

Effectiveness of Local Administrative Coordination in Delivering Social Safety Net Benefits in Bangladesh

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Abstract: Social Safety Net (SSN) programmes are central to poverty reduction, income security, human capital development, and social inclusion in Bangladesh. However, targeting errors, administrative fragmentation, delayed benefit delivery, weak accountability, and limited inter-agency coordination continue to constrain programme effectiveness. This study assessed the influence of local administrative coordination on SSN benefit delivery in Bangladesh. A mixed-method research design was adopted. Data were collected through a questionnaire-based survey conducted from January to March 2026 among 240 respondents from eight Upazilas in eight districts, covering all eight administrative divisions and representing coastal, haor, Barind, and plain-land contexts. The survey was complemented by key informant interviews, focus group discussions, and field observations. Data were analysed using descriptive statistics, correlation, regression, and paired-sample t-tests. The findings indicated that the enhancement of coordination between Upazila administration, Union Parishad and line departments had a significant impact on the delivery of the SSN. There were statistically significant differences between mean scores of overall effectiveness before and after the coordination improvements ($p < 0.05$) (from 13.39 to 16.08 respectively). There was also an improvement observed in the timeliness of benefits delivery (13.25-15.10), the efficiency of the procedures (13.07-15.13), the accessibility of the services (12.19-14.29) and the satisfaction of the beneficiaries (13.33-15.49). Other improvements included better transparency, more equitable benefits distribution, better resource use and grievance redress mechanisms. Multiple regression showed that the variance in the effectiveness of SSN could be explained by 59.9% ($R^2 = 0.599$) by the variables involved in the coordination process, which were most strongly influenced by staff motivation, operational collaboration, staff capacity and administrative neutrality. The study concludes that effective local administrative coordination, supported by digital integration, participatory governance, responsive leadership, and regular inter-agency communication, substantially enhances efficient, transparent, equitable, and responsive SSN delivery in Bangladesh.

Keywords: Social Safety Net; Local Administrative & Coordination.

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I. INTRODUCTION

Social Safety Net (SSN) programmes constitute a central pillar of Bangladesh's development strategy by protecting vulnerable households, stabilizing consumption, supporting human capital formation, and promoting social inclusion. The country's social protection system has gradually evolved from post-disaster relief and food-based

assistance into a broader, lifecycle-oriented framework. The National Social Security Strategy (NSSS) formalized this transition by emphasizing programme consolidation, improved targeting, digital government-to-person payments, and stronger institutional coordination [1]. While Bangladesh has made significant strides in reducing poverty, the Household Income and Expenditure Survey 2022 shows that there is still a persistent regional and population distribution

of poverty and vulnerability [2]. Pursuant to this ongoing policy focus, the government spent BDT 1,16,731 crore on social protection in FY 2025–26 [3].

SSN programmes help to reduce poverty, improve food security, education, health, resilience, and protection from lifecycle and climate risks [4]. Additionally, digital cash-transfer reforms have boosted payment traceability and minimised reliance on manual cash distribution mechanisms [5]. However, evidence from elsewhere shows that a programme's level of coverage does not necessarily lead to effective social protection, as does proper financing, institutional capacity, delivery systems and governance accountability [6]. The requirements are relevant especially in Bangladesh where many programmes are managed by diverse ministries, and implemented at various levels of central and local administration.

Some issues that have been reported in previous studies are persistent inclusion/exclusion errors, lack of coverage, gaps in information, administrative delays, and poor coordination among implementing institutions [7], [8]. Governance evaluations have also identified issues with monitoring, attendance, project selection, accountability and implementation integrity among particular safety-net programmes [9]. These restrictions might leave eligible families without benefits and resources available for the ineligible families. The problem is especially significant at the local level, where beneficiary identification, verification, approval, fund administration, payment facilitation, monitoring, and grievance handling require coordinated action by Union Parishads, Upazila administrations, line departments, financial institutions, and digital service providers.

Social protection is increasingly understood as a transformative development instrument rather than a residual welfare intervention [10]. Accordingly, Bangladesh's modernization initiatives have sought to strengthen beneficiary databases, administrative processes, electronic payments, and programme management [11], [12]. However, limited empirical research has measured how local administrative coordination affects the timeliness, accessibility, transparency, equity, responsiveness, and overall effectiveness of SSN benefit delivery across diverse administrative and ecological settings.

Therefore, this study examines the effectiveness of coordination among Union Parishads, Upazila administrations, and relevant line departments in delivering SSN benefits in Bangladesh. It specifically looks at the role of operational collaboration, staff capacity and motivation, administrative neutrality, digital integration, participatory governance, monitoring and accountability on programme performance. The study offers evidence for the need to strengthen local governance arrangements and the creation of a more equitable, transparent and responsive and sustainable social protection delivery system.

II. MATERIALS AND METHODS

The study has been completed from 1st January to 31st March 2026 to evaluate the effectiveness of local administrative coordination in delivering Social Safety Net (SSN) benefit in Bangladesh. The research design was quantitatively dominant explanatory mixed-method, which was used to include survey results and qualitative evidence [13] – [15]. The study was conducted in a sample of eight Upazilas in each of eight districts of the eight administrative divisions, comprising coastal, haor, Barind, char and agricultural plain-land areas.

The quantitative sample consisted of 240 beneficiaries of the SSN. To ensure geographical and socio-economic diversity, stratified and purposive sampling methods were adopted, and to ensure selection of participants with relevant institutional knowledge [16]. Local administrative coordination was considered as the independent construct and assessed by 15 indicators, which encompassed coordinative meetings, information sharing, clarity of roles, inter-departmental cooperation, institutional capacity, staff motivation, administrative neutrality, digital integration, leadership, transparency and resources management, monitoring, accountability and participatory governance.. SSN delivery effectiveness was treated as the dependent construct and measured through 10 indicators, including timeliness, procedural efficiency, accessibility, beneficiary satisfaction, transparency, equity, resource utilization, responsiveness, grievance redress, and overall effectiveness. Responses were recorded on a five-point Likert scale [17].

Primary data were collected through face-to-face interviews using a structured questionnaire. The survey was supplemented by 16 key informant interviews, eight focus group discussions, field observations, and institutional document reviews. Quantitative data were coded, cleaned, and analysed using Microsoft Excel and SPSS. Descriptive statistics, Pearson's correlation, multiple regression, paired-sample t-tests, and, where applicable, path-coefficient analysis were employed. The regression model estimated the combined contribution of all coordination indicators to SSN delivery effectiveness. Statistical significance was assessed at the 5% level [18].

Qualitative data were coded and analysed thematically. Findings from surveys, interviews, discussions, observations, and documents were integrated through triangulation [15], [19], [20]. Reliability was assessed using Cronbach's alpha [21]. Participation was voluntary, informed consent was obtained, and respondents' anonymity, confidentiality, and privacy were maintained.

