Understanding the implementer's experiences for identifying key facilitators and bottlenecks of BRAC Community Support Team (CST) Cox's Bazar project for COVID-19 prevention, Bangladesh: A qualitative exploration of managerial perspectives.

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Abstract

Introduction: Recent research has highlighted the significance of understanding a managers' perspective for improving implementation to successfully execute interventions. It is still largely unexplored how their experiences with the implementation process in health care sectors affects the implementation outcome. Hence, this study aimed to understand the experiences of BRAC's managerial level program implementors of the Community Support Team (CST) Cox's Bazar project to identify the barriers and facilitators of their work on program implementation.

Method: An exploratory study design was used, applying qualitative approach with BRAC managers who coordinate activities in Cox's Bazar Sadar, Ramu and Kutubdia unions located in Cox's Bazar district. A total of 8 BRAC CST project managers were selected through purposive sampling among whom 5 were Community Mobilizers and 3 were Volunteer Coordinators located across the 3 unions. A semi-structured guideline was developed and data was collected through 8 in-depth interviews (IDIs). Both deductive and inductive approach was followed during analysis. Ethical approval was obtained from BRAC James P Grant School of Public Health's Institutional Review Board (IRB) to conduct the research.

Findings: The study found several key facilitators and challenges faced by managers during the implementation of the project. The main facilitators of the managerial work found from the study were, strong team bonding, social recognition of organization, rapport with higher officials, support from supervisors and community people, familiarity with local context, being a local resident, and knowledge through past experiences. Among the challenges identified from the managers interviewed in this study, the main issues revolved around unavailability of higher officials, social unacceptability, unable to meet community expectations, lack of flexibility, unfamiliar language and weather constraints.

Conclusion: The findings emphasize a need for building strong teams and social networks which should be the managerial attention focus in order to increase performance effectiveness and intervention success.

Introduction

The COVID-19 pandemic has claimed lives of over 6 million people globally, as of November 2022 (2020). Many studies have highlighted the importance of preventing the spread of the pandemic through community-led interventions (Gilmore et al., 2020; Ha et al., 2021), however, the extent to which managers address and manage the implementation of such public health interventions tend to have a substantial impact on the success or failure of such interventions (Granberg et al., 2021). Although implementing managers, for example, those who manage implementation at the field level, play a crucial part in encouraging the adoption of new practices by contributing to the simplicity or convenience of the process or by promoting and advancing the process (Harvey & Kitson, 2015),

Studies demonstrate that the manager needs a positive and encouraging environment in order to conduct interventions successfully and with positive effects (Christensen et al., 2019). Ovretveit has highlighted that it is the role of managers to ensure that the settings under which an implementation occurs are suitable, such as by allocating sufficient expertise, time, and financial resources for the process (Ovretveit, 2010). Several studies exploring managers experiences have identified numerous contextual factors that hindered implementation processes, including resistance to change, opposition from informal leaders, poor collaborative efforts among networks or teams, lack of senior managerial support, and an absence of organizational structure within the process (Coles et al., 2017; Damschroder et al., 2009; Granberg et al., 2021; Nilsen & Bernhardsson, 2019). A study at a university hospital in Sweden investigating manager's perspectives for health-care interventions showed that managers improved their institutional capacities by developing competence, creating adjustments, and delegating responsibility to staff (Eskilsson et al., 2021). Although requirements vary depending on circumstances, these studies highlighting the needs for understanding the managerial perspectives could make managers' contributions to future implementation procedures smoother.

A successful program must clearly convey both its accomplishments and strengths, as well as the dangers to health and health equity it is addressing (Frieden, 2014). Recent studies on process assessments show that employees and managers have an influence on the implementation and results of organizational interventions, which are being designed with a participatory approach (Nielsen, 2013). Hence, it is crucial to understand the implementation process of COVID-19 interventions from the viewpoint of implementers in order to prevent ineffective intervention designs in the future particularly in an emergency context.

Justification

Evidence suggests that many health-related interventions fail because the challenges of intervention implementation procedures are given inadequate attention, and assessments of these procedures are scarcely mentioned in literatures (Nielsen et al., 2010; Saksvik et al., 2002). Recent research has highlighted the significance of understanding a managers' perspective for improving implementation to successfully execute interventions (Nielsen, 2013). It is still largely unexplored how their experience with the implementation process in the health care sector affects the implementation outcome (Aarons et al., 2014; Ovretveit, 2010; Uvhagen et al., 2018). Hence, this study aims to understand the experiences of BRAC's managerial level program

implementers of the CST project to identify what worked and did not work in deploying the COVID-19 prevention interventions in Cox's Bazar district as well as the reasons behind them. The findings from the research will assist in identifying the scope for improvement in the design process as well as inform the facilitating factors of interventions in the context of a pandemic from an implementer's perspective.

