THE SOCIAL SERVICE WORKFORCE IN THE EAST ASIA AND PACIFIC REGION: MULTI-COUNTRY REVIEW

OCTOBER 2019
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A Social Welfare Officer holds a community meeting to support villagers assess their current situation, including access to services, and to identify their social needs.
A core mandate of UNICEF is to protect children from all forms of violence, abuse, neglect and exploitation in all settings. This requires a well-functioning child protection system. The most important component of this system is the social service workforce - government and non-governmental professionals and para-professionals working across sectors. This workforce plays a central role in identifying, preventing and managing risks, and responding to situations of vulnerability and harm. The social service workforce is also central to facilitating access to and delivery of social services, reducing poverty, promoting social justice, tackling discrimination, and challenging harmful behaviours and social norms. Yet it is often under-resourced, under-staffed and under-supported.

Investing in the social service workforce will therefore yield high returns for children, families and communities. However, a lack of investment in the workforce will undermine efforts to strengthen the child protection system, hindering the implementation of policies and laws, hindering a functioning case management system, and hindering effective service delivery.

Social service workforce strengthening is a priority under UNICEF’s Strategic Plan 2018-2021, in order to ensure that every child is protected from violence and exploitation and to contribute to the achievement of Sustainable Development Goals and targets; it is estimated that 65% of the 169 targets underlying the 17 SDGs will not be reached without engaging and coordinating with authorities responsible for social services. One quarter of the world’s children live in this region; a failure to achieve the SDGs here will prevent global achievement of the SDG targets.

With ten years remaining to achieve the SDGs, this joint report by UNICEF and the Global Social Service Workforce Alliance provides a timely review of the status of social service workforces in East Asia and the Pacific and outlines the critical steps required to strengthen the workforce across the region and in each of the 15 countries assessed. While the report highlights the progress that has been made in the region, the findings also highlight the significant gaps that remain.

When adequately resourced, trained and supported, social workers can safeguard children from harm, support families and prevent violence. I am confident that this report will serve as a compelling call for greater political commitment and investment for social service workforces across the region.

Karin Hulshof
Regional Director
UNICEF East Asia and the Pacific
# TABLE OF CONTENTS

ACKNOWLEDGEMENTS ............................................................................................................................ VII  
ACRONYMS ................................................................................................................................................. XI  
EXECUTIVE SUMMARY ............................................................................................................................... 1  
BACKGROUND............................................................................................................................................... 5  
METHODOLOGY ............................................................................................................................................ 9  
DEFINING THE SOCIAL SERVICE WORKFORCE ....................................................................................... 13  
COMPARATIVE REGIONAL SUMMARY OF SOCIAL SERVICE WORKFORCES ......................................... 15  
IN-DEPTH COUNTRY WORKFORCE ANALYSIS ........................................................................................ 23  
  1. CAMBODIA ....................................................................................................................................... 23  
  2. INDONESIA ....................................................................................................................................... 31  
  3. MONGOLIA ....................................................................................................................................... 38  
  4. PHILIPPINES ................................................................................................................................... 45  
  5. THAILAND ....................................................................................................................................... 52  
  6. VIET NAM ....................................................................................................................................... 58  
COUNTRY DESK REVIEW ........................................................................................................................... 67  
  7. LAO PEOPLE’S DEMOCRATIC REPUBLIC ....................................................................................... 67  
  8. MALAYSIA ....................................................................................................................................... 71  
  9. MYANMAR ....................................................................................................................................... 74  
 10. PAPUA NEW GUINEA ......................................................................................................................... 77  
 11. TIMOR-LESTE ................................................................................................................................. 80  
PACIFIC ISLAND COUNTRIES  
  12. FIJI ................................................................................................................................................. 82  
  13. KIRIBATI ......................................................................................................................................... 85  
  14. SOLOMON ISLANDS ....................................................................................................................... 87  
  15. VANUATU ....................................................................................................................................... 89  
RECOMMENDATIONS AND PRIORITY ACTIONS FOR STRENGTHENING THE SOCIAL SERVICE WORKFORCE IN EAST ASIA AND THE PACIFIC ....................................................................................... 93  
ANNEX .......................................................................................................................................................... 99  
BIBLIOGRAPHY .......................................................................................................................................... 105
Tables and figures

Figures
Figure 1: Strategic Framework for Strengthening the Social Service Workforce for Child Protection ........6
Figure 2: Degree qualifications reported by social workers in Cambodia, Indonesia, Philippines, Thailand and Viet Nam ...19
Figure 3: Availability and effectiveness of supervision in Cambodia .........................................................26
Figure 4: Length of time in current position for social workers in Cambodia ...........................................27
Figure 5: Degree qualifications reported by social workers in Cambodia ..................................................28
Figure 6: Availability and effectiveness of supervision in Indonesia ..........................................................33
Figure 7: Length of time in current position for social workers in Indonesia .............................................34
Figure 8: Highest levels of academic qualification for social workers in Indonesia ....................................35
Figure 9: Availability and effectiveness of supervision in Mongolia ..........................................................40
Figure 10: Length of time in current position for social workers in Mongolia ...........................................41
Figure 11: Highest level of academic qualification for social workers in Mongolia ...................................43
Figure 12: Availability and effectiveness of supervision in the Philippines .............................................47
Figure 13: Length of time in current position for social workers in the Philippines ..................................47
Figure 14: Highest level of academic qualification for social workers in the Philippines .........................49
Figure 15: Availability and effectiveness of supervision in Thailand .......................................................54
Figure 16: Highest level of academic qualification for social workers in Thailand ....................................56
Figure 17: Availability and effectiveness of supervision in Viet Nam ......................................................60
Figure 18: Length of time in current position for social workers in Viet Nam ...........................................61
Figure 19: Highest level of academic qualification for social workers in Viet Nam ...................................63

Tables
Table 1: Distribution of worker survey responses .........................................................................................10
Table 2: Measuring the extent of social service workforce planning, development and support in Cambodia, Indonesia, Mongolia, the Philippines, Thailand and Viet Nam ........................................15
Table 3: Number of social work degree programmes by country ...............................................................18
Table 4: Social workers professional associations in Cambodia, Indonesia, Mongolia, Philippines, Thailand and Viet Nam ..................................................................................................................20
Table 5: Number and titles of social service positions within government ministries in Cambodia ..........24
Table 6: Number and titles of social service positions within government ministries in Indonesia ........32
Table 7: Number and titles of social service providers within government ministries in Mongolia ..........39
Table 8: Titles of social service providers within government ministries in Thailand ..................................53
Table 9: Number and titles of social service positions in Viet Nam ...........................................................59
Table 10: Regional summary of social service workforces ........................................................................99
Social Worker supports a family to find solutions to help their daughter stay in school and the mother to be able to support the family.
ACKNOWLEDGEMENTS

The first multi-country review of the social service workforce in the East Asia and Pacific region was prepared by the Global Social Service Workforce Alliance (GSSWA) and the United Nations Children’s Fund (UNICEF) East Asia and the Pacific Regional Office (EAPRO) with the support and contribution of many people throughout the region. This report is one of several regional reports being produced by GSSWA and UNICEF to increase the availability of information on the social service workforce, and provide a baseline from which to consider ongoing workforce strengthening initiatives.

The co-authors of this report are Richard Hugman, PhD, Professor of Social Work, University of New South Wales, who we thank for his extensive efforts to gather, synthesize and present the data, and Dr. Natia Partskhaladze, Senior Technical Advisor, Global Social Service Workforce Alliance, who we thank for managing the mapping process, participating in country-level work, and overseeing the development of the recommendations and revision process. We acknowledge the commitment of GSSWA staff and thank them for supporting the review process. They include: Betsy Sherwood, Director; Amy Bess, Senior Advisor; and Nicole Brown, Deputy Director.

From the UNICEF East Asia and the Pacific Regional Office, we thank Stephen Blight and Rachel Harvey for their vision, guidance and contributions as Regional Advisers on Child Protection. Additionally, the report benefited from significant guidance and support from UNICEF country offices in Cambodia, Indonesia, Mongolia and Viet Nam. UNICEF country offices in the Philippines and Thailand and their national partners (Sikhay Kilos Development Association Inc. and Thammasat University Social Work Research Team, respectively) also collected data used in this report and contributed to its development. We also thank UNICEF country offices in the Lao People’s Democratic Republic, Malaysia, Myanmar, Papua New Guinea, and Timor-Leste and the UNICEF Pacific office for providing materials and insights and reviewing the document.

We thank the national consultants: Sok haphea Suong (Cambodia), Suratman (Indonesia), Erdenechimeg Tserendorj (Mongolia) and Nguyễn Thị Thái Lan (Viet Nam) who have gathered and synthesized data and supported country-level work. They also brought together key stakeholders who took part in country-level task group (CTG) meetings and provided input into this process.

The report would not be possible without numerous contributions made by many people in different countries who responded to the worker survey. Contributions were also made by members of CTGs in Cambodia, Indonesia, Mongolia and Viet Nam, led by the government and composed of key state and non-state entities. CTGs provided guidance on the review methodology and tools, facilitated information channels, contributed insights and other key information used in this report. Individuals who contributed to this report include:
Children take part in a team building exercise at a child care centre.
Cambodia
H.E. NIM Thoth, Secretary of State, Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY); H.E. Touch Channy, Director General of Technical Affairs, MoSVY; Phi No, Director of Child Welfare Department, MoSVY; H.E Oum Sophannara, Deputy Secretary General of Cambodia National Council for Children; Professor Ung Kimkanika, Director of Department of Social Work, Royal University of Phnom Penh, Department of Social Work; Chun Bora, President, Association of Professional Social Work.

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A social worker supports a 16 year old boy, who ran away from home because of physical violence by his father.
**ACRONYMS**

<table>
<thead>
<tr>
<th>Acronym</th>
<th>Description</th>
</tr>
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<tbody>
<tr>
<td>AFCYD</td>
<td>Authority for Families, Children and Youth Development, Mongolia</td>
</tr>
<tr>
<td>APSWC</td>
<td>Association of Professional Social Workers, Cambodia</td>
</tr>
<tr>
<td>ASEAN</td>
<td>Association of Southeast Asian Nations</td>
</tr>
<tr>
<td>ASWC</td>
<td>ASEAN Social Work Consortium</td>
</tr>
<tr>
<td>ASWO</td>
<td>Assistant Social Welfare Officers, Kiribati</td>
</tr>
<tr>
<td>CPN</td>
<td>Child Protection Network, Lao People’s Democratic Republic</td>
</tr>
<tr>
<td>CPO</td>
<td>Child Protection Officer, Vanuatu</td>
</tr>
<tr>
<td>CSU</td>
<td>Child Services Unit, Fiji</td>
</tr>
<tr>
<td>CTG</td>
<td>Country-level task group</td>
</tr>
<tr>
<td>CYPFW</td>
<td>Children, Young People and Family Welfare Act, Kiribati</td>
</tr>
<tr>
<td>DSW</td>
<td>Department of Social Welfare, Myanmar</td>
</tr>
<tr>
<td>DSWD</td>
<td>Department of Social Welfare and Development, Philippines</td>
</tr>
<tr>
<td>DOLISA</td>
<td>Departments of Labour, Invalids and Social Affairs at provincial and district level, Viet Nam</td>
</tr>
<tr>
<td>DoSVY</td>
<td>Department of Social Affairs, Veterans and Youth Rehabilitation at provincial level, Cambodia</td>
</tr>
<tr>
<td>FBO</td>
<td>Faith-based organization</td>
</tr>
<tr>
<td>GSSWA</td>
<td>Global Social Service Workforce Alliance</td>
</tr>
<tr>
<td>HCCH</td>
<td>Hague International Conference on Private International Law</td>
</tr>
<tr>
<td>HDI</td>
<td>Human Development Index</td>
</tr>
<tr>
<td>IFSW</td>
<td>International Federation of Social Workers</td>
</tr>
<tr>
<td>ISS</td>
<td>International Social Service</td>
</tr>
<tr>
<td>IPSPI</td>
<td>Ikatan Pekerja Sosial Profesional Indonesia (Association of Professional Social Workers, Indonesia)</td>
</tr>
<tr>
<td>MASW</td>
<td>Malaysian Association of Social Work</td>
</tr>
<tr>
<td>MDT</td>
<td>Multi-disciplinary team</td>
</tr>
<tr>
<td>MOLISA</td>
<td>Ministry of Labour, Invalids and Social Affairs, Viet Nam</td>
</tr>
<tr>
<td>MOLSW</td>
<td>Ministry of Labour and Social Welfare, Lao People’s Democratic Republic</td>
</tr>
<tr>
<td>MoSA</td>
<td>Ministry of Social Affairs, Indonesia</td>
</tr>
<tr>
<td>MoSVY</td>
<td>Ministry of Social Affairs, Veterans and Youth Rehabilitation, Cambodia</td>
</tr>
<tr>
<td>NGO</td>
<td>Non-governmental organization</td>
</tr>
<tr>
<td>PASWI</td>
<td>Philippine Association of Social Workers</td>
</tr>
<tr>
<td>PKSA</td>
<td>Program Kesejahteraan Sosial Anak (Child Welfare Program), Indonesia</td>
</tr>
<tr>
<td>SCAN</td>
<td>Suspected child abuse and neglect</td>
</tr>
<tr>
<td>SDG</td>
<td>Sustainable Development Goals</td>
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<tr>
<td>SKDAI</td>
<td>Sikhay Kilos Development Association, Inc., Philippines</td>
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<tr>
<td>SSW</td>
<td>Social service workforce</td>
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<tr>
<td>UNCRC</td>
<td>United Nations Convention on the Rights of the Child</td>
</tr>
<tr>
<td>UN</td>
<td>United Nations</td>
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<tr>
<td>UNICEF</td>
<td>United Nations Children’s Fund</td>
</tr>
<tr>
<td>USAID</td>
<td>United States Agency for International Development</td>
</tr>
<tr>
<td>USP</td>
<td>University of the South Pacific</td>
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An essential element of an effective child protection system is a strong social service workforce with a clear mandate, appropriate resources and relevant training and supervision. A well-planned, trained and supported social service workforce plays a critical role in identifying, preventing and managing risks, and responding to situations of vulnerability and harm.

The purpose of the multi-country review, undertaken by UNICEF East Asia and the Pacific Regional Office and the Global Social Service Workforce Alliance, is to provide an overview of the current status of social service workforces in the region and to identify good and promising practices for workforce strengthening, in order to inform advocacy, legal, policy and strategy development, and investment. The report presents the size, scope and structure of the social service workforce, efforts to strengthen the workforce through policy development, legislative reform, professionalization, education and training, and steps to strengthen the child protection system in 15 countries in East Asia and the Pacific: in-depth review - Cambodia, Indonesia, Mongolia, the Philippines, Thailand, and Viet Nam; desk review - Fiji, Kiribati, Lao People’s Democratic Republic, Malaysia, Myanmar, Papua New Guinea, Solomon Islands, Timor-Leste, and Vanuatu. The report highlights the unique aspects of each country’s workforce, identifies progress, challenges and gaps, and presents factors that countries may consider when engaging in social service workforce strengthening.

The report also provides a comparative regional review of progress against the three pillars of social service workforce strengthening:

**Planning the workforce** - identifying the human resource needs and gaps for the child protection system and social welfare system; and ensuring that requisite laws, policies, and registration, accreditation and licensing system are in place for an effective workforce;

**Developing the workforce** - providing effective and quality pre-service and in-service training and education that is aligned with needs and gaps in the workforce and prevailing accreditation systems, international best practices and the national context;

**Supporting the workforce** - improving recruitment and retention of workers, including through improving job satisfaction and opportunities for career development and progression; enhancing performance of the workforce through quality supervision; supporting professional associations, which are empowered to set standards, including codes of ethics, and hold members of the profession accountable; and tackling negative public perceptions of the workforce.

Overall, the findings highlight that there is considerable variation across the region as to the way social work has developed as a profession and the way that workforces are defined, structured, trained and supported at national and subnational levels. Despite these differences, there are also commonalities and common challenges across the region. Drawing on these regional trends, the recommendations below (as well as country specific considerations) are designed to support countries to continue to take forward efforts to strengthen their social service workforces.

While the focus of the research was on the role played by the social service workforce to deliver the child protection system, the findings and recommendations are applicable to wider efforts to strengthen the workforce to deliver social welfare and social protection systems.

**Planning the workforce**

There has been progress in the planning of social service workforces in all countries; some countries in the region have been modernising since the 1940s and have relatively well-planned social service systems and workforces. This progress can be seen in the extent to which countries have put in place a normative framework for social work, a national strategic plan, a system for registration or licensing and practice standards. However, other countries in the region lack the frameworks and systems necessary for an effective and professionalised social service workforce.

While all countries in this review are actively engaged in planning for the workforce, planning, as well as advocacy, is severely constrained by the lack of or limited nature of systematic data, especially on the number of social service workers overall and/or workers responding to the needs of children and child protection. Comparative
analysis across the region is further hampered by the widely differing definitions used by countries to determine the scope of their workforces.

The reported size of the social service workforce and social worker-to-child population ratio in each country varies hugely. Low social worker-to-child population ratios tend to correlate with limited policies and laws, a lack of clarity on the definition of social work and social workers, a lack of or limited professionalisation, and limited training opportunities. Further, most countries only include government workers in the data they collect, although the non-governmental sector often plays a significant role in the delivery of social services for children and families and child protection; where information exists, it shows that the social service workforce of the non-governmental organizations and faith-based organizations exceeds that of government agencies in some locations.

» **Recommendation 1:** Reliable, government-managed data about the social service workforce (based on an agreed definition) should be systematically collected and used to support planning, developing and supporting the workforce.

» **Recommendation 2:** Specific laws and policies should be developed which aim to increase the professionalisation of the social service workforce through the establishment of a normative framework outlining and defining functions (roles and responsibilities), a competency framework, practice standards and common accountability frameworks as a way of increasing efficiency and effectiveness.

» **Recommendation 3:** Policies should be developed on salary equity across regions of the country and in urban/rural areas, which aim to increase recruitment and retention of the qualified workers nationwide, taking into account comparative equity against other professions.

» **Recommendation 4:** Systems and structures should be planned based on system readiness and developed to ensure that the social service workforce is strengthened through proactive quality assurance mechanisms, standardized registration and phased licensing.

» **Recommendation 5:** Prioritization should be given to the development of informed, contextualized national strategic plans on strengthening the social service workforce. These plans should be costed.

» **Recommendation 6:** Plans for social service workforce strengthening should be integrated into social protection, child protection and other relevant national strategic frameworks.

**Developing the workforce**

There are a growing number of available social work courses in the countries reviewed, and all countries that participated in the in-depth review have bachelor and master’s degree courses in social work. However, the majority of participants in this review did not believe that currently available social work education and training is sufficient to develop a strong professional cohort. Further, some faculties do not have appropriately qualified and experienced teaching staff largely because the profession is relatively new in most countries in the region. Although all courses meet the international standard for having supervised and assessed field practice, in reality the quality and effectiveness of such learning is seen as highly variable.

The review found that paraprofessionals undertake a variety of forms of education and training at diploma or certificate levels. Such programmes exist in all the countries included in the in-depth review, but the value of these programmes is often difficult to assess because of the variation in course titles, the types of education providers and the limited recognition/accreditation mechanisms.

While the vast majority of respondents to the review survey only recognized degrees in social work as relevant to the profession, in all countries reviewed, part of the workforce comprises people who have degrees in other disciplines, whether or not they have the job title of social worker. This is regarded by many of the respondents to the review survey as a weakness because it limits the way in which professionalisation may strengthen the sector and means that degrees in social work are not regarded as necessary to become a social worker. This results in many social work graduates being unable to obtain work within the sector, while people continue to be employed to undertake social work with diverse non-relevant qualifications.

» **Recommendation 7:** Prioritization should be given to developing and making available appropriate education and training at all levels of the social service workforce, including professionals and paraprofessionals.
Recommendation 8: Prioritization should be given to establishing social work degree programme in academic institutions.

Recommendation 9: Training and education of the social service workforce should be aligned with national priorities related to child and social protection and other relevant fields, as well as in line with international and regional standards.

Recommendation 10: Faculty and instructors providing education and training programmes should themselves be appropriately trained and experienced in the relevant field.

Recommendation 11: In countries where there are limited qualified social work educators, partnerships should be established between international institutions and service agencies to support the development of contextually and locally informed training and education programmes.

Recommendation 12: Social service organizations should seek to work collaboratively with education and training institutions to create and support viable practice learning with attention to supportive supervision of students.

Recommendation 13: Clearly defined standard operating procedures should be developed and endorsed which set supervision standards, parameters, and targets for practice hours for students in their learning placements.

Recommendation 14: In-service and pre-service certificate programme training for the social service workforce is necessary in a demanding and dynamic sector. Programmes should be developed and endorsed by the government and/or a nationally approved training provider and supported in a systematic way that provides a basis for national recognition to workers who have completed the training.

Recommendation 15: Paraprofessional social service workers should be recognized as a formal category of workers, their role should be clearly defined, and they should have access to technical support, ongoing training, including training leading to professionalization and professional development opportunities.

Supporting the social service workforce

All six countries in the in-depth review have a government recognized professional association – the first was formed in 1947 - and four have publicly disseminated codes of ethics.

The survey for the in-depth review recorded that most workers had supervisors. However, satisfaction with the quality of supervision varied. Largely, supervision was reported to focus on fulfilling organizational functions, rather than providing support and professional development, reflecting the limited training and experience of supervisors in some countries.

Perceptions of upward mobility for social workers varied amongst those surveyed as part of the in-depth review, although largely opportunities were seen to exist to some extent.

Across the region, and apparently independent of the degree of professionalisation in the country, the general public, and even other professions, still view social work as a charitable endeavour. As a consequence, social work is not viewed as a legitimate profession, is often low paid and under-resourced, with the roles and functions of social workers in different settings being ill defined. This perception is often shared by policy makers, undermining efforts to professionalise and strengthen the workforce.

Recommendation 16: Investments should be made to ensure all members of the workforce have consistent access to quality supervision and support.

Recommendation 17: Professional associations should be formally recognized by governments and supported to play a key role in promoting professional standards, professional code of ethics advancing sound policies based on local practice innovations and promoting positive perceptions of social work and social workers.

Recommendation 18: In countries where social work and social services are developing, consideration should be given to enabling professional bodies to create and disseminate a code of ethics, which is endorsed and signed by the members of the association, and protocols for addressing non-adherence to the code.

Recommendation 19: Appropriate support mechanisms and career structures should be created or strengthened to create career advancement opportunities for the workforce.

Recommendation 20: Key messages and communication strategies should be developed to tackle negative perceptions regarding social work and social workers.
Child victim of sexual abuse waits to see health workers at the Family Support Centre in Mt. Hagen, Western Highlands Province.
BACKGROUND

Strategic vision to strengthen the social service workforce for child protection

The United Nations Convention on the Rights of the Child (UNCRC) recognizes every child’s right to protection from violence, abuse, neglect and exploitation, to access justice and to receive quality care. All countries across the East Asia and the Pacific region are States Parties to the UNCRC and have an obligation to ensure that children are protected and cared for. To meet this obligation, it is imperative for states to establish strong child protection systems to prevent and respond to all child protection risks and concerns.

The adoption of the Sustainable Development Goals (SDGs) in 2016, which includes specific goals and targets to prevent and respond to all forms of violence against children (Targets 5.2 and 16.2), marked the first time that the international community acknowledged that a failure to address violence against children constrains national development. Violence against children not only impacts their well-being, health and development, but also places a long-term burden on social services, undermines investment and development across many sectors including health, nutrition, early childhood development and education, and constrains economic development. Specific SDG targets provide an unprecedented opportunity to accelerate action on tackling violence, abuse, neglect and exploitation of children and ensure no child is left behind.

UNICEF’s Strategic Plan 2018–2021 highlights organizational priorities based on UNICEF’s specific comparative advantage in supporting states to implement the UNCRC and achieve the SDG targets, including for child protection.1 In particular, Goal Area 3 of the UNICEF Strategic Plan seeks to ensure that ‘girls and boys, especially the most vulnerable and those affected by humanitarian crisis, are protected from all forms of violence, exploitation, abuse and harmful practices.’

The Strategic Plan reiterates UNICEF’s 2008 Child Protection Strategy, which called for a shift from issue-based responses to a systems building approach for child protection.2 To prevent and respond to range of childhood vulnerabilities and child protection concerns in a holistic and comprehensive manner, it is imperative to have an effective child protection system in place.

An essential element of an effective child protection system is a strong social service workforce (SSW) with a clear mandate, appropriate resources and relevant training and supervision. A well-planned, trained and supported social service workforce plays a critical role in identifying, preventing and managing risks, and responding to situations of vulnerability and harm. No system can function effectively without the individuals who make that system come to life. Thus, UNICEF’s Strategic Plan identifies social service workforce strengthening as a priority under Goal Area 3.

Guidelines for action: Planning, developing and supporting social service workforce strengthening

To accelerate UNICEF regional and country offices’ programming on social service workforce strengthening, and support work to better plan, develop and support the social service workforce with national and regional partners, UNICEF released guidelines to strengthen the social service workforce for child protection3, and a results framework in 2019.4 The guidelines focus on three key aspects of social service workforce strengthening: planning the social service workforce; developing the social service workforce; and supporting the social service workforce, based on the Strategic Framework for Strengthening the Social Service Workforce for Child Protection (Figure 1).5

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4 Results Matrix for Social Service Workforce Strengthening, internal, <https://unicef.sharepoint.com/:w:/s/PD-ChildProtection/Ea3Uw21leXpJr5JEhrXOUL4B5oOp92kC5sVwXNjbzw9fzw?rtime=DkdeFfk410g>.
Under each pillar, the guidelines highlight a series of interventions that focus on enhancing the capacity of the workforce to deliver promotive, preventative, and responsive interventions that support families and children in communities.

Planning the workforce includes carrying out workforce mapping exercises to assess systems and services around workers and identify human resource gaps. Human resource data can then be used in making decisions about financing and to improve recruitment, hiring, deployment and retention, including better defining workforce roles through clear job descriptions. Advocating among different government ministries and departments and increasing coordination will help to generate political will and predictable resource allocation for workforce strengthening. This will help ensure that workforce strengthening is underpinned by legislative frameworks, including uniform definitions and policies as well as systems to register and license workers.

Developing the workforce involves providing effective pre-service and in-service training and education aligned with needs and gaps identified by workforce assessments. It also entails ensuring that curricula incorporate both local/indigenous knowledge as well as international best practices for improving the well-being of children and families. Training opportunities for workers should align with in-country accreditation systems that are broadly recognized and endorsed across government, university and non-governmental actors. Faculty and teaching methods should be regularly updated to establish a pipeline of future social work educators.

Figure 1: Strategic Framework for Strengthening the Social Service Workforce for Child Protection

Supporting the workforce includes efforts to improve job satisfaction and retention, such as through incentives, ensuring the workforce has the tools and resources they require to carry out their jobs and clearly outlining career ladders and opportunities for advancement. Comprehensive onboarding procedures, ongoing supportive supervision and continuing education can help to improve worker performance and prevent burnout and associated high turnover. Professional associations can enhance public understanding and perception of the profession, establish practice standards and provide ongoing professional development. Lastly, raising public awareness about the important services provided by social service workers helps to increase morale, recruitment, performance and retention.

The guidelines encourage adaptation of the strategies of planning, developing and supporting the workforce and related interventions to country contexts.

To accompany the guidelines, a Results Matrix for Social Service Workforce Strengthening has been developed comprising 16 indicators to support country-level, regional and global monitoring and measurement of progress on strengthening the social service workforce.

Mapping the social service workforce in East Asia and the Pacific
Responding to requests from national partners and to provide a tool to support countries to strengthen their social service workforces, the UNICEF East Asia and the Pacific Regional Office initiated a regional multi-country review of social service workforces. The review is intended to:

» Provide an overview of the context for workforce planning, including:
  o Relevant policies and regulations related to the social service workforce, including statutory frameworks and policies outlining registration and/or licensing requirements and practices.
  o The number of social service workers responsible for child protection per 100,000 children, according to type (cadre, governmental and non-governmental).

» Provide an overview of the context for workforce development and training, including:
  o Availability of different levels of education, training, and field placements/practice learning.

» Provide an overview of the context for workforce support, including:
  o Workers’ perceptions of challenges and opportunities, including work environment, supervision, job satisfaction, ongoing professional development, career paths and aspirations and their recommendations for improvements.
  o The presence, role, size and effectiveness of professional associations.

» Identify recommendations for social service workforce strengthening in the region that are applicable not only for child protection, but also for the delivery of countries’ social welfare systems.

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6 Results Matrix for Social Service Workforce Strengthening (internal) <https://unicef.sharepoint.com/:w:/s/PD-ChildProtection/Ea3Uw211eXpJoR5JEhrlOUL4B6oOp92kC5sVwXNjdzw9fzw7?rtime=DkdeFk410g>.
A social worker from the Department of Social Welfare lodges a report of child abuse with an officer at a police station.
Guided by progress to date, interest of national stakeholders and preparedness for the review, 15 countries were selected for review. They included Cambodia, Fiji, Indonesia, Kiribati, the Lao People’s Democratic Republic, Malaysia, Myanmar, Papua New Guinea, the Philippines, Solomon Islands, Thailand, Timor-Leste, Vanuatu and Viet Nam. From this group, six countries (Cambodia, Indonesia, Mongolia, Philippines, Thailand and Viet Nam) self-nominated to be part of a more in-depth study. The Philippines and Thailand had either recently completed or were about to complete related in-depth studies and instead of being part of an in-country mission, the data and findings they collected were included as part of this report.

The UNICEF East Asia and the Pacific Regional Office engaged the Global Social Service Workforce Alliance (GSSWA) to lead the review. The GSSWA works toward a world where a well-planned, well-trained and well-supported social service workforce effectively delivers promising practices that improve the lives of vulnerable populations, including children. The mission of the GSSWA is to promote the knowledge and evidence, resources and tools, and political will and action needed to address key social service workforce challenges, especially within low-to-middle-income countries. This multi-country review employed a regionally adapted methodology that was previously developed, tried and tested by the GSSWA in different countries utilising the 2010 Framework for Strengthening of the Social Service Workforce subsequently adapted by UNICEF in the 2019 Guidelines to Strengthen the Social Service Workforce for Child Protection.

Data collection
This review draws on quantitative and qualitative data to provide a description and analysis of national social service workforces. In order to collect appropriate data from across the region, a mix of methods were used:

- A desk review of current information about the social service workforce in 15 countries was undertaken, examining material such as studies using primary data, organizational working documents, policy documents and laws.
- Country-level task groups (CTG) of key stakeholders from government ministries, civil society organizations and universities were established to oversee the review, promote country ownership and prepare recommendations based on the findings.
- Country visits were conducted in Cambodia, Indonesia, Mongolia and Viet Nam and detailed information was obtained using surveys and questionnaires.
- The Philippines and Thailand were included in the desk review at a later stage and explored the same questions using their own research.
- 50 key individuals provided in-depth information through focus groups or key informant interviews.

Desk review
A desk review of global literature, existing reports and other materials from 15 countries was undertaken as a literature review of ‘secondary data.’ It examined information in English language documents that had been produced independently of each other, with the purpose of identifying information that addressed the focus of the review. Thus, the desk review was a deductive process that sought and abstracted evidence to answer questions that were pre-set to examine developments from a regional perspective. Selected materials were also reviewed in Bahasa Indonesian, Mandarin, Khmer, Mongolian and Vietnamese languages. The full list of documents reviewed is provided in the bibliography.

