Representative Bureaucracy and Government Responsiveness: Successful Coronavirus Strategy of Kerala[1]

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What makes some governments more responsive to citizens than others? The question of government responsiveness is now particularly poignant in low-income countries facing a life-threatening pandemic. There is a growing consensus emerging all over the world on the need of a coordinated state response to protect citizens and solve market failures following the sudden onslaught of a Covid 19. The vulnerable populations in these countries must rely on state action for their very survival, while the governments also grapple with the problem of limited resources. Interestingly enough, resource-rich and powerful states (the US and the UK, for example) have done worse in initiating timely measures containing the virus and reducing fatalities than some relatively poor countries like Vietnam, Cambodia and the small state of Kerala in India, which have emerged as success stories with early and effective intervention controlling the spread of the virus. While successive lockdowns failed or backfired in many other Indian states due to little consultation, planning or provisioning to address its consequences in a country grappling with poverty, hunger, homelessness, weak health infrastructure and migrant laborers, Kerala orchestrated a massive decentralized response system of tracking and isolation comprising the state government, local governments, *Kudumbashree (womens' groups)*, public health system alongside public solidarity and social capital. In sharp contrast to the heart-rending scenes of migrant workers in Delhi walking to far away homes with their babies and meagre possessions on their back, being beaten up by the police on the way,

some even dying on the road, the scenes in Kerala were of free shelters, community kitchens and volunteers delivering food to the needy. Later reversals and second and third wave of Covid 19 infections in some of these cases, including Kerala, do not nullify how their some governments, despite dense population and limited resources, responded with more speed and decisiveness than many rich countries. This paper investigates the coronavirus strategy of Kerala and makes a case for looking into bureaucratic representation as an important factor in explaining its success.

The Kerala Model

Kerala, a small state in South India, has frequently been celebrated over the last fifty years as a development model by scholars across the world for its exemplary achievements in human development and poverty reduction despite relatively low GDP growth (Heller et al., 2007). The estimated population of Kerala is 37.9 million, which is slightly more than Canada. Population density of Kerala is 860 people per square kilometer, compared to Canada's density of population of 4.

A brief review of Kerala's Covid 19 timeline will be instructive here. By January 2022 the state had started airport screenings and tracing to isolate persons suspected of being exposed to the virus. By February, Kerala already established protocols for a response team to coordinate with public officials across the state. By early March, Kerala had imposed a partial lockdown, banned large gatherings, and advised against visiting places of worship. In March, India reported only six confirmed Covid-19 cases, three of them in Kerala. Tracking and isolation of exposed persons continued on an almost epic scale, despite the challenges of a densely populated state. By the end of March, some

162,000 people were isolating across Kerala, with local authorities even supplying some of those in quarantine with groceries as incentive to stay at home. As the nationwide number had increased to 17,000, Kerala had already started to "flatten the curve" by March. By May, only four of 482 diagnosed patients have died and more than half have recovered – the best record in the country.

The most prominent explanations of this success story emphasize the 'Kerala Model' of vibrant social democracy and "public action" in the state, built on robust institutions of governance, working in relative synergy with society under efficient political leadership (Dreze & Sen, 1989).[2] These explanations emphasize the role of elected representatives and the electorate, while bypassing the role of bureaucracy in Kerala, specifically the question of how diversity among street-level bureaucrats contributes to Kerala's successful implementation of service delivery, contact tracing and quarantining measures.

The history behind the Kerala Model goes back to reform movements among many of the lower castes and communities started by the native rulers of the region in pre-independence India and followed. Successive state governments in Kerala led by the communists also expanded social service to a wide section of population. Kerala already held a lead in human development in 1955 when it was formed, but most its spectacular achievements came later. The higher quality of life in Kerala is evident in a generally high literacy rate and more particularly a high female literacy rate; a low infant mortality

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[2] Elaborating on the 'Kerala Model' Sen pointed out that 'there are a great many things we can learn from within the country by using the diversity of our experiences, particularly in the use of public action- involving the public itself as well as the government. Despite the fact that economic growth of Kerala has been sluggish.... it has been able to achieve tremendous results in important areas such as literacy, life expectancy and mortality rates. The Indian government should try to emulate the Kerala experience.'

rate; lower population growth rates and high life expectancies; and greater accessibility to essential services like health, water, electricity, public distribution shops, roads etc. In 1950 adult literacy was around 50 percent, compared to over 90 percent now, life expectancy at birth was 44 years, compared to 74 now, and the birth rate was 32, compared to 18 in the first decade of 21st century (Shah & Rani, 2003).