Research Question

What are the barriers and facilitating factors for implementing the CST Cox's Bazar project from the managerial perspective?

General Objectives

To understand BRAC implementer's (managerial level) overall experiences including barriers and facilitators, regarding implementation of the CST Cox's Bazar project.

Specific objectives:

- 1. To identify the facilitating factors of the program strategies for implementing the COVID-19 prevention interventions and the managers' perspectives of those factors
- 2. To identify the intervention delivery challenges and how to improve them, from BRAC's program managers' perspective

Conceptual Framework

The conceptual framework in Figure 1 below, has been developed based on existing literatures. It illustrates the cyclic nature of roles played by a manager in implementing a project, experiences of which can, in-turn, inform the managerial level staff to conduct the implementation more effectively in future. The framework has been developed for the study, showing that managers of the BRAC CST project provide their specific expertise, time and financial resources for implementing the COVID-19 prevention interventions within the communities. During implementation, they may face several barriers as well as find some facilitating factors at the community level and organizational level. Recommendations generated from these experiences at the managerial level can inform development of more effective implementation strategies.

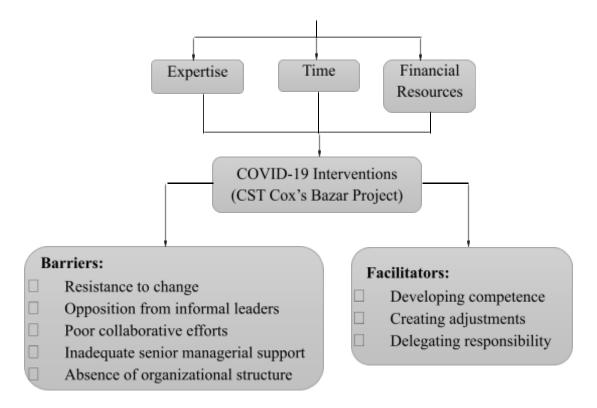


Figure 1: Conceptual Framework of understanding experiences of managers in implementation of BRAC CST Cox's Bazar Project.

BRAC Community Support Team (CST) Cox's Bazar Project

BRAC has been implementing the CST project in 58 unions in Cox's Bazar district. Through this project, BRAC plans to cover a total of 1.17 million people for providing interventions for COVID-19 prevention from May 2022 - December 2022. Within the project, BRAC has employed 30 locally hired volunteers, 18 Community Mobilizers (CM), and 6 Volunteer Coordinators (VC) (who report to the area manager) to monitor operations in each Upazila, drawing on lessons learned from past COVID-19 response efforts. In order to provide a program that is effective, high-quality, timely, and cost-effective, a senior program manager oversees project activities. Distribution of masks, social and behavior change communication efforts, meetings of the school management committee, informational seminars for students at madrasas and schools, and the placement of handwashing stations are all part of the intervention.

Responsibilities of Managerial Staff in CST Project:

Both the CMs and VCs of the CST project are mainly responsible for arranging meetings with the Union chairmen, members, religious leaders, school management committee and other influential people within the community as well as arranging the school quizzes and overseeing distribution of masks to the students. The VCs carry out a greater responsibility of monitoring the volunteers as well as the CMs to ensure that all planned work is being carried out properly and look over the implementation and coordination of all activities. Both CM and VCs guide the volunteers in their daily tasks and provide regular advice on improvement and management of their work. Before deploying staff at the field level, VCs are mainly responsible for overseeing logistics and ensuring proper supply and distribution. They also consult with the area manager regarding issues faced at the field level and coordinate work accordingly.

Method

Study Design: An exploratory study design was used, applying qualitative approach to understand the BRAC managers' perspectives on implementation of the CST Cox's Bazar project.

Study Setting: The current study was conducted in 3 out of the 58 unions, namely Cox's Bazar Sadar, Ramu and Kutubdia located in Cox's Bazar district. Most interviews were conducted in the BRAC offices within the study locations and one interview was conducted at a local hotel.

Study Population: BRAC managers within the project who coordinate activities to deliver an efficient, high-quality and cost-effective program. Program managers of this project residing in Cox's Bazar Sadar, Ramu and Kutubdia were selected for the interviews.

Sample size and Sampling Technique: A total of 8 BRAC CST project managers were selected among whom 5 were Community Mobilizers and 3 were Volunteer Coordinators located across the 3 unions selected for the study.

