Workshop:

Strengthening integrity and transparency in the education and health sectors of Bangladesh

(Savar, Bangladesh: March 31 - April 2, 2014)











An advanced training workshop on "Strengthening integrity and transparency in the education and health sectors of Bangladesh" was held from the 31st of March till the 2nd of April 2014 in Savar, Bangladesh. It was organised by the Embassy of Sweden in Bangladesh within the framework of cooperating arrangements between the Anti-Corruption Resource Centre (U4) and the International Institute for Educational Planning (IIEP-UNESCO).

The major aims of this workshop were: understanding corruption in the health and education sectors and taking stock of how anticorruption measures can be integrated in both sectors in Bangladesh.

This report includes the various materials that were prepared and used for the Workshop, in particular: the plenary presentation outlines, as well as group work exercises. The appendix contains the list of participants.

U4 Workshop

Strengthening integrity and transparency in the education and health sectors - Bangladesh
Savar, Bangladesh March 31 – April 2, 2014

AGENDA

Aim:

• Understanding corruption in the health and education sectors and taking stock of how anti-corruption measures can be integrated in both sectors in Bangladesh.

Objectives:

- Discuss the relevance, impact and most urgent scenarios of corruption in Bangladesh's health and education sectors, as well as the effective integration of anti-corruption into sectors.
- Explore the potential of information technology for transparency and accountability.
- Deepen knowledge of good practices in education and health governance, drawing lessons across sectors for the prevention of mismanagement and corruption.
- Promote coordination among relevant stakeholders around anti-corruption objectives and expected results in the education and health sectors in Bangladesh.

	DAY ONE	
9.30 – 10.00	Registration	
10.00 – 10.20	Opening session	
10.20 - 11.00	 Welcome and expectations Introducing U4 and participants Introducing the agenda, goals, and workshop structure Official opening session 	Aranzazu Guillan, U4
10.20 11.00	Welcome and introductory remarks	Ambassador of Sweden
	 Welcome remarks by Ambassador of Sweden 	Senior official, GoB
	Official opening remarks by GoB	Aranzazu Guillan, U4
11.00 - 11.15	Coffee break	
11.15 – 12.30	Session 1: Understanding the problem: The challenge of	Aranzazu Guillan, U4
	 Presentation on corruption, causes and consequences. What do two decades of experience tell us about corruption problems and solutions? Causes, patterns, consequences and challenges of corruption in Bangladesh Moderated group discussion Objective: Provide an overview of the complexities and evolving knowledge in diagnosing the different faces of corruption, and introduce participants to the problem of corruption in Bangladesh. 	Rezwan-ul-Alam, TI Bangladesh

12.30 – 13.30	Lunch Break	
13.30 – 14.30	 Session 2: "Is it corruption?" Exercise Group work Participants work in small groups to assess potential corrupt practices, followed by a large group discussion. Objective: Appreciate the diversity of viewpoints on what is corruption (with a focus on sectors) through analysis of practical scenarios. 	Taryn Vian, BU
14.30 – 15.45	Session 3: Anti-corruption strategies: The value and challenges of a sector-based approach	Aranzazu Guillan, U4
	 Presentation on basic requirements to address the challenge of corruption at global level and anticorruption strategies Presentation on the rationale, value and challenges for mainstreaming anti-corruption in sectors Regulation, management and ownership: the need for integrated strategies within sectors Group work Objective: To analyze common types of anti-corruption strategies and how they work, and to help participants understand the value and challenges of mainstreaming.	Jacques Hallak and Muriel Poisson, IIEP-UNESCO
15.45 – 16.00	Coffee Break	
16.00 – 17.00	Session 4a: Mainstreaming anti-corruption into priority sectors:	Aranzazu Guillan, U4
	How could this be done?	, .
	 Presentation on the key elements of mainstreaming anti-corruption in sectors (building blocks) Presentation and discussion of the role of different stakeholders in anti-corruption mainstreaming approaches 	Mohammad Rafiqul Hassan, TI Bangladesh
	Objective: Provide participants with an understanding of the challenges and opportunities for integrating anti-corruption approaches into sector work, and reflect on the role of different actors.	
17.00 – 18.15	Session 4b: Mainstreaming anti-corruption into priority sectors: How could this be done?	Aranzazu Guillan, U4
	 Group exercise Participants work in groups to apply the analytical tools and concepts learnt in the previous session 	Mohammad Rafiqul Hassan, TI Bangladesh
18.15 – 18.30	Objective: Participants are able to develop a blueprint for systematically integrating anti-corruption measures into sector work. Closure day one	

	DAY TWO	
8:30 – 9:00	Summary of Day 1	U4
9.00 –10.45	Session 5: Mapping risks and consequences of corruption in the health and education sectors	
	 Risks and consequences of corruption in sectors (health and education), and methodologies for assessing risks 	
	Participants will be divided in two sector-based groups:	
	 Group work Participants identify and discuss the main corruption risks in the respective sector (health /education) Reporting to the plenary and discussion on commonalities and differences across sectors 	<u>Group on health</u> : Taryn Vian, BU
	Objective: Identify the main risks and consequences of corruption in health and education service delivery, internationally and in Bangladesh.	Group on education: Jacques Hallak and Muriel Poisson, IIEP-UNESCO
10.45 –11.00	Coffee Break	
10.45 –12:30	 Session 6a (Health sector): Transparency and public engagement in the health sector in Bangladesh Film "It's Our Money, Where's It Gone? Presentation on international experiences in the implementation of transparency and public engagement for promoting accountability in the health sector Group discussion Objective: Provide an overview of the principles and main types of transparency and accountability initiatives in health service delivery and identify lessons learned from their implementation. 	Taryn Vian, BU
	Session 6b (Education sector): Transparency and methodologies for assessing corruption problems in the education sector of Bangladesh	Jacques Hallak and Muriel Poisson, IIEP-UNESCO
	 Overview and principles of transparency and access to information in the education sector (internationally and in Bangladesh) Group work Participants identify and discuss lessons learned from implementing education report cards in Bangladesh Reporting back and plenary discussion Objective: Provide an overview of transparency approaches and the main methodologies for assessing corruption in the education sector, and discuss how to apply them to Bangladesh.	

12.30 – 13.30	Lunch	
13.30 – 15.00	Session 7a (Health sector): Improving health service delivery by addressing petty corruption and informal payments • Presentation on informal payments, their causes, and their effects on the quality and access to health services • Good practices and lessons learned from the	Taryn Vian, BU
	 implementation of strategies to reduce informal payments Group work Through a case study, participants discuss the problem of petty corruption and informal payments, and identify mitigating measures 	
	Objective: Analyze the scope and impact of informal payments and petty corruption in the health sector, and develop interventions to address the problem.	
	Session 7b (Education sector): Improving access to education by addressing petty corruption and informal payments	Jacques Hallak and Muriel Poisson, IIEP-UNESCO
	 Presentation on informal payments at school level, their causes, and how their effects on the quality and access to education Good practices and lessons learned from the implementation of strategies to reduce informal payments at school level Group work Participants discuss the problem of petty corruption in primary education (e.g., illegal fees, private tutoring, etc.), and identify mitigating measures 	
	Objective: Analyze the scope and impact of petty corruption and informal payments in primary schools, and discuss interventions to address the problem.	
15.00 – 15.15	Coffee Break	
15.15 – 16.45	Session 8: ICTs for transparency and accountability	Aranzazu Guillan, U4
	 Presentation on the value of ICTs for transparency and accountability, different types of ICT tools, and conditions for their effective adoption and use Presentation on international/regional and Bangladeshi experiences with ICTs for transparency and accountability (health and education) Group and plenary discussion 	Nuzhat Jabin, ANSA-SAR
	Objective: Introduce participants to ICT-based tools, and discuss how they can be used by governments and civil society to promote transparency and accountability in the education and health sectors.	
16.45 – 17.00	Closure day two	

	DAY THREE	
8:30 – 9:00	Summary of Day 2	U4
9:00-10:30	Session 9a (Health sector): Promoting integrity and accountability in human resources management	Taryn Vian, BU
	Case study: Polio eradicationExercise: Interventions to reduce absenteeism	
	Objective: Increase understanding of various approaches to improve accountability and control discretion of managers and employees.	
	Session 9b (Education sector): Promoting integrity and accountability of teacher behaviour and management	Jacques Hallak and Muriel Poisson, IIEP-UNESCO
	 Presentation on approaches to improve teacher behavior and management and reduce corruption risks Lessons drawn from international experiences (community and parents' participation, teachers' accountability, role of local governments, etc.) Group work Participants discuss how to optimize the use of integrity and accountability tools to improve teachers' accountability (e.g., integrity pledge, code of ethics) Objective: Increase understanding of various approaches to improve	
	accountability in teacher behavior and management and to reduce the risks of distorted practices.	
10:30 –10:45	Coffee Break	
10:45 – 12:15	 Session 10a (Health sector): Addressing corruption risks in procurement in the health sector Lecture on corruption vulnerabilities in procurement and mitigation strategies. International experiences in the health sector Group work Through a case study, participants identify and discuss mitigating measures to address the risks of corruption in drug procurement in Bangladesh Objective: Detect vulnerabilities to corruption in procurement, and present good practices to mitigate those risks. 	Taryn Vian, BU
	Session 10b (Education sector): Addressing corruption risks in procurement in the education sector • Corruption vulnerabilities in procurement and mitigation strategies. International experiences in the education sector	Jacques Hallak and Muriel Poisson, IIEP-UNESCO

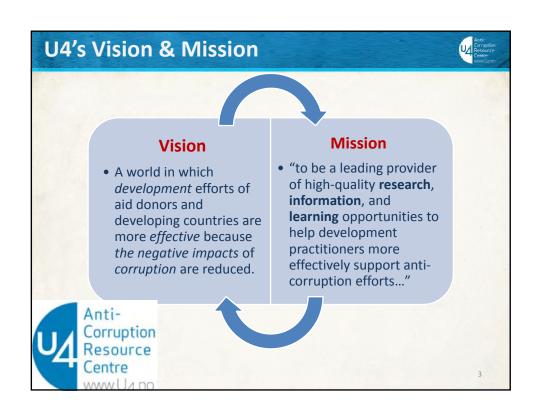
- Challenges and opportunities for strengthening procurement in education in Bangladesh (e.g., construction, equipment, textbooks, school meals)
- Group work
- Participants identify and discuss mitigating measures to address the risks of corruption in textbooks and school meals in Bangladesh

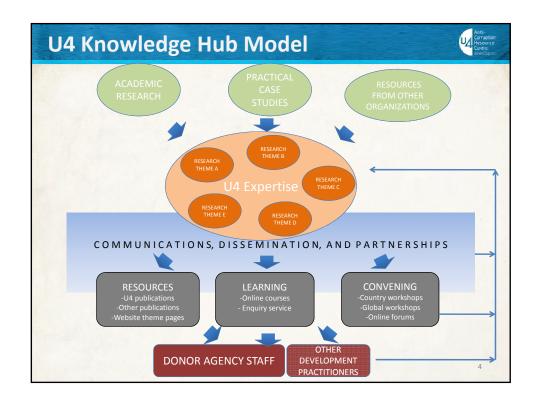
Objective: Detect vulnerabilities to corruption in procurement, and present good practices to mitigate those risks.

12.15 – 13.15	Lunch break	
13.15 – 15.15	 Session 11: Integrating anti-corruption into sector programmes. Lessons learned and opportunities for reform. Donor support to anti-corruption in health and education in Bangladesh Donor support to anti-corruption reform in both sectors (25 min.) Building on previous discussions, sector groups reflect on how to better integrate anti-corruption in their sector and the way forward for improving sector governance (35 min.) Groups report back to plenary (10 min. each) Moderated group discussion (35 min.) 	U4 Team (Taryn, Muriel, Aranzazu, Jacques) David Grey, UKAid Other donor representatives
15.15 – 15.45	Objective: Draw lessons learned on anti-corruption risks and approaches in both sectors, reflect on the way forward to strengthen governance of both sectors, and discuss how honors can support anti-corruption reform and contribute to multi-stakeholder dialogue in health and education. Closing remarks and handing out of certificates	Representative ACC Representative SIDA Aranzazu Guillan, U4
15.45 – 16.00	Group Picture	Aranzaza Gaman, G-
16.00	Departure to Dhaka	

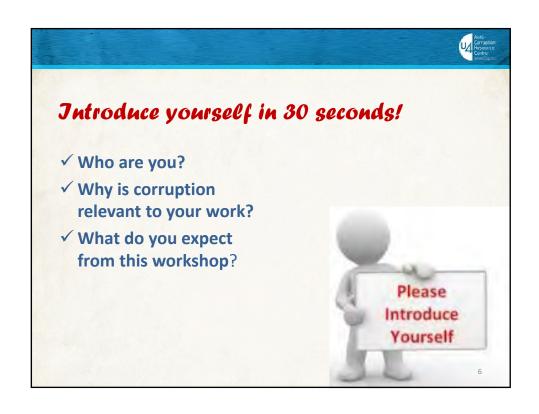




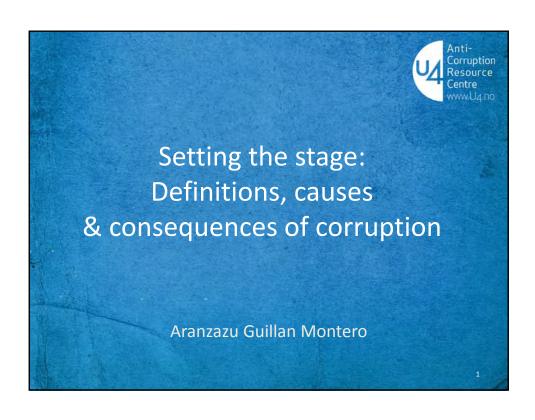


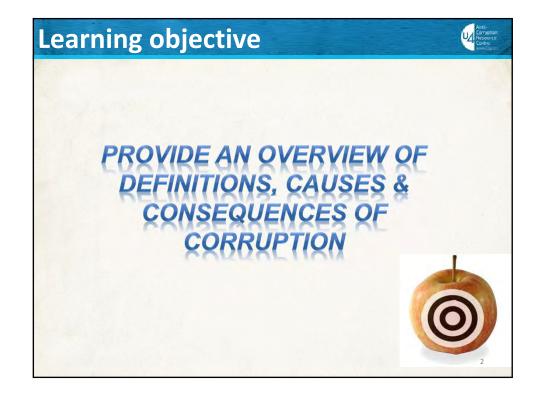












What is corruption?





➤ No single, universally accepted definition of corruption!



- ➤ However to address corruption useful to have a commonly agreed understanding...
- Critical to acknowledge and take into account local culture, norms and attitudes



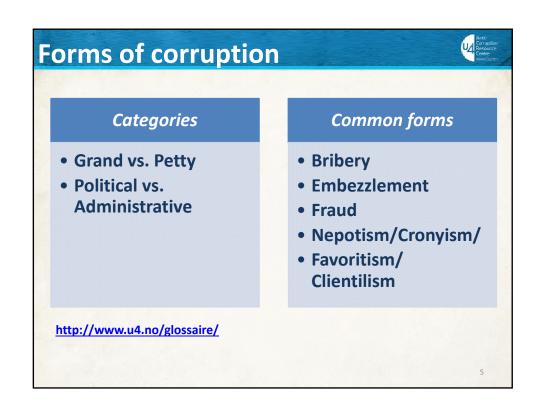
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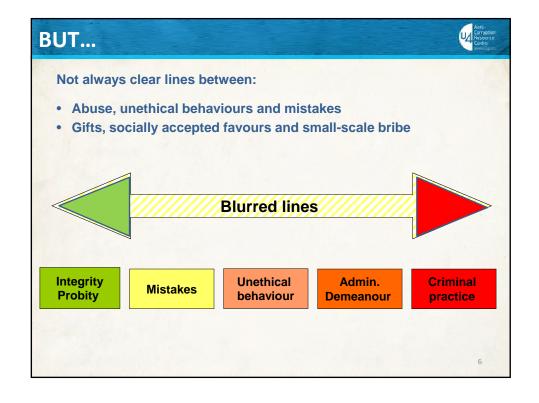
Commonly used definitions



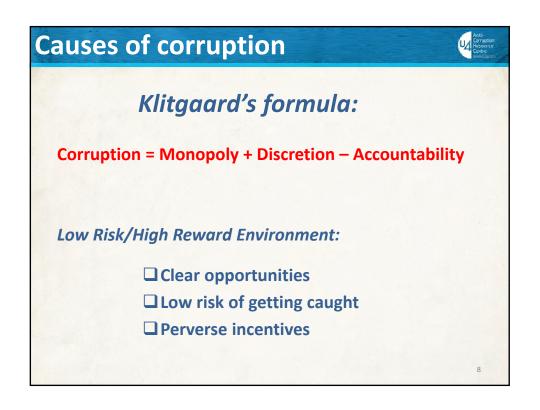


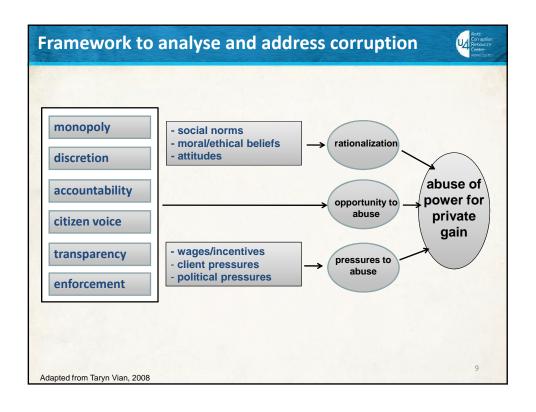
- ➢ Abuse of public power for private benefit (World Bank)
- ➤ The misuse of entrusted power for private gain (Transparency International)

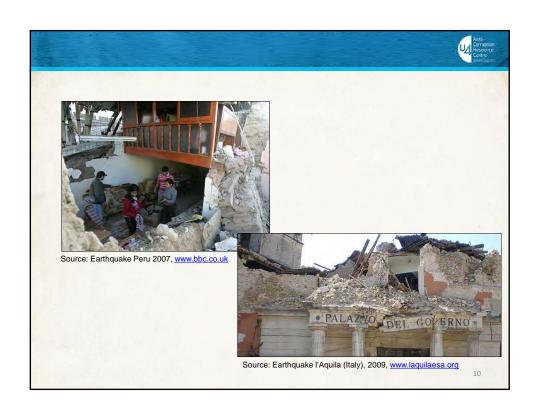




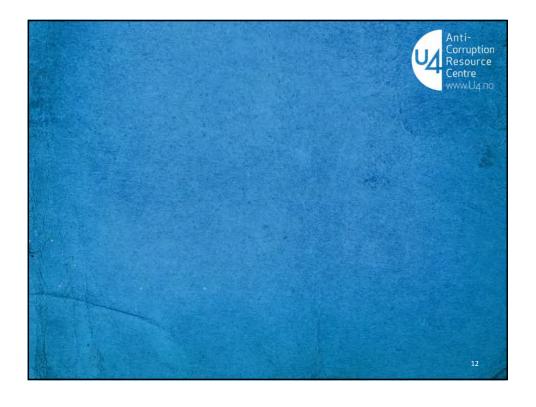
Explanations of corruption Economic explanations Political explanations Social / cultural explanations













An overview of the problem of corruption in Bangladesh: Patterns, causes and consequences

U4 Workshop Savar, 31 March 2014



Bangladesh at 44: Source of Pride

- Steady economic growth: 5-6% since 1990s
- Human Dev Index (HDI): 0.365 (1980) ➤ ► 0.566 (2011)
- Gender Equity Index (GEI 2012): Bangladesh (0.55) ahead of Bhutan (0.41), India (0.37), Nepal (0.47), Pakistan (0.29)
- Population growth: 2.5 (1980s) ➤ ► 1.39 (2010)
- Gross primary education enrollment: 72% (1980) ► ► 93.5% (2010)
- Child mortality: 239/1000 (1970) ► ► 65/1000 (2010) MDG Award
- Public sector, fledgling private and vibrant NGO sector
- Democratic structures (hardware)

All these - in spite of well-known governance deficit and pervasive corruption. (e.g., 77% of people outside the true benefits of growth - BBS)



Bangladesh's anti-corruption architecture

- Article 20 (2) of the Constitution:
- (2) The State shall endeavour to create conditions in which, as a general principle, persons shall not be able to enjoy unearned incomes
- UNCAC ratification in 2007
- More than dozen laws
- National Integrity Strategy of Bangladesh 2012
- Official affirmations and pronouncements





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Key anti-corruption laws



- Anti-corruption Act 19 Prevention of Money Laundering Act, 2009
- The Penal Code (Amendment) Act, 2004
- Speedy Trial Tribunal Act, 2002
- Speedy Trial Tribunal (Amendment) Act, 2004
- Speedy Trial Tribunal (Amendment) Act, 2010
- The Code of Criminal Procedure (Amendment) Act, 2003
- Anti Corruption Commission Act, 2004
- Anti Corruption Commission Ordinance, 2007
- Public Procurement (Amendment) Act, 2010
- Right to Information Act, 2009
- Whistleblowers" Protection Act, 2011



Governance Context: Perspective Plan 2010-21

- 'The Government is determined to confront and root out the scourge of corruption from the body politic of Bangladesh'.
- 'The Government intends to strengthen transparency and accountability of all government institutions as integral part of a program of social change to curb corruption'
- 'With Vision 2021 the country aspires to an accountable and transparent governance
 system' Perspective Plan 2010-2021, p. 17

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Governance Context: 6th Five Year Plan

The Government recognizes:

- 'Corruption lies at the heart of overall governance shortcomings in Bangladesh'
- 'Ensuring good governance requires establishing strong institutions'
- 'Without a strong anti-corruption strategy the ability to implement Vision 2021 and the underlying 5 year development plans will be seriously compromised'

(6th Five Year Plan FY 2011-2015, p. 9)

In addition:

 Governance and corruption control at the core of election manifesto in successive national elections



Public Pronouncements

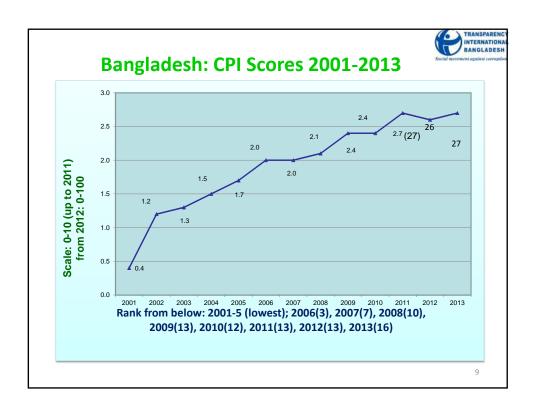
- Father of the Nation Bangabandhu Sheikh Mujibur Rahman on 25 December 1974
- " ... By rising above nepotism, corruption and self-deception, all of us have to be engaged in self-criticism, self-restraint, and selfpurification."
- Prime Minister Sheikh Hasina: "We are pledge-bound to promote good governance in Bangladesh...We are also taking rigorous measures against corruption."

7



Current status as per CPI

- CPI 2013, Bangladesh scored 27, just one point higher than 2012 and the same as in 2011.
- In terms of ranking Bangladesh was placed 16th from the bottom in 2013, 3 steps higher than that in 2011 and 2012.
- Counted from the top, Bangladesh has ascended by 8 positions to 136th among 177 countries, compared to 144th in 2012 among 176 countries.
- Bangladesh's score remained well below global average of 43, and was ranked as the second worst performer in South Asia, better than only Afghanistan which ranked at the bottom of the global list.
- Bangladesh was earlier placed at the bottom of the list for five successive years from 2001-2005. In 2006, 2007, 2008, 2009 and 2010



Global Corruption Barometer 2012

- 60% Bangladeshi respondents believe the level of corruption in the country has increased in the last two years,
- Only 26% have confidence in government measures to fight graft

TOP 5
CORRUPT SECTORS

☑ Political parties

- **☑** Police
- **☑** Judiciary
- ☑ Parliament
- **☑** Administration

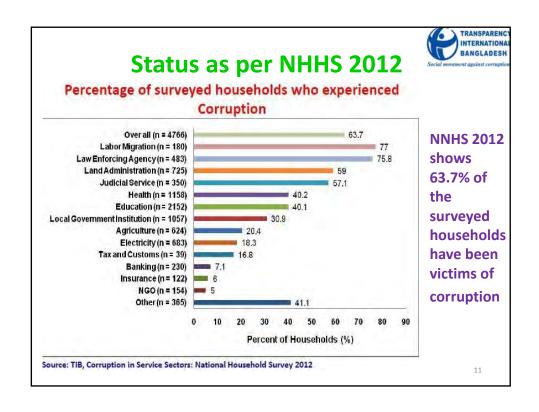
In nine out of 12 sectors, corruption in Bangladesh is lower than at global level

Padma, Hall-Mark, share market scams contributed to people's perception that corruption rose: TIB

From a global perspective, Bangladesh fares better in nine of the 12 sectors in terms of the level of corruption.

10

TRANSPARENC



Continued...



 Cost of bribery increased from 2010's 1.4% to 2.4% of GDP and from 2010's 8.7% to 13.4% of annual national budget in 2012.

While corruption affects everyone, the poorer sections of the society suffer from it more.

The rate of victimization of corruption decreased from 2010's 84% to 55.8in 2012.

Incidence of corruption has been found to be relatively higher in rural areas.



Corruption defined

- No agreed definition in UNCAC
- No Bangladesh law defines corruption
- TIB's definition: abuse of power for personal gain.
- In NHHS's: bribery, extortion, fraudulence, embezzlement of money or property, negligence to duties, nepotism and different kinds of hassles.
- Unauthorized money/ payment denotes to bribery, extortion, fraudulence and embezzlement of money
- Embezzlement of money or property means absorbing money or property of people illegally abusing one's power.

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Causes of corruption



Structural/Institutional factors

- Range of discretion absence of checks & balances
- Ineffective enforcement and implementation of law and processes
- Low level of transparency, disclosure, accountability Personal factors
- Incentives, Compulsion, Opportunities Need-based, ► ►
 Greed-based
- Cost-benefit calculation Benefits of corruption higher than risks/costs
- Low citizens awareness, involvement
 - Sense of Disempowerment
 - Lack of forum & channel
- Value erosion ➤ ➤ way of life ➤ ➤ culture of impunity



- Depletion of national wealth. The World Bank (2000) estimates Bangladesh looses 2.1 to 2.9 percent GDP growth due to corruption
- Corruption leads to increased costs of goods and services (It was average BDT 4834 in 2010, it increased to average BDT 13,084 in 2012), funnels scarce public resources to sectors in total disregard of priority projects
- It entails diversion and misallocation of resources, conversion of public wealth to private and personal property
- Contributes to inflation, imbalanced economic development and poverty
- Weak work ethics and professionalism
- Hindrance to the development of fair in market structures and unhealthy competition
- Weakens NIS system and impoverishes the country



Government's 16 NIS Institutions

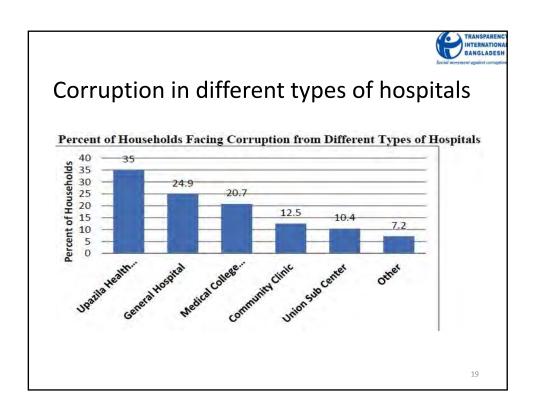
- State institutions 10
 - Public administration
 - Parliament
 - Judiciary
 - Election Commission
 - Attorney General's Office
 - Public Service Commission
 - Comptroller and Auditor General
 - Ombudsman
 - Anti-Corruption Commission
 - Local Government
- Non-state institutions 6 (Political parties, private sector, NGO and CSO, family, educational institutions and media

NIS Challenges and Action Plans Transparen		
1. Public Administration	8 Challenges	Social movement against corruption 12 Action plans
2. Parliament	6	11
3. Judiciary	7	9
4. Election Commission	6	7
5. Attorney General's Office	4	5
6. Public Service Commission	8	8
7. Comptroller and Auditor General	4	6
8. Ombudsman	2	4
9. Anti-corruption Commission	7	10
10. Local Government	7	7
11. Political parties	4	4
12. Private sector	7	11
13. NGO and CSO	5	6
14. Family	3	4
15. Educational institution	3	4
16. Media	5	8
Total	86	114 ₁₇



Health Corruption as per NHHS 2012

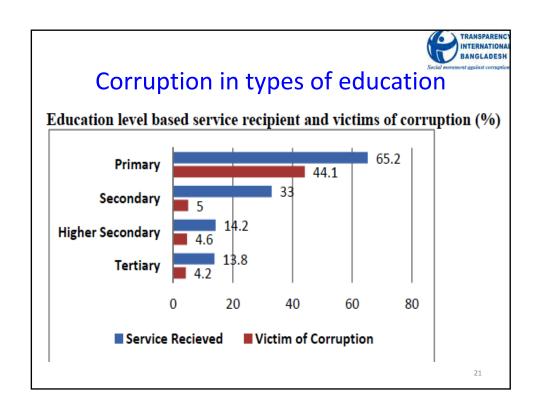
- Corruption in the health sector is a reflection of general governance problems in Bangladesh's public sector (Knox, 2009)
- NHHS 2012 40.2% were victims of different kinds of irregularities and corruption in receiving services.
- 21.5% service recipient households had to pay on average 258 taka in unregulated way (without any receipt).
- The highest proportion (15.2%) of households reported the presence of pharmaceutical companies' representatives
- 11.4% households did not get any doctor available during emergency, 10.1% households faced serial break while waiting at the queue for doctor consultation
- 6.2% faced brokers' harassment in hospital premises.