This, however, is not merely the result of provisioning of services by the state in the form of physical facilities: schools, health centers, fair price shops, paved roads, post offices, public transportation etc. It is equally important to recognize the growth of awareness among the masses and collective action by them to ensure that these facilities are utilized fully and well (Kurien, 1995). By increasing information that citizens have, their legal protections, their schooling it is possible to influence the private action of the politically weak, which then loops back to influence public action. One set of reforms can lead to another contributing to further institutional evolution. The positive feedback loop between policies and public action in Kerala is however, incomplete without accounting for the role of bureaucracy in policy implementation. Although the intellectual roots of the Kerala model of development may be traced to modernization theory, its programmatic content and ideological basis, and the human and physical resources to carry out the project, were indigenously developed and mobilized. The project was carried out under great constraints; furthermore, the state had to maneuver within the limited autonomy guaranteed by the Indian federal structure for mobilizing economic and political resources.

State capacity in Kerala rests on its infrastructure facilities for public provisioning of essential services and basic security including its robust health care system, universally

accessible and free for all. Scholars recognizing the bureaucracy as an important pillar of state capacity, tend to emphasize professionalization in the Weberian view of bureaucratic and administrative capacity shielded from parochial influence in recruitment and advancement. Recent research on Kerala has pointed to a transition from the old Kerala model, preoccupied with redistributive policies, a "new" Kerala model with emphasis on local, community-based, participatory sustainable development. Diversity and representation in governments comes up frequently as key explanations for superior responsiveness of Kerala compared to other states in India (Heller et al., 2007; Oommen, 2000; Véron, 2001). But these investigations focus on two key elements in the Kerala model viz. (1) an interventionist state committed to pro-poor policies, and (2) a mobilized society that engages the state through well-organized mass organizations and parties. This paper proposes the role of bureaucratic representation as the missing link between pro-poor governments and empowered citizenry that enhance state responsiveness during the current Covid 19 public health crises in the case of Kerala in India.

The Theory Representative Bureaucracy

Earlier research shows that the virtuous feedback loop between state and public action in Kerala produced empowered citizens and strong institutions, producing higher developmental outcomes. Even though bureaucracy and democracy work in tandem in the modern state, administrative structures are often overlooked and we focus on the popularly elected parts of state. The general aversion to bureaucracy stems from our perceptions and fear about large, centralized, hierarchical, bureaucracy in technocratic

welfare states, where bureaucracy and its regulatory apparatus are taken as hindrances to participation and representation in policymaking.

The theory of representative bureaucracy was developed in response to inevitable questions of accountability and legitimacy raised about bureaucracy in a diverse democracy. The dominant Weberian view of bureaucracy stresses the virtues of unelected bureaucracy unaccountable to the public. Not beholden to public opinion and preferences, a rational bureaucracy would be guided by rules, impartiality, and meritocracy, which, in turn, will insulate bureaucrats from patronage, nepotism, inefficiency and corruption. In sharp contrast, the theory of representative proposes that public organizations that reflect the composition of the population that it serves will provide higher quality, more democratic, and more responsive outcomes for members of the community (Kingsley, 1944; Meier, 2018). In this view greater representation can allow greater alignment of bureaucratic and public preferences, while also providing social incentives for bureaucrats to leverage private information (Bardhan, 2002; Ashraf and Bandiera, 2018; Alsan et al., 2019). Simply put, the theory of representative bureaucracy considers how the sharing of demographic characteristics between public administrators and service populations translates into improved service delivery. Existing research shows that bureaucracies that are representative of minority groups in a society may positively affect policy outcomes for those groups (Favero and Molina 2018; J. A. Grissom, Kern, and Rodriguez 2015).

