00	
		In door admission fee	7.70	8.00	0.30	250	1,950.00	23,400.00	187,200.00	
		No. of patient attended by Doctors	248	338	5.00	90	11,700.00	140,400.00	1,123,200.00	Before intervention Doctors attend 55% out door patient in a day. Doctor attendance of outdoor patient increased 75% in a day
		Distributed medicine (in Taka)	0.55	1.00	0.45	29	339.30	4,071.60	32,572.80	
		Pathological facilities (X-Ray charged in Taka)	100.00	62.50	37.50	35	34,125.00	409,500.00	3,276,000.00	
6	Khulna Sadar Hospital	Out door ticket fee	4.40	5.00	0.60	451	7,035.60	84,427.20	675,417.60	
		In door admission fee	7.70	8.00	0.30	330	2,574.00	30,888.00	247,104.00	
		No. of patient attended by Doctors	271	338	5.00	68	8,794.50	105,534.00	844,272.00	Before intervention Doctors attend 60% out door patient in a day. Doctor attendance of outdoor patient increased 75% in a day
		Distributed medicine (in Taka)	0.50	1.00	0.50	451	5,863.00	70,356.00	562,848.00	

		Pathological facilities (X-Ray charged in Taka)	87.50	62.50	25.00	38	24,700.00	296,400.00	2,371,200.00	
7	Satkhira Sadar Hospital	Out door ticket fee	4.40	5.00	0.60	420	6,552.00	78,624.00	628,992.00	
		In door admission fee	7.70	8.00	0.30	120	936.00	11,232.00	89,856.00	
		No. of patient attended by Doctors	298	352	5.00	54	7,035.60	84,427.20	675,417.60	Before intervention Doctors attend 66% out door patient in a day. Doctor attendance of outdoor patient increased 78% in a day
		Distributed medicine (in Taka)	0.45	1.00	0.55	420	6,006.00	72,072.00	576,576.00	
		Pathological facilities (X-Ray charged in Taka)	97.50	62.50	35.00	32	29,120.00	349,440.00	2,795,520.00	
8	Bagerhat Sadar Hospital	Out door ticket fee	4.40	5.00	0.60	460	7,176.00	86,112.00	688,896.00	
		In door admission fee	7.70	8.00	0.30	152	1,185.60	14,227.20	113,817.60	
		No. of patient attended by Doctors	276	345	5.00	69	8,970.00	107,640.00	861,120.00	Before intervention Doctors attend 60% out door patient in a day. Doctor attendance of outdoor patient increased 75% in a day
		Distributed medicine (in Taka)	0.55	1.00	0.45	460	5,382.00	64,584.00	516,672.00	

		Pathological facilities (X-Ray charged in Taka)	95.00	62.50	32.50	29	24,505.00	294,060.00	2,352,480.00	
9	Rajbari Sadar Hospital	Out door ticket fee	4.40	5.00	0.60	430	6,708.00	80,496.00	643,968.00	
		In door admission fee	7.70	8.00	0.30	145	1,131.00	13,572.00	108,576.00	
		No. of patient attended by Doctors	280	344	5.00	65	8,385.00	100,620.00	804,960.00	Before intervention Doctors attend 65% out door patient in a day. Doctor attendance of outdoor patient increased 80% in a day
		Distributed medicine (in Taka)	0.50	1.00	0.50	430	5,590.00	67,080.00	536,640.00	
		Pathological facilities (X-Ray charged in Taka)	90.00	62.50	27.50	30	21,450.00	257,400.00	2,059,200.00	
Total			-	-	-	-	417,367.60	5,008,411.20	40,067,289.60	
								For 36 Health Centres	160,269,158.40	

Measurable Changes in Education Sector

Measurable change in 9 CCC areas and projection, if TIB continues to replicate this activity and practice in one education centre in each of 36 CCCs

Note: a) Figures are estimates only, b) Only 5 variables considered out of 11.