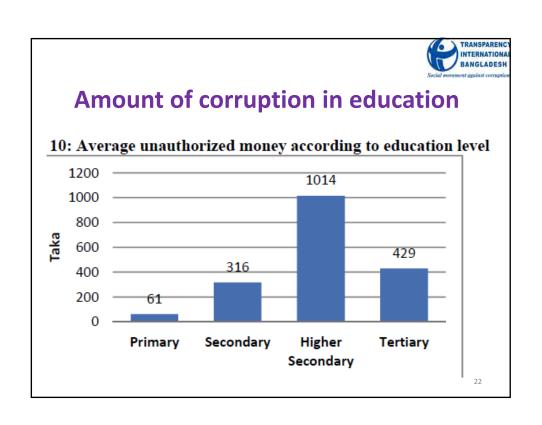




Education Corruption as per NHHS 2012

- Corruption in education still manifests itself in a variety of ways, including negligence of duty, bribery, misuse of resources etc. (NORAD, 2011)
- NHHS 2012 40.1% were victims of corruption and irregularities
- 30.7% of the households had to pay unauthorized money.
- The average amount of unauthorized payment was Tk 100 (Tk 82 in rural and Tk 164 in urban areas).
- Corruption types: student admission, examination fees, getting free books, getting stipend and becoming enlisted, examination registration and performing different programs of educational institutes.



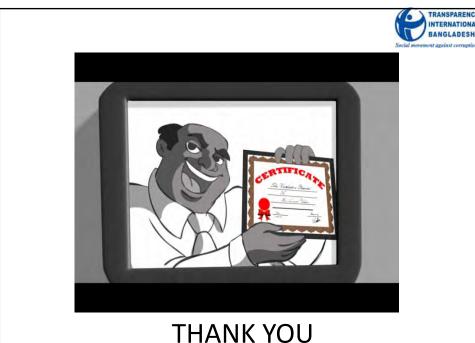


In Lieu of a Conclusion



- Fighting corruption is a national imperative and UNCAC obligation
- The key challenge WHO WILL BELL THE CAT?
- Complete eradication of corruption is not a realistic proposition.
- To fight corruption requires highest level of political commitment for courageous action without fear or favour
- Where the political commitment is weak, and institutions are not functioning independently and effectively – create demand: <u>inform, communicate</u> and campaign for a social movement

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Financing Modalities and Budget Transparency

Taryn Vian

Boston University School of Public Health

Acknowledging the assistance of Dr. William D. Savedoff, Social Insight, Inc.

U4 Workshop, Strengthening integrity and transparency in the Education and Health Sectors



The problems

- Weak link between spending & outputs
- Spending on activities which citizens do not want or need
- Resource allocation influenced by factors unrelated to public benefit
- Diversion of funds, 'leakage' between levels of government



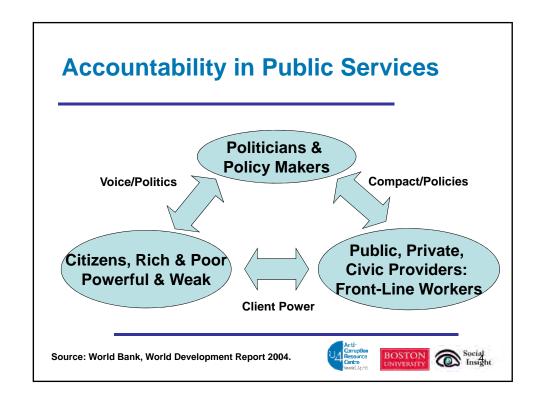


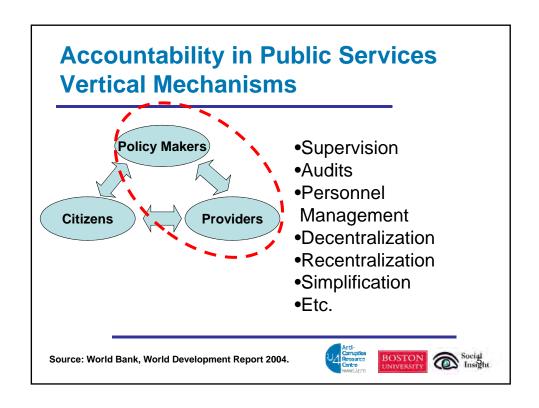


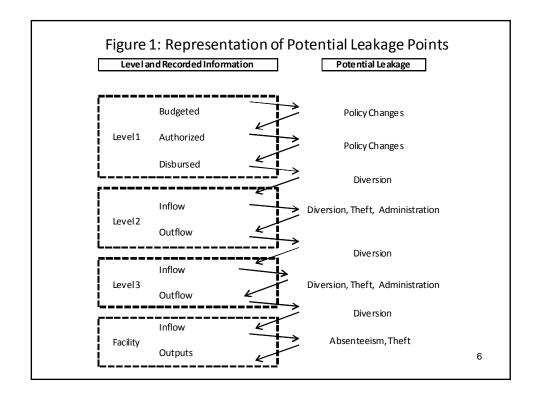
Leading to...

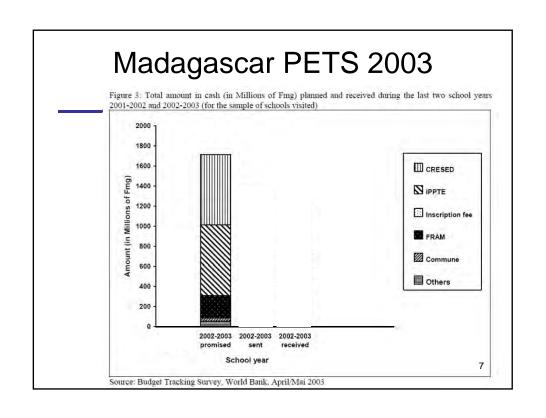
- Ineffective or unnecessary programs
- Limited access to services
- Stock-outs of drugs, poor quality care
- Greater out-of-pocket spending

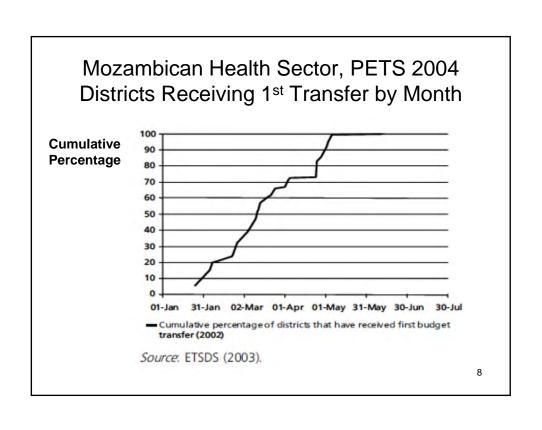


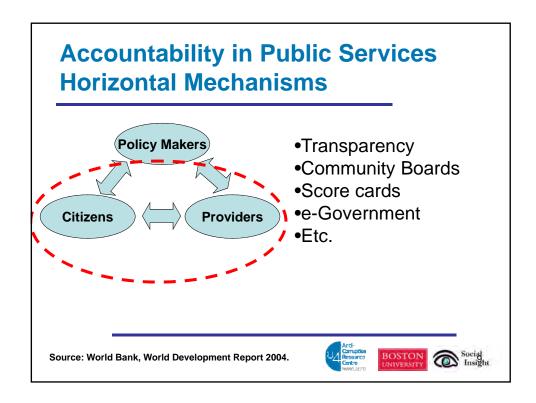












Goal of budget oversight

"What brings us together...
is our belief that people have a
right to influence the public
choices that shape our lives.
Public budgets are the chief
instruments by which
governments make these
decisions, and civil society the
greatest tool to ensure that
people are part of that
process."

Jim Schultz, Democracy Center in Bolivia, at the International Budget Project's third conference To ensure that independent stakeholders have the information & capacity necessary to hold governments to account







Objectives and Actions

Raise level of budget transparency

- · Collate, synthesize, disseminate budget information
- Conduct independent analysis

Increase public budget literacy & awareness

- Expand public engagement with budget process
- · Bring new information to budget decisionmaking, i.e. citizen priorities







Transparency Tools: Score Card

- Create a transparency "score card", including objectives for transparent budget process and documents
- Measure how well government performs against the score card
- Citizen organizations collaborate with government to improve performance based on findings







Budget Transparency Score Card State of Colorado USA

Checkmarks can be interpreted as follows:

Summary of Scores and Grades for Colorado at baseline

	practices
111	Colorado's budget complies with recommended practices most of the time
$\sqrt{}$	Colorado's budget complies with some of the recommended practices
$\sqrt{}$	Colorado's budget minimally or seldom complies with recommended practices
-	Colorado's generally does not comply with recommended

practices

Percentage	Score	Grade
Availability in (Governor's) Proposed Budget of Revenue, Expenditure, and Fund Balance Data – Historical and Projected	52/152 (34,2%)	V
II. Availability of Revenue, Expenditure, and Fund Balance Projections as Budget Proceeds through the Legislative Process	20/29 (69%)	111
III.Availability of Information to Put Budget Data in Context	35/97 (36%)	V
IV.Availability of Supplemental Tax and Revenue Information	2/34 (6%)	-
V.Budget Process Issues	9/38 (24%)	V







International Budget Project



- CSOs in Brazil, Croatia, India, Mexico, South Africa, and Uganda
- Committed to social justice, efficient and effective government

http://www.internationalbudget.org/







Budget transparency

Mexico:

- Uncovered corruption in HIV prevention & treatment
- Provided knowledge and skills to civil society coalitions, e.g. data analysis to monitor government's commitment to maternal mortality reduction.

South Africa

 Changed focus of AIDS advocacy groups from national to provincial level, where problems were frequent

Source: IBP "Lessons from the Field" & case studies. http://www.internationalbudget.org/casestudies.htm







Budget Literacy

Uganda:

- Created budget guides
- Linked budgets to citizens' daily lives through media.

Brazil:

Created distance learning modules.

Source: IBP "Lessons from the Field" & case studies. http://www.internationalbudget.org/casestudies.htm







Transparency + Literacy + Action

Gujarat:

- DISHA informs local officials of Tribal Sub-Plan allocations & asks if implementation is underway. If not, DISHA pressures the relevant government minister to release funds. Budget execution increased.
- Monitoring implementation can be more effective than calling for more funds!







Conclusion

- Civil society can improve transparency of the budget and budget process
- Budget work requires an audience with interest in and capacity to use results for social change
- Structural & policy change in budget systems requires long term engagement
- Focus on: Accuracy—accessibility—timeliness
- Impact depends on relationships with civil society, government, legislature, donors, media









U4 training workshop:
'Strengthening integrity and transparency in the education
and health sectors in Bangladesh'
Dakha, 31 March-02 April 2014

The value of sector-based approach: an education perspective

Jacques Hallak & Muriel Poisson

© IIEP-UNESCO



OBJECTIVES OF THE SESSION

Review the major arguments in favor of addressing the

 Identify major challenges for addressing the issue of corruption at the sector level

issue of corruption at the sector level

Case of the education sector used as an illustration

Hallak & Poisson ©IJEP-UNESCO 2014



1. EDUCATION IS A MAJOR PUBLIC SECTOR

Resources allocated to the education sector in the E9 countries (2013)

	Total pop. (in thousands)	Total pub. exp. on education as % of total gov. exp.	Total pub. exp. on education as % of GNP	Tot. nber of 1ary school teachers (in thousands)
Bangladesh	154 394	14.1	2.1	364*
Brazil	200 050	18.1	5.9	775
China	1 359 368	n.a.	1.9	5 939
Egypt	85 378	11.9	3.7	380
India	1 275 138	10.5	3,3	3 135*
Indonesia	247 188	15.2	3.7	1 923
Mexico	117 478	n.a.	5.3	531
Nigeria	170 901	n.a.	n.a.	574
Pakistan	183 189	9,9	2.3	453

* Figure for 2007

Source: EFA Global Monitoring Report, 2013-14

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2. EDUCATION IS BOTH A SUBJECT AND AN OBJECT OF CORRUPTION

- Education offers a broad variety of opportunities for corrupt practices in the use of resources allocated to the sector
- But education is also instrumental in the design of strategies to reduce corruption in all sectors (both economic and social)

Education against corruption

Education free of corruption

Hallak & Poisson ©IJEP-UNESCO 2014



3. ACCESS TO EDUCATION IS A HUMAN RIGHT

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- Primary education must be free of charge for all: no child should be required to pay unauthorized fees
- Non-discrimination: the admission/promotion of children should not be based on favoritism or bribery
- Equality of educational opportunities: the number of teaching hours offered should not be affected by teachers' unjustified absenteeism

"Everyone
has the right
to education"
(Universal
Declaration of
Human Rights,
Article 26)

Hallak & Poisson ©IIEP-UNESCO 2014



4. SOME MALPRACTICES ARE SPECIFIC TO THE EDUCATION SECTOR

Areas of planning/management	Malpractices		
Finance	Transgressing rules and proceduresInflation of costs and activitiesLeakage of funds		
Personnel behavior (professional misconduct)	Favoritism/nepotism/acceptance of g	gifts	
Examinations Access to universities Transborder education	 Private tutoring Selling of information Examination fraud Diploma mills and false credentials 		
Institution accreditation	Fraud in the accreditation process		







7. ANTI-CORRUPTION ACTIONS MATCH WITH SECTOR CONCERNS

9

- Reduction of the resources available: fund leakage, ghost teachers, absenteeism
- Major obstacle for improving quality: reduced teaching hours, unavailable textbooks
- Reinforcement of inequalities: less resources in priority areas, school meals unavailable for the poor, unjustified credentials available to students who can afford to pay bribes

In some Indian states, the salaries of absent or ghost teachers may account for 15-20% of payroll costs (half of non-salary running costs)

"Corruption is a major drain on the effective use of resources for education and should be drastically curbed" EFA (Dakar, 2000)

Hallak & Poisson ©IIEP-UNESCO 2014



CORRUPTION IN EDUCATION: WHERE DO WE STAND TODAY?

10

- ✓ Great deal achieved in sector assessment (sector-wide integrity assessment in Serbia) and piece-meal approaches:
 - Financial leakage
 - Teacher absenteeism
 - Academic fraud
- At the same time, development of some anti-corruption plans for education (Montenegro)
- Successful stories to reduce corruption in selected domains (reducing financial leakage, admission to universities, cleaning staff lists)

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SECTORAL APROACH OF CORRUPTION MAJOR CHALLENGES

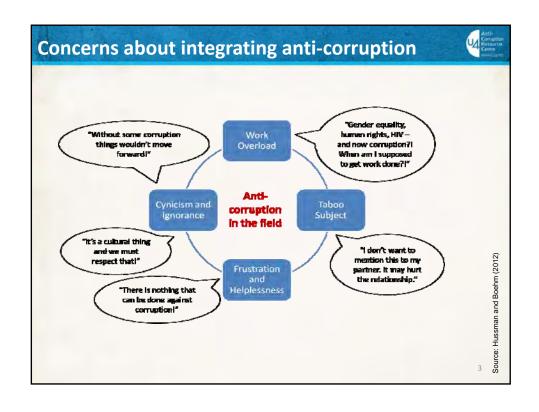
- ✓ Socio-political obstacle: teachers, first or second largest group in the civil service, very influential in political decisions
- **Cultural barriers:** in Latin America, linking corruption with education is "taboo" (how to change the mindset?)
- Lack of capacities in the sector to develop adequate diagnostic tools and strategies
- Donor agencies reluctant until recently to integrate anticorruption concerns into sectors
- Grand corruption naturally regarded as to be addressed by global anti-corruption approaches

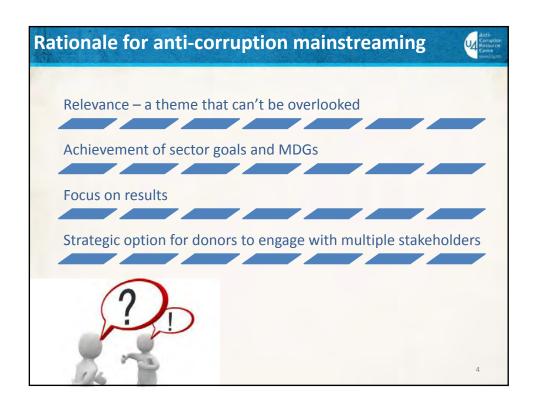
Importance of this course...

Hallak & Poisson ©IIEP-UNESCO 201



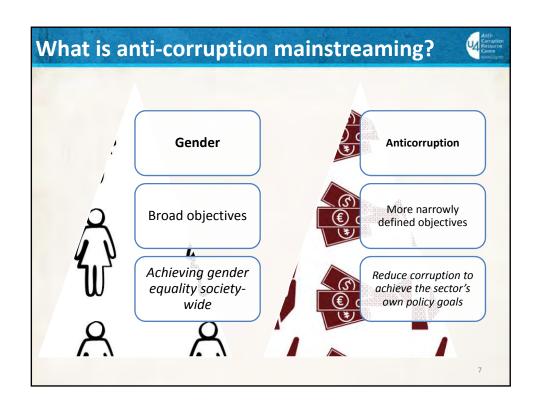


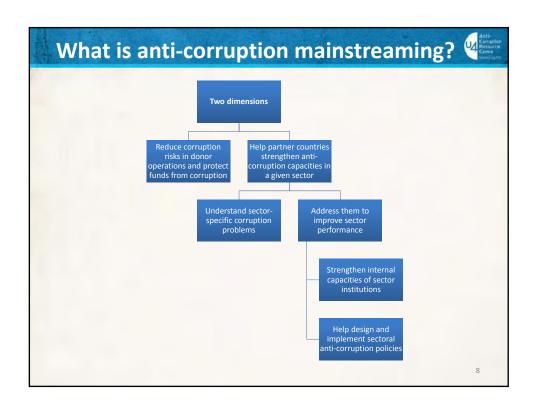


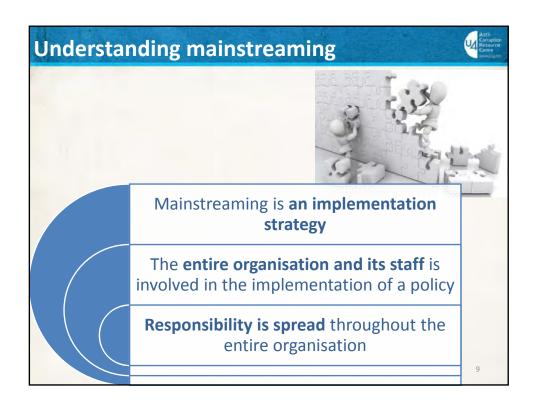


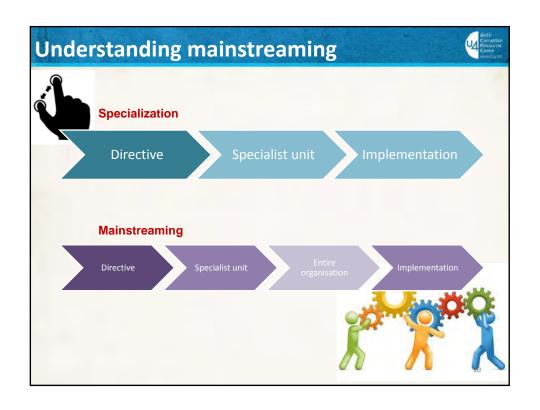
Rationale for anti-corruption mainstreaming Area of impact Corruption effects in specific sectors **Access and Health**. Unofficial user fees at the service delivery level discourage the poor from using services or lead them to sell assets, driving them further into poverty. Evidence shows that equity these fees are regressive, putting a major burden on poorer households (Vian, Savedoff, and Mathisen 2010; Lewis and Pettersson 2009; Vian and Nordberg 2008). In Azerbaijan about 35 per cent of births in rural areas take place at home, in part because of high charges for care in facilities where care is supposed to be free (Transparency International 2006). **Effectiveness** $\textbf{Health and education}. \ \textbf{A study found that corruption lowered public spending on}$ education, health, and social protection. In Cambodia 5–10 per cent of the health budget was and efficiency lost at the central level alone; in Tanzania, local or district councils diverted up to 41 per cent of centrally disbursed funds; in Uganda, up to two-thirds of official user fees were pocketed by health staff (Vian and Nordberg 2008). Quality Education. Evidence of negative relationship between corruption and the number of years in school (Svensson 2005). Health. Bribes to avoid government regulation of drugs have contributed to the problem of counterfeit drugs, which can lead to disease resistance and death. Globally, 10 per cent of all drugs are believed to be fake; in some African countries the figure can amount to 50 per cent (Vian and Nordberg 2008).

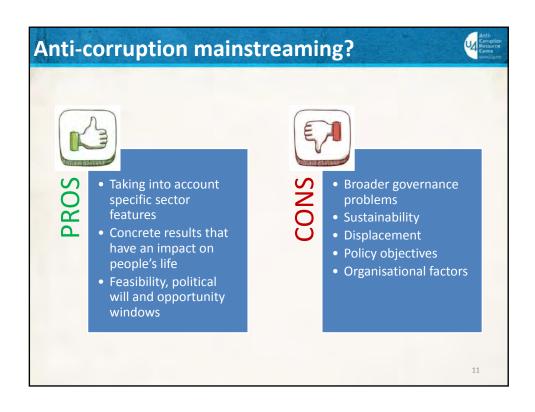
















Gap between policy design and implementation

Integration of the issues appears to be unevenly implemented across the organisation and subject to the personal interest, competence and motivations of individual staff...

The outcome (a differentiated treatment in which these issues are sometimes not included at all) counter to the intentions of the policy

13

Gap between policy design and implementation



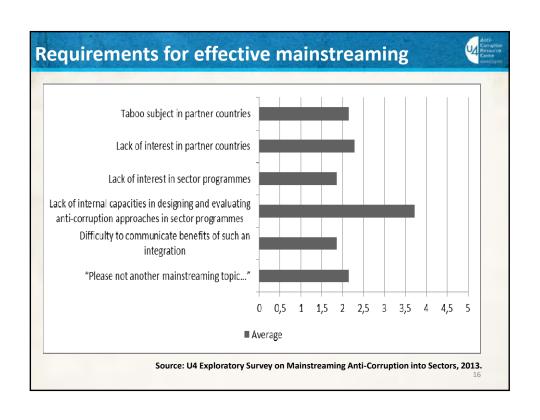
"On average, partner agencies report a relatively low level of implementation of their anti-corruption mainstreaming policies."

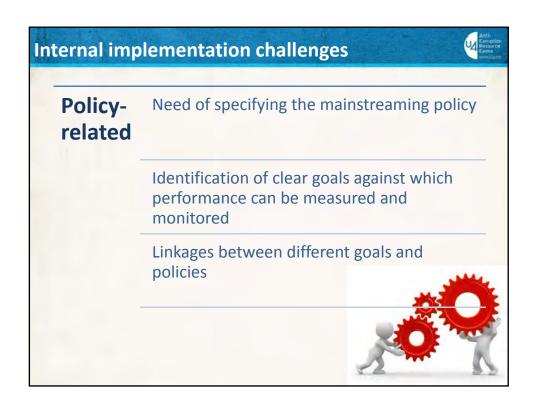
"On a scale from 0 (low degree of implementation) to 10 (high degree of implementation), the average among the six agencies that reported having such a policy was 5.16."



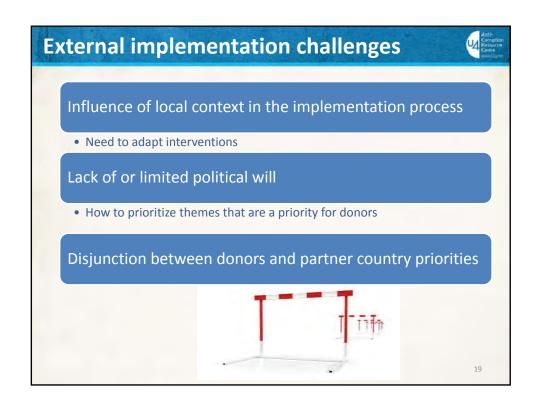
Source: 2013 U4 Survey on AC mainstreaming







mue	rnai impiem	entation challenges
Organisational	Prioritisation	Competing policies & priorities
		Time is limited
		Up to each to prioritise
	Follow up	Difficult without concrete requirements and targets
		Requires clear responsibility lines
	Responsibilities	With unclear responsibilities, it becomes voluntary
	Learning	Limited documentation of experiences
		Need mechanisms for sharing lessons and learning
	Staff	Skills
	competence &	Training
	support	Support











TIB Learning from Stakeholder Engagement : Health, Education, and LG Sectors

31 March 2014

1



The Sectoral Approach of TIB

- •TIB has been working in three selected sectors Health, Education, and Local Government, considering their implications on life and livelihood of poor people of the country (higher burden of corruption)
- The basic strategies include
 - •Research examining causes and consequences of corruption
 - Advocacy based evidence based knowledge produced by research
 - Engaging authorities and other stakeholders
 - •Raising demand and voice through mobilizing and increasing knowledge/awareness



The Sectoral Approach (Cont.)

- *TIB works both at national and local level, prioritizing issues of intervention through research and consultation
- The broad stakeholder categories include
 - Policy makers and authorities
 - Service providers at delivery end
 - Civil Society, media, and the community at large, with specific focus on youth and individuals with higher integrity reputations

Local Level Engagement

- TIB has established CCC and YES groups in 45 locations of the country, covering 37 districts and 8 sub-districts – a fairly representative part of the country
- Additionally there are two associate groups called Swajan and YES-friends

3



Local Level Engagement (Cont.)

Objectives of CCC

- To involve more people in anti corruption social movement
- To mobilize citizens for demanding **transparency** and **accountability** in key public service delivery institutions
- To create Island of Integrity
- To institutionalize changes
- Overall: To strengthen anti corruption social movement in Bangladesh



Local Level Engagement (Cont.)

CCC, the steering force:

- Diversified professionals and individuals teachers, doctors, engineers, advocates, business entrepreneurs etc
- People with High degree of moral and social standing/credibility
- Committed to values, vision, mission and Code of Ethics of TIB
- Leadership capacity to inform, motivate and mobilize citizens
- Ability to influence and mobilise local government officials, service providers and the public to curb corruption
- Committed to work on a fully voluntary and non-partisan basis.

5



Local Level Engagement (Cont.)

- In each of the constituencies of respective CCC it engages in a series of interventions in three sectors that include
 - Rapport building
 - Signing IP
 - Creating islands of integrity
 - Anti-corruption oath taking
 - Organizing Face the public, Mothers Gathering, Open Budget, Chose the Right Candidate, etc
 - Conducting Baseline to assess existing scenario
 - Making change advocacy based on findings
 - Use Social Accountability tool (e.g. CRC) to monitor
 - Developing local-to-national linkage
 - Disseminate knowledge/information
 - Mobilization through rallies, fairs, theatres etc.