III. RESULT AND DISCUSSION

The possible range, observed range, mean, standard deviation (SD) and co-efficient of variation (CV%) of 15 selected characteristics namely Coordination Meetings Effectiveness, Inter-Departmental Information Sharing, Administrative mandates, guidelines, task division, and accountability mechanism, Operational Collaboration, Staff

Capacity, Digital Integration and MIS Efficiency, Public Transparency Framework, Participatory Governance, Resource and Logistical Support, Leadership Responsiveness, Local Implementation Autonomy, Administrative Neutrality, Vertical Communication and Monitoring and Evaluation Use of the SSN as perceived by

the beneficiaries in the present study have been presented in Table 1. Most of the SSN implementation characteristics showed mean values above 14.0, indicating a generally positive perception, with relatively low CV (<15%) for the majority of the characteristics, implying homogeneity in beneficiary perception.

Table 3 Descriptive Statistics of Selected Respondent Characteristics

Characteristics	unit	Possible range	Observed range	Mean	SD	CV
Coordination Meetings Effectiveness	Score	1-20	12-15	19.24	2.53	13.14
Inter-Departmental Information Sharing	Score	1-20	7-15	12.40	1.13	9.15
Administrative mandates, guidelines, task division, and accountability mechanism	Score	1-20	10-20	16.07	3.16	19.66
Operational Collaboration	Score	1-20	8-20	15.99	1.86	11.61
Staff Capacity	Score	1-20	5-20	13.22	3.29	24.90
Digital Integration and MIS Efficiency	Score	1-20	6-20	14.75	2.83	19.15
Public Transparency Framework	Score	1-20	9-20	15.71	2.01	12.82
Participatory Governance	Score	1-20	0-20	16.05	2.05	12.77
Resource and Logistical Support	Score	1-20	4-20	11.02	3.38	30.68
Leadership Responsiveness	Score	1-20	10-20	15.99	1.47	9.18
Local Implementation Autonomy	Score	1-20	10-20	15.24	1.74	11.39
Administrative Neutrality	Score	1-20	4-19	12.84	3.08	24.01
Vertical Communication	Score	1-20	11-20	16.20	1.52	9.37
Monitoring and Evaluation Use	Score	1-20	11-20	15.95	1.54	9.68
Staff Motivation and Incentives	Score	1-20	9-20	15.51	2.38	15.34

Data contained in Table 2 indicate that about three-fourths (75.42 %) of the beneficiaries perceived regular, well-structured and procedurally effective coordination, compared to 19.58 % perceiving moderately structured but inconsistent coordination and only 5% perceiving irregular and structurally weak coordination. Findings indicate that

most (95%) of the beneficiaries perceived medium to high level of coordination effectiveness. The mean value was 19.24 with standard deviation of 2.53 and co-efficient of variation of 13.14 %, indicating relatively low variability and high consensus among beneficiaries regarding coordination meetings effectiveness.

Table 2 Respondent Perception of SSN Coordination Meeting Effectiveness

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Irregular and Structurally Weak Coordination (<7)	12	5.00	19.24	2.53	13.14
Medium: Moderately Structured but Inconsistent Coordination (7-14)	47	19.58			
High: Regular, Well-Structured and Procedurally Effective Coordination (>14)	181	75.42			
Total	240	100.00			

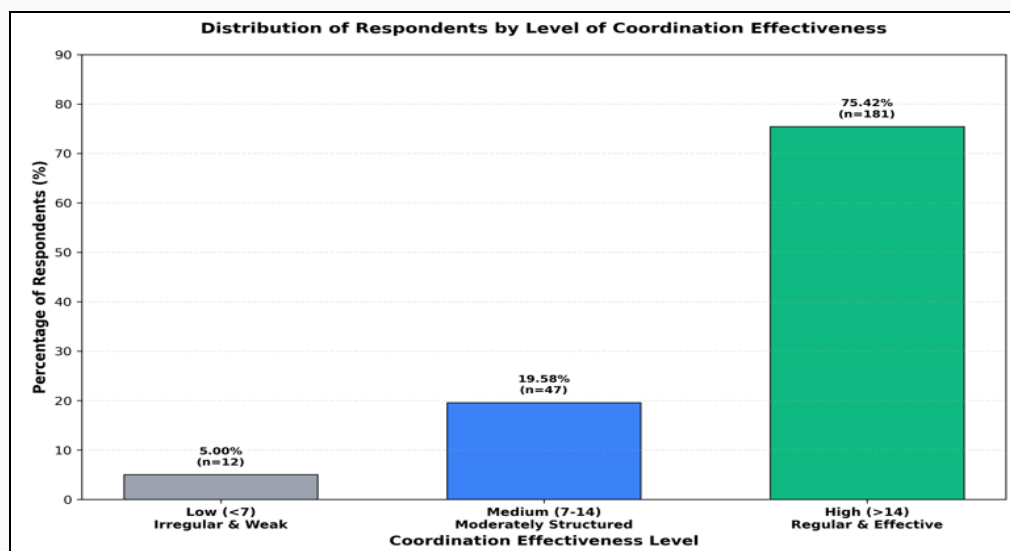


Fig 1 Distribution of Respondents by Level of Coordination Effectiveness

Data contained in Table 3 indicate that majority (88.75%) of the beneficiaries perceived partially reliable but inconsistent information flow, compared to 11.25% perceiving timely, reliable and well-integrated information sharing and none perceiving fragmented and delayed information exchange. Findings indicate that all (100%) of

the beneficiaries perceived medium to high level of inter-departmental information sharing. The mean value was 12.40 with standard deviation of 1.13 and co-efficient of variation of 9.15%, indicating very low variability and very high consensus among beneficiaries regarding inter-departmental information sharing.

Table 3 Respondent Perception of SSN Inter-Departmental Information Sharing Effectiveness

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Fragmented and Delayed Information Exchange	0	0.00	12.40	1.13	9.15
Medium: Partially Reliable but Inconsistent Information Flow	213	88.75			
High: Timely, Reliable and Well-Integrated Information Sharing	27	11.25			
Total	240	100.00			

