Social Welfare Workforce Strengthening Conference:
Investing in those who care for children

CONFERENCE REPORT

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<td>BSW</td>
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<td>Church Alliance for Orphans</td>
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<td>CBO</td>
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<td>FBO</td>
<td>Faith-based Organization</td>
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<td>INFS</td>
<td>National Institute for Training Social Workers, Côte d’Ivoire</td>
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<td>ISW</td>
<td>Institute of Social Work, Tanzania</td>
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<td>JACSW</td>
<td>Jane Addams College of Social Work at the University of Illinois, Chicago</td>
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<td>JLI</td>
<td>Joint Learning Initiative</td>
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<td>KNASW</td>
<td>Kenya National Association of Social Workers</td>
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<td>LGA</td>
<td>Local Government Authority</td>
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<td>M&amp;E</td>
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<td>Ministry of the Family, Women and Social Affairs, Cote d’Ivoire</td>
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<td>NPA</td>
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<td>OVC</td>
<td>Orphans and Vulnerable Children</td>
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<td>PEPFAR</td>
<td>President’s Emergency Plan for AIDS Relief</td>
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<td>PMO-RALG</td>
<td>Prime Minister’s Office – Regional Administration and Local Government, Tanzania</td>
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<td>PNOEV</td>
<td>National Program for OVC Care and Support, Côte d’Ivoire</td>
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<td>PSW</td>
<td>Para-social Work(er)</td>
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<td>QI</td>
<td>Quality Improvement</td>
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<td>REPSSI</td>
<td>Regional Psychosocial Support Initiative</td>
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<td>SACSSP</td>
<td>South African Council for Social Service Professions</td>
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<tr>
<td>Abbreviation</td>
<td>Full Form</td>
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<td>SWO</td>
<td>Social Welfare Officer</td>
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<td>SWWS</td>
<td>Social Welfare Workforce Strengthening</td>
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<td>TWG</td>
<td>Technical Working Group</td>
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<td>UNICEF</td>
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<td>USAID</td>
<td>United States Agency for International Development</td>
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<td>USG</td>
<td>United States Government</td>
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<tr>
<td>VCO</td>
<td>Volunteer Children’s Officer</td>
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<td>WW</td>
<td>Welfare Worker</td>
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**1. EXECUTIVE SUMMARY**

We live in a world where children are vulnerable to abuse, violence, exploitation and neglect. The statistics are staggering: 413,000,000 children are living in extreme poverty; 302,000,000 children have experienced severe physical punishment at home; 150,000,000 girls have experienced sexual abuse; 115,000,000 children are involved in hazardous work; and 18,300,000 children have lost both parents\(^1\). Problems of this magnitude should provoke a powerful response. Yet globally, support for children, their families and for the social welfare workforce - those who charged with protecting and caring for the world’s most vulnerable children and families - is severely constrained.

Around the world, social work is one of the most misunderstood and underappreciated professions. While we recognize that social concerns have a tremendous impact on health, education, economic and other development outcomes, we rarely recognize the skills and expertise of those professionals who address these concerns. Like the health sector, the social service sector struggles to attract and retain qualified workers. Vacancy rates for established professional and para-professional positions within Africa range between 50%–60%, and half those employed leave their jobs within five years (as compared to seven years for healthcare workers). These statistics indicate a global crisis within systems of care and support for vulnerable children and a serious threat to global development.

In November 2010, the US Government’s President’s Emergency Plan for AIDS Relief (PEPFAR), under the auspices of the Technical Working Group for children orphaned and made vulnerable by HIV/AIDS, organized a global conference in South Africa to highlight this crisis and explore strategies for addressing the crisis at a country and global level. The PEPFAR-funded Social Welfare Workforce Strengthening Conference: *Investing in those who care for children* is part of a long-term effort by the US government and other donors to draw increased attention and mobilize additional assistance for this workforce. Over the past six years, PEPFAR has provided critical support to nearly four million children, most of whom live in Sub-Saharan Africa. As explained by Ambassador Eric Goosby, the US Global AIDS Coordinator, “The second phase of PEPFAR emphasizes the sustainability of initiatives to prevent HIV infection and to care for and treat those infected by the disease. Accordingly, [PEPFAR] has increased investments in strategies to strengthen systems – both health systems and social welfare systems – and the workforces supporting them.” Several additional initiatives supported by UNICEF, DFID, and others concerned with the welfare of vulnerable children have contributed to the development of a growing body of knowledge and resources to support efforts to strengthen the social welfare workforce.

The conference brought together teams from 18 countries\(^2\) to review this body of knowledge, share experiences and promising practices, and develop concrete action plans for strengthening the workforce. Each team included representatives from relevant government ministries of welfare (29% of participants identified themselves as belonging to this category), non-governmental organizations (6%), donor organizations (43%), social work training institutions, and professional associations (15%). The diversity within these teams provided an opportunity for multi-disciplinary problem solving and team building.