,



National Level Engagement

- At national level TIB, for its intervention sectors, TIB also conducts research on selected sub-sectors, institutions in consideration of their importance, state of governance, and implications on local level intervention
- Advocacy are made for changes in policy, and practices influencing governance based on research findings



Results/Impact

Commendable results have been achieved through selected sector based interventions. Some changes are reported in various study findings from local level:

Health Sector

- Service recipients awareness on their rights and availability improved
- Undue payments have been reduced
- Diversion to private service providers decreased
- Information ticket on fees, charges, etc published/displayed Extra money from fees for tickets to welfare fund stopped
- Cleanliness improved
- Key health personnel (Director, Civil Surgeon, etc) more reform oriented
- · List of medicines, doctors and nurses on duty are now displayed
- Undue payment for ambulance service stopped
- Unauthorized payments for other services stopped
- Presence of medical representative during consultation reduced



Results/Impact (Cont.)

Education Sector

- Undue payments have been stopped /reduced
- Distribution of cash stipend becomes transparent
- SMCs are reformed and activated
- Guardians' rights awareness and participation increased
- Education Authorities are now more aware of anomalies and commit to address them
- Teachers' performance improved including time-keeping and discipline
- **Enrollment and attendance increased**
- Text books are distributed fully free
- Private tuition reduced
- Teachers, SMC, Officials, and Guardians are now jointly engaged to improve service delivery



Results/Impact (Cont.)

- Attitudinal change (Elected representatives and officials acknowledge problems and commit to work with CCCs and civil society)
- Change in service quality: Improved roads, water supply (Tube wells)
- Open budgets Revenue collection increased
- Extra money for trade license stopped
- Transparent and increased distribution of VGF and VGD cards
- Demand raised by citizens
- Overall accountability increased
- Unauthorized payments for services reduced
- Information board established
- Irregularity in providing money receipts stopped
- Transaction through bank introduced
- LG representatives proactively organizing FtP at micro level
- FtP contributing to increase accountability and allocation of resource



Results/Impact (Cont.)

At National Level

Health Sector: Intervention at Tertiary / District Hospitals

- •Flow of information to service recipients increased (information on the fees of different services, doctors name mentioning their duty time, indicating different unit's name of hospital and so on).
- •Systematize feedback from service recipient to provider exchange (set up complain box at indoor, outdoor and emergency units; organize face the public).
- •A number of close circuit camera was set-up at important places of hospital
- Number of trolley increased
- •Internal monitoring team of the staff formed.
- •The medical representative team advised to visit doctors in specific time and day

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Results/Impact (Cont.)

LG Sector: The Case of LGED

- Research and engagement with LGED is an ideal example of stakeholder engagement at national level
- TIB successfully engaged LGED in a supportive way
- A follow-up TA project has been financed by ADB to improve governance scenario at LGED in light of study recommendations



Results/Impact (Cont.)

National Consultation: Health and Education

- TIB organized national consolation workshop bringing various sectoral stakeholders from grassroots and national policy level decision makers together during 2013
- This engagement created a conduit for raising local level governance issues that can't be mitigated without central level policy support
- Although due to political unrest consultation (and advocacy based on consultation as well) discontinued /disrupted to some extent

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The Sectoral Approach: Way forward

- Each sector is a multi-stakeholder one where TIB needs to engage/integrate as many stakeholders as possible into its anti-corruption movement
- For example let us try to enumerate stakeholders in one of the 3 sectors-



The Sectoral Approach: Way forward (cont.)

- 1. Ministry of Education
- 2. Ministry of Primary and Mass Education
- 3. The University Grants Commission
- 4. Directorate of Secondary and Higher Secondary Education
- 5. Directorate of Primary Education
- 6. Regional/Divisional, District, and Sub-district level Education Authority
- 7. National University
- 8. The Public Universities
- 9. Secondary and Higher Secondary Education Boards
- 10. National Curriculum and Text Book Board
- 11. Private General and Technical Education Providers at various levels
- 12. Members of Parliament (often Chair of SMC at local level of above primary education institutions)
- 13. Donors
- 14. Media
- 15. Civil Society

The above list needless to mention is not exhaustive

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The Sectoral Approach: Way forward (cont.)

- All possible stakeholders need to be brought under the broader framework of anti-corruption process where TIB can play a key catalytic role
- TIB has undertaken 3 sectoral studies that should prove helpful further in identifying key players, possible areas of intervention, and specific process /tools that need to be applied
- For example, findings so far indicate that, in education sector key points of corruption are as follow:



The Sectoral Approach: Way forward (Cont.)

- · Grand corruption
 - Procurement /purchase (large tender of big projects)
 - · Recruitment, posting, transfer, promotion
 - Enrolment, certificate, coaching center
 - Private university/Public university (transport, utility bill, property grabbing)
 - · Approval new education institution
 - · Inclusion into MPO
- Petty corruption
 - · Small scale tender/purchse
 - Illegal money raising and misappropriation (various types of subscription)
 - · Stipend money
- Irregularities and other types of corrupt practices
 - · Private and coaching
 - · Negligence in teaching-learning
 - Proxi teacher
 - Irregularities in exam (e.g. disclose questionnaire)

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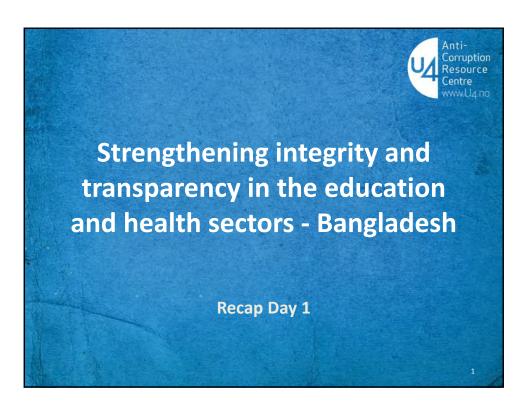


The Sectoral Approach: Way forward (cont.)

- The Sectoral studies will provide more elaborate knowledge on types of corruption, key actors of corruption, as well as bottlenecks/constraints at institutional level and Law that are barrier to promoting good governance.
- Based on such findings key areas of intervention will have to be identified and appropriate advocacy will have to be designed / tools will have to be developed in collaboration with/association with various stakeholders to reduce corruption in these sectors
- TIB in its next strategic phase BIBEC will strive towards that end



Thank You for your patient hearing



Intro to corruption



- Need of a shared understanding of corruption
- Some common forms of corrupt practices
- Causes of corruption: explore the opportunities, the incentives and the rationalization of corrupt practices
- Consequences:
 - Different types of effects
 - Negative effects on service delivery -> directly impact on citizens life

Corruption in Bangladesh



- Policy priority
- National level indicators (perception) show improvement (2001-13), but people believe corruption has increased
- Experienced based indicators show increase in cost of bribery and decreased victimization rate
- Sector level indicators
 - HEALTH: 40.2% victims, 21.5% recipients made unregulated payments
 - EDUCATION: 40.1% victims, 30% made unauthorized payments
- Political commitment if weak, strengthen demand from the bottom up

Is it corruption? Key issues



- People in the room disagree on whether they see one practice as corrupt or not
- Some issues:
 - Risk of corruption (e.g., conflict of interest) vs. Actual corrupt practices
 - Gift giving: role of social norms, how to regulate gifts
 - Circumstances and timing
 - Nature of different incentives
 - Length of time between the quid and the pro quo
 - Cumulative impact of small leakages and inefficiencies

Mainstreaming anti-corruption



- Systematically integrate AC perspective into all activities, projects, levels of an organisation, sector, or policy
- Pros and cons of mainstreaming
- Mainstreaming vs specialisation
 - Everyone involved in the implementation: Capacities and incentives, clear responsibilities
- Challenges: set priorities, clarify roles, build capacities, learn from practice, monitoring
- No "either or" but synergies between sector and non sector AC approaches

For the education sector



- Arguments for integrating AC:
 - Significance of budget spending in education
 - Cross-sectoral
 - Access to education as a human right
 - Some corruption problems are specific to the sector
 - Complexity of the sector and multiple stakeholders
- Need of a sectoral diagnosis: Risks in the interface between sector and non-sector characteristics; Consider global policy issues and funding approaches
- Progress (sector assessments, sector based AC plans, success stories) yet challenges (cultural barriers, donor related, capacities, etc.)

Group work: Integrating AC into sectors



- Group 1 (Edu): build on survey data, focus on transparency and disclosure of information
- Group 2 (Edu): education as a factor for economic growth, identification of critical factors (e.g., recruitment), risks and mitigating measures
- Group 3 (Edu): scope of corruption in the sector, focus on specific risks and practices, consider impacts, integrated approach to address risks
- Group 4 (Health): use of direct experience and news information for identifying problems
- Group 5 (Health): use normative, economic, political, global arguments

Key issues from the group work



- Digging into the specifics of the sector leads to issues outside the sector
- Consider arguments regarding other sectors, institutions outside the sector
- Use evidence and information on both results & deficiencies
- Process vs actor based mapping exercises
- Understand the political economy of the sector
- Consider not only risks and corrupt practices but also impact
- Need of setting clear priorities and obtaining results building on the diagnostic ... but how?

Engagement with different stakeholders

- TIB approach: Evidence based advocacy + engagement with multiple stakeholders + enhancing voice and demand
- Local level engagement through CCCs
 - Results of selected based interventions at the local level
- Stakeholder engagement at national level in sectors
- Way forward: mapping stakeholders for each sector, identifying bottlenecks and constraints, possible areas of intervention, and tools that can be applied

9

Building blocks for anti-corruption integration Building • **Diagnosis** of corrupt practices and risks in sectors Block I Building • Priority setting, selection, and Block II design of mitigating measures Building • Implementation of anti-**Block III** corruption measures Building Monitoring and Evaluation **Block IV** (M&E)





Mapping risks and consequences of corruption in the health and education sectors

Session 5

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Agenda

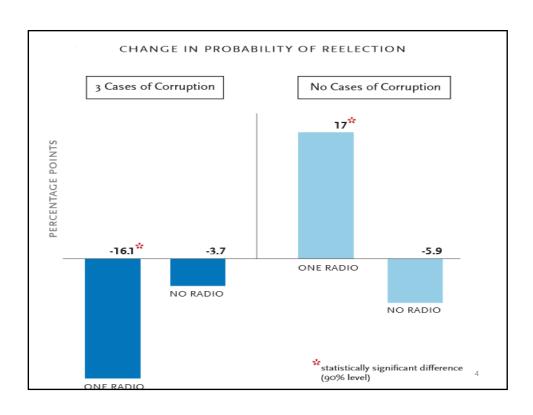
- Brief presentation on risks and consequences of corruption in health and education, and tools for assessing risks (corruption risk management)
- Group work health and education

Learning objective: Identify the main risks and consequences of corruption in health and education service delivery, internationally and in Bangladesh



Some sector examples

- Argentina hospital procurement prices decrease 10% after crackdown (audits)
- Uganda education access to information and budget tracking reduces leakage from 80% in 1995 to 20% in 2001
- India education formal monitoring reduces absenteeism from 42% to 21%. Test scores improve.
- Uganda health community monitoring reduces child deaths by 33%





Corruption risk management basics

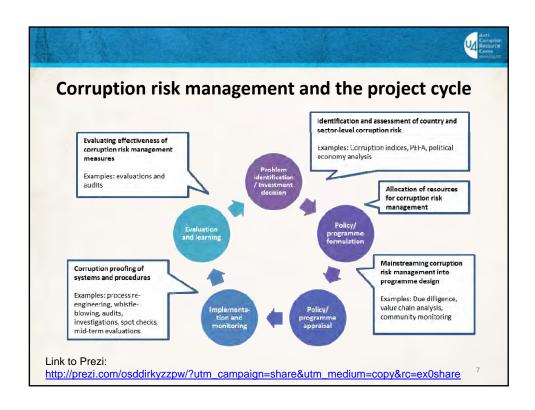
- Risk management = risk identification → risk assessment → risk mitigation
 - Risk identification Identifying types of risk in a given process or system
 - Risk assessment Measuring the magnitude of each type of risk
 - Risk mitigation Putting measures in place to minimise risk, monitoring those measures to ensure that they have their desired effect, and re-designing them if they do not have the desired effect.
- Some main types of corruption:
 - Bribery ◆ Embezzlement ◆ Facilitation payment ◆ Fraud
 - ◆ Abuse of power ◆ Clientilism/nepotism ◆ Rentseeking ◆ Silent corruption/abseentism?

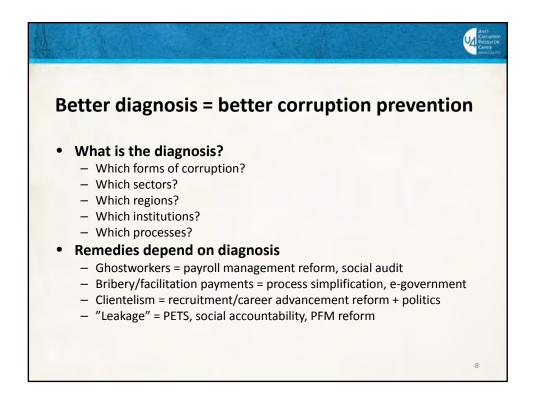
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Tools for corruption risk assessment in sectors

- Country level
 - Assessments of the public financial management system and overall fiduciary risk environment (PEFA, FRA)
 - Global Integrity reports, National Integrity System reports, national surveys (experience/perceptions), political economy analysis
- Institutional/sector level
 - Global Corruption Barometer, victimisation surveys, value chain/vulnerability to corruption assessments, due dilligence, audits, etc
- Service provision level
 - Citizen report cards, citizen score cards, social audits, budget tracking (PETS), user satisfaction (QSDS), complaints systems, etc.











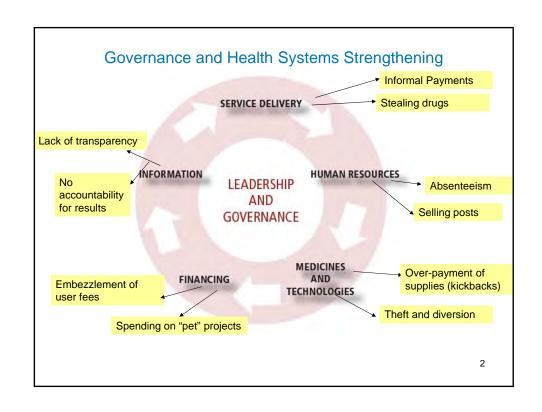
Risks and Consequences of Corruption in the Health Sector

Taryn Vian

Boston University – School of Public Health

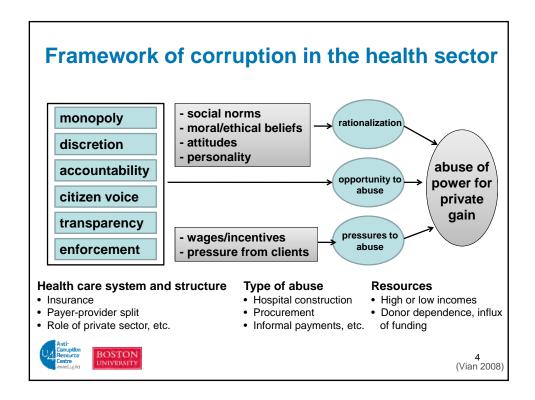
U4 Workshop, Strengthening integrity and transparency in the Education and Health Sectors





Examples of Corruption in Health Sector

- · Grand corruption
 - Procurement corruption
 - Capture of laws regulating private practice of medicine and conflicts of interest
 - Embezzlement
- Administrative corruption
 - Informal payments (care giver and providers)
 - Theft and diversion of medical supplies
 - Absenteeism (stealing time)
 - Abuse of user fee and insurance billing systems



Risk Assessment

- Step 1: describe and measure
- Step 2: understand the drivers (pressures, opportunities, rationalizations)
- Step 3: consider levers to restrict opportunities, reduce pressures or change incentives, address rationalizations

5

Example: User Fee Corruption in Hospital B

- Patient user fees = 5.7% of total revenue, 24% of non-personnel revenue
- Quality is low, staff have poor manners and bad attitudes
- What are the risks of corruption?
- What is driving the risk? (opportunities, incentives)
- What strategies can the hospital put in place to mitigate risk?
- What factors are needed for strategies to succeed?



Example: Measuring Risk through WHO Pharmaceutical System Vulnerability Analysis

Moderately vulnerable

	Bolivia	Indonesia	PNG
Registration	8.6	7.2	4.3
Promotion	(4.7)	7.6	1.7
Inspection	6.2	8.7	2.6
Selection	7.6	5.5	4.5
Procurement	6.2	7.0	6.6

0.0-2.0 = extremely vulnerable; 2.1-4.1 = very vulnerable

4.1-6.0 = moderately vulnerable; 6.1-8.0 = marginally vulnerable

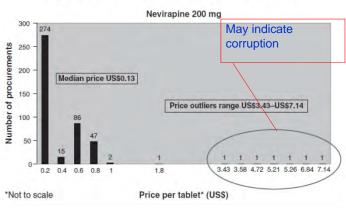
8.1-10.0 = minimally vulnerable

Source:

http://www.who.int/medicines/ggm/en/

Identifying risk in pharmaceutical procurement: price analysis

Figure 10.2 High price outlier analysis, Nevirapine 200 mg



Source: Vian, Savedoff, Mathisen eds. 2010. Chapter 10.

Risks of Procurement Corruption

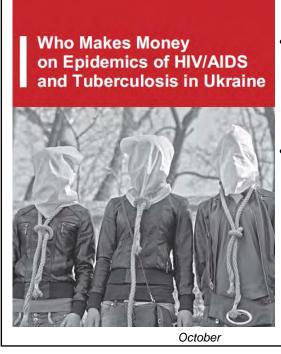
- Cartels: companies illegally agree on a price for a service or contract or agree not to bid at a tender (undermines competitive bidding, driving up price)
- Fingered procurements: purchaser adjusts the procurement call to be better suited for specific bidder
- Kickbacks: agent of the supplier pays agent of the purchaser to select the supplier's bid
- Emergency procurements: to avoid rules

9

Example

From 1999 to 2007, in at least 30 bids, employees of Royal Philips Electronics Poland made improper payments to public officials of healthcare facilities to increase likelihood that public tenders for medical equipment would be awarded to Philips. Philips would submit technical specifications of its medical equipment to officials drafting the tenders, who would incorporate these specifications into the contracts. Certain officials involved in these arrangements also made the actual decision of whom to award the tenders. When Philips won, employees of Philips Poland allegedly paid these officials 3% to 8% of the contract amounts.

http://ec.europa.eu/dgs/home-affairs/what-is-new/news/news/docs/20131219_study_on_corruption_in_the_healthcare_sector_en.pdf Heimler, Cartels in Public Procurement. http://jcle.oxfordjournals.org/content/early/2012/10/25/joclec.nhs028.full



- In Ukraine, Governmentfunded medicines for HIV (\$32m) and TB (\$20m) are expensive, arrive late. This creates barriers to access for treatment
- An NGO analyzed data on 39 procurements to reveal several ways in which corruption had affected purchasing systems

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Corruption pathways

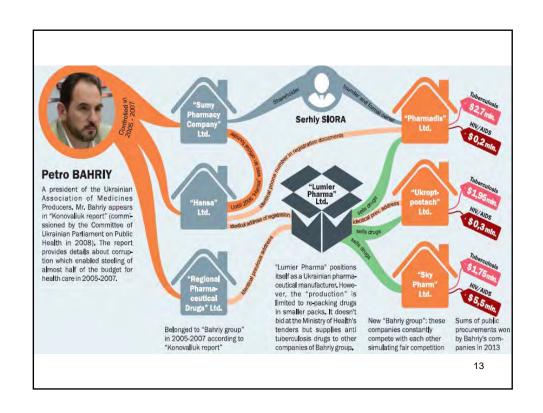
- Companies with the same ownership competing with each other
- Direct collusion (cartel agreements) prior to submitting bids
- 3. Inflated benchmark prices
- 4. Shell corporations and offshore accounts

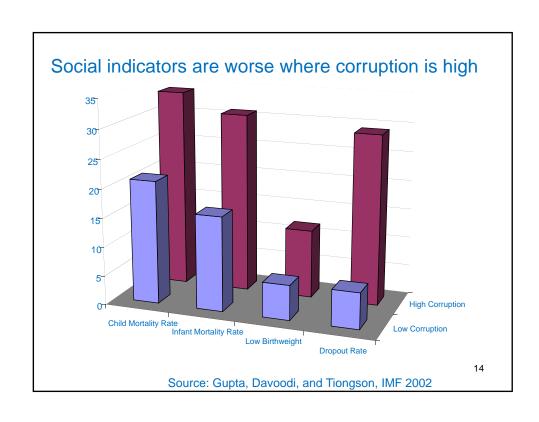


Results

- Revealed critical role of relationships & networks in facilitating corruption
- 7 investigations, 2 prosecutions, \$145,700 savings from watchdog function on procurement tenders

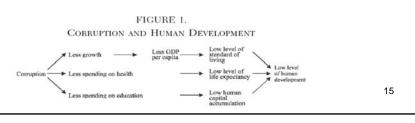


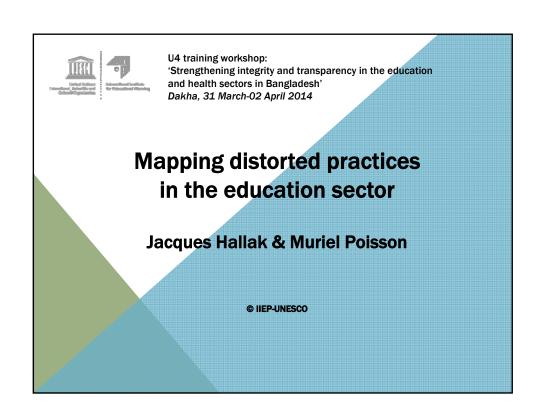


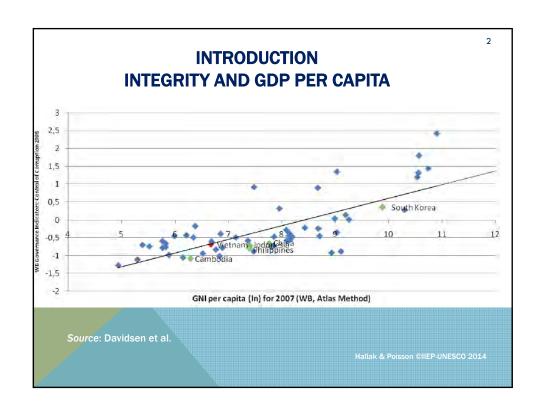


Consequences

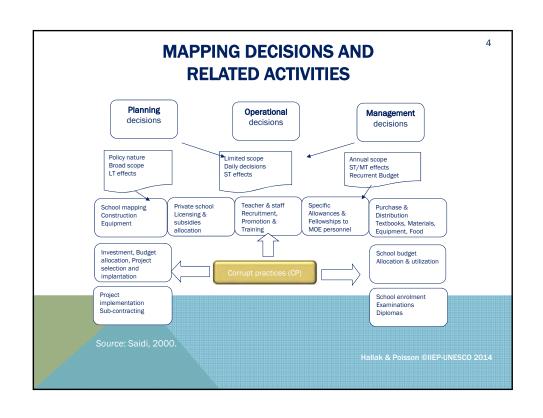
- Paying too much for inputs, wrong "mix" of inputs
- Lower productivity of workers, less people treated
- Delays in seeking care, or people don't seek care at all
- Eroded financial protection, leading to catastrophic expenditures and increased poverty
- Treatment failures, death from substandard care







GENERAL DEFINITION OF CORRUPTION IN EDUCATION "The systematic use of public office for private benefit whose impact is significant on access, quality or equity in education" Diversion of funds from govt accounts Favouritism in personnel appointments Hallak & Poisson ©IIEP-UNESCO 2014



SCOPE: NEED FOR A SYSTEMIC APPROACH

Focus on institutions,
procedures, mechanisms and
not on individuals

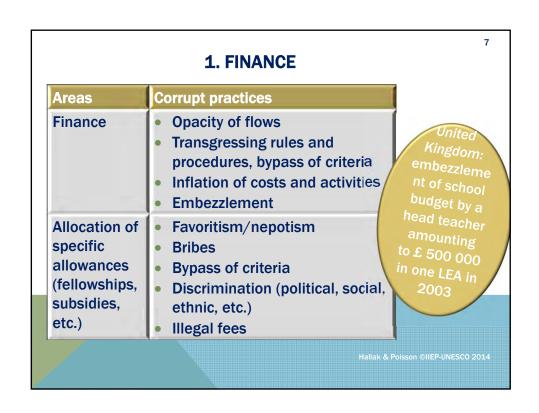
Hallak & Poisson ©IIEP-UNESCO 2014

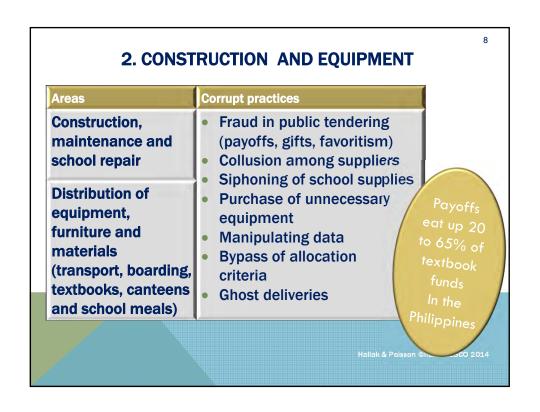
SELECTED AREAS OF PLANNING/MANAGEMENT

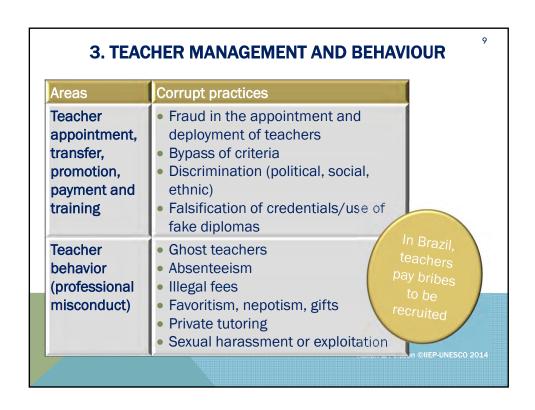
- 1. Finance and allocation of specific allowances
- 2. Construction and equipment
- 3. Teacher management and behavior
- 4. Academic and accreditation fraud

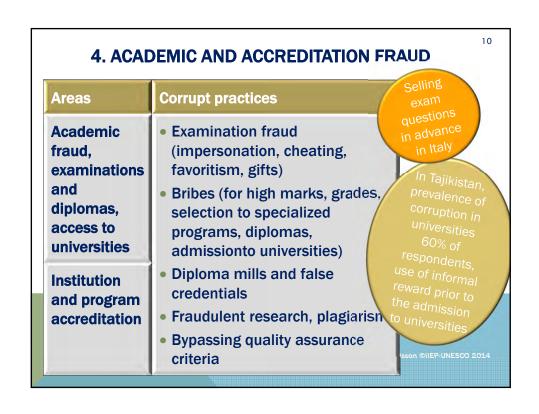
5. Information systems

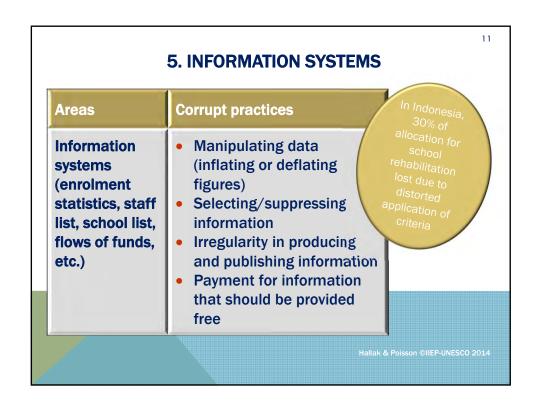
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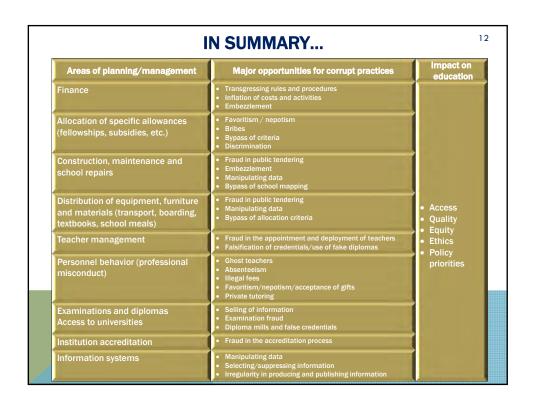
















Transparency and Public Engagement in the Health Sector

Taryn Vian

Boston University – School of Public Health

U4 Workshop, Strengthening integrity and transparency in the Education and Health Sectors



Why engage the public?