Purposive sampling was conducted since the project was designed with the purpose of exploring the perspectives of BRAC managers. This method allowed selection of respondents especially knowledgeable about or experienced with the project, maximizing efficiency and validity of data collected.

Inclusion criteria:

- 1. BRAC program managers directly involved in CST Cox's Bazar Project
- 2. BRAC local level program managers residing in Cox's Bazar district during the project period

Exclusion criteria:

1. BRAC program managers not involved with the CST Cox's Bazar project

Tool Development: Semi-structured guidelines for In-Depth Interviews (IDI) were developed which was divided into 5 broad areas; roles and responsibilities in implementation, overall experiences of delivering interventions, facilitating factors of their managerial work, challenges faced by the managerial staff and recommendations to improve/overcome bottlenecks.

The tool was developed in order to understand the perspectives of the managerial staff and to elicit their individual challenges and the factors according to the CMs and VCs that facilitated their managerial work during the implementation phase of the CST project.

Data Collection: Data was collected through 8 in-depth interviews, depending on availability and time convenience of the participants, without intercepting their regular work. Interviews were taken using an IDI tool for understanding the perspectives of BRAC program managers. Interviews were conducted until data saturation was obtained.

Among the IDIs, 7 managers were interviewed at the BRAC offices in the 3 selected unions of Cox's Bazar district whereas one VC was interviewed at a local hotel within Cox's Bazar Sadar due to preference and availability of the participant in that area. Six IDIs were conducted individually with the managers whereas one IDI was conducted as a group interview with two CMs together due to time and space constraints at the BRAC offices. One researcher conducted all the interviews. Audio recording of interviews were collected after getting consent from each participant.

Data Analysis: A list of *a priori* codes were created based on literature review reflecting study objectives. After completion of data collection, the audio recordings were translated directly into English due to time constraint and since interviews were done by the researcher herself. Both deductive and inductive approach has been followed during analysis.

Content analysis was done using deductive approach and thematic analysis of the transcripts were done using inductive approach by developing codes during analysis of the dataset. Combining both approaches allowed the research to be more organized, rigorous, and analytically sound. These codes were sorted, merged and categorized into a combined code list for final analysis. Steps included: familiarization with data, generating deductive codes, searching for the 5 pre-specified areas among codes, reviewing themes, defining themes, developing inductive codes and preparing the final report.

Ethical Consideration: Ethical approval was obtained from BRAC James P Grant School of Public Health's Institutional Review Board (IRB) to conduct this research. Informed voluntary written consent was obtained from each participant before conducting interviews and recording audio. Participants were also given verbal explanations of the study's objectives, risks, and benefits. COVID-19 measures (wearing face masks, hand sanitizing and physical distancing was maintained by the researcher during data collection period. Respondents were made aware of the usage of their data as well as their freedom to withdraw or decline to respond to questions without repercussions. Confidentiality and anonymity of participant's information has been maintained. All data has been stored into the principal researcher's laptop which is password-protected to prevent third party access.

Findings

The findings of this study presented the perspectives of the managerial staff working at the BRAC CST project for implementing interventions to prevent COVID-19 infection in Cox's Bazar district of Bangladesh. The study explored the experiences of the Community Mobilizers and the Volunteer Coordinators and identified several facilitators as well as challenges and coping strategies of their Through this study, several recommendations were also elicited from the respondents for overcoming bottlenecks and improving performance in future which are discussed below

1. Facilitators of Managerial Work

1.1. Strong Team Bonding

A key facilitator mentioned by most of the respondents was the strong bonding shared among the managers with their team members who were assigned as the field level volunteers. Both CMs and VCs stated that maintaining friendly relations within and outside work with the volunteers working under their supervision and creating a comfortable environment for them to share problems without hesitation was crucial for the work. Two out of 3 VCs expressed greater emphasis on building a strong team bond which ultimately made their managerial work easier since the team members would feel motivated by the managers to deliver work properly in an efficient and timely manner. One of the CMs mentioned that keeping an open communication about work progress and updates ensured better output. Another VC mentioned that building confidence of the volunteers by making them feel like colleagues and equals and not acting bossy with them also facilitated their work of guiding and supervising them. Furthermore, one VC from Ramu emphasized the importance of taking care of the personal condition of his team members to ensure that they remain in a good mental state, stating,

"I always try to find out if they have any hesitation with any of the work at the field because otherwise the field output will never be good. I try to keep a good mental communication by trying to understand their psychological condition and how they are thinking about a certain matter. At the end of the day, I also want to be able to make them understand how I want the work to be done"

-(IDI 01, VC, Ramu)

