# Protecting children and families

## SOCIAL SERVICES WORKFORCE STRENGTHENING DURING COVID-19 IN BANGLADESH

#### **COUNTRY/COUNTRIES:**

Bangladesh

#### PARTNERS:

Ministry of Social Welfare (MoSW) and UNICEF

### THEMATIC AREAS:

Social Service Workforce

### **COVERAGE OF SYSTEMS CHANGE:**

Nationwide

### **KEY RESULTS:**

During the COVID-19 pandemic, a systematic programme of activities in collaboration with the Ministry of Social Welfare on social service workforce strengthening resulted in:

- The social service workforce focused on child protection services being doubled nationally with an associated increase in access to services by vulnerable children (from 123 child protection specific social workers to 250 child protection social workers in the country as of October 2020); and
- 2) Efforts being made to recruit more social workers at the union level (e.g. the lowest tier of government administration) which would mean formal recognition of child protection as a core component of a social workers' job as formalised through a revised job description and job role functions.

## COVID-19 CONTEXT

The COVID-19 pandemic placed significant pressure on Bangladesh's social and health systems. Concerned that the pandemic

would impact negatively on the health system, the Government of Bangladesh took significant measures to control the spread of COVID-19. These measures included closing all schools and educational institutions, which resulted in over 42 million children without access to education, including children who were already out of school (UNICEF Bangladesh, 2020a).

These containment measures also meant that vulnerable children became more vulnerable. Before the pandemic, according to the 2019 Multiple Indicator Cluster Survey (MICS), an estimated 45 million children in Bangladesh were experiencing violence (Bangladesh Bureau of Statistics & UNICEF Bangladesh, 2019). Violence has now increased by 31 per cent due to the pandemic, according to a study by the Manusher Jonno Foundation (2020). UNICEF-supported case management and follow-up activities reached 212,627 children between March and June 2020. Meanwhile, UNICEF helped

provide psychosocial support for 53,367 children (20,160 girls, 260 children with disabilities), and 14,916 parents (6,332 female) and the Child Helpline reached 59,819 children during the reporting period (UNICEF Bangladesh, 2020b). With continued lockdown and school closures, there is a need for more case management services to reach concerned vulnerable families. This growing wave of violence is also increasing the demand for social workers to provide services despite the risk of COVID-19 (UNICEF Bangladesh, 2020b).

This case study focuses on UNICEF's response to this demand and interventions taken to strengthen the social service workforce in Bangladesh during COVID-19.

## DETAILS OF PROMISING PRACTICE/ CRITICAL POINT OF CHANGE

In addition to severe stress on the health system, the COVID-19 pandemic created severe pressure on an already overburdened social service system, which further worsened the vulnerabilities of children, urban poor, migrants, displaced people and refugees.

UNICEF Bangladesh carried out an innovative systemic response grounded in enhancing the capabilities of the social services workforce in Bangladesh. Additional social workers were recruited to respond to the increased violence and need for psychosocial support for children and women amid the social and economic challenges caused by the COVID-19 pandemic. Social workers are trained to play a key role in providing social services including: case management, follow up, creating circles of care for children by educating parents and caregivers on good parenting, community mobilisation, and disseminating life-saving information to communities during the health emergency.

Recognising this, UNICEF negotiated successfully with the Government to classify social workers as emergency workers. In response, the Government also agreed to recruit 500 new social workers for children with recognised roles and responsibilities for

child protection work, including 250 social workers who have already been deployed. Throughout 2021, the Government will recruit the remaining social workers. This would mean formal recognition of child protection as a core component of a social worker's job that is now a requirement within the job description. The requirements for a qualified social worker now include tertiary education whereas previously social workers had only higher secondary school qualifications and no academic qualifications of social work.<sup>1</sup> These new social workers were also given training in online psychosocial support and child protection social work case management. To enable the social workers to carry out critical frontline work, they were also equipped with Personal Protective Equipment (PPE) and credentials to confirm their status as emergency workers when they were engaged in emergency response and conducted outreach services to families at home.

The social service workforce in Bangladesh is organised by the Department of Social Service (DSS) under the Ministry of Social Welfare (MoSW). Currently, there are insufficient numbers of social workers in Bangladesh, with around one social worker per 100,000 children, revealing a huge gap between the supply and demand of key services. Moreover, social workers typically face a high burden of administrative tasks, such as beneficiary selection. follow up with beneficiaries and data collection for cash grants among the elderly population, widows, persons with disabilities and freedom fighters. Through sustained UNICEF advocacy and the introduction of the Children's Act 2013, the role of social workers in carrying out child protection community work was formalised in legislation, along with the importance of case management and having adequate referral mechanisms.