- Better decisions if we ask people what they want, provide information so they can support or criticize and improve public policy.
- More accountability if citizens (in groups or alone) act as watchdogs, complain when they don't get what they deserve, help monitor performance of government or agencies acting on behalf of public good

Types of engagement

Communication

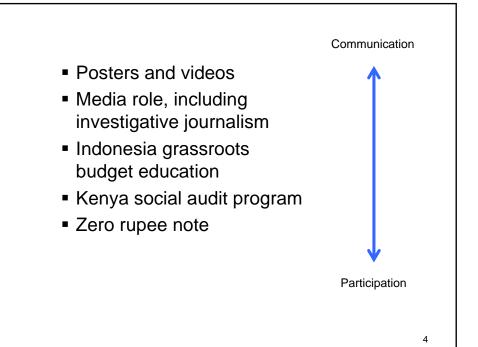
 Inform the public through campaigns (posters, videos, social media) to raise awareness, explain rights and entitlements, describe policies & programs

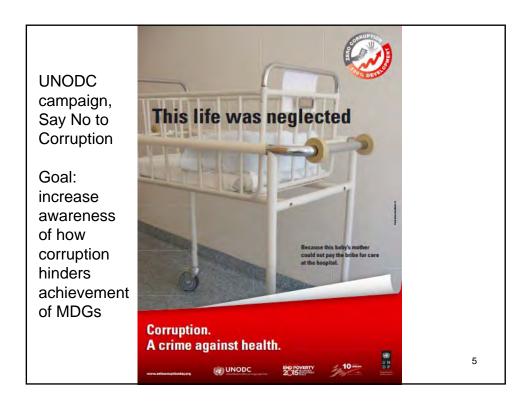
Consultation

- Public meetings
- opinion polls, satisfaction surveys, hotlines to find out what citizens/beneficiaries think

Participation

- Social audit, citizen report cards, planning councils
- Mobilize citizens for advocacy









Awareness Videos

- Public Awareness Video India 2 min
- Zero Rupee Note Video 6 1/2 min.
- Corruption, You Have Made it a Lifestyle 2 min.
- Anti-Corruption Campaign Doctor 1 min.
- Log Roll in India 3 ½ min.

Videos: Public Education and Social Audit

These videos describe projects to provide education to citizens about the budget process, and to engage citizens in holding their government accountable for social spending.

- Budget education in Indonesia. <u>Your Voice Your Opportunity</u> 6 min.
- Social Audit in Kenya <u>Its Our Money Where's it</u> <u>Gone</u> 18 min.

9

Investigative Journalism

 Center for Public Integrity http://www.publicintegrity.org

"Breathless and Burdened" Study of how doctors and lawyers working for coal industry have defeated benefits claims of miners dying of black lung disease http://www.publicintegrity.org/environment/breathless-and-burdened

 International Consortium of Investigative Journalists (ICIJ) http://www.icij.org/

Sasha Chavkin. "Industry-Funded Study of Mystery Kidney Ailment." Examines possible bias in research in Latin America due to funding by industries implicated in pesticide use.

http://www.icij.org/blog/2014/02/cdc-launches-industry-funded-study-mystery-kidney-ailment

Need to adhere to high standards of journalism

Polish newspaper headlines

- "Polish Paramedics Jailed for Murdering Patients in a 'cash-for-corpses' scandal."
- "Doctor asks woman for sex in order to treat her sick mother."
- "Woman thrown out in the cold in a hospital gown to make room for a patient who could pay for care."
- "Polish hospital treats gangsters with mafia money."

Source: http://www.dziennik.pl/Default.aspx?TabId=27:

11

Complaint Mechanisms



Integrity Pledge (IP) in Bangladesh

- · Hospital authority pledges to:
 - Ensure attendance of staff
 - Provide access to patients who require it
 - Be transparent (available services, fees, etc)
 - Provide receipts and prohibit informal payments
 - Not allow "brokers" or transfer to private sector to increase financial gain
- Citizens pledge to:
 - Build positive relationship between caregiver & receivers
 - Assist in proper use of hospital resources, maintain communication, resolve problems
- Concerned Citizens Committee pledges to:
 - Bridge between hospital and patient; provide advice & information
 - Help develop and implement complaint mechanisms, citizen charter

13

Social Audit in Uganda

- Community monitoring to increase quantity and quality of health care provision.
- Used CBOs as facilitators, collected perceptions of community members and staff; objective data on health outcomes & facility functioning (report card)
- 3 meetings, ending with shared action plan

Results

- Intervention communities had
 - 33% lower child death rates
 - 20% higher use of services
 - 13% lower absenteeism
 - 10% lower waiting time
 - Fewer stock outs

Compared to control communities

• Existing governance structures improved



U4 training workshop:
'Strengthening integrity and transparency in the education and health sectors in Bangladesh'
Dakha, 31 March-02 April 2014

Transparency and methodologies for assessing corruption problems in education sector

Jacques Hallak & Muriel Poisson

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OBJECTIVES OF THE SESSION

2

- Highlight the importance of enforcing the Right To Information Act (RTI) in the education sector
- Provide an overview of the main methodologies for collecting relevant data in order to achieve the RTI
- Present the lessons learned from the international experience in implementing these methodologies
- Discuss how to apply these methodologies to the Bangladeshi education sector, considering the role of the media and civil society

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RIGHT TO INFORMATION ACT
BANGLADESH ORDINANCE NO, 50 2008

4. **Right to information**. Subject to the provisions of this Ordinance, every citizen shall have the right to information from the authority and on request from a citizen the concerned authority shall be obliged to provide him information.

Every authority shall publish and publicise all decisions taken, programme or all information pertaining to all work done or proposed to be done by indexing them in such a manner as may easily accessible to the citizens.

- (2) In publishing and publicising information under Sub-Section (1) no authority shall be able to conceal any information or limit easy access to it.
- (1) Under this Ordinance a person may apply to the officer-in-charge requesting for information either in writing or through electronic media or email

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FORMAL TRANSPARENCY AND TRANSPARENCY IN ACTION

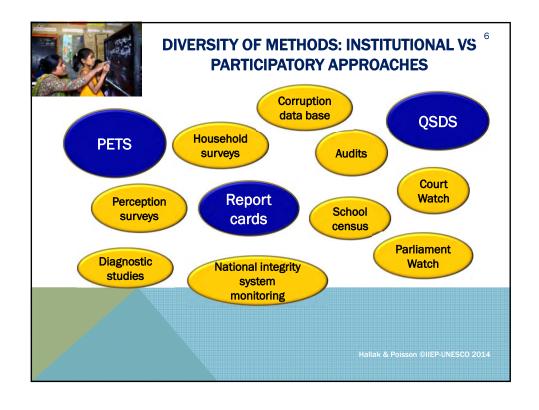
- ▼ Role of the Bangladesh Bureau of Educational Information
 and Statistics to provide information on the education system
- Resistance to provide an accurate, timely and relevant information system
- Limit of existing EMIS to provide comprehensive data:
 - for improving transparency
 - · of direct use for the citizens
- Need for additional tools to document specific requests by citizens

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EXAMPLES OF REQUESTS

- TO BE DOCUMENTED
- ▼ How resources flow from the Ministry of Primary and Mass Education to the schools (in cash and in kind)?
- To what extent staff and physical facilities are being used according to the prevailing norms?
- To what extent beneficiaries of the resources are served according to the prevailing norms?
- To what extent are school children being admitted according to the prevailing norms?





THREE MAJOR TOOLS TO BE CONSIDERED

QSDS Report cards **PETS Schools** MOE Schools Teachers Regions/provinces Classroom Parent-teacher Districts Households associations Schools **Pupils** Households Evaluation by target Audit of flow of Observation of group funds (external service delivery (beneficiaries) entity) (external entity) of service delivery

Hallak & Poisson ©IIEP-UNESCO 2014



1. REPORT CARDS

Objectives:

- To provide quantitative feedback on user perceptions and knowledge on the quality, adequacy and efficiency of public services
- To exact public accountability through the extensive media coverage and civil society advocacy that accompanies the process
- Implemented in countries worldwide (Latin America, USA, etc.)

Bangladesh among the earliest users of

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CITIZEN REPORT VERSUS COMMUNITY SCORE CARD

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Citizen Report Card

Community Score Card

- Unit household/individual
- Meant for macro level/election
- Main output is demand side data on performance and actual scores
- Implementation time longer (3-6 months)Feedback later, through media
- Information collected through questionnaires

- Unit Community
- Meant for the local level
- Emphasis on immediate feedback and accountability, less on actual data
- Implementation time short (3-6 weeks)
- Information collected through focus group discussions

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REPORT CARD IN BANGLADESH

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Case study: The Alokdia Primary School Integrity Pledge

Corruption in education is a key challenge in Bangladesh and particularly affects the poor. It manifests in different ways, including the collection of unauthorised payments for admission to schools and skewed distribution of free text books, as well as the demand for bribes to disburse school stipends and grants. It can also take less obvious forms: teacher misconduct, absenteeism and neglect of duties (in order to conduct private tutoring), inactive school management committees and lack of accountability mechanisms.

To address these various forms of corruption, an Integrity Pledge was signed in 2010 at the Alokdia Primary School in Madhupur, a sub-district outside the capital Dhaka. ²⁷ The Integrity Pledge followed a series of social interventions, including the use of citizen report cards and participatory budgeting. Within one year of adopting the pledge, some key changes have happened in the school and the community. The collection of unauthorised payments has stopped, the distribution of scholarships has become transparent and text books are now distributed freely (and free of charge). The use of private tutoring has also been reduced and teachers, school management committee officials and parents are now jointly engaged to ensure higher management performance. The dropout rate has fallen from 30 per cent to 7 per cent and in the most recent annual final examination, 100 per cent of students passed, with 80 per cent scoring first division marks. Due to these strong results, the state's grading of the school's performance has gone up from grade C to A. The success of Alokdia has encouraged the local education officials to replicate the Integrity Pledges elsewhere. The chapter has been asked to promote the adoption of pledges in seven more schools; work has already begun in two.

Source: TIB, 201:



REPORT CARD IN MASSACHUSSETS, USA

Iment (2012-13) Educator Data (2012-13)

	School	District	State
Total Count	685	2,031	954,773
Race/Ethnicity (%)			
African American or Black	1.5	1.8	8.6
Asian	1.8	1.6	5.9
Hispanic or Latino	1.6	2.9	16.4
Multi-race, Non-Hispanic	0.0	0.2	2.7
Native American	0.1	0.2	0.2
Native Hawaiian or Pacific Islander	0.0	0.0	0.1
White	95.0	93.3	66.0
Gender (%)			
Male	50.7	51.1	51.2
Female	49.3	48.9	48.8
Selected Populations (%)			
English Language Learner	4.1	2.5	7.7
Low-Income	27.2	23.7	37.0
Students w/Disabilities	11.2	14.2	17.0
First Language Not English	4.5	3.6	17.3

	School	District	State
Total # of Teachers	36.4	123.5	70,635.8
Percentage of Teachers Licensed in Teaching Assignment	100.0	100.0	97.5
Total Number of Classes in Core Academic Areas	240	733	345,316
Percentage of Core Academic Classes Taught by Teachers Who are Highly Qualified	100.0	98.9	98.0
Percentage of Core Academic Classes Taught by Teachers Who are Not Highly Qualified	0.0	1.1	2.0
Student/Teacher Ratio	18.8 to 1	16.4 to 1	13.5 to 1
Percentage of Public Elementary and Secondary School Teachers Issued Waivers	-	0.0	0.3

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2. PUBLIC EXPENDITURE TRACKING SURVEYS (PETS)

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Objective:

- To locate and measure leakages and identify causes to propose remedies
- ✓ Initiated in Uganda in 1996
- Since then, several dozens of PETS have been implemented worldwide: Cambodia, Ghana, Kenya, Mongolia, Namibia, Papua New Guinea, Peru, Tanzania, Zambia, etc.

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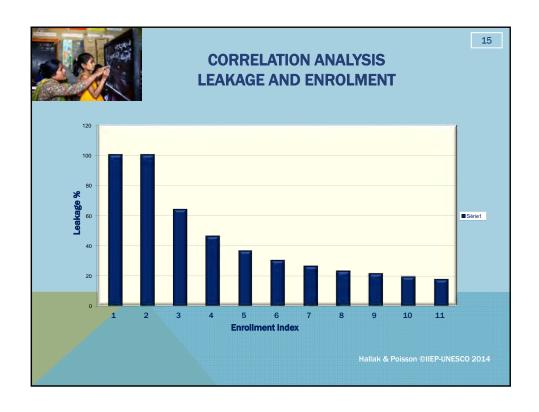
Country	Year	Fund	Sample	Leakage	
Peru	2001	Utilities	100	30 %	
Zambia	2001	Fixed grt	182	10 %	
Zambia	2001	Discr. grt	182	76 %	
Kenya	2004	Bursary	330	36%	
Tanzania	2004	Textbooks	210	72%	
Vietnam	2006	Unspec. exp	4 prov	19%	
Burkina	2012	Materials	260	35%	

13



FLOWS OF FUND IN BANGLADESH

- Funds from the revenue and development budget flow from the Centre to Upazila accounting centres. From there, funds are forwarded to the school, and, in the case of salaries, on to individual teachers and for stipends, to individual students.
- Textbooks are provided directly to the District Education Office and then distributed to children via the Upazila and the school.
- The Social Sectors Tracking Study conducted in 2006 found that the system was robust with little leakage, countering perceptions of misuse of funds at the local level. The only areas where significant discrepancies were found were in the distribution of textbooks to Madrashas (only about 80% effectively reached the schools) and in the allocation of stipends where a large percentage of children were found to be ineligible,





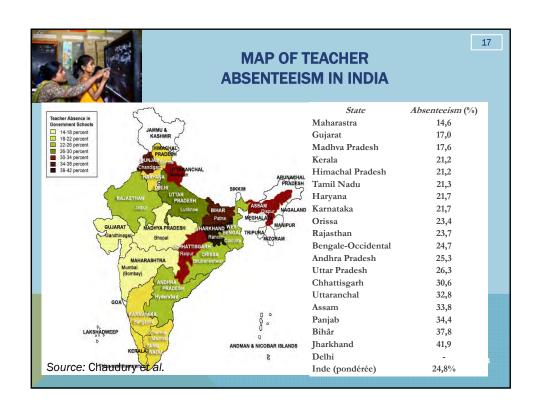
3. QUANTITATIVE SERVICE DELIVERY SURVEYS (QSDS)

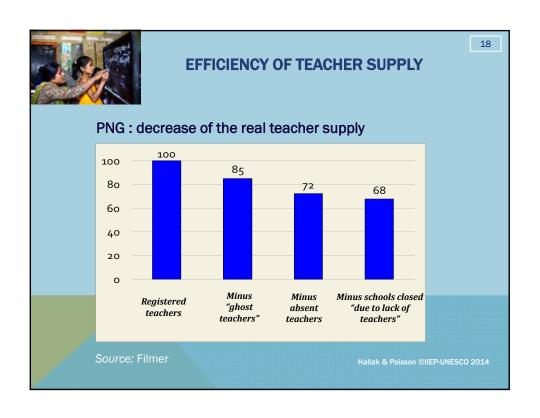
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Objective:

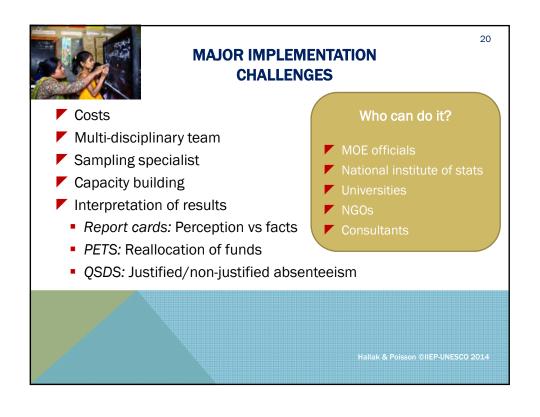
- ▼ To examine the efficiency of public spending in education; e.g. availability of textbooks per pupil in the classroom
- To analyze the various dimensions of service delivery on the frontline (schools); e.g. number of teaching hours per week
- Implemented in Bangladesh, Ecuador, India, Indonesia, Peru, etc., often in combination with a PETS

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II.	N BANGLADESH	
Head Master		
Official teaching related duty	Primary 68,6	Secondary 75.0
Official non-teaching related duty	0	0
Sick	0	6.3
Authorized leave	22.9	6.2
Left early	2.8	6.2
Arrive later	2.8	0
Off due to examinations	0	0
Unauthorized absence	2.9	6.3
Teacher		
	Primary	Secondary
Official teaching related duty	41.2	43.8
Official non-teaching related duty	5.9	0
Sick	12.8	3.1
Authorized leave	35.3	31.3
Left early Arrive later	1.0	0
Off due to examinations	0.0	0
Unauthorized absence	2.9	21.9
Jnauthorized absence	2,9	21.9





CONCLUSION

- 21
- To get a reliable diagnosis of supply, different types of surveys need to combine:
 - Report cards
 - PETS
 - QSDS
 - Perception surveys
 - Others
- Need to combine the results of various surveys (households, tests, etc.)

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GROUP WORK

The Ministry of Education has established three survey teams to collect data on the following dimensions:

- Gr 1. Illegal fees
- Gr 2. Textbooks
- Gr 3. Teacher incentives

In order to prepare the work of your survey team, reflect on the following issues:

- ▼ What items would you include in the survey questionnaire?
- Who can undertake the survey work?







Informal payments

Taryn Vian Boston University - School of Public Health

U4 Workshop, Strengthening integrity and transparency in the **Education and Health Sectors**



What are informal payments?

An additional direct contribution above what is stipulated by the terms of entitlement.

Gaal and McKee, Informal payment for health care and the theory of INXIT" Int J Health Plann Mgmt. 2004; 19:163-178.

Unreported or unregistered illegal payments that have been received, in cash or in kind, in exchange for the provision of a service (or of a faster or better service) that is officially free.

Stringhini et al. Human Resources for Health. 2009; 7:53.



Why informal payments are a problem

- Shifts types of care toward clinician-mediated services, over-diagnosis, more complex Rx
- Incentives to perform "off-the-books" services
- Payments extorted
- Even if payments not extorted, patients fear if they do not pay, they will not get quality care
- Rural patients seeking referral services in urban areas likely to be charged more





3

Reasons why people pay

- Contribution to care
- Want additional or extra services
- Staff or clinician misuse of power
- Gifts

Ensor T. 2004. Informal payments for health care in transition economies. Social Science & Medicine, 58: 237-246



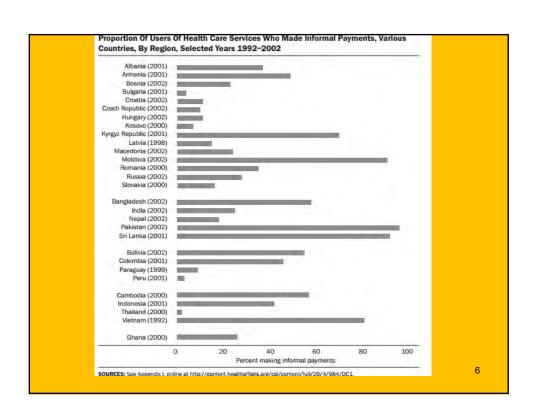


Measuring informal payments

- Household health expenditure surveys
 - formal vs. informal
 - prevalence
- Focus groups with citizens, nurses, doctors
 - meaning, why, how payments are made







Strategies to reduce informal payments

- Increase pay and/or benefits for workers
- Formalize user payments
- Enforce ban against informal payments
- Increase transparency, accountability, information
 - Education about coverage, patient rights
 - Means of reporting abuses
 - Community boards and citizen participation in facility management





7

Experience with reforms



Reducing informal payments: Hospitals in Cambodia

- Formalize user fees
- Increase salaries while establishing formal sanctions for accepting informal payments
- Increase transparency and information
- Introduced formal fees and an equity fund (for free care)
- Government subsidy increased over time
- Formal fee revenue shared among staff, as bonuses





Soeters R, Griffiths F. 2003.

Health Policy & Planning 18: 74–83;
Barber et al. 2004. Health Policy & Planning 19: 199-208.

Takeo Provincial Hospital, Cambodia: Results

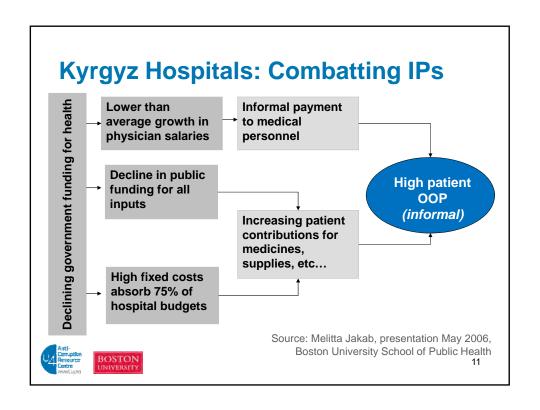
- After implementation, inpatient utilization increased 50%
- Patients ended up paying less than the informal payments
- Outpatient utilization declined



Source: J-M Thome, "Takeo Provincial Hospital Cambodia" Swiss Red Cross







Albania MOH Response to Assessment of Corruption Risks 2011

"The report does not reflect new realities and objective facts which are very important. As an illustration: the increase of the number of insured people - their number has doubled in less than two years; the secondary income in the health system has doubled due to the official tariffs set. These examples clearly show the blow given to corruption and informality in public health and the boost of public's confidence in the systemic measures taken."

Increase in insured

 Why important? MOH implemented new policy to decrease hospital crowding, a driver for informal payment. Only referred, insured patients get free care at hospital, others pay high fees. If working, enrollment should increase.

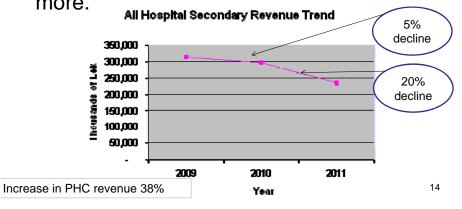
Table 1: Enrollment in Health Insurance Scheme						
		% in the total	Growth in			
	Total no	population of	percentage			
Year	(persons)	country*	enrolled			
2008	670,148	16.9%				
2009	960,000	24.2%	7.30%			
2010	1,360,725	34.6%	10.40%			
2011 6-mo.	1,612,533	40.7%	6.10%			
*Calculated using total individuals registered						
with AD a	donom laster					

13

+70% since 2009

Increase in hospital revenue

 Higher revenues from official fees can be directed to assuring quality, paying staff more.



Results and recommendations

- In 2010, 68-72% of patients paid for care that should be free. 36% had paid bribe (4% lower than 2009, but health sector still the worst of all sectors for bribes).
- Continue household surveys to monitor; encourage complaints
- Reward hospitals based on lower IP rates; better enforcement
- Continue surveillance of fee collection

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Kyrgyz health sector reforms

- Centralization of health financing channels (pooling)
- Prospective purchasing methods
- Explicit definition of benefits with formal co-payments
- Downsizing hospital sector
- Phased implementation allowed evaluation (case/control)





Results

- Out-of-Pocket burden
 - Out of pocket payments rose less in reform oblasts (up \$5, vs. \$15 in controls)
- Likelihood of payment of IPs
 - Poor and non-poor were equally like to pay informal payment
- Level of informal payment
 - Conditional on making any payment, poor pay less than the middle group
 - No statistically significant difference between middle and rich



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Informal payment and co-payment

- Early evaluations showed success
- Later data show increasing incorrect co-payments
 - Recorded co-payment revenues were less than what people reported paying, which was less than what they were expected to pay (price x utilization)



Albania / Senegal

- Studies to raise awareness of problems
- Decentralized hospitals with high political will enforced policies
 - posters with cell phone number of director "call me anytime if someone asks you for an informal payment"
 - mystery patients carried numbered bills, controlled clinicians' cash on exit, fired staff caught with numbered bills
 - investigated citizen complaints on absenteeism, fired staff
 - investigative journalists used hand-held cameras, publicized on TV





19

Armenia Maternity Certificate Program

- Before
 - Antenatal and delivery care part of Basic Benefit Package
 - Formal & informal payments common, even among poor
- New Policy
 - Vouchers guarantee full coverage
 - Not allowed to charge patients
 - Reimbursement levels increased for facilities and practices, OB salaries increased
 - Public communications to inform
 - High profile enforcement of those caught taking IPs





Possible Roles for community or CSO monitoring

Passive

- Hotline (see http://www.u4.no/publications/complaints-mechanisms-in-health-organizations/)
- NGO staff in hospitals as "ombudsmen"

Active

- Talk with women in antenatal care
- Active outreach to women's groups
- Training/role-playing with women on how to respond to requests to pay



21

Is it working?

- Depends on...
 - Transparency of policy
 - Implemented as designed?
 - · Process evaluation
 - Monitoring by Civil Society Organizations, MOH
 - Effectiveness evaluation impact
 - Small qualitative study showed it is working in rural areas, but in cities people are still paying under the table







U4 training workshop:
'Strengthening integrity and transparency in the education and health sectors in Bangladesh'
Dakha, 31 March-02 April 2014

Improving access to education by addressing illegal fees and informal payments

Jacques Hallak & Muriel Poisson

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OBJECTIVES OF THE SESSION

2

- Present the characteristics of petty corruption and types of informal payments at the school level
- Discuss the problem of petty corruption and informal payments on quality and access to education in Bangladesh
- Review good practices and lessons learned from the international perspective in implementing to reduce petty corruption and informal payments
- Discuss successful experiences already achieved to address the problem in Bangladesh and the remaining challenges



CAUSES FOR IRREGULAR FEES

- Constraints on public financing
- Low salaries of teachers and staff
- Lack of physical and didactic facilities
- Pressure for more enrolment
- Teachers control student promotion
- Exams have a "gatekeeping function"
- Competition among schools (league tables)
- Changing rules and regulations
- No explicit rules

Corruption = Monopoly + Discretion - Accountability

Hallak & Poisson @HFP-UNFSCO 201



BACKGROUND

- School fee abolition initiative
- Significant achievement in enrolment expansion
- Large number of children still out of school, either because they did not enroll in school or dropped out very early, mostly due to poverty
- Still problems of quality of services (teachers and textbooks)
- Major factor to be considered in this context: petty corruption and illegal payments that affect the poorest of the population



ILLEGAL FEES AND INFORMAL

PAYMENTS: DEFINITIONS

- ✓ Illegal fees: recurrent payments from parents can be collected once or more per academic year by teachers, or school principals (examination fees, sport fees, school development fees, boarding fees)
- ✓ Informal payments: whenever official permission, assistance, or other documentation is required in schools, gatekeeping opportunities occur and parents may be asked to make informal payments

Illegal Legal

		EENTS CONTRIBUTIONS TO SCHOOLS IN VIETNAM (IN VND)
	Туре	Level of contribution to school per student
	Regulated fees	
	Construction / Maintenance	Fees at schools in rural areas range between 5,000 to 50,000 Fees at schools in urban areas range between 28,000 to 70,000 There are no fees charged at the schools in mountainous areas
	Full-day tuition fee	Main fee level ranges between 70,000 and 180,000 Schools in two provinces charge 270,000 - 600,000 per student
ဗ္ဗ	Non-regulated fees	
Ž	Health insurance	Fees range from 25,000 to 50,000 10,000 VND = 0.5 US\$
08,	Life insurance	At most schools fee the level is 25,000 Maximum fee observed was 50,000
Source: PETS 2008, NCG	Parent Association Fund	Main fee level from 15,000 to 60,000 One province has level of 3,000-10,000 Urban fee level in one province: 60,000 – 100,000
l H	Electricity	Only collected in two provinces where it ranges from 5,000-27,000
Çe: I	Hygiene/Cleaning fee	Fees charged by some schools from 2,000-15,000 in one province. In some of the others fees charged by some schools 3,000-10.000
Sour	Ho Chi Minh Teenager Union Fund	Fees charged by schools from 500 to 15,000
٠,	School guard fee	Fees charged by schools from 500 to 5 000, not charged in two provinces
	Education Development/Supporting Fee	Fees charged by some schools in three provinces from 50,000 to 100,000 Fees charged by some schools in one rural area: 5,000-10,000 Fees not charged in two provinces
	Lunch full day fee	Fees charged by some schools in two provinces with 3,500 per lunch, approximately 700,000 per year.