Data were sourced from UNICEF country offices, national consultants and others with expert country knowledge, members of CTGs and through online databases including ProQuest, Ovid and Google Scholar. Documents included desk reviews, studies using primary data, organizational working documents, policy documents and laws, analyses of child protection systems, national violence against children studies, demographic and health surveys, existing reports and mapping of the social service workforce, etc. Consequently, they vary in the extent and depth of the information provided.

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Country-level task groups
In Cambodia, Indonesia, Mongolia and Viet Nam, the review was led by CTGs and the state ministry in charge of the social service workforce. The aim of establishing CTGs was to ensure country ownership of the review process. CTGs worked on contextualizing the definition of the social service workforce and data collection instruments, ensuring this definition was reflected in the data collection process and tools, and facilitated access to data and data collection. At a later stage of the process, CTGs validated findings of the review and contributed to identifying recommendations for workforce strengthening. The CTGs will be well-positioned to engage in country-level action planning.

Worker Survey
In Cambodia, Indonesia, Mongolia and Viet Nam, a survey was sent to a sample of social service workers in order to gain insight into their perceptions of challenges facing the social service workforce, as well as areas related to the work environment, career advancement opportunities, availability of professional supervision, access to training opportunities, and support from professional associations.

The survey was undertaken in three different ways, according to local conditions. Wherever possible, the survey was conducted online, using SurveyMonkey, or if this was not feasible, through electronic delivery such as email. In this way, participants were clearly able to choose whether or not to respond, without any identification of individuals making the submissions. In some contexts, it was necessary for a member of the project team to visit areas where an electronic survey method was not possible, in order to deliver a paper-based survey and/or interview, and, in those circumstances, agreement of participants to take part was obtained beforehand. For example, in Indonesia, it was possible to request completion using SurveyMonkey. By contrast, in Viet Nam the survey was mainly undertaken by interview with researchers visiting social service workers in their place of work. In Cambodia, data were sourced using a combination of online and physical collection.

In all four surveyed countries (plus Thailand and the Philippines), data were collected from particular regions where the social service workforce had access to internet and/or were visited by the researchers and not evenly from across the whole country. In some countries, it has resulted in oversampling locations with better developed infrastructure and services, while in other areas, larger groups were reached among the paraprofessionals employed in the remote locations. The size of each survey relative to the social service workforce is shown in Table 1.

### Table 1: Distribution of worker survey responses

<table>
<thead>
<tr>
<th>Country</th>
<th>Survey responses</th>
<th>Number of survey responses</th>
<th>Percentage of estimated workforce</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td></td>
<td>154</td>
<td>4</td>
</tr>
<tr>
<td>Indonesia</td>
<td></td>
<td>1,180</td>
<td>1.7</td>
</tr>
<tr>
<td>Mongolia</td>
<td></td>
<td>151</td>
<td>5.3</td>
</tr>
<tr>
<td>Philippines</td>
<td></td>
<td>490</td>
<td>9.0</td>
</tr>
<tr>
<td>Thailand</td>
<td></td>
<td>295</td>
<td>9.8</td>
</tr>
<tr>
<td>Viet Nam</td>
<td></td>
<td>180</td>
<td>1.1</td>
</tr>
</tbody>
</table>
Questionnaire
A questionnaire was used to elicit information about key issues from state and non-state agencies responsible for employing, educating and otherwise supporting the social service workforce, as well as leaders and other senior people in the field. The questionnaires were purposefully targeted to those who could provide workforce information due to their organization/agency being engaged in planning, developing or supporting the workforce.

Limitations
The limitations of the review process are acknowledged. In this review, it is important first to acknowledge the different population sizes, together with different sizes and structures of the social service workforce, which meant that it was not possible to construct statistically matching samples across these countries. To resolve this, judgement sampling was used to seek samples that were large enough to obtain a spread of responses across regions, sectors and different types of workers.

Second, despite the fact that the concept of the social service workforce is inclusive of professional and paraprofessionals (see below), in practice, the way in which the social service workforce is defined and understood varies between each country. In some countries, social workers were seen as the primary cadre appropriate to include in the social service workforce review; in others, the social service workforce was viewed as comprising a range of professionals and paraprofessionals. This means that in some countries (for example Mongolia, Philippines and Thailand), the focus of the country review is specifically on roles defined as social work and hence, the study in those countries did not include the views of the broader social service workforce.

Paraprofessionals were often also missing from the discussions held by the CTGs, in contrast with information provided about the workforce in reports reviewed through the desk review. It is important to note that in the six countries surveyed, some respondents identify the importance of professionalising the workforce and are critical of the inclusion of paraprofessionals as part of the workforce. This is despite the fact that clarifying the role and value of paraprofessionals will in turn help to clarify the role and value of professional social workers.

Third, in some countries the surveys were conducted in person while in others they were completed online, and in the Philippines and Cambodia, both methods were used and combined. As the differences in methods might produce different types of responses, comparison is difficult. However, as a mapping exercise, this approach still provides useful information and does not compromise the overall viability of the review.

Fourth, information from Thailand was obtained using a different approach. In this case, the findings of a separate study undertaken in 2017 were included as secondary analysis, using the data to examine the same questions. In the Philippines, questions from the survey used in Cambodia, Indonesia, Mongolia and Viet Nam were added to a larger study. As far as possible, the data from both the Philippines and Thailand were matched as closely as possible to the survey questions used in those four countries.
A grandmother files a report with a counsellor at the Child Protection Network Crisis Centre at the Philippine General Hospital in Manila about the sexual abuse of her four-year-old granddaughter.
DEFINING THE SOCIAL SERVICE WORKFORCE

According to the global definition,9 the social service workforce (SSW) is an inclusive concept referring to a broad range of governmental and non-governmental professionals and paraprofessionals who work with children, youth, adults, families and communities to ensure healthy development and well-being. Informed by humanities and social sciences, indigenous knowledge, discipline-specific and interdisciplinary knowledge and skills, and ethical principles, the social service workforce focuses on preventative, responsive and promotive services. Social service workers engage people, structures and organizations to facilitate access to needed services, alleviate poverty, challenge and reduce discrimination, promote social justice and human rights, and prevent and respond to violence, abuse, exploitation, neglect and family separation.10

As the social service workforce is dynamic and context-specific, the global definition urges countries to further contextualize this definition. Consequently, different countries, including those in this review, utilize different country-specific definitions and assign different functions to similar titles of workers comprising the social service workforce.

The social service workforce is comprised of professional and paraprofessional workers. Professional social workers have completed an accredited diploma or degree programme relevant to child protection, such as social work, child and youth care, or counselling. Professional social workers are described as those who do not have a relevant degree or diploma but have completed recognized training of less duration, including certificate courses, short-term pre-service or in-service training. Social workers are often considered the leading professional cadre of the social service workforce. According to the global definition of the social work profession, social workers are professionals with an academic degree, promoting social change and development, social cohesion, and the empowerment of people. However, in many countries, the term ‘social worker’ is used in the generic sense, without someone having professional qualifications through training, registration or licensing.

It is important that efforts to strengthen the social service workforce and, in turn, the child protection system, recognize the full range of actors needed to provide services to children and families, including professionally trained social workers, especially as it concerns the provision of statutory child protection services, as well as other professionals and paraprofessional workers. Paraprofessionals are especially important in contexts where professional social workers are in short supply to provide direct services to children and families. Paraprofessionals typically work next to or supporting the work of a professional in the same field. Working under the supervision and in collaboration with professionals, they play pivotal roles in delivering social services at the community level.

Social service workers may also have a range of titles, such as social worker, child protection officer, case manager, community development officer, child and youth care worker, or probation officer, to name a few, and can also include supervisors, managers and trainers.

Government and non-governmental, professional and paraprofessional social service workers may work together to carry out a range of functions at the macro-, mezzo- or micro-levels of the social service system. The balance of roles and functions between government, non-profit, civil society, faith-based or private sector organizations is dependent on context and culture and varies between countries. In many ways, it is this diversity of workers that makes the workforce strong, as long as they are acting within a well-coordinated and resourced system.

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**Allied workers**, who are professionals and paraprofessionals involved in sectors such as education, health or justice, also play critical roles related to the care, support, promotion of rights and empowerment of vulnerable populations. For example, family court judges, nurses, teachers or police are all integral to the overall care of children. However, they are aligned with other professions and thus are not counted as part of the social service workforce. These roles are differentiated from those such as school counsellors, social workers posted in police stations or child probation officers, who are considered as and identify first and foremost with the social service workforce. While this review may reference examples of collaboration between social service workers and allied workers, it does not provide data or discuss the work of the allied workforce.

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Malaysia, 2014

Social workers from the Department of Social Welfare review their cases.
COMPARATIVE REGIONAL SUMMARY OF SOCIAL SERVICE WORKFORCES

Mapping the development of social service workforces
In order to measure the extent to which countries have progressed with planning, developing and supporting their social service workforce, the following indicators were developed by UNICEF and GSSWA (Table 2) for use in multiple regional workforce mapping exercises in advance of finalizing the Results Matrix for Social Service Workforce Strengthening. By using these indicators, it is possible to map the development of the social service workforce in the region and highlight particular areas of strength or weakness in each country. In Table 2, data are drawn from six countries in which a more in-depth analysis was carried out (Cambodia, Indonesia, Mongolia, the Philippines, Thailand and Viet Nam).

There are differences in the state of national social service workforces and progress in workforce strengthening across countries. The development of the national social service workforce has been influenced by a range of factors, including geographical, social, cultural, legal and political. Those countries in which social services began to be modernised earliest are generally more advanced.

Planning the workforce
Modernisation of the social service workforce:
There has been progress in the planning of social service workforces in all countries. The Philippines and Thailand are the most advanced countries with relatively well-planned social service systems. They have also been modernising the profession of social work practice through legislation and practice since the late 1940s (defined both by roles in the society and by formal recognized education and training). Indonesia has also made significant efforts over the last decades on academic training and regulation of the social service workforce, including by adopting the Social Worker Law in 2019. While in Mongolia, social services have modernised very rapidly from the early 1990s and, in Viet Nam, modernization of the social service workforce has picked up pace from 2010. Cambodia has witnessed relatively slow modernisation of its workforce. The pace of progress is reflected in whether countries have put in place a national strategic plan, a normative framework and a system for registration or licensing.

In the in-depth review, most countries reported being influenced by regional frameworks such as the ASEAN Strategic Framework on Social Welfare and Development, in which investing in professional social work is stated as an important factor in developing child protection capacities.

Normative framework regulating social work profession: Three countries (Indonesia, Thailand and the Philippines) have a clear law regulating professional social work. Laws on social work are being considered by national legislative bodies in Viet Nam and Malaysia at the time of this report.

Size of social service workforces: The size of the workforce is not easy to measure. Precise figures are not available in many countries. Even where data are available, producing a comparative summary is challenging as each country defines the scope of the social service workforce differently. In Mongolia, most of those who are employed in social services have the title social worker, although only some have a recognized social work degree, compared to the Philippines and Thailand where all those titled as social workers have a social work qualification. In all countries reviewed, there is also a reluctance to count volunteers within the workforce, even though they make a necessary contribution, as this is seen as having the potential to undermine efforts to strengthen the workforce, including the adoption of legislation to restrict the title of social worker and to require registration or licensing. Therefore, estimates may not include all sections of the workforce engaged in social services, including NGO workers and volunteers.

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Table 2: Measuring the extent of social service workforce planning, development and support in Cambodia, Indonesia, Mongolia, the Philippines, Thailand and Viet Nam

<table>
<thead>
<tr>
<th>Indicator</th>
<th>Cambodia</th>
<th>Indonesia</th>
<th>Mongolia</th>
<th>Philippines</th>
<th>Thailand</th>
<th>Viet Nam</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>PLANNING THE WORKFORCE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Existence of a national strategic plan on strengthening the social service workforce</td>
<td>partial</td>
<td>partial</td>
<td>partial</td>
<td>partial</td>
<td>partial</td>
<td>partial</td>
</tr>
<tr>
<td>Availability of a normative framework on outlining/defining functions (roles and responsibilities) for social service workers and practice standards</td>
<td>partial</td>
<td>yes</td>
<td>yes, for social workers in child and social protection</td>
<td>yes, for social workers</td>
<td>yes, for social workers</td>
<td>yes, for social workers and social work collaborators</td>
</tr>
<tr>
<td>A system of licensing/registration of social service professionals</td>
<td>no</td>
<td>no</td>
<td>no</td>
<td>yes</td>
<td>yes</td>
<td>partial (registration)</td>
</tr>
<tr>
<td>Number of social service workers with responsibility for child protection per 100,000 children (*specifies SSW with responsibility for child protection; **specifies only qualified social workers; ***specifies SSW in all sectors)</td>
<td>64.4*</td>
<td>80.0*</td>
<td>280.8***</td>
<td>13.8**</td>
<td>20.1**</td>
<td>62.4*</td>
</tr>
<tr>
<td>Vacancy rates of government social service workforce positions by cadre</td>
<td>not available</td>
<td>not available</td>
<td>not available</td>
<td>not available</td>
<td>not available</td>
<td>not available</td>
</tr>
<tr>
<td><strong>DEVELOPING THE WORKFORCE</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total number of degree programmes available to SSW (defined as social work degrees)</td>
<td>4</td>
<td>41</td>
<td>10</td>
<td>127</td>
<td>8</td>
<td>63</td>
</tr>
<tr>
<td>Total number of diploma programmes available to SSW</td>
<td>not reported</td>
<td>1</td>
<td>not available</td>
<td>4</td>
<td>not available</td>
<td>28</td>
</tr>
</tbody>
</table>

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13 For more information on definitions and means of verification for the indicators see - Results Matrix for Social Service Workforce Strengthening (internal) <https://unicef.sharepoint.com/:w:/s/PD-ChildProtection/Ea3Uw21leXpJr5JEhrtXOUL4B5oOp92kC5aVwX-Njzv9fzw?rtime=DkdefIk410g>.
<table>
<thead>
<tr>
<th>Indicator</th>
<th>Cambodia</th>
<th>Indonesia</th>
<th>Mongolia</th>
<th>Philippines</th>
<th>Thailand</th>
<th>Viet Nam</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Total number of certificate programmes available to SSW</strong></td>
<td>3</td>
<td>not reported</td>
<td>not reported</td>
<td>not reported</td>
<td>not available</td>
<td>not reported</td>
</tr>
<tr>
<td><strong>Percentage of degree training programmes that provide at least three months’ field placement with adequate supervision</strong></td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
<td>100</td>
</tr>
<tr>
<td><strong>Percentage of SSW who receive in-service training during last year, by gender (defined in terms of those satisfied with in-service training)</strong></td>
<td>Female 77.9% Male 85%</td>
<td>69% (not available by gender)</td>
<td>Female 65.5% Male 71%</td>
<td>Female 66% Male 62%</td>
<td>80% (not available by gender)</td>
<td>Female 82.7% Male 84.1%</td>
</tr>
<tr>
<td><strong>Existence of professional associations recognized by the national government as legitimate and legally approved</strong></td>
<td>partial</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td><strong>Existence of publicly disseminated professional codes of ethics</strong></td>
<td>no</td>
<td>no</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
<td>yes</td>
</tr>
<tr>
<td><strong>Existence of a system of providing supervision and support</strong></td>
<td>partial</td>
<td>yes</td>
<td>no</td>
<td>yes</td>
<td>partial</td>
<td>partial</td>
</tr>
<tr>
<td><strong>Percentage of SSW who feel they are receiving adequate supervision, by gender</strong></td>
<td>Female 68.4% Male 82.8%</td>
<td>67.25% (not available by gender)</td>
<td>Female 61.8% Male 68.4%</td>
<td>Female 64% Male 51%</td>
<td>22.4% (not available by gender)</td>
<td>Female 85.5% Male 91.1%</td>
</tr>
<tr>
<td><strong>Percentage of SSW who feel there is upward mobility on the job, by gender</strong></td>
<td>Female 92.3% Male 86.9%</td>
<td>36% (not available by gender)</td>
<td>Female 61.9% Male 57.9%</td>
<td>Female 51% Male 44%</td>
<td>63% (not available by gender)</td>
<td>Female 64.4% Male 72.1%</td>
</tr>
</tbody>
</table>

---

14. For different countries, percentage figures include ‘very satisfied’ and ‘satisfied’ or only ‘yes’ responses.
15. For different countries, percentage figures include ‘very effective’ and ‘effective’ or only ‘yes’ responses.
16. For different countries, percentage figures include ‘yes, a lot’ and ‘yes, but not many’ or only ‘yes’ responses.
The reported size of the social service workforce in each country varies hugely. Countries with low social worker-to-population ratios also tend to have limited policies and laws, a lack of clarity on the definition of social work and social workers, a lack of or limited professionalism, limited training and wider community expectations.

In all countries, the bulk of data available on the location of social service workers only covers government ministries and departments. There is also little data on where the social service workforce operates - at national, provincial, district or local levels, or across all levels. The distribution of the social service workforce inevitably varies between countries. The geographical and demographic aspects of a country are always the key determinant in how a social service workforce is structured; political and cultural factors also appear to influence the structure of the social service workforce.

While NGOs (including faith-based organizations [FBOs], where they are identified) provide social services in all countries reviewed, little data is available on the proportion and numbers of the social service workforce located in NGOs and FBOs. Where information exists, it shows enormous differences between countries, and in some locations, the NGO/FBO workforce exceeds that of government agencies.

Vacancy rates: Due to the lack of data, and hence a lack of baseline data, using vacancy rates in social services as a measure of workforce planning was challenging in the countries reviewed. In some countries there are more people reported in the workforce than the official number of positions. However, whether or not countries record large numbers of employed workers, in all of these countries governments are faced with a significant challenge – they have to implement policies to reduce the total public workforce while at the same time implementing policies to increase and strengthen the social service workforce.

Developing the workforce

Education and training: Most of the available information about education and training focuses on degree programmes. All countries have bachelor and master’s degree courses in social work. All of these social work degrees are reported to be meeting internationally recognized standards for field education17, for example in the minimum requirement of three months supervised and assessable practice as part of the degree.18

The vast majority of respondents only recognized degrees in social work as relevant to the profession. At the same time, in all countries reviewed, part of the workforce comprises people who have degrees in other disciplines, whether or not they have the job title of social worker. This is regarded by many respondents to this review as a weakness, both because it limits the way in which professionalisation may strengthen the sector and because it means that degrees in social work are not regarded as necessary to become a social worker. This results in many social work graduates being unable to obtain work within the sector, while people continue to be employed to undertake social work with diverse non-relevant qualifications.

<table>
<thead>
<tr>
<th>Country</th>
<th>Bachelors</th>
<th>Masters</th>
<th>PhD</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>3</td>
<td>1</td>
<td>0</td>
<td>4</td>
</tr>
<tr>
<td>Indonesia</td>
<td>30</td>
<td>7</td>
<td>2</td>
<td>39</td>
</tr>
<tr>
<td>Mongolia</td>
<td>12</td>
<td>5</td>
<td>2</td>
<td>19</td>
</tr>
<tr>
<td>Philippines</td>
<td>93</td>
<td>25</td>
<td>1</td>
<td>119</td>
</tr>
<tr>
<td>Thailand</td>
<td>6</td>
<td>3</td>
<td>0</td>
<td>9</td>
</tr>
<tr>
<td>Viet Nam</td>
<td>54</td>
<td>7</td>
<td>2</td>
<td>63</td>
</tr>
<tr>
<td>Total number of degrees</td>
<td>198</td>
<td>48</td>
<td>7</td>
<td>253</td>
</tr>
</tbody>
</table>

18. The quality of field education may vary significantly across universities within and between countries.
The review also found that those who are paraprofessionals undertake a variety of forms of education and training at diploma or certificate levels. Such programmes exist in all the countries included in this detailed mapping exercise, but the details and value of these programmes are often difficult to assess because of the variation in course titles, the types of education providers and recognition/accreditation mechanisms.

**In service training:** In-service training not only provides knowledge for those who lack more formal qualifications but also continuing professional development for those who are professionally qualified. Changes in law and policy, in organizational systems and structures, and in professional techniques and theory, all create a need for all workers to keep up-to-date. The provision of in-service training is also an effective indicator of whether the workforce is being supported. To a different extent, access to training is widely seen as satisfactory in all countries.

**Supporting the social service workforce**

**Professional associations:** The review explored whether or not there is recognition of professional associations by government. In countries in which there is legislation governing social work or social services more broadly, such associations are often designated for particular roles in relation to setting standards, including codes of ethics, and in holding members of the profession to account for their conduct. Even where there is no specific legislation, government might still work collaboratively with the profession through an association to achieve these ends, contributing to the strengthening of the workforce in that way.

All six countries reviewed had a government recognized professional body – five countries have more than one professional body. The Philippine Association of Social Workers (PASWI) was the first one to be formed in the region in 1947 19, while Cambodia was the last among the six countries to establish such an entity in 2015.

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Table 4: Social workers professional associations in Cambodia, Indonesia, Mongolia, Philippines, Thailand and Viet Nam

<table>
<thead>
<tr>
<th>Country</th>
<th>Association name</th>
<th>Publicly disseminated code of ethics</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>Association of Professional Social Workers</td>
<td></td>
</tr>
<tr>
<td>Indonesia</td>
<td>Indonesian Social Work Consortium</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Professional Social Workers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Social Work and Social Welfare Education</td>
<td></td>
</tr>
<tr>
<td></td>
<td>National Council of Social Welfare</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Social Campaigners</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of College Student of Social Work/Social Welfare</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Social Workers for Children and Family</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Social Workers for Drug Addiction</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Indonesian Association of Social Worker</td>
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<tr>
<td></td>
<td>Association of School of Social Work Students</td>
<td></td>
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<tr>
<td></td>
<td>Association of Extension Worker</td>
<td></td>
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<tr>
<td></td>
<td>Volunteer Association</td>
<td></td>
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<tr>
<td></td>
<td>Community Worker Forum</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Psychological Rehabilitation Network</td>
<td></td>
</tr>
<tr>
<td>Mongolia</td>
<td>Mongolian Association of School Social Workers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Professional Social Workers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Mongolian Association of Social Workers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Health Social Work Development</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Association of Social Welfare Organizations</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Social Work Managers</td>
<td></td>
</tr>
<tr>
<td>Philippines</td>
<td>Philippine Association of Social Workers, Inc. (PASWI)</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>National Association for Social Work Education, Inc.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Local Social Welfare and Development Officers of the Philippines, Inc.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Philippine Association of Court Social Workers, Inc.</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Child Caring Institutions of the Philippines</td>
<td></td>
</tr>
<tr>
<td></td>
<td>National Council of Social Development</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Association of Medical Social Workers</td>
<td></td>
</tr>
<tr>
<td>Thailand</td>
<td>Thailand Association of Social Workers</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>Thailand Association of Social Work and Social Welfare Education</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Thailand Social Work Professions Council</td>
<td></td>
</tr>
<tr>
<td>Viet Nam</td>
<td>Viet Nam Association of Vocational Training and Education and Social Work Profession</td>
<td>X</td>
</tr>
<tr>
<td></td>
<td>National Association of Schools of Social Work</td>
<td></td>
</tr>
</tbody>
</table>
Professional code of ethics: A code of ethics is a statement of principles by which good and bad practice can be defined and understood. Such a code is produced and implemented by a profession independently of any employing organization and is expected to be used by every member of that profession as a standard for each person’s practice. A code of conduct is a set of behavioural standards that is defined by an organization to apply to all its employees, irrespective of which role or function they perform. The Philippines, Thailand, Mongolia and Viet Nam have publicly disseminated codes of ethics. The Philippines and Thailand are also the countries with the most developed professional associations and have a legislative mandate for the social work profession. Other countries refer to ‘codes of conduct.’ Codes of conduct are also used by employing organizations in the Philippines and Thailand. However, there is a difference between a code of ethics and code of conduct.20

Supervision: Within employing organizations, the workforce can also be supported through supervision and in-service training.21 In social services, ‘supervision’ has a particular meaning, which is not simply whether or not an individual’s work is scrutinised in terms of accomplishing tasks, but more importantly whether the worker has access to supportive guidance that enables them to ensure they maintain a high standard in their work and are able to manage the interpersonal and personal demands of working in complex areas of human need (such as in child protection). There are two common but crucial factors in whether supervision is effective: whether the supervisor responds to workers’ needs for advice and support in a timely way; and the supervisor’s capacity to grasp the nature of the work and the issues with which workers are dealing. This second point refers to the extent to which supervisors are trained and understand the nature and demands of social service work. In the region, supervision is often seen entirely in terms of fulfilling organizational functions and not as support and professional development. The survey in all countries suggests that a reasonable framework for supervision is in place, though anecdotal evidence also suggests that understanding of professional supervision may differ from the global definition of this concept.

Upward mobility: Career opportunities are also an indicator of the strength of the workforce. In most of the countries reviewed, social service workers feel they have upward mobility opportunities, while in some countries (e.g., Indonesia) there are perceptions that career opportunities are lacking.

Perceptions of social work and social workers: Across the region, and apparently independent of the degree of professionalisation, all social workers reported that recognition of their role as a profession is impacted by cultural and historical understanding of social service work being related to ‘doing good in the community.’ This perception is widely held, not only among community members, but also politicians and lawmakers, and even other professions. As a consequence, social work is not viewed as a legitimate profession, is often low paid and under-resourced, with the roles and functions of social workers in different settings being ill defined.

Lack of data
A common challenge for all countries reviewed in planning, developing and supporting their social service workforces, is the very limited relevant data that is collected and analysed, especially with regards the scope and size of the workforce. Without data, efforts to professionalise the workforce and increase investment are significantly weakened.

A Social Worker speaks to a teenage girl near her home in Ponhea Leu district, Kandal province. The teenage girl lives in a household affected by domestic violence.
IN-DEPTH COUNTRY WORKFORCE ANALYSIS

This section presents the results of a workforce analysis for Cambodia, Indonesia, Mongolia, the Philippines, Thailand and Viet Nam, who took part in the in-depth review. The analysis combines data collected from surveys, questionnaires and secondary data.

1. CAMBODIA

**Country profile**
- Country population 15,762,000
- Child population 37.1% (estimated 50% aged 22 years or under)
- 146th on the Human Development Index (second quintile)

**Survey and questionnaire respondents**
- 154 social service workers responded to the survey.
- Survey was administered online through Survey Monkey and though interviews.
  - Where respondents work:
    - 50% (77) work in government sector.
    - 45% (69) work in NGOs.
    - 5% (8) did not provide information.
    - 69% (107) are located in one of four urban centres of Phnom Penh, Siem Reap, Battambang and Prey Veng.
    - 31% (47) are from 17 urban and rural locations.
    - 20% (30) are community social workers (volunteers).
  - Demographics of respondents:
    - 43.5% have been working in social services for less than four years.
    - 27% for more than 10 years.
    - 23% of the workforce is aged 30 or younger.
    - 24% aged between 31 and 35.
    - 53% is over the age of 35.
    - 46.4% male; 53.6% female.

1.1 Size and scope of the social service workforce

The social service workforce in Cambodia is employed within government services and the non-government sector (international and national organizations, large and small) at national, provincial, district and commune level. Government services include the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) and the Department of Social Affairs, Veterans and Youth Rehabilitation at provincial (DoSVY) and district levels, and the Commune Committees for Women and Children under the auspices of the Ministry of the Interior.

The social service workforce in the government sector is wide in its scope; the roles are not well differentiated, with only limited separation of child welfare, child protection and social welfare workers. NGOs tend to have more specialised staff.

In 2012, it was reported that the number of people providing social services, as well as other staff in MoSVY was 1,551, with approximately one-third of these individuals working at the national level. One-third of the total at all levels were women.22 According to the questionnaire completed for this review, there are 3,764 social work positions in the governmental workforce. This provides a ratio of 64.4 social service workers per 100,000 children. In addition, it is reported that some ministries other than MoSVY have developed or are seeking to develop social work provision within their services. For example, the Ministry of Health is reported to have a position of medical social worker. However, the number of posts and post holders in this sector, as well as other state sectors delivering social work services, is not known.

The review also noted the large regional variation in the numbers of government social service staff in the relevant offices at provincial and district levels.

22 Harachi, T. W., Review of Social Work Practice: Emphasis on Public Social and Child Welfare, National Institute of Social Affairs, Phnom Penh, 2014, p. 17. There has been no mapping undertaken since 2012 and no updated figures were available for this study.
### Table 5: Number and titles of social service positions within government ministries in Cambodia

<table>
<thead>
<tr>
<th>Ministry</th>
<th>Department</th>
<th>Number of staff in post</th>
<th>Work titles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Social Affairs, Veterans, and Youth Rehabilitation</td>
<td>Provincial Department of Social Affairs, Veterans and Youth Rehabilitation (PDoSVY)</td>
<td>25</td>
<td>Social work official</td>
</tr>
<tr>
<td></td>
<td></td>
<td>17</td>
<td>Child welfare staff</td>
</tr>
<tr>
<td></td>
<td></td>
<td>50</td>
<td>Social agents</td>
</tr>
<tr>
<td>Department of Child Welfare</td>
<td></td>
<td>1</td>
<td>Director of Child Welfare Department</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6</td>
<td>Deputy Director of Child Welfare Department</td>
</tr>
<tr>
<td></td>
<td></td>
<td>6</td>
<td>Chief of Bureau</td>
</tr>
<tr>
<td></td>
<td></td>
<td>9</td>
<td>Deputy Chief of Bureau</td>
</tr>
<tr>
<td></td>
<td></td>
<td>29</td>
<td>Officer</td>
</tr>
<tr>
<td>Department of Social Welfare</td>
<td></td>
<td>21</td>
<td>Childcare Residential Institution Director</td>
</tr>
<tr>
<td>Department of People with Disability Welfare</td>
<td></td>
<td>1</td>
<td>Director of Department of Social Welfare</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Deputy Director of Department of Social Welfare</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3</td>
<td>Chief of Bureau</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Deputy Chief of Bureau</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Officer</td>
</tr>
<tr>
<td>Department of Elderly Welfare</td>
<td></td>
<td>1</td>
<td>Director of Department of Elderly Welfare</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Deputy Director of Department of Elderly Welfare</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Chief of Bureau</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7</td>
<td>Officer</td>
</tr>
<tr>
<td>Department of Veterans</td>
<td></td>
<td>1</td>
<td>Director of Department of Veterans</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Deputy Director of Department of Veterans</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Chief of Bureau</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>Deputy Chief of Bureau</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Officer</td>
</tr>
</tbody>
</table>
Social services delivery relies predominantly on the provincial and district offices of MoSVY. However, the ability of the social service workforce to deliver services is impacted by a high turnover of social workers (compared to the NGO sector), because of low salaries and, more recently, the freezing of positions, which has halted the expansion of this workforce.

The NGO sector has expanded rapidly, with approximately 3,400 national and international agencies of various sizes involved in the provision of social services in 2014. While the respondents to the questionnaire, completed by Social Services of Cambodia, First Step Cambodia, Hagar Foundation, the Partnership Program for the Protection of Children, among others, reported less than 100 NGO social service workers employed, given the size of the NGO sector, it would be expected that if the workforce could be documented it would be a significantly large number.

1.2 Structure of the social service workforce
In recent years, there has been an expansion in the range of social service providers. Traditionally, social services were delivered by religious or other cultural entities, but now there is a wide range of professional and paraprofessional providers involved, from both
government and non-government sectors. The Harachi report notes an apparent mix of the use of terms by the employers such as ‘social service worker’ and ‘social worker’ to describe these providers, which reflects a lack of clarity about roles and responsibilities, as well as qualifications needed to perform assigned tasks. In addition, both government and NGO social service providers recorded 46 different position titles in the survey, e.g., social worker, case worker, community social worker, outreach worker, Commune Committee for Women and Children worker, etc.

While titles are diverse, a large majority of the social service workforce (147, or 96.7 per cent of those who answered) reported having a job description. Only three (2 per cent) did not and a further four either did not answer or were unclear. Only one person reported that while they had a job description, it did not correspond to their work.