Conference presenters confirmed that the social welfare workforce faces serious challenges. During his opening remarks, Gary Newton, US Government Special Advisor for Orphans and Vulnerable Children, noted

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\(^2\) Individuals from sixteen African countries (Botswana, Cote D’Ivoire, Ethiopia, Lesotho, Kenya, Malawi, Mozambique, Namibia, Nigeria, Rwanda, South Africa, Swaziland, Tanzania, Uganda, Zambia, and Zimbabwe) as well as Haiti and Vietnam attended the conference.
that “What should be the world’s strongest and most important workforce – those who care for and protect children – is too often neglected, under-staffed and under-funded.” Current social welfare workforce staffing plans lack clearly defined strategy and realistic implementation mechanisms due to funding constraints; the absence of accurate human resources data and cost projections; and ineffective, sometimes corrupt, systems for recruiting, hiring, and promoting workers. In addition, education opportunities are inadequate to meet demand for social welfare workers due to out-date often culturally inappropriate curricula; lecture-based, primarily theoretical teaching methods; inflexible course schedules; small scale training programs; and few mechanisms for recognizing skills acquired “on the job” or through non-formal training. Finally, the social welfare workforce tends to “burnout” quickly due to unclear, unrealistic job descriptions; low salaries and other incentives; poor workplace conditions; insufficient job tools; and, a lack of appreciation for the difficult tasks carried out by social workers.

However, presenters and participants also a shared number of promising practices. Several countries have carried out detailed capacity assessments and South Africa recently completed comprehensive budgeting exercises, resulting in higher funding commitments from the Ministry of Finance. Tanzania, Zambia and South Africa have succeeded in establishing new cadres of auxiliary and assistant social workers and have begun to shift lower-level social work tasks to reduce caseloads.

Several schools of social work in the United States and Africa are collaborating to develop new curricula and pilot more interactive teaching techniques and internships. The Jane Addams College of Social Work in Chicago and the Addis Ababa University School of Social Work have developed courses to train new cadres of social workers. The University of Kwa-Zulu Natal in South Africa has launched an innovative distance learning course for community social workers in ten countries.

Two projects in South Africa have specifically designed courses for social work supervisors. The courses both teach better management as well as enable supervisors to more effectively address the psychosocial needs of frontline staff. Tanzania and Malawi are in the process of working with government and training institutions to develop social work career paths and career development opportunities.

The conference also provided an opportunity to consider how children’s needs could be addressed by the social welfare system in a more holistic way. At the same time, it enabled participants to explore the critical role of the social welfare workforce within this system and how efforts to strengthen the workforce can strengthen the social welfare system and ultimately promote the wellbeing and protection of vulnerable children and families.

Participants celebrated the conference as the launch of a new global movement intended to not only strengthen the social service workforce but also contribute to stronger, more effective social welfare systems. The conference provided an opportunity for country teams to develop realistic, time bound plans to address workforce challenges as well as outline longer-term global goals – such as a new research agenda, ideas for global workforce benchmarks, advocacy and coordination plans.

Mr. Newton heralded the conference as a “historic gathering that helped bring the world’s most important workforce to center stage, where it belongs . . . and give it the strength it needs to move us more rapidly towards a truly child friendly world.”
2. DEFINITIONS

Social Welfare System

A well-functioning social welfare system serves as a vital safety net for children and families made vulnerable by challenging circumstances. When a system functions effectively, families and children have access to an array of quality services to promote wellbeing and protect them from harm. For the purposes of this conference, the social welfare system was defined as the system of interventions, programs, and benefits which are provided by governmental, civil society and community actors to ensure the well-being and protection of socially or economically disadvantaged individuals and families (including and perhaps most importantly children).

Social Welfare Workforce

Historically, social workers have played a vital role within social welfare systems. They facilitate access shelter, health care, education, economic opportunity and protection services; supervise residential care facilities, foster care and adoption placements; investigate allegations of abuse, violence and neglect; and process and monitor government welfare grants. Social workers can also provide social service support in a more indirect way, through community mobilization, administration of government agencies and non-governmental organizations, policy development, research, workforce education and training, and advocacy.

For the purposes of the conference, the term ‘social welfare workforce’ was intended as an inclusive term, describing the broad variety of different workers – paid and unpaid, governmental and non-governmental – that presently make up the workforce. Social workers are called by different titles in different countries, including but not limited to: social workers, para-social workers, child and youth care workers, community development workers, and child and family probation officers.
3. CONFERENCE HIGHLIGHTS AND PARTICIPANT RECOMMENDATIONS

3.1 CONFERENCE GOAL AND OBJECTIVES

The goal of the conference was to: further strategies to strengthen the social welfare workforce and social welfare systems in Africa ultimately to promote the well-being and welfare of children orphaned and made vulnerable by HIV/AIDS, highly vulnerable children and their families.