TYPOLOGY OF FEES

IN FOUR COUNTRIES

% of households reporting expenditures on different categories of fees in primary education in selected countries. (Source: SFAU, 2009)

	Country (year of survey)				
Expenditure	Malawi (2002)	Nigeria (2004)	Uganda (2001)	Zambia (2002)	
Tuition	1	14	22	73	
Books, supplies	83	99	97	98	
Uniforms, clothing	69	88	78	81	
PTA	_	70	18	67	
Development fund	57	29	56	_	
Exam fees	3	39	24	2	
Transport	1	5	6	2	
Food	34	62	24	24	
Boarding fees	0.3	0.2	2	0.2	
rivate tutoring	4	23	6	12	
School reports	15	_	_	_	
Sports fund	_	_	_	24	
Maintenance fees	_	18	_	10	
Other	2	14	24	4	



FEES AND POVERTY IN BANGLADESH

- Poorer households, households with a lesseducated household head, and households with girls studying in school are more likely to be victims of corruption
- The network variable is positively correlated with the household's social status (ed. exp.)
- Households with a network are able to bypass the red tape or pay a lesser amount of bribe



ILLEGAL FEES AND ILLEGAL PAYMENTS IN BANGLADESH

- ç
- 40% of households reported having paid 'donations of bribes' to enroll their children in primary schools
- Nearly half of poor students in rural areas are entitled to receive stipends, many do not receive the right amount or face problems in receiving them on time
- Although primary education is free for all, it becomes prohibitively expensive for poor families as reality requires them to pay for **private tuition** for their children
- Examination papers are sold in advance to students or to favor particular students

Source: TIB. 2010

Bangladesh: The largest share of education spending for slum children goes to private tutoring, both in primary (21%) and secondary (31%) education

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THE RISKS ATTACHED

10

- ✓ Inequity in distribution: more resources to 'rich schools'
- Lower quality: funds are not used to improve conditions of schooling; to add income to teachers
- Inadequate coverage: private institutions tend to locate where the contributive capacity is higher
- Misuse of resources and corruption: promotion/transition of pupils/students and bribes; private tutoring to cover a share in the curriculum



ADVERSE EFFECTS OF ILLEGAL PAYMENTS ON EQUITY

11

46

A corrupt teacher
(or school) creates multiple
layers of red tape that
obstruct a household's
access to their child's
education service which is
otherwise free

(Choe, Dzhumashev, Islam and Khan, 2012)

The model shows that the bribe paid by the service demander increases with the level of red tape and income level, but it decreases with the improvement of the individual's social status

(Dzhumashev, Islam and Khan, 2010)

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GROUP WORK

12

Groups will deal with the following types of fees:

Group 1. Admission fees

Group 2. Stipend fees

Group 3. Private tuition fees

For each working group:

- 1. Describe how these illegal fees are imposed on parents or pupils
- 2. Assess to what extent illegal fees affect more rural than urban areas, and the poorest of the population, and why





1. PUBLICIZE NORMS AND STANDARDS

13

Publicize norms and standards (by level of education) for raising fees to avoid corrupt practices (more transparency):

- By limiting the number of irregular fees
- By imposing the maximum rates
- By promoting self-regulation through professional association
- By disseminating accurate, regular, and timely information

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REGULATING AND MONITORING PRIVATE TUTORING

14

USERS

- Organize public campaigns
- Explain the unethical use of private tutoring (teachers tutoring their own pupils)
- Explain state regulation on private tutoring
- Introduce state funded supplementary classes

TUTORS

- Collect data on the incomes of tutors for collecting taxes
- Introduce taxation on private tutoring
- Pass regulation on private tutoring to ensure quality
- Introduce system of licensing of tutors to provide private tutoring

Source: Open society Institute, NEPC, 2006



THE EXPERIENCE OF HONG KONG

ICE

15

- Establish and maintain:
 - a list of recognized irregular fees
 - a list of schools with their system of fees
- Campaign to educate parents on the choice of a tutorial school
- Warn operators and inform clients of their rights:
 - information booklet, website
 - list of registered tutorial schools (specifications, premises, fees, offences)
 - list of unregistered schools (convictions)

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2. COMPENSATORY MEASURES FOR THE POOR

16

Compensatory resources for the poor to address low contributive capacity

- Equalization grants (practiced in most highly decentralized systems, e.g. USA)
- Targeted grants to meet specific needs of underprivileged groups (as part of poverty reduction strategies)

Bangladesh

Targeted stipends to bring the poorest and girls



TARGETING THE MOST VULNERABLE IN CHINA

17

Scholarship scheme of the Gansu Basic project, China:

- At least 70% of scholarship recipients should be girls and at least 60% from ethnic minorities
- In townships in which the enrolment rate is below 60%, half of the scholarship funds should be used to support children who never attended school
- Only children from families with an annual income of less than 300 yuan who have at their disposal less than 300 grams of grain per capita are eligible

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3. LINKING COSTS AND RESOURCES

18

Adequate service delivery, both in quantity and quality requires proper costing and corresponding resources

- Using cost norms as a basis for funding schools
- Considering the value of "student basket"
- Acting gradually to take into account budgetary constraints



STUDENT BASKET IN LITHUANIA

19

- Annual amount of resources to be spent for teaching one student (teachers' salaries, teaching materials, management, pedagogical and social help)
- Application to all public, municipal and state general education schools
- ✓ 1/3 of resources provided through the student basket; three years later: full

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CONCLUSION

20

- Need to take into account budget constraints
- Irregular fees as a transitional mode of school financing?
- In any case, there is need for proper regulation, and concern for equity

Transparency is key!

GROUP WORK

21



- 1. Discuss the application of the three following approaches in the context of Bangladesh:
 - Publicize norms and standards
 - Compensatory measures for the poor
 - Linking costs and resources
- 2. Reflect on possible obstacles to the generalization of integrity pledges and how they can be overcome



ICTs for enhanced accountability and transparency

Nuzhat Jabin
Programme Manager
BRAC Institute of Governance and Development,
BRAC University

1

e-Purjee system

It address key problems such as

- Delay in receiving the 'purjee'
- Capture of 'purjee' by interest groups
- Mill staff selling paper 'purjee'

Solution

Sending purchase order to farmers through SMS and publishing through website

Online dashboard with real time update on issuance of e-purjee and feedback from farmers

I Paid a Bribe

Aims to quantify petty corruption through a portal which collates information on actual bribes paid by the citizens

Users register cases of paying bribe, not paying bribe, getting a service without having to pay bribe

Portal contains an advice column and a blog

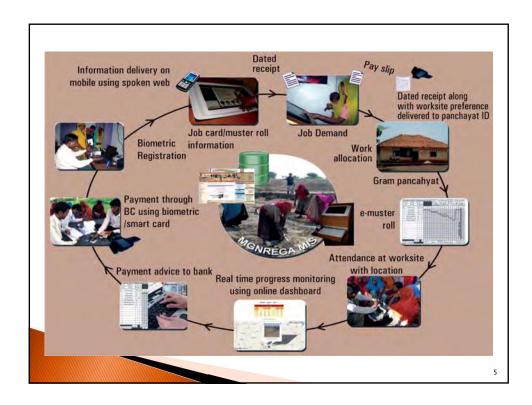
3

Digitizing the Employment Guarantee Act

It address the key problems of

- Workers unaware of basic rights and provisions under the Act
- Corrupt practices of job allocation, calculations of work days for payments

Government initiates an 'ICT- ecosystem' consisting of Info-kiosk, community radio, bio-metric and GPS enabled attendance system and mobile based job card retrieval



Crowd mapping the world we want

SMS based poll to for crowdmapping the priorities for the post 2015 development agenda

Result

In two weeks almost 175,000 voices were represented and a map with identified priorities was developed

Mobile-based application for citizens feedback

A voice enabled mobile phone application that can be used to generate citizens feedback.

Application is deployed in individual mobiles and citizen feedback received via GPRS or SMS

Data analyzed and appropriate actions taken

7

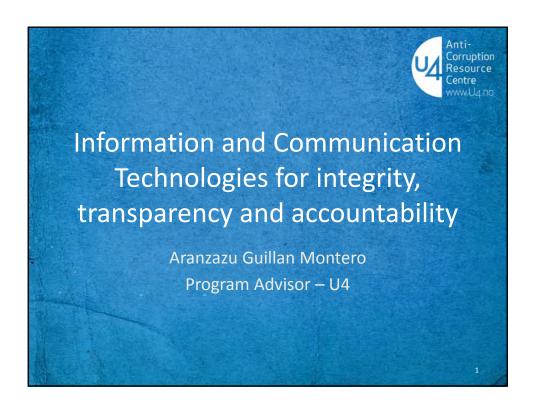
Challenges

- Low level of awareness
- Financial sustainability
- Language barrier
- Difficulty in initiation

Important to remember

Context

- Institutional capacities
- Development levels
- Legal and policy environment
- Political will/ reform champions
- Social factors



Objectives of the session



- I. To understand **the value of ICTs** for transparency and accountability in service delivery
- II. To provide an overview of the different types of ICT-based tools
- III. To discuss the **incentives** for the adoption and use of ICT innovation
- IV. To learn about the **enabling conditions** that make ICT effective for anti-corruption



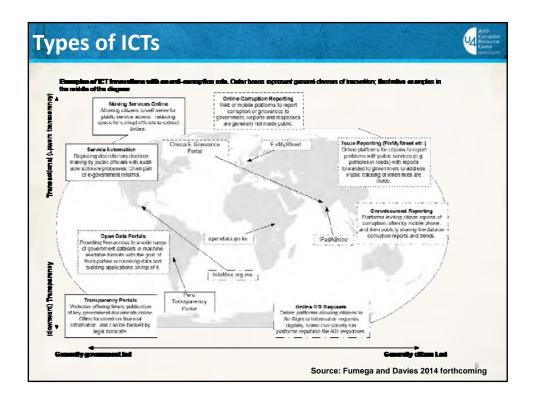
What are ICTs?



➤ Information and Communication Technologies (ICTs)

- ✓ Technologies that provide access to information through telecommunications.
- ✓ Umbrella term: any communication device or application, encompassing radio, television, cellular phones, computer and network hardware and software, satellite systems and so on, as well as the various services and applications associated with them (e.g., videoconferencing, distance learning).
- Often spoken of in a particular context (e.g., ICTs for education).





Benefits of ICTs



Transform public service delivery

- Facilitate citizens' access to services
- Increase the transparency of service delivery
- Limit the discretion of office holders



Provide collective action tools for citizens to

- Organize
- Monitor service delivery
- Report corruption
- Demand government accountability



Example of ICTs



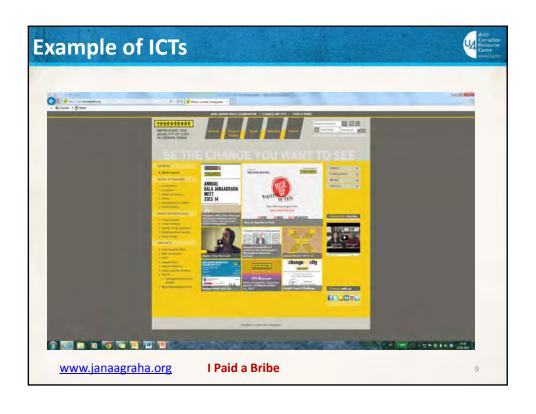
Citizen reporting channels

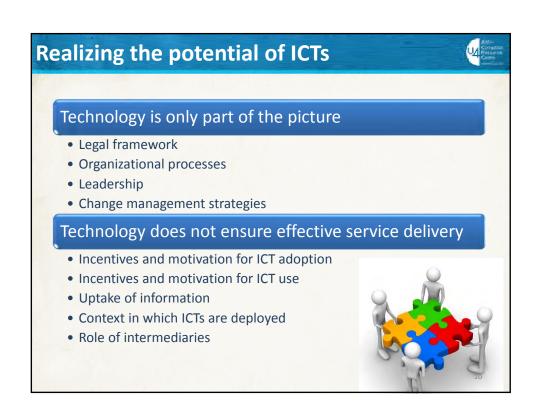
- > Flow of information from citizens to government
 - Citizens report instances of corruption or provide government agents with information they need to identify and address corrupt behaviour
 - Allow tracking citizen reports
 - Under the right conditions (E.G., will to challenge corruption, investigations and sanctions backed through judicial processes or integrity agencies, media attention) citizen reports may lead to change



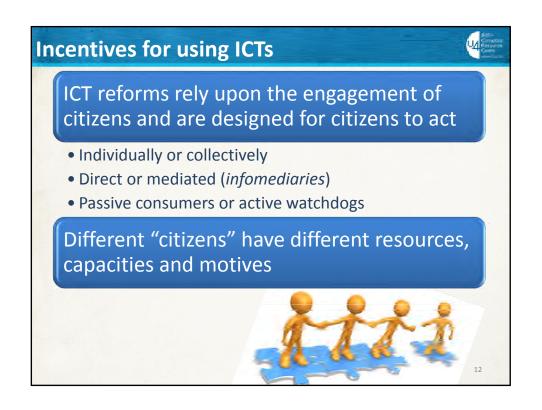
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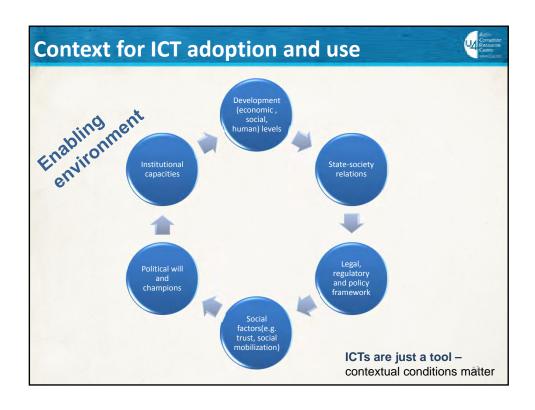
- Government (e.g., E-grievance portal Orissa)
- Civil society (e.g., I paid a bribe)

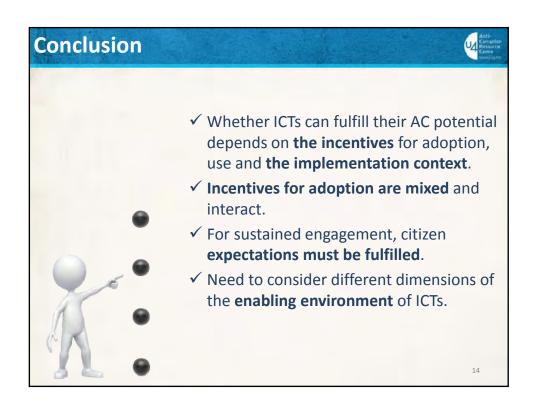




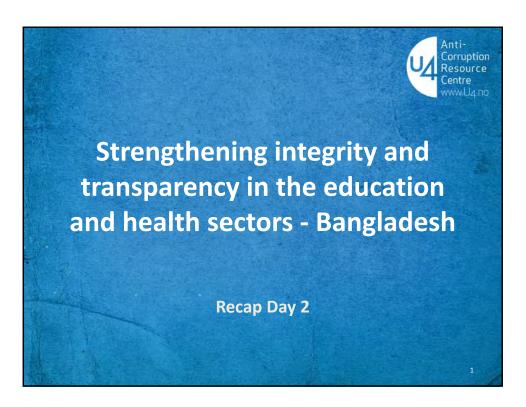












Risks of corruption



- Examples of relevant studies that show the effectiveness of relying on complementary AC measures (control, monitoring, sanctions)
- Distinction between:
 - Risk identification
 - Risk assessment
 - Risk mitigation
- Some tools for risk assessment
- Corruption risk management in the project cycle
 - Need to focus on implementation and monitoring and evaluation (not only on the first stages)
- Remedies depend on the diagnosis

Group work - Health



- Participants noted problems in all areas of the WHO Health Building Blocks
- 5 issues analysed through: identification of scope of the problem, identification of drivers, data, rationalization and possible solutions:
 - Informal payments; Selling Jobs; Absenteeism; Shortages of staff; Procurement of medicines
- Issues regarding enabling environment, information, infrastructure problems and financing & resource allocation were also discussed
- Video on social audits and discussion on:
 - The experience of Bangladesh with SAcc tools
 - Scaling up and sustainability
 - Follow up to citizen feedback and results of social audits
 - Role of NGOs as intermediaries/facilitators for social mobilisation

Group work - Health



- Informal payments
 - Concept
 - Why they are a problem
 - How can we measure informal payments
 - Strategies to reduce informal payments
- Examples of reforms
- Reflection on the results of these strategies

Group work –Education



- Mapping of distorted practices
 - Different areas or processes
 - Opportunities for corrupt practices in each area
 - Impact on education
- Transparency
 - RTI Act in Bangladesh
 - Information management systems
 - Three tools: Public Expenditure Tracking Surveys; Report Cards; Quantitative Service Delivery Surveys
 - What are these tools
 - Examples of application (including Bangladesh if applicable)
 - Implementation challenges
- Group exercise

Group work - Education



- Illegal fees and informal payments
 - Understanding the concepts
 - Analysis of causes
 - Different types of fees
 - Illegal fees and payments in Bangladesh
 - Impacts and risks attached: on distribution, quality, coverage, misuse of resources and corruption risks
 - Addressing illegal fees and informal payments
 - Examples from different approaches and cases
 - The value of transparency
 - Group work exercises

ICTs



- ICTs are just a tool -other factors influence their effective use for enhancing service delivery (yet also involve specific challenges):
 - Incentives for adoption and use (e.g. fig leaf effect, limited awareness)
 - Uptake of information (e.g., barriers to uptake)
 - Context (e.g., weak organisational capacity, no champions)
- Some experiences
 - E-purjee system
 - I paid a bribe
 - Digitizing the Employment Guarantee Act
 - Crowd mapping the world we want
 - Mobile based application for citizen feedback

ICTs – Group discussion



- Health: smart cards for health insurance; biometrics attendance system; e-procurement
- Education: e-procurement; online selection of schools; real time monitoring systems; ICT enabled monitoring of textbook distribution; disclosure of information on report card system ... And many other!
- Issues:
 - Common interest in adopting e-procurement. Many experiences on this area – some work some don't
 - Need of being realistic and prioritize to obtain results and maximise impact
 - Build synergies with existing initiatives
 - Invest in ICTs for prevention rather than for detection







Absenteeism

Taryn Vian
Boston University – School of Public Health

U4 Workshop, Strengthening integrity and transparency in the Education and Health Sectors





The problem

Primary Health Center Absence rates (%)			
Bangladesh	35		
India	40		
Indonesia	40		
Peru	25		
Uganda	37		
Unweighted average	35		

Chaudhury, Hammer, Kremer, Muralidharan and Rogers. 2006. Missing in Action: Teacher and Health Worker Absence in Developing Countries. *J of Econ Perspectives*. 20(1), p. 91-116





3

Absence rates are higher ...

- In poor regions
- Among powerful providers (e.g. doctors), compared to other health staff
- Among men
- In public facilities and facilities with lower quality infrastructure





How to know what works?

- Experimentation with randomization
- Choose 100 representative facilities
- Randomize and implement improvement strategy in 50, do not implement in other facilities until trial is over.
- Measure and compare outcomes in the two groups.





5

How to measure absenteeism?

- Direct observations during unannounced visits.
- Examples:
 - Locally hired person monitors absence weekly for 1 year (unannounced visits on random days)
 - Monthly monitoring visits (unannounced, random days) by a monitor who is employed by research team.
- Monitors look for nurse in the center or in any of the villages where s/he is supposed to be working.





Strategies to curb absenteeism

- Change incentives to providers through rewards and punishments implemented by monitors (hierarchical control)
- 2. Change incentives to providers through more active involvement of those who will benefit from services (beneficiary control)
- 3. Increase demand for services to put more pressure on providers





7

1. Hierarchical control

- Monitor intensively and base incentives (rewards & punishments) on measured performance
- Incentives may be monetary, or can use praise or shame
- Different methods of monitoring are possible (supervisor, time clock, etc.)
- Choice of what to monitor (e.g. absences or performance outputs)





2. Beneficiary control

- Two components
 - There has to be real demand for service, because monitoring takes work!
 - Must be a mechanism for affecting providers

"People accept what they can have. Let's say you have a family planning service and it is not providing good quality service. I can change and go to another family planning clinic if I am in an urban area. But if I am in a village where there is only one clinic, where can I go? I will come to your place, even if the quality is not good."

Rwandan doctor, explaining how lack of choice affects quality of care





c

2. Beneficiary control

- Options: put beneficiaries in charge of:
 - hiring and firing providers, or deciding pay
 - monitoring and reporting provider absences
- · Advantages:
 - cheaper for beneficiaries to monitor; beneficiaries are better informed; social opprobrium
 - if demand really exists, beneficiaries should be willing to reward or punish agents; if not, this may indicate low demand for services
- Caveats:
 - social inequalities; power to retaliate





3. Demand side interventions

- Building facilities closer to where people live
- Incentives for children or parents of children who attend school (PROGRESA program in Mexico, school meals)
- Improving school or health center infrastructure, increasing inputs





11

Exercise

- Read the descriptions of experiments to reduce absenteeism
- Analyze the type of strategy used
- Predict the effect on absenteeism, and any other intended or unintended effects





Lessons learned

- Mechanically implemented incentive program can be very effective in reducing absenteeism.
 - Clearly defined task, simple incentives, systematic implementation
- When human judgment is involved in a system where rules are often bent, incentives may easily be perverted, either in an equitable direction or to favor specific individuals or groups.





13

Lessons learned

- Incentives must be tied directly to attendance. Incentives help staff get a better sense of what their objectives are, and will lead them to focus on best ways to achieve them.
- Community monitoring has weak effect. It does not work if community lacks formal authority to reward or punish provider.
 - people are not upset enough?





Low expectations—low results

- Community monitoring may not work because people have low expectations of public health facilities
 - "Did your last visit to a public health facility make you feel better?"* 75% yes
 - · even with high absence rates, long waits, lack of drugs!
- If people have given up on public facilities, they may have little motivation to work to improve them.

*Data from a survey in Udaipur District, Rajasthan, India, Banerjee and Duflo





15

Lessons learned

- Working conditions faced by providers help explain why incentives don't work.
 Rationalizing job descriptions, providing transport allowances may help increase attendance
- Weak effect of community monitoring requires more analysis, focus on building stronger demand







U4 training workshop:
'Strengthening integrity and transparency in the education and health sectors in Bangladesh'
Dakha, 31 March-02 April 2014

Strategies to improve teacher management and behavior

Jacques Hallak & Muriel Poisson

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OBJECTIVES OF THE SESSION

2

Identify major risks of distorted practices in teacher management and behavior

- Lessons drawn from international experiences to reduce risks in teacher management
- Discuss strategies to improve transparency in teacher management in Bangladesh
- Lessons drawn from international experiences to improve the integrity of teachers
- Discuss the use of integrity tools to improve teachers' accountability in the context of Bangladesh

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CENTRALIZED VS DECENTRALIZED MANAGEMENT: HYBRID SYSTEMS

- Central authorities advertise teacher recruitment based on the requirements assessed by the local authorities
- Initial deployment remains a central function
- Local authorities can transfer teachers based on set criteria
- Lack of systematic information on teacher qualifications, needs and projections

Explicit definition of responsibilities of each layer of the administration

Strengthening capacities of management through training

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IN BANGLADESH: A HYBRID SYSTEM

- For government primary schools the Directorate of Primary Education advertises posts and invites application in daily newspapers
- Selection tests and interviews are used to determine candidates. Candidates pass a uniform written test and an oral test
- The DPEO is the appointing authority of GPS teachers. A large number of teachers are recruited at once and then posted to different schools (regardless of their home districts or towns)
- In community, non-government private and community schools, teacher recruitment is performed by the School Managing Committee on the basis of interviews
- Teachers in these schools are usually recruited from the local community
- The SMC chosen candidates are sent to the Upazila Education Committee, which recommends them and sends them to the District Education Committee
- The DEC forwards them to the RNGPS Project Implementation Unit, which approves the appointment

Source: Haq and Islam, 2005

In a hybrid setting, are there particular risks of distorted recruitment practices?

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THE PROS AND CONS OF **DECENTRALIZED MANAGEMENT**

Reduced risk of corruption

- ▼ Better knowledge of teachers and ▼ Nepotism their skills
- Less risk of illicit exchanges and transfer of teachers
- Reduced number of ghost teachers

Increased risk of corruption

- ▼ Greater pressure from local actors
- Non-compliance with national management criteria
- More discretion in the use of personnel evaluation and promotion criteria



CORRUPTION IN TEACHER RECRUITMENT

- Manipulation of information: lack of accurate base line data on teachers, use of fake documents, inflation of posts
- Favoritism and nepotism:
 - unfair selection processes in appointment
 - the teacher is a friend or family-member to someone in the administration
 - the teacher is appointed because of his/her socio-political background, political party, union (Mexico), etc.
- **Bribes** for recruitment



TEACHER DEPLOYMENT

1

- Pressure on the administration to assign staff
- Positions filled declared vacant to get more teachers
- Women faking marriage in order to get a transfer
- ▼ Teachers working at locations other than where posted)
- Teacher exchanges based on private agreements
- Teachers seconded from teaching to administrative duties without official clearance
- Illegal replacement of teachers

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TEACHER REMUNERATION

8

- Incorrect or double salary payments
- Teachers having to pay back part of their salaries to the person in charge of giving it to them (Brazil, Cambodia)
- Ghost teachers on the rosters and payroll
- Forging of documents and bribing of officials to secure larger retirement cheques and/or earlier retirement
- Embezzlement of pension funds by administrative staff

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SURVEY ON STAFF

- **MANAGEMENT IN FRANCE**
- About 1,000 posted teachers are unavailable
- About 2,500 substitute teachers are in excess of needs
- A large number of teachers are unemployed
- Nonetheless, there is recruitment of temporary teachers (2004 > 15,000 temporary teachers over and above substitute teachers)
- This results in both bad management and abuse

Source: Report of the Cour des comptes

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AWARENESS INDICATORS (RED FLAGS)

9

'Red flags' Area Degree from an unknown university Diploma Abnormal number of degrees/high level Exams Teachers do not get paid for conducting exams ✓ Very high % of students pass the exams or obtain very good scores Low salaries, extravagant lifestyles of teachers Salaries Appointment of family/close friends Teacher appointment/ Teachers close to the administration are getting the transfer most attractive posts 'Ghost Gap between payroll & actual number of working teachers' teachers





1. CLEANING THE LIST OF STAFF

- To organize a nation-wide 'headcount' exercise, during which teams physically verify that teachers listed on payroll sheets exist
- To check credentials and avoid the use of fake degrees
- To use a formal administrative act to validate the final list of teachers eligible to receive salaries
- To conduct 'spot audits' throughout the year
- To identify cases of double salaries or undeclared sick leave (longer than the norm of three days)

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2. ELIMINATING THE USE OF FAKE DIPLOMAS?