1.2. Social Recognition of Organization

All of the respondents of the study mentioned that the brand image of BRAC was one of the greatest facilitators of their work. The CMs and the VCs stated that communicating with the influential people such as the chairmen and union members as well as the school headmasters became easier when informed that they came from BRAC. One respondent said,

"BRAC's name made it easier for us to approach people. We could not have conducted the meetings with the chairmen and union members if we were not from BRAC. Other than this, whenever we approached anyone in the streets and told them that we are from BRAC, no one would question us anymore about what BRAC is" -(IDI 08, VC, Cox's Bazar Sadar)

According to the managers, the trust as well as familiarity with the organization among the community people at Cox's Bazar facilitated the implementation of the interventions in their respective areas. Another CM noted that,

"BRAC always gets special treatment. If we wear the vest and people notice us from afar, they come from themselves and want to listen to whatever we have to say. I think with the vest, people 100% prioritize me and without the vest it would come down to 50%" -(IDI_04, CM, Kutubdia)

1.3. Rapport with Higher Officials

Building a rapport with the higher officials within a community was mentioned by majority (6 out of the 8) respondents of the study as a facilitator of their work in managing meetings and spreading messages within the community. According to the respondents, creating and maintaining a good relationship with the union chairmen and members as well as the religious leaders made arranging meetings faster and smoother. Furthermore, one of the VCs at Cox's Bazar Sadar mentioned that building a strong rapport led to ease of communication for the subsequent meetings and increased acceptability among chairmen to arrange meetings at the union level. He stated,

"We faced problems more towards the beginning. But after we met with the chairmen and talked to them once, it became easier to communicate with them afterwards. They gave time more easily and we did not have to face too many problems to get their time in the next meetings"

-(IDI 08, VC, Cox's Bazar Sadar)

1.4. Support from Supervisors

Among the respondents interviewed, all the VCs and 2 of the CMs mentioned that the support provided by their supervisors (area managers) aided in their work as well as to tackle the challenges faced. The VCs mentioned that they could easily consult with the area managers if faced with any issues and they would provide feedback or support on the matter which allowed them to carry out their managerial duties properly. One VC stated,

"Let's say my supervisor gets an email today about a meeting which is scheduled to take place next week, my area manager forwards me the mail immediately so that I can take proper preparation"

-(IDI 05, VC, Kutubdia)

Regarding the importance of consulting area managers, another VC shared,

"In the case of the interactive theatre issue, I had to come to a decision very quickly. I shared it with the area manager immediately explaining the situation because if I do not let him

know then there may be e greater problems arising from higher authorities. So, I had to ensure that I did my job properly by informing the higher authorities on time" -(IDI 08, VC, Cox's Bazar Sadar)

1.5. Support from Community People

Three of the CMs mentioned that the support they received from the local people within the community facilitated their work in the project by helping them communicate with the chief persons of the area as well as helping with the supplies and logistics during the meetings.

1.6. Familiarity with Local Context

Out of 8 IDIs, 7 of the respondents mentioned the importance of providing time to understand the needs and ways of the local community people in order to communicate with them in a sensitive and effective way. According to them, this facilitated their work by increasing their acceptability within the community for conducting meetings and providing other interventions within the CST project. One of the CMs from Kutubdia mentioned that adaptability was key to their job which would eventually lead to successful delivery of the interventions. Similarly, four CMs reiterated that understanding how to address the locals can be achieved by spending time with them or speaking to them regularly which would allow the managers to adapt their attitude according to the locals as well as learn how to respect them properly. Regarding how familiarization aided the work of the managers, one CM stated,

"...it was because of the way that I addressed him and explained everything to him that he agreed to take the vaccine" -(IDI 02, CM, Ramu)

One VC also noted that spending time with the local people was crucial to ensure that their messages were being heard and accepted, stating that,

"...when I go to someone to convey the awareness messages, I cannot just tell them the message and leave. I should sit with them for a while and have a conversation with them first by trying to listen to their stories" -(IDI 01, VC, Ramu)

1.7. Being a Local Resident

Half of the respondents of this study, including 2 VCs and 2 CMs, mentioned that being a local facilitated their work of delivering interventions within the project. According to them, being a local increased their acceptability among the locals because they knew each other as well as knew the language in order for the people to understand. One CM also mentioned that being a local allowed them to bond with the people easily and allowed them to spread the messages effectively in the local language. The two VCs mentioned that although they were not locals of the district, having volunteers work under them was beneficial for the scope of their work. One respondent noted,

"...being a local and being able to speak in the local language has actually made it easier. Because we could easily connect with people to spread the message for covid-19 safety measures by speaking in the local language. And especially because it's in my union, very near, it also made our job easier. I may have faced some problems if it were far." -(IDI_03, CM, Kutubdia)