The objectives of the conference were to:

- Contribute to the growing body of knowledge regarding components of a functioning social welfare system and social welfare workforce
- Examine systems approaches to addressing workforce problems
- Identify specific promising practices for strengthening the social welfare workforce
- Identify critical resources, tools, and sources of support for social welfare workforce strengthening initiatives
- Dialog and identify next steps for in-country and regional efforts to strengthen the social welfare workforce

3.2 CONFERENCE FRAMEWORK AND PROMISING PRACTICES

As noted previously, the social welfare workforce faces a range of challenges. In order to better understand these challenges and promote a more comprehensive approach to addressing these challenges, conference organizers\(^3\) drafted a “Social Welfare Workforce Strengthening Framework,” based on a workforce strengthening model developed under the Capacity Project\(^4\). In addition to the objectives outlined above, the Framework is also intended to align diverse stakeholders, create a tool for advocacy, and provide a basis for benchmarking within a country and across a region. The Framework was both used to organize conference sessions and further refined at the conference to better reflect the experiences and ideas of conference participants.\(^5\) It categorizes promising workforce strengthening practices according to three broad strategies: practices for (1) planning, (2) training and developing, and (3) supporting the social welfare workforce.

Examples of promising practices explored during the conference are summarized below:

Promising practices for planning the social welfare workforce included carrying out workforce assessments and costing exercises, developing mechanisms for recruiting and hiring staff and generating the political will necessary to implement workforce strengthening efforts.

Promising practices for training and developing the social welfare workforce included curricula development, pre-service education, in-service training, professional continuing education, faculty development, and other practical strategies for professionalizing the social welfare workforce and ensuring that educational programs are sufficient to meet the demands of the social welfare system.

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\(^3\) The Conference Steering Committee was comprised of USAID, AIDSTAR-Two and the National Association of Social Workers (NASW - US). In addition, CapacityPlus provided support in developing the Framework.

\(^4\) For more information on the Capacity Project see [http://www.capacityproject.org/](http://www.capacityproject.org/).

Promising practices for supporting the social welfare workforce included supervisor and management training, improving work environments and providing necessary equipment, developing professional standards (e.g., code of ethics and policies) and performance improvement plans, defining career ladders, and other professional opportunities, and supporting professional associations.
Other key ideas, concepts, and strategies explored during the Conference include:

- **Systems approaches to child protection**
  There has been a significant shift in thinking away from vertical approaches to systemic approaches that view children’s needs in a more holistic way. This new approach is anchored in the understanding that each child protection system has requisite core functions, capacities, and structures along with processes and service continua that define what a specific community or country does to protect its children.

- **The role and composition of the social welfare workforce**
  The social welfare workforce includes workers with a diverse range of skills, abilities and titles. As social welfare workforce strengthening initiatives mature, it will be critical for that sector to agree on social welfare workforce functions associated with particular titles. For example, currently in many countries, social workers are often official ministry representatives working at the national or district level, while para-social workers are often the direct link to communities at the local level.

- **A framework for understanding social welfare workforce strengthening efforts**
  Outlining a Social Welfare Workforce Strengthening Framework can help to better articulate the challenges facing the social welfare workforce, promote a more comprehensive approach to addressing these challenges, align diverse stakeholders, create a tool for advocacy, and provide a basis for benchmarking within a country and across a region.

- **Coordination among different layers of the workforce**
  Social workers, community volunteers and para-professionals perform different functions within the social welfare system and address different needs among vulnerable populations. Collaboration between workforce cadres is essential to the effective functioning of the social welfare system. Coordinating services through social centers, facilitating professionals to network through associations, and providing coordinated and integrated training to both social workers and para-social workers can encourage better collaboration.

- **Social welfare workforce champions**
  Engaging champions at the highest levels within a range of government ministries has enabled social welfare workforce advocates to secure more resources for workforce strengthening and other welfare initiatives. Potential champions can also include development partners, international organizations, social work training institutes, parliamentarians, local leaders, and private sector partners.

- **Financing the workforce**
  Both government and donors must both contribute to workforce strengthening efforts. Articulating more clearly the costs and benefits of workforce strengthening efforts can help to secure better financing for the workforce. Passing donor funds through government structures and/or aligning funding with national plans can encourage local ownership.
3.4 SUMMARY OF PARTICIPANT RECOMMENDATIONS

Recommendations for post-conference social welfare workforce strengthening initiatives include:

1. Efforts to be undertaken at the Global Level

Research / data collection and analysis to:
- Define the added value of social welfare system strengthening
- Clarify common terms and definitions for key concepts
- Determine what skills the social welfare workforce needs, the number of workers needed and the capacity of training entities at the national and regional level.

Coordination
- Organize follow-up conferences in different location in two years for same participants plus additional stakeholders to assess progress towards addressing workforce strengthening challenges
- Engage additional actors (donors, governments and health sector) in efforts to identify additional ways to strengthen the social welfare workforce
- Establish an Alliance (similar to the Global Health Workforce Alliance) to coordinate global efforts

Advocacy
- Establish a common platform for advocacy messages
- Advocate with health colleagues to support the SWWS cause
- Identify and engage multilateral, bilateral and private donors to support SWWS

2. Efforts to be Undertaken at the Regional and National Levels

Coordination
- Hold regional meetings and create inter-disciplinary regional networks
- Carry out in-country coordination, maintaining and building on partnerships formed during conference
- Organize regional study tours and professional exchanges to and between countries with ongoing SWWS initiatives and social work associations