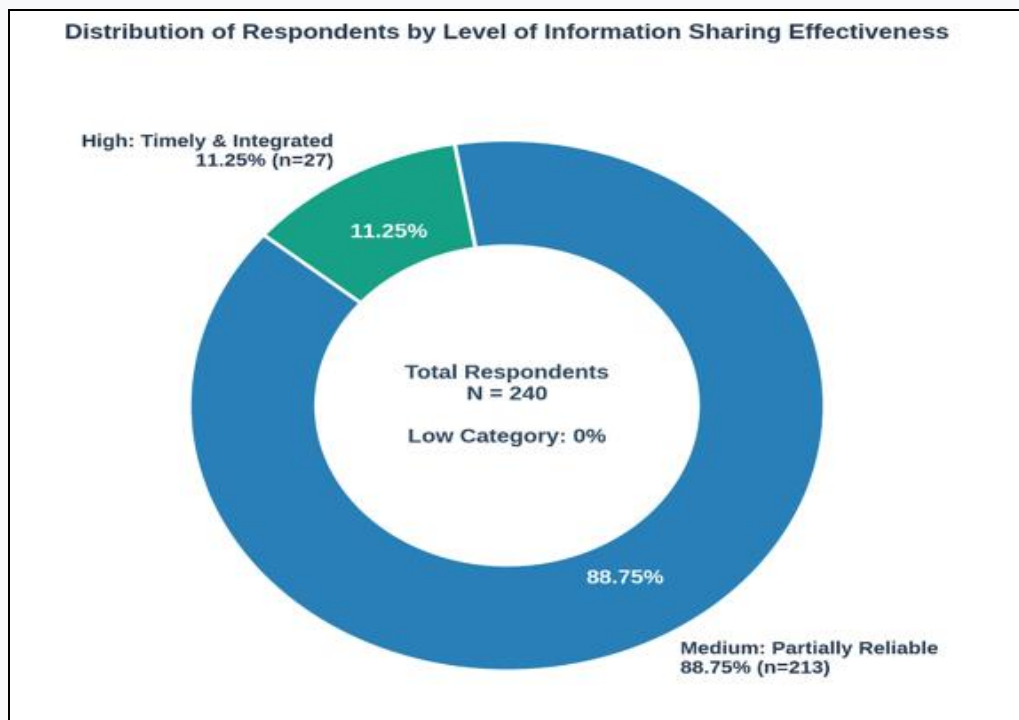


Fig 2 Distribution of Respondents by Level of Information Sharing Effectiveness

Data presented in the Table 4 showed that near about half (44.4%) of the SHS beneficiaries were medium family and compared to 39.3% being small family and only 16.3% in large family. Findings indicate that most (83.7%) of the

beneficiaries were medium and small family. This may be due to the power supply capacity of Solar Home System (65 watts) panel through the project.

Table 4 Respondent Perception of SSN Interdepartmental Information Sharing Effectiveness

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Fragmented and Delayed Information Exchange	0	0.00	12.40	1.13	9.15
Medium: Partially Reliable but Inconsistent Information Flow	213	88.75			
High: Timely, Reliable and Well-Integrated Information Sharing	27	11.25			
Total	240	100.00			

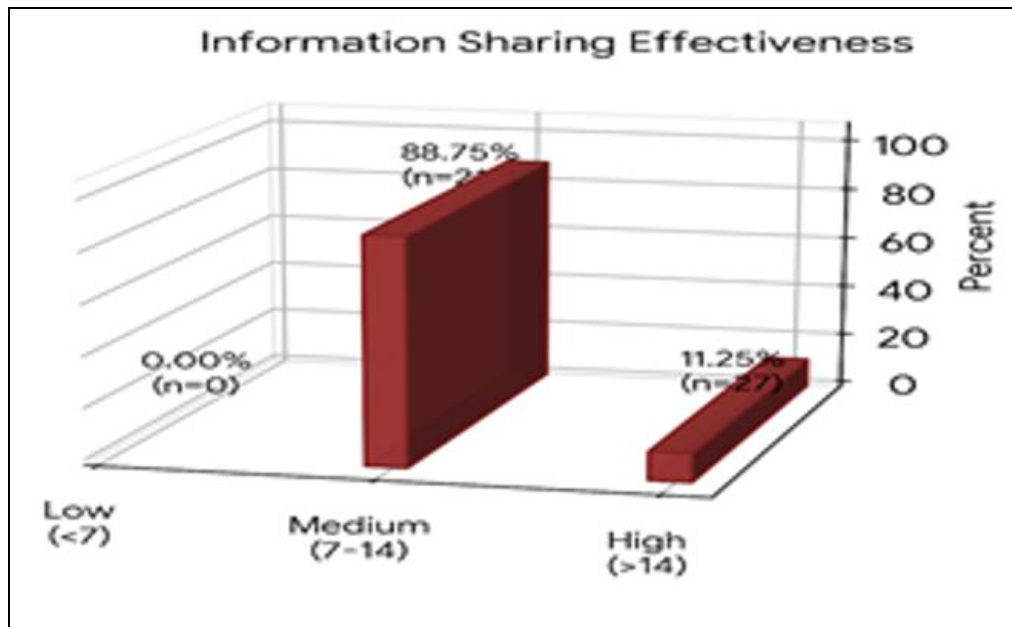


Fig 3 Information Sharing Effectiveness

As Shown in Table 5, the highest perception among beneficiaries was clear mandates with strong accountability mechanisms (89.58%) followed by defined roles with partial accountability (9.17%). More than half of all beneficiaries'

perception was high and medium level of clarity in mandates and accountability (98.75%). In the study area, among beneficiaries only a negligible %age perceived ambiguous mandates and weak accountability (1.25%).

Table 5 Respondent Perception of SSN Inter-Departmental Information Sharing Effectiveness

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Ambiguous Mandates and Weak Accountability	3	1.25	16.07	3.16	19.66
Medium: Defined Roles with Partial Accountability	22	9.17			
High: Clear Mandates with Strong Accountability Mechanisms	215	89.58			
Total	240	100.00			

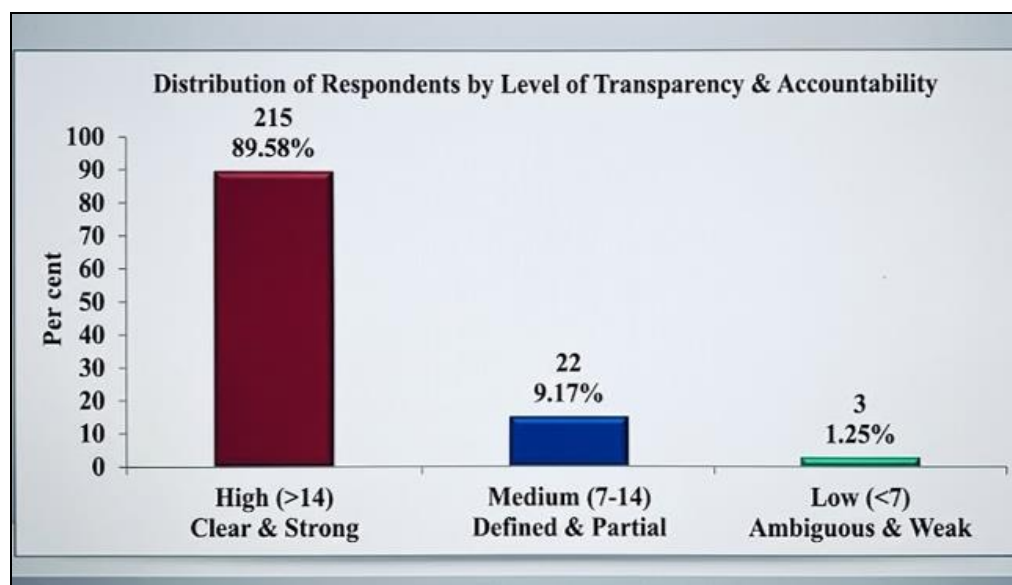


Fig 4 Distribution of Respondents by Level of Transparency & Accountability

Data presented in the Table 6 showed that slightly more than four-fifths (80.83%) of the beneficiaries perceived strong joint decision-making and active engagement where slightly less than one-fifth (16.25%) perceived moderate but

issue-specific collaboration. Small proportion (2.92%) of the beneficiaries perceived minimal inter-agency collaboration. Findings revealed that most (97.08%) of the beneficiaries perceived medium to high level of operational collaboration.