The survey provided an indication of the gender profile of the social service workforce - 98 (64.9 per cent) of the respondents were female and 53 (35.1 per cent) were male (3 people did not answer). The social service workforce seems to have a relatively older profile than the Cambodian population, with 70 (47 per cent of those who answered) aged 35 or under and 79 (53 per cent) aged 36 or over (five people did not answer this question).

Within the social services system, the supervision of workers is an important factor for the strength of the workforce. Of the survey respondents, a large majority (137, or 88.7 per cent) stated that they have a supervisor, while only 17 (11.3 per cent) said that they did not (and four did not answer) (Figure 3). Of those who answered, 107 (74.8 per cent) reported that they found supervision arrangements to be satisfactory, while 36 (25.2 per cent) said that they did not. While this suggests that a reasonable framework for supervision is in place, it must be highlighted that anecdotal evidence suggests that understanding of professional supervision in Cambodia may differ from the global definition of this concept.

### Figure 3: Availability and effectiveness of supervision in Cambodia

![Supervision availability and effectiveness](image)

To consider whether the workforce is stable, one key indicator is the length of time people have been in their present job. In the survey, 107 (69.5 per cent) reported being in their present position for four years or less, with 33 (21.5 per cent) in post for between four and 10 years, and just seven (4.5 per cent) for over 10 years (seven people did not answer). A total of 101 people (65.6 per cent of total) have worked in social services for seven years or less. This suggests a relatively new workforce with more limited past expertise to draw from and personnel that are still developing skills within the field (Figure 4).

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24 Ibid.
1.3 Policy and legislation impacts on the social service workforce

Cambodia ratified the UNCRC in 1992. While there is no dedicated law on social work, the role of social workers is mandated by or supported by a number of key laws.

The National Constitution (Articles 46, 47, 48, 73) recognizes the UNCRC and enshrines key rights for children and families, including rights to assistance for unsupported mothers in caring for their children. Book Eight of the Civil Code (2003) contains chapters on ‘relatives’ and on ‘parents and children’, defining responsibilities for the care of children, and at the same time includes powers for social welfare officers to intervene in family life in order to safeguard children. Much of child welfare policy and legislation focus on circumstances where families are unable or unwilling to provide care.

The work of mandated social welfare officers is set out by provision of the Criminal Code (2007) and includes domestic violence against children, as well as laws on nationality, human trafficking, nationality and birth registration. The Law on Juvenile Justice 2016 gives defined powers and responsibilities to social services workers and to social welfare agencies regarding assistance for children in conflict with the law. The Inter-Country Adoption Law (2009) has established clear procedures for the adoption of Cambodian children by adoptive parents residing outside the country. Even though the law does not prescribe the role of the social service workforce in the adoption procedures, it specifies the need for their involvement and affects the work of social services. Legislation concerning adoption of children within Cambodia is still being developed as part of considerations of alternative care policies and practices.

The National Social Protection Framework (2016–2025) focuses on long-term strategies for strengthening social assistance and social security systems in the country, emphasizes the importance of human capital development, including building the capacity of social workers.

Additional specific legal and policy documents relating to child welfare are found in Prakas (regulations), policies, circulars and guidelines which also outline the role of the workforce. These cover issues of out-of-home care, residential care (including orphanages), child labour, the protection of children at risk of harm and to promote child friendly practices in dealing with children in trouble with the law. There are also Prakas and circulars on the organization of DoSVY at the capital, provincial and district levels.

The Cambodia National Council for Children was established by Royal Decree in 2009 to oversee the implementation of child welfare law, policy and social service development at the national and provincial levels. Various sub-decrees provide the legislative and policy foundation for specific social service functions, including drugs and addiction, disability and the protection of those seeking asylum.

1.4 Child protection system

Cambodia’s child protection system is framed by laws (including sublaws) outlined in section 1.3 and overseen by MoSVY. At national level, the ministry is responsible for organization, planning, policy and development of social services. Within the ministry, there is a department on child welfare as well as departments of inter-country adoption, people with disabilities, youth rehabilitation,
social welfare, welfare for older people, veterans, and victims of human trafficking, among others.

At each municipal and provincial level, there is a department responsible for coordinating and implementing social services, while at the city, district and Khan levels there are offices which provide direct social service provision.25

Child protection interventions and the care of children are guided by relevant laws, sublaws, Prakas and decisions. The system relies on strengthening of families and communities, poverty reduction, education, health provision, and other wider social welfare provisions. In this way, emphasis is on the primary level of response to children. For example, the recent Capacity Development Plan for Family Support, Foster Care and Adoption in Cambodia26 is framed around providing safe environments for children to grow and develop, so that children can live safely in their families or circumstances that are as close to family life as possible.

Some studies report that other sectors such as education and health would also like to see child protection and its social service workforce better coordinated with those sectors.27

1.5 Education and training systems for social service work

Approximately one-third of social service workers who completed the survey (49 people, or 31.8 per cent of the total) stated that they have a relevant university degree, with a further 28 (18.2 per cent) having a non-relevant university degree. A further four people (2.6 per cent) have a relevant diploma, and six people (3.9 per cent) a non-relevant diploma, while the largest group of 51 respondents (33.1 per cent) have relevant short-term training and another nine (6.8 per cent) have non-relevant training. Additionally, two people reported having no training and five did not answer. Overall, the levels of education reported by the survey respondents appears to be relatively high. At the same time, those who participated in the questionnaire consider the lack of the training as one of the main challenges of the workforce.

The first academic programme at the Royal University of Phnom Penh was established in 2008. Currently there is a bachelor’s level social work programme at the Royal University of Phnom Penh (the master’s level programme was terminated in 2019), a bachelor’s degree programme at St. Paul Institute and a bachelor’s degree programme at the National Institute of Social Affairs which was established by MoSVY. The degree programmes meet the international standards for professional social work education and 100 per cent of the programmes report requiring field placement. However, it is reported (for example in the questionnaire and also from other sources28) that these degrees produce very small numbers of social workers, most

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25 Royal Government of Cambodia, Sub-decree on Organization and Functioning of the Ministry of Social Affairs, Veterans and Youth Rehabilitation, No: 54 ANKr.BK., Chapters VII and VIII.
28 CoreAssets, Take Me Home – Alternative Care of Children in Cambodia, CoreAssets, Bromsgrove, 2017, p.33.
of whom do not practice in the field and almost all graduate practitioners in social welfare have other qualifications. There are systemic barriers for those who have social work degrees obtaining positions within the government social services including a freeze on recruitment to government agencies and long-standing recruitment practices not giving a priority to the qualified personnel (as stated in the questionnaire and survey responses). It is also reported to be difficult to recruit social workers with academic qualifications to work in regional and remote locations, due to the lack of local candidates and limited motivation of qualified social workers to accept low-paid and under-recognized jobs away from their home.

Social service workers are able to benefit from certificate programmes offered to the government and NGO workforce, e.g., by the Royal University of Phnom Penh. This is especially important as the majority of the workforce did not report having a relevant university degree. In addition, 93 per cent of survey respondents indicate a need for continuing training to effectively perform their work. According to the survey findings, the financial accessibility of the certificate programme and other training offered by different providers is not an issue for about half of the respondents (51.3 per cent). However, 57.7 per cent said that training is not easily accessible geographically. Approximately 82.5 per cent are satisfied with their organization’s investment in their training, and 85.2 per cent are satisfied with in-service training opportunities they have been offered.

1.6 Professionalisation
As noted above, there is a lack of clarity in Cambodia about the roles of social service workers, as well as the distinction between all social service workers and professionally qualified social workers.

There is no legal recognition of the professional title of social worker. This is a weakness in relationship with other professions, whose titles are legally recognized and widely acknowledged. Standards of social work practice have been drafted by a consortium of organizations led by MoSVY and coordinated under the Family Care First project. Standards were adopted by MoSVY in 2019.

The Association of Professional Social Workers Cambodia (APSWC) was formed in 2015, with an executive board comprised of social work graduates. It remains the only professional association existing in the country. The APSWC has approximately 40 members and provides a network for social workers to share ideas about the profession. It is reported that the Association is in the process of creating a professional code of ethics. The Association is also currently developing a proposal for the registration of social workers, with relevant criteria and examinations. The APSWC is reported not to be a member of the International Federation of Social Workers (IFSW) and is not widely known to the social service workforce representatives, either in government or nationally.

Of the social services workers who competed the survey, 13.7 per cent reported being members of the APSWC and half those members joined APSWC recently, from six months to two years ago. Another 50 per cent of members also reported receiving support from the professional association when facing work-related challenges, and 72 per cent said that they receive support in the form of training, updates on the new legislation, etc. The association also provides a forum for exchange of professional ideas and organizes events for International Social Work Day.

Of the 147 respondents who answered the question regarding knowledge of a code of ethics, 97 (65.9 per cent) report being familiar with it. At the same time, 83.4 per cent said that their employing organizations adopted their own code of ethics/code of conduct. As noted above, the process of creating a professional code of ethics is underway in the country and it has not been adopted nationally yet. Hence, as in other countries, it may be that respondents did not distinguish between a code for the professional domain of social services and a code of conduct specific to an employing organization, thereby skewing survey results.

1.7 Existing initiatives and strategies for workforce strengthening in social services
There are several current strategies and national projects for strengthening the workforce in social services. These include the Action Plan for Improving Child Care (developed by MoSVY with support from UNICEF Cambodia); Capacity Development Plan for

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29 Ibid., p.34.
30 Ministry of Social Affairs, Veterans and Youth Rehabilitation (no date), Social Work Standards for Generalist Practice, MoSVY, Phnom Penh; Ministry of Social Affairs, Veterans and Youth Rehabilitation (no date), Training Standards for Generalist Social Work Practice at the Agency Level, MoSVY, Phnom Penh; Ministry of Social Affairs, Veterans and Youth Rehabilitation (no date), Training Standards for Leadership and Management Practice at the Agency Level, MoSVY, Phnom Penh.
Family Support, Foster care and Adoption in Cambodia 2018–2023 (produced by Hague Conference on Private International Law (HCCH), International Social Service (ISS), UNICEF Cambodia and USAID, 2018); Action Plan to Prevent and Respond to Violence Against Children 2017–2021 (Steering Committee on Violence Against Women and Violence Against Children); and Enhancing Alternative Care Opportunities for Children with Disabilities in Cambodia (ISS). The government launched an Action Plan to Implement Juvenile Justice Law in December 2018. All these documents recommend clarifying the roles and functions of the social services workforce, improving training and increasing the size of workforce as priority areas of development. Workforce strengthening is also supported through NGO-supported projects for the development of standards for social work practice and improving public perceptions of the social work profession through the Family Care First consortium and the Study on Alternative Care Community Practices for Children in Cambodia (produced by Coram International with UNICEF Cambodia and USAID). A recently published social work glossary outlining the key terminology in the newly adopted social work standards will facilitate better understanding of the key concepts in the field.

1.8 Social service workforce challenges
The expansion of government social services in Cambodia faces a challenge as the government is aiming to reduce the size of the state workforce.

Survey respondents and organizations that provided information for the questionnaire perceive challenges for the workforce somewhat differently. From the survey, frontline workers and middle and some senior level staff identified the three biggest challenges as high workloads (24.5 per cent), limited resources (19.1 per cent) and low pay (17.7 per cent). In contrast, the sector leaders who responded to the questionnaire on behalf of their agencies emphasized limitations in knowledge and skills of the workforce, low levels of training, lack of graduate staff, weak information and data systems and a lack of clarity in defining work roles. Low salaries were also mentioned as a challenge by some respondents of both the survey and the questionnaire.

1.9 Cambodia: Key considerations
Cambodia has a growing social service workforce, which is largely concentrated in non-profit organizations and in MoSVY at national level, and DoSVYs provincially and local levels. One third of the workforce is located at the national level and therefore focused on policy. At other levels, many work directly with beneficiaries as well as undertaking social development work. The Commune Committees on Children and Women and NGOs also contribute to the workforce. Overall, the child protection system is concentrated on primary services, supported mostly by sub-decrees and policy, rather than laws. Training of the workforce is relatively limited at the university level and training at the pre- and in-service levels lacks a clear structure and coordination.

The social service workforce would be enhanced by the development of a national strategic plan prioritizing the adoption of professional standards for social work; introduction of a normative framework defining roles and responsibilities and a common accountability framework to increase efficiency and effectiveness; increasing governmental resource allocation for the social services workforce; and strengthening and development of officially recognized, certified in-service and pre-service training.

31 Ibid., p. 32
## 2. INDONESIA

| Country profile | • Country population 261,115,000  
|                 | • Child population 32.9% (below average for the region)  
|                 | • 116th on the Human Development Index (top of the medium development range) |

| Survey and questionnaire respondents | • 1,180 social services workers responded to the survey.  
|                                    | • Survey was administered online through Survey Monkey.  
|                                    | Where respondents work:  
|                                    | • 52% (552) work in the Ministry of Social Affairs (MoSA).  
|                                    | • 32% in District Social Affairs offices.  
|                                    | • 4% in Provincial Social Affairs offices and in child welfare institutions.  
|                                    | • 2.5% in the social rehabilitation centre for children in conflict with the law.  
|                                    | • 1.5% for Save the Children.  
|                                    | • Remaining 4% spread evenly across a further 21 agencies or services.  
|                                    | • 91.24% of responses were from social services workers in the government sector.  
|                                    | • 62.1% of respondents are from West Java and Jakarta provinces approximately (although almost all provinces are represented).  
|                                    | • 86.6% are practitioners (including social workers, social extension workers or welfare workers).  
| Demographics of respondents:       | • 65.5% have been working in social services for less than four years;  
|                                    | • 3.9% for more than 10 years.  
|                                    | • 36.55% of the workforce is aged 30 or younger.  
|                                    | • 36.3% aged between 31 and 35.  
|                                    | • 27.15% over 35.  
|                                    | • 50.45% male  
|                                    | • 49.55% female |

### 2.1 Size and scope of the social service workforce

In total, the reported number of social service workers is 68,745 (of whom approximately 45,000 are reported to work in government services), making a ratio of 80 social service workers per 100,000 children (not including approximately 90,000 volunteers).

MoSA social services are delivered by employees and contract employees. It is reported by MoSA that at present there are 1,740 professional and paraprofessional civil servants, including 1,458 social workers and 282 social extension workers/social campaigners in the government social welfare system. In addition, the MoSA has contract employees. Providing cash transfers to the poorest families, the Family Hope programme is the largest contract employer with 40,413 contract staff (at all levels of employment), of whom 36,946 are social extension workers. Up to 322 case workers have also been contracted to work at district level for the Integrated Services for Centres for Child Protection and Women Empowerment. MoSA Child Welfare Programme (PKSA) has contracted an additional 638 social workers and 34 social work supervisors. Further, MoSA has trained more than 90,000 volunteers to assist with social welfare provision.

The scope of the social service workforce is largely defined by each sector. In addition to being employed to deliver child and family services, social workers and social welfare workers are employed/designated to provide services for disability, health and justice.

At present the services of the PKSA are located at national level, although the Law (No.23/2014) on Local Government-Mandated Decentralisation of Social Services for Vulnerable Children is at district level. MoSA and UNICEF are currently piloting integrated child welfare services (PKSAI) at subnational level to enhance service delivery in communities and strengthen the role and the capacity of the social workers/case managers.

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### Table 6: Number and titles of social service positions within government ministries in Indonesia

<table>
<thead>
<tr>
<th>Ministry</th>
<th>Department</th>
<th>Number of staff in post</th>
<th>Work title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Social Affairs</td>
<td>Social Rehabilitation (Child Welfare Programme)</td>
<td>638</td>
<td>Social worker (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>34</td>
<td>Supervisor</td>
</tr>
<tr>
<td>Social Rehabilitation</td>
<td></td>
<td>1,458</td>
<td>Social worker (civil servant)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>282</td>
<td>Extension worker (civil servant)</td>
</tr>
<tr>
<td>Social Protection and Security</td>
<td>Social Rehabilitation (Family Hope Programme)</td>
<td>1</td>
<td>National Coordinator (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>19</td>
<td>Expert (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2</td>
<td>Expert Assistant (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>34</td>
<td>National Administration and Database Officer (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>4</td>
<td>Operator contact centre (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>7</td>
<td>Regional Coordinator (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>64</td>
<td>Provincial Coordinator (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>130</td>
<td>Provincial Administration and Database Officer (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>546</td>
<td>District/Municipal Coordinator (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>421</td>
<td>Supervisor (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>2,143</td>
<td>District Administration and Database Officer (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>36,946</td>
<td>Social extension (government contract)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>96</td>
<td>Extension assistant (government contract)</td>
</tr>
<tr>
<td>Community Empowerment</td>
<td></td>
<td>485</td>
<td>Counselor Centre for family consultation (government contract)</td>
</tr>
<tr>
<td>Ministry of Law and Human Rights</td>
<td>Correctional</td>
<td>1,027</td>
<td>Correctional Officer (civil servant)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>275</td>
<td>Correctional Assistant (civil servant)</td>
</tr>
<tr>
<td>Provincial government (in 33 provinces)</td>
<td>Integrated Services Centres for Child Protection and Women Empowerment</td>
<td>66</td>
<td>Case worker (government contract)</td>
</tr>
<tr>
<td>District government (in 161 districts)</td>
<td>Integrated Services Centres for Child Protection and Women Empowerment</td>
<td>322</td>
<td>Case worker (government contract)</td>
</tr>
</tbody>
</table>
2.2 Structure of the social service workforce

Based on data from the Center for Professional Development of Social Workers and Social Extension Workers under MoSA, there are two levels of social service positions and qualifications within the government; expert social workers, who are university graduates, and skilled social workers who are graduates from vocational schools of social work.

For expert social workers in MoSA, there is a four-stage career ladder - primary, junior, middle and expert social workers. In addition, MoSA employs social extension workers/campaigners who are also considered experts and, therefore, have the same career ladder as the expert social worker. To progress between levels, certain requirements must be met, including specific further training. The more senior positions include supervisory and management grades.

Within MoSA, there are three directorates that contribute to social service work with children and families: the Directorate of Children’s Social Services (which comes under the Directorate General of Social Rehabilitation and Services); the Directorate of Social Security for Family Welfare (under the Directorate General of Social Security); and the Directorate of Social Empowerment for Individuals, Families and Institutions (under the Directorate General of Social Empowerment). MoSA also has research and training units focused on social work and social welfare. In addition, the Ministry of Health and Ministry of Justice operate sections that have a social welfare functions and employ social workers, while the Ministry of Women’s Empowerment and Child Protection focuses on overarching child rights issues.

A total of 1,162 of 1,180 survey respondents (98.5 per cent) reported having a clear role and corresponding job description (97.9 per cent). Of those who did not have a job description, only a very small number (less than 1 per cent) saw this as negative, while others said they are ‘happy to serve the community’ or noted that they are ‘doing useful things for vulnerable children.’ Of those whose job description did not always match their work, they recognized additional tasks were necessary or even helpful and some acknowledged their employer has limited resources.

In addition, 1,116 social services workers reported having an immediate supervisor (94.6 per cent), of whom 70 per cent stated that supervision is effective (Figure 6). This means that only two-third of the workforce included in this survey has effective supervision.

The survey found that the social service workforce in Indonesia is relatively fluid between employers. The large majority (70.8 per cent) have worked for their current agency for less than four years, with most of this group having had a previous employer. A smaller proportion (27.3 per cent) have been with their current agency for between four and 10 years, while only a very small number (1.9 per cent) have been in the same agency for more than 10 years. The predominant reason for moving between agencies appears to be for career advancement opportunities.

Figure 6: Availability and effectiveness of supervision in Indonesia
2.3 Policy and legislation impacts on the social service workforce

Indonesia passed the Social Worker Law in September 2019. The law enshrines a definition of ‘social worker’ – a person who has the knowledge, skills and value of social work practices and has obtained a certificate of competence. This definition provides opportunities for those who are do not have a professional education in social work to be certified through a special mechanism, within five years since the law was enacted. The law defines social work practice as the organization of planned, integrated, continuous and supervised professional help to prevent social dysfunction, restore and improve the social functioning of individuals, families, groups and communities. The law regulates social work practices in areas equivalent to MOSA’s existing mandate for prevention of dysfunction; social protection; social rehabilitation; and social development.

The Law on Social Welfare (2009) established the career structure of four categories within the social service workforce (social worker, social welfare worker, social extension worker and social volunteer). The same categorisations are provided for in the Law on Juvenile Criminal Justice (2012). This latter law is oriented towards restorative justice and emphasizes an educative and welfare approach to young offenders. Other relevant legislation includes the Law on Human Rights (1999), the Law on Elimination of Domestic Violence (2004), the Law on Citizenship (2006), the Law on Protection of Witnesses and Victims (2006), the Law on Anti-Trafficking (2007), the Law on Local Government (2014), the Law on Mental Health (2014), and the Law on Disability (2016), all of which contain sections relevant to social services, including for children and families.

Social welfare concerns, including those affecting children and their families, are embedded in various other governmental decrees and policy documents, such as the Decree on Certification of Professional Workers and Social Welfare Workers (2009), Minister of Social Affairs Decree 108/2015 on certification, and Decree 16/2017 on Standards of Social Welfare Workforce. There are also national policies focused on children such as the National Standard of Care for Children in Institutions (2011)34, the National Action Plan for Child Protection 2015–2019, and the National Strategy on the Elimination of Violence Against Children 2016–2020 (which is yet to be implemented).

2.4 Child protection system

The Indonesian child protection system is governed by the Law on Child Protection (Number 23/2002) and contains elements at primary, secondary and tertiary levels. At the primary level, policies and services to promote the capacities of families and to provide information exist across several sectors. These include social protection and poverty alleviation, as well as health and education. At the secondary level, there are social services to provide for the well-being of children specifically, including children with disabilities, street

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children and children in conflict with the law.\textsuperscript{35} Tertiary level interventions at subnational levels are delivered through a network of services coordinated by local government. Social workers are core to the delivery of these services. MoSA is rolling out the Integrated Child Welfare Programme (PKSAI), which includes secondary and tertiary interventions, into this subnational mechanism. In earlier years there was some criticism that tertiary level interventions were not always well targeted and sometimes can unintentionally lead to the institutionalisation of children (leading to problems of ‘net-widening’ or ‘over-reach’), as well as tending to be less available outside urban centres.\textsuperscript{36} Currently the UNICEF country office is supporting MoSA in piloting an integrated child welfare service model, in order to improve the linkages between child protection services, child and family support services and social protection mechanisms available in the country. MoSA is in the process of rolling this out from 5 to 116 districts. However, the limited number of social workers creates challenges in implementing the model in all districts.

2.5 Education and training systems for social service work

Professional and paraprofessional social work education is accredited by the Social Work Certification Body, jointly established by MoSA and the Indonesian Social Work Consortium as an independent entity. The Social Work Certification Body sets competence standards for social workers and social welfare workers, specifying relevant knowledge, skills and values to be addressed in training. Under ministerial decrees of 2009 and 2015, certification of training lasts for five years, after which it is to be renewed. Since 2017 there is a requirement that all social workers employed in social service must be certified.

At present 28 universities in Indonesia offer a bachelor’s degree in social welfare, two offer a bachelor’s degrees in social development and one offers a bachelor’s degree in community development. Masters degrees in social welfare are offered at the Bandung School of Social Work, University of Indonesia, Islamic Public University of Yogyakarta, Widuri College of Social and Politic Science of Jakarta and University of Muhammadiyah Jakarta, which offers six masters of social welfare programmes, while University of Gadjah Mada provides a masters degree in social development. The University of Indonesia and the University of Padjadjaran offer doctorates in social welfare. MoSA has a School of Social Work providing bachelor and masters programmes, for the public, as well as MoSA staff. In addition, there is the Vocational School of Social Work, which is a high school offering a four-year programme to enable students to major in social work at the secondary school level.

The large majority of those responding to the survey have undertaken training, with 86.4 per cent at degree level and a further 13.4 per cent at diploma level (Figure 8).

\begin{figure}
\centering
\includegraphics[width=\textwidth]{figure8.png}
\caption{Highest levels of academic qualification for social workers in Indonesia}
\end{figure}


However, although the Indonesia social service workforce is highly educated and there is a wide range of higher education social work and welfare programmes on offer, just 60.85 per cent of the respondents surveyed reported having education and training in fields relevant to social services work. This may (at least partly) explain the very large proportion who state that they see a need for additional training (1,129 or 95.75 per cent), with many instances of foundational social work knowledge and skills being referred to as training needs (such as counselling, case management, community development and advocacy). Specific areas of social need are also seen as training gaps, including children in conflict with the law and other areas relating to the needs of children. Approximately half of the respondents who indicated that there was a need for further training highlighted that cost is a barrier. Although almost 80 per cent (944) said that training is geographically accessible, the majority of training opportunities are located in west and central Java raising questions about accessibility in other provinces. Approximately 64.5 per cent (761) are satisfied that their organization is investing in training and 69 per cent (814) are satisfied with the training opportunities they have been offered.

It is important to note that the new Social Worker Law has specified that social work professional education must be established within five years of the adoption of the law. The law also specifies that while universities can continue to run professional education courses on social work, a standardised competency test will be established and administered by universities in cooperation with the social workers’ organization, in accordance with the regulation from the Ministry of Research, Technology and Higher Education.

2.6 Professionalisation

The Indonesian Social Work Consortium brings together social work bodies related to the professionalisation of social work. The consortium was formed on August 10, 2011, as a forum to discuss, design and drive the strategic agenda for development of social work. Members of the consortium include the Association of Professional Social Workers (IPSPI), the Association of Social Work and Social Welfare Education (member of IFSW), the National Council of Social Welfare, the Association of Social Campaigners, the Association of College Student of Social Work/Social Welfare, the Accreditation Body of Social Welfare Institutions, the Certification Body of Social Workers, the Indonesian Psychosocial Rehabilitation Network, the Association of Social Workers for Children and Family, the Association of Social Workers for Drug Addiction and MoSA. The establishment of this consortium follows the establishment of the Social Work Consortium of ASEAN (ASWC) and was part of the 2011–2013 ASWC’s work plan.

IPSPI is legally registered, with laws and by-laws, and social workers are required to be members of this body. Certification began in 2016 and since then 833 social workers and 588 social welfare workers have registered (2 per cent of the entire workforce). Certification has been widely supported from the ministry to field services level, as it is intended to promote knowledge and respect for trained social work and social welfare workers.37

Of those social services workers who competed the survey, 530 (44.9 per cent) are members of a professional association. Of these, 81 per cent are members of IPSPI. The remaining social services workers are members of associations for medical doctors, lawyers, psychologists, nurses and midwives and public health. Of those who are members of an association, 83.6 per cent said that they receive support from that organization when facing challenges in their work. The types of assistance received include networking, case management support, advice, problem solving, supervision and advocacy.

IPSPI has a code of ethics. Up to 94.3 per cent of survey respondents (1,114 people) correctly stated that there is a code, while 0.4 per cent (4 people) think that there is no professional code of ethics; the remaining 5.3 per cent (62 people) are not sure. However, of those who indicated they knew about the code of ethics, just under half reported signing up to it, although this may be because they are members of the association and regard membership as a commitment to the code. In addition, 79.7 per cent (942 people) are aware of their employer having a code of conduct, with 12.4 per cent (146) being uncertain and 7.9 per cent (92) thinking that it did not. As there are many social services organizations included in this survey, this second finding may be accurate, if some smaller organizations do not have a code of conduct.

The new Social Worker Law 2019 enshrines the role of a social workers’ organization – it is established as an independent body and is charged with developing a social workers’ code of ethics. It is also mandated to conduct registration, strengthen capacity on social work and conduct supervision. The law also envisages the establishment of an ethics board. In addition, existing social worker organizations must adjust their missions, duties and authorities in line with the new law no later than two years from enactment.

2.7 Existing initiatives and strategies for workforce strengthening in social services
First, the policy for the extension of PKSA aims to provide assistance to vulnerable children across areas which currently are not effectively served. Roll out of the model will necessitate an expansion of the social service workforce in the target locations. It is also reported that all supervisors in this programme will become certified social workers.

Second, the National Action Plan for Child Protection 2015–2019 promotes investment by all stakeholders in child development, including social services. The National Strategy on the Elimination of Violence Against Children 2016–2020 promotes the review of legislation and policy in order to strengthen services to prevent and respond to violence against children. Also, to strengthen the capacity of the social service workforce, both Save the Children and UNICEF Indonesia are or are planning to provide specialist training in child safeguarding, psychosocial support, case management, positive parenting, and integrating child protection and hygiene promotion, together with MoSA and the Ministry of Women’s Empowerment and Child Protection.

2.8 Social service workforce challenges
There is a difference between the perceptions of practitioners about challenges in the social services system and those of supervisors, managers and policymakers. The challenge that is reported most commonly by practitioners is that they have poor working conditions, whereas for the more senior staff, the most common issue is weak information systems. Practitioners also more frequently refer to lack of career opportunities and poor pay as challenges, whereas the senior staff identify ineffective inter-agency collaboration and the lack of assessment of workforce needs (in the sense of knowledge about what types of roles and where they might be best located) as the biggest challenges. The one area on which the two groups are agreed is the need for more continuing training opportunities.

2.9 Indonesia: Key considerations
Indonesia has an established social service sector, with social welfare workers in child and family services, women’s empowerment, disability and health services, and the justice sector. Most of the workforce assessed for this report is in the government sector, using contracts with large direct services providers. These services are all grounded in an extensive series of laws, with ongoing policy development. There is a three-tier child protection system, although the tertiary level has recently been criticised for an approach that leads to unnecessary institutionalisation. The workforce is relatively well trained with degrees and vocational diplomas in social work and social welfare, at all levels, despite the disparities in the numbers and competencies of the workforce across the county. Since 2017, all social workers must be certified, and this process is ongoing. However, there is a continuing need to improve the recognition of professional and paraprofessional level qualifications. A national consortium of social work organizations is supporting this move.

The recent adoption of the Social Worker Law, as well as the subsequent development of the accompanying regulatory framework, provides an opportunity to both strengthen the social service workforce and address key challenges.
### 3.1 Size and scope of the social service workforce

Figures provided by the Authority for Families, Children and Youth Development (AFCYD), which sits under the Ministry of Labour and Social Protection, show that there are 2,856 social service workers employed within the government sector. Thus, there are 280.8 government social service workers per 100,000 children in Mongolia. This number includes all government ministries, including not only the Ministry of Labour and Social Protection at aimag/district level and local government (soum, khoroo and bagh), but also social workers in education, health and justice.

Administratively, Mongolia is divided into 21 aimags (provinces), plus the capital city of Ulaanbaatar. These in turn are subdivided into 330 soums plus nine districts of the capital city, and then further subdivided into 1,613 baghs (within soums) and 152 khorooos (in the districts of the capital city). Social service provision occurs at all levels.

Social workers are responsible for a range of functions. Policy development is part of the overall role of the sector at the national and local levels. In child and family development centres, they provide parenting education, undertake assessment and referrals, and respond to domestic violence allegations, as well as more general family welfare tasks. In schools and colleges, they provide counselling and also assist in child protection matters, for example, by providing information for teachers, as well as making referrals for individual students. They are also involved in undertaking assessments of children at risk, case planning and management, referral to specialist services, family counselling and rehabilitation (family reunification). At community level, they undertake awareness raising and campaigning, as well as networking and engaging the NGO sector. As there is only one social worker with a local social development role in each khoroo or bagh, they also engage in a wide range of other community activities. Although much of the work is undertaken with children and families and recent studies have reported that 77 per cent of social services workers have child protection responsibilities in their job description, most of these positions have responsibilities across a range of social issues and needs.