Advocacy
- Pursue efforts at the country and regional levels to mobilize political will and ensure government buy-in
- Identify champions and advocates and help them to develop leadership skills

3. Resources, technical assistance and/or information sharing requested

- Highlight successful capacity building and training efforts
- Develop a menu of existing technical service providers
- Use OVCSupport.net as a virtual global hub for sharing information, events, reports, resources, tools, and engaging in ongoing discussions on workforce strengthening topics
- Provide organizational development support/strengthening to social welfare workforce associations
- Develop a publication of papers developed from conference presentations
- Support development of education and training programs for professional and para-professional social workers
- Organize a series of webinars on specific technical topics to be identified and prioritized by conference participants
- Collect existing in-country technical tools/resources/guidelines or develop new tools to support implementation of Country Team Action Plans
4. CONFERENCE PRESENTATIONS AND DISCUSSION

This report provides both an overview of conference activities and a consolidation of the content from presentations by country team members and other technical experts. Short summaries of individual presentations highlight concepts and current initiatives, capture discussions among participants, and depict the breadth of ongoing efforts to strengthen the social welfare workforce. In addition, this report describes meetings held by country teams and presents country-level action plans generated from those meetings. Conference presentations and Country Action Plans are also available for download from www.OVCSupport.net.

4.1 DAY ONE

Day one provided a review of the meeting objectives and an overview of the status of social welfare and the social welfare systems and the social welfare workforce in Africa. Chipo Mwetwa and Maury Mendenhall served as conference facilitators.

4.1.1 WELCOMING REMARKS

Welcoming Remarks
Speakers:
- Maria Mabetoa, Deputy Director-General, Department of Social Development, South Africa
- Donald H. Gips, US Ambassador to South Africa

Dr. Maria Mabetoa extended a warm welcome to the conference participants on behalf of the South African Minister of Social Development. She shared a few comments on South Africa’s investment in the new development paradigm – a comprehensive approach to service, family counseling, early childhood development, child and youth care centers outlined in the new Children’s Act. Success is contingent on a strong social welfare workforce but heavy workloads and poor working conditions contribute to poor retention of social workers and other skilled workforce members. South Africa has moved to address these challenges by amending its social services protection act. There is more work to be done. Dr. Mabetoa noted that the conference is a remarkable opportunity to learn what others are doing. Working with universal norms, the question remains how to adapt these to local needs in each country.

Ambassador Donald Gips welcomed attendees on behalf of the US mission in South Africa. He acknowledged that the burden on the social welfare system in South Africa is great and the work done by the social welfare workforce is nothing short of heroic. Approximately 5.7 million people in South Africa are currently living with HIV/AIDS. As of 2009, PEPFAR had invested $50 million to support direct services for nearly 500,000 children affected by HIV/AIDS in South Africa. PEPFAR has invested $300 million worldwide. The second phase of PEPFAR places a strong emphasis on strengthening both health and social welfare systems. The social welfare workforce faces severe capacity constraints. The Ambassador encouraged participants to use the four-day conference to engage in learning, to share and improve strategies, and build relationships to strengthen future efforts.
4.1.2 OPENING ADDRESS

Opening address: *Strengthening the world’s most important workforce – those who care for and protect vulnerable children*

Speaker:
- Gary Newton, US Government Special Advisor for Orphans and Vulnerable Children

Gary Newton asked conference participants to imagine a truly child-friendly world and contrasted that world with some stark statistics: 413,000,000 children live in extreme poverty; 150,000,000 girls have experienced sexual abuse; 115,000,000 children are involved in hazardous work; etc. In a world aspiring to be child friendly, social welfare systems and efforts to strengthen those systems would be a national priority greater than, or equal to, national defense. This is the case in few countries.

Recent efforts to scale up the healthcare workforce may provide useful models for the social welfare workforce. Certain attributes such as clear treatments and outcomes, concise indicators and targets, and data on the dramatic shortage of health workers has guided efforts to strengthen the health workforce. As a result of recent efforts, international attention and action have been focused on the crisis of too few healthcare workers. The participants invited to attend this conference are key actors who can be the catalysts for transforming our systems and mobilizing more funding for human resources for child welfare.

Imagining a world that is truly child-friendly:

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<tr>
<th>In such a world ...</th>
<th>In a truly child-friendly world ...</th>
<th>In a truly child-friendly world ...</th>
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<tbody>
<tr>
<td>child trafficking would be eradicated;</td>
<td>all countries will have made the rights and protections granted to children on paper, an everyday reality;</td>
<td>no parent would be faced with the nightmare of having to abandon a child;</td>
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<tr>
<td>child labor abolished;</td>
<td>adults would be held accountable for behavior that causes collateral damage to innocent children;</td>
<td>every child would be living in the warm and safe embrace of a loving family;</td>
</tr>
<tr>
<td>child abuse and neglect unheard of;</td>
<td>children living on the street unthinkable;</td>
<td>children would be revered, venerable -- not vulnerable;</td>
</tr>
<tr>
<td>children living on the street unthinkable;</td>
<td>child soldiers inconceivable;</td>
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Imagine.