Table 6 Respondent Perception of SSN Operational Collaboration and Inter-Agency Engagement

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Minimal Inter-Agency Collaboration	7	2.92	15.99	1.85	11.61
Medium: Moderate but Issue-Specific Collaboration	39	16.25			
High: Strong Joint Decision-Making and Active Engagement	194	80.83			
Total	240	100.00			

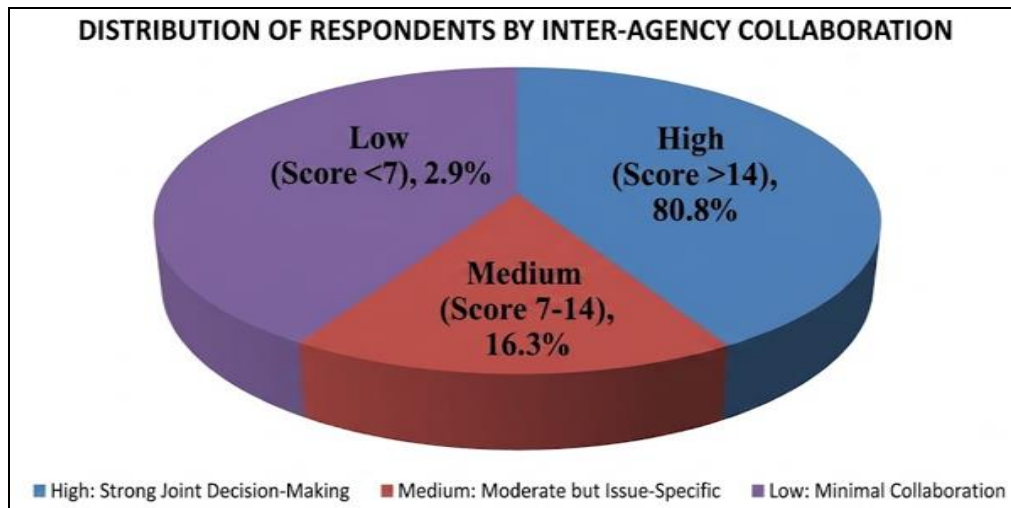


Fig 5 Distribution of Respondents by Inter-Agency Collaboration

Data contained in Table 7 indicate that about two-thirds (62.92 %) of the beneficiaries perceived moderate capacity with workload constraints, compared to 35.42% perceiving adequate, skilled and well-managed workforce and only 1.67 % perceiving inadequate staffing and limited skills. Findings indicate that most (98.34%) of the beneficiaries perceived

medium to high level of staff capacity and HR adequacy. The mean value was 13.22 with standard deviation of 3.29 and co-efficient of variation of 24.89%, indicating relatively higher variability among beneficiaries regarding staff capacity.

Table 7 Respondent Perception of SSN Staff Capacity and HR Adequacy

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Inadequate Staffing and Limited Skills	4	1.67	13.22	3.29	24.89
Medium: Moderate Capacity with Workload Constraints	151	62.92			
High: Adequate, Skilled, and Well-Managed Workforce	85	35.42			
Total	240	100.00			

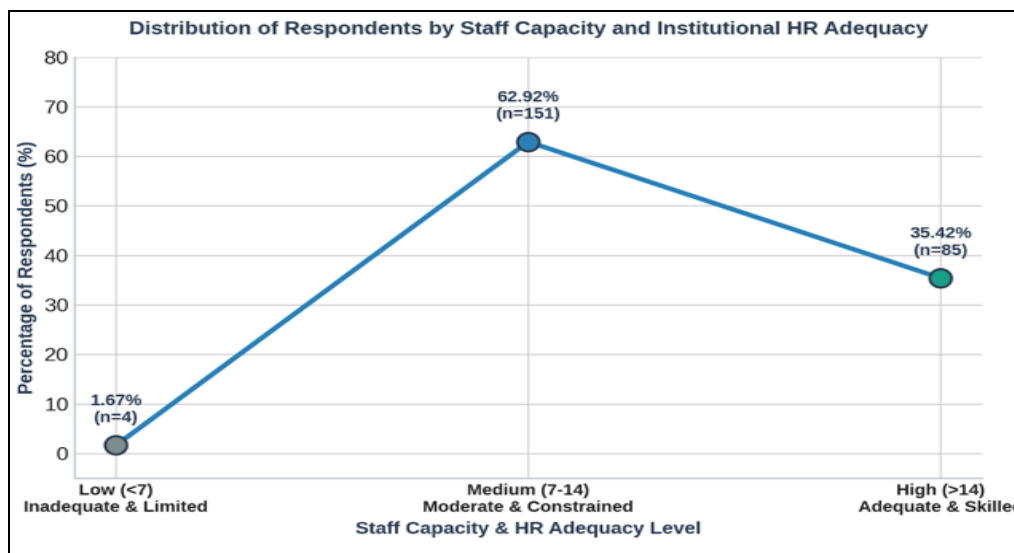


Fig 6 Distribution of Respondents by Staff Capacity and Institutional HR Adequacy

Table 8 demonstrates the distribution of beneficiaries' perception regarding Digital Integration and MIS Efficiency. The analysis reveals that a majority of the respondents (59.17%) reported a high level of perception, characterized by fully integrated MIS with accurate digital records.

Conversely, 39.58% of the beneficiaries perceived a medium level with partial MIS utilization and some gaps, while a negligible proportion (1.25%) indicated low level with limited integration and poor record accuracy.