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Table 7: Number and titles of social service providers within government ministries in Mongolia

<table>
<thead>
<tr>
<th>Ministry</th>
<th>Department</th>
<th>Number of staff in post</th>
<th>Function and roles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Labour and Social Protection</td>
<td>Family, Children and Youth Development Agency (AFCYD)</td>
<td>58</td>
<td>Professional staff responsible for developing and implementing public policies for children, youth and family development and child protection.</td>
</tr>
<tr>
<td></td>
<td>AFCYD - Childcare Centre ‘Unur Bul’ (state orphanage)</td>
<td>103</td>
<td>Social workers, psychologists, teachers responsible for 24/7 childcare for orphan children.</td>
</tr>
<tr>
<td></td>
<td>AFCYD – Temporary shelter</td>
<td>15</td>
<td>Protection of children that requires immediate protection services.</td>
</tr>
<tr>
<td></td>
<td>AFCYD – Hotline 108 service</td>
<td>24</td>
<td>Hotline services for child protection and response.</td>
</tr>
<tr>
<td></td>
<td>AFCYD – aimag and district level branch offices</td>
<td>516</td>
<td>Professional staff responsible for implementing state policies for children, youth and family in their locality.</td>
</tr>
<tr>
<td></td>
<td>National Child Right inspectors</td>
<td>38</td>
<td>Inspection of child rights incidences.</td>
</tr>
<tr>
<td></td>
<td>GALSWS – Soum government social policy specialist (former social workers) and bagh/khoroo social workers</td>
<td>450</td>
<td>Organizing and delivering social protection services.</td>
</tr>
<tr>
<td>Ministry of Health</td>
<td>Family health clinics</td>
<td>240</td>
<td>Social work positions</td>
</tr>
<tr>
<td></td>
<td>Professional social workers at regional hospitals</td>
<td>39</td>
<td>Social workers</td>
</tr>
<tr>
<td></td>
<td>At provincial and local soum health centers</td>
<td>35</td>
<td>Social workers</td>
</tr>
<tr>
<td></td>
<td>At family clinics in the capital city</td>
<td>50</td>
<td>Social workers</td>
</tr>
<tr>
<td>Ministry of Education</td>
<td>School social workers</td>
<td>704</td>
<td>Social workers</td>
</tr>
<tr>
<td></td>
<td>Vocation education and training schools social workers</td>
<td>70</td>
<td>Social workers</td>
</tr>
<tr>
<td>Ministry of Justice</td>
<td>Law enforcement</td>
<td>10</td>
<td>Child inspectors at the police office.</td>
</tr>
<tr>
<td></td>
<td>Correction centres/prison social workers</td>
<td>56</td>
<td>Social work services for prisoners and inmates in correction facilities.</td>
</tr>
</tbody>
</table>

3.2 Structure of the social service workforce

As noted above in section 3.1, social workers are employed at national (ministries, AFCYD), provincial (Ulaanbaatar City/aimags), district (soum), and local (khoroo/bhag) levels. Roles may be titled either social worker or social development worker. Social workers are also employed in NGOs, including international NGOs, which are almost all located in Ulaanbaatar. However, the total number of social workers employed by NGOs is unclear. Although the geographical allocation of social services workers is proportionate with the spread of the population, social services are more difficult to access, and specialist assistance is less available, in rural areas than the cities.
At the district and local levels, of soums and khoroo, some social services workers are located in services administered by the General Agency for Social Welfare Services (Ministry of Labour and Social Protection) and others are employed by the soum or khoroo governments. Those employed at local government level are divided between social worker and social development worker roles.

Social services workers who completed the survey are fairly representative of the workforce as a whole. Most of those who responded to the survey (146, or 96.7 per cent) say that they have a job description. However, only 114 (78 per cent) of those who have a job description state that his/her work fits the job description, and 3.3 per cent who have stated that they do not have a job description are hired on a temporary contract.

Multi-disciplinary teams (MDT) have increasingly been established nationwide since 2003, to bring together social services workers, teachers, police, health professionals and the local governor. The 2016 Law on Child Protection mandated MDTs for child protection work, and MDTs also have a role in domestic violence interventions. However, interventions on this issue are not prioritized, with soum, khoroo and bagh governors apparently allocating other responsibilities to social workers in place of combating domestic violence.

Child protection mapping research undertaken in 2014 concluded that there is no recognized form of professional supervision. Other aspects of management such as direction and appraisal were done according to each organization’s practice. For example, in the soum, khoroo and bagh services, supervision often appears to take the form of managerial instruction. Only a minority (24 per cent) of social workers surveyed for the 2014 study reported that they found this satisfactory. In the current survey, 134 (88.7 per cent) respondents stated that they had a supervisor, but of these only 89 (63.6 per cent) found it to be satisfactory (Figure 9). Respondents who reported that supervision is unsatisfactory also report that it is largely focused on organizational requirements, such as receiving instructions and not on providing guidance and consultation in terms of practice standards, skills and knowledge, or of personal development.

The 2014 study found that staff turnover is high. In contrast, results from this study indicated 44.3 per cent of people had worked in their present position for less than four years, 41.1 per cent from four to ten years, and 14.3 per cent had worked in their present post for over 10 years (Figure 10).

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**Figure 9: Availability and effectiveness of supervision in Mongolia**

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43 Ibid., p. 53.
3.3 Policy and legislation impacts on the social service workforce

In Mongolia there are a number of laws that are relevant to social services. The Law on Social Welfare (2012) not only provides the foundation for modern social welfare services, but specifically through Article 28 defines the social work profession and its functions, regulates education and training, and requires a code of ethics. According to the law, the social worker “must hold a bachelor or higher degree in social work, be trained through specialized professional training, and hold a required license/permission for conducting social work duties.” However, the creation of an Adjunct Council to manage the issuing of licenses to conduct social work services (Article 28.4) is yet to be completed and the licensing of workforce is still debated in Mongolia. In 2009, social work training and licensing procedure was approved by a joint decree of two ministries. However, it was not implemented due to a number of reasons, including the fact that most social work positions are not occupied by professional staff (around 85 per cent).44

The Law on the Rights of the Child (2016), the Law on Child Protection (2016) and the Law on Combating Domestic Violence (2016) each identify social work roles and functions and mandate relevant areas of practice. Each provide a specific mandate to social workers, defined as a professional or government officer whose role is to provide social services. Such roles are specified in terms of receiving notifications, assessing, safeguarding, allocating services or making referrals, and, where appropriate, undertaking family reunification. These laws also mandate the function to undertake multi-agency and systemic action.

Before the introduction of the Law on Child Protection, MDTs were established from 2003 to integrate the work of various sectors, including law enforcement, education, health and social services.45 The 2016 law provides greater definition of the roles and responsibilities of key professionals, particularly social workers and child rights workers (for example, in Articles 19 and 20 where legal powers and duties are stated), as well as teachers, health professionals and the police.

There are also other areas of policy and law that are related to very specific issues, such as policies about unsupervised children and children working as jockeys.46

3.4 Child protection system

Mongolia ratified the UNCRC in 1990. However, until recently, there was no national child protection policy or a national child protection system.47

In the government-adopted National Programme of Action Plan on Child Development and Protection (2017–2021), priorities are outlined for strengthening families, introducing counselling services for families, developing services for children without parental care,
etc. In 2013, aimags established a designated child protection position in each soum, called Children and Family Development Worker, which is seen as best practice and has been replicated throughout the country. Establishment of the Centres for Children and Family Development in every district was an important first step in bringing child protection services closer to urban communities.

The National Authority on Children was established in 1990. In 2012, it became the Authority for Family, Child and Youth Development (AFCYD) and is located within the Ministry of Labour and Social Protection. It is the main agency implementing child-related policies in aimags and the capital city through its departments and divisions for children and family development. AFCYD runs a variety of services, such as the Child Helpline (a hotline operated by social work and psychology staff), ‘Unur bul’ institutional childcare centre, Child and Family Development Centres in provinces and districts (offering social work and psychological assistance to families), and the Nairamdal International Youth Camp.

The Law on Child Protection provides a framework for a child protection system and outlines the mandatory services which shall be provided to all children in the country, namely the assessment, safeguarding, referral, reunification, and provision of services by the juvenile justice committee. It mandated the establishment of MDTs to address child protection. Established by governors’ resolution at soum and khoroo levels, MDTs consists of social workers in charge of children and families, school social workers, primary health centre medical practitioners, police, and other professionals. The roles include prevention of violence against children and domestic violence; identification and assessments of children at risk of abuse, referral and follow up. Up to 609 MDTs are in operation nationally.

A 2014 mapping of national child protection services showed that Mongolia has primary, secondary and tertiary level services contributing to child protection. Some examples of interventions discussed in the report are advocacy campaigns to promote child protection and positive discipline (primary); children’s helpline, MDTs (secondary); rehabilitation services for child victims of abuse and neglect (tertiary). However, there is no geographical uniformity for the way in which the Law on Child Protection is being implemented. It remains to be seen how the recent laws will enable a more systematic and country-wide system and service development.

3.5 Education and training systems for social service work
Social work started to be taught at universities from 1996 and is now available at bachelors, masters and doctoral levels in 10 universities. All social work degree programmes prepare generalist social workers and have a range of elective specialized courses. However, many students comment that the programmes tend to be highly theoretical, with limited social work practice opportunities.

Of the 151 social services workers who completed the survey for this study, 46 (30.5 per cent) have degrees in social work, 103 (68.2 per cent) have university degrees in unrelated areas, and just two people (1.3 per cent) have a non-university diploma (Figure 11). Within this sample, school social workers and those who described their job title as social worker were more likely to have social work degrees. In schools, 46 per cent have professional degrees in social work and 51.9 per cent of those who stated their job title simply as ‘social worker’ have a social work degree.
There are specialised in-service training programmes in child protection, funded from the state budget and offered by AFCYD through its local branches and training, research and information centre. The AFCYD training programme is reported not to have a standard curriculum and mainly focused on new law provisions. Although 129 (85.4 per cent) of the 151 social services workers who were surveyed for this study said they need additional training for performing their work and 83 (55 per cent) reported that they are satisfied with on-going training, compared to 60 (39.7 per cent) who said that they are not satisfied (the remaining eight (5.3 per cent) did not comment). Access to training is affected by geography and financial cost; 93 respondents (61.6 per cent) reported that training is accessible in terms of location and 64.5 per cent stated that it is financially accessible (including 25.8 per cent who stated that training is free, and 4.6 per cent, did not answer this question). Access to training is slightly gendered, with 53.2 per cent of women saying that it is accessible, compared to 63.2 per cent of men.

The 2014 study found that only 31 per cent of participants were social services workers, while 41 per cent were teachers, 7 per cent psychology and law, 3 per cent health, and the remaining 11 per cent with other backgrounds.

This illustrates that training in the social service sector is not systematic. It is also reported not to be assessed to a common standard. For example, in the 2014 mapping of the child protection system, it was noted that the standard entry test for employment in the government was not taken by all employees and that even when it was used it was not regarded as sufficiently adequate to ensure appropriate knowledge, skills or ethical standards.53 Administered by the Civil Service Committee, this entry exam for civil servants is not social work field specific.

3.6 Professionalisation

Despite legal provisions defining social worker as a professional holding a bachelor or higher degrees in social work (Law on Social Welfare), there are many social workers who have not graduated from the social work programmes.

Further, the role of child rights worker defined in the Law on Child Protection (2016) shares some powers and duties with the role of social worker when it comes to responding to child rights violations. The law defines a child rights worker as personnel or an officer who has a state inspector’s powers and functions in respect to child protection.

The first Mongolian Association of Social Workers was founded in 1997 and is a member of IFSW. Subsequently there are six associations (school social workers [2001], social work educators [2002], professional social workers [2002], social work managers, social welfare and health social workers [2006])54, but they have not been able to ensure wider recognition for the profession, possibly because they have divided by sectoral identities. Current figures for membership of these professional bodies is outdated because they do not update the membership on a regular basis. Of the

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social services workers surveyed for this study, only 12 (7.9 per cent) are members of a relevant association, with seven of these being school social workers. It is these school social workers who tend to report membership of the association to be beneficial and to have received support from the association. Limited membership amongst those surveyed is also linked to the fact that professional associations, besides being inactive, are clustered in the capital city and do not have local branches to reach out to the workforce in the rural areas.

The code of ethics for Mongolian social workers was developed in 2006 by a group of professionals and endorsed at the national forum of professional associations, academia and government representatives organized under auspices of the Parliament Standing Committee on Social Policy, Education, Culture and Science. It was adopted by the government in 2016. In 2019 a social work ethics committee was established and included representatives of all line ministries, professional associations and academia. There is relatively widespread recognition of the existence of a code of ethics among the workforce, with 108 of 151 people (71.5 per cent) surveyed indicating that they are aware of a code of ethics (and 30 [19.9 per cent] being uncertain rather than reporting that there is not a code). This may be attributable to the Law on Social Welfare requiring social workers to adhere to it. Up to 113 (74.8 per cent) reported that their own organization has a code of ethics or code of conduct (again with 19 [12.6 per cent] being uncertain).

3.7 Existing initiatives and strategies for workforce strengthening in social services
The current laws on child protection and child rights, together with the law combating domestic violence were passed only in 2016 and are still in the process of being implemented. UNICEF Mongolia has also made recommendations for strengthening practice in receiving, assessing and responding to reports of child harm by allocating clearer roles to social workers and child rights workers at all levels of the government (national, provincial, district and local).

3.8 Social service workforce challenges
Of the challenges reported most frequently by social services workers, two are extremely common. A total of 110 people (76.9 per cent) stated that low salaries are a problem, and 104 (74.8 per cent) said that they also face high workloads. The next most challenging issue is lack of career advancement (29, or 20.3 per cent). Poor working conditions are also seen to be a problem by 28 (18.9 per cent). These perceptions are held quite evenly across the different social services roles amongst the survey respondents. Lack of opportunities for career advancement may influence the rate of movement between jobs rather than satisfaction with their current position – a significant proportion of respondents reported being in their present role for more than four years or more.

3.9 Mongolia: Key considerations
Given the high number of social service workers in the Ministry of Labour and Social Protection, and school social workers, with child protection responsibilities, social services in Mongolia are very much focused on children and families. However, there is a lack of national uniformity for child protection and other social services. Further development of the social service workforce would be assisted by greater recognition of social work qualifications; clarity of the role of social workers in child protection; standardization of in-service training and field practicum; and development of the professional supervision system.

## 4. PHILIPPINES

### Country profile
- Country population 103,320,000
- Child population 37.9%
- 113th on the Human Development Index (top of the medium development range)

### Survey and questionnaire respondents
- 490 social service workers responded to the survey.
- Survey was administered through face-to-face interviews and e-mail in 10 provinces, the National Capital region of Luzon, and three major geographical divisions of Luzon, Visayas and Mindanao.

Where respondents work:
- 39% (191) are social workers.
- 46% (225) are non-social workers (paraprofessionals involved in day care, residential care, community mobilization, administration, etc.).
- 14% (68) did not specify their position.
- 77% (379) work in government.
- 22% (113) work in NGOs.

Demographics of respondents:
- 29% (142) have been working in social services for less than four years.
- 28% (137) for 4 to 10 years.
- 23% (113) for over 10 years.
- 19% (98) did not respond.
- 24% (118) are aged 30 years or younger.
- 18% (88) aged between 31 and 40 years.
- 17% (83) is over the age of 40.
- 18.0% male
- 82.0% female

The mapping exercise in the Philippines was undertaken by the University of the Philippines Sikhay Kilos Development Association Inc. for UNICEF Philippines. The review looked at ten provinces plus the National Capital region of Luzon, in three major geographical divisions Luzon, Visayas and Mindanao.57

### 4.1 Size and scope of the social service workforce

Although the social service system in the Philippines has been established for many decades, much of the recent development in the field has been influenced by responses to the aftermath of Typhoon Yolanda (Haiyan) in 2013.

The exact number of people in the Philippines’ social service workforce cannot be stated, as official figures collapse these numbers within other, broader figures (such as the health services workforce). In 2018, the Department of Social Welfare and Development (DSWD) recorded 27,953 people in posts across all types of employment and contracts (including permanent and contractual (fixed term) officers of the DSWD and three other types of employment including memoranda of understanding, job order and casual). Out of this number, DSWD reported there were 5,423 registered social workers.58 Up to 3,532 registered social workers were direct government employees, with the remaining 1,891 registered social workers being in less secure forms of job tenure.

Based on the figure of 5,423 registered social workers, the ratio of government social workers per 100,000 children is 13.8 and on average there is one social worker for each municipality. These figures do not include non-registered social workers, social workers from health, education, and justice (such as social workers in hospitals or in corrections) and does not include social service workers employed by local, national and international NGOs and FBOs. In general, the number of registered social workers does not include the workforce employed in social work positions but with other qualifications, nor those paraprofessionals who provide social services.

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57 Ibid., p. 12.
Social work is considered to include casework and counselling with individuals, families and groups, case management, service administration, community development, policy development and research. While services for children and families are a major part of this work, community corrections, health (including mental health), services for people with disabilities, services for older people and poverty reduction are all areas of social service activity. Social workers in DSWD and other organizations address many types of child protection and related family issues, including victims of family violence and neglect, children in hazardous and exploitative labour, children on the streets, victims of sexual abuse and commercial exploitation, victims of trafficking, children separated from or having lost their parents, children in conflict with the law, children in situations of armed conflict, children with disabilities, girl children, children of indigenous peoples, and children affected by HIV/AIDS.

A UNICEF report in 2016 noted that the workload for social service workers is very large, while resources are often limited.59 Child protection is only one of their responsibilities, and in crises, such as natural disasters, their workload can be unmanageable. In recent years, social services workers have taken on major roles in response to disaster relief and reconstruction. The Philippines has faced typhoons, floods and earthquakes; the country is ranked fourth in severity of the impact of such disasters. In addition, displacement also occurs because of the violence resulting from internal armed conflict, leading to generalized community violence and human rights violations. Some development schemes such as infrastructure, energy, waste and watershed management projects can also cause displacement and impoverishment of families. The 2016 UNICEF report identified social service workers as a key part of the wider body of humanitarian responders in the Philippines.60

4.2 Structure of the social service workforce

The social service workforce is located across several government departments, in particular the DSWD and also to a lesser extent in the Department of Education, Department of Labour and Employment, Department of Health, Department of Justice, and the Council for the Welfare of Children. The Council is the focal inter-agency body of the Philippine Government for children and has a coordinating function for social services for children, bringing together the various departments and other major entities in the sector, but does not provide direct social services. At the national level, social services workers are involved in policy development, research and wider social development activities.61 The DSWD also operates 64 residential and seven non-residential care centres across the country.

In addition to DSWD, the state-employed social service workers are working in the judiciary system (court social workers) and the Local Government Units, which have primary responsibility to provide social services. Based on the Republic Act 7160 of the Local Government Code, the direct provision of social services is devolved to Local Government Units through local social welfare and development offices. At the local level, the social service workforce is employed at provincial, municipal and city level offices.

In other government agencies social services structures vary. For example, in the health sector, hospital departments of social welfare predominantly employ registered social workers and paraprofessional workers. These services are located at local or district level. In addition to the larger agencies such as DSWD, justice, education and health services, city and municipal councils, and barangays employ social workers either in social service provision or in community development. Some social work positions are designated by title, while others have generic titles (such as community development worker).

There are also many NGOs employing social services workers, both local/national and international. The internal structures of each organization determine the work of individual social workers, who may provide services to individuals, families and communities, supervise and manage, or undertake policy development and research. Examples include the Tuloy Foundation, providing care and support for children living and working on the streets, based in two locations, and SOS Villages which has eight residential childcare centres across the country.

59 Ibid.
In general, mapping the structure of the social service workforce in the Philippines is complicated by the widespread use of the term ‘social services.’ The term is used to mean the provision of material relief for poverty alleviation and to promote social inclusion, in cash or as goods, as opposed to interventions with individuals, families and communities to restore or create capacities to respond effectively to social problems and challenges. At the same time, social workers do have an important role to play in helping vulnerable people to access material assistance.

Of the 490 survey respondents (combining both online and face-to-face forms of the survey), 425 (86.7 per cent) workers stated that they have an immediate supervisor. Only 10 (2 per cent) said that they received no supervision or that it was not adequate. For 415 (84.7 per cent) workers, supervision was effective in some way. The main forms of support provided are either technical guidance/consultation or moral support and encouragement.

The social service workforce in the Philippines appears to be relatively stable. Although the largest group has worked in their present agency for less than four years (29 per cent), the group of those who have worked in the same agency for between four and 10 years (28 per cent) is almost the same and only slightly fewer have worked with their present employer for more than 10 years (23 per cent) [20 per cent of those responding to the survey did not answer this question]. Reasons for satisfaction with positions largely focus on intrinsic factors, such as fulfilment in being able to assist people and serving the community.

4.3 Policy and legislation impacts on the social service workforce

The legal framework for social services in the Philippines is large and broad. The Philippines ratified the UNCRC in 1990. In the child protection field alone, there are several main laws that provide a mandate for the social services workforce: the Special Protection of Children against Child Abuse, Exploitation and Discrimination Amendment Act (2003); the Anti-Trafficking in Persons Act (2003); the Anti-Violence against Women and their
Children Act (2004); the Juvenile Justice and Welfare Act (2006); the Anti-Child Pornography Act (2009); the Children’s Emergency Relief and Protection Act (2016); and Children in Situations of Armed Conflict Act (2011). In addition, social services are governed by the Local Government Code (1991), which devolved the duty to provide social services to Local Government Unit level. Local Government Unit provision of social services is also governed by the Senior Citizens Act (2010), the Education Act (2013), the Mental Health Act (2016), the Act Expanding the Benefits and Privileges of Persons with Disabilities (2017), and the HIV and AIDS Policy Act (2018). These laws and their continued development are the focus of policy debates in the fields of child protection, education and mental health. Social service workers located in each of these fields are often brought together by policymakers and community stakeholders into councils related to child welfare, disability affairs and other fields.

There are also specific laws governing the social work profession. The first of these is the Social Work Act (1965). This was followed by the Magna Carta for Public Social Workers (2007) (Republic Act No.9433), and the Act Regulating Sundry Provisions Relative to the Practice of Social Work (2015). The Social Work Act established social work as a profession, recognizing rights to the title, as well as defining social work in law. The Magna Carta gives legal rights and privileges to social workers, including detailed terms of employment. It also gives legal force to ethical standards set by the profession. The most recent law reduces the minimum age for registration to 18 years (although still requires a university degree) and controls the registration of foreign social workers. In the survey for this study, comments were made by 10 respondents (2 per cent) that the Magna Carta was not implemented in some agencies. Although the number raising this challenge is small, there appear to be some gaps in its implementation.

4.4 Child protection system
The Juvenile Justice and Welfare Act differentiates children in conflict with the law from children at risk and mandates provision of preventive services for children at risk. Consequently, a network of services and secondary prevention available to respond to children deemed to be at risk or at risk of child abuse is well developed in the country. Inter-agency bodies monitor the enforcement of child protection law, such as the Committee for the Special Protection of Children, the Inter-Agency Council Against Trafficking, the Inter-Agency Council Against Pornography, and the Juvenile Justice and Welfare Council. The Philippines General Hospital Child Protection Unit uses a multi-disciplinary approach to integrating medical, legal and psychosocial responses to the child victims of abuse and their families. This model of child protection units is replicated by the Child Protection Network across the country, with 84 units in 48 provinces. These various elements of the system are multi-disciplinary, bringing together social services (especially social work), medical and other health professions, lawyers, teachers, politicians and community members. However, protocols for inter-agency work for child protection would benefit from greater clarity. In a 2016 study, social workers also reported that they did not always know where to refer a case despite the existence of case management protocols. This may reflect inadequate dissemination of protocols or popularization of the same.

Local councils for the protection of children exist at provincial, city, municipality and barangay level. The councils tend to focus on secondary and tertiary level responsiveness in providing assistance when it is requested or identified and intervening in situations of risk. In addition to reporting child abuse and exploitation to local DSWD offices and supporting the implementation of the Juvenile Justice and Welfare Act by providing a community-based mechanism to support the rehabilitation and reintegration of children in conflict with the law, barangay councils are well placed at the very local level to engage in preventive (primary level) action, such as community awareness building. However, they lack the funds and capacity to do fulfil this role. In addition, as many of their workers are

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63 Ibid., p. 7.
66 Ibid.
67 Smallest administrative division in the Philippines.
69 Ibid., p. 4.
70 Ibid., p. 23.
volunteers (unlike professional officers in the DSWD), they are usually not explicitly recognized as part of the social service workforce and are not included in efforts to strengthen the workforce.

4.5 Education and training systems for social service work

By legal definition, social workers must hold recognized degrees in order to be employed in jobs with that title. There are 127 higher education institutions in the Philippines providing social work degree programmes, including both universities and colleges of higher education. Of these, 55 per cent are based in Luzon. A total of 93 institutions provide four-year bachelor’s degrees in social work, with 25 offering two-year masters programmes. One university has a doctoral degree in counselling. A further four provide an 18-month certificate or diploma programme. In addition, there are diploma and in-service training opportunities for other social service workers. For this reason, a large proportion of the social service workforce is trained. At the same time, some reports criticize agencies such as DSWD for not making sure that their staff are able to keep up to date with training on specific matters such as inter-agency practice and the development of a more preventive focus.71

Despite the large number of social work degrees programmes available in the country, only 176 (37 per cent) of the survey respondents have a social work degree, with 49 (10 per cent) holding an unrelated degree, 93 (20 per cent) having a relevant diploma and 39 (8 per cent) a non-relevant diploma (132 respondents or 25 per cent, did not answer this question) (Figure 14). The SKDAI report indicates that graduate social workers are often a minority in the NGO sector, working predominantly alongside social services workers without recognized qualifications.72

**Figure 14: Highest level of academic qualification for social workers in the Philippines**

![Figure 14: Highest level of academic qualification for social workers in the Philippines](image)

Ongoing training and professional development appear to be quite widely available, with 312 out of the 347 respondents (90 per cent) having accessed some form of training in the last five years. Of these, most (93 per cent of those who undertook training) had received financial support from their agency or an external funder (such as UNICEF). Only in the Mindanao province was this less, with just 77 per cent receiving funding. There are some issues with geographical accessibility with only 215 (62 per cent) saying it is accessible. Of the face-to-face survey interviewees, 239 (69 per cent) stated that training is financially accessible, but the remaining 108 (31 per cent) did not agree, including most of those who had not attended training due to financial reasons.

4.6 Professionalisation

Social work in the Philippines is highly professionalised compared to many countries in the region.73 The two principal legislative acts – Social Work Act (1965) and Magna Carta for Public Social Workers (2007) – have contributed greatly to professionalisation of social work.

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73 Ibid., p. 151.
The Philippine Association of Social Workers (PASWI) was formed in 1947 and is a member of IFSW. PASWI has a clear code of ethics, which unusually for many countries does not simply reflect the international ethical statements of the IFSW and the International Association of Schools of Social Work but is written as an oath relevant to practice in the Philippines and which must be recited publicly as part of graduation and registration. The association has been highly influential in the ongoing development of social services in the Philippines, including the formation of the Department of Social Welfare in 1968, which subsequently became DSWD. In August 2018, the Professional Regulation Commission (the government body which manages the accreditation and regulation of professions) granted PASWI status as the Accredited Integrated Professional Organization for social work. Thus, it is now the sole professional organization for social work, with a membership of approximately half the 30,000 registered professional social workers in the Philippines. Within the survey conducted for this study, slightly more than half (52 per cent) are not members of a professional organization, with the other 48 per cent members.

The social work code of ethics is widely recognized by the workforce. Although signing a code of ethics is only a requirement for those graduating in social work, in the survey, 326 respondents (66 per cent) said they had signed it and only 10 (2 per cent) stated they had not (with a further 154, or 31.5 per cent, either being uncertain or not answering). Of all those who completed the survey, 122 (25 per cent,) said that they have received help or support from the association to which they belong, while 108 (22 per cent) stated that they have not.

The Schools of Social Work Association in the Philippines was created in 1970 and assumed a new name in 1990, the National Association for Social Work Education, Inc. (NASWEI). NASWEI has: (a) helped define and standardize the basic minimum curriculum content particularly for the bachelor’s degree programme and made this the basis for the social work board examinations; (b) initiated relevant indigenization of social work education; (c) aligned curriculum content with real needs, current trends and issues; (d) produced indigenous teaching resources including monographs and books as well as appropriate teaching methodologies; (e) formulated accreditation standards for quality education; and (f) conducted continuing professional education.

4.7 Existing initiatives and strategies for workforce strengthening in social services
Recent proposals for further developing particular areas of social services include strengthening the child protection system. UNICEF Philippines is proposing greater integration of child protection systems at local level to build on community strengths. In addition, UNICEF advocates for an increased emphasis on mainstreaming social protection and resilience-building to strengthen the preventative dimension of the system, to complement multi-professional and inter-agency developments at secondary and tertiary levels.

The Philippines Plan of Action to End Violence Against Children (2017) proposes a range of strategies to increase awareness and provide security and safety for children and young people, including strengthening the workforce, integrated planning and monitoring, mobilization of the various sectors that are involved in service provision, and increasing public recognition of the issue, including through a national campaign to challenge violence against children, and mainstreaming of child protection mechanisms in communities, schools and institutions.

Despite the relatively early and apparently strong process of professionalisation, the status of social work and social service work in the Philippines is not high. The Magna Carta for Public Social Workers (2007) did not set sufficiently high levels of salary or standards for working conditions. In addition, there is a need to promote greater public recognition of the value of social work and to promote a more positive public image of social workers. There is a wide call to include the protection of social workers employed in private settings in the Magna Carta for Public Social Workers (RA 9433).
4.8 Social service workforce challenges

Particular challenges reported by social service workers for this study cluster in three areas. First, workloads are described by 152 respondents (31 per cent) as heavy. Second, 142 (29 per cent) people stated that low salaries are a challenge. Third, limited resources or funds to carry out the work is seen as a problem by 137 people (28 per cent). While these broad themes are similar to other countries in this study, the proportion of people mentioning them is somewhat lower (for example, in Mongolia, over 75 per cent stated high workload and low salaries, while in Viet Nam these challenges were each mentioned by more than 65 per cent of respondents).

4.9 The Philippines: Key considerations

Compared with other countries in the region, the Philippines has a large social service workforce. This workforce is supported by specific laws on social work and a large proportion of the workforce is trained. The child protection system emphasizes secondary and tertiary level interventions, with the policy initiatives also focused on this area.

However, despite professionalisation of the workforce, including the adoption of the Magna Carta for Public Social Workers and the Act Regulating Sundry Provisions Relative to the Practice of Social Work, salaries and working conditions remain at low levels in some areas, negatively influencing motivation and quality of provided services.
5. THAILAND

Country profile

- Country population 68,864,000
- Child population 21.7% (lower than the regional average)
- 83rd on the Human Development Index (high development range and above average globally)

Survey and questionnaire respondents

- 295 social workers responded to the survey in 2017.

Note: As the survey was administered through a different mapping exercise, the breakdown of respondents is not available.

The bulk of the information contained in the review of the social service workforce in Thailand is based on the Thammasat University Social Work Research Team 2017 research report that specifically addressed the contribution of social work and social service work across all sectors (although it focused specifically on qualified social workers). The report used a similar methodology to this mapping review. Additional administrative data was collected for this report.

5.1 Size and scope of the social service workforce

There are 3,008 registered social workers in Thailand (defined by having recognized qualifications under the Social Welfare Promotion Act and registered with Thailand Social Worker Professions Council), providing a ratio of 20.1 social workers per 100,000 children. Of these, 2,176 (72.34 per cent) are licensed under the Social Work Professions Act (2013), while the remainder are still to complete the required postgraduate hours of practice and sit for examination. More widely, the total number of social service workers is not known precisely. The terms social worker, parasocial worker and volunteer are used without clear definition of the role or required professional qualifications. Employing agencies consider parasocial workers either as social workers or as non-professional staff. Volunteers are also used in some parts of the system but are not easily identified by role.