1.8. Knowledge through Past Experiences

Knowledge about the work itself through previous experiences in similar settings or contexts was mentioned as a facilitator of the managerial work by 7 out of the 8 respondents in the study. Three respondents mentioned that knowing the nature of the work and the subject matter was crucial for ensuring that the managerial duties could be properly fulfilled. Others mentioned that past experiences of working as a volunteer or working on other projects in the same location helped them to carry out their duties more efficiently and also identify bottlenecks in order to overcome them faster. One VC stated,

"...it is something that I have learned from previous projects that I have been involved with and used the technique ever since. Usually, a problem will worsen if you do not listen to the claims or complaints of a person and only try to enforce your opinion upon them. Now, whenever someone comes to me with the complaint, I always listen to them and allow them to finish first. I accept whatever claims they make" -(IDI_08, VC, Cox's Bazar Sadar)

Regarding knowing the nature of the work through past experiences, the same respondent also mentioned,

"I need to go to the field myself to know how long it takes to talk to people. I found that if I spend around 8 hours in the field then I will be able to cover around 100-120 people. If one of my volunteers comes and tells me that they have covered 400-500 people in a day then I will be able to tell if they did their work properly or not. So I realized that if I know how to do the work myself then it is good for me as well as for them" -(IDI 08, VC, Cox's Bazar Sadar)

2. Challenges faced by Managerial Staff

2.1.Unavailability of Higher Officials

Most of the respondents claimed that unavailability of the higher officials such as the chairmen and the union members created the greatest challenges in fulfilling their work of managing the activities of the CST project. Some of them elaborated on this issue stating that the chairmen and union members would often not answer their repeated calls for setting up the meetings leading them bound to visit the chairmen after official work hours in the evenings or even late at night. Others also mentioned that the chairmen would often fail to show up to the meetings timely making them wait for long periods of time, which also made it difficult to manage the other participants of the meeting who were waiting, as they wanted to leave. One CM explained,

"When we go up to the field to conduct meetings, we have to call them repeatedly to come to the meetings. For instance, if the meeting is scheduled at 10:30 a.m. then we have to tell them to show up at 10:00 a.m. at least. Despite that, we still go to the field and find that the people did not come. So we have to call them again."
-(IDI 02, CM, Ramu)

Among these respondents, two of the CMs also mentioned that getting time from the headmasters of the schools were also a big challenge since classes were scheduled which could not be disrupted. Hence, they stated that they had to conduct the intervention activities within a very short amount of time during the school break hour. One of them also mentioned that the headmaster of the school was unavailable for days and the only way for him to cope with such a situation was to repeatedly knock until he got a response. He stated that,

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"Once, one of the headmasters told me that he would give me an update in half an hour, but he did not even call me for the next 3 days" -(IDI_01, VC, Ramu)
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One VC from Kutubdia mentioned that women were often unavailable because they would not step out of their houses to speak with any outsider or stranger. He stated that even if a women had entered the house from the organization, the household women would still not come out of their rooms to talk.

2.2. Social Unacceptability

Social unacceptability of the interventions provided was deemed as a challenge by all of the VCs and 3 of the CMs. Various reasons around unacceptability of the interventions provided were reported by the respondents including distrust in the staff, perceptions that COVID-19 was no longer spreading, lack of permissions from the religious leaders as well as other influential community members for carrying out intervention activities such as the interactive theater and dissatisfaction with the new masks. Two of the respondents mentioned that they were not being allowed to stage the drama because the religious leaders claimed that it was against their culture.

On the other hand, one of the VC shared that a school headmaster did not wish to work with NGOs, explaining that,

"...we went to the school almost 15 times to get permission for conducting the school intervention activities but the head teacher did not allow us the permission to do it. After making us reach out to them multiple times the teacher told us that they will not work with any NGOs under any circumstances" -(IDI 01, VC, Ramu)

2.3. Unable to meet Community Expectations

Most of the respondents reported the challenge of managing community expectations while delivering the interventions of the project. For instance, 3 respondents mentioned that they had to deal with discord amongst the chairmen and other influential people regarding why one was

chosen over the other for delivering the interventions. Besides this, a few of the respondents mentioned that the chairmen, union members as well as the school headmasters for expect a certain amount of financial support or honorarium from the BRAC staff when they were approached for delivering interventions. One respondent stated,

"They would often come up to us and start asking questions like 'why is the amount so little?', 'are you keeping the rest of it to yourself?' etc. These types of behaviors are really upsetting..."