12

- Verify the validity of degrees with the educational institutions listed as having granted them when a new teacher is employed
- The original diploma should be presented whenever the headmaster/administration claim so
- Prevent such behaviour by informing staff about the consequences of using fake degrees (fine or dismissal)
- Promotions or increase in salary should not be given before verification of qualifications

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- 3. SETTING CLEAR CRITERIA (IN CONSULTATION WITH THE UNIONS)
- Adoption of one recruitment per year
- Selection of common parameters
- Vacant posts publicized
- Selection process outsourced
- ▼ Transfer decided by the central office in consultation with LEAs
- Transfer requests considered only at the end of the school year, except in cases of proven illnesses, court orders
- Monthly records of school employees' daily attendance created by each school



4. CREATING A COMPUTERIZED **MANAGEMENT SYSTEM**

- Detailed information on each teacher (teacher code, work history, changes affecting pay...)
- Update data bases:
 - Teachers receiving double salaries
 - Undeclared sick leave (more than 3 days)
 - Unjustified or excess payment of salaries
- Result: less time needed to deal with requests

PROCEDURE	2000	2010
Leave	15 days	5 days
Retirement	20 days	3 days
Filling vacant posts	25 days	6 days
Assignments	20 days	6 days
Technical bonuses	45 days	15 days
Vacation	20 days	5 days
Disability	25 days	8 days

15



5. SETTING-UP CONTROL MECHANISMS

Once an anomaly is detected (e.g. teacher absenteeism), the institutions in question (MOE, school, etc.) should:

- determine the status of each teacher (qualification, contract, etc.)
- inform the entities responsible for carrying out the disciplinary action
- review any potential need for revising the procedure

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GROUP WORK

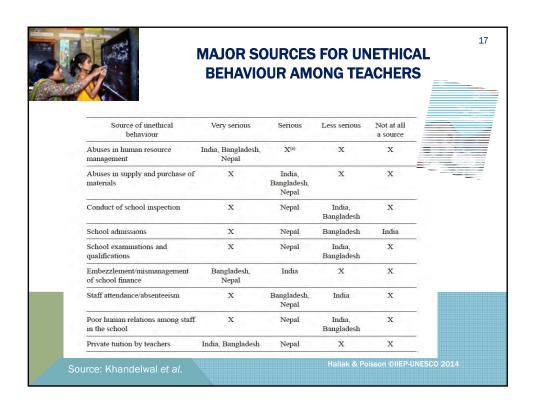
Discuss major risks attached to the recruitment and payment of salaries of the following 4 categories of teachers in Bangladesh:

- 1. Government primary school teachers
- 2. Non-government primary school teachers
- 3. Community primary school teachers
- 4. Private primary school teachers

If time permits, formulate one possible measure to address these challenges for community primary school teachers



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TEACHER INCENTIVES KEY TO REDUCE MISBEHAVIOURS IN BANGLADESH

- Teachers' salary determined by qualifications, training and experience
- Compensate better performing teachers
 - Clear and transparent criteria for rewarding
 - Efficient recruitment and deployment
- Rewarding teachers according to their attendance and performance (meritbased)

Reducing teacher

- motivation of teachers
- School autonomy
- involvement of parents in school managementdevolution of
- devolution of administrative and financial powers to communities

Source: Chaudhury, 2006

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TEACHER INCENTIVES PROS AND CONS OF DIFFERENT APPROACHES

	Pros	Challenges
In-kind	Needs-based	Long time to reach beneficiaries Definition of needs subjective
Cash-based	Fewer intermediaries. More standardized, making it easier to track amounts	In countries where bank facilities are not widespread, burden for teachers
Centralized		Decision-making carried out far from beneficiaries
Decentralized	Adaption to local needs and cultures Greater chance for communities to oversee programme operations and hold authorities accountable	Local financial and managerial capacity needed Increased length of time for money to reach final beneficiaries
Source: Poisso	n, 2014	

21



REDUCING TEACHER ABSENTEEISM

- Specification of the area's features in the publication of posts
- Inform staff about the rules and procedures to be followed in case of sick leave as well as the sanctions
- Make clear that the rules are the same for everybody
- Organize internal and external controls to make sure that the teacher is in the classroom
- Improve the infrastructure
- Build ownership: unions and PTAs

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WHAT A CODE IS ALL ABOUT?

44

A code of conduct is a set of guidelines – a written document – produced by public authorities or by professional organizations, which details the set of recognized ethical norms (or values) and professional standards of conduct to which all members of a profession must adhere

77

Source: Poisson, 2010

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INTERNATIONAL STANDARDS TO BE CONSIDERED

23

Towards pupils	Towards parents & the community	Towards colleagues	Towards employers	Towards the profession
Shall respect the learner's right and dignity without prejudice to gender, colour, age, place of origin, language, sexual orientation, socio-economic	Shall conduct himself/herself in a manner that does not show disrespect to the values, beliefs and customs of the parents, and to the broader community	Shall refrain from undermining the status and	Shall be truthful when making statements about his/her qualifications and credentials	Shall act in a manner that upholds the honour and dignity of the profession
background, family status, religion				

Source: Poisson, 2010

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THE GOVERNMENT SERVANTS (CONDUCT) RULES IN BANGLADESH

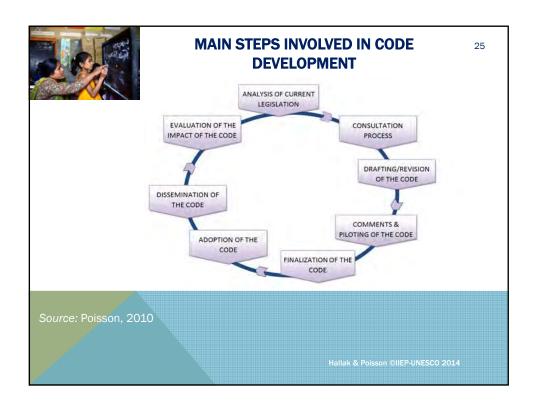
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"

5. Gifts. No Government servant shall, except with the previous sanction of the Government, accept, or permit any member of his family to accept, from any person any gift the receipt of which will place him under any form of official obligation to the donor. If the offer of a gift cannot be refused without giving undue offense, it may be accepted and delivered to the Government for decision as its disposal.

77

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GROUP WORK

- 1. Do teachers know about the existence of the Code for civil servants? To what extent has the code helped improve ethical behavior in schools?
- 2. Compare the code of ethics for civil servants in Bangladesh with the international standards of professional conduct for teachers and comment
- 3. List three measures to be taken to enforce the implementation of the Code (information, training, incentives, etc.)



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Pharmaceutical Systems Taryn Vian

Acknowledging the assistance of Andy O'Connell, DFID

U4 Workshop, Strengthening integrity and transparency in the Education and Health Sectors



Public Goals

- Safe, effective drugs available in private and public sectors
- Public sector spending to purchase safe, effective, low cost drugs in amounts the country needs, in a manner that is timely and reliable
- Systems which provide safe and efficient storage and delivery to assure uninterrupted availability of the right drugs to the right people at the right times
- Prescribing, dispensing, and use of drugs for the best therapeutic outcomes and least cost





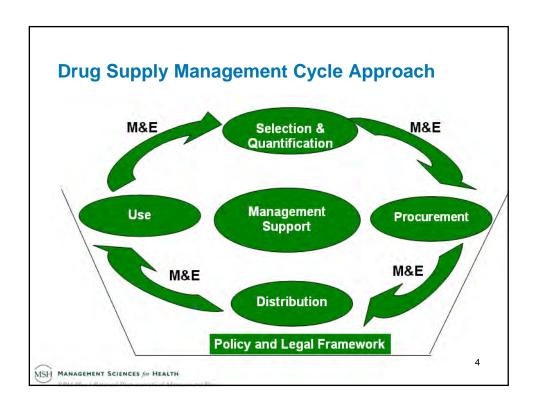
Drug Sector Decision Points

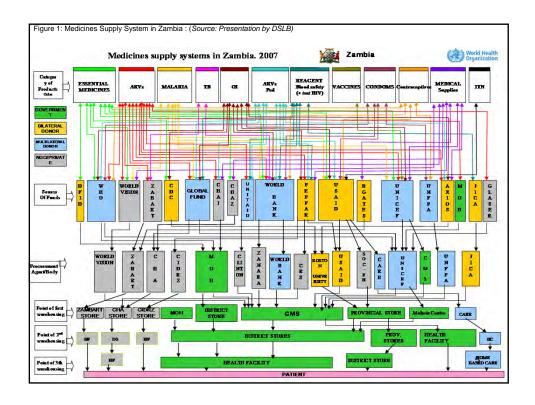
- Manufacturing
- Registration
- Selection
- Procurement
- Distribution
- · Prescribing and dispensing

Source: Cohen, Mrazek, and Hawkins, pp. 29-62 in The Many Faces of Corruption (World Bank, 2007).









Counterfeit Drugs

• FDA & WHO – up to 25% of medicines in some countries are counterfeit or substandard







Photo: Saad Khalaf, LA Times

Strategies against Counterfeits



- Legislation
- Regulation
- Enforcement
- Technology
- Communications

IMPACT:

International Medical Product Anti-Counterfeiting Taskforce

Resources:

http://www.who.int/impact/en http://www.transparency.org/publications/gcr/gcr 2006

7

ww.Llyna

Registration

- Vulnerability: Weak laws and regulations
- Deliberate delays by government in order to solicit bribes
- Strategies:
 - Create strong legal basis for registration
 - Screen staff for conflict of interest
 - Transparency disclose all applications





Selection

- Vulnerability: manufacturers have strong interest in seeing their drugs in public system
- Strategies:
 - Use of essential drug list
 - Explicit criteria for selection and deletion of drugs from list, diversity in selection of committee members, control on conflicts of interest
 - Clear procedures for decisions re: reimbursement





9

Analysis of Bulgaria's Drug Lists

- Under-inclusion
 of first line agents, in favor
 of newer, more expensive
 drugs
- List includes clarithromycin (\$0.22/tab) & azithromycin (\$0.44/tab), but not erythromycin (\$0.03/tab)
- Has medium & high potency cortico-steroids, but not compounds for 1st level Rx
- Over-inclusion of drugs of questionable efficacy
- Large #s of alternative compounds within a category: 5 statins, 7 ACE inhibitors, 8 brands of ibuprophen

Source: Meagher, Azfar, Rutherford, 2005, p.10. Drug prices from 2007 MSH International Price Guide, http://erc.msh.org/





Procurement

- Vulnerability: risk of bribes, kickbacks, bid rigging & collusion, over-ordering
- Strategies:
 - Competitive procurement with open bidding
 - Better models to estimate quantities needed
 - Price monitoring and transparency
 - Careful selection of drug committee members, and transparency of proceedings



Source: Cohen, Mrazek, and Hawkins, pp. 29-62 in The Many Faces of Corruption (World Bank, 2007)

Effect of AC in Procurement in Latin America*

- Lower prices paid, cost savings (Argentina, Colombia)
- More control meant higher perceived probability of detection for theft (Venezuela)
- Supervision deterred overpayment for drug purchases (Bolivia)





*DiTella and Savedoff, Diagnosis Corruption: Fraud in Latin America's Public Hospitals. IADB, 2001.

Distribution

- Vulnerabilities: Theft and diversion
- Strategies:
 - Physical protection & security
 - Locked and gated facilities
 - · Divided areas with controlled access
 - Screen employees, surveillance
 - Segregation of workforce and duties
 - Revise plans for dispatch and transport
 - Technology





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Example: **Pharmaceutical Healthcare Distributors** (PHD)

- Commercial service for drug stockholding & delivery, reaching 9,000 service delivery points; used by governments, NGOs, and private manufacturers
- Reduced losses from 15% to <0.1% through a set of actions including investment in physical protection, employee screening, segregation of workforce & duties, risk analysis of routes, and technology to track "leakage"





Source: U4 Brief 4:2006, Anti-Corruption in the Health Sector: Preventing Drug Diversion through Supply Chain Management. http://www.u4.no/themes/health/main.14m

Prescribing & Dispensing

- Vulnerabilities
 - Financial inducements to physicians, conflict of interest (dispensing physicians, pharmacy ownership)
- Strategies
 - Professional associations, promote adherence to codes of conduct, with penalties for breaches
 - Monitoring physician prescription patterns
 - Regulate physician-pharma interactions
 - License and inspect pharmacies





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Transparency in Price Information

- Reduces vulnerabilities in many decision points
- Helps evaluate drug expenditure compared to other countries
- Purchasing agents can negotiate better deals
- Analysis makes it more likely that abuse will be detected



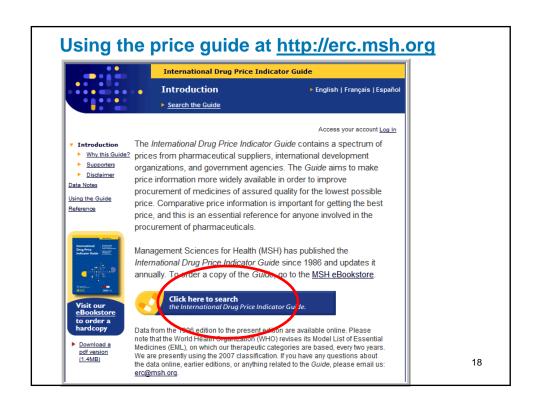


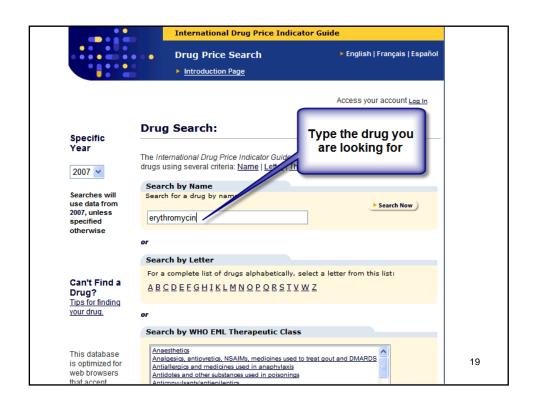


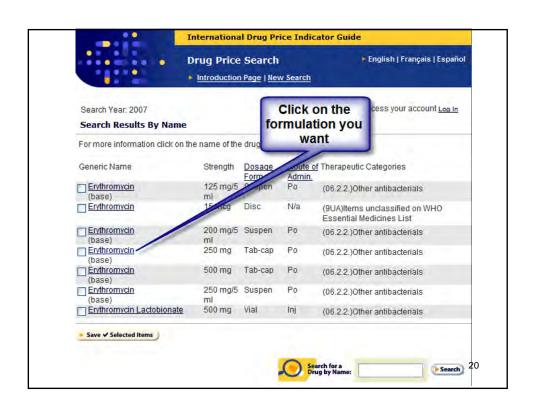
- WHO and Health Action International, 2002
 http://haiweb.org
- HEPS-Uganda
- Online catalogues of prices www.msh.org



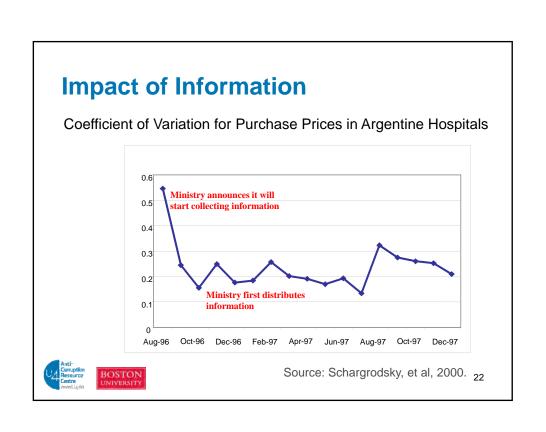








Generic Name	Erythrom Therapeutic Ca (06.2.2.) Other	tegories			
	Strength	250 mg	Dosage Form	型 Tab-cap	
Save this drug to my list	Route of Admin	istration Oral preparation	Defined Dai	^{ly} 1G	
	WHO Status	Е	Suppler Name	Median	
	ATC Code	J01FA01		price for	
Supplier Prices			Prices an	supplier (buyer price is	
Source	Package		Package Price	below)	
UNFPA	1000 Tab-cap	(Tablets)	\$ 21.00	/ 210/Tab-cap	
MISSION	1000 Tab-cap	(Stearate tablets)	\$ 23.61	.0236/Tab-cap	
		(Stearate tablets) (Stearate tablets)	\$ 23.61 \$ 24.00	.0236/Tab-cap 0.0240/Tab-cap	
MEDS		(Stearate tablets)			
MEDS JMS	1000 Tab-cap 1000 Tab-cap	(Stearate tablets)	\$ 24.00	0.0240/Tab-cap	
MEDS JMS MEG	1000 Tab-cap 1000 Tab-cap 1000 Tab-cap	(Stearate tablets) (Tablets)	\$ 24.00 \$ 24.06	0.0240/Tab-cap 0.0241/Tab-cap	
MEDS JMS MEG IMRES	1000 Tab-cap 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap stearate)	(Stearate tablets) (Tablets) (Stearate, tablets)	\$ 24.00 \$ 24.06 \$ 24.52	0.0240/Tab-cap 0.0241/Tab-cap 0.0245/Tab-cap	
MEDS JMS MEG IMRES	1000 Tab-cap 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap stearate)	(Stearate tablets) (Tablets) (Stearate, tablets) (Film-coated tablets, (Stearate, tablets)	\$ 24.00 \$ 24.06 \$ 24.52 \$ 25.44	0.0240/Tab-cap 0.0241/Tab-cap 0.0245/Tab-cap 0.0254/Tab-cap	
MEDS JMS MEG IMRES IDA ACTION/IH	1000 Tab-cap 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap stearate) 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap	(Stearate tablets) (Tablets) (Stearate, tablets) (Film-coated tablets, (Stearate, tablets) (Tablets)	\$ 24.00 \$ 24.06 \$ 24.52 \$ 25.44 \$ 26.21	0.0240/Tab-cap 0.0241/Tab-cap 0.0245/Tab-cap 0.0254/Tab-cap 0.0263/Tab-cap	
MEDS JMS MEG IMRES	1000 Tab-cap 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap stearate) 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap	(Stearate tablets) (Tablets) (Stearate, tablets) (Film-coated tablets, (Stearate, tablets) (Tablets) (Tablets, as ethyl	\$ 24.00 \$ 24.06 \$ 24.52 \$ 25.44 \$ 26.27 \$ 30,5	0.0240/Tab-cap 0.0241/Tab-cap 0.0245/Tab-cap 0.0254/Tab-cap 0.0263/Tab-cap 0.0301/Tab-cap	
MEDS JMS MEG IMRES IDA ACTION/IH MALAWI	1000 Tab-cap 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap stearate) 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap succinate or ett	(Stearate tablets) (Tablets) (Stearate, tablets) (Film-coated tablets, (Stearate, tablets) (Tablets) (Tablets, as ethyl	\$ 24.00 \$ 24.06 \$ 24.52 \$ 25.44 \$ 26.21 \$ 30 /5 \$ 3 /64	0.0240/Tab-cap 0.0241/Tab-cap 0.0245/Tab-cap 0.0254/Tab-cap 0.0263/Tab-cap 0.0301/Tab-cap 0.0356/Tab-cap	
MEDS JMS MEG IMRES IDA ACTION/IH MALAWI DURBIN	1000 Tab-cap 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap stearate) 1000 Tab-cap 1000 Tab-cap 1000 Tab-cap succinate or ett	(Stearate tablets) (Tablets) (Stearate, tablets) (Film-coated tablets, (Stearate, tablets) (Tablets) (Tablets, as ethyl nyl stearate)	\$ 24.00 \$ 24.06 \$ 24.52 \$ 25.44 \$ 26.2 \$ 30,5 \$ 3,64	0.0240/Tab-cap 0.0241/Tab-cap 0.0245/Tab-cap 0.0254/Tab-cap 0.0263/Tab-cap 0.0301/Tab-cap 0.0356/Tab-cap	2



WHO Good Governance for Medicines (GGM) Program

- Vulnerability assessment
- Ethical frameworks to promote good governance, including training to socialize (consciousness raising, development of intrinsic motivation, etc.)
 - Documents: WHO. Measuring transparency to improve good governance in the public pharmaceutical sector. 2007
 - WHO: Ethical infrastructure for good governance in the public pharmaceutical sector. 2006





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Resources

WHO Good Governance for Medicines

http://www.who.int/medicines/ggm/

Medicines Transparency Alliance

http://www.medicinestransparency.org

Work by Jillian Cohen, et al

The Many Faces of Corruption (World Bank, 2007, pp. 29-62); "Tackling corruption in pharmaceutical systems worldwide with courage and conviction." *Clinical Pharmacology & Therapeutics*. 2007; 81(3):445-449

Anti-Counterfeiting web sites and references

http://www.who.int/impact/en

http://www.transparency.org/publications/gcr/gcr_2006

Price Monitoring tools

http://www.msh.org/resource-center/international-drug-price-indicator-guide-electronic.cfm

http://www.haiweb.org/medicineprices/

24



U4 training workshop:
'Strengthening integrity and transparency in the education and health sectors in Bangladesh'
Dakha, 31 March-02 April 2014

Focus on public procurement in the education sector

Jacques Hallak & Muriel Poisson

© IIEP-UNESCO



OBJECTIVES OF THE SESSION

Present an overview of the vulnerabilities to corruption of

Provide illustrative examples from international experience to address such vulnerabilities, taking into account both government and civil society initiatives

public procurement in education

Discuss challenges and opportunities for strengthening procurement in school construction in Bangladesh

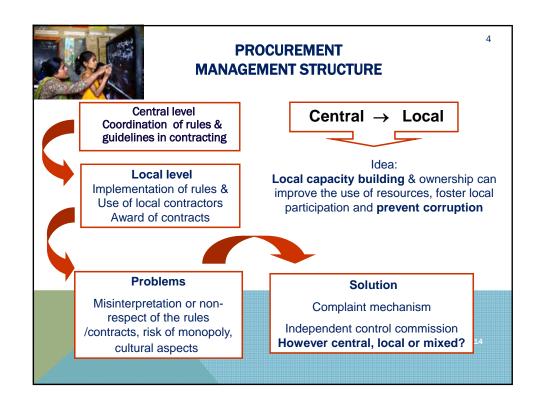


DEFINITIONS: PROCUREMENT / CONTRACTING

3

- Procurement refers to the acquisition of goods and services by any individual or organization (public, private, international)
- Contracts are the means by which public money is spent and public policy is implemented
- Contracting includes all activities that, in the shape of a contract, channel government expenditure

Ex.: privatisations, licenses and other types of contracts





PROCUREMENT MANAGEMENT STRUCTURE IN BANGLADESH

- ✓ Until 2002, 200 agencies used their own procedures
- ✓ Central Procurement Technical Unit established in 2002
 - Regulations
 - Standard tender documents
 - Capacity building (200 persons)
 - Tender evaluation committee with external members
 - Awarding a process and complaint mechanism
 - Monitoring of compliance (online publishing)
- Adoption by Parliament of the Public Procurement Act 2006

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HOW TO ADDRESS RISKS IN EDUCATION CONTRACTING (STAGE 1)

6

Stage 1	Main risks	Strategies
Decision to contract/ definition of contract characteristics	 Risk of channel benefits to an individual or an organization Over specification Vague or nonexistent specification 	 Adequate legal and regulatory framework Preparation of written contracting procedures, fixing explicit selection criteria Contracting requirements and specifications made by outside consultants or external auditors Pre-qualification of bidders, through questionnaires or detailed reviews

3



CORRUPTION IN SCHOOL MEALS CONTRACTING IN FRANCE

7

- Contracting of school meals: 4.5 billion euros every year, shared between 15 private enterprises
- Sodexho proposed to manage the construction of a kitchen to prepare the meals. Price calculated into price per meal, but kitchen over-dimensioned
- Scolarest signed a contract giving them the right to sell school meals for 14 years. According to the contract, the city had to pay for non-consumed meals, but the number of meals inflated

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HOW TO ADDRESS RISKS IN EDUCATION CONTRACTING (STAGE 2)

Stage 2 **Main risks Strategies** Contracting Invitation to tender is Promotion of additional process not publicized competition Bidding procedures and Invitation to tender is publicized but little documents made publicly and time is given to timely available present offers Use of electronic procurement Bidders or systems contractors collude Chance given for bidders from to influence prices or multiple countries to take part to share the market in the process

4



WEAKNESSES IN PUBLIC PROCUREMENT IN BANGLADESH

.

- Poor advertisement
- Short bidding period
- Poor specifications
- Nondisclosure of selection criteria
- Award of contract by lottery
- One-sided contract documents
- Negotiation with all bidders
- Rebidding without adequate grounds
- Corruption and outside influence
- Education project execution started without proper demand forecasting and a recurring revision of the project
- Starting the construction works just 10-45 days prior to the project deadline

Source: Actionaid 2013

Source: Ahmed Ibne Mahmood, 2010

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UK E-PROCUREMENT SYSTEM FOR NATIONAL COLLEGES

10

- central source of information and advice regarding all national college commercial activities
- accessible from any internet-enabled computer
- allows self-registration to access the system
- visibility of opportunities to engage with the college
- allow to download documents and submit tender responses electronically 24 hours a day, seven days a week
- automatic, electronic confirmation that your submissions have been received

Source: http://www.education.gov.uk/nationalcollege/supplying-redimo



HOW TO ADDRESS RISKS IN EDUCATION CONTRACTING (STAGE 3)

Stage 3	Main risks	Strategies
Contract	 Evaluation criteria are not clearly stated in tender documents, leaving no grounds to justify the decision Bureaucratic corruption, bribes and kickbacks, political considerations Quality (or cost) is the single measure of merit for awarding the contract 	 Selection by a central body in charge of comparing tenders and awarding contracts Setting up a series of successive filters based on technical, qualitative and financial criteria Reliance on written justifications, bid openings in public, outside reviews, etc. Involvement of civil society organizations Establishment of a committee dealing with objections and claims



PREQUALIFICATION OF BIDDERS IN NEW YORK CITY

12

- Experience
- Quality and timeliness of past performance
- Financial capability
- Reliability and responsibility
- Safety record
- Compliance with equal employment requirements
- Compliance with wage, hour and fair labour standards
- Integrity, key people, affiliates, current/past owners

Source: Thomas



HOW TO ADDRESS RISKS IN EDUCATION CONTRACTING (STAGE 4)

Stage 4	Main risks	Strategies
Contract implementation and supervision	 Contract changes/ renegotiations after the award are of a nature that changes the substance of the contract itself Corruption at the sub-contractor level Cost overruns Supply of inferior materials or less equipment Award cancellation 	 Internal and external supervisory and control systems of contract implementation Efficient rewards and penalties systems for contractors Role of 'watchdogs' played by communities ("report cards") Mechanisms to handle complaints



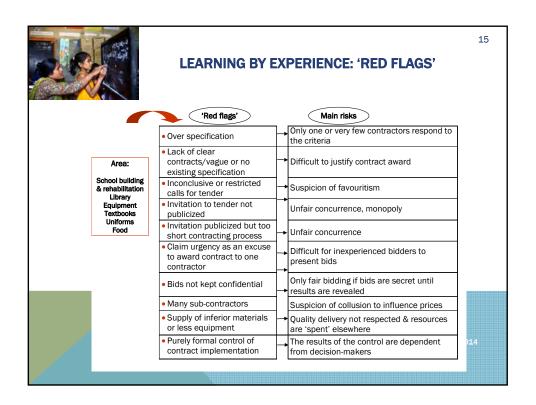
THE SCHOOL FEEDING PROGRAM (SFP) IN CHILE

14

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- Variables monitored: quality of service/nutrition, size of portions, students' acceptance of food (info provided by teachers/students through random samples)
- Teacher in charge of the SFP must certify whether each day's meals were served completely, incompletely, or not served at all; voucher for the quality of the service
- Labo analysis to verify that the food fulfils requirements
- Other control mechanisms: "smart cards" to monitor access by beneficiaries to the food provided

Source: Latorre, IIEP





THE MERIT OF INTEGRITY PACTS

An Integrity Pact is a tool developed by Transparency International to prevent corruption in public contracting.

- It is a preventive tool
- It includes an agreement between the government (agency) and all bidders for a public contract, and establishes mutual contractual rights and obligations
- It allows for timely and expeditious action, thus complementing administrative and criminal law through an arbitration process



INTEGRITY PACT PARTICIPATORY DEBATES

- Participatory debate with publishers on criteria for textbook pre-selection
- Participatory debate with publishers on bidding documents: Issues relating to the eligibility of offers, contract duration, deadlines for the submission of offers, delivery of textbooks
- Publishing houses participating in the debates
- As a result of the debates, criteria are reformulated by the MEST, and bidding documents are finalized

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INTEGRITY PACT MANAGING CONFLICTS OF INTEREST

- Composition of the National Advisory Committee is reviewed by the Ministry of Education
- Identification of conflicts of interests among Committee members
- Committee members fill in public statements on their interests (public offices and positions held in the private sector, publications, relationship with publishing houses, royalties)
- Statements published on the ministry website



INTEGRITY PACT IN ARGENTINA

19

- In the end, 48 publishing houses submitted a total of 631 textbooks
- Of these, the National Advisory Committee recommended more than half, 20% were not recommended, and 30% were found not to match the conditions.
- The maximum percentage of textbooks purchased from one company was 15.3%, the second most important got 14.7%.
- Overall, a large number of publishing houses benefited from the purchase.