Table 8 Respondent Perception of SSN Digital Integration and MIS Efficiency

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Limited Digital Integration and Poor Record Accuracy	3	1.25	14.75	2.83	19.16
Medium: Partial MIS Utilization with Some Gaps	95	39.58			
High: Fully Integrated MIS with Accurate Digital Records	142	59.17			
Total	240	100.00			

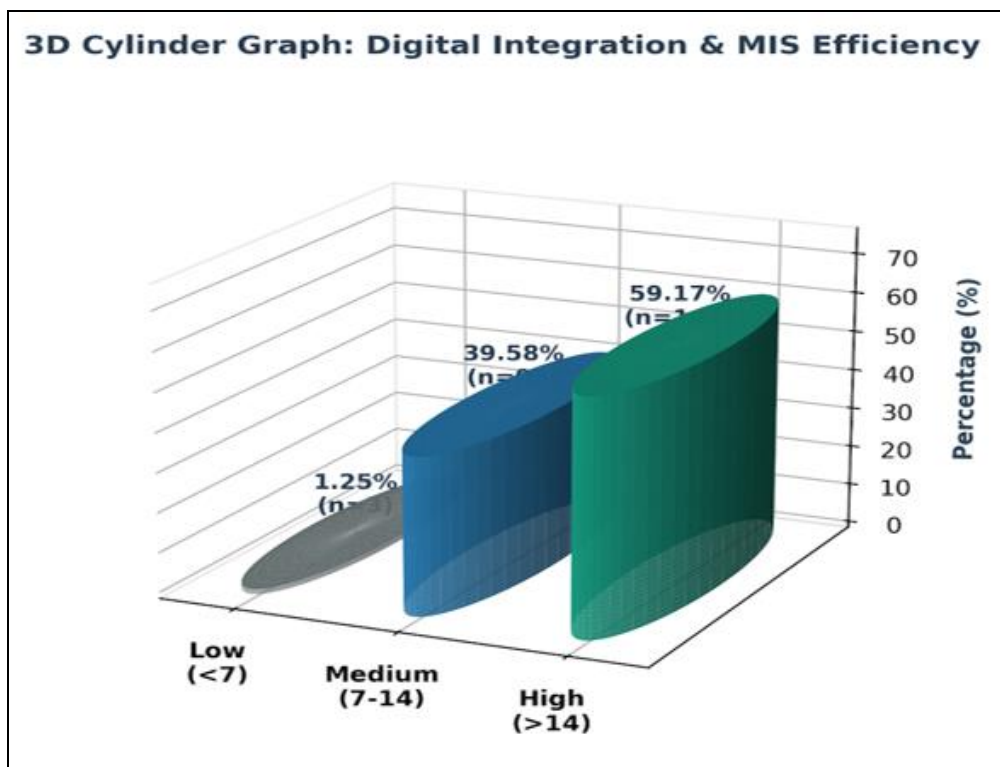


Fig 7 3D Cylinder Graph: Digital Integration & MIS Efficiency

Table 9 shows 77.50% of beneficiaries perceived strong participatory and inclusive governance, 22.50% perceived occasional consultation, and none perceived limited

participation. With Mean=15.71, SD=2.01 and CV=12.82%, findings indicate 100% medium to high perception and high consensus on participatory governance.

Table 9 Respondent Perception of SSN Participatory Governance and Bottom-Up Engagement

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Limited Community Participation	0	0.00	15.71	2.01	12.82
Medium: Occasional Consultation with Limited Bottom-Up Input	54	22.50			
High: Strong Participatory and Inclusive Governance	186	77.50			
Total	240	100.00			

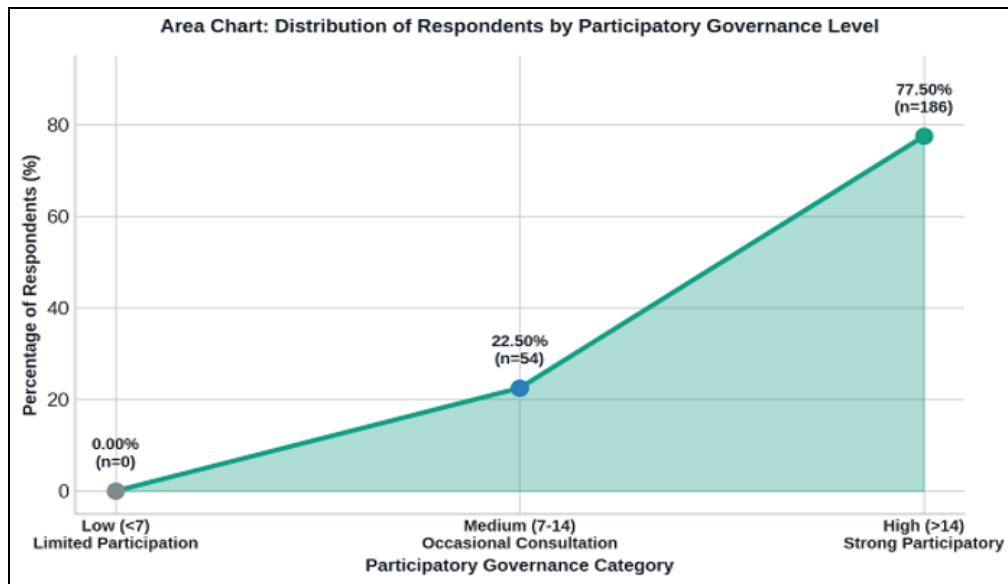


Fig 8 Area Chart: Distribution of Respondents by Participatory Governance Level

Table 10 reveals that more than three-fourths (77.50 %) of the beneficiaries perceived high level of participatory governance i.e. strong participatory and inclusive governance, while 22.50 % perceived medium level with

occasional consultation and limited bottom-up input. No beneficiary perceived low level of community participation. The average score was 15.71 (SD=2.01, CV=12.82%), indicating overall positive perception with low variability.

Table 10 Respondent Perception of SSN Transparency and Accountability

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Limited Community Participation	1	0.42	16.05	2.05	12.77
Medium: Occasional Consultation with Limited Bottom-Up Input	34	14.17			
High: Strong Participatory and Inclusive Governance	205	85.42			
Total	240	100.00			

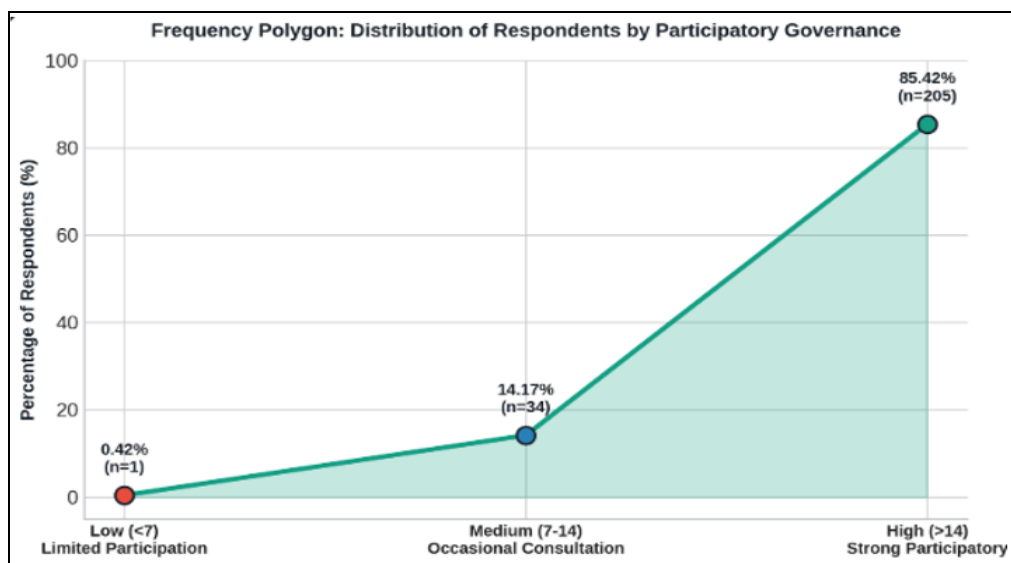


Fig 9 Frequency Polygon: Distribution of Respondents by Participatory Governance

Data contained in Table 11 indicate that four-fifths (80.00 %) of the beneficiaries perceived moderate resource availability with occasional delays, compared to 13.33 % perceiving timely funding and adequate logistical support and 6.67 % perceiving delayed funding and weak logistical support. Findings indicate that most (93.33 %) of the

beneficiaries perceived medium to high level of resource availability and logistical support. The mean value was 11.02 with standard deviation of 3.38 and co-efficient of variation of 30.67 %, indicating relatively high variability and less consensus among beneficiaries regarding resource availability.