Social workers spend the majority of their time undertaking casework for individuals and groupwork for families, providing counselling, administration of practical services, access to social security provision, among other services. Social workers also undertake advocacy, community development, policy work and research. In the study, 73.2 per cent of social workers (216) stated that they undertake ‘direct practice’ (such as case management and counselling) with the next largest group (50, or 16.9 per cent) undertaking administration. The predominant approach of social work is reactive, responding to needs, but in some areas more preventative and proactive ways of working are developing. Social workers in Thailand are seeking to promote a preventive and proactive focus and become more mainstream both in their work and in the way in which the profession is regarded by others.

Social work in Thailand is defined using an amended version of IFSW’s definition, context-relevant for Thailand and in harmony with the definitions of social work across Asia. In Thailand there is a strong emphasis on the goal of promoting social cohesion and harmony, which derives from Buddhist traditions. Social work roles and functions as defined in law and policy emphasize a focus on helping people to address social problems, although work may also include the provision of material benefits and administration of government services. Social services are provided to children and families, youth, people with disabilities, older people, people living in poverty, drug users and people who are victims of various categories of life events (for example, domestic violence, natural or humanitarian disasters).

Social workers spend the majority of their time undertaking casework for individuals and groupwork for families, providing counselling, administration of practical services, access to social security provision, among other services. Social workers also undertake advocacy, community development, policy work and research. In the study, 73.2 per cent of social workers (216) stated that they undertake ‘direct practice’ (such as case management and counselling) with the next largest group (50, or 16.9 per cent) undertaking administration. The predominant approach of social work is reactive, responding to needs, but in some areas more preventative and proactive ways of working are developing. Social workers in Thailand are seeking to promote a preventive and proactive focus and become more mainstream both in their work and in the way in which the profession is regarded by others.

References:
80 Personal communication, Thammasat University, September 2018.
82 Defined jointly by the main social work bodies in Thailand, including the Thailand Association of Social Workers, Thailand Social Worker Professions Council, and Thailand Association of Social Work and Social Welfare Education.
84 Ibid., p. 46.
85 Ibid., p. 63.
### Table 8: Titles of social service providers within government ministries in Thailand

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<th>Ministry of Social Development and Human Security</th>
<th>Department</th>
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<td>Department of Children and Youth</td>
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<td>Social worker/social development officer/psychologist</td>
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<td>Department of Empowerment of People with Disabilities</td>
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<tbody>
<tr>
<td>Department of Local Administration</td>
<td></td>
<td>Social worker/community development officer</td>
</tr>
<tr>
<td>Department of Juvenile Observation and Protection</td>
<td></td>
<td>Social worker/psychologist</td>
</tr>
<tr>
<td>Department of Correction</td>
<td></td>
<td>Social worker/psychologist</td>
</tr>
<tr>
<td>Department of Probation</td>
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<td>Social worker/psychologist</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ministry of Education</th>
<th>Department</th>
<th>Worker title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Higher Education Commission</td>
<td></td>
<td>Social worker (medical school)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Ministry of Defense</th>
<th>Department</th>
<th>Worker title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Office of Permanent Secretary</td>
<td></td>
<td>Social worker (veteran hospital)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Royal Thai Police</th>
<th>Department</th>
<th>Worker title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Police General Hospital</td>
<td></td>
<td>Social worker (police hospital)</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Bangkok Metropolitan Administration</th>
<th>Department</th>
<th>Worker title</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Development Office</td>
<td></td>
<td>Social worker</td>
</tr>
<tr>
<td>Medical Office</td>
<td></td>
<td>Social worker</td>
</tr>
</tbody>
</table>

#### 5.2 Structure of social service workforce

Of the 295 who responded to the survey, about 30 per cent work primarily in services for children and young people, 14 per cent work with disability services and 11 per cent with old age and community development. Four government ministries employ social workers: Social Development and Human Security; Public Health; Justice; and Interior (under local administration). In addition, social service workers are employed by Ministry of Education (medical school), Ministry of Defence (veterans hospital), Royal Thai Police (police hospital), special administration units such as the Bangkok Metropolitan Administration, and in the NGO sector. In these different organizations, social workers and other social service workers are mostly located at national and provincial levels, except in the Ministry of Public Health where social workers are predominantly working at provincial and district levels; and local administration social workers are located at provincial and subdistrict levels. In all settings, social work occurs as part of the work of multidisciplinary teams.

For social workers in government services, there is a clear career path, from practitioner level through to professional level, senior professional and expert levels. Supervisors (where they exist) and managers are located at the senior level. However, among the social workers who participated in the survey, it is reported that in order to be promoted within the Ministry of Social Development and Human Security, it is sometimes necessary to take on the role of ‘social development officer’ rather than ‘social worker’,
although both roles are currently open to social work graduates and graduates in other relevant degrees.\textsuperscript{86} In the NGO sector, career structures are related to the specific agency.

Across different organizations, about one-third of social workers report that they do not experience supervision, and another third state that there is not a system of supervision in Thailand (a further 25 per cent are not sure).\textsuperscript{87} Although some agencies have developed their own standards of supervision and methods of making supervision available, in many places supervision focuses on task accomplishment rather than support and guidance. For those who receive supervision, it predominantly involves guidance and consultation; and setting personal development and action plans. For most social workers, supervision involves guidance (70 per cent), followed by consulting (60 per cent), coaching (54 per cent), individual supervision (51 per cent), and lastly, by online supervision (9 per cent).\textsuperscript{88} All those who receive supervision reported finding it helpful.

\textbf{Figure 15: Availability and effectiveness of supervision in Thailand}

\begin{figure}[h]
\centering
\includegraphics[width=\textwidth]{supervision.png}
\caption{Availability and effectiveness of supervision in Thailand}
\end{figure}

Figures for the length of time social workers are employed in one position are not available. In the discussion on workforce stability, the 2017 Thailand study report focused on the career structure as the source of many problems. Although there are four defined grades for social service workers in government service, in reality, many new entry social worker positions are temporary and moving to permanent positions requires a willingness to undertake work unrelated to social services. In addition, in both government and non-government organizations, there is a common practice of using temporary or one-year contracts when recruiting social service workers.

5.3 Policy and legislation impacts on social service workforce

Thailand has a relatively long history of policy and legislative development concerning social services. The country ratified the UNCRC in 1992. Since 1992, there have been four national plans on social services, which are aligned to national plans for economic and social development. In 2015, the Committee on Appropriate Social Welfare for Thailand Reform was established. Since then, the Social Welfare Provision Strategic Plans Nos. 1, 2 and 3 have been introduced. An important feature of these changes has been a shift from a residual welfare model (which provides a safety net for those in poverty) to a welfare state approach. The precise implications of introducing universal social protection system on the role of the social service workforce are unclear.\textsuperscript{89}

Social work was first mandated in law in the Criminal Procedure Code Amendment (1999) regarding investigations involving children and the introduction of child-sensitive procedures. Other policies and laws that affect the social service workforce include the Social Security Act (1990), the Determining Plans and Process of Decentralization Act (1999), the National Health Security Act (2002), the Child Protection Act (2003), the Mental Health Act (2008) and the Act on Protection of Victims of Domestic Violence (2007). Each of these laws assign roles and responsibilities to social workers.

\begin{itemize}
\item \textsuperscript{86} Ibid., p. 70.
\item \textsuperscript{87} Ibid., p. 31.
\item \textsuperscript{88} Ibid., p. 67.
\item \textsuperscript{89} Ibid., p. 36.
\end{itemize}
5.4 Child protection system

Child protection in Thailand is governed by the Child Protection Act (2003) and, more recently, the Act on Promotion and Development of Children and Youth (2017) and the National Strategy on Child Protection (2017–2021). This law and policy framework emphasize a multi-disciplinary approach and community-based responses to children’s needs. In addition to more general effects on the system in which social service workers operate, three articles of the 2003 Child Protection Act (Articles 48–50) specify social workers as a category of person eligible to be appointed as a competent officer (child’s protector), with responsibility to report to the provincial governor and provincial Child Protection Committee. These committees are expected to be comprised of senior representatives of various sectors that have authority in the child welfare field, including social services, education, health, law enforcement and education – notably, at least one-third of the committee members must be women (Article 7). The National Strategy also emphasizes a multi-ministry approach, and brings together children, parents, caregivers and volunteers as well as government entities, professionals and politicians, to ensure a consistent direction in the definition and management of child protection issues.91

Three departments within the Ministry of Social Development and Human Security have responsibilities for services to children and families (Children and Youth, Women’s Affairs and Family Development, and Social Development and Welfare). The Ministry of Justice also has a Department of Juvenile Protection and Observation, concerned with young people in conflict with the law. In addition, other ministries, Ministry of Public Health through the One Stop Crisis Center for children and women, the Bangkok Metropolitan Administration and NGOs, all provide various forms of assistance to vulnerable children and their families.

The latest reports indicate that over the past two decades, responsibility for child protection has been increasingly devolved to the administrative authority at Tambon or subdistrict level.92 Working under the auspices of the Ministry of the Interior, the executives of subdistrict authorities are increasingly engaged in activities related to child development, welfare and education, given their statutory duty and the absence of relevant social welfare authorities at the subdistrict level. According to the same source, there are no clear reporting structures between the Ministry of Social Development and Human Security and the subdistrict authorities.93

The Thai child protection system targets services at primary, secondary and tertiary levels. At the primary level, social service workers in health and education, as well as in community development, may all contribute to developing greater awareness of children’s needs and the risks they face, so that inter-professional and inter-sectoral responses can be promoted. Poverty remains a significant factor in child welfare and protection concerns. At the secondary level, available proactive interventions include various forms of support to families, including counselling and other casework services. Tertiary level interventions are enabled by the Child Protection Act (2003). These include assessment and planning, with supportive counselling available. However, recent research has raised questions about the need for further reform on out-of-home and other forms of alternative care for children at risk. Currently the system appears to rely on institutions more than alternative care.94 Current policy discussions are focused on extending community and family-based responses. Social workers in Thailand regard child protection as a particularly challenging area of practice, as they can face personal threats including physical violence and legal action instigated by aggrieved accused perpetrators.95

92 Ibid., p. 19.
93 Ibid., p. 12.
94 Personal communication, Thammasat University, September 2018.
In a 2018 assessment of the child protection system in Thailand, Child Protection Committees (child protection working groups), chaired by the head of subdistrict authorities, were found to be one of the main referral sources of child protection cases in subdistricts. However, Child Protection Committees do not have standardized procedures and referral pathways. Services and interventions delivered at this level are considered to be minimal.96

5.5 Education and training systems for social service work

Thammasat University has had a social work degree since 1954. It remains the largest programme. Currently there are six universities in Thailand offering degrees, including five public universities (Thammasat, Prince of Songkla, Mahachulalongkorn Rajavidyalaya Monastic, Mahamakut Buddhist and Rajabhat Pibulsongkram) and one private university (Huachiew Chalermprakiet). All teach at bachelor’s level, while Thammasat and Huachiew Chalermprakiet University also offers a master’s degree.

Social Work Professions Act (2013) requires a bachelor’s degree as an entry level degree for social work positions. However, many social workers employed by agencies before 2013 hold degrees in social sciences or other less clearly related fields or have a college diploma or vocational certificate.

Training is perceived as an important aspect of strengthening the workforce in Thailand, including continuing professional education relevant to laws, policies and practices.97 This is reflected in the 2017 study where nearly all respondents (293, or 99.3 per cent) have at least a university degree98, and 177 have masters degrees (60 per cent).99 Of these degrees, the majority majored in social work, comprising 90 masters degree graduates (60 per cent) and 85 bachelor degree graduates (74 per cent). Only two respondents (0.7 per cent) did not have a degree at either bachelors or masters level but held a diploma qualification as their highest level of qualification. One social work graduate also held a PhD in education administration. It should also be noted that other subjects within masters programmes might be considered relevant to the broad field of social services, including social development (13, or 11.4 per cent of masters degrees), public administration (11 or 9.6 per cent) or psychological counselling (nine or 7.9 per cent).100

Figure 16: Highest level of academic qualification for social workers in Thailand

Accessing continuing professional education, provided by professional entities and other training providers, is valued by social service workers but it is largely driven by the social worker’s own individual responsibility. Most respondents indicated that their employer (80 per cent) aided their continuous professional development. This was followed by training provided by external government organizations or NGOs (25 per cent), academic institutions (22 per cent), and the Social Work Professions Council or Thailand Association of Social Workers (16 per cent). Just over half of professional knowledge and training is provided at university (51 per cent).

97 Personal communication, Thammasat University, September 2018.
99 Ibid., p. 184.
100 Ibid., p. 33.
5.6 Professionalisation
The Social Worker Professions Act (2013) created a requirement for social workers to be qualified and licensed. The Act also grants a grace period of four years to allow the workforce with no social work degrees to pass a training programme and qualify for a license.

Established in 1958, the Thailand Association of Social Workers is a member of IFSW. In 2018, it had 2,571 members, although this is a minority of those who are eligible for membership. Most of the leadership of the Association are officials in the Ministry of Social Development and Human Security and representatives of academic institutions. The Association has a code of ethics and is also engaged in developing practice standards.101

The Social Worker Professions Act (2013) established the Social Work Professions Council. The objectives of the Council are to ensure that the rights and benefits of service users are met through setting standards and requiring social workers to be ethically accountable. This involves developing standards, encouraging professional education, and protecting the rights and dignity of the profession and its members.102 The Council is responsible for the licensing process, as well as establishing a committee to investigate any complaints against a social worker.

The code of ethics for social workers developed by the Thailand Association of Social Workers is widely disseminated among the social service workforce. The Social Work Professions Council has recently developed and disseminated a new code of ethics for licensed social workers.

5.7 Existing initiatives and strategies for workforce strengthening in social services
The National Strategy on Child Protection (2017–2021), the basis for policy considerations specifically for children in need, aims to strengthen all professions working in the field of child welfare and child protection, and to include civil society and volunteers. More widely across the workforce, the Social Welfare Provision Strategic Plan No. 3 (2017–2021) proposes strategies for care and support for disabled people, older people, and other marginalised and disadvantaged groups. However, it is unclear how this will affect the workforce. There are concerns from social workers in the field that this may dilute recent professional gains as the previous focus on ‘social welfare and social work’ have been removed. The Social Work Professions Council and the Thailand Association of Social Workers remain dedicated to strengthening the capacity of social workers and is developing initiatives in this area.

5.8 Social service workforce challenges
In addition to the challenges identified above, the study revealed that 35 per cent of the workforce does not have supervision. This is perceived as a weakness that impedes effective service delivery. Another challenge is the high workload. Social workers in many NGOs work more than five days per week, while many government social workers work more than eight hours per day.103 Low wages is another challenge with 34 per cent of the respondents reporting they have to take extra jobs to earn enough income. Some workers (80 or 27 per cent) report that they are only somewhat satisfied with support provided by organizations, particularly support for career development.104

5.9 Thailand: Key considerations
In Thailand, the recognition and licensing of social workers has occurred quite recently. However, the roles and functions of professional and paraprofessional social workers are not clearly defined within government agencies that have social service provision responsibilities. For this reason, the total size of the social service workforce is not known, even though those with recognized qualifications can be identified.105 According to the Thammasat University study in 2017, the lack of such information makes workforce planning difficult, particularly the development of career paths. In addition to addressing this challenge, emphasis should continue on professional licensing of social workers, improving the quality of service provision, supervision and monitoring mechanisms, and promoting awareness of the profession.

Accelerating the implementation of a national strategy on child protection and social welfare provision, national strategic planning to improve professional training and ensure the development of higher standards of practice and reform of out-of-home care are under discussion.

101 Ibid., p. 69.
102 Ibid., p. 13.
103 Ibid., p. 60.
104 Ibid., p. 105.
105 Ministry of Labour, Invalids and Social Affairs (MOLISA), Statistics on social protection in Viet Nam, 2018.
6. VIET NAM

| Country profile | • Country population 92,695,100  
|                | • Child population 28.3% (lower than the regional average)  
|                | • 116th on the Human Development Index (top of the medium development range) |

| Survey and questionnaire respondents | • 180 social service workers responded to the survey.  
|                                    | • Survey was administered through interviews and e-mails.  
|                                    | Where respondents work:  
|                                    | • 51.1% (92) work in the welfare sector in the Ministry of Labour, Invalids and Social Affairs (MOLISA), provincial and district Departments of Labour, Invalids and Social Affairs (DOLISA) and social work service centres/social protection centres.  
|                                    | • 19 (10.6%) work in the education sector.  
|                                    | • 15 (8.3%) work in the health sector.  
|                                    | • 31 (17.2%) work in local and international NGOs and Pagodas.  
|                                    | • 23 (12.8%) work in mass organizations (Women’s Union, Youth Union).  
|                                    | • 21.1% (38) work in the capital city Ha Noi.  
|                                    | • 25% (45) are from Da Nang.  
|                                    | • 16.7 (30) are from Dien Bien.  
|                                    | • 18.9% (34) are from Dong Thap.  
|                                    | • 18.3% (33) are from Gia Lai.  
|                                    | Demographics of respondents:  
|                                    | • 46.3.5% (82) have been working in social services facilities for one to five years.  
|                                    | • 16.5% (30) for over 10 years.  
|                                    | • 15.9% is less than 35 years.  
|                                    | • 34.8% aged between 35 and 44 years.  
|                                    | • 33.3% aged between 45 and 54 years.  
|                                    | • 16.0% over the age of 55 years.  
|                                    | • 25.6% male  
|                                    | • 74.4% female |

6.1 Size and scope of the social service workforce
The social service workforce for child protection in Viet Nam is mainly under the auspices of government agencies including the Ministry of Labour, Invalids and Social Affairs (MOLISA), Ministry of Health, Ministry of Education and Training and their local entities (provincial, district and commune); mass organizations (Women’s Union and Youth Union); local and international NGOs and FBOs. It is estimated that there are 16,424 social service workers working in the area of childcare and protection\(^{106}\), giving a ratio of 62.4 social service workers per 100,000 children. The role of social service workers in child protection is to provide and coordinate prevention and response services to address violence against children, as well as to provide care, support and social assistance to children in special circumstances as defined in the Child Law.\(^{107}\) The social service workforce is also responsible for delivering institutional care and other services such as counselling, emergency support and case management. The workforce consists of public servants in childcare and protection, social workers, counselors, residential care workers and care staff. It also includes commune child protection persons/social work collaborators in the social welfare sectors and social workers within hospitals.

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\(^{106}\) Child Law (2016).  
\(^{107}\) MOLISA report, 2018.
### Table 9: Number and titles of social service positions in Viet Nam

<table>
<thead>
<tr>
<th>Ministry</th>
<th>Department</th>
<th>Number of staff in post</th>
<th>Work titles</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ministry of Labour, Invalids and Social Affairs</td>
<td>Department of Children Affairs</td>
<td>55</td>
<td>Public servants in childcare and protection</td>
</tr>
<tr>
<td></td>
<td></td>
<td>10</td>
<td>Social work official</td>
</tr>
<tr>
<td></td>
<td></td>
<td>15</td>
<td>Counsellors</td>
</tr>
<tr>
<td></td>
<td>Provincial Department of Child Care</td>
<td>186</td>
<td>Public servants in child protection</td>
</tr>
<tr>
<td></td>
<td></td>
<td>3,434</td>
<td>Social workers, counsellors, commune child protection persons, residential care workers and staff</td>
</tr>
<tr>
<td></td>
<td>District Unit of Child Care</td>
<td>580</td>
<td>Public servants in child protection</td>
</tr>
<tr>
<td>Ward Office of Child Care</td>
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<td>10,754</td>
<td>Social workers, counsellors, frontline social service providers</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Service providers in charge of wards</td>
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<tr>
<td>Commune Child Protection</td>
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<td>82,740</td>
<td>Social work collaborators, childcare and protection collaborators</td>
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<td>Department of Social Protection</td>
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<td>7</td>
<td>Social workers</td>
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<tr>
<td></td>
<td>Provincial Social Protection Departments</td>
<td>4,000</td>
<td>Public servants in social protection</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td>Social workers</td>
</tr>
<tr>
<td></td>
<td>District Social Protection Unit</td>
<td>600</td>
<td>Public servants in social protection</td>
</tr>
<tr>
<td></td>
<td>Social Support Centres</td>
<td>35,000</td>
<td>Social workers, child carers, direct service providers</td>
</tr>
<tr>
<td>Ministry of Health</td>
<td>Hospitals</td>
<td>764</td>
<td>Social workers</td>
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<td>Mass organizations</td>
<td>Women’s Associations</td>
<td>60,000</td>
<td>Social workers, social work collaborators, direct service providers, case managers</td>
</tr>
<tr>
<td></td>
<td>Youth Unions</td>
<td>40,000</td>
<td>Social workers, social work collaborators, direct service providers, case managers</td>
</tr>
</tbody>
</table>

#### 6.2 Structure of the social service workforce

The social service workforce is situated at provincial, district and commune levels. Most of the professional services are available at provincial level. The services are provided by both public and non-public agencies for welfare, health, education, civil society and mass organizations. Since 2008, MOLISA is the lead government agency for coordinating and monitoring implementation of childcare and protection services. The Department of Children Affairs in MOLISA holds responsibility for working with line ministries and civil and mass organizations to implement relevant laws, policies and programmes in childcare and protection. Local authorities and district and provincial Departments of Labor, Invalid and Social Affairs (DOLISA) are accountable for childcare and protection issues at local levels.

In 2010, Decision 32/2010/QĐ-TTg by the Prime Minister, known as ‘Decision 32’, approved the National Programme on Social Work Development for the period of 2010–2020. This has accelerated development and delivery of service provision by welfare and health sectors since 2011, and more recently in the field of education. A circular on social work job codes created a three-tier structure of principal social worker, social worker and assistant social worker. These tiers are linked to government human resources standards,
with qualification levels defined as university degree (masters or bachelors) for the principal social worker, four-year bachelor’s degree for social workers, and diploma at assistant social worker levels. Circular 09/2013/TTTL-TBLTBXH-BNV was issued to create social work service centres at district level; Circular 43/2015/TT-BYT was promulgated by the Ministry of Health to develop social work in hospitals, resulting in the creation of social work positions in about 70 per cent of hospitals at provincial and central levels. Circular 33/2018/TT-BGDĐT was approved by Ministry of Education and Training for development of social work in schools. At the local level, Circular 07/2013/TT-BLĐTBXH established ‘social work collaborators’ at commune level, who are paraprofessionals serving as case managers and public educators.

Mass organizations, including the Women’s Union and Youth Union, have traditionally played an important role in protecting the benefits and rights of children, youth and women. Since the 1990s, the involvement of local and international NGOs has diversified the workforce for child protection at grassroots level. Care and support for various groups of vulnerable children has expanded, including children with disabilities, children living with HIV, orphans and other groups.

Of the 180 respondents to the survey, most (173, or 96.7 per cent) report having a job description. Slightly fewer respondents state that their job description matches their work (163, or 90.6 per cent), but all respondents are asked to take on additional duties to tasks listed in the job description.

Almost all respondents have an immediate supervisor (178, or 99.5 per cent). Of these, 157 state that supervision is helpful, with 129 (71.7 per cent) receiving professional support and guidance, 23 (12.8 per cent) being supported in training, two (1 per cent) being supported by their work facilities and a further three (1.5 per cent) stating some other assistance. Supervision is available quite frequently, with 104 (55.1 per cent) reporting that they met with their supervisor on a weekly basis, and 57 (31.8 per cent) meet with their supervisor on a monthly basis. Only nine (5 per cent) social service workers met their supervisor on a quarterly basis and a further nine (5 per cent) less often than that. When supervision is seen not to be helpful, it is mainly because the supervisor does not have sufficient knowledge or training to provide support and guidance, or from conflicting advice and instruction from different managers.

Responses from the survey on the movement of social service workers between jobs suggest that Viet Nam has a moderately stable workforce (Figure 19). Of the respondents, 59 (33 per cent) have been in their present job for less than four years, while 88 (49 per cent) have been in their present position for between four and 10 years, and 30 (17 per cent) for more than 10 years. Three, or 1.7 per cent did not answer.

![Figure 17: Availability and effectiveness of supervision in Viet Nam](image-url)
These numbers also reflect the period of time in which contemporary social services have been developing in Viet Nam, with professional social work only recognized in 2010 and the expansion of professional training programmes in social work from a very small number of pioneer programmes only commencing in 2004.

6.3 Policy and legislation impacts on the social service workforce

Viet Nam was the first country in Asia to ratify the UNCRC in 1990. Social services in Viet Nam are provided within a framework of laws and sublaws (such as decrees, decisions, ordinances, ministerial circulars, directives and guidance). In particular, the Child Law (2016) incorporates almost all the rights of children contained in the CRC, in particular, the right to protection, including alternative care when families are not able or willing to care for their children, education and health. In this law, child protection is defined as prevention, assistance and intervention, thus legally endorsing the three-tier structure of the child protection services system. The law presents case management as a multi-sectoral procedure to address the issue of child victims of violence, including needs assessment, planning, interventions, and monitoring and evaluation. The law emphasizes the establishment of a network of child protection persons at commune level to carry out the responsibilities of child protection. The primary bearers of these responsibilities are local authorities, MOLISA and DOLISA at provincial, district and commune levels.

Viet Nam has a social security strategy for the period 2011–2020 which includes four key strategic areas; one of these areas is social assistance to all people with priority given to vulnerable groups, including children in special circumstances. The strategy has been used to inform the development of policies and programmes to strengthen social service systems. Other legal documents include Decree 103/2017/ND-CP on development of the social service system, and Decree 136/2013/ND-CP on social assistance policies for vulnerable people.

Other relevant laws include the Law on Child Adoption, Law on Health Care (2006), Law on People with Disabilities (2010), Law on Family Violence Prevention and Protection (2006), Law on HIV/AIDS Prevention and Control (2006), Law on Prevention and Control of Human Trafficking, and Law on Drug Abuse Prevention and Protection. Most recently, the provision of social services in these areas was diversified by Decision 524/2015/QĐ-TTg which regulates the use of public funds to provide assistance for individuals and to create services (including social work service centres).

In 2010, Decision 32 of the Prime Minister, approving the national programme on development of social work profession, and subsequent decrees and circulars, are all legal instruments that create professional and paraprofessional cadres in the social service workforce. The expansion of contemporary social service workforce roles, such as in the social work services centres (see section 6.2), emanated from this decision. In addition, all the above listed laws and policies specify the role of the workforce in different areas of service provision. The development of a distinct law on social work was initiated three years ago. This is expected to strengthen the mandate, requirements and authority of these workers.

6.4 Child protection system

Child protection in Viet Nam is governed by the Child Law (2016) and other related laws. Viet Nam is working toward developing child protection systems at national and local levels. The national programmes
on child protection (2011–2015; 2016–2020) have shifted to a child protection system building approach and strengthening the child protection workforces through in-service capacity building programmes. The national programmes on child protection promotes multi-sectoral cooperation by the establishment of child protection committees at provincial, district and commune levels. According to MOLISA, the local child protection systems have been strengthened in 5,500 communes (50 per cent of all communes in Viet Nam) and in 46 provinces in Viet Nam.108

The Government of Viet Nam is working to improve the legal framework on child protection through updates to the penal procedure code. The Child Law (2016) defines a mechanism, procedures and resources to protect children from violence. The child justice system is being strengthened to protect children in contact with the justice system through promotion of diversion and child-sensitive criminal proceedings.

A three-tier structure of primary (preventative), secondary (assistive) and tertiary (interventive) services is being developed in the country. Prevention is widely dispersed throughout all levels of government and civil society organizations, including education, health, the Youth Union, the Women’s Union and NGOs. For example, this can take the form of community awareness programmes, health services and advice to families through schools and clinics. Secondary services are also widely available through these organizations, and in addition the provision of childcare services including case management, counselling and alternative care. At the tertiary level, receiving reports, assessing and care planning responsibilities lie with the DOLISA system, including specialised children’s departments. Particular issues are addressed at appropriate levels, for example, responses to children affected by dioxin are provided at the secondary level by assistance, whereas children and young people subject to human trafficking are helped through tertiary level intervention.

6.5 Education and training systems for social service work

Viet Nam has a comprehensive system of professional training and education of social work at all levels including PhD, Master of Social Work, Bachelor of Social Work and other diploma-college qualifications. In 2004, the Ministry of Education approved a curriculum for a four-year Bachelor of Social Work, a three-year vocational Bachelor of Social Work and a two-year college diploma in social work. The masters programme started in 2011 at the Graduate Academy of the Social Sciences and University of Social Sciences and Humanities in Ha Noi. There are now seven masters programmes provided by Vietnamese training institutions and two joint training programmes with Filipino universities. Two PhD programmes began in 2016. There are also 28 diploma programmes that are mainly provided through the vocational training and education system. It is planned that these qualifications will be linked to the three levels of the social work profession. The Master of Social Work and PhD will be a requirement for principal social workers, the four-year Bachelor of Social Work for social workers, and the three-year Bachelor of Social Work and two-year college diploma for assistant social workers. In addition, MOLISA has many arrangements for in-service training for its officers. During 2017, about 600 managers have graduated from advanced social work training and about 10,000 frontline workers have completed the short-term training.109

At the same time, social service workers and lecturers agree there are some ongoing challenges. Many graduates from diploma and degree programmes are unable to attain employment in social work because there are limited social work positions in government due to the recent policy to reduce the public payrolls (despite Decision 32). As there are few qualified social workers to supervise trainees, students have limited opportunities to obtain placements in order to integrate theory with practice. Yet, senior managers are reluctant to employ graduates who they see as insufficiently trained to do the job.110 As a consequence, employment of people who have qualifications in unrelated fields continues as normal practice in many parts of the social services sector.

Although the number of trained social service workers has increased since the mapping and planning exercise in 2005, the proportion of those with relevant qualifications has not yet reached the target (42,900 workers to be

109 Ibid., p. 32–33.
trained at paraprofessional level, 13,641 at professional level, and 1,492 at post-professional level by 2015). The areas in which social service workers are most likely to have relevant qualifications are social affairs and children’s services, and the large-scale organizations such as the Women’s Union and Youth Union. Areas where relevant qualifications are least likely are in the health and education sectors, where those with other professional training (such as teachers, nurses and medical doctors) may be assigned to social work roles. In Figure 19, the total number of respondents is 203 people, of which 23 reported having both relevant and non-relevant qualifications.

Continuing and in-service training and education is regarded as helpful, with 174 (97.2 per cent) of those surveyed saying that they would like to have further training. There is a strong expression of commitment to strengthening personal work capacities, with 130 (72.2 per cent) respondents showing a desire to receive additional training. Of the 176 respondents who answered, 67 (38 per cent) said that training is geographically accessible, with 75 (42.6 per cent) stating that it is financially accessible. However, the majority said that training is not accessible geographically (109 or 62 per cent) and that it is not financially accessible (101 or 57.4 per cent).

6.6 Professionalisation
Professional standards and a code of ethics have been developed in the social welfare sector. In addition, the three-tier structure of social workers has contributed to professionalization of social workers in the welfare sector. Professional standards for social workers have been also developed in health and education sectors to promote social work services in hospitals and school accordingly. The quality of service delivery is monitored by the responsible ministry/organization.