As the COVID-19 pandemic took hold in Bangladesh, UNICEF supported the MoSW and the DSS to develop urgently needed capacity among the social service workforce. The existing social service workforce was affected by low formal educational qualifications. This was addressed through a 6-month capacity development Basic Social Service Training (BSST), followed by a Professional Social Service Training (PSST) and mentoring organised by the National Social

<sup>&</sup>lt;sup>1</sup> While they require tertiary qualifications, it does not need to be in social work.

Service Academy under the DSS. A total of 270 Social Service Officers of the DSS attended the training which consisted of a basic and professional social service course and practicum/field level activities. These trainings reached 250 social workers and covered psychosocial support, parenting tips, social work case management and diversion mechanisms (such as coordinating with police officers and probation officers to arrange alternative solutions for children in conflict with the law, apart from detention), referral pathways and the safety and wellbeing of social workers. UNICEF also helped orient social workers with the Children's Act 2013. Social workers were also mentored by UNICEF Child Protection Officers at the Field Offices in collaboration with subnational level offices of the DSS and assisted to help strengthen the skills and knowledge gained.

During the pandemic, UNICEF provided digital infrastructure including computers and internet services, held monthly calls with child protection social workers and coordinated at the divisional level with DSS to continue supervision of the social workers to ensure efficient performance during the lockdown. This support has been critical in social workers providing psychosocial support and linking families to food and non-food distribution and other services during the pandemic.

It is important to note that social work activities did not stop during the COVID-19 pandemic. For example, when the lockdown began, there was no safe place for street children, especially in urban areas. They were completely left out of existing services. In Dhaka, a hub for social services was opened with an assigned guard for night-time security so that children could access essential services. Social workers were assigned to work with children in these service hubs and they helped arrange services to children living on the street. This included the provision of food, sanitation, information about COVID-19, mental health and psychosocial support, initial case management, and information collection, in order to arrange reintegration. The social workers continued existing casework and maintained close communication with the local government, including linking cash support and other relief measures to children facing urgent needs.

Monthly orientations on specific issues such as how to remain safe during community visits, communicate with parents and children about COVID-19 safety

and prevention measures, etc. were developed in collaboration with the DSS. The training was also provided on continuing existing casework, linking children in need to services, and responding to helpline calls. Monthly case conferences were held between the social workers and Social Service Officers of DSS to discuss critical cases. The most critical cases are presented to the Child Welfare Board which is a multisectoral committee headed by the Chief Executive Officer at subdistrict level to ensure that appropriate services are provided to the child.

The impact of this initiative has been encouraging. Social workers have linked vulnerable children to cash grants and other programmes which have aided in preventing vulnerabilities. During the lockdown, calls to child helplines increased four times; predominantly, boys were calling the helplines. Social workers reached out to children in need, while also trying to engage with communities and reach more girls as their access to helplines and the internet could be more limited than boys.

Social workers also engaged with NGOs supporting child protection and visited families to access a greater proportion of the community. Disseminating resources among communities has reduced common vulnerabilities and an increased number of children are now supported by case management.

## LESSONS LEARNED FOR CHILD PROTECTION SYSTEMS

Investing in the social service workforce is important to improve the child protection system response. Considering the extent of vulnerable children in Bangladesh, the value of social workers in helping ensure children's welfare across several domains is clear from the initiative undertaken by MoSW with support from UNICEF. Such an investment in social service human resources has benefits well beyond the pandemic and can help transform the outcomes for children in the long-term.

## LESSONS LEARNED FOR PARTNERSHIPS: COOPERATION, COORDINATION AND COLLABORATION

- UNICEF's advocacy and sustained engagement with the DSS in training the social service workforce was important in the recruitment of more social workers. While there has been an increase in the number of social workers recruited, the proportion of social workers to children in need in Bangladesh remains very low.
- The virtual infrastructure to reach out to communities and capacity development of social workers at the community level is not sufficient and needs to be strengthened. This will also require further capacity building of social workers and the provision of technical support to them.

## KEY CONSIDERATIONS AND QUESTIONS FOR IMPLEMENTATION AND FUTURE ADAPTATION

Advocacy efforts need to be continued and strengthened in the future to ensure the recruitment of more child protection social workers who can assist with the demand for case management. One suggestion is to recruit para social workers who could be trained, to take on some of the duties of social workers.

## **KEY CONTACTS AND FURTHER RESOURCES:**

For more information visit: UNICEF Bangladesh Country Office website at https://www.unicef.org/bangladesh/en

#### **REFERENCES:**

Bangladesh Bureau of Statistics (BBS) and UNICEF Bangladesh. 2019. Progotir Pathey, Bangladesh Multiple Indicator Cluster Survey 2019, Survey Findings Report. Dhaka, Bangladesh: Bangladesh Bureau of Statistics (BBS).

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### **SUGGESTED CITATION:**

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