Table 11 Respondent Perception of SSN Resource Availability and Logistical Support

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Delayed Funding and Weak Logistical Support	16	6.67	11.02	3.38	30.67
Medium: Moderate Resource Availability with Occasional Delays	192	80.00			
High: Timely Funding and Adequate Logistical Support	32	13.33			
Total	240	100.00			

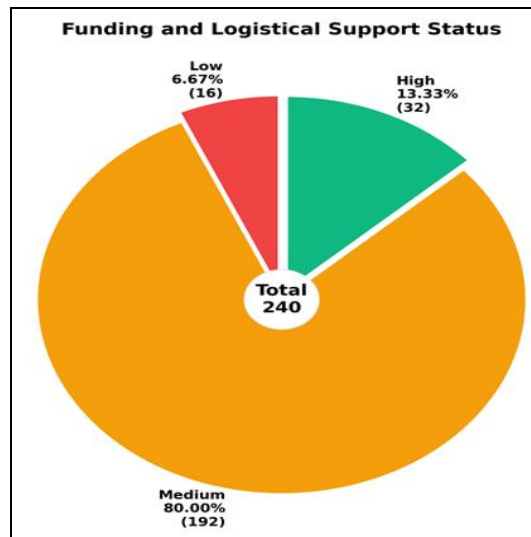


Fig 10 Funding and Logistical Support Status

Data contained in Table 12 indicate that nine-tenths (90.00 %) of the beneficiaries perceived proactive, responsive and strategic leadership, compared to 10.00 % perceiving moderately responsive leadership and none perceiving weak leadership and slow decision-making. Findings indicate that all (100 %) of the beneficiaries

perceived medium to high level of leadership responsiveness and coordination. The mean value was 15.99 with standard deviation of 1.47 and co-efficient of variation of 9.18 %, indicating very low variability and strong consensus among beneficiaries regarding leadership responsiveness.

Table 12 Respondent Perception of SSN Leadership Responsiveness and Coordination

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Weak Leadership and Slow Decision-Making	0	0.00	15.99	1.47	9.18
Medium: Moderately Responsive Leadership	24	10.00			
High: Proactive, Responsive, and Strategic Leadership	216	90.00			
Total	240	100.00			

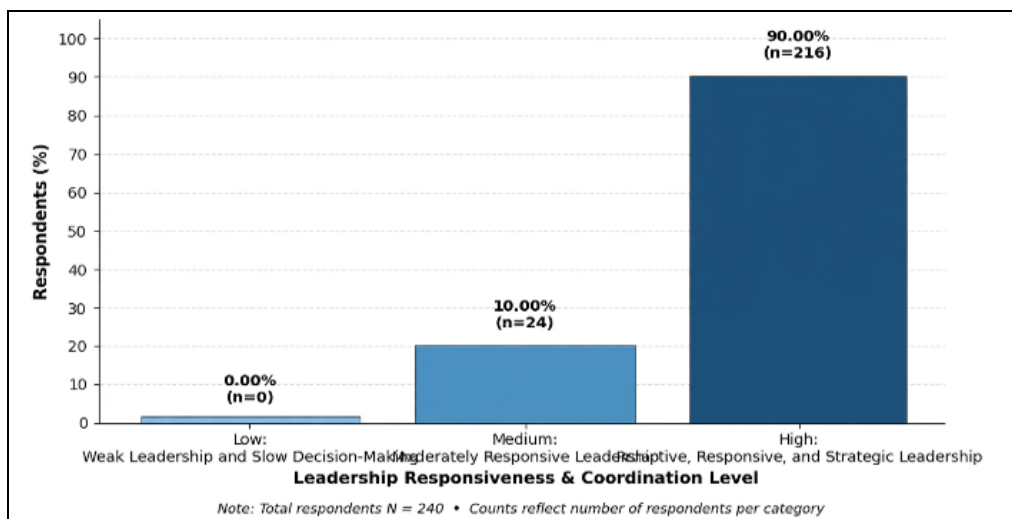


Fig 11 Respondent Perception of SSN Leadership Responsiveness and Coordination

Data contained in Table 13 indicate that about two-thirds (63.75 %) of the beneficiaries perceived strong local autonomy with contextual adaptation, compared to 36.25 % perceiving partial local adaptation authority and none perceiving highly centralized with minimal local flexibility. Findings indicate that all (100 %) of the beneficiaries

perceived medium to high level of local autonomy and contextual adaptation. The mean value was 15.24 with standard deviation of 1.74 and co-efficient of variation of 11.39 %, indicating low variability and high consensus among beneficiaries regarding local autonomy.

Table 13 Respondent Perception of SSN Local Autonomy and Contextual Adaptation

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Highly Centralized with Minimal Local Flexibility	0	0.00	15.24	1.74	11.39
Medium: Partial Local Adaptation Authority	87	36.25			
High: Strong Local Autonomy with Contextual Adaptation	153	63.75			
Total	240	100.00			

Data contained in Table 14 indicate that about two-thirds (65.00 %) of the beneficiaries perceived occasional bias but generally neutral administrative process, compared to 34.17 % perceiving fully neutral and independent administrative process and only 0.83 % perceiving political/irregular influence. Findings indicate that most

(99.17 %) of the beneficiaries perceived medium to high level of administrative neutrality and independence. The mean value was 12.84 with standard deviation of 3.08 and co-efficient of variation of 24.01 %, indicating moderate to high variability among beneficiaries regarding administrative neutrality.