In 2013, the Viet Nam Association of Vocational Training and Education and Social Work Profession (a member of IFSW) was created from the former Viet Nam Association of Vocational Training taking on responsibility for the Viet Nam Association of Social Workers. The Viet Nam Association of Schools of Social Work is also under this association. Additionally, there are different social service professional associations that help to promote the social service workforce such as the National Association of Psychologists, Clinical Psychologists Association, and the Child’s Right Association. Nonetheless, despite the availability of the legal framework, human resources standards and job descriptions, the nature and purpose of social work remains confusing, both in the public understanding and in the views of practitioners, reflected in the composite identity of the professional associations. This partly comes from the tradition that social work is equated with charitable action, and partly from the differences in the ways it is being developed at various levels within the social service system.

Very few of those surveyed in this study are members of a relevant professional organization (four or 2.2 per cent). These social service workers are all members of the Viet Nam Association of Vocational Education and Social Work. However, there is little clarity on how

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the association is currently supporting the social work profession. For example, the association does not appear to have a code of ethics (which is issued and is valid for MOLISA only), nor does it provide continuing professional education opportunities. Yet, most (173 or 96.1 per cent) of the respondents reported that there is a national code of ethics for social work and that their organization applied it in their services. Of these, 176 (97.8 per cent) said that they applied the code in their practice.

6.7 Existing initiatives and strategies for workforce strengthening in social service

Initiatives and strategies for strengthening the social service workforce have been introduced in the implementation of the Child Law, the Prime Minister’s Decision 32/2010/QĐ-TTg and circulars on social work development in welfare, health and education sectors, especially via the National Strategy on Social Security 2011–2020. The strategy provides guidance on strengthening participation of the private sector in providing social services. The national programme on development of the social work profession has contributed to a strengthened social service workforce by initiating the three-tier structure of the social service workforce. The national programmes on child protection are supporting the development of commune child protection workers, who have been mandated to provide social welfare and protection for children as well as a network of village collaborators. The local child protection system in Viet Nam has also been strengthened by the formation of child protection committees established at commune, district and provincial levels. Case management systems have been recognized as another important initiative to improve inter-sectoral cooperation in child protection service delivery. The case managers are tasked to work closely with other professionals, such as policy, health and justice, for assessments, case-planning, interventions and monitoring of the response to ending violence against children.

Regarding the social work workforce, a legal review of the laws that affect and support social services in 2012 recommended that the role and functions of social workers should be regulated in a framework law and their responsibilities in different settings should be mandated in related laws.113 The review also recommended that a distinct law on social work will eventually be required in order to match laws on doctors and lawyers.114 This should include a system for registration or licensing and professional standards. However, progress toward a social work law has been slow.

6.8 Social service workforce challenges

The social service workforce in Viet Nam is currently being downsized due to the need to reduce public payrolls defined in the Resolution 18/NQ/TW/2017. Secondly, the development of social work throughout the country is hindered by a lack of legal recognition. There is an absence of a network of social workers at commune level and in the sectors of education and justice. A small number of social workers has been recognized in the social work service and social protection centres, childcare and protection service facilities, and hospitals. The commune child protection workers are established as part-time workers for child protection. They may be staff of the Youth Union, Women’s Union or have other titles, while carrying out many other tasks rather than child protection. In addition, the social service workforce is facing the lack of a mechanism to provide licensing and registration of social service delivery for child protection. The insufficient quality and coverage of the workforce is unable to adequately address the needs of protection for children. The rotation of the social service workforce is another challenge, particularly the Youth Union, where individuals are expected to work as a service servant up to age 30 and then rotate off. This has challenged the quality of the workforce and also increased costs of capacity building programmes.

Other challenges indicated in the survey are salary levels and workload. These were the most frequently cited challenges. A total of 125 respondents (69.4 per cent) stated that low salary levels are a problem, and 118 (65.6 per cent) reported that high workloads are a challenge. The third most reported issue by 52 (28.9 per cent) respondents is a lack of training opportunities and access to relevant professional knowledge. Other challenges are limited resources (40 or 22.2 per cent) and the low authority and lack of recognition of the role (35 or 19.4 per cent). The findings suggest that although social work has been taught in universities for 14 years and was approved by government as a

113 Ibid., pp. 43-48.
profession, it is still not widely understood among the public or indeed within the organizations that employ social services professionals. Some reports also show a lack of proper support and cooperation from other professionals and families because their role has not yet mandated.115

Social work education has moved faster than the creation of social worker positions, thus a large number of social work university graduates are not currently employed.

6.9 Viet Nam: Key considerations

Based on the Child Law, there is a need to develop a network of qualified and sustainable commune child protection workers, who should be responsible for coordinating prevention, case management, and management of alternative care for child victims and those at risk. With the government policy to reduce the number of civil service positions, ordering MOLISA/DOLISA's existing staff to do more complex casework or social work tasks seems ineffective. In this context, there is an urgent need for the development of professional child protection social worker teams at provincial and district levels to provide technical supervision for the network of commune child protection workers. They should also be responsible for providing and coordinating professional child protection tertiary services for cases of child abuse and violence, especially sexual abuse. These teams could be created through a systematic review and restructuring of the existing social services workforce across all branches of MOLISA/DOLISA. This may take into consideration reform of the social service system within MOLISA/DOLISA, including transformation of large-scale institutional care into increased community-based professional social and child protection services.

Furthermore, the lack of clarity about the identity of social work and other social service roles needs to be addressed. A law on social work, which enshrines a system of registration or licensing is critical.

A robust legislative framework is critical for both the continued development of the workforce and service delivery of child protection. The provision of social work services is being developed through the creation of social work services centres and social work offices in hospitals. It is suggested that standards of services for child protection be developed to ensure quality.

Finally, planning to strengthen the social service system in both government and non-government sectors would also lead to a better use of available human resources in the social service workforce.

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The Counselling and Protection Center for Women and Children under the Lao Women’s Union is providing support to victims of violence and trafficking through hotline, psycho-social counselling and training programmes.
This section presents desk reviews examining the status of the social services workforce in the Lao People’s Democratic Republic, Malaysia, Myanmar, Papua New Guinea, and Timor-Leste, and in the Pacific Islands - Fiji, Kiribati, Solomon Islands and Vanuatu.

7. LAO PEOPLE’S DEMOCRATIC REPUBLIC

7.1 Introduction
The Lao People’s Democratic Republic is a landlocked country with a population of 6.758 million in 2017 (6.492 million according to 2015 Census). A total of 39.4 per cent of the population was aged under 18 years in 2017, while 59 per cent of the population was below 25 years old according to the 2015 Census. The Lao People’s Democratic Republic sits at 139th on the Human Development Index, which places it in the medium development range. Economic indicators show that in 2015, 23 per cent of the population lived below the international poverty line of USD 1.25 per day. The majority of the population lives in the lowland region along the Mekong Delta.

7.2 Size and scope of the social service workforce
The definition of a social worker in the Law on the Protection of the Rights and Interests of Children is a person who is appointed by relevant state agencies to provide assistance to children requiring special protection. The Law on Preventing and Combating Violence Against Women and Children (2014) defines a social worker as a person who is approved or designated by the state-concerned organization to help or assist the victim. The social worker may include village heads and other community members as well as trained professionals. Under the same law, a social welfare officer is any staff member or authority who belongs to the Lao Women’s Union (LWU) or the Ministry of Labour and Social Welfare (MOLSW) who are working on social welfare. In general, social welfare officers are responsible for dispersing social security payments. For this reason, social welfare and social work may include veterans’ affairs, disability and old age services, and disaster relief, as well as child and family welfare under the Department of Social Welfare and the Department of Policy for the Devotees, Disability and Elderly. Therefore, it is not possible to state the exact size of the workforce because there is no uniform and clear definition of which roles might be considered social service. There is also no official organization certifying social workers.

7.3 Structure of the social service workforce
Responsibilities of child protection cut across different government agencies, including MOLSW, LWU, Juvenile Justice Coordination Committee, and the National Commission for the Advancement of Women and Mothers-Children. MOLSW is the lead agency on child protection. In particular, its Division of Child Protection and Assistance to the Victims of Trafficking (formerly the Division of Child Protection and the Division of Assistance to Children and Victims of Trafficking) focuses on child and family welfare and victims of trafficking. At subnational levels, the Provincial Office of Labour and Social Welfare has a Department of Social Welfare section that is responsible for all matters of child protection (usually three to five staff). At district level the Department of Labour and Social Welfare does not have separate sections and only one or two personnel. Officers at provincial and district levels have broad responsibilities under the ministry’s mandate, including dispersing financial and material assistance to families who are assessed as poor, the elderly, people with disabilities, children in need of assistance (mainly orphans), skills development,
labour management, disaster response, etc. District Labour Social Welfare Offices coordinate with village leaders to collect data on vulnerable populations and provide material assistance.

In 2017, MOLSW issued a Ministerial Agreement to set up Child Protection Networks (CPN) in every village across the country to bring child protection services closer. The membership of the CPN include village leaders, security focal persons, LWU volunteer, Lao Youth Union volunteer and one MOLSW volunteer. So far, CPN has been set up in more than 1,000 villages but is not fully functional, mainly due to unclear roles and accountability among members, limited resources, capacity building and operationalization support provided to the members.

In addition to MOLSW’s social welfare workforce, LWU also has a national cadre of staff providing counselling services to women and children. The LWU is a mass organization with a mandate to represent the rights and interests of Lao multi-ethnic women and children, including rights from the Law on the Prevention and Elimination of Violence against Women and Children (2015). LWU has an extensive network across the country at national, provincial, district and village levels. Usually three to five staff exist at provincial and district level and provides basic counselling support and minimum case management to women and child victims of violence and trafficking. In addition to counselling services, the LWU supports women and children through the prosecution process and provide legal aid.

7.4 Policy and legislation impacts on the social service workforce
The Lao People’s Democratic Republic ratified the UNCRC in 1991 and has made significant progress towards establishing a comprehensive legal framework for child protection. The Family Law (as amended in 2008) and the Law on Protection of the Rights and Interests of Children (2006) provide the basis for social service work with children and families. These laws set out parental responsibilities for children, as well as the responsibility of society to support parents in caring for their children through the provision of information, advice, consultation and other forms of assistance. The implementation of the law is supported by the National Plan of Action on the Prevention and Elimination of Violence against Children 2014–2020, which integrates the prevention of violence against children into education, social welfare and justice sector development plans.

The Strategic Plan for Social Welfare Development 2011–2020 addresses health insurance, disability, old age benefits and pensions. It also addresses social relief, such as emergency relief, food aid, disaster management, and measures for unexploded ordinances and anti-human trafficking. Provision for children is mentioned in the form of six SOS centres for neglected and abandoned children (run by MOLSW) plus the Peuan Mit centre (a shelter for children run by Friends International in Vientiane). Additionally, development of a community-based network for protecting children’s rights and interests was one of the key targets for MOLSW according to its Strategic Plan and Decree on establishing the Committee for Protection and Assistance of Children at national, provincial and district level as well as CPNs (see section 7.5).

Despite extensive effort and investment by the government to develop and strengthen the national legal framework in line with the international frameworks, there is a challenge in implementing the laws and policies, mainly due to lack of understanding, limited resources and unclear roles and responsibilities among different stakeholders. There is also no comprehensive national policy for the child protection system, defining the vision, framework, objectives and functions that resonates with the reality and needs of children and families. Currently UNICEF is supporting MOLSW to develop a national vision for strengthening the child protection system as well as the Social Welfare Workforce Development Strategy.

7.5 Child protection system
At the primary and secondary levels, the Committee for Protection and Assistance of Children has responsibility for inter-agency coordination to promote prevention, cooperation and coordination, and youth participation. This is a policy-setting body, which brings together ministries of social welfare, health, education and sport, public security and justice with the LWU, Lao Youth Union and Lao Front for National Reconstruction.

At village levels, CPN exist to bring child protection services closer to the communities where social welfare staff are not present. Overseen by MOLSW, the role of CPN is to build the capacity of the communities to identify vulnerable children with child protection risks

and refer them to the appropriate support services, as well as sensitizing the communities to prevent violence in homes and communities. According to the 2018 MOLSW report, 1,119 CPN were established at villages and 275 village CPN had already received training. The government plans to establish and train CPN in all villages but lacks resources to fully operationalize this volunteer cadre with systematic planning and a clear reporting line. In 2009 and 2014, these networks were assessed as successful in assisting and referring abandoned, orphaned or disabled children to other services, but less so in addressing more serious cases of child abuse due to its limited capacity and volunteer capacity. Responsibilities for alternative care for children (by appointment of a guardian or by adoption) are vested in the village head. Culturally, children without adequate parental care are placed in informal kinship care or institutions in the form of boarding schools, and systematic monitoring of these children is not available. MOLSW conducted a rapid assessment on the status of children living in institutions in 2017 and plans to develop national guidelines on alternative care in late 2019.

At the tertiary level, services are not easily accessible and are not well understood by the public nor integrated with village and family life. Very few cases of abuse are reported beyond district level, and the overwhelming sources of response and support for children come from within the family and the village. The national violence against children survey reported that in the past 12 months, 20.5 per cent of boys reported receiving services for sexual abuse experiences, compared to 0 per cent of girls. Among girls who told someone about their experience of physical violence during childhood, 60.3 per cent told a relative, 48 per cent told a friend or neighbour, and only 3.3 per cent told a service provider or authority figure, including the police.

Most of the secondary and tertiary level services for child victims of violence, children deprived of parental care, street children and other children at risk are located in the capital or other larger urban areas and are very limited.

### 7.6 Education and training systems for social service work

Only one university, the National University of Laos, offers a bachelor’s degree programme in social work, established in 2011. It also provides masters level programme for social work education, as well as a larger programme in social sciences. It provides short in-service courses for MOLSW officers and NGO staff in related roles. Currently, social work qualified officers are employed at national level in policy and research work, though rarely providing direct social work services. In addition, with support from the UNICEF Country Office, MOLSW developed child protection training modules for parasocial workers. The training primarily targets Provincial Department of Social Welfare and District Social Welfare Office staff working with children. For the community-based child protection network members, MOLSW, with support from UNICEF, has developed a child protection module for new CPN members and an advocacy toolkit for them to effectively engage with communities. While the feedback from CPN clearly indicates a need for regular refresher training, the training is offered only once at the establishment of CPN, and there is limited follow up and investment for their operationalization.

In recent years, the national Anti-Human Trafficking Committee led by the Ministry of Public Security and LWU developed a national guideline on protection and assistance to women and children victims of trafficking and an associated training module. Efforts have been made to train national and subnational LWU counsellors on victim identification, referral and counselling skills. It is unclear how many counsellors have been trained on the module, but UNICEF supported roll out of training to LWU staff in Xiengkhouang and Savanakhet Provinces. Overall, capacity of LWU counsellors is limited with lack of resources for practice counselling, however they are often seen by village communities as a good source of assistance.

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125 Ibid., p. 56.
128 Ibid., p. 76.
7.7 Professionalisation
Social work is not an established profession in Lao People’s Democratic Republic and there is no law on social work. Although the National University of Laos has offered a social work degree since 2011 and has attracted many students, no professional social worker positions are available with the government. Some graduates join INGOs and become professional social workers, but there is no system to track them. Most graduates continue work in the social welfare and development sector, including MOLSW, but their duties cover broader areas of social welfare, protection, labour management, disaster management, livelihood development and community development.

7.8 Existing initiatives and strategies for workforce strengthening in social services
The Lao People’s Democratic Republic Strategic Plan for Social Welfare Development outlines four goals for 2011–2020. Under the area of developing social welfare services systems, the plan prioritizes upgrading skills of the social service workforce. The plan also highlights the importance of increasing the number and levels of training for social workers and parasocial workers to be employed at district and local levels. This would better enable them to undertake direct work with children and families, as well as community development around children’s right and needs.

In addition, MOLSW’s midterm report on assessing the implementation of the Strategic Plan for Social Welfare Development 2011–2020 highlights the need for updating the current terms of references of the Committee for Protection and Assistance of Children and CPN to ensure accountability; professionalisation of the social service workforce; strengthening coordination and proper monitoring mechanisms; establishing clear reporting lines; regular data collection system; and increasing the assigned budget.

Similarly, the recently published concluding observations to the CRC report on the Lao People’s Democratic Republic acknowledges the importance of having a dedicated social service workforce for providing professional services to children. It makes a recommendation to invest in establishing a professional social service cadre, operationalizing CPN and effective monitoring of their performance, as well as establishing a strengthened child protection information management system.

In light of this background, UNICEF is supporting the government, under the leadership of MOLSW and the National Commission for the Advancement of Women, Mothers and Children, to undertake an initiative to map, vision and plan to strengthen the child protection system and social welfare workforce. The Child Protection Mapping, Visioning and Planning initiative aims to identify principal system gaps in social service delivery, articulate a clear vision of the system and a plan of actions, develop a human resource plan for the system, and design a model project to implement the new system in two provinces. A child protection mapping assessment has been conducted in target areas and the findings are being used to inform the development of the child protection system vision and the development of the social welfare workforce.

7.9 Lao People’s Democratic Republic: Key considerations
Overall, strengthening of the social service workforce has occurred slowly. Based on the findings of the child protection system assessment, the Lao People’s Democratic Republic should agree on a national vision for the system that is context-appropriate. The system and a minimum package of services should be developed in line with current resource gaps, utilizing existing local structures and taking into consideration community practices and norms. The mandate, scope and scale of the role of social welfare workforce needed to deliver this system and services should be defined. The government’s commitment towards strengthening the child protection system is promising. Implementing a pilot model of the system in target areas that can demonstrate impact will offer a good opportunity for developing an investment case for strengthening the human resource pillar of the child protection system.

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130 Ibid., p. 89.
132 Committee on the Rights of the Child, Concluding observations on the third to sixth periodic reports of the Lao People’s Democratic Republic (Ref# CRC/C/LAO/C03-6), 2018.
8. MALAYSIA

8.1 Introduction
Malaysia is a federation of states and territories, with a population of 31,187,000 people in 2017.134 Of these, 29.9 per cent are aged under 18 years. Relative to the region, Malaysia has well-developed social institutions and a gross national income close to the global average. It is ranked 57th on the Human Development Index, which places it in the fourth quintile and relatively high when compared to the region.

8.2 Size and scope of the social service workforce
The Malaysian Association of Social Workers estimates that the total number of social welfare officers with undergraduate university qualifications is approximately 700.135 There are approximately a further 4,300 assistant social welfare officers, with diploma level education, including workers who are gazetted as probation officers or child protection officers. In addition, there are ministry staff who undertake social service-related tasks. In total, the Department of Social Welfare had around 6,900 staff in 2013, including those handling child welfare cases.136 However, the number of social service workers, whether in all services or in child and family welfare, is not known precisely.

A 2018 survey by UNICEF Malaysia noted that since the enactment of the Child Act (Amendment 2016), social service workers are gazetted across several areas including child protection (1,615 officers), probation (1,618 officers) and anti-trafficking operations (119 officers).137 Only 236 officers are directly involved in handling child protection cases and 183 officers are managing children in conflict with the law.

8.3 Structure of the social service workforce
Social workers are employed by the Ministry of Women, Family and Community Development at national level, and by Departments of Social Welfare (which delivers services) at national, state and district levels. Social workers are also widely located in hospitals, the Anti-Drug Agency, the National Unity Department and NGOs.

8.4 Policy and legislation impacts on the social service workforce
The Child Act (Amendment 2016) provides a firm basis for the social service workforce in Malaysia. This Act covers the regulation of services for children at risk which are defined as being neglected or harmed by parents or other carers, being potentially vulnerable to being trafficked or forced to work as beggars, and at risk of being in conflict with the law. The Act established children’s courts and also the roles of protectors, registrars and probation officers (with respect to children), each of whom is defined as a ‘social welfare officer’ (that is, a social service worker). In addition, child protection teams are established and chaired by a social welfare officer responsible for child protection matters.

The Act further regulates the provision of secure education in ‘approved’ schools, providing education in secure settings for children in conflict with the law, and education units (called Henry Gurney Schools) within the penitentiary system. In this way, the Act also regulates and mandates educators, as well as medical, health, legal and other professions, in the provision of child welfare and protection. These terms were subsequently amended in the Child Act (Amendment 2016), which establishes new, separate roles of ‘counsellor’ and ‘psychology officer’, while at the same time still ascribing the roles of protector and probation officer to social welfare officers.

The Child Act (2001, Part XI) also established the role of ‘fit and proper person’, being an individual who is not a member of a child’s family but who is regarded by a Court for Children, or by a child protector, as a person who is able to provide appropriate care for a child. This role was subsequently supported by the Child (Fit and Proper Person) Regulations of 2009, which emphasizes the responsibilities of social welfare officers, probation officers and counsellors in advising, supporting and supervising those who are appointed as fit and proper persons.

134 Personal communication with Teoh Ai Hua, MASW, 19 May 2018.
137 Ibid., p. 5.
Other legislation that directly affects social service workers by creating legal responsibilities includes the Anti-Trafficking in Persons and Anti-Smuggling of Migrants Act (2007) as amended in 2015, and the Sexual Offences against Children Act (2017). This latter legislation was accompanied by ‘Special Guidelines for Managing Cases of Sexual Violence Against Children in Malaysia’.\(^{138}\) A specialized court to deal with sexual crimes against children was established in Putrajaya in 2017, and in 2018 a second special court was established in Sarawak.\(^{139}\)

### 8.5 Child protection system

Malaysia ratified the UNCRC in 1995. The child protection system that was established by the Child Act (2001) as amended (2016) echo key principles of the Convention. The 2016 amendment established the National Council for Children and provided greater discretion for appointment of members of child protection teams (even though the majority of teams are reported not to have adequate training or focus on working with children and families at risk). In 2017, a series of guiding regulations was issued by the Department of Social Welfare, covering eight areas of practice.\(^{140}\) However, in the recent UNICEF Malaysia survey, child protectors stated that they were waiting for training on implementation of these guidelines.\(^{141}\)

In addition, there is no clear system of primary, secondary and tertiary services. Primary services are relatively well spread across the country, but secondary and tertiary services are patchy.\(^{142}\) Primary services are concentrated on raising public awareness. At this level, policy and practice focus on assisting both the public and also many professionals to distinguish between improving children and young people’s access to generic rights and tackling child abuse and neglect. Secondary services exist in the form of telephone hotlines, children’s activity centres, the work of child protection teams, community care centres, one stop crisis centres, family centres and family strengthening and mediation. Tertiary services include care homes and institutions, emergency medical services, one stop crisis centres, suspected child abuse and neglect (SCAN) teams in hospitals (which are, in practice, a mechanism rather than a distinct unit) and child protection units in the police force. These services are localised, in particular the SCAN teams and child protection units.

The review by UNICEF Malaysia in 2018 noted that in the national child protection policy there was no mention of early intervention.\(^{143}\) Guidance on ways to establish the ‘best interests of the child’ or ways to ‘listen to the child’ were also seen to be limited.\(^{144}\) Guidance on preferences for out-of-home care, which might be seen as best practice, and regulations for protectors to impose conditions on non-parental carers and to appoint a ‘fit and proper person’ is contained in the new regulations, but awaiting training to enable implementation.\(^{145}\) Separate legislation addresses regional and religious differences in adoption. Medical social workers may be involved in social inquiry reports in emergency cases but are not protectors or part of SCAN teams or one stop crisis centres.

### 8.6 Education and training systems for social service work

Education and training for social service work and other related sectors in Malaysia is not systematic. Social welfare officers may have degrees in social work, or in more general social sciences, or they may have a wide variety of degree and non-degree qualifications. Assistant social welfare officers mostly have diploma level education and training, which again may be in relevant fields or in unrelated disciplines. Training specifically for child protection and welfare is also not systematic, with about 67 per cent of protectors not being graduates. There is also no requirement for a specific previous education.\(^{146}\)

\(^{138}\) Ibid., p. 6.
\(^{139}\) Ibid., p. 45.
\(^{140}\) Ibid., p. 44.
\(^{141}\) Ibid., p. 56-71.
\(^{142}\) Ibid., p. 26.
\(^{144}\) UNICEF Malaysia, Baseline Survey: Stakeholder Knowledge of Child Abuse & Neglect and their Roles and Obligations to Prevent and Respond, Child Frontiers, 2018, Hong Kong, p. 45.
\(^{145}\) Ibid., p. 102.
\(^{146}\) Personal communication with MASW, March 2019.
Academic degrees in social work are offered by seven universities throughout the country. Even though the programmes meet the accreditation requirements, it is reported that the length and quality of practice teaching is not standardized.147

8.7 Professionalisation
There is one professional association for social workers in Malaysia - the Malaysian Association of Social Work (MASW), which was formed in 1973 and registered in 1974.148 MASW is a member of IFSW. MASW has a well-developed definition of social work, and a code of ethics, both of which are based on international definitions and ethical codes149 and are written to reflect the characteristics of Malaysian society and its diverse cultures. Thus, social workers in Malaysia are working from a set of international standards that are appropriate to the Malaysian context.

The prevailing legislation, such as the Child Act, uses the term ‘social welfare officer’ to define the field and the role of the workforce. At the time of preparing this review, professionally qualified social workers in MASW are seeking to gain legal recognition, in the form of a law restricting the title of social worker to those who have social work degrees, and to establish a licensing system. This is because social work is often still regarded as a charitable effort and volunteer work rather than as a profession.150 Furthermore, the traditions of family responsibility for the well-being of its members can also be seen by some people to make social work either marginal or even unnecessary.

Professionalizing of social work was one of the key recommendations identified in the assessment of Malaysia's child protection systems, conducted in 2010.151 The Ministry of Women, Family and Community Development and UNICEF have worked on a number of initiatives to ensure professionalisation of social work and social work service.

8.8 Existing initiatives and strategies for workforce strengthening in social services
A current bill on the professionalization of social welfare in Malaysia presents an important opportunity to promote an expanded and strengthened social service system for children and older persons. Several other government initiatives are positive developments, including the Child Care Act (2001) and regulations with provisions for family-based childcare (2017), legislation concerning sexual offences against children (2017) and the amendments to the Child Care Act (2016). These policies reflect a shift toward a more child-friendly approach to child and family welfare policy and practice, by taking children's needs into account more explicitly in the way services are provided, including staff practices and modifications to the premises in which services are delivered (e.g., furniture, toilets).152 Other proposals for a child-friendly approach in child protection and responding to children in conflict with the law are still under consideration by the National Council for Children. In addition, the Ministry of Women, Family and Community Development has established an action plan to address cyber threats to children and young people.153

8.9 Malaysia: Key considerations
Malaysia has developed a relatively well staffed social service system, which includes provision for children and families, based on detailed law and policy, with a three-tier child protection system. However, the number of staff and training appears not to be appropriate and available at all levels, nor is it considered to reflect the ethnic composition of the population. There are no clear steps planned towards professionalisation of social work. Introducing a law on social work would strengthen the workforce by giving greater authority to social workers, who are the leading occupational group in the social welfare workforce.

149 Personal communication with Teoh Ai Hua, MASW, 19 May 2018.
151 Ibid., p.68.
9. MYANMAR

9.1 Introduction
Myanmar’s population was estimated to be 52,885,000 in 2017, of which 33 per cent was aged under 18 years. It is listed 148th on the Human Development Index, placing it in the medium development range.

9.2 Size and scope of the social service workforce
Precise numbers for the social service workforce are not available. In 2011, a report on social work training identified that there were approximately 200 social workers in hospitals, but noted that they are not necessarily trained to university level in relevant fields. A total of 519 government officers graduated from the University of Yangon with a Diploma in Social Work between 2006 and 2011, but there is no confirmation that they all remained within the system and some have moved to the NGO sector. There are Department of Social Welfare (DSW) offices at state and regional city levels, but only in a small number of districts. However, following the recent introduction of a case management system by DSW, in partnership with UNICEF and other agencies, there are now 188 case managers in 59 townships providing information and facilitating access to services. In addition, there are almost 300 medical social workers managed by the Division of Medical Social Work at the Department of Medical Services, Ministry of Health and Sports. Medical social workers have official terms of reference, adopted and deployed to all hospitals at district level across regions/states. They are currently being trained by UNICEF on child protection and case management.

9.3 Structure of the social service workforce
The social service workforce is employed in government, NGO and FBO agencies. In the government, DSW is located in the Ministry of Social Welfare, Relief and Resettlement. It employs social welfare officers, who are generically referred to as social workers. Social workers are also employed in hospitals and in the justice system as probation officers for children, though their numbers and capacities are limited.

9.4 Policy and legislation impacts on the social service workforce
Myanmar ratified the UNCRC in 1991. Social service provision in this country is contextualized within a framework of social protection, defined in terms of addressing economic and social vulnerabilities. Thus, it is seen as distinct from health, education and other elements of social policy. The National Social Protection Strategy, adopted by the Government of Myanmar in 2014/2015, outlines the priority of social work case management system development. This is the policy foundation for the establishment and expansion of the child protection case management and social work system in the country.

This and other underlying policies distinguish between preventive, promotive and transformative practices and services, including those that are child-sensitive. This approach draws on the principles of people-centred development. At the same time, the standard operating procedures on the case management system emphasize statutory duties and services, although they do also acknowledge the role of NGO social services.

Law and policy specifically related to child and family welfare, providing a basis for social services provision, is grounded in the Child Law (1993) as amended in the Child Rights Law (2014) that established a National Committee on the Rights of the Child to oversee the care and protection of children at risk of harm and responses to children in conflict with the law. Rules related to the Child Law were also issued in 2001. Risks addressed by these rules include neglect or abuse in the family or the community, being involved in harmful labour practices, children being used in

155 Ibid., p. 7–8, p. 21.
prostitution and pornography, children being trafficked and children using narcotics.

The Parliament of Myanmar adopted the Child Rights Law in July 2019, which replaced the 1993 law. The new law provides that a child is anyone under the age of 18 years and guarantees the fundamental and unconditional right to birth registration to all children born in Myanmar. Birth registration is the first right of the child and a stepping stone to accessing other rights such as the right to health, education and protection. With the establishment of a minimum age of marriage (18 years) and to employment (14 years), prohibition of all forms of violence against children, the value of childhood is recognized and allows children to be children. Moreover, the new Child Rights Law includes clear definitions of physical, psychological and sexual violence for the purpose of ending all forms of violence against children (linked with respective penalties for offences).

Prioritization of alternative care or care by family relatives over institutional placement is strongly pronounced in the law, urging institutional care to be used as a last resort. Introduction of diversion for child justice and the principle of detention as a last resort are putting emphasis on engagement of social welfare and restorative approaches (rather than punitive) in working with children in conflict with the law. The Myanmar Government is now working on development of respective rules and procedures to implement the new law, to improve child protection mechanisms and strengthen the relevant workforce.

9.5 Child protection system
Myanmar has a child protection system that includes primary, secondary and tertiary levels. The DSW social service officers undertake work at all three levels. There are also social workers in hospitals who undertake work at secondary and tertiary levels, although these positions come under the Ministry of Health. A recent report by Coram International notes that (as is common with many other countries) child protection concerns reduce with the increasing age of children, when concerns about children in conflict with the law become more prominent. The report also raises concerns about the need to involve health, education, disability and justice services in a child protection system, but that knowledge and understanding is lacking in these sectors.

9.6 Education and training systems for social service work
In the past, Myanmar had trained social workers, sponsored either by the government or by FBOs, although the majority of these had studied overseas. A post-graduate diploma programme was administered by University of Yangon with support from UNICEF Myanmar and RMIT University in Australia (from 2006 to 2011). Two other DSW officers were sponsored to undertake the Master of Social Work programme at Tata Institute in India and are now involved in training others. Following recommendations in Coram International’s report, in 2017 a new curriculum was approved, based on collaborative work between the University of Yangon and ASEAN/Thammasat University in Thailand. In addition, UNICEF Myanmar has worked with government ministries and departments to develop a programme of in-service training on child protection. UNICEF also provided support to the Ministry of Health and Sports for capacity building of 293 medical social workers on child protection case management across regions and states in Myanmar.