Sl. No.	Name of Education centre/ School	Service	Amount/ Frequency of services		Savings per unit	Approximate number of beneficiaries/ users per month	Savings per month	Savings per year	Projection of savings for 7 years	Remarks		
			Before CCC intervention	After CCC intervention						CCC intervention	Class I & II (No. of student)	Class III to V (No. of student)
1	Jafarganj Govt. Primary School, Rangpur	Student Enrolment (No.)	325	367	42	367	3	1,101.00	8,808.00	Unauthorised Tk. 3 collected from each student before intervention		
		Student attendance (No.)	276	352	76	76	490	37,274.30	298,194.40	Student attendance increased from 85% to 96%. * Savings estimated @ \$7 per head, which is the minimum allocation rate for primary education.		
		Free text books distribution (No.)	325	367	42	367	5	1,835.00	14,680.00	Unauthorised Tk. 5 collected from each student for receiving books before intervention		
		Stipend (No. of recipient)	81	132	51	51	100	5,087.00	40,696.00	No. of student getting stipend increased from 25% to 36%. Now 49 new student get stipend.		
		Examination fee (Taka)	Class I & II is Tk. 10 and Class III to V Tk. 20	Class I & II is Tk. 5 and Class III to V Tk. 15	5	367	5	5505.00	44040.00	CCC intervention	Class I & II (No. of student)	Class III to V (No. of student)
	Before									127	198	
	After									142	225	
		Student appeared 3 times for examination in a year										

2	Bharaura Govt. Primary School, Sunamganj	Student Enrollment (No.)	281	321	40	321	4	1,284.00	10,272.00	Unauthorized Tk. 4 collected from each student before intervention		
		Student attendance (No.)	197	273	76	76	490	37,313.50	298,508.00	Student attendance increased from 70% to 85%. * Savings estimated @ \$7 per head, which is the minimum allocation rate for primary education.		
		Free text books distribution (No.)	281	321	40	321	3	963.00	7,704.00	Unauthorized 3 Tk. collected from each student for receiving books before intervention		
		Stipend (No. of recipient)	79	125	47	47	100	4,651.00	37,208.00	No. of student getting stipend increased from 28% to 39%. Now 47 new student get stipend		
		Examination fee (Taka)	Class I & II is Tk. 8 and Class III to V Tk. 15	Class I & II is Tk. 5 and Class III to V Tk. 12	5	321	5	4815.00	38520.00	CCC intervention	Class I & II (No. of student)	Class III to V (No. of student)
	Before									110	171	
	After									118	203	
										Student appeared 3 times for examination in a year		
3	West Chandana Govt. Primary School, Gazipur	Student Enrollment (No.)	850	1000	150	1000	7	7,000.00	56,000.00	Unauthorized 10 Tk. collected from each student before intervention		
		Student attendance (No.)	468	700	233	233	490	113,925.00	911,400.00	Student attendance increased from 55% to 70%. * Savings estimated @ \$7 per head, which is the minimum allocation rate for primary education		

		Free text books distribution (No.)	850	1000	150	1000	5	5,000.00	40,000.00	Unauthorized 5 Tk. collected from each student for receiving books before intervention		
		Stipend (No. of recipient)	230	380	151	151	100	15,050.00	120,400.00	No. of student getting stipend increased from 27% to 38%. Now 68 new student get stipend.		
		Examination fee (Taka)	Class I & II is Tk. 8 and Class III to V Tk. 15	Class I & II is Tk. 5 and Class III to V Tk. 12	3	1000	5	15000.00	120000.00	CCC intervention	Class I & II (No. of student)	Class III to V (No. of student)
	Before									380	470	
	After									455	545	
										Student appeared 3 times for examination in a year		
4	Baulai Govt. Primary School, Kishoreganj	Student Enrolment (No.)	520	575	55	575	3	1,725.00	13,800.00	Unauthorized 3 Tk. collected from each student before intervention		
		Student attendance (No.)	286	391	105	105	490	51,450.00	411,600.00	Student attendance increased from 55% to 68%. * Savings estimated @ \$7 per head, which is the minimum allocation rate for primary education		
		Free text books distribution (No.)	520	575	55	575	4	2,300.00	18,400.00	Unauthorized 4 Tk. collected from each student for receiving books before intervention		
		Stipend (No. of recipient)	130	207	77	77	100	7,700.00	61,600.00	No. of student getting stipend increased from 25% to 36%. Now 77 new student get stipend.		
		Examination fee (Taka)	Class I & II is Tk. 8 and Class III to V Tk. 15	Class I & II is Tk. 5 and Class III to V Tk. 12	5	575	5	8625.00	69000.00	CCC intervention	Class I & II (No. of student)	Class III to V (No. of student)