Political theorists delineate two types of representative bureaucracy: passive and active. Passive representation is limited to making bureaucracy demographically mirror its constituents. Passive representation, or the extent to which a bureaucracy employs

people of diverse demographic backgrounds, can soar into active representation, when it exhibits the pursuit of policies reflecting the interests and desires of those people" (Selden 1997, 5; see also Mosher 1968). According to the theory, such a connection should occur given that individuals' demographic and social experiences should shape their identities and, therefore, influence their values and decisions on policy issues (Meier 1993; Saltzstein 1989). The arguments and mechanisms of representative bureaucracy is not very different from the debate between descriptive v substantial representation (Chauchard, 2014; Wängnerud, 2009). A logical corollary of this discussion is that passive/descriptive representation in bureaucracy does not always guarantee active/substantial representation of the marginalized groups they represent.

Bureaucratic Representation in India

Most of the empirical work on representative bureaucracy studies public organizations and bureaucracies in the US and Western Europe. This severely limits how generalizable representative bureaucracy theory is to national contexts beyond the 'western' world (but see Agyapong 2017; Song 2018; Zhang 2018). While initial research on representative bureaucracy in the West focused on race and ethnicity as the salient identity of representation, more recent work has found similar positive effects of a gender-representative bureaucracy in certain circumstances (Keiser et al. 2002). Parallel research also identifies conditions when a sharing of identities between bureaucrat and client leads to more positive outcomes for the client (Keiser et al. 2002; Meier 1975; Meier and Nigro 1976; Riccucci, Van Ryzin, and Jackson 2018; Theobald and Haider-Markel 2009; Wilkins and Keiser 2006).

In India the arguments for representation in bureaucracy inevitably lands in the realm of debates over policy of reservations for the Scheduled Castes (SC), Scheduled Tribes (ST) and Other Backward Classes (OBS), which is very controversial. The Scheduled Castes (SCs, *dalits*) are the formerly untouchable castes at the bottom of the status hierarchy, and the Scheduled Tribes (STs, *adivasis*) are the very poor aboriginal tribes of upland India. The Other Backward Classes (OBCs) are a heterogeneous collection of groups with a higher traditional status than SCs and STs, but with some degree of social disadvantage. Many worry that increasing bureaucratic representation through affirmative action worsens bureaucratic efficiency. The argument is straightforward: recruit quality is assumed to determine job performance and affirmative action is presumed to diminish recruit quality. The argument of meritocracy versus reservations is very controversial in India, even though the candidates recruited through reservations are no less meritorious, since they are also selected through an extensive and rigorous examination process (Bhavnani & Lee, 2018). In India it is the state's prerogative to decide about the financial ceiling for the reservation norms for the economically weaker sections in the society, which makes a subnational comparison of bureaucratic representation and policy outcomes possible.

Symbolically, increased diversity in bureaucracies reflects equal access to power thereby increasing public legitimacy. This symbolism is expected to increase constituent participation and positive interactions with bureaucrats, which then leads to "coproduction" of positive outcomes (Kennedy et al., 2017). Within an agency, greater diversity can lead to prior restraint of discriminatory behavior and broadening the minds of staff and decision makers. Unelected bureaucrats are the face of administrative power,

carrying out policies with broad, often unchecked discretion in the execution of policy, especially those bureaucrats who work closely with the public. There are many street-level bureaucrats as "public service workers who interact directly with citizens in the course of their jobs, and who have substantial discretion in the execution of their work." They are, for example, teachers, police officers, prosecutors, welfare workers, health and safety inspectors, and disaster aid providers.

Unlike elected politicians the street-level bureaucrats see their constituents as individuals: "as clients, students, criminals, suspects, victims, [etc.]." These bureaucrats are the face of government that people encounter on a day-to-day basis. Due to this intimate exposure, interactions may be laden with personal bias and emotionality that can supersede facts and cause these crucial decision makers to follow their value judgments rather than policy protocols when administering public services. There is highly disaggregated data now available, which demonstrates that individual bureaucrats can have strong, direct, and measurable impacts on tangible health, education, and poverty outcomes. There is also evidence that suggests that officers from Indian Administrative Service (IAS) serving in their home-states are linked to superior service delivery (Kapur et al., 2018; Vaishnav & Khosla, 2016), and the causal mechanism there is similar to that of representative bureaucracy. The founding fathers of India wanted to maintain an "insider-outsider ratio" (ratio of officers who are posted in their home states) of 1:2 in IAS postings, with twice as many IAS cadres being posted outside their home states. The rationale behind this was to avoid "elite capture" of the administration by officers within their own state of origin. While local bureaucrats were considered susceptible to corruption, the presence of strong local accountability mechanisms, one of which

operates via diversity in bureaucracy, can actually act as a check on malfeasance. Based on these findings we can viably argue that there is some room for experimentation on this front: a demographically representative bureaucracy is just as important as a politically representative legislature.