9.7 Professionalisation
There is no dedicated law on social work and until recently there were limited efforts to create a recognized profession. The Burmese term that means ‘social worker’ is used to refer to anyone who is providing a social service, including community volunteers as well as senior government and NGO officers. In recent years, this term was used to refer to DSW staff and social workers working in the medical field. Although there have been some social welfare officers trained at university level, a 2011 report for UNICEF Myanmar noted that much of the training effort appeared to be directed toward community volunteers.

9.8 Existing initiatives and strategies for workforce strengthening in social services
The government has been making efforts to professionalise social work. In 2017, the Union Minister of the Ministry of Social Welfare, Relief and Resettlement launched

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a discussion on the development of the Social Work Profession Law, which was resumed in 2019. The Union Minister has also prioritized the establishment of the Social Work Institute which will support research, training and licensing of social work in Myanmar.

Supported by UNICEF, DSW is working on developing a six-month capacity building master plan on generic social work, child protection and case management and an assessment of DSW institutional capacity to identify strategic recommendations to plan, develop and support the social service workforce in Myanmar. Development of the plan will be based on the findings of the social service workforce mapping planned by the Ministry of Social Welfare, Relief and Resettlement, in collaboration with UNICEF in 2019. The recent report by Coram International recommended that human resource development should focus on training for the operation of new policies on child and family well-being (including child protection). 163

UNICEF is also supporting the government in developing a national child protection policy with a costed implementation plan and M&E framework. It is envisaged that these developments in policy will contribute to increased investment in strengthening the social service workforce in Myanmar to enable the implementation of an effective child protection system.

9.9 Myanmar: Key considerations
Progress toward effective social services is being made in the area of child welfare and protection, with a three-tier child protection system. The emphasis on workforce strengthening through expanding professional training is a major part of these developments. The adoption of the new Child Rights Law provides an opportunity to advocate for investment in the human resources required to operationalise its provisions.

10.1 Introduction
Papua New Guinea is the largest country in the Pacific region, with a population in 2017 of about 8,085,000, of whom 42.7 per cent were aged 18 years or younger.\(^{164}\) It is also the poorest Pacific country, with 40 per cent of households living in poverty, and is placed 153\(^{st}\) on the Human Development Index, in the low development range. There is a higher rate of poverty among rural households, who also have less access to health, justice and social services.

10.2 Size and scope of the social service workforce
There is no accurate figure available for the total number of social service workers in Papua New Guinea. The social service workforce is positioned across several government departments and many NGOs and FBOs. The 2017 National Lukautim Pikinini Policy recommended that there should be a total of 415 child protection officers (at provincial, district and local levels), with a further 1,520 community volunteers, to implement child protection law and policy. However, it noted that at present “there are insufficient numbers of workers across all relevant government departments and at all levels.”\(^{165}\) There are inadequate numbers of trained professional and paraprofessional social service workers across all sectors. Therefore, there is an overreliance on community volunteers which creates a very weak child protection system.

10.3 Structure of the social service workforce
The social service workforce is located across several government entities, in the Office of Child and Family Services, education, health care, justice, labour and employment, and police departments. The Office of Child and Family Services, formerly known as Lukautim Pikinini (Child Protection), previously located in the Department of Community Development and Religion, was recently established as a distinct body as provided for in the Child Protection Act (2015) and National Child Protection Policy (2017–2027). Recently, the Office of Child and Family Services received financial autonomy from the Finance and Treasury Department and the approval of 64 additional staff members. The Office of Child and Family Services oversees the implementation of the Child Protection Act (2015) and National Child Protection Policy (2017–2027). The Office is also responsible for establishing competency standards and training of child protection workers, with the endorsement of the National Council for Child and Family Services. Local authorities at provincial and district levels are responsible for employing and managing child protection officers and work undertaken by community child protection volunteers, who are members of CSOs, FBOs and the community, and trained and supported to assist children and families in cases of abuse or neglect. In the Justice Department, the Director of Juvenile Justice Service manages juvenile justice officers, who have a social service function with young people in conflict with the law (which in other countries may be called juvenile corrections or probation services). The function of juvenile justice officers is mandated under the Juvenile Justice Act (2014).

There are also Family and Sexual Violence Units within the police service and Family Support Centres in some health facilities, with staff trained to respond appropriately to needs of children exposed to violence, abuse and exploitation. In the national Department of Education there is a Division of Guidance and Counselling who coordinates the implementation of the Behavioural Management Policy for National Education System (2009) which aims to promote peaceful, caring and safe school environments free from all forms of violence, sexual harassment and exploitation. Also, the Gender Equity and Social Inclusion Initiative in the Department of Personnel Management was established to address gender and protection issues within various government entities.

In the NGO sector, social service roles and functions are also performed by education, health and community development agencies. Recent studies suggest that there is inadequate coordination of these efforts and coverage is dependent both on donors and the responses of various levels of government administration.\(^{166}\)

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10.4 Policy and legislation impacts on the social service workforce
Papua New Guinea ratified the UNCRC in 1993. The Lukautim Pikinini (Child) Act (2015) empowers child protection officers to investigate and intervene in situations of neglect or abuse perpetrated against a child. The Act upholds family and community values, unless these contravene the principle of the child’s best interests being safeguarded. The National Lukautim Pikinini Policy of 2017 provides a review of the current system of child protection and raises issues regarding the size and preparedness of the social service workforce in Papua New Guinea to provide effective child protection at national, provincial and local levels.

Social services are also mandated in the Juvenile Justice Act (2014) and the Family Protection Act (2013). All, in some way, have a focus on child protection work, which reflects the widespread problems of violence to which children are subjected, either within the family or the community, whether as victims, witnesses or perpetrators. This is also addressed by the 2015–2050 National Strategy to Prevent and Respond to Gender-Based Violence (2014).

10.5 Child protection system
This system is in early stages of development. The Lukautim Pikinini (Child) Act (2015) legislates for a policy framework to be established to provide an integrated model of child protection, in a system with primary, secondary and tertiary levels of response. This framework is robust, and covers national, provincial, district and local levels. The Act proposes the creation of an independent Office of Child and Family Services and also Child and Family Services Councils at national, provincial and district levels, with the latter involving all relevant sectors (police, juvenile justice and community corrections, education, health, labour and employment, village courts, NGOs, FBOs and private sector). However, there are recognized problems in its implementation that arise from lack of human and financial resources.

Papua New Guinea has established Family Support Centres and Police Family and Sexual Violence Units. In 2016, an evaluation of the Family Support Centres (also called Women and Children’s Support Centres) noted that 15 centres had been established in 13 provinces. The centres are intended to promote access to health and justice interventions in instances of inter-personal and sexual violence. They use a hub model to connect with community-based services wherever possible. At the same time, the scope and operation of these services continue to be both limited and poorly coordinated, partly because of a lack of resources, but also because of a lack of understanding of their purpose and value.

10.6 Education and training systems for social service work
The University of Papua New Guinea offers a bachelor’s degree in social work, which follows the internationally recognized professional curriculum. The programme is relatively small, and graduates do not all remain in the social service system. Child protection officers may or may not have relevant qualifications or be university graduates. The training of paraprofessionals is piecemeal and varies according to the programmes of NGOs and FBOs, as well as the opportunities for social service workers in more remote areas to access opportunities. One study suggests that training should be directed toward strengthening community capacity, in the absence of a trained workforce.

10.7 Professionalisation
Professionalisation is limited. There is no law on social work. There is only one professional association - the Papua New Guinea Association of Social Workers. This association is a member of IFSW. It has a code of ethics that is consistent with IFSW guidelines and also promotes practice standards. However, it has a relatively small membership. The professional social workers who do exist are employed across the social service sector, including child and family welfare and child protection, as well as in other service areas.
10.8 Existing initiatives and strategies for workforce strengthening in social services
The Office of Child and Family Services is responsible for a major strategy for strengthening social services, which aims to provide an integrated structure of child protection offices at national, provincial and district level, supported by community volunteers. This initiative has the potential to be the foundation for a more effective child and family services system. The Family Support Centres have also demonstrated that they have a part to play in social services and child protection systems. Likewise, the function of juvenile justice officers mentioned above emphasizes a social service role in relation to children and young people in conflict with the law. In each instance, issues of resources, training and structural integration need to be addressed, combined with greater community awareness, so that the workforce can be more effectively developed.

10.9 Papua New Guinea: Key considerations
The absence of a law on social work and limited pre- and in service training hampers the professionalisation and strengthening of the social service workforce. Expanding training opportunities and establishing professionalism for the social service workforce will be critical for the development of the child protection system and to enable a move away from an over-reliance on community volunteers.
11. TIMOR-LESTE

11.1 Introduction
The Democratic Republic of Timor-Leste consists of the eastern part of the island of Timor, together with an enclave within the Indonesian province of West Timor, as well as three other islands. Of its population of 1,269,000 people in 2017, 51.2 per cent were aged under 18 years. Timor-Leste is ranked 132nd on the Human Development Index, placing it in the medium development range.

11.2 Size and scope of the social service workforce
Government social services have developed quite rapidly in Timor-Leste since independence in 2002. They are located within the Ministry of Social Solidarity. Social service roles include social animators (community workers focused on social change), gender-based violence focal points, child protection officers, supervisors and managers. There is one social animator for each submunicipality, one gender-based violence focal point for each municipality, and two child protection officers for each municipality. This means that on average each worker is serving 82,000 people per district. Social animators and gender-based violence focal point roles largely focus on monitoring and reporting, and service promotion. In contrast, the child protection officer role is concerned with case management and referrals to services. This suggests an approximate figure of 90 social service workers in government agencies.

In addition, there are social services provided by NGOs and FBOs. The numbers and roles of these workers is not identified. Likewise, civil society roles, such as suku chiefs and community leaders, cannot be quantified but play an important part in the overall provision of social welfare.

11.3 Structure of the social service workforce
The Department of Promotion and Protection of Child Rights under Ministry of Social Solidarity is the lead agency on child protection. This department is mandated to implement and coordinate child protection from national, municipality and submunicipality levels. To perform its role, essential staff has been deployed including social animators in submunicipalities and gender-based violence focal points and child protection officers in municipalities. The supervisors and managers operate at both the national and municipality levels.

11.4 Policy and legislation impacts on the social service workforce
Timor-Leste ratified the UNCRC in 2003. The country’s Law Against Domestic Violence (2010) addresses the needs of children, both as victims of domestic violence and as dependents of women who are victims. The Timor-Leste Penal Code (2009) specifically criminalises recruitment and use of children in armed conflict (child soldiers), child prostitution, child pornography, abduction and human trafficking. Child abuse may also come under crimes related to the failure to provide food or other assistance in cases of serious need (although these are not age specific). However, these laws are not sufficient to provide a comprehensive legal framework either for child protection or social services more generally. A review of the juvenile justice system also identified that children’s needs when in conflict with the law are not yet incorporated into legislation or approved policy.

Social service policy is in a state of rapid change in Timor-Leste. The 2014 Child and Family Welfare System Policy (approved for modelling purposes, yet to be approved as national policy by the Council of Ministers) considers various aspects of the child and family welfare system, including specific foundational policy, costs, human resource development and implementation. Although the current policy framework specifically addresses government services, it also recognizes the role of NGOs, FBOs and community leaders. Throughout the policy, there is an emphasis on strengthening families and communities, in keeping with the country’s cultural values.

11.5 Child protection system
Currently, the child protection system involves all the social service staff of the Ministry of Social Solidarity and includes social animators, gender-based violence focal points and child protection officers. All three roles can be regarded as operating at the primary level, engaging in community awareness building, and at the secondary level with the provision of community-based

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services to families and communities. More limited services are available at the tertiary level, which is less developed. At present, the law to some degree covers interventions such as provision of out-of-home care or other comparable services, acknowledging the primary role of a family and mentions residential care as a last resort for child safeguarding.

At the municipality level, a Child Protection Network (CPN) is led by a Child Protection Officer. CPNs are established in 13 municipalities and selected submunicipalities close to the border. The role of CPN is to coordinate and promote child rights and child protection activities. These groups often meet quarterly to discuss issues related to child protection and child well-being as well as conducting referral cases.

11.6 Education and training systems for social service work
Currently, the government social service workforce includes officers with a range of qualifications; 38 per cent have university degrees (bachelor and higher degrees), 9 per cent have diplomas, 1 per cent with certificates and 52 per cent with secondary school level education.172

Public service employment regulations and the recent history of Timor-Leste with the impact of the struggle for independence has resulted in the majority of the government social service workforce with only secondary school education. The number of university graduates with qualifications in social work or child protection (7 per cent) is limited. The majority of staff identify in-service training as most valuable for their work.173 The training of NGO and FBO staff is not known.

The Ministry of Social Solidarity has completed an in-service training package, including a competency framework and social service code of ethics, to be delivered to staff of the ministry. The ministry is also establishing a new office mandated to expand research, planning and institutional strengthening.

11.7 Professionalisation
There is no specific law on social work and social work is not a widely recognized profession in Timor-Leste. Only a small number of Ministry of Social Solidarity officers have degree or diploma level qualifications in social work and relevant fields.174 Throughout the Child and Family Welfare System Policy, there is an explicit reluctance to prioritize professionalisation without first developing wider capacities.175

11.8 Existing initiatives and strategies for workforce strengthening in social services
The Child and Family Welfare System Policy also recommends an increase in staff levels of between 10–13 per cent for community-based positions. This policy also proposes increasing the level of training for officers already in post and for those who are recruited. The emphasis is on diploma, certificate and in-service programmes as ways of training the workforce, rather than developing a graduate social work profession. In all aspects of the policy, there is a theme of seeking what is feasible rather than focusing on ideals, which were viewed as unrealistic.

11.9 Timor-Leste: Key considerations
As social services law and policy, as well as systems and structures, are in a state of rapid change in Timor-Leste, there is great demand on resources. The emphasis on the community as the provider of assistance, including the protection of children, might need to be balanced by recognizing the limitations of informal protective mechanisms. Although there is a generally high level of post-secondary qualifications among the workforce (48 per cent), efforts to professionalise the workforce might be more positively considered if it can benefit the majority of workers without relevant qualifications.
12. FIJI

12.1 Introduction
The Republic of Fiji is comprised of a group of over 300 islands, of which 110 are inhabited. The population in 2017 was 899,000\(^{176}\), with more than 75 per cent living on the islands of Vanua Levu and Viti Levu and about 33 per cent of the total population living in or around the capital, Suva, on Viti Levu. Approximately 33.7 per cent of the population in 2017 was aged under 18 years, compared to 4 per cent aged over 65 years. Fiji ranks 92\(^{rd}\) on the Human Development Index (at the same point as Mongolia), in the high development range and close to the median figure globally.

12.2 Size and scope of the social service workforce
The size and scope of the social service workforce in Fiji could only be determined with regard to the number of government officers. These officers are employed in the Social Welfare Department of the Ministry of Women, Children and Poverty Alleviation. The Child Services Unit (CSU) in the Social Welfare Department is headed by an assistant director supervising six employees. At local levels, there are six principal welfare officers, six senior welfare officers and 11 welfare officers in six division (regions) capitals, with 27 welfare officers grades I and II in 12 district/province capitals. Thus, there is a total of 57 officers in the frontline social service workforce.

Of the social welfare officers, 35 are intended to become specialized child welfare officers as part of re-structuring of the CSU to become a department under Ministry of Women, Children and Poverty Alleviation, to separate children’s services from other social welfare services. Whether or not these child welfare officers will also serve as probation officers for children is under discussion.

There are social workers or social service workers employed by national and international NGOs and FBOs, for example, Fiji Women’s Crisis Centre, Medical Services Pacific, Empower Pacific, Lifeline, etc. However, the numbers of this workforce are not collated.

12.3 Structure of the social service workforce
In the national government, there is a director of social welfare supervising an assistant director of the CSU, along with four other assistant directors, respectively in charge of Family, Probation, Poverty Alleviation, and Disability.

A director of a new Department of Children will be appointed, following the restructure. In each location, supervision is provided by one principal and one senior welfare officer. In a recent review by UNICEF Pacific, these workers reported that although there are many child protection tasks to be undertaken, including response to cases, community awareness raising and other preventative action, they spend a lot of their time in the administration of cash transfers to vulnerable groups and, in recent years, on the administration of relief following natural disasters.\(^{177}\) Welfare officers at the local level are in charge of all social welfare services, child protection being one among many responsibilities. Career progression is within the government service, rather than through professional development and continuing education.

12.4 Policy and legislation impacts on the social service workforce
Fiji ratified the UNCRC in 1993. Under the Juveniles Act (1974), currently in force, the director of social welfare, with social welfare officers, is the designated child protection authority. The 2018 Child Care and Protection Bill (yet to be passed, Part 2, Section 8) provides for a range of powers for a new position, director of the Department of Children, which are to be exercised through child welfare officers taking action in specific situations. This bill mandates reporting of suspected child neglect or abuse, and provides for prevention and early intervention, including assessment and planning, as well as emergency protection orders and other forms of protection. Fostering and adoption, as well as the provision of residential care by the department, are provided for as well, augmenting the Adoption Bill (2017), yet to be passed. Finally, the Child Care and Protection Bill includes powers to respond to sexual offences, including child sexual abuse materials, and establishes a child sex offender registry.

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Other significant legislation that affects social welfare officers includes the Child Justice Bill (2018), yet to be passed, the Community-Based Corrections Act (2018) (although this covers both adults and children in conflict with the law), the draft Domestic Violence Bill (building on the Domestic Violence Decree of 2009) and also laws relating to labour and human trafficking.

In addition, there are the inter-agency guidelines on child abuse and neglect agreed to in 2015 between the Fiji Police, the Ministry of Health and Medical Services, the Ministry of Education Heritage and Arts, Ministry of Employment Productivity and Industrial Relations, and the Department of Social Welfare in the Ministry of Women, Children and Poverty Alleviation, which were revised in 2018 and are being finalized in 2019 as ‘Inter-Agency Guidelines on Child Care and Protection’.

12.5 Child protection system
Fiji’s child protection system appears to be focused on the reporting of child harm and responses. Therefore, it is largely focused at the tertiary level. The 2010 Child Welfare Act (formerly Decree) only makes it mandatory for professionals such as social workers, police, teachers and health workers to report child abuse, however the 2015 inter-agency guidelines also place expectations on NGO/FBO and the private sector to cooperate with the mandatory authorities in safeguarding children. The CSU established a child helpline in 2015, the operation of which is subcontracted to a national NGO who is working on raising its profile.

To some extent, the social welfare officers working under the leadership of the CSU are mandated to also carry out preventive activities. CSU is actively involved in primary level interventions both through media campaigns, such as radio and TV spots, and the annual campaigns, as well as through inter-personal communication at community level.

Developed with UNICEF support in 2007, a Child Protection Community Facilitation Package to raise awareness of caregivers on child development, child protection and positive parenting is now implemented with government funding. By the end of 2018, 50 per cent of the 2,029 communities in the country (1,714 indigenous/rural and 315 informal/urban), had been reached. In each of the four main divisions, one staff member has been contracted by social welfare services, specifically to run this programme and train community leaders on the package.

The package is also implemented in informal/urban settlements, for children are at risk, which constitutes targeted (secondary) interventions. Social welfare officers are also in charge of distribution of childcare allowances to eligible at-risk families, as well as other social protection scheme allowances, which constitute secondary interventions.

The National Coordinating Committee on Children is the national multi-sector multi-stakeholder mechanism responsible for monitoring, coordinating and reporting on the implementation of the CRC, while inter-agency committees operating under the National Coordinating Committee on Children are responsible for the coordination of child protection interventions. At local level, inter-agency committees are responsible for the coordination of child protection interventions, as well as the referral of child protection cases, as per the inter-agency guidelines on child abuse and neglect. Inter-agency committees include local frontline government departments (social welfare, police, judiciary, health, education) and NGO service providers. There is a total of 22 inter-agency committees coordinating child protection services, four located in Suva, six in division capitals and 12 in district head towns.

12.6 Education and training systems for social service work
The Faculty of Arts, Law and Education of the University of the South Pacific (USP) in Suva offers a certificate and diploma in social and community work, and a bachelor’s degree in social work. USP Pacific Technical and Further Education College of Arts and Humanity offers a certificate in community development and a diploma in counselling. Graduates work in many areas of government and NGO social services, including child welfare and child protection. However, the UNICEF report in 2015 noted that child protection was not explicitly identified as a topic within any existing curricula, and this appears still to be the case. In 2017, UNICEF started engaging with USP School of Social Work to include a child protection module into the existing bachelor’s degree in social work.
A 2011 report noted that in 2010 there was a Social Welfare Department training plan that covered all the major areas of service provision.\(^{180,181}\) At the same time, this report identified that, at the operational level, training requirements were minimal, without any specialist knowledge being stipulated.

Social service workers in Fiji have benefited from regional multi-country training provided through the NGO sector, in particular, the ChildFund Australia programme in 2017.\(^{182}\) This programme was initially developed for Fiji and was extended the same year to Kiribati, Solomon Islands and Vanuatu.\(^{183}\) The five-week programme over a period of nine months included four areas: foundational child protection, child development, child protection case management and skills to work with children. In Fiji, five welfare officers from the ministry and 20 NGO staff participated in the programme.

In 2019, UNICEF developed an institutional and human resource capacity building package for government statutory child protection services in the Pacific, which will be implemented in Fiji in 2020. The package includes child protection case management guidelines and forms, monitoring tools and two training modules and materials, one for social workers and one for managers-supervisors. In each country, all government social workers and social service managers-supervisors responsible for child protection will be trained. The social worker training consists of five one-week face-to-face sessions over a period of six months with practical assignments in between, and the training of managers-supervisors consists of a two-week module summarizing the social work training and focusing on supportive supervision, service quality monitoring, planning, budgeting and reporting. The training of social workers includes five modules: introduction to child protection, child development and child maltreatment, case management (two modules) and social work. UNICEF also engaged with USP Pacific Technical and Further Education College of Arts and Humanity for the package to become part of the college’s educational offer at certificate level and, in the future, to be further developed into a diploma in child protection social work.

12.7 Professionalisation

Formerly, the Fiji Association of Social Workers was the relevant professional body; recently this has been replaced by the Fiji Association of Social and Community Workers. The association is a member of IFSW. This is a registered body in Fiji, although there is no registration or licensing of practitioners. While still listed as a member of IFSW, there is no published information about this organization. There is no information about the availability of the code of ethics.

12.8 Existing initiatives and strategies for workforce strengthening in social services

There is no national strategic plan for strengthening the social service workforce, or more specifically the workforce in child protection, child and family welfare, or juvenile justice. The Child Care and Protection Bill and the Child Justice Bill outlined above are yet to be passed by the parliament.

12.9 Fiji: Key considerations

Fiji has a relatively long-standing social service workforce, and strong draft laws in child welfare and protection and child justice. There is a clear emphasis on tertiary level child protection, with fewer services provided at primary and secondary levels. At the same time, despite established training in higher education, and recent in-service programmes at operational level, there is little attention to specialist skills and knowledge. Advocacy for passing the laws and requiring a minimum level of training for the social service workforce would strengthen delivery of child protection services.


13. KIRIBATI

13.1 Introduction
The Republic of Kiribati is comprised of 33 atolls and islands spread over 4,000 kilometres. In 2017, it had a population of 114,000, 50 per cent of whom lives in or around the capital on South Tarawa. A total of 41.2 per cent of the population was aged under 18 years, with 3 per cent aged over 65 years. Kiribati ranks 134th on the Human Development Index, placing it in the lower part of the medium development range. Of particular concern is that rising sea levels are reducing the land area and requiring communities to move.

13.2 Size and scope of the social service workforce
Social service workers in Kiribati are predominantly employed in the Department of Social Welfare, within the Ministry of Women, Youth, Sports and Social Affairs. This service currently consists of one principal social welfare officer, one senior social welfare officer, and four social welfare officers located in the national capital, and 23 assistant social welfare officers across 22 islands, including two on South Tarawa. The ministry recently recruited two more officers for South Tarawa due to population density and prevalence of issues in disadvantaged urbanized areas. The six national level officers hold supervisory positions. Thus, there are a total of 31 in the social service workforce at present. These officers have responsibilities across all aspects of social welfare, including children and families, mental health, disability and old age services. In addition, NGOs such as the Crisis Centre, Kiribati Women and Children’s Support Centre, and Alcohol Awareness and Family Recovery may employ social service workers, but the number of these is not identified and they tend to be foreign nationals.

13.3 Structure of the social service workforce
The small size and focus of the social service workforce in Kiribati means that it has a simple structure. Overall supervision is provided by the principal and senior social welfare officers, and each of the four social welfare officers supervises assistant social welfare officers in the region they are responsible for: Central Gilbert Islands (South and North Tarawa); Northern Gilbert Islands; Southern Gilbert Islands; Line and Phoenix Islands (which include Kiritimati Island). There are limited opportunities for career progression.

13.4 Policy and legislation impacts on the social service workforce
Kiribati ratified the UNCRC in 1995. Two legislative documents guide social service work with children and families. The first is the Children, Young People and Family Welfare (CYPFW) Act (2013) which is based on the integration of UNCRC into domestic law. The Act mandates prevention, early intervention, reporting and referral, assessment, intervention planning and the implementation of childcare and protection plans. This includes emergency intervention, temporary custody and interim protection orders. The second law is the Te Rau N Te Mwenga Family Peace Act (2014) which addresses domestic and family violence, with a particular focus on eliminating violence against women and includes violence against children as a concern. The Act mandates the function of family counsellor, which might be considered part of the social service workforce (although not otherwise employed within the social welfare system).

In addition, the CYPFW policy briefing paper of 2012 provides a policy foundation that identifies the leading role for the Department of Social Welfare, coordinating other ministries as well as the NGO/FBO and local community sector contributions in this area. The CYPFW policy comes with a CYPFW system implementation plan, human resources strategy and costing plan developed in 2013 and updated in 2018. A multi-sector child protection costed plan 2018–2019 was also developed in 2018.

13.5 Child protection system
Based on the provisions of the CYPFW Act (2013), Kiribati has primary, secondary and tertiary levels in the child protection system, in principle. Reporting from a data management system introduced in 2015 suggests that child neglect and abuse and domestic violence interventions make up about one-third of work undertaken.

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The child protection system includes inter-agency cooperation, with the police mandated in the CYPFW Act (2013) to work with the Department of Social Welfare when necessary. However, although the 2013 implementation manual calls for inter-agency cooperation, there is no documentary evidence concerning if or how this might be occurring. At national level, the Kiribati National Advisory Committee on Children was established to oversee the implementation of the CRC, but it has now been merged into one single committee responsible for all human rights treaties. In 2018, UNICEF Pacific assisted the government to develop terms of reference for the establishment of a national level child protection working group for strategic level coordination. At the local level, in 2018, UNICEF Pacific assisted the government with the development of child protection inter-agency guidelines and referral pathways, and in 2019, UNICEF will provide support to orient inter-agency child protection network members on implementation. Inter-agency child protection networks are gradually being established in each of the 22 islands, under the leadership of assistant social welfare officers (ASWO).

ASWOs deliver primary, secondary and tertiary services. In terms of prevention, a Child Protection Community Facilitation Package, similar to the one in Fiji, was recently developed and is being implemented on a pilot basis. Prior to the development of this package, ASWOs were reaching out to communities by conducting awareness raising activities and liaising with community leaders. ASWOs are also responsible for social protection and response to child protection cases.

13.6 Education and training systems for social service work
There are no specific education or training requirements for social service work in Kiribati. Kiribati citizens have access to educational opportunities provided by USP on the Suva campus in Fiji or other USP campuses in Pacific countries, including some at the USP campus in Kiribati (see Fiji section). In 2017, a total of 25 participants including five from the Department of Social Welfare, and 20 from NGOs working with women survivors of violence and children in need of care and protection, churches, police and the Attorney General’s Office benefited from child protection training provided by ChildFund Australia (see Fiji section).  

13.7 Professionalisation
Social service work is not professionalised in Kiribati. For example, there is no dedicated law on social work, no recognition of social work as a profession and no system for registration or licensing.

13.8 Existing initiatives and strategies for workforce strengthening in social services
In 2019, all 31 government social welfare officers participated in the child protection social work training developed by UNICEF Pacific, and managers-supervisors will be trained in 2020.

13.9 Kiribati: Key considerations
The social service workforce in Kiribati is small. Nevertheless, the child protection system has three tiers. However, as only one-third of social services work is described as focused on child protection, with other functions including domestic violence and juvenile justice, this demands both improved systems and also improved training to enable workers to address these diverse needs. Efforts to further develop inter-agency cooperation will contribute to more effective work in this area. While at this stage professionalisation may not be the most important goal, greater systematic training opportunities linked to role expectations would significantly strengthen the social service workforce.

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14. SOLOMON ISLANDS

14.1 Introduction
Consisting of six larger islands and about 900 smaller islands, in 2017 the Solomon Islands had a population of 599,000 of whom 45.9 per cent were aged under 18 years. The Solomon Islands are ranked 152nd on the Human Development Index, placing the country in the lowest quintile.

14.2 Size and scope of the social service workforce
The Social Welfare Department (SWD) of the Ministry of Health and Medical Services (MHMS) employs 17 officers; seven social welfare officers are located in the ministry in the national capital Honiara, covering roles at the national (3 officers), provincial (2 officers) for Guadalcanal province where the capital is located and capital city levels (2 officers), and ten social welfare officers are located in five other provinces (from one to three per province, based on population number). Two national level positions, SWD director and child and family welfare manager, are supervisory. Only two of the current workers are described as having professional qualifications. In 2020, the government will recruit three social welfare officers for three remaining provinces which do not have any staff, bringing the total workforce to 20 officers. Social welfare officers are responsible for all areas of social welfare, including child protection. The number of NGO social workers is not known.

14.3 Structure of the social service workforce
Predominantly, social services are provided by the government, although some NGO and FBO (Family Support Centre, Christian Care Centre, Sef Pleis, Live and Learn, Empower Pacific) provide social services. Provincial social welfare officers are located in provincial health departments. They are under the administrative supervision of their respective provincial health director and the technical supervision of the SWD child and family welfare manager, who reports to the SWD director. SWD has responsibility to ‘lead and coordinate prevention, early intervention and response services for children and their families.’

14.4 Policy and legislation impacts on the social service workforce
Solomon Islands ratified the UNCRC in 1995. There are several legislative documents that provide the framework for social service provision in Solomon Islands. The Family Protection Act (2014) focuses on domestic violence; and the Child and Family Welfare Act (2017) designates the state structure responsible for child protection, defines its role and seeks to protect children by strengthening family responsibilities. The Child and Family Welfare Act (2017) mandates SWD to provide community awareness, offer supportive services for families, with a view to strengthening their capacity to care for their children, receive referrals regarding children at risk of harm, assess children and families, and intervene where necessary. These laws prioritize services that work directly with individuals and families, including children. Where required to safeguard the child, the department has powers to seek the removal of children from families, including in emergencies, and to make appropriate arrangements for alternative care. This Act implemented recommendations from the Child and Family Welfare System Policy (2012), which comes with an implementation framework, a human resources strategic plan and a costing analysis, developed in 2013 and updated in 2018. As relevant, the Child and Family Welfare Act is supported by more specialised legislation concerning adoption (2017) and juvenile justice (1972) to be replaced by the Youth Justice Bill (2018).

14.5 Child protection system
As legislation provides for preventative and community focused services as well as targeted interventions in response to concerns about specific children, the child protection system would be deemed to consist of primary, secondary and tertiary levels. Nevertheless, some weaknesses are identified in this system, in that social welfare functions are not always well integrated with the wider health system, and both education (including teachers) and the police tend to have functions that are concentrated at the tertiary level.