-(IDI 04, CM, Kutubdia)

Furthermore, while conducting the meetings with the union members or the school management committee, the managers mentioned that they were expected to provide food and arrangements for more than the 20 participants specified by the project activities. This was a challenge on their regular activities according to them since the managers did not have a budget to afford more and had to cope with such situations by convincing the community people. One CM from Ramu shared,

"There were around 25 teachers and staff and about 10 to 12 people from the management committee. So, in total there were around 35 people. The chief person at the Madrasa asked me what I was supposed to do because snacks had been prepared for only 20 people. Even offered to give money so that we could arrange snacks for more people. But after I spoke with him and explained everything, I was able to manage the situation. I spent some time discussing with some of the teachers and the management committee in that Madrasa and convinced them to allow us to conduct the meeting with 20 people according to our plan" -(IDI_02, CM, Ramu)

2.4.Lack of Flexibility:

Five out of the 8 respondents mentioned that lack of flexibility within the project plan and intervention logistics was challenging for carrying out their work in the community. One VC mentioned that he did not have the flexibility to improve upon the mode of delivery of the interventions such as the school quizzes, stating that,

"If I was in charge of designing the school intervention, then I would separate the students into groups and then ask them questions like what do they know about covid, what would they do if someone around them got infected or how would they solve challenges by themselves or with friends in the context of the covid pandemic. I would basically create an opportunity for them to brainstorm and come up with new ideas in order to engage them even more. But in this project we do not have an opportunity to do that. The way we are providing interventions now, children do not really understand what is going on."

-(IDI_01, VC, Ramu)

2.5. Unfamiliar language:

Difficulty in understanding the language of the local people of Cox's Bazar district was mentioned as a challenge by 3 out of 8 respondents in the study. Among them, two of the VCs

were not locals of Cox's Bazar and hence faced challenges in fulfilling their duties initially since they could not understand the local language. One of the CMs mentioned,

"In my opinion, local language plays an important role especially in awareness campaigns like this. Because in rural areas, villagers understand people who speak the same language as theirs."

-(IDI 04, CM, Kutubdia)

2.6. Weather Constraints:

Two respondents mentioned that weather was an issue stating that it was difficult to carry out their work in the monsoon seasons. One VC from Kutubdia mentioned that the turnout of spectators for the theatre was greater in some seasons but would decrease if the weather was not on their side. Another CM from Kutubdia stated,

"One significant challenge we face is the Rainy season. It gets very problematic to keep in touch with everyone as not many people go out during the rainy season, we also have difficulties resuming our fieldwork as it becomes hard to travel in this season." -(IDI 04, CM, Kutubdia)

Discussion

This study explored the manager's experiences and found several key facilitators and challenges faced by them during the implementation of the BRAC CST project in Cox's Bazar District. The main facilitators of the managerial work found from the study were, strong team bonding, social recognition of organization, rapport with higher officials, support from supervisors and community people, familiarity with local context, being a local resident, and knowledge through past experiences. Among the challenges identified from the managers interviewed in this study, the main issues revolved around unavailability of higher officials, social unacceptability, unable to meet community expectations, lack of flexibility, unfamiliar language and weather constraints.

A strong relationship among the team members was deemed as one of the greatest facilitators for the managers to ensure that the work was being carried out efficiently and effectively. Making open communication possible for the volunteers eventually led them to be more sincere in fulfilling their tasks and continuously follow up with the project manager about the work updates resulting in less effort and worry on the part of the managers. Similar results were found from research on Finnish work organizations regarding work team bonding and performance effectiveness showing a positive relationship between the two (Henttonen et al., 2014). Another exploratory study by (Khan & Wajidi, 2019) also concluded similar findings that long-term motivation is more likely to be sustained by a team whose members are committed to and aligned with its purpose, experience a sense of challenge in their work, have a deep sense of companionship, take responsibility for the organization's success, and have opportunities for personal and team growth.

Another key factor in facilitating the managerial work was the highly trusted and familiar brand image of BRAC among all levels of the community members in the study location. Since BRAC has conducted several research and interventions in Cox's Bazar for many years, the community members recognize the organization immediately. The positive attitude on BRAC by the community people naturally grew an interest among them to listen to the community mobilizers and volunteer coordinators thus aiding their work in managing the intervention meetings. Hence, in the context of program design for ensuring sustainable interventions, organizations must ensure that familiarity and trust is established with the community locals, which may also be achieved through partnerships or collaborations with trusted institutions to deliver interventions for better uptake and sustainability.