There are many studies that brightly illuminate this point (Kennedy et al., 2017). In one study in the United States, for example, the increase in minority teachers and administrators led to positive educational outcomes for minority students. In another, increased minority representation in federal rural housing loan programs led to an increase in loans awarded to minorities. And, finally, a greater number of minority officers working in equal employment opportunity (EEOC) led to more charges filed on behalf of minorities. While a politically representative democracy can create the policy protocols that make this progress possible, a demographically representative bureaucracy at the street level provides the impetus to execute these protocols to their full, inclusive potential. This connects the idea of representative bureaucracy to the idea of public action, which has been used extensively to explain why Kerala has performed better than other Indian states in many indicators of human development.

Bureaucratic Representation to Responsiveness: A Research Agenda

This section of the paper lays out a research agenda on bureaucratic representation highlighting what kind of empirical evidence might be useful to substantiate the link between representation in bureaucracy and its responsiveness, specifically in the case of Kerala.

Descriptive Data

Research shows that simple matching of demographic traits among civil servants and the population being served is not enough for government responsiveness (Keiser et al. 2002). A descriptive data on the caste/gender breakdown of the bureaucratic apparatus of the state of Kerala may be the necessary but insufficient first step in the empirical strategy for studying the role of bureaucratic representation in the state's Covid strategy. A crucial decision in the empirical strategy would be to determine (a) what level of administration this project should focus on and (b) how we can combine and compare analyses of both the centrally deployed IAS with the Kerala Administrative Service. The next step in the empirical strategy would be to start with creating a database that matches individual level characteristics of bureaucrats (caste, gender, education, age, mother tongue) with town level outcomes in both mortality rates and relief measures. The Census data can provide disaggregated information on baseline characteristics of the population, with rich details on their demographic and socioeconomic characteristics. Internal processes such as the social origin and value systems of bureaucrats are critical antecedents to actions and ultimately policy outcomes. For example, social origins of frontline caseworkers predict the values or attitudes of caseworkers in welfare agencies. Social origins can also explain variation in policy outcomes (Riccucci and Meyers 2004). It would be interesting to investigate social origins and value systems of Kerala's frontline workers during Covid.

Since state administration in Kerala varies at district level, it is possible to supplement the analysis with a comparison of the subset of towns along district border. Intuitively, proximate towns are likely to be much more comparable in terms of geography and socioeconomic characteristics, except that they fall under the jurisdiction

of different district officers in the particular year of the pandemic. While the advantage of district border comparisons is to obtain more comparable control groups, a limitation is that spillovers may also increase with geographic proximity.

The role of Political Support

Existing research emphasizes the need to look beyond simplistic, numerical parities of ethnic or gender compositions to analyze the effects these parities have on the population being served. The most important causal mechanism highlighted in the literature on bureaucratic representation and government responsiveness is that "active representation is more likely when the environment is politically supportive—such as when administrative leadership or organized groups within the community support the policies advocated by the administrator" (Dolan 2000, 518). This mechanism is especially relevant in the context of Kerala. In other words, bureaucrats are most effective in policy advocacy and implementation when politicians believe that the population being served prefers advocacy of the same specific policies. Political support not only drives bureaucratic behavior, but also legitimates policy decisions once they are made.

During the successful first phase of Kerala's coronavirus strategy, disruptive, adversarial and competitive politics between the Communist-led Left Democratic Front and the Congress-led United Democratic Front took a backseat. The consensus put out by the ruling and opposition party leaders were evident in the first phase of Covid 19 infections in the state. However, controversy erupted when the Kerala government collected data from 1.75 lakhs people under quarantine to help medical officials and doctors to make a well-informed choice about possible hospitalization in the case of those

quarantined.[3] When half a million workers returned to Kerala from the Gulf countries and others parts of India, the number of cases went up as expected. Overseas workers, approximately 17% of Kerala's working-age population, bring in huge remittances that contribute handsomely to the economy making them a very electorally significant and vocal demography. The ruling LDF dilly-dallied from refusing to demand mandatory Covid 19 negative certificate from expatriates returning to Kerala as "fundamentally inhuman decision" to eventually demanding their mandatory testing. This invoked public anger that became a political flashpoint in the state.