										Before	277	243
										After	297	278
										Student appeared 3 times for examination in a year		
5	North Govindi Govt. Primary School, Chandpur	Student Enrolment (No.)	282	326	44	326	4	1,304.00	10,432.00	Unauthorized 4 Tk. collected from each student before intervention		
		Student attendance (No.)	169	245	75	75	490	36,897.00	295,176.00	Student attendance increased from 60% to 75%. * Savings estimated @ \$7 per head, which is the minimum allocation rate for primary education.		
		Free text books distribution (No.)	282	326	44	326	6	1,956.00	15,648.00	Unauthorized 6 Tk. collected from each student for receiving books before intervention		
		Stipend (No. of recipient)	62	111	49	49	100	4,880.00	39,040.00	No. of student getting stipend increased from 22% to 34%. Now 49 new student get stipend.		
		Examination fee (Taka)	Class I & II is Tk. 10 and Class III to V Tk. 20	Class I & II is Tk. 5 and Class III to V Tk. 15	5	326	5	4890.00	39120.00	CCC intervention	Class I & II (No. of student)	Class III to V (No. of student)
										Before	135	147
										After	153	173
										Student appeared 3 times for examination in a year		
Total								377,530.80	3,020,246.40			
								For 36 Education Centres	21,745,774.08	<i>* Source: JSTOR (South Asian Journal Storage)</i>		

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Measurable Change in Local Government Institutions

Measurable change in 9 CCC areas and projection, if TIB continues to replicate this activity and practice in one Local Government institution in each of 36 CCCs

Note: a) Figures are estimates only, b) Only 5 variables considered out of 17.

Sl. No.	Name of Local Government Institution	Service	Amount/ Frequency of services		Savings per unit	Approximate number of beneficiaries/ users per month	Savings per month	Savings per year	Projection of savings for 7 years	Remarks
			Before CCC intervention	After CCC intervention						
1	Bulai Union Parishad, Kishoreganj	Nationality certificate (Cost of service)	20.00	10.00	10.00	260	2,600.00	31,200.00	249,600.00	
		Death registration (Charge)	100.00	30.00	70.00	4	280.00	3,360.00	26,880.00	
		Tax collection	380,000.00	450,000.00	-	-	-	70,000.00	560,000.00	34,653 population get benefited
		VGf/ VGf Cards (No.)	200	230	30	180	3,240,000.00	38,880,000.00	311,040,000.00	Every card holder received Tk. 600 & average family size is 6 members
		Trade license	40,000.00	60,000.00	-	-	-	20,000.00	160,000.00	34,653 population get benefited
2	Gazipur Pourashava, Gazipur	Nationality certificate (Cost of service)	30.00	20.00	10.00	600	6,000.00	72,000.00	576,000.00	