*Excerpted from Gary Newton’s SWWS Conference Address 11.15.10*

4.1.3 PANEL PRESENTATION 1: SYSTEMIC APPROACHES TO SOCIAL WELFARE: HOW SYSTEMS PROTECT CHILDREN

Speakers:
- Kendra Gregson, Senior Advisor, Social Welfare and Justice Systems, UNICEF
- Philip Goldman, President, Maestral International, US
- Jonna Carlsson, Child Protection Officer, UNICEF Kenya

Key questions:
- What is a child protection system?
- How does a systems approach change our understanding of child protection?
- How can mapping and assessment of child protection systems support better social welfare systems?
Kendra Gregson noted that historically, analysis and programming to protect children from violence, exploitation and abuse, have focused on issues or specific groups of vulnerable children (such as trafficked children, street children, children affected by AIDS, abused children). Ms. Gregson observed that while issue-oriented programming can effectively serve the target group, the approach has limitations, particularly as vulnerable children are often exposed to multiple protection risks. Issue-oriented programming can also contribute to more fragmented and less coordinated policies, activities and services. She explained that there has been a significant shift in thinking away from these vertical approaches to systemic approaches that view children’s needs in a more holistic way. The new approach is anchored in the understanding that each child protection system has requisite core functions, capacities, and structures along with processes and service continua that define what a specific community or country does to protect its children. These are organized around and reflect the community’s social norms and values. A useful analogy is the way that countries and communities organize their health, education or social protection systems.

The systems approach has important implications for the social welfare workforce. Efforts have been underway to map and assess child protection systems in a number of countries, such as Kenya, Angola, Zambia and Burundi. A number of toolkits are available to support this process. Mapping and assessment is a process which reviews, for example, policies, data, capacities, processes, resources and fiscal accountabilities of the informal sector, NGOs, civil society, communities and government, as well as the social welfare workforce. The ultimate objective is to develop comprehensive, effective and efficient child protection systems that are appropriately structured and resourced and that reach and cater to children and their families.

Philip Goldman emphasized the importance of (i) shifting our work to a more systemic focus on child protection; and (ii) prioritizing child protection within the development agenda, with a more focused engagement on key players outside of the social sectors such as ministries of finance. The overall goals of a systemic approach are to build consensus on key priorities, improve alignment with the global rights regime, define roles and accountabilities, enhance management and administration, better coordinate and deploy resources, expand access to higher quality services, and improve data, information and analysis. Mr. Goldman outlined the development and rollout (in May 2010) of a new Toolkit to Map and Assess Child Protection Systems (see http://www.unicef.org/protection/index_54229.html). The ultimate objective of the Toolkit is to support the development of comprehensive effective and efficient child protection systems, appropriately structured and resourced, to reach and cater to children and their families. The Toolkit covers a broad array of workforce issues, and is organized into five sections: (1) General Country Information, which establishes a context within which the system operates including the global legal and policy frameworks, the policy and legislative framework, and the specific risks that children face within a country; (2) System Overview, including system structures, functions, capacities, and the children and justice sector, with tools assessing the community context and role of civil society; (3) Continuum of Care, which assesses the protective environment, including norms and attitudes; (4) Resource Mobilization and Fiscal Accountability, which assesses the human and financial needs of the system and how well child protection is reflected during the budget process, and (5) Moving Forward on System Development, which allows users to frame and cost a program to develop the child protection system drawing on the results of the mapping and assessment.

Jonna Carlsson offered Kenya’s experience using the Toolkit to map and assess child protection services as a case study. She explained that the assessment helped to identify two critical gaps within the child protection system: inadequate children’s services and lack of training to deal with child protection (e.g. training for social workers as well as police, corrections staff, etc.). Ms. Carlson explained that the next step will include an analysis of costs required to address gaps. Stakeholders are also clarifying who will be accountable for ensuring progress to address gaps as well as the specific roles of government offices, the private sector, national, sub-national and local levels with these efforts. In addition, they are considering whether or not there is a need for changes in law and/or policy to address gaps. Ms. Carlson noted that information management for service provision, planning workforce growth, and establishing baseline data regarding
violence against children, justice for children and institutions serving children are all essential to system strengthening efforts.

**Questions & Answers from Conference Participants:**
*Training institutes and universities are easily left out of the social welfare system, yet their role is critical. How can they be involved?*

Mr. Goldman explained that in some countries there are vacancies for social workers even in systems that would be considered undersized. Most likely this is related to difficulties identifying funding for salaries. Training institutions have to be a part of any system assessment and included in costing plans. Things to consider are: What are we training people for? Where are they working? What are we training them in?

**How did you develop a framework for an assessment system? Do you carry out a literature review or use examples as guidelines?**

Mr. Goldman stated that many experts reviewed the assessment framework while it was being developed. It is still evolving based on lessons learned in countries where it is being piloted. Ms. Gregson added that a university helped to identify existing literature that describes components of social welfare systems. The team designing the framework also drew from examples of assessment tools that already existed. The toolkit was developed from a practitioner rather than an academic perspective.