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At the national level, the National Advisory and Action Committee for Children, led by the Ministry of Women, Youth, Children and Family Affairs, oversees the implementation of the CRC. Under the committee, the National Child Protection Working Group, led by the Ministry of Health and Medical Services/SWD, is the strategic coordination mechanism. The working group’s terms of reference, as well as the inter-agency guidelines and referral pathways for provincial level child protection working groups, were developed in 2018. For the moment, Provincial Advisory and Action Committees for Children only exist in three provinces. From 2020, Provincial Child Protection Working Groups will gradually be established in the remaining six provinces and their members oriented on the guidelines.

Similar to other Pacific Island countries, a Child Protection Community Facilitation Package has also been developed in the Solomon Islands and is implemented by the Ministry of Women, Youth, Children and Family Affairs, in partnership with churches.

14.6 Education and training systems for social service work
USP has a campus in Honiara and offers diploma and certificate level programmes in related fields, including social and community work, community development and counselling. The Solomon Islands National University provides diploma programmes in community-based rehabilitation and in youth development. Solomon Islands citizens also have access to USP educational opportunities in Fiji and other Pacific Island campuses (see Fiji section). In addition, in 2017, 23 workers from Solomon Islands, including four from SWD and 19 NGO/FBO workers and health professionals, participated in the regional multi-country training offered by ChildFund Australia, specifically focused on developing capacity in child protection and social work.192 In 2019, all 17 government social welfare officers are participating in the child protection social work training developed by UNICEF Pacific, and managers-supervisors will be trained in 2020.

14.7 Professionalisation
There is no dedicated law on social work. In addition, Solomon Islands does not recognize social work as a distinct profession and, unlike Fiji, there is no professional organization (which, given the small numbers, is not surprising). As with other Pacific Island countries, there tends to be a lack of distinction between professional and paraprofessional workers. While there are proposals to require minimum levels of training and also mandatory registration of all social service workers, a proposal to recognize social work as a profession has not been tabled.

14.8 Existing initiatives and strategies for workforce strengthening in social services
In addition to the revision of the 2013 Child and Family Welfare System implementation plan, human resources strategic plan and costing analysis conducted in 2018, work was initiated on the elaboration of a costed multi-sectoral child protection plan for 2019–2021. The completed 2019 costed plan allowed SWD to triple its annual budget for 2019 and create one additional provincial social welfare officer position in 2019, and likely two more positions in 2020, to complete coverage of all nine provinces. The National Health Strategic Plan 2016–2020 addresses social welfare only very briefly. There are no current or planned initiatives to strengthen the social service workforce, apart from the recommendation for minimum training of workers.

14.9 Solomon Islands: Key considerations
The social service workforce in the Solomon Islands is very small and focused on child welfare and protection. While there is a three-tier child protection system, limits in coordination with other services (police, health, education) mean it is strongest only at the tertiary level because that is the level at which the duties and powers of each part of the system are defined in policy and legislation. Proposals for minimum training requirements and for registration do not differentiate between levels of the workforce, either by role and function or types of training. Greater clarity on these aspects would provide a stronger basis for social service work.

15. VANUATU

15.1 Introduction
The Republic of Vanuatu is comprised of 83 islands, of which 65 are inhabited. It had a population of 270,000 in 2017, of which 42.2 per cent was aged under 18 years. Vanuatu is ranked 138th on the Human Development Index, placing it in the medium development range. Approximately one-fifth of the population lives around the capital, Port Vila, while the majority live in rural areas.

15.2 Size and scope of social service workforce
The main social service functions for child protection is exercised by officers of the Child Desk in the Ministry of Justice and Community Services (MoJCS). A Child Desk coordinator, reporting directly to the director general of MoJCS, heads the Child Desk. Currently, the Child Desk coordinator supervises one child protection officer (CPO) at national level, also covering the province where the capital city is located, and two CPOs based in two other provinces. As part of an on-going restructuring process, the Ministry has changed the designation of the national coordinator to Child Social Welfare Coordinator and established 13 new positions, one deputy at national level, and two officers in each of the six provinces, of which 11 positions are currently being advertised. The total number of social service workers will therefore be 14, including the national coordinator. There are also juvenile correctional staff that may be regarded as carrying out social service work, in line with international standards. Other social service functions (mental health, disability and older people) are addressed either within the health system or by families directly and traditional community customs (Kastom). There is a Disability Desk officer located in the MoJCS.

15.3 Structure of the social service workforce
Social services are predominantly provided by government, either through the Child Desk in the MoJCS, or in health, education and justice sectors. A recent UNICEF Pacific report describes Vanuatu’s social services as “in the process of being developed”. NGOs and FBOs also provide some social services, in particular through Vanuatu Women’s Centre, Save the Children Australia, Wan Smol Bag, World Vision, Vanuatu Society for People with Disabilities, Scouts and Oxfam. A child protection system mapping report in 2011, also supported by UNICEF Pacific, concluded that a formal social service system was at this time inappropriate for Vanuatu, on the grounds of cost and that it was culturally a ‘poor fit’. Based on these findings, the National Child Protection Policy provided for the establishment of Child Protection Committees at various levels rather than formal social services. Six Child Protection Committees were established at local level (covering one to three communities) and two at provincial level, as a pilot. A rapid assessment of the committees conducted in 2018 showed that this model was not replicable or sustainable due to its high cost and limited efficiency and impact. The vision for the Vanuatu child protection system was revisited in 2018, as a preliminary step for drafting of a child protection bill, considering a more balanced mix of formal and informal sector, and lighter set up for community-based child protection mechanisms.

15.4 Policy and legislation impacts on the social service workforce
Vanuatu ratified the UNCRC in 1993. The main documents guiding social services are the Family Protection Act (2008), the National Child Protection Policy (revised in 2018) and the Correctional Services Act (2006). UNICEF is providing technical assistance to the government to develop child protection legislation, which should designate the statutory authority for child protection and define its mandate.

15.5 Child protection system
The MoJCS is working predominantly at the primary level of a child protection system. The main function is to engage in community awareness. However, the Child Desk designated to safeguard children under the Family Protection Act (2008), through child protection officers, does receive cases. An improvement in response to the principles within the CRC can be

196 Ibid.
seen in the juvenile justice system, supported by the Strategy for the Justice and Community Services Sector 2014–2017. More child appropriate practices, such as greater quality in legal representation and introduction of case management practices have begun to be introduced, even though these remain discretionary.\textsuperscript{198, 199}

The National Children’s Committee, led by the Ministry of Youth and Sports Development, oversees the implementation of the CRC. Under the National Children’s Committee, the National Child Protection Working Group, led by MoJCS, is the strategic coordination mechanism at the national level. Provincial Child Protection Working Groups have been established in two provinces. However, in the absence of child protection legislation, inter-agency guidelines have not been developed yet.

\textbf{15.6 Education and training systems for social service work}

There is no specified training requirement for the social service workforce, either for the child protection officers of the MoJCS or for others in the justice, health or education sectors. Some training has been provided by UNICEF Pacific and Save the Children as part of the development of the Child Desk. The Vanuatu Council of Churches has recently begun to provide training in child protection for FBOs and community members.\textsuperscript{200}

In 2017, 20 workers participated in the ChildFund Australia child protection social work training, including six from MoJCS, and 16 from NGO and FBO providing services to women survivors of violence and children in need of care and protection. In 2020, all 14 government social welfare officers will participate in the child protection social work training developed by UNICEF Pacific. Vanuatu citizens have access to USP educational opportunities in Fiji, other Pacific Island countries and the Vanuatu USP campus.

15.7 Professionalisation

Social work is not recognized as a profession in Vanuatu, and there is no specified requirement for particular qualifications or training for those employed in social services roles.

15.8 Existing initiatives and strategies for workforce strengthening in social services

The main current strategies for strengthening the workforce are to develop the Child Desk function within the MoJCS and to provide some in-service training for health workers (including paraprofessional village health workers) and teachers.\textsuperscript{201}

15.9 Vanuatu: Key considerations

Vanuatu has the smallest workforce in this multi-country study. Priorities include the revision of the national child protection policy to include a child and family welfare system that is effective within the sociocultural and economic context of Vanuatu and the development of legislation to designate a child protection authority as well as requirements for social service worker training.\textsuperscript{202} Community-based awareness and training programmes also have an important role to play for increasing the levels of parent education, changing local cultural attitudes and values, elevating the demand for strengthening the child protection framework, and ensuring its implementation.
A social worker supports a boy who has been out of school for three years and had been engaged in online gambling. He has been supported to access skills training and to link up with his father.
A social worker from the Department of Social Welfare counsels a girl who has been abused by a family member.
Overall, this report has established that there is a great degree of variation across the region regarding social service systems and how well each nation’s system operates, as well as variation between provinces or regions within countries. The contribution of the social service workforce in each country toward the protection and well-being of children also varies considerably. While each country will need to consider context specific short- and long-term priorities for strengthening their social service workforce to most effectively meet the child protection and child welfare needs of their population, broad regional recommendations on planning, developing and supporting the workforce have been provided on the basis of this review. The recommendations are intended to contribute to the dialogue and assessments at country level.

Planning the social service workforce
All countries included in this review are actively involved in planning the social service workforce and have national strategies in place. In some countries, such as Indonesia, Malaysia, Mongolia, the Philippines, Thailand and Viet Nam, modernised social services have existed for several decades and the planning process is now focused on how to refine and further strengthen a workforce that is established. In the others, to different degrees, the planning process is focused on creating a defined workforce. In a small number of countries, in particular Kiribati and Timor-Leste, there is currently a conscious policy to focus on aspects of workforce strengthening other than professionalisation, as well as an emphasis on strengthening community capacities to provide primary level responses to child welfare and risk. However, in all these countries, strengthening the social service workforce is part of policy planning.

Systematic data collection on the workforce
All the countries included in this report would benefit from collecting systematic data about all aspects of the workforce, in order to support workforce planning. The lack of or limited nature of systematic data results in planning being fragmented and not as strategic as it could be. One specific example is that reliable figures about the number of social service workers responding to the needs of children and issues of child protection are difficult to identify; the numbers stated in this report are estimations in most countries. Data on government workers was slightly easier to gather than data on NGO-based social service workers, but data was still difficult to capture due to the lack of government-managed human resource information systems or other means to systematically track the number of social service workers. Data collection was further hampered by varied definitions of the social service workforce. Without firm data on numbers of workers, it is also not possible to determine recruitment needs for filling of vacancies or strategic hiring to address particular gaps.

Professionalisation to strengthen accountability and quality
Professionalisation of social work is critical for ensuring accountability and quality service delivery. Greater clarity about the social service workforce, including social work, definition of roles and responsibilities, educational requirements and accountability frameworks would contribute to strengthening it. The professionalisation of social work is in turn key to improvements in child protection (as well as in other areas of social need). Yet in most countries in this study, there is a problem with public recognition of social work as a professional activity and a widespread tendency to see it as ‘voluntarily doing charitable work to assist others in the community.’ This is a perception that is in many cases shared by politicians and other key decision makers, which can hold back progress in strengthening the workforce.

Following from this, distinguishing between the roles and functions of professional (graduate) social workers and those in paraprofessional and ancillary roles is problematic. Achieving greater clarity in defining and promoting an understanding of different roles and functions within a normative framework will enhance planning and also efficiency in service provision.
Supportive workforce systems
Appropriate systems and structures are vital to enable a strong and effective workforce to develop. Such systems include the establishment of practice standards, supportive supervision and proactive quality assurance mechanisms. These assist social services workers in fulfilling their responsibilities, as well as for the wider society in knowing what they might expect from services. In the Philippines and some other countries in the region, such systems and structures are being developed and implemented. However, for many countries in this study, clear systems and structures to support the social service workforce in this way are lacking. For example, the registration or licensing of workers remains a future aspiration in all but the Philippines, Thailand and Indonesia, if it is considered at all. This may be seen as a step that follows from the greater definitional clarity discussed above—however, it can also contribute to such clarity. The appropriate time to pursue this aspect of professionalising the workforce must be judged accordingly by each country.

It was observed that there is particular value in ascribing duties, powers and responsibilities to the social services sector in law and policy, creating more accountability on behalf of the country and the workforce members. This in turn assists in strengthening child protection systems.

Recommendations to improve planning for social service workforces:

- **Recommendation 1:** Reliable, government-managed data about the social service workforce should be systematically collected and used to support planning, developing and supporting the workforce.
- **Recommendation 2:** Specific laws and policies should be developed which aim to increase the professionalisation of the social service workforce through the establishment of a normative framework outlining/defining functions (roles and responsibilities), competency framework, practice standards and common accountability frameworks as a way of increasing efficiency and effectiveness.
- **Recommendation 3:** Policies should be developed on salary equity across regions of the country and in urban/rural areas, which aim to increase recruitment and retention of the qualified workers nationwide, taking into account comparative equity against other professions.
- **Recommendation 4:** Systems and structures should be planned based on system readiness and then developed to ensure that the social service workforce is strengthened through proactive quality assurance mechanisms, standardized registration and phased licensing.
- **Recommendation 5:** Prioritization should be given to the development of informed, contextualized national strategic plans on strengthening the social service workforce. These plans should be costed.
- **Recommendation 6:** Plans for social service workforce strengthening should be integrated into social protection, child protection and other relevant national strategic frameworks.

Developing the social service workforce
Education and training for those who provide social services is a key element in workforce strengthening in all countries. At the same time, the extent and type of training is closely related to overall planning for the sector. Where this includes professionalisation, particularly of social work, there is relative clarity about higher education programmes, but information about other forms of education and training such as at diploma or certificate level is limited. In-service training is dependent on the policies, practices and resources of each organization that employs the workforce. Strengthening the workforce requires a planned, coordinated and integrated national approach to education and training at all levels.

This report provides an overview on data related to the availability and number of degree programmes in each country, which reflects efforts and priorities made by countries to educate and develop a professional cohort of social workers. However, the number of degree programmes in relation to the size of either the professional cohort or the wider social service workforce is not easy to compare relative to differences in population size or planned workforce developments. In almost all countries in this report, views were expressed that social work education and training is not currently sufficient to enable a strong professional cohort to grow.
Social work teaching faculties
A common and important issue facing those countries where social work is a relatively new profession is the lack of appropriately qualified and experienced social work faculty. This can result in teachers being appointed who themselves have very little understanding of social work practice. Although there are programmes to retrain educators, these are often limited in scope due to minimal available resources. Greater attention to ensuring that the body of educators are fully trained to teach professional social work theories, knowledge, methods, skills and values is essential to be able to strengthen the workforce.

Field placement opportunities
In all countries where detailed analysis has been done, with the exception of the Philippines and Thailand, part of the limitation of social work programmes is the availability (or lack) of appropriate supervised field education or practice placement opportunities. Although all countries which took part in the in-depth review and all country programmes reported through the desk review meet the international standard of at least three months supervised and assessed practice within the degree, the quality and effectiveness of such learning is seen as highly variable. Attention to this element of education and training, for example through innovative programme design in situations where there are very limited numbers of qualified practice supervisors, will strengthen the workforce and also enhance the employment of workers with relevant qualifications. Introducing training managers at social service organizations to provide supportive supervision to students completing their field placements will also strengthen the supervision provided to other social service workers in that organization.

Coordinated paraprofessional training
It should also be noted that the social service workforce contains many paraprofessionals, who have their own unique set of learning and training needs to fulfill their vital roles in the workforce. The base training for many paraprofessionals is often at diploma or certificate level, which in turn is often specific to particular parts of the sector (such as child welfare and child protection). This means that education programmes are difficult to map. However, for a strong workforce, attention should be given to identifying and coordinating such education and training and ensure national recognition and certification of the training.

Recommendations for developing social service workforces:

Recommendation 7: Prioritization should be given to developing and making available appropriate education and training at all levels of the social service workforce, including professionals and paraprofessionals.

Recommendation 8: Prioritization should be given to establishing social work degree programme in academic institutions.

Recommendation 9: Training and education of the social service workforce should be aligned with national priorities related to child and social protection and other relevant fields, as well as in line with international and regional standards.

Recommendation 10: Faculty and instructors providing education and training programmes should themselves be appropriately trained and experienced in the relevant field.

Recommendation 11: In countries where there are limited qualified social work educators, partnerships should be established between international institutions and service agencies to support the development of contextually and locally informed training and education programmes.

Recommendation 12: Social service organizations should seek to work collaboratively with education and training institutions to create and support viable practice learning with attention to supportive supervision of students.

Recommendation 13: Clearly defined standard operating procedures should be developed and endorsed which set supervision standards, parameters, and targets for practice hours for students in their learning placements.

Recommendation 14: In-service and pre-service certificate programme training for the social service workforce is necessary in a demanding and dynamic sector. Programmes should be developed and endorsed by the government and/or a nationally approved training provider and supported in a systematic way that provides a basis for national recognition to workers who have completed the training.

Recommendation 15: Paraprofessional social service workers should be recognized as a formal category of workers and they should have access to technical support, ongoing training, including training leading to professionalization, and professional development opportunities.
Supporting the social service workforce

Many people in a workforce, such as social services, choose to work in the sector because of intrinsic factors (such as the value placed on helping children at risk, or providing assistance to other vulnerable members of society). However, retention can be impacted if support for the workforce, such as career progression, supervision that addresses the needs of workers as well as scrutinising performance, and training opportunities is absent. These factors can also impact public perception of the professionalism of social workers, and, in turn, negative public perceptions can impact retention. Poor retention creates instability in the workforce. To the extent that these issues are addressed, it is more likely that the social service workforce can become increasingly stable and build on the experience and knowledge of all those who work within it.

Positive role of professional associations

Professional associations that are legally mandated and recognized by governments are important to support the social service workforce. The positive role of professional associations can be seen in three countries (Indonesia, the Philippines and Thailand) where social work has been professionalised for a longer amount of time than in the other countries studied. The importance of legal recognition of the association is that it empowers the profession to set standards and establish a code of ethics. These mechanisms enable the public to develop trust in the profession, as they provide a basis by which people can know what they might expect of a social worker, and so create an appropriate sense of accountability. Professional bodies can also support the development of knowledge and skills among their members through continuing education and by encouraging networks to share ideas and developments. For these reasons, recognizing and mandating such bodies can be an important contributor to ensuring quality and effectiveness in service provision.

The importance of adopting a code of ethics

As noted, a code of ethics is a very specific and important element of a profession. Having a code of ethics that is shared across a profession (as opposed to a code of conduct that is specific to an organization) is an indicator of a strong workforce because it provides the basis for both members of the profession and the public to know and understand the norms of good practice. Where a code of ethics is publicly available and can be known by beneficiaries of social services, employers and members of the professional group, it is possible to develop acceptance and support for the sector across the society. The countries in the detailed mapping study which have publicly disseminated codes of ethics are the Philippines, Thailand, Mongolia and Viet Nam.

Although professional associations are important, in some instances they do not include everyone in the workforce, i.e. paraprofessionals. Therefore, consideration must also be given to the ways in which paraprofessional social services workers can also be included or provided with equivalent opportunities, e.g. support for in-service training, especially regarding the scope of a code of ethics.

Supervision and career progression

An indicator of a well-supported workforce is whether or not workers feel that they are receiving adequate supervision and whether there are opportunities for upward mobility in the sector. The evidence from six countries in the in-depth review is variable across these factors. However, it is clear that all these factors contribute in different ways to the overall status of the social service workforce. For example, where upward mobility is possible, there is greater stability for an organization in maintaining a skilled workforce. Supervision (as this is understood in the sector), as well as in-service training, training contribute both to effective service provision and to workforce stability. For these reasons, such factors should be taken into account as important elements on strengthening the social service workforce.

Recommendations for supporting social service workforces:

- **Recommendation 16:** Investments should be made to ensure all members of the workforce have consistent access to quality supervision and support.
- **Recommendation 17:** Professional associations should be formally recognized by governments and supported to play a key role in promoting professional standards and codes of ethics, advancing sound policies based on local practice innovations and promoting positive perceptions of social work and social workers.
- **Recommendation 18:** In countries where social work and social services are developing, consideration should be given to enabling professional bodies to create and disseminate a
code of ethics which is endorsed and signed by the members of the association and protocols for addressing non-adherence to the code.

**Recommendation 19:** Appropriate support mechanisms and career structures should be created or strengthened, in order for workers to have career advancement opportunities.

**Recommendation 20:** Key messages and communication strategies should be developed to tackle negative perceptions regarding social work and social workers.

UNICEF/UN0269021/Brown
Lao PDR, 2018

The Counselling and Protection Center for Women and Children under the Lao Women’s Union is providing support to victims of violence and trafficking through a hotline, psycho-social counselling and training programmes (Vientiane).
A girl sits on a slide outside the Marillac Hills Centre - a government-run, shelter which is a safe haven for girls who have been physically and sexually abused.
### Table 10: Status of social service workforces: regional summary

<table>
<thead>
<tr>
<th>Country</th>
<th>Population and HDI rank</th>
<th>Size; scope of social service workforce</th>
<th>Structure</th>
<th>Policy and law (including law on social work)</th>
<th>Primary, secondary and tertiary social services for children</th>
<th>Qualifications required and training provided</th>
<th>Professionalisation</th>
<th>Existing initiatives for social service workforces</th>
</tr>
</thead>
<tbody>
<tr>
<td>Cambodia</td>
<td>15.7 million (HDI 146)</td>
<td>3,764, approx.; 33% national, government, 67% provincial and local government; plus NGOs (number not known).</td>
<td>Government ministry and departments; NGOs.</td>
<td>No specific law on SW/SSW; specific law on children; children included in related laws, Prakas and circulars; other child-specific and child-related policy.</td>
<td>Emphasis on primary level (strengthening families).</td>
<td>Degree not required; four social work degree programmes; voluntary in-service training.</td>
<td>Established professional association; no code of ethics.</td>
<td>Action Plan for Improving Child Care; Capacity Development Plan for Family Support, Foster Care and Adoption; Action Plan to Respond to Violence Against Women and Children; Enhancing Alternative Care Opportunities for Children with Disabilities; Action Plan to Implement Juvenile Justice Law; standards for social work practice.</td>
</tr>
<tr>
<td>Fiji</td>
<td>899,000 (HDI 92)</td>
<td>57 in government; plus NGOs and FBOs (number unknown).</td>
<td>Government based, national, division and district level. CSU under SWD, in MWOPA.</td>
<td>No specific law on SW/SSW; specific child law; children included in related sector-specific law; child protection inter-agency guidelines.</td>
<td>Largely focused at tertiary level, with less attention paid to primary and secondary levels; Local (division and district levels); Inter-Agency Committee and National Coordinating Committee on Children.</td>
<td>Degree not required; degree programme at one university; certificate and diploma programmes; some voluntary in-service training.</td>
<td>Established professional association; code of ethics.</td>
<td>Draft Child Care and Protection Bills; Draft Child Justice Bill.</td>
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<tr>
<td>Country</td>
<td>Population and HDI rank</td>
<td>Size of scope of social service workforce</td>
<td>Structure</td>
<td>Policy and law on social work (including law on social work)</td>
<td>Qualifications required or training provided</td>
<td>Existing initiatives for workforces</td>
<td>Professionalisation</td>
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<td>Indonesia</td>
<td>261 million (HDI 116)</td>
<td>45,000 in government; plus NGOs (number unknown)</td>
<td>Government: social rehabilitation, family welfare, children's services, women's empowerment</td>
<td>Specific law on SW/SSW; specific child law; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>Degree not required; 35 universities have social work degree programmes; also professional social work diploma in some universities.</td>
<td>Not established.</td>
<td>Established professional association; code of ethics; law on professional social work currently in parliament.</td>
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<tr>
<td>Kiribati</td>
<td>11,000 (HDI 134)</td>
<td>31 in government; plus NGOs and FBOs (number unknown)</td>
<td>Government-based, national and island level; SWD in Ministry of Women, Youth, Sports and Social Affairs.</td>
<td>No specific law on SW/SSW; specific child law; children included in related sector-specific law.</td>
<td>Degree not required; access to one regional degree programme; voluntary in-service training.</td>
<td>Not established.</td>
<td>Not established.</td>
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<tr>
<td>Lao People's Democratic Republic</td>
<td>6.7 million (HDI 139)</td>
<td>31 in government; plus NGO's and FBO's (number unknown)</td>
<td>Government ministry with specialist divisions</td>
<td>No specific law on SW/SSW; specific child law; children included in related sector-specific law on child protection.</td>
<td>Degree not required; some region-specific training.</td>
<td>Not established.</td>
<td>Not established.</td>
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<td>Malaysia</td>
<td>32 million (HDI 119)</td>
<td>6,900 including 5,000 specialist child protection officers.</td>
<td>Ministry (national) and departments (local); specialist agencies; hospitals.</td>
<td>No specific law on SW/SSW; specific child law; children included in related sector-specific law on child protection.</td>
<td>Degree not required; six degree programmes available; in-service training voluntary.</td>
<td>Not established.</td>
<td>Established professional association; code of ethics; law on professional social work currently in parliament.</td>
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<td>Country</td>
<td>Population and HDI rank</td>
<td>Size; scope of social service workforce</td>
<td>Structure</td>
<td>Policy and law (including law on social work)</td>
<td>Primary, secondary and tertiary social services for children</td>
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<td>Mongolia</td>
<td>3 million (HDI 92)</td>
<td>2,856 in central and local government, including education, health and justice sector workers; plus NGOs (number unknown)</td>
<td>Government at national, provincial, district and some at local levels.</td>
<td>No specific law on SW/SSW; law of social welfare includes SW provisions; specific child law; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>All three levels, but lack of national uniformity.</td>
<td>Degree required in positions designated ‘social worker’; 10 degrees programmes available; ad hoc in-service training available.</td>
<td>Six established professional associations; code of ethics.</td>
<td>Recent laws on child protection, child rights and domestic violence still be implemented; proposal for clearer roles for social workers in child protection.</td>
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<td>Myanmar</td>
<td>52.8 million (HDI 148)</td>
<td>Estimated at 200 plus NGOs (number unknown).</td>
<td>Government departments, FBOs and NGOs.</td>
<td>No specific law on SW/SSW; specific child law; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>All three levels developing.</td>
<td>Degree not required; in-service training available.</td>
<td>Not established.</td>
<td>The Child Rights Law; Child Law amendment; national Child Protection Policy with a costed implementation plan on social work, child protection and case management; human resource development for new policies; plan to develop Law on Social Work Profession.</td>
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<tr>
<td>Papua New Guinea</td>
<td>8.1 million (HDI 153)</td>
<td>Figure not available.</td>
<td>Government departments (national and local level), SSW in police, justice, health, and education.</td>
<td>No specific law on SW/SSW; specific child law; children included in sector-specific related law.</td>
<td>All three levels provided for in the Lukautim Pikinini Act, but limited human resources and services at the early stages of development; Office of Child and Family Services.</td>
<td>Degree not required; one degree program available; limited, voluntary in-service training.</td>
<td>Established professional association; code of ethics.</td>
<td>Family support centres developing; National Child Protection Policy (2017-2027) provides new opportunities for system development.</td>
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<td>Philippines</td>
<td>103.3 million (HDI 113)</td>
<td>Figure not available; one estimate suggests 5,423 registered social workers in DSWD, not including health, education, justice sectors; plus NGOs (number unknown).</td>
<td>Government: DSWD, justice, education, health, local government and barangays.</td>
<td>Law on social work; specific child law; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>Tertiary level responses predominate; inter-agency approach (Committee for the Special Protection of Children); multi-disciplinary in hospital; Council for Protection of Children at barangay level.</td>
<td>Designated social workers must hold recognized degree; 127 schools and universities offering social work degree programmes; diploma and in-service courses for other social service workforce; voluntary in-service training available.</td>
<td>Established professional association; code of ethics and practice standards; profession of social work mandated by law, with protected title; system of professional licensing.</td>
<td>Recent proposals to strengthen the integrated child protection systems, operationalization of the national framework to strengthen the social service workforce and the Philippine Plan of Action to End Violence Against Children, professional development and training of social workers/paraprofessionals; mobilization of the professional social work associations. Formal signing of commitment by representatives of multi-sector groups/organizations to adopt the principles and mechanisms to strengthen the child protection systems and the social service workforce.</td>
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<td>Solomon Islands</td>
<td>599,000 (HDI 152)</td>
<td>13 in government; plus NGOs and FBOs (number unknown).</td>
<td>Government-based, national and provincial levels: SWD in MHMS.</td>
<td>No specific law on SW/SSW; specific child law; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>All three levels developing; inter-agency system at tertiary level.</td>
<td>Degree not required; diploma, certificate and voluntary in-service training available; access to the regional degree programme.</td>
<td>Not established.</td>
<td>Recommendation for minimum training and mandatory registration of the workers; costed multi-sector child protection plan for 2019–2021.</td>
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<td>Country</td>
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<td>Thailand</td>
<td>68.8 million (HDI 83)</td>
<td>3,000 registered SW, not including parasocial workers; other paraprofessional and volunteer numbers not known, plus NGOs (number unknown)</td>
<td>Government: Social Development and Human Security, public health, justice, interior (local government), education, defence, police; and NGO's</td>
<td>Social work Professions Act (2013); specific child law; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>All three levels are present; multi-disciplinary and inter-agency system. Committee on Appropriately Social Welfare for Thailand Reform.</td>
<td>Designated social workers must hold recognized degree on social work; six degree programmes available for bachelor level and two programmes for master level; voluntary in-service training available, mandatory in-service training for specific tasks such as competent officer (Child Protection Act).</td>
<td>Established professional association; code of ethics; profession of social work mandated by law, with protected title, system of professional licensing.</td>
<td>National strategy on child protection and social welfare provision strategic plan; discussions of further reform on out-of-home care for children.</td>
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<tr>
<td>Timor-Leste</td>
<td>1.3 million (HDI 132)</td>
<td>90 in government; plus NGOs and FBOs (number unknown)</td>
<td>Government ministry; local based workers.</td>
<td>No specific law on SW/SSW; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>Focus on primary level/prevention; limited at secondary and tertiary.</td>
<td>Degree not required; in-service training available.</td>
<td>Not established.</td>
<td>Child and Family Welfare System Policy review of human resources recommends an increase in local staffing by 10–13%.</td>
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<tr>
<td>Vanuatu</td>
<td>270,000 (HDI 138)</td>
<td>7 in MoJCS (other government, NGOs and FBOs number unknown)</td>
<td>Government-based. National and provincial levels. Child Desk in MoJCS.</td>
<td>No specific law on SW/SSW; children included in related sector-specific law; specific policies on childcare and protection.</td>
<td>Mostly at primary level (community awareness and prevention); Child Protection Committees at local level; National Children's Committee.</td>
<td>Degree not required; voluntary in-service training available; access to the regional degree programme.</td>
<td>Not established.</td>
<td>Recommendation for strengthening Child Desk in ministry and at provincial level.. National Child Protection Working Groups.</td>
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<tr>
<td>Viet Nam</td>
<td>92.7 million (HDI 116)</td>
<td>16,424 in government; plus NGOs and FBOs (number unknown). Estimated need for 98,033 in government social welfare.</td>
<td>Government: National (4 main ministries) and provincial, district and commune (department) social work services centres; mass organizations (Youth Union, Women's Union); NGOs and international NGOs, FBO and other associations.</td>
<td>No specific law on SW/SSW; Government circular setting job codes for SW and collaborators; specific child law; children included in sector-specific related laws; specific policies on childcare and protection.</td>
<td>All three levels evident; mass organizations play key role in awareness and also some secondary services – tertiary level government services.</td>
<td>Degree not required; 83 degree programmes and 28 diploma programmes available; in-service training available.</td>
<td>Established professional association; code of ethics; draft Decree on social work.</td>
<td>National Social Security Strategy; National Programme on Social Work Development; National Programme on Child Protection; Review of several related laws to consider amendment to include social work.</td>
</tr>
</tbody>
</table>
An victim of child sex abuse stands by a window at a university campus.
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**Vanuatu**


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