On May 4, the Kerala Chief Minister (CM) Pinarayi Vijayan said that the state has flattened the Covid 19 infection curve. At that time Kerala had only 34 active Covid 19 cases. But soon praises were replaced with criticism. By July, a new trend emerged where Covid 19 infections through "contact" and local transmission started to surge in the state with more cases of community spread than imported cases, particularly in the isolated coastal communities in Kerala. The apathy of political parties towards this community gave the opportunity for Catholic priests and social workers to formation of fishers' cooperatives and unions that has helped the fisher community to launch organized actions to defend their interests and causes. [4]

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[3] There was controversy around privacy violation in this data drive. The major allegation was that the data was collected without the informed consent of the people and the deal with a US based data science firm lacked strong data protection clauses. The Court directed the state government to anonymize the data of the people placed under quarantine for Covid 19 in Kerala. For more on this controversy, see https://globalfreedomofexpression.columbia.edu/cases/balu-gopalakrishnan-v-state-of-kerala-and-ors/

[4] By July 2020, out of 246 cases reported in Thiruvananthapuram district, 237 were attributed to local transmission.
https://indianexpress.com/article/india/community-spread-in-two-coastal-villages-says-kerala-cm-6511258/

The Chief Minister of Kerala appointed six senior IAS officials as incident commanders in addition to teams of commandos in the most affected coastal regions. Movement of people to and from the coastal region was completely banned, which caused an outburst of public discontent in the region. The top down imposition of bureaucrats from above coincided with lowest public and political support for lockdowns and contact tracing leading to massive community transmission and a well-publicized criticism of premature celebration of the Kerala model. Kerala responded by opening First Line Covid Treatment Centers (FLCTs) at the Panchayat level.[5] Therefore, it would be interesting to look into a case study comparison of the most successful and least successful areas of Kerala's coronavirus strategy and compare the political and bureaucratic representation between them, combining both qualitative and quantitative strategies.

Intervening Variables

Scholars of representative bureaucracy have also focused their efforts on the potential relationships between representative bureaucracy and intervening variables. Saidel and Loscocco (2005) find that agency type, rather than ascribed individual characteristics, explains how representative bureaucracy works in institutions. They conclude that working in a redistributive agency affects whether a leader pursues a policy agenda catering to ethnic minorities, regardless of the leader's race and gender. In their study of

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[5] The opening of FLCTs added more workload on the existing healthcare system. As of July 20, nearly 10,000 doctors are entrusted with the duty to treat Covid 19 patients. Though Kerala has one of the best doctor-patient ratios in the country, that is one doctor for 400 people, but for dealing with a pandemic like Covid 19 that is not at all proving to be sufficient. Occasional ostracization and attack on healthcare workers started affecting the morale of health workers in this region.

female representation in child support agencies in the United States, for example Wilkins and Keiser (2006) find that the translation from passive to active representation is a function of the policy area.

Policy experts and development economists are also of the opinion that an orchestrated decentralized response system comprising the state government, local government, *Kudumbashree*, public health system and people demonstrated solidarity and social capital at its best helped a great deal in controlling the pandemic in the first two waves of Covid 19 infections in the state. Kerala's "army" of healthcare workers and first-class medical care has played a huge role in containing the virus.

Decentralization and Representation

The73rd and 74th constitutional amendments in 1993 marked a watershed in India's quest for democratic development within a pluralistic, parliamentary, electoral framework. While this was an all-India initiative launched by the Central government, Kerala seems to have taken this more seriously, launching its own campaign for "people's planning" and implementing what seems to be the most extensive and efficient decentralization program anywhere in India (Chathukulam & John, 2002, 2007 and Oommen, 2007) Kerala's progress in achieving social well-being by all measures, ranging from the Human Development Index (HDI) to the Multi-Dimensional Poverty Index (MPI) and the Global Hunger Index(GHI) are not only decades ahead of India, but on par with the middle level developed countries.