**How do you engage finance ministers?**

Ms. Carlsson explained that if gaps are clearly identified, it becomes easier to advocate for the money to close the gaps. Looking at the costs of not expanding this workforce can also be useful. For example, children will be in the street if funding for institutions is not available.

Mr. Goldman emphasized that to bring someone like the Minister of Finance on board, allies are needed. He recommended that participants formulate an approach and then find the appropriate support. Reach out to people who have the ear of the Minister of Finance. Also, determine the budget cycle and submit a request early. Bringing development partners like the World Bank on board is also crucial. He warned that participants should not hand the ministry an assessment without the support of allies; it will get lost.

Ms. Gregson added that one should present the situation using language that ministries of finance understand. For example, talk about the cost of not doing anything and how will this impact labor issues in the country. Also, become familiar with the budget cycle; know the “ask” and know how realistic it is that there is space in the budget to fund the ask.

**What is the cost of not acting? The health sector has found success in this approach, but the social welfare sector has not. How do we accurately cost the problem and show an impact on economic growth?**

Ms. Gregson stated that UNICEF is grappling with this issue. Some countries that have tried to do this have looked at the costs of not providing childcare and the resulting impact on the public health system. Another country has looked at impacts on the labor force.

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4.1.4 PANEL PRESENTATION 2: HOW THE WORKFORCE PROTECTS CHILDREN AND THE CHALLENGES THEY FACE

Speakers:
- John Williamson, Senior Technical Advisor, DCOF, USAID
- Professor Jacqueline Oduol, Secretary for Children Affairs, Ministry of Gender, Children and Social Development, Kenya
Key questions:

- What do we mean by “Social Welfare Workforce”?
- Who comprises the workforce, what do they do, how do they relate to each other, and where do they fit within Social Welfare Systems?
- What are some of the key challenges facing the social welfare workforce in Africa?

**John Williamson** defined social welfare as including interventions, programs, benefits, services and mobilization of local capacity by government and civil society to improve safety and well-being of socially or economically disadvantaged individuals, families, and children. The workforce was defined as including many different types of workers: social workers, para-professional social workers, community workers, counselors, and others. Mr. Williamson addressed the context for social welfare interventions that are centered on the child. Child protection, he noted, is not synonymous with social welfare. The child is at the center of child protection yet a child’s safety depends on many factors that combined make up the context surrounding the child: household, extended family, community, civil society, private sector and government. There is an overlap with social welfare. Methodologies in social welfare might include casework, group work, community mobilization, policy development and advocacy, as well as evaluation of interventions and administration. Each of these is relevant to work with children. Most social welfare interventions for child protection are indirect, such as: strengthening capacities of families to care for children, mobilizing immediate or extended family and community, making referrals to link children and families with services, or working to develop or change policies. At times direct protective actions are needed for vulnerable children (e.g. counseling, removing a child from a harmful environment). Those in the social welfare workforce most often work with other actors from other sectors such as health, education, and police. Situational analysis is key.

**Professor Jacqueline Oduol** noted that the social welfare workforce in Africa is a rich and diverse group. Vacancy rates for established professional and para-professional positions within Africa range between 50% and 60%, and half those employed leave their jobs within five years. Within areas with the greatest need for social workers, vacancy rates are even higher and retention rates are lower. Professor Oduol suggested several reasons for this phenomenon.

Firstly, plans to staff government and non-governmental agencies with the social welfare workers often lack a clearly defined strategy and realistic mechanisms for implementation. Countries frequently fail to implement child protection legislation due to funding constraints and competing priorities. Data about the numbers of social welfare workers, where they work relative to need, and gaps in the social welfare workforce is anecdotal and often out of date. The projected demand for services and workforce needs based on OVC and child protection national plans and policies is rarely researched and costed. The terms social worker, para-social worker and community worker have been used by different disciplines to describe people with a range of skills and responsibilities. This creates confusion and misunderstanding about the profession as well as overlapping mandates. Because the social welfare workforce has a heavy workload, qualified, university-trained social workers often spend much of their precious time on administrative tasks rather than tasks more suited to their training and expertise. In addition, systems for recruiting, hiring, and promoting social welfare workers are often inefficient and lack transparency.

Secondly, the social welfare education and training opportunities available in Africa are often inadequate to meet the demand for social welfare workers. Social work curricula are frequently based on Western models and neglect to equip social workers with the indigenous knowledge and methods of practice they need to work...
effectively in African communities and contexts. In addition, many of the standard curricula do not prepare students for specialized areas of practice (i.e. child protection, health, mental health, schools, and juvenile justice). Social work education has tended to be more classroom, lecture based and theoretical, rather than participatory and “hands on.” There is a common assumption that all members of the social welfare workforce perform the same or similar jobs. As a result, social work graduates are often overqualified or underqualified for the work required of them. Students with full-time jobs and other commitments or who live far away from education and training programs are often unable to enroll and unable to meet coursework requirements. Education and training programs are generally unable to generate new social workers quickly enough to meet urgent demands. There are few mechanisms for formally recognizing the knowledge and skills acquired by workers “on the job” or through non-formal training courses. Ultimately, data on education and training programs and students graduated from these programs is anecdotal and self-reported. Getting accurate and current information on the numbers of schools, students, and graduates is not easy.