		Death registration charged	550.00	400.00	150.00	8	1,200.00	14,400.00	115,200.00	
		Tax collection	10,090,000.00	20,050,000.00	-	-	-	9,960,000.00	79,680,000.00	265,419 population get benefited
		VGf/ VGf Cards (No.)	-	-	-	-	-	-	-	No provision for VGD/ VGf card distribution
		Trade license	380,000.00	450,000.00	-	-	-	70,000.00	560,000.00	265,419 population get benefited
3	Machhihata Union Parishad, Brahmanbaria	Nationality certificate (Cost of service)	20.00	10.00	10.00	160	1,600.00	19,200.00	153,600.00	
		Death registration charged	50.00	30.00	20.00	3	60.00	720.00	5,760.00	
		Tax collection	230,000.00	280,000.00	-	-	-	50,000.00	400,000.00	34,422 population get benefited
		VGf/ VGf Cards (No.)	90	117	27	162	2,624,400.00	31,492,800.00	251,942,400.00	Every card holder received Tk. 600 & average family size is 6 members
		Trade license	32,000.00	48,000.00	-	-	-	16,000.00	128,000.00	34,422 population get benefited
4	Kushtia Pourashava, Kushtia	Nationality certificate (Cost of service)	11.00	10.00	1.00	210	210.00	2,520.00	20,160.00	
		Death registration charged	100.00	30.00	70.00	6	420.00	5,040.00	40,320.00	

		Tax collection	250,000.00	320,000.00	-	-	-	70,000.00	560,000.00	20,402 population get benefited
		VGf/ VGf Cards (No.)	100	150	50	300	9,000,000.00	108,000,000.00	864,000,000.00	Every card holder received Tk. 600 & average family size is 6 members
		Trade license	700,000.00	742,000.00	-	-	-	42,000.00	336,000.00	20402 population get benefited
5	Ranagachha Union Parishad, Jamalpur	Nationality certificate (Cost of service)	20.00	10.00	10.00	80	800.00	9,600.00	76,800.00	
		Death registration charged	100.00	30.00	70.00	3	210.00	2,520.00	20,160.00	
		Tax collection	39,490.00	62,005.00	-	-	-	22,515.00	180,120.00	31,554 population get benefited
		VGf/ VGf Cards (No.)	267	500	233	1,398	195,440,400.00	2,345,284,800.00	18,762,278,400.00	Every card holder received Tk. 600 & average family size is 6 members
		Trade license	5,000.00	13,200.00	-	-	-	8,200.00	65,600.00	31,554 population get benefited
Total							210,318,180.00	2,534,146,875.00	20,273,175,000.00	-
								For 36 Local Government Institutions	145,966,860,000.00	

Appendix 5

Good News Case Study

The Chandana River in Natore

The Chandana was once a beautiful river in Natore (North-West Bangladesh) in the Lalpur Thana area. It provided local people with water, irrigation, fish and was used for water logging and carrying goods by boat. Now it is drying up and has instead become a paddy field in the dry seasons. Its demise and loss to those who live beside, or work on, the Chandana is tragic and they are struggling for survival. The eco-system in the area has been destroyed by unscrupulous people. This is not a problem specific to Natore, hundreds of rivers are dying all over Bangladesh because of environmental degradation through greed and corruption.

A group of the victims of the Chandara river, whose livelihoods are under threat, came to the Natore Advice and Information desk (in the Committee of Concerned Citizens' Offices) for help on what, if anything, they could do about their plight. They advised Committee members that in 1968 land surveyors classified the river as dead or *khas* land which was only suitable for paddy production. Under the guise of being landless people unscrupulous people applied for and were granted permanent settlement via a government policy to assist the landless. In this corrupt process hundreds of acres of lands in the river were sold off to others who now hold legal entitlement. As a result, the new owners have stopped jute production unless payment is received and large parts of the river cannot be accessed by local people for washing their animals and bathing.

On the victims' behalf the CCC members raised the issue with the local administration, specifically the Upazila Nirbahii Officer in Lalpur, and sought his assistance to resolve the issue. After some initial reluctance and increased pressure from CCC, he visited the river sites and followed up with legal land searches. He uncovered that the river had been incorrectly declared dead and could track those involved in receiving portions of the river corruptly. Lalpur Upazila took a decision to legally challenge those now claiming rights over the river and its status as *khas* land. The people of Lalpur secured a legal victory with the help of CCC members and are now delighted to have the river back in local hands. They will now attempt to save and restore it to its former glory as a central feature of their living and working lives.