Source: Meier, 2007

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GROUP WORK

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Read the case study on the construction and rehabilitation of schools for the East region and respond to the questions:

- Describe the procedures to be followed by the Commission step by step
- ✓ Identify relevant documentation to be collected for the work of the Commission
- Provide a tentative list of assumptions regarding the possible corrupt practices in the awarding of the contracts



Group work on mapping corruption risks in education

Identify areas of potential opportunities for misuse of education resources in Bangladesh, for example:

- leakages in the funds transferred from the Ministry of Education to schools,
- favouritism in the recruitment of teachers,
- teacher absenteeism,
- unauthorized fees charged to pupils/students,
- inflated prices for textbooks,
- exaggerated costs of classroom construction, or
- academic fraud i.e. management of exams, misuse of exam results, etc.

The table below provides a framework for this. Please complete it according to your own setting.

Areas of planning/ management involved	Distorted practices
Funding	
Allocation of specific allowances	
Schools: building, repair and use	
Supply and distribution of equipment, food and textbooks	
Teacher management	
Conduct of teachers	
Examinations and diplomas	
Information systems	

Open budget monitoring in Bangladesh

Definition of an open budget: Analysis of budgets and monitoring spending conducted by civil society, allowing sustained participation in policy decisions to make them more transparent and accountable to the people they affect.

The table below summarizes the findings of an evaluation of the experiences of open budgets in five countries, including Bangladesh. You are invited to address the following questions:

- 1. Is there an evaluation of the impact of open-budgeting in Bangladesh on transparency and accountability in the management of school funds?
- 2. List a few areas for training to build capacity for budget monitoring in Bangladesh by local stakeholders, including civil society.
- 3. What areas in the school budget can be usefully monitored by local stakeholders? e.g. income from districts, private donation, fees, teacher salaries, maintenance of schools, equipment, furniture, textbooks, etc.

Budget work achievements		Bangla- desh	Ghana	India	Pakistan	Sri Lanka
	National	/	Х		Х	Х
Tracked, influenced education budget	District	/	Х	Х	/	Х
	Local	/	Х	X	/	Х
Exposed misuse of bu	dget in media	/	Х		X	
Public officials taken misuse of funds	Public officials taken to court over misuse of funds				/	
Calculated costs of key policy reforms		Х				
Worked with MP or parliamentary caucus		Х	Х	Х	Х	
Linked to campaigns on debt					X	
Challenged donors on their aid to education		/	/		/	
Questioned macroeco	nomic policies			Х	/	

Source: Commonwealth Education Fund, 2007

X - Achieved / - In progress

GROUP WORK ON PROCUREMENT IN THE EDUCATION SECTOR

As part of a program to reduce the development gap between different regions, a Government from Central America has decided to launch an ambitious program of construction and rehabilitation of schools in the East region, which is far from the capital and suffers from chronic underequipment.

But shortly after the completion of construction and opening of new schools, a typhoon and floods occurred in this region. As a consequence, most of the new schools were destroyed, and this resulted in casualties among schoolchildren.

This was perceived as a real scandal by the population. The mass media questioned the quality of the buildings and the conditions for the award and execution of construction contracts.

As a result, the Parliament decided to establish a commission of investigation composed of government officials, business leaders and representatives of civil society.

You are appointed as an expert to the commission. You are asked to:

- 1. Describe the procedures to be followed by the Commission step by step
- 2. Identify relevant documentation to be collected for the work of the Commission
- 3. Provide a tentative list of assumptions regarding possible corrupt practices in the awarding of the contracts

It is assumed that the Commission has extensive investigative powers (hearing, communication documents, etc.) both with public purchasers and companies who have contracted with the administration.

For official use



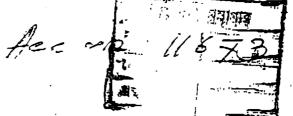
GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

CABINET SECRETARIAT ESTABLISHMENT DIVISION REGULATION WING Section VI

The Government Servants (Conduct) Rules, 1979

312.06 8AG

> Officer-in-charge Bangladesh Gavernment Press, Dacea 1972



[Published in the Bungladesh Gozette, Extraordinary, dated the 18th May 1979.]

GOVERNMENT OF THE PEOPLE'S REPUBLIC OF BANGLADESH

CABINET SECRETARIAT

Establishment Division

Regulation Wing

Section VI

NOTIFICATION

Dacca, the 18th May, 1979.

No. 133-L/79.—In exercise of the powers conferred by the proviso to article 133 of the Constitution of the People's Republic of Bangladesh, the Vice-President, exercising the powers of the President as delegated to him by the President under President's Secretariat, President's Division (Public) Notification No. PS/Admn/3(24)/78-1569, dated the 20th November, 1978, is pleased to make the following rules, namely:—

THE GOVERNMENT SERVANTS (CONDUCT) RULES, 1979

- 1. Short file and commencement.—(1) These rules may be called the Government Servants (Conduct) Rules, 1979.
 - (2) They shall come into force at once.
- 2. Application.—These rules shall apply to all Government servants, whether on duty or on leave, within or without Bangladesh, serving in a civil capacity in respect of the Government of Bangladesh or while on deputation with any other Government agency, institution or authority, except.—
 - (a) persons to whom the Railway Establishment Code applies;
 - (b) subordinate officers of the Dacca Metropolitan Police and the Chittagong Metropolitan Police;

- (c) members of any other Police force below the rank of Fispector of Police,
- (d) subordinate officers, Riflemen and Signalmen of the Bangladesh Rifles;
- (e) subordinate Jail Officers below the rank of Deputy Jailor and Sergeant Instructor of Bangladesh Jails; and
- (f) members of such services and holders of such posts as may be specified by the Government by notification in the official Gazette.
- 3. Definitions.—(1) In these rules, unless there is anything repugnant in the subject or context,—
 - (a) "Government servant" means a person to whom these rules apply; and
 - (b) "member of a Government servant's family" includes—
 - (i) his wife, child or step child, whether residing with the Government servant or not; and
 - (ii) any other relative of the Government servant or his wife, when residing with, and wholly dependent upon the Government servant, but does not include a wife legally separated from the Government servant, or a child or step-child who is no longer in any way dependent upon him, or of whose custody the Government servant has been deprived by law.
- (2) References to a wife in clause (b) of sub-rule (1) shall be construed as references to a husband where the Government servant is a woman.
- 4. Repeal, etc.—The Government Servants (Conduct) Rules, 1964, made under paragraph (a) of clause (2) of article 178 and clause (1) of article 179 of the Constitution of 1962, and the Government Servants' (Conduct) Rules, 1966, made under paragraph (b) of clause (2) of article 178 and clause (1) of article 179 of the Constitution of 1962, in so far as they applied to the persons to whom these rules apply, are hereby repealed, but such repeal shall not affect anything done or suffered under those rules.
- 5. Gilts.—(1) Save as otherwise provided in this rule, no Government servant shall, except with the previous sanction of the Government, accept, or permit any member of his family to accept, from any person any gift the receipt of which will place him under any form of official obligation to the donor. If the offer of a gift cannot be refused without giving undue offence, it may be accepted and delivered to the Government for decision as to its disposal.
- (2) If any question arises whether receipt of a gift places a Government servant under any form of official obligation to the donor, the decision of the Government thereon shall be final.
- (3) If any gilt is offered by the head or representative of a foreign State, the Government servant concerned should attempt to avoid acceptance of such a gift, if he can do so without giving offence. If, however, he cannot do so, he shall accept the gift and shall report its receipt to the Establishment Division for orders as to its disposal.

- (4) Secretaries to the Government or officers of equivalent status may accept gifts offered abroad or within Bangladesh by institutions or official dignitaries of foreign Government of comparable or higher-level provided that the value of the gift in each case does not exceed Taka 500 (Taka five hundred). If the gift is capable of being used in a Government office or department or at official residence, it should be used accordingly. If the gift cannot be so used, the Government servant may retain it for his own use.
- 6. Acceptance of foreign awards.—No Government servant shall, except with the approval of the President accept a foreign award title or decoration.

Explanation.—For the purposes of this rule, the expression "approval of the President" means prior approval in ordinary cases and ex post facto approval in special cases where sufficient time is not available for obtaining prior approval approval.

- 7. Public demonstrations in honour of Government servants.—(1) No Government servant shall encourage meetings to be held in his honour or presentation of addresses of which the main purpose is to praise him or any entertainment to be held in his honour.
- (2) Subject to the provisions of any general or special order of the Government, a Government servant may attend a fare-well entertainment of a substantially private and informal character held as a mark of regard to himself or to some other Government servant, or to a person who has recently quitted the service of Government, on the occasion of retirement from service or departure from a district or station of himself or such other Government servant or person.
- 8. Raising of funds by Government servants.—(1) Notwithstanding anything contained in rule 9, a Government servant may participate in the raising of funds in respect of approved development projects, a part of which is required to be met by local contribution, without any reference to the Government.
- (2) Subject to sub-rule (1), a Government servant shall before participating in the raising of funds, obtain prior permission of the Government except as a member of a Relief Committee which is authorised to raise funds under the Famine Code and the Famine Manual.
- (3) Participation in raising of funds with or without permission, as the case may be, as mentioned in sub-rules (1) and (2) shall be subject to the following conditions:—
 - (a) a Government servant, when associated in a committee set up for raising of funds for the purposes mentioned in sub-rules (1) and (2) shall not make any personal appeal to any individual which is likely to influence him in any way in the exercise of his public duties;
 - (b) a Government servant shall not involve himself personally in the collection of subscriptions;
 - (c) a Government servant found neglecting his official work for the sake of successful raising of funds shall render himself liable to disciplinary action;
 - any object, a condition of his exercising or refraining from exercising his powers in a particular manner;

- (e) a Government servant shall not deal with the question of sunds within office hours and it should not interfere with, of the performance of, his official duties in any way;
- (f) a Government servant shall not use coercion or pressure in funds, subscriptions and donations which is always voluntar
- (g) a Government servant taking part in the raising of funds in as with the provisions of sub-rules (1) and (2), shall be required regular accounts and submit them to his next higher officer for who may pass it on to the Government, if necessary.
- (4) Notwithstanding anything contained in this rule, no Governmer belonging to the Bangladesh Rifles, Police, Dacca Metropolitan Chittagong Metropolitan Police, Income tax and Food Department allowed to associate himself with the raising of funds for the purpose rules (1) and (2).
- 9. Subscriptions.—Subject to rule 8, no Government servant s for, accept or take part in the raising of funds for any purpose w except with or under specific order of the Government and subject to ment instructions in the matter.
- 10. Lending and borrowing.—(1) No Government servant she money to, or borrow money from, or place himself under any pecuniary to, any person within the local limits of his authority or any person with he has any official dealings:

Provided that this sub-rule shall not apply to dealings in the course of business with a joint stock company, bank or a firm of stand

- (2) When a Government servant is appointed or transferred to a such a nature that a person from whom he has borrowed money or to has otherwise placed himself under a pecuniary obligation will be shis official authority, or will reside, possess immovable property, or business within the local limits of such authority, he shall forthwith decircumstances to the Government through the usual channel.
- (3) Non-gazetted Government servants shall make the declaration to in sub-rule (2) to the head of their office.
- (4) This rule, in so far as it may be construed to relate t given to, or taken from, co-operative societies registered un Co-operative Societies Act, 1940 (Ben. Act XXI of 1949), or under for the time being in force relating to the registration of co-operative by the Government servants, shall be subject to any general or specia tions or relaxations made or permitted by the Government.
- 11. Buying and selling of valuable property, movable and imme (1) Save in the case of a transaction conducted in good faith with a dealer, a Government servant who intends to transact any purchase disposal by other means of hierable or immovable property exceeding of Taka 15,000 (Taka fifteen thousand) with a person residing, possessive vable property or carrying on business within the station, district or of limits for which such Government servant is appointed, shall declare 1 tion to the Head of the Department or the Secretary to the Government

case may be. When the Government servant concerned is himself the I of Department or Secretary to the Government, he shall declare his intention the Government through the Secretary of the Ministry concerned or the Exhishment Secretary, as the case may be. Any such declaration shall state the circumstances, the price offered or demanded and, in the case of dispotential of the method of disposal. Thereafter such Government servant shall act in accordance with such orders as may be passed by Government:

Provided that all transactions with a person who is an official subordinat the Government servant, should be reported to the next higher authority.

- (2) Notwithstanding anything contained in sub-rule (1), a Governm servant who is about to quit the station, district or other local limits for whe has been appointed may, without reference to any authority, dispose of of his movable property by circulating lists of it generally or by causing it to sold by public auction.
- 12. Construction of building etc.—No Government servant shall construction, whether intended to be used for residential or commercial purp except with the previous sanction of the Government obtained upon an applition made in this behalf disclosing the source from which the cost of sconstruction shall be mer.
- 13. Declaration of property.—(1) Every Government servant shall, at time of entering Government service, make a declaration to the Government through the usual channel, of all immovable and movable properties, include shares, certificates, securities, insurance policies and jewellery having a to value of Taka 10,000 (Taka ten thousand) or more belonging to, or held him or a member of his family and such declaration shall—
 - (a) state the district within which the property is situated,
 - (b) show separately individual items of jewellery exceeding Taka 10,0 (Taka ten thousand) in value, and
 - (c) give such further information as the Government may, by general special order, require.
- (2) Every Government servant shall submit to the Government, thror usual channel, an annual return of assets in the month of December show any increase or decrease of property as shown in the declaration under surule (1) or, as the case may be, the last annual return.
- 14. Disclosure of liquid assets.—A Government servant shall disclose liquid assets when required to do so by the Government.
- 15. Speculation and investment.—(1) No Government servant sh speculate in investments. For the purpose of this sub-rule, the habit purchase and sale of securities of notoriously fluctuating value shall be deem to be speculation in investments.
- (2) No Government servant shall make, or permit any member of his fam to make, any investment likely to embarrass or influence him in the dischar of his official duties.

- (3) No Government servant shall make any investment the valis likely to be all-cted by some event of which information is avait as a Government servant and is not equally available to the general
 - (4) If any question arises whether a security or an investmer nature referred to in any of the foregoing sub-rules the decision of ment thereon shall be final.
 - 16. Promotion and management of companies.—(1) A Government of take part in the promotion, registration or management of other company:

Provided that a Government servant may, subject to the provising general or special order of the Government, take part in the registration or management of a co-operative society registered co-operative Societies Act, 1940 (Ben. Act XXI of 1940).

17. Private trade or employment.—(I) Subject to the other price this rule, no Government servant shall, except with the previous. Government, engage in any trade or undertake any employment or than his official duties:

Provided that a non-gazetted Government servant may, wi sanction, undertake a small enterprise which absorbs family labour the does so, he shall file details of the enterprise along with the of assets.

- (2) A Government servant may undertake honorary work of a social or charitable nature and occasional work of a literary or artistic which includes publication of one or a few literary or artistic works that his official duties do not suffer thereby; but the Government making, forbid him to undertake or require him to abandon any employm in its opinion, is undesirable.
- (3) A Government servant shall not, without the previous sancti Government, permit any member of his family to engage in any traces over which such Government servant has jurisdiction.
 - (4) This rule shall not apply to sports activities and member recreation clubs.
 - 18. Insolvency and habitual indebtedness.—A Government servavoid habitual indebtedness. If a Government servant is adjudged or insolvent or if the whole of that portion of his salary which is liable ment is frequently attached for debt, has been continuously so attached period of two years, or is attached for a sum which, in ordinary circumstances which a period of two years, he shall be presumed contravened this rule unless he proves that the insolvency or indebt the result of circumstances which, with the exercise of ordinary he could not have foreseen or over which he had no control and proceeded from extravagant or dissipated habits. A Government ser applies to be or is adjudged or declared insolvent shall forthwith a insolvency to the Head of the office or Department, or to the Secreta Ministry, as the case may be, in which he is employed.

- 19. Communication of official documents or information.—A Govern servant shall not, unless generally or specially empowered by the Government in this behalf, disclose directly or indirectly to Government servants belon to other Ministries, Divisions or Departments, or to non-official persons of the Press, the contents of any official document or communicate any infortion which has come into his possession in the course of his official duties has been prepared or collected by him in the course of these duties; who from official sources or otherwise.
- 20. Approach to members of Parliament, etc.—No Government ser shall, directly or indirectly, approach any member of Parliament or any anon-official person to intervene on his behalf in any matter.
- 21. Management, etc., of newspapers or periodicals.—No Government shall, except with the previous sanction of the Government, own whor in part, or conduct or participate in editing or management of, any newspor other periodical publication.
- 22. Radio broadcasts and communication to the press.—No Governs servant shall, except with the previous sanction of the Head of the Departs or in the bona fide discharge of his duties, participate in a radio or televiproadcast or contribute any article or write any letter, either anonymously chis own name or in the name of any person, to any newspaper or periodical

Provided that such sauction shall generally be granted if such broadcas such contribution or letter is not, or may not be considered likely to jeonar the integrity of the Government servant, the security of Bangladesh or frie relations with foreign States, or to offend public order, decency or morelit to amount to contempt of Court, defamation or incitement to an offence:

Provided further that no such sanction shall be required if-

- (a) such broadcast or such contribution or letter is of a purely liter artistic or scientific character or connected with sports;
- (b) such broadcast or such participation is required to project Government activities on development works to the people by the Commissioner Divisions, Deputy Commissioners and Subdivisional Officers.
- 23. Criticism of Government and publication of information or opin upon matters relating to foreign countries.—(1) No Government servant si in any document published under his own name or in any public utterance radio broadcast or television broadcast delivered by him, make any statement fact or opinion which is capable of embarrassing—
 - (a) the relations between the Government and the people or any sec thereof, or
 - (b) the relations between the Government and any fereign country.
- (2) A Government servant, who intends to publish any document under own name or deliver any public utterance or radio broadcast or television broast containing statements in respect of which any doubt as to the application the restrictions imposed by sub-rule (1) may arise, shall submit to the Government a copy of draft of the document which he intends to publish or of utterance or of the radio broadcast or television broadcast which he intend deliver and shall not publish the document or deliver the utterance or to broadcast or television broadcast save with the sanction of the Government with such alterations, if any, as the Government may direct.

- 24. Evidence before committees.—(1) A Government servant shall no evidence before a public committee except with the previous sanction.

 Government.
- (2) No Government servant giving such evidence shall criticise the or decisions of the Government.
- (3) This rule shall not apply to evidence given before statutory comm which have power to compel attendance and the giving of answers, nor t dence given in judicial inquiries.
- 25. Taking part in politics and elections.—(1) No Government sushall take part in, subscribe in aid of or assist in anyway, any political ment in Bangladesh or relating to the affairs of Bangladesh.
- (2) No Government servant shall permit any person dependent on hi maintenance or under his care or control to take part in or in anyway assis movement or activity which is, or tends directly or indirectly to be, subvers Government as by law established in Bangladesh.
- (3) No Government servant shall canvass or otherwise interfere or u influence in connection with of take part in any election to a legislative whether in Bangladesh or elsewhere:

Provided that a Government servant who is qualified to vote at such el may exercise his right to vote; but if he does so, he shall give no indicati the manner in which he proposes to vote or has voted.

- (4) No Government servant shall permit any member of his family depe on him to act in a manner in which he himself is not permitted by su (3) to act.
- (5) A Government servant who issues an address to electors or in any manner publicly announces himself or allows himself to be publicly anno as a candidate or prospective candidate for election to a legislative body be deemed for the purpose of sub-rule (3) to take part in an election to body.
- (6) The provisions of sub-rules (3) and (5) shall, so far as may be, to elections to local authorities or bodies, save in respect of Government se required or permitted by or under any law, or order of the Government the time being in force, to be candidates at such elections.
- (7) If any question arises whether any movement or activity falls the scope of this rule, the decision of the Government thereon shall be
- 26. Propagation of sectarian creeds, etc.—No Government servant propagate such sectarian creeds or take part in such sectarian controvers indulge in such sectarian partiality and favouritism as are likely to affintegrity in the discharge of his duties or to embarrass the administratic create feelings of discontent or displeasure amongst the Governservants in particular and amongst the people in general.
- 27. Nepotism, favouritism and victimization, etc.—No Government se shall indulge in parochialism, favouritism, victimization and wilful abu effice.

28. Vindication by Government servants of their public acts or character.

(1) A Government servant may not, without the previous sanction of the Government, have recourse to any court or to the press for the vindication of his public acts or character from defamatory attacks. In granting sanction, the Government will ordinarily bear the cost of the proceedings and in other cases leave the Government servant to institute them at his own expense. In the latter case, if he obtains a decision in his favour, the Government may reimburse him to the extent of the whole or any part of the cost.

Explanation.—The power of the Government to sanction permission to Government servants to have recourse to court or press referred to in this sub-rule may be exercised by the Secretaries to the Government in the administrative Ministries and Commissioners of Divisions, as the case may be:

- (2) Nothing in this rule limits or otherwise affects the right of a Government servant to vindicate his private acts or character.
- 29. Membership of service associations.—No Government servant shall be a member, representative or officer of any association representing or purporting to represent, Government servants or any class of Government servants, unless such association satisfies the following conditions, namely:—
 - (a) Membership of the association and its office bearers shall be confined to a distinct class of Government, servants and shall be open to all Government servants of that class.
 - (b) The association shall not be in anyway connected with, or affiliated to, any association which does not, or any federation of associations which do not, satisfy conditions (a).
 - (c) The association shall not be in anyway connected with any political party or organisation, or engage in any political activity.
 - (d) The association shall not—
 - (i) issue or maintain any periodical publication except in accordance with any general or special order of the Government;
 - (ii) except with the previous sanction of the Government, publish any representation on behalf of its members, whether in the press or otherwise.
 - (e) The association shall not, in respect of any election to a legislative body or to a local authority or body, whether in Bangladesh or elsewhere—
 - (i) pay, or contribute towards, any expenses incurred in connection with his candidature for such election;
 - (ii) by any means support the candidature of any person for such election; or
 - (iii) undertake or assist in the registration of electors, or the selection of a candidate for such election.
 - (f) The association shall not—
 - (i) maintain, or contribute towards the maintenance of, any member of a legislative body, or of any member of a local authority or body, whether in Bangladesh or elsewhere;

- (ii) pay, or contribute towards, the expenses of any trad unito registered under the Industrial Relations Ordinance, 196 (Ord XXIII of 1969).
- 20. Use of political or other influence.—No Government servant sha bring, or attempt to bring, political or other outside influence, directly a indirectly, to bear on the Government or any Government servant in support of any claim arising in connection with his employment as such.
- 31. Approaching foreign Mission and aid-giving agencies.—No Governme revant shall approach, directly or indirectly, a foreign Mission in Bangladesh any foreign aid-giving agency to secure for himself invitations to visit a foreign country or to elicit offers of training facilities abroad.
- 32. Contravention of rules.—Contravention of any of these rules shall construed as misconduct within the meaning of the Government Servants (Displine and Appeal) Rules, 1976 and a Government servant found guilty of su contravention shall render himself liable to disciplinary action under the afor said rules.
- 33. Delegation of power.—The Government may, by general or spec order, delegate to any officer or authority subordinate to it all or any of powers under these rules and may, by such order, prescribe the channel through which reports shall be made to the Government and the officers, receipt whom of such reports shall be regarded as receipt of the reports by the Government within the meaning of these rules.
- 34. Rules not to be in derogation of any law, etc.—Nothing in these ru shall derogate from the provisions of any law, or of any order of any compent authority, for the time Peing in force, relating to the conduct of Governments.

23.247

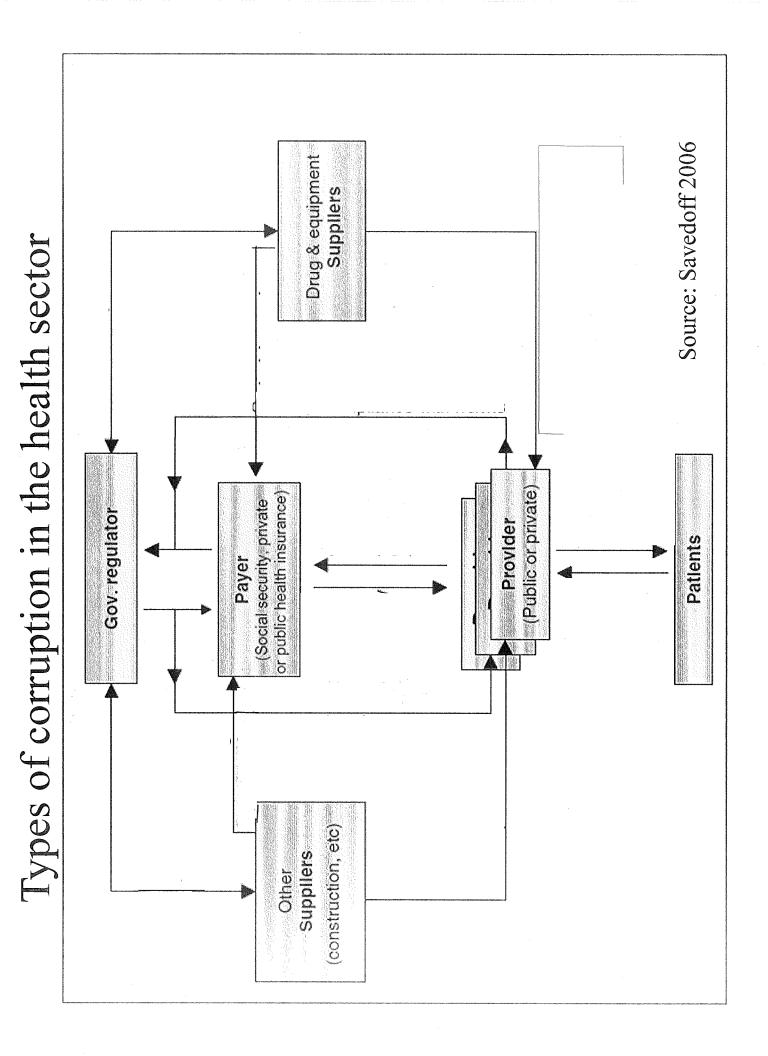
FAYEZUDDIN AHMED

Secretary.

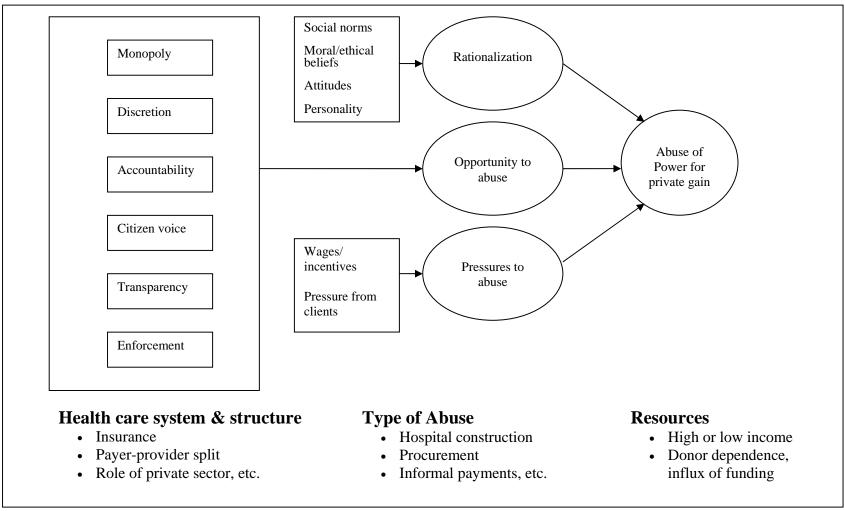
Group work on corruption in the health sector

Is it corruption?