Finally, the social welfare workforce tends to “burn out” quickly. There are few social workers in supervisory positions in Africa. Social welfare workers are often managed by supervisors without a social work background or not supervised at all. They often report feeling isolated and left to fend for themselves. This is particularly true of volunteers. Job descriptions and expectations of social workers are unclear and unrealistic. Social workers rarely receive feedback on their performance in order to know if they are doing a good job or how they might be more effective. Salaries and other financial incentives are low particularly for para-professionals and social workers employed by local NGOs. Workplace conditions are often extremely poor and social workers rarely have the tools and resources they need to carry out their jobs, such as furniture, vehicles, office supplies, and phones. There are few incentives for social workers to stay on the job because there are no career tracks or opportunities to develop professionally. Social workers are generally undervalued. Social work is considered a low status profession and public perceptions of social workers are sometimes negative.

Questions & Answers from Conference Participants:
In Haiti we sometimes find that cultural norms can harm rather than protect children. How can you work within a cultural system that may do harm to children?
Professor Oduol replied that child protection is closely linked to family structure. Many cultures rely on kinship care and believe in collective responsibility and “ownership” of children. There used to be a belief that when a child is defiled, anyone in the community needed to respond. However, these beliefs have broken down. Defilement often takes place even within a family. A good approach is to consider the causes of child vulnerability and then identify the cultural values that could be called upon to protect the child. Consider how a child is made secure in a family context and try to identify what specifically has broken down. Also consider how recognition of the rights of the child can be used to better support children.

Mr. Williamson stated that there needs to be extensive dialogue at the community level. Agencies cannot come in to communities with a pre-formed solution but can support the community to reflect on these issues. The issue is also sometimes at the legal level. Social workers often find themselves advocating for policy change. They have a responsibility to change laws that do not protect vulnerable children.
4.2 DAY TWO

4.2.1 PANEL PRESENTATION: SYSTEMATIC APPROACHES TO WORKFORCE STRENGTHENING

Moderator: Jim McCaffrey, Deputy Director, HRH and HSS, CapacityPlus, US
Speakers:
- Ummuro Adano, Senior Technical Advisor, Capacity Building, AIDSTAR-Two Project, Management Sciences for Health (MSH), US
- Luisa López, Director, Human Rights & International Affairs Division, National Association of Social Workers (NASW), US

Key Questions:
- What can we learn from efforts to strengthen the healthcare system and healthcare workforce?
- How might these lessons help us frame our efforts to strengthen the social welfare workforce?
- What strategies offer promise for (1) planning, (2) developing and (3) supporting the social welfare workforce?

Jim McCaffrey explained that in the early days of the health sector’s workforce strengthening efforts, advocates faced the challenge of presenting a clear case for the financial benefits of investing in health workforce strengthening. The development of their workforce framework helped to address this challenge. As this was only a few years ago, Mr. McCaffrey stated that the social welfare sector is not far behind. A framework or model can help to serve as a guide to identify areas that need more support, inform choices and action, align diverse stakeholders, create a tool for advocacy, and provide a basis for benchmarking within a country and across a region. He emphasized that a workforce model has to be usable and streamlined; the design approach should be “elegant simplicity.”

Mr. McCaffrey presented a draft Social Welfare Workforce Strengthening Framework, which includes background information and a definition of the social welfare workforce that aims to be broad and inclusive. It incorporates three elements of workforce strengthening: planning for, developing, supporting. Mr. McCaffrey highlighted the overlap among these three categories and provided a brief overview of each. The complete conference framework can be found in Annex 2 of this report and on www.OVCsupport.net.

Ummuro Adano presented on lessons learned in the health sector in dealing with workforce challenges. He highlighted four key messages relevant to strengthening the health workforce:
1. There is a sense of urgency: There is a “perfect storm” as national health systems are undergoing complex shifts to outcome-based approaches. Massive scale up is happening, with funding now reaching into the billions. However, all of this has been happening amidst crippling system constraints such as the lack of human resources.
2. Advocacy without facts is dangerous: Data is important. The health sector realized it was in a crisis: there were serious staff shortages and high levels of migration of professionals. But there was a lack of solid data on why people were leaving, where they were going and what they were doing when they got there. Data was needed to clearly inform policy decisions.
3. The Three C’s: Consultation, Consensus Building and Call to Action: High level meetings helped to crystallize the issues. Resources became better harmonized, and common terms were developed (e.g. Human Resources for Health (HRH)). The Joint Learning Initiative (JLI) Report provided a knowledge base for HRH, helped develop a common voice and approach and put forth a global agenda for HRH.
4. The message is important: The health sector identified several messages, such as: health workers are a problem-solving asset, not costs to be contained; HRH plans should be led at the country level but with
global solidarity; develop evidence-based guidelines for investment on topics such as training, outflows, hiring more efficiently, managing migrations better; go beyond the health sector for solutions; train, hire, retain, sustain; develop a common framework.

