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by DD Turnitin

Submission date: 14-Sep-2026 12:23AM (UTC+0700)
Submission ID: 3030686917
File name: 5_6140881005017310220.pdf (369.5K)
Word count: 5553
Character count: 33515

locally, or in terms of the impact of deep-seated post-colonial legacies versus the impact of acute fiscal shocks. Future studies should integrate geospatial infrastructure monitoring with on-the-ground interviews to gain a more comprehensive understanding of the link between state-level capacity and infrastructure outcomes at the local level, which will help overcome these challenges.

SHAKKHOR

Introduction

Access to clean water and sanitation is a major force behind improving public health, human welfare and sustainable development. The United Nations has set SDG 6 to ensure sustainable development in relation to water and sanitation for all by 2030 (United Nations, 2015), realizing that clean water and sanitation is an important factor for a world of development. The progress of improving access to safe drinking water and sanitation services has been uneven across countries. The differences are not only due to differences in financial resources but also due to the operation of political and administrative institutions at the time of implementing public policies. Apart from domestic institutions, development outcomes are influenced by the global environment in which the country functions (Wallerstein, 2004) and state capacity to deliver essential public goods (Rotberg, 2003). Comparative governance takes a democratic approach to these types of institutional solutions by drawing on theory from polyarchy (Dahl, 1998) and using current empirical indicators like the Freedom House Index and the Varieties of Democracy (V-Dem) database, and scrutinising the role of non-governmental actors and the bureaucratic system in the process of policy implementation (Schmitter & Karl,

1991).

The present study aims to make comparisons between the two neighbouring South Asian countries: Bangladesh and India, which have similar historical, demographic and developmental characteristics, but also different levels of progress towards SDG 6 (United Nations, 2015). To account for this variation, the study follows the Institutional Approach that focuses on the role of political institutions, state capacity and cooperation between government and non-state actors in policy implementation (Hague et al., 2016, Chapter 5). The comparison is based on Most Similar Systems Design (MSSD) (Hague et al., 2016, Chapter 6) because Bangladesh and India are very structurally alike whereas they have yielded different policy results (Lijphart, 1971). The central

research question is: How do different institutional frameworks explain the varying progress in SDG 6 between Bangladesh and India (2000–2025)? Variations in the degree of centralization in the bureaucracy and the nature of government and non-governmental organization relations help explain these divergent results, the study suggests. This argument is explored using two SDG 6 indicators from the World Bank's World Development Indicators (WDI): people using at least basic drinking water services (% of population); and people using safely managed sanitation services (% of population) for the time horizon 2000–2025.

Literature Review

Safely managed sanitation (SMS) measures the percentage of the population with improved sanitation that does not share those facilities with other households, and where wastages are safely disposed of and treated off-site. The score basically calculated from 0 to 100. If the score is high that indicates improved public health governance, municipal infrastructure management, and state capacity for long-term maintenance of facilities. Near zero sanitation coverage (2-3% in 2000) was the absolute low for India as depicted in Figure 2. The dramatic structural shift in India in two decades, however, is illustrated in Figure 2, which shows that it has surpassed Bangladesh to around 63% in 2024. This rise is in contrast to that of Bangladesh, which increased from approximately 12% in 2000 to approximately 38% in 2024.

Figure-2: People Using Safely Managed Sanitation Services (% of Population)

The sanitation inflection points in Figure 2 represent varying national institutional strategies. 2014 marked a watershed year for India with the launch of the "Swachh Bharat Mission" (Ministry of Drinking Water and Sanitation, 2014). Under the pressure of intensive executive centralisation, allocation of funds under the federal programme and high profile campaigns in the states, India quickly built household latrines across the whole country, drastically bringing an end to open defecation. Bangladesh, as in other countries, was in a critical period when the National Total Sanitation Campaign took place in 2003-2006. Decentralized CLTS models resulted in high levels of adoption by local councils and NGOs, but, as the

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