Rapport with higher officials and subsequent support provided by them as well as the locals was also crucial in facilitating the managerial work of the CMs and VCs. This study showed that building a good relationship with the influential people helped the managers to easily resolve many challenges as well as carry out their tasks smoothly. These findings are supported by a systematic review by (Li et al., 2018) showing that building strong networks by maintaining communication contributed to success in implementation efforts by leaders. As evidenced by this study, effective rapport helped to build trust among the locals and the project managers resulting in the locals coming forward to help the managers at the field level leading to the eventual success of implementation of the interventions. Thus, programs for health interventions must emphasize the importance of training managers to first build rapport with the chief persons within a community so that smooth implementation can be assured.

The cordial attitude of the local people of Cox's Bazar was mentioned by the study population as factor behind ease of communication and bonding. Many of the managers from this study emphasized the importance of adapting to the local culture and behavior in order to understand how to deal with each person in a tailored and acceptable manner. For managerial staff who were locals of the study location, implementing the interventions within the community was easier in comparison to those who were unfamiliar with the context and local dialect. Delivering COVID-19 prevention messages were easier and more effective when done in the local language and also if the local people know the project staff. These findings are supported by the study at a university hospital in Sweden showing improved capacities of managers by making adjustments according to the context of their work (Eskilsson et al., 2021). Hence, health interventions programs may achieve greater reach if managers who are familiar with the locality or have resided within the community are recruited within such projects, which can not only ensure effective delivery but also enhance the livelihood status of the community.

Besides the facilitators of the work, there were also several challenges identified through this study that hindered the activities and regular duties of the managers. One of the most common issue faced was the lack of social acceptability of the project managers and the messages they aimed to deliver, such as wearing masks or washing hands. Since infection rates of COVID-19 has decreased in Cox's Bazar District (2020) people do not want to wear the masks anymore. Many of the religious leaders and influential people argued that COVID-19 was no longer a concern and they should not have to maintain prevention measures anymore. Coping with such situations by convincing the public was a challenge to the managerial duties. Similar findings were also seen from other studies that aimed to understand managerial experiences of delivering interventions identifying as resistance to change as one of the key barriers (Coles et al., 2017; Granberg et al., 2021; Nilsen & Bernhardsson, 2019). These challenges may be overcome by program managers by spending more time with the local people and gaining their acceptance by building trust.

Lack of flexibility within the project plans also posed as challenge for the managers of the CST project since they were unable to meet the expectations of the community for arranging more meetings, or providing more masks and handwashing stations. Since supply of logistics and pre-selected areas for receiving the interventions followed a strict structure, the CMs and VCs faced trouble in managing the continued demands of the community people. This finding is in contrast with other studies that have found that without structure runs the danger of failing to allocate scarce resources to areas most in need of development and that lacking assistance might have detrimental effects on the manager's capabilities (Kristensen et al., 2015; Renz et al., 2011).

Although the findings of this study present the facilitating reasons and challenges faced by BRAC managerial staff in implementing interventions at Cox's Bazar district of Bangladesh, in the context of a pandemic, future research needs to explore a comprehensive list of the most common challenges and facilitators that can aid organizations to provide better training to managerial staff before deployment at the field level. Furthermore, given the context of location with a high population of low-income households and high community bonding, this study suggests that there is a need for flexibility in interventions plans and logistics provided in order to reach more people and leave a lesser proportion disheartened.

Limitations

The study had several limitations including the short time and number of managers found available within the Cox's Bazar district. The study was also conducted in only 3 unions due to resource constraints. Also, it was unable to capture the experiences of managers from a different setting within the CST project in order to understand the overall challenges and facilitators faced by managers under this project.

Conclusion

Several crucial implementation challenges and facilitators and their effects on managers' experience were discovered by our investigation. The findings emphasize a need for building strong teams and social networks which should be the managerial attention focus in order to increase performance effectiveness.

Moreover, health intervention programs may be better optimized by the use of digital applications that can provide real-time updates of program activities to the managers as well as make task assignment and distribution more efficient. This can be achieved through apps that can be installed within smart-phones or tabs used by the program implementors, that shows a dashboard of all the project activities and sends real-time notifications to managers and intervention delivery staff regarding deliverables and duties. However, pilot studies on the efficiency and effectiveness of such measures for managerial staff must be conducted in order to enhance health intervention programs.

References:

- Aarons, G. A., Ehrhart, M. G., & Farahnak, L. R. (2014). The implementation leadership scale (ILS): Development of a brief measure of unit level implementation leadership.