The local self-governments in Kerala are in the front line to serve the people during this public health crisis. They have taken several initiatives to prevent the spread and helping patients who were tested as positive. According to the 2011 Census, there are

1200 Local Self Governments (LSG) in Kerala, which include 941 Grama Panchayats, 152 Block Panchayats, 14 District Panchayats, 87 Municipalities, and 6 Municipal Corporations. The idea of empowered local governments has long been a staple of India's Gandhian heritage, from Nehru's Community Development Program to national and sub-national efforts to empower India's *panchayats*. But the history of decentralization, much like land reform, has been one of broken promises, slow political deaths, and hollow legislation. It was at the local level, the government institution efficiently managed the Quarantine centres, Community Kitchen for COVID-19 infected persons, and persons in isolation. The initiatives for *Kerala Sannadha sena* consist mobilizing an army of 2.5 lakh volunteers between 16-65 years old.[6]

It is now well known that after delivering essential commodities at doorsteps to those in isolation due to COVID-19 alerts, Kerala government has started delivering cooked foods to the needy at their doorsteps free of cost by setting up community kitchens at all the 941 panchayats in the state in view of the lockdown. On March 26, the government of Kerala launched the community kitchen initiative to stave off hunger and to ensure no one goes hungry in the wake of pandemic and lockdown. The government entrusted the responsibility of managing the community kitchens to the local self-governments and to *Kudumbashree* (Mukherjee-Reed, 2015).Within a day, 43 community kitchens were set up and running, and 2,215 cooked meals were provided of which 1,639 were given free of cost. 528 more community kitchens started functioning on the second day. On April 1, 2020 there were 1316 community kitchens and on May 22, the number

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[6] https://www.deccanherald.com/national/south/covid-19-kerala-starts-delivering-free-food-at-doorsteps-by-setting-up-community-kitchens-818421.html

came down to 1097. Through these community kitchens, 2.50 lakh to 2.80 lakh food packets were distributed on a daily basis. . As per the latest figures provided by the Kudumbashree, there are 1145 community kitchens functioning in the state as on August 1, 2020. Apart from community kitchen, Kudumbashree also ran Janakeeya hotels6to serve budget meals for Rs. 20 (US $ 0.27). However, we know little of the bureaucracy that played important roles in smooth running of these projects. It is often argued that Kerala did well because it had the experience of successfully handling three crises in the past two years, a very serious Nipah epidemic in 2018 and two outbreaks of unprecedented floods, the first in 2018, the second in 2019, which makes probing and documenting mechanisms of organizational learning even more relevant. Kerala also took early steps in monitoring and enforcing the rules of isolation. It would be useful to trace how the decision-makers successfully harnessed and deployed modern technology (such as surveillance by drones identifying locations of social gatherings, use of "geofencing" to enforce quarantine, and location tracking devices) to create spatiotemporal maps for re-tracking movements of those infected and controlling the spread.

Conclusion

Because representation is a central concept in political science and because the theory of representative bureaucracy is highly compatible with other theories of representation and theories of behavior in general, the greatest opportunities for research are in placing the study of institutional representative bureaucracy within other subfields or in contrasting it with other explanations of politics. For example, representative bureaucracy postulates that identities need to become salient to trigger the representation process, a concern that

appears frequently in the literature on political behavior including the work of race, ethnicity, and participation. The study of representative bureaucracy is also a way to increase scholarship on the role that bureaucracy plays in race and ethnic politics. Representative bureaucracy has produced a sizeable body of empirical literature, but most of it is in the context of United States. The highly developed theoretical literature and empirical research on public action in Kerala makes it a suitable case for brining in comparative insights on the role of bureaucratic representation in improving public service delivery outcomes.

Issues of intersectionality seem a natural topic in representative bureaucracy given the multiple identities of bureaucrats. Studies of intersectionality have only recently begun with some examination of the combinations of race and gender in the U.S. Equal Employment Opportunity Commission (Meier, Pennington, and Eller 2005), preliminary research in higher education (Hicklin and Wilkins 2011), and elementary and secondary education (Atkins and Wilkins 2013; Walker 2011). Using the data on both ethnicity and gender of bureaucrats in India, a research agenda on bureaucratic representation might also shed light on when a bureaucrat might respond based on ethnicity versus responding on gender.