Table 14 Respondent Perception of SSN Administrative Neutrality and Independence

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Political/Irregular Influence Evident	2	0.83	12.84	3.08	24.01
Medium: Occasional Bias but Generally Neutral	156	65.00			
High: Fully Neutral and Independent Administrative Process	82	34.17			
Total	240	100.00			

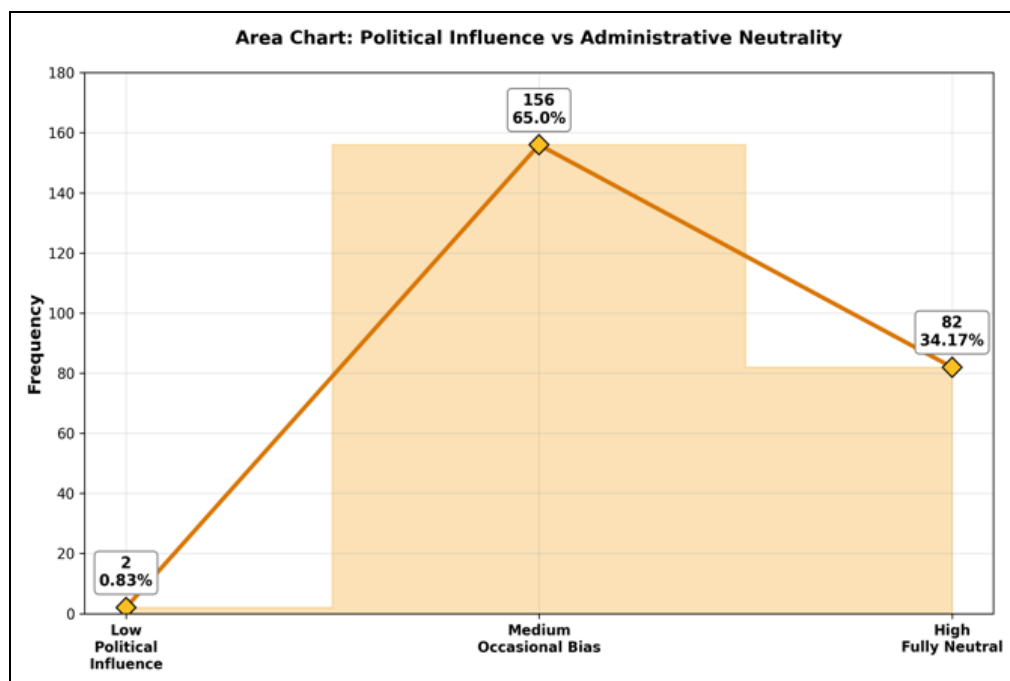


Fig 12 Area Chart: Political Influence Vs Administrative Neutrality

Table 15 presents the state of vertical communication within SSN. A dominant majority of 92.08 % of beneficiaries reported high-level perception, denoting strong directive flow and responsive communication. Only 7.92 % perceived moderate communication with some gaps, while none of the respondents experienced weak top-down and bottom-up

communication. With a high mean score of 16.20 (SD=3.08) and a very low coefficient of variation of 9.37%, the data reflects a strong uniformity in opinion. This suggests that both downward directives and upward feedback mechanisms in SSN are functioning highly effectively.

Table 15 Respondent Perception of SSN Vertical Communication and Directive Responsiveness

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Weak Top-Down and Bottom-Up Communication	0	0.00	16.20	3.08	9.37
Medium: Moderate Communication with Some Gaps	19	7.92			
High: Strong Directive Flow and Responsive Communication	221	92.08			
Total	240	100.00			

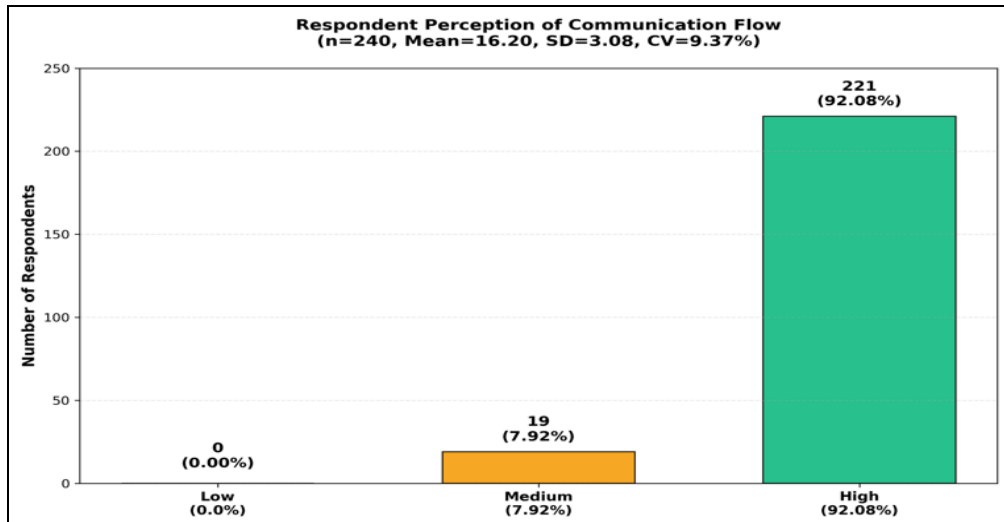


Fig 13 Respondent Perception of Communication Flow (N=240, Mean=16.20, SD=3.08, CV=9.37%)

Data shown in Table 16 reveal a predominantly positive perception towards M&E. About two-thirds (67.50 %) of the beneficiaries perceived a strong M&E system with active use of findings, followed by 14.58 % who perceived that monitoring exists but with limited feedback utilization. The

mean score was calculated as 15.95 with SD=1.54 and CV=9.68%. The low CV value indicates a high degree of consensus among beneficiaries regarding the presence of a strong monitoring and evaluation system in SSN.

Table 16 Respondent Perception of SSN Staff Motivation and Incentive Environment

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Weak Monitoring and Minimal Use of Findings	0	0.00	15.95	1.54	9.68
Medium: Monitoring Exists but Limited Feedback Utilization	35	14.58			
High: Strong M&E System with Active Use of Findings	162	67.50			
Total	197	82.08			

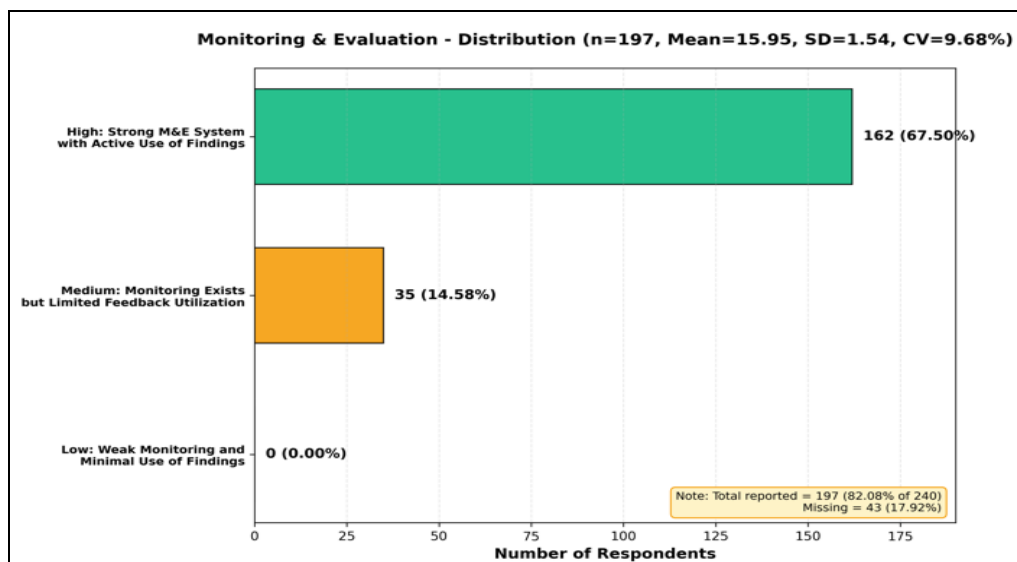


Fig 14 Monitoring & Evaluation- Distribution (N=197, Mean=15.95, SD=1.54, CV=9.68%)