 *Implementation Science, 9(1), 1–10.
- Christensen, M., Innstrand, S. T., Saksvik, P. Ø., & Nielsen, K. (2019). The line manager's role in implementing successful organizational interventions. *The Spanish Journal of Psychology*, 22.
- Coles, E., Wells, M., Maxwell, M., Harris, F. M., Anderson, J., Gray, N. M., Milner, G., & MacGillivray, S. (2017). The influence of contextual factors on healthcare quality improvement initiatives: What works, for whom and in what setting? Protocol for a realist review. *Systematic Reviews*, 6(1), 1–10.
- Damschroder, L. J., Aron, D. C., Keith, R. E., Kirsh, S. R., Alexander, J. A., & Lowery, J. C. (2009). Fostering implementation of health services research findings into practice: A consolidated framework for advancing implementation science. *Implementation Science*, *4*(1), 1–15.
- Eskilsson, T., Norlund, S., Lehti, A., & Wiklund, M. (2021). Enhanced capacity to act:

 Managers' perspectives when participating in a dialogue-based workplace intervention for employee return to work. *Journal of Occupational Rehabilitation*, 31(2), 263–274.
- Frieden, T. R. (2014). Six components necessary for effective public health program implementation. *American Journal of Public Health*, 104(1), 17–22.
- Gilmore, B., Ndejjo, R., Tchetchia, A., De Claro, V., Mago, E., Lopes, C., & Bhattacharyya, S. (2020). Community engagement for COVID-19 prevention and control: A rapid evidence synthesis. *BMJ Global Health*, *5*(10), e003188.

- Granberg, A., Matérne, M., Lundqvist, L.-O., & Duberg, A. (2021). Navigating change–managers' experience of implementation processes in disability health care: A qualitative study. *BMC Health Services Research*, 21(1), 1–11.
- Ha, B. T. T., Ngoc Quang, L., Quoc Thanh, P., Duc, D. M., Mirzoev, T., & Bui, T. M. A. (2021).Community engagement in the prevention and control of COVID-19: Insights fromVietnam. *PloS One*, *16*(9), e0254432.
- Harvey, G., & Kitson, A. (2015). PARIHS revisited: From heuristic to integrated framework for the successful implementation of knowledge into practice. *Implementation Science*, 11(1), 1–13.
- Henttonen, K., Johanson, J.-E., & Janhonen, M. (2014). Work-team bonding and bridging social networks, team identity and performance effectiveness. *Personnel Review*, *43*(3), 330–349. https://doi.org/10.1108/PR-12-2011-0187
- Khan, M. R., & Wajidi, A. (2019). Role of leadership and team building in employee motivation at workplace. *GMJACS*, *9*(1), 11–11.
- Kristensen, N., Nymann, C., & Konradsen, H. (2015). Implementing research results in clinical practice-the experiences of healthcare professionals. *BMC Health Services Research*, *16*(1), 1–10.
- Li, S.-A., Jeffs, L., Barwick, M., & Stevens, B. (2018). Organizational contextual features that influence the implementation of evidence-based practices across healthcare settings: A systematic integrative review. *Systematic Reviews*, 7(1), 72. https://doi.org/10.1186/s13643-018-0734-5
- Nielsen, K. (2013). How can we make organizational interventions work? Employees and line managers as actively crafting interventions. *Human Relations*, 66(8), 1029–1050.

- Nielsen, K., Taris, T. W., & Cox, T. (2010). The future of organizational interventions:

 Addressing the challenges of today's organizations. *Work & Stress*, 24(3), 219–233.
- Nilsen, P., & Bernhardsson, S. (2019). Context matters in implementation science: A scoping review of determinant frameworks that describe contextual determinants for implementation outcomes. *BMC Health Services Research*, 19(1), 1–21.
- Ovretveit, J. (2010). Improvement leaders: What do they and should they do? A summary of a review of research. *BMJ Quality & Safety*, *19*(6), 490–492.
- Renz, H., Autenrieth, I. B., Brandtzæg, P., Cookson, W. O., Holgate, S., von Mutius, E., Valenta,
 R., & Haller, D. (2011). Gene-environment interaction in chronic disease: A European
 Science Foundation Forward Look. *Journal of Allergy and Clinical Immunology*, 128(6),
 S27–S49.
- Saksvik, P. Ø., Nytrø, K., Dahl-Jørgensen, C., & Mikkelsen, A. (2002). A process evaluation of individual and organizational occupational stress and health interventions. *Work & Stress*, *16*(1), 37–57.
- Uvhagen, H., Hasson, H., Hansson, J., & von Knorring, M. (2018). Leading top-down implementation processes: A qualitative study on the role of managers. *BMC Health Services Research*, *18*(1), 1–9.
- Worldometer. (2020). COVID-19 pandemic. https://www.worldometers.info/coronavirus/