- 1. A health officer works in the WHO country office. WHO provides her with a cell phone and airtime for work-related telephone calls. She is also on a social action committee in her community. She sometimes will use her work cell phone to make calls to organize community events.
- 2. Country A has a problem with fake medicines in pharmacies. The medicines are produced by unlicensed drug manufacturers and disguised in packaging to pass as approved products.
- 3. A private pharmacy is located very close to the District Hospital. The pharmacy is owned by the Medical Superintendent in charge of the public hospital.
- 4. A nurse accepts a bag of mangos from a patient.
- 5. A private manufacturing company submits technical specifications of its medical equipment to an official drafting the tender for a government procurement. The official incorporates these specifications into the contract.
- 6. The administrator of the World Bank Project Implementation Unit is working on the budget for the next phase of the project when his mother falls ill. Realizing that informal payments are common in the medical college hospital, he offers a payment to the surgeon who is going to operate on his mother. The surgeon refuses the payment, stating that it is unnecessary. The mother has the surgery and recovers fully. A few months later, the surgeon appears in the World Bank Project offices and asks if the budget can provide him with a vehicle. The administrator adjusts the budget to add this request.
- 7. A workshop facilitator offers to give candy to participants if 100% of the class contributes to class discussion.



Framework of Corruption in the Health Sector



Source: Vian, T. Review of corruption in the health sector: Theory, methods, and interventions. Health Policy and Planning. 2008; 23: 83-94.

Polio Eradication

A government polio eradication campaign is being launched in Country B, with support from WHO. The campaign depends on campaign workers as local guides and vaccinators. Supervisors are hired and paid \$25/day to recruit the campaign workers, explain their tasks and train them, make sure the campaign workers have adequate supplies and know where to go, and keep records of work done.

The supervisor is responsible for reporting work completed and paying campaign workers. After carrying out a needs assessment and looking at population catchment areas, the campaign has divided districts into communities. In each community area, 10 campaign workers will need to be engaged, and each will need to work for 10 days at \$10/day to complete the immunization campaign.

Maya Santos was hired as a supervisor for Area A. She underwent a one-day supervisor training and learned the requirements of the campaign.

Maya thinks she should be paid better so she decides to hire fewer workers, send them to fewer villages, and keep more of the money for herself. She turns in forms stating that 10 campaign workers worked 10 days at \$10/day. The campaign gives her \$1,000 to pay the campaign workers but after paying them, she ends up keeping almost half of the money for herself.

Ouestions:

Analyze the vulnerabilities to corruption in the polio eradication campaign. What is the cost of the corruption?

What strategies might be employed to prevent this type of corruption in the future?

Interventions to Reduce Absence Rates in Schools and Primary Health Centers

Intervention 1: Seva Mandir. Seva Mandir runs non-formal primary education centers in tribal villages in Udaipur District, Rajasthan, India, a sparsely populated. It is difficult for Seva Mandir to regularly monitor the teachers, and absence rates are very high (44% in August 2003). When the teacher is absent, children go home and miss the whole day.

The intervention was conducted in 60 "treatment" and 60 "control" schools. In the treatment schools, Seva Mandir gave each teacher a camera. Teachers were instructed to take a picture of him/herself and the students every day at opening time and at closing time. The cameras had a tamper-proof date and time function. Seva Mandir received pictures twice a day for each school that was open on that day. Teachers received a bonus for the number of valid days they attended. A "valid" day was defined as a day when the opening and closing pictures were separated by five hours and a minimum number of children were present in both pictures. A teacher received a salary of Rs 1,000 if they were present at least 21 days/month. Each additional valid day carried a bonus of Rs 50 (\$6), up to a maximum of Rs 1,300 per month. Each day missed relative to the 21 days benchmark carried a penalty of Rs 50. A teacher's monthly salary could range from Rs 500 to Rs 1,300. In the control schools, teachers were paid Rs 1,000 and were told (as usual) that they could be dismissed for poor performance. There was also one unannounced visit every month to measure teacher absences in the control schools.

Intervention 2: Rajasthan Health Clinics. In government health clinics in Rajasthan, India, a community member was paid to check once a week, on unannounced days, whether the auxiliary nurse-midwife was present in the clinic or in the village. Villagers were allowed to choose how they would use the monitoring information they were generating. It was thought that villagers might choose to put explicit pressure on the nurse-midwife or try to shame her by exposing her absences, or promise an explicit reward. The weekly local monitoring system was put in place in 143 randomly selected clinics for eight months. Then, for the next four months, attendance was measured by external monitors carrying out monthly checks in a randomly chosen sample of 80 comparison health centers in addition to the treatment centers. Local monitoring continued in treatment centers during the four additional months.

Intervention 3: ICS Africa IV "Incentives to Learn" ICS Africa worked with 127 schools, half of which were assigned to be "treatment" schools and half of which were control schools. In the "treatment" schools, students were eligible for an "Incentives to Learn" scholarship program. ICS paid for scholarships which were given to the highest-scoring 15% of grade 6 girls enrolled in program schools, based on official district tests. The scholarship paid school fees for next two years, a cash payment for school supplies, and offered public recognition at an awards ceremony.

¹ These descriptions are taken from Banerjee and Duflo, "Addressing Absence" (mimeo, MIT Poverty Action Lab, Cambridge MA), p. 6-10.

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Interventions to Reduce Absence Rates: Worksheet

Handout 5

Handout 5			G
Strategy	Strategy 1 Seva Mandir (NGO in Udaipur District, Rajasthan, India)	Strategy 2 Rajasthan Health Clinics	Strategy 3 ICS Africa – Strategy IV "Learn Incentives"
What type of strategy? (Hierarchical control, beneficiary control, or demand-side)			
What incentive?			
What			
What do you think happened to absence rates and other indicators targeted by program?			
What unintended effects might you expect or other concerns would you have about this program?			

Interventions to Reduce Absence Rates: Answer Sheet

Handout 6

Handout 6 Strategy	Strategy 1	Strategy 2	Strategy 3
	Seva Mandir (NGO in Udaipur District, Rajasthan, India)	Rajasthan Health Clinics	ICS Africa – Strategy IV "Learn Incentives"
What type of strategy? (Hierarchical control, beneficiary control, or demand-side)	hierarchical control	beneficiary control	demand side intervention
What incentive?	Reward: salary based on minimum of 21 days attendance. Extra days paid Rs 50 (\$6/day). Punishment: each day below the min. of 21, pay is reduced by Rs 50.	None specified. The villagers could choose how to use the monitoring information, i.e. put explicit pressure on nurse-midwife, use shame	Scholarships for top 15% of students on standardized tests in Grade 6.
What do you think happened to absence rates and other indicators targeted by program?	Absence rates cut in half in treatment schools (from 36% to 18%). Eliminated extremely delinquent behavior (<50% attendance). Increased # teachers with perfect attendance. Treatment schools had 88 children-days more per mo. (1/3 increase)	Absence rates were almost exactly the same in treatment facilities (44%) and in control facilities (42%).	Absence rates were a third lower in Rx schools. Possibly teachers' intrinsic motivation boosted by students eager to learn. Teachers had higher status if students won scholarships. Parents may have taken teacher absence more seriously.
What unintended effects might you expect or other concerns would you have about this program	Acceptability of cameras (in this case, was high) Willingness of administration to continue implementing, in face of resistance by teachers or health providers. Cost-effectiveness. Avg salary in treatment schools was same as in controls, yet 1/3 more child-days of education. Cost = \$6/child/year	Not cost-effective, because no measurable effect.	Cost effectiveness is not clear. Had some effect.
Lessons learned	A straightforward incentive program, mechanically implemented, is very effective in reducing absenteeism. Shows the power of a clearly defined task, simple incentives, and systematic implementation.	Community monitoring does not work if community lacks formal authority to reward or punish provider. Providers knew this, and so did not care.	Provides evidence that all children benefit from the pressure exerted by the families of children who were directly eligible for this program.

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Exercise on Informal Payments

Instructions: Read each quote and check the category that most closely fits. Use the "comments" box to note where you think there may be an additional motivation for informal payment.

Quote from community members / patients	Explanations or motivations for informal payments			Comments	
	Contribution	Additional	Abuse of	Gift	
	to care	Services	power		
The timing of the informal payment influences the quality and speeds up the service.					
The doctor needs to feed himself.					
You need to send food or other products to the doctor's					
house because he says that this way you can receive					
better service.					
Nurses don't clean your wound if you don't pay them					
The nurses do not ask for money but they work harder					
than the doctors. Why should one not give her					
something, too, when one gives to the doctor?					
At times, the sick persons make informal payments					
because they fear that the nurses instead of injecting					
medicine would inject water to them.					
There have been cases in which doctors say that a					
pregnant woman needs to be operated even though that					
is not true.					
We are really happy when the baby is a boy, and it is					
because of this feeling that we give money to the person					
who makes the announcement.					

Counterfeit Medicines in Nigeria

Questions to Consider while Reading This Case

Imagine that you are a friend of Dora Akunyili. What would you advise her about where to start and where to focus her efforts as the new director of NAFDAC? How can she make a difference in controlling counterfeit medicines in Nigeria? What strategies should she follow? What assets does she have, and how could she take advantage of them?

Case Study

Many low- and middle-income countries confront problems related to the quality of medicines. Key challenges include counterfeit, substandard, and illegal products:

- Counterfeit products are defined as those whose packaging deliberately misstates what the package contains. This category is commonly called "fake drugs," which are produced to resemble existing products.
- Substandard medicines are products that do not meet quality standards because they contain the wrong amount of the active ingredient(s), as a result of poor manufacturing practices or deterioration after manufacturing.
- Illegal products are those sold contrary to laws and regulations. They include products imported without a license and ones sold by unlicensed sellers, at illegal prices, or contrary to prescription requirements.

These problems exist to different degrees, and they can intersect. The supply of counterfeit drugs often involves significant criminal activity. Some non-counterfeit supplies are substandard. And many transactions, particularly in the private market, do not conform to legal requirements.

In low-income countries, where many people are poor but are believers in the power of pharmaceuticals, an enormous demand exists for inexpensive medicines. In such situations, there are huge profits to be made from counterfeit medicines. Politicians and judges may be willing to protect violators for a price. Uncontrolled borders and widespread skepticism about the capacity of the state to implement policy and enforce laws complicate the issue.

Substandard or counterfeit medicines in the marketplace create many problems. Medicines with inappropriate or insufficient ingredients will not produce the desired health gains and can contribute to increasing antimicrobial resistance. Illegal retail transactions—especially sales by untrained and unlicensed sellers—can contribute to misuse and poor health outcomes. In addition, consumers who are defrauded (or who suspect that they are being defrauded) are likely to be dissatisfied and to blame the government. Ironically, they may decide to buy higher-priced products to avoid substandard quality, and end up with counterfeit branded products for their trouble.

Such was the situation that Professor Dora Akunyili confronted in Nigeria in 2001, when President Olusegun Obasanjo appointed her to head the Nigerian National Agency for Food and Drug Administration and Control.

Developments in Nigeria

With about 150 million people, Nigeria is diverse in cultures, languages, and religions. Since gaining independence from England in 1960, Nigeria has been dominated by a series of military governments, mainly controlled by conservative northern Islamic elements. In response, much authority has been delegated to the sub-national level, and the country now consists of more than 35 states, all with significant governing authority.

The military ruler from 1976 to 1979 was a British-trained general named Olusegun Obasanjo who took over when dictator General Murtala Mohammed was assassinated. Obasanjo kept a promise for transition to civilian control, however the civilian president who was subsequently elected was widely perceived as incompetent and corrupt and was ousted in a coup in 1985. Successive military administrations squandered, stole, and mismanaged the country's resources. Nigeria is widely viewed as deeply troubled by corruption, and it has continued to experience internal turmoil.

General Sani Abacha, a dictator who took power in 1993, imprisoned Obasanjo for speaking out against human rights violations. Obasanjo was released from prison on the death of Abacha in 1998. Abacha's successor held elections and Obasanjo won 63 percent of the vote, carrying the north and southeast but doing poorly in the southwest.

Obasanjo recognized that he needed to improve Nigeria's international image to restore the country's standing in the global community. Focusing on reforms in social and economic sectors, President Obasanjo recognized that it was critical to address the counterfeit medicines problem. Fake and substandard medicines, mainly imported from India and China but also locally produced, were flooding the Nigerian market.

To do that, Obasanjo had to deal with major challenges in the operation of the National Agency for Food and Drug Administration and Control (NAFDAC). NAFDAC was a relatively new, small agency that was widely considered corrupt. Its poorly motivated workforce functioned without adequate supervision or incentives. Obasanjo knew that he needed an honest and dynamic leader to head NAFDAC if he was to make any progress on this problem. According to some, he also preferred to appoint a woman.

Obasanjo Chooses Akunyili

In early 2001, President Obasanjo approached Akunyili about heading NAFDAC. She had been recommended as someone with a reputation for honesty who could clean up NAFDAC and the national pharmaceutical market. Akunyili was a pharmacy lecturer at the University of Nigeria, Nsukka, and had also worked for Nigeria's Petroleum Trust Fund which distributed government oil revenue for infrastructure projects. While serving in the latter position, Akunyili had received \$23,000 from her employer for surgery out of

the country. When she discovered that the surgery was not needed, she returned the funds (despite the willingness of her European doctor to write off the amount as spent). It was an act that many Nigerians viewed as extraordinary.

Akunyili's family had also directly experienced the damaging effects of counterfeit medicines: her younger sister, a diabetic, died in 1988 after receiving fake insulin. In early 2001, Akunyili received a phone call from President Obasanjo. She went to meet the president and was subsequently offered the job of director-general of NAFDAC. The president said he wanted her to clean up the counterfeit medicines in the Nigerian market, make the regulatory agency work effectively, and bring Nigeria's food and drug industries up to international standards.

The Problems Akunyili Faced

NAFDAC had been established by Decree No. 15 of 1993 to perform several functions:

- Regulate the import, export, manufacture, advertisement, distribution, sale, and use of food, drugs, cosmetics, medical devices, bottled water, and chemicals.
- Conduct appropriate tests and ensure compliance with quality standards for foods, drugs, and so forth, as well as their raw materials.
- Undertake investigations into premises producing foods and drugs and establish quality assurance systems, including certification of the production sites.

NAFDAC was empowered to compile standards, specifications, regulations, and guidelines; undertake the registration and inspection of food and drugs; and establish and maintain laboratories and other needed institutions.

In 2001, the agency confronted a very difficult situation. Because of unfair competition and rampant corruption, many multinational companies had left Nigeria despite the attractiveness of the large national market. Most genuine drugs were very expensive, driving people to cheaper options including counterfeits. High prices and high demand created incentives for criminal elements to produce and import counterfeit products. Studies estimated that 48-80% of medicines were counterfeit in Nigeria before 2001.

Nigeria's medicine production and distribution system made it particularly difficult for regulatory authorities to carry out their duties. The retail system included licensed pharmacies as well as non-pharmacists who held licenses as medicine vendors. Moreover, larger cities had thriving drug markets, chaotic collections of stalls and sellers often dependent on a small number of wholesalers some of whom had criminal connections. These drug markets were patronized by consumers but also by physicians, hospitals, and pharmacies to purchase their pharmaceutical and medical supplies.

Total product volume ran into tens of millions of dollars. Commonly prescribed medicines, such as analgesics and antibiotics, were openly hawked and sold by petty traders in kiosks, in motor parks, and by the roadside. Drugs were also sold by any number of private and public clinics and hospitals. Above the retail level were a variety

of importers, wholesalers, and local pharmaceutical manufacturers. Because of quality concerns, Nigerian drugs were often unwelcome in other African countries. Despite growth in the global pharmaceutical industry, no company had set up a plant to manufacture active pharmaceutical ingredients in Nigeria. All raw materials were imported from abroad (mainly from India and China), so that the production taking place in Nigeria was only formulation.

But although imports accounted for 70% of the country's medicines consumption, products imported into Nigeria were not necessarily reliable. Some products being imported were marked "For Export Only." Those labels raised questions about lower quality standards for exports in the exporting country. Moreover, import control was difficult because of Nigeria's long borders and many small ports. Creative concealment methods were routinely employed by the importers of counterfeit medicines.

The penalties for importing, producing, or distributing counterfeit medicines in Nigeria were too light to be much of a deterrent—imprisonment for between three months and five years or a fine of up to US\$3,600. Moreover, enforcement was lax. Government employees were poorly paid and supervised, and drug counterfeiters regularly resorted to bribery, intimidation, harassment, blackmail, threats, and physical attacks on regulators. Growing sophistication by counterfeiters in copying packaging made it increasingly difficult for everyone—customers, enforcers, and pharmacists—to tell the difference between real and counterfeit merchandise.

Original case study by Eric O. Moore, Michael R. Reich and Marc J. Roberts, *Pharmaceutical Reform: A Guide to Improving Performance and Equity*, p. 267-272. This version has been edited to shorten length.

Reflections on the Case of Counterfeit Medicines in Nigeria

Professor Akunyili's most important asset in taking on this difficult job was her support from and access to the President. He was a newly elected ex general trying to establish his credibility with the population. Making progress on an important issue such as fake drugs was one way for him to do that.

In addition, Akunyili's technical expertise and well-deserved reputation for integrity served her well when she approached reorganizing NAFDAC, enabling her to attract staff interested in working in a high-profile and non corrupt environment. She also had a talent for public relations and was comfortable using the media to advance her program (and herself).

NAFDAC needed to make many internal changes to meet its broad range of responsibilities: to simplify rules, develop better testing capacity, and strengthen inspection and enforcement efforts. Moreover, to complement increased enforcement activities, "Professor Dora," as she was widely known, needed to rally public support. The police, the judiciary, and local political elites were not reliable allies. An aroused public was a potentially critical source of pressure to get them to cooperate.

Legitimate drug manufacturers and sellers (such as firms whose products were being counterfeited) might also become a source of some support.

How might she go about engaging the private sector?

Engaging in high-profile actions that attracted media attention was one possible approach. But any grandstanding had to go hand-in-hand with real improvements if gains were to be sustained. Moreover, both the retail sellers of counterfeit medicines and the criminal gangs that controlled much of the business could be expected to use whatever resources they possessed (from political pressure to bribery to violence) to oppose NAFDAC's efforts. Because this case occurred some years ago, we are able to review what NAFDAC did under Akunyili's leadership.

NAFDAC Initiatives against Counterfeiting

While Professor Akunyili headed NAFDAC, the agency implemented a number of initiatives (Akunyili 2006):

- A national public awareness campaign. The agency explained the counterfeit medicines problem in numerous newspaper and radio advertisements. An intensive media campaign communicated the message that all legitimate products (domestic and imported) had to have a NAFDAC registration number on the packaging.
- Seizure and destruction of counterfeit goods. From 2001 to July 2005, over 1,000 raids were carried out on drug hawkers, distributers, and transporters. Efforts were made to trace the counterfeit supply chain by pressuring hawkers for information on suppliers and warehouse owners who were their sources. Every few weeks, NAFDAC made a widely publicized show of burning large stocks of confiscated fake medicines, destroying hundreds of millions of dollars in counterfeit supplies.

- Closure of major drug markets. The three largest retail drug markets—the source of much of the fake drug supply—were closed for periods of three to six months (including the nation's largest, Onitsha drug market in Anambra state). Associated clinics that provided fraudulent treatment and warehouses used to store the material were also closed.
- Import controls at the source. NAFDAC employees inspected factories in India, China, and Egypt to ensure good manufacturing practice (GMP) compliance and to recertify drugs before they were exported to Nigeria. Nigerian banks cooperated by insisting on NAFDAC clearance before processing financial documents for medicine importers.
- Increased surveillance at ports of entry. The government restricted medicines imports to two designated airports and two seaports, facilitating increased surveillance of imports. To foster compliance, NAFDAC guidelines specified that aircraft carrying medicines into Nigeria without NAFDAC authorization could be impounded.
- Streamlining and enforcing registration guidelines. The requirement that medicines comply with laboratory standards and inspection requirements before being registered was more consistently enforced. Sanctions on noncompliant manufacturers and importers increased steadily, from 2,226 such actions in 2002, to 4,132 in 2005.
- *Increasing international awareness*. To help mobilize cooperation by foreign governments, including exporting countries, Akunyili spoke at many international conferences to promote awareness about Nigeria's efforts to control counterfeit medicines.

Restructuring NAFDAC

- Staff reorientation and motivation. A major effort was made to identify and remove corrupt and ineffective staff. Promotion practices were changed and opportunities for foreign training were introduced to motivate workers and reward good performance.
- *Restructuring*. Two new directorates, Ports Inspection and Enforcement, were created to focus those efforts. Procedures and practices were changed to foster delegation and eliminate bureaucratic bottlenecks.
- *Increased capacity*. Ten new state offices were established, and the existing 27 offices were strengthened to cover Nigeria's 36 states and Federal Capital Territory. Three special inspectorate offices were established in the three towns with the biggest medicine markets.
- Laboratory modernization. Laboratories were refurbished and two additional ones were built. Standard operating procedures and guidelines were developed, and processes were automated.

Challenges

Despite these changes and initiatives, many challenges remained for NAFDAC:

- *Staffing*. NAFDAC continued to have difficulty obtaining the money and manpower it needed to carry out its many responsibilities.
- Bureaucratic rivalry. Nigerian Customs was not receptive to the newly created Directorate of Ports Inspection, which it viewed as intruding into its sphere of operations.
- *Corruption*. Drug counterfeiters continued to bribe customs officials, police, and members of the judiciary to escape prosecution. As of 2010, only about 50 cases had been brought under the anti-counterfeit legislation that was passed in 1999.
- *Violent resistance*. NAFDAC's laboratory in Lagos was vandalized, and in March 2004, NAFDAC facilities across the country were burned. Several attempts were made on Akunyili's life.
- *Smuggling*. With NAFDAC unable to cover all the small ports and overland routes into Nigeria, smuggling became an ever-increasing problem.
- Quality problems. As of 2005, NAFDAC claimed that the incidence of counterfeit medicines had been reduced by over 80 percent compared to the situation in 2001. However, in a 2008 study of 144 samples of essential medicines purchased in Lagos-area private pharmacies 18 percent failed basic drug quality tests. Although the sample size is small (and biased toward more reliable sellers), the study suggests that quality problems remain in the Nigerian medicine market (Bate et al. 2009).
- Consumer attitudes. Nigerians continued to be concerned about medicines quality. Some questioned whether the highly public burning of fake drugs really solved the problem and whether the progress made by NAFDAC could be sustained.
- Reopening of urban drug markets. The major urban drug markets all reopened with only limited regulation and remained a focus for the supply of counterfeit medicines.

Recent Developments

- The sales ban on drugs made in Nigeria has been lifted by neighboring West African countries, and drugs made in or imported through Nigeria are now common throughout the region. Sixteen new drug manufacturing companies were established between 2002 and 2005.
- In 2008–09, contaminated medicine killed more than 84 children in Nigeria between the ages of four months and two years. A "teething mixture" called My Pikin (Oghenerhaboke 2008) was contaminated by diethylene glycol that was sold by an unlicensed chemical dealer in Lagos to the manufacturer.
- In late 2008, Akunyili completed her tenure as the director-general of NAFDAC and began serving as minister for information in the cabinet of President Umar Yar'Adua.
- Dr. Paul B. Orhii was appointed the new director-general of NAFDAC in January 2009. A United States—based lawyer, physician, and pharmacologist, Orhii was a specialist in pharmaceutical litigation. *How useful do you think his expertise in pharmaceutical lawsuits will be?*

- In May 2009, NAFDAC confiscated a large shipment of counterfeit antimalarials from China with "Made in India" labels. The packaging was very sophisticated, but laboratory analysis showed no active ingredients.
- In August 2009, NAFDAC announced that it would open offices in Indian cities that are prominent centers for pharmaceutical production to enhance surveillance and regulation of medicine imports.

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List of Participants

Strengthening integrity and transparency in the education and health sectors of Bangladesh March 31 – April 2, 2014

	Ref#	Organization		Name	Designation
Invitees					
DONORS					
1	1	UKaid	Mr	David Grey	Governance Advisor
2	2	UKaid	Ms	Tayo Nwaubani	Senior programme management Human Development (health and education)
3	3	GIZ	Mr	Tim Pfannmueller	Senior Advisor, Corruption Prevention
4	4	GIZ	Mr	Vinay Kumar Jha	Field coordinator Corruption Prevention Project
5	5	FATD Canada	Ms	Meaghan Byers	First Secretary
6	6	FATD Canada	Mr	Deidre Yukich	Analyst
7	9	Embassy of Sweden	Mr	Reazul Islam	Controller
8	10	Embassy of Sweden	Mr	Franck Rasmussen	Programme Officer
9	11	Embassy of Sweden	Mr	Zahirul islam	Programme Officer
10	12	Embassy of Sweden	Ms	Monica Malakar	Senior Programme Officer
11	13	Embassy of Sweden	Ms	Ylva Sörman Nath	Counsellor
12	14	World Bank	Ms	Ayesha Vawda	Senior Education Specialist
13	15	World Bank	Mr	Hasib Ehsan Chowdhury	Operation Analyst
14	16	ADB	Mr	Rudi Van Dael	Senior Social Sector Specialist
GOB					
1	17	Anti-Corruption C	Mr	Dr Shamsul Arefin	Director Prevention
2	18	Anti-Corruption C	Mr	Golam Rabbani	Director (Legal)
3	20	C&AG	Ms	Rownak Taslima	Assistant Comptroller and Auditor General
4	21	FAPAD	Mr	MD. Khademul Karim Iqbal	Deputy Director
5	23	LGED	Mr	M Azizul Hoque	Superintend Engrr
6	24	DPE	Mr	Md. Emamul Islam	Deputy Director (Procurement)

7	25	NAPE	Mr	AKM Monirul Hasan	Assistant Specialist
8	26	NCTB	Mr	Md. Murshid Aktar	Research Officer
0	20	NCIB	IVII	IVIU. IVIUISIIIU ARtai	
9	27	MoHFW	Mr	Mohammad Al Amin	Deputy Chief
10	29	DGHS	Mr	Shekh Md. Nazim Uddin Linkon	IT Consultant, Management Information System (MIS)
11	30	MoHFW	Mr	Miah Faridy	Senior Assistant Chief, Planning wing, Health wing, Planning Commission
12	31	MoHFW	Mr	Dr. Farid Uddin Ahmed,	Asst. Director (Services) from MCH-S uni
Civil Society & Media Organization					
1	32	TIB	Mr	Shahzada M Akram	Senior Program Manager,Research & Policy
2	33	TIB	Ms	Fojila Khanom	Senior Programme Manager, Civic Engagement
3	35	CAMPE	Mr	K M Enamul Hoque	Deputy Director
4	45	CAMPE	Mr	Sk. Azizur Rahman	Audit Officer
5	36	Manab Unnayan Kendra (MUK)	Mr	Asaduzzaman Selim	Chief Executive
6	37	Ashroy Foundation	Ms	Momotaz Khatun	Executive Director
7	38	BRAC	Ms	Riful Jannat	Senior Programme Manager, Education
8	41	icddr,b	Dr	Simba Mandizvidza	CFO
1	41	ММС	Mr	Arshad Hossain	Chief of Operations
2	42	MRDI	Mr	Siddiqui Md. Shahid Hossain	Adivser, Planning and Development
3	44	Manusher Jonno Foundation (MJF)	Mr	Md. Arif Hossen Khan	Program manager and Focal person for the program on Ensuring Responsive public Institutions
Trainers					
1		Boston University	Mr	Taryn Vian	Associate Professor of International Health, Boston University School of Public Health
2		IIEP-UNESCO	Ms	Muriel Poisson	Programme Specialist, International Institute for Education Planning
3		IIEP-UNESCO	Mr	Jacques Hallak	International consultant and Former Director, International Institute for Education Planning
4		U4	Ms	Aranzazu Guillan Montero	Program Advisor, U4 Anti-Corruption Resource Centre
5		U4	Mr	Jesper Johnsøn	Senior Program Advisor, U4 Anti- Corruption Resource Centre
6		Sida	Ms	Maja Edfast	
Speakers					

1		Transparency International Bangladesh.	Mr	Mohammad Rafiqul Hassan	Director, Research and Policy
2		Transparency International Bangladesh.	Mr	S. M. Rezwan-ul- Alam	Director, Outreach and Communication
3		ANSA SAR	Ms	Nuzhat Jabin	Coordinator - Operations and Resource Mobilization
4				Speaker 1	
5				Speaker 2	
6		Embassy of Sweden	HE	Anneli Lindahl Kenny	Ambassador
Logistics					
1	45	Embassy of Sweden		Nafeesa Matin	Admin
50					Grand Total