Table 17 Respondent Perception of SSN Monitoring and Evaluation (M&E) Effectiveness

Categories	Respondents		Mean	SD	CV
	Number	%			
Low: Poor Incentives and Low Motivation	0	0.00	15.51	2.38	15.34
Medium: Moderate Motivation with Limited Incentives	84	35.00			
High: Strong Incentive Structure and High Staff Motivation	156	65.00			
Total	240	100.00			

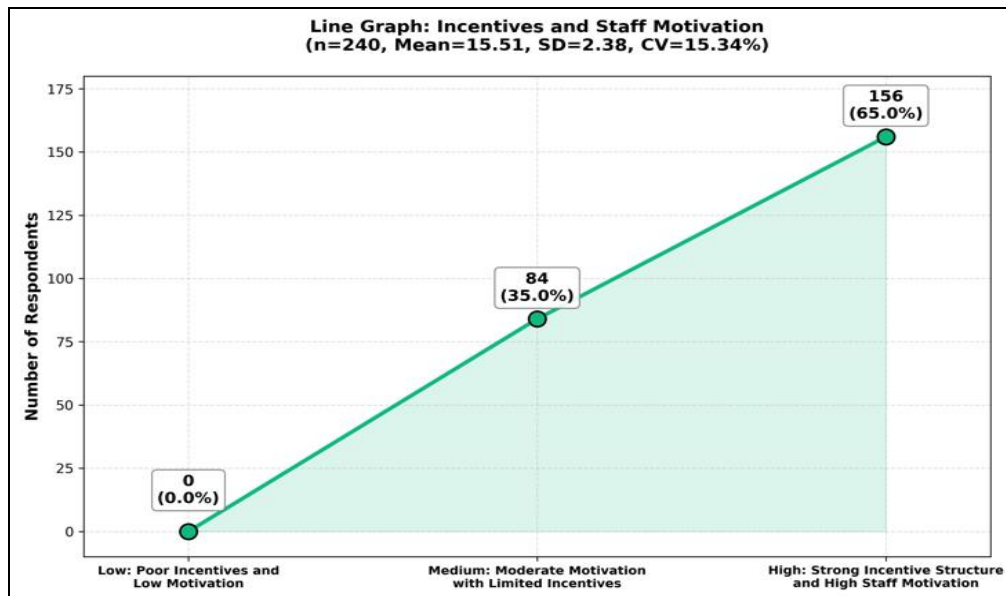


Fig 15 Line Graph: Incentives and Staff Motivation (N=240, Mean=15.51, SD=2.38, CV=15.34%)

The multiple regression model was significant ($R^2 = 0.599$, Adj. $R^2 = 0.573$), indicating that 59.9% variation in overall perception is explained by 15 administrative factors. Significant positive contributors were Staff Motivation and Incentives ($B=2.305$, $p<0.001$), Public Transparency Framework ($B=1.418$, $p<0.001$), Staff Capacity ($B=0.751$, $p<0.001$) and Resource and Logistical Support ($B=0.420$,

$p=0.002$). Significant negative contributors were Digital Integration and MIS Efficiency ($B=-1.087$, $p<0.001$), Monitoring and Evaluation Use ($B=-1.039$, $p=0.023$), Coordination Meetings Effectiveness ($B=-0.735$, $p=0.008$) and Operational Collaboration ($B=-0.637$, $p=0.042$). Other seven variables were non-significant ($p>0.05$).

Table 18 The Role of Local Administrative Coordination in Effective Social Safety Net (SSN) Delivery"

Independent variable	Unstandardized Coefficients		Standardized Coefficients	t	Sig.	R^2	Adj. R^2
	B	Std. Error	Beta				
(Constant)	-16.718	6.499		-2.572	.011	.599	.573
Coordination Meetings Effectiveness	-.735	.273	-.196	-2.697	.008		
Inter-Departmental Information Sharing	.775	.563	.093	1.377	.170		
Administrative mandates, guidelines, task division, and accountability mechanism	-.198	.144	-.066	-1.380	.169		
Operational Collaboration	-.637	.311	-.125	-2.049	.042		
Staff Capacity	.751	.163	.261	4.621	.000		
Digital Integration and MIS Efficiency	-1.087	.217	-.324	-5.014	.000		
Public Transparency Framework	1.418	.280	.301	5.067	.000		
Participatory Governance	.475	.285	.103	1.667	.097		
Resource and Logistical Support	.420	.131	.150	3.211	.002		
Leadership Responsiveness	-.511	.343	-.079	-1.491	.137		
Local Implementation Autonomy	-.325	.286	-.060	-1.136	.257		
Administrative Neutrality	-.079	.147	-.026	-.537	.592		
Vertical Communication	.664	.375	.106	1.770	.078		
Monitoring and Evaluation Use	-1.039	.452	-.169	-2.296	.023		
Staff Motivation and Incentives	2.305	.263	.579	8.747	.000		

IV. CONCLUSION AND RECOMMENDATION

Social Safety Net (SSN) programs are a vital instrument for poverty alleviation and social protection in Bangladesh. The present study reveals that beneficiaries have a highly positive perception regarding administrative effectiveness of SSN. Findings indicate that all (100%) beneficiaries perceived medium to high levels of leadership responsiveness, local autonomy, staff capacity and coordination, with mean values ranging from 15.24 to 15.99 and very low co-efficient of variation (9.18% to 11.39%), indicating strong consensus. Multiple regression analysis ($R^2 = 0.599$) identified Staff Motivation and Incentives, Public Transparency Framework, Staff Capacity and Resource & Logistical Support as significant positive contributors to overall perception, while Digital Integration and MIS Efficiency, Monitoring & Evaluation Use, Coordination Meetings Effectiveness and Operational Collaboration showed significant negative contributions, indicating areas requiring attention.

The study concludes that administrative factors such as motivated staff, transparent processes and adequate resources significantly enhance SSN effectiveness and beneficiary satisfaction.

➤ *That is Why; Government and Implementing Agencies Should Take Significant Efforts to:*

- Strengthen incentive mechanisms and motivation for SSN field staff,
- Ensure public transparency and accountability framework,
- Enhance capacity building and ensure adequate logistical support, and
- Improve digital MIS integration, effective monitoring feedback utilization and functional coordination meetings for more efficient delivery of SSN programs.

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