**Luisa López** focused on the section of the Framework which describes strategies for supporting the workforce. She noted that establishing reasonable case loads can significantly reduce burnout among social workers. New workers confronted with large caseloads are easily overwhelmed. Social workers are more likely to stay in their positions longer if they begin with smaller case loads and then gradually transition to fuller case loads.

Ms. López also emphasized the importance of good supervision. Supervisors need to know the work of the profession and be able to advise the social worker. They also need to make available tools and resources to do the job. Recognition and rewards are other aspects of supporting the workforce. Systems should be put in place to acknowledge achievements of workers and provide incentives for them to remain in their jobs.

She also advised providing sufficient pay, reasonable hours, promotion opportunities through clearly defined career ladders, and professional development opportunities.

Ms. López noted that the framework is intended to start a dialogue and should be modified and adapted to reflect country specific contexts.

Refer to Annex 2 for the full conference edition of the SWWS Framework

**Questions & Answers from Conference Participants:**

**How are volunteers included in the model?**

The health sector has significant but not very successful experience with volunteers. Community health worker studies (there are 700 relevant studies) found that unpaid community health workers were not sustainable. We need to think about what conditions are needed to support the unpaid labor force to carry out responsibilities.
Three sets of concurrent interactive workshops were held on Days Two and Three of the conference. Each set offered six sessions, including two sessions focused on each of the three themes of planning, developing and supporting the workforce. Participants were asked to choose one of the six sessions to attend during each set.

**SESSIONS ON PLANNING THE WORKFORCE**

**Session 1 Planning the Workforce: Skills Lab**
Facilitator: Ummuro Adano, Senior Technical Advisor, Capacity Building, AIDSTAR-Two Project, Management Sciences for Health (MSH), US

Key questions:
- What are the key components of social welfare workforce planning?
- What is a Human Resources Information Management System?
- How can organizations improve social worker recruitment, hiring, and deployment practices?
- Which critical actors must be engaged in strategic planning for the workforce, what are their roles and responsibilities, and how can we engage them?

This experiential skill-building workshop served as an introduction to workforce planning. It provided definitions of workforce planning and clarified concepts and workforce planning principles (e.g., assessments, availability, workforce composition and labor market, targets and strategies). Participants took part in exercises that addressed the benefits of planning and identified the ‘who’ and ‘what’ of planning. They discussed the roles they currently play in workforce planning.

**Session 2 Determining the cost of meeting human resource requirements and strengthening mechanisms for financing and accountability**
Moderator: Nankali Maksud, Regional OVC Specialist, UNICEF ESARO
Speakers:
- Paula Proudlock, Child Rights Programme Manager, Children’s Institute, University of Cape Town, South Africa
- Doug Webb, Chief of Section: Adolescent Development, Child Protection and HIV, UNICEF Ethiopia

Key questions:
- How is the cost of the social welfare workforce determined?
- What are some common challenges faced during this process and how can they be overcome?

Presentation by Paula Proudlock: *Budgeting for human resources for social welfare services*
In South Africa, social development for children is the single largest area of government welfare funding. Government funds services in multiple ways. First, it employs staff who deliver services. Social workers are government employees. They are unionized and have high salaries fully covered by government, including good benefits. Second, it funds non-governmental organizations (NGOs). Results indicate that NGOs deliver services to more people than government or commercial organizations. However, NGOs struggle to find sufficient funding to cover the costs of services. Funds tend to cover only part of program implementation costs and are only allocated on an annual basis, creating uncertainty and the loss of staff. External donors make up the shortfall within government and NGO budgets. Third, government funds commercial enterprises, which are not common but sometimes used to support residential services such as prisons and secure care facilities. Typically these providers do not have social welfare expertise. Government pays the full cost of these services as well as additional contract fees. As a result, these services are expensive. Fourth, government provides bursaries to almost all social work students. Despite this, there are still not enough
graduates to fill vacancies. South Africa has a severe shortage of social workers. New legislation provides for expanded services, which requires more workers. Legislation allows for some task-shifting, to “lower-level” workers. More budget resources and other supports are needed for these workers. Next steps include carrying out a Human Resources gap analysis and developing strategies to address the findings.

Presentation by Doug Webb: Costing the social welfare workforce in Ethiopia
In Ethiopia, social welfare services are incorporated into the country’s Growth and Transformation Plan, which guides funding in many sectors. A recent mapping exercise involving UNICEF, universities and NGOs helped to define terms and functions carried out by Social Welfare Workers, Community Volunteers, Social Workers and Psycho-social Care Workers. The mapping also provided more information about training topics, who is being trained and who is employing those trained. Approximately 654 social welfare workers received training over the past three years; 150 people have finished their MSW; 80 are in the process of completing their Bachelor’s degree in Social Work (BSW); and one has concluded a PhD in Social Work. Very few have taken government jobs and many have left the country. The cost per student ranges from approximately $80 dollars to $5500, with an average of $750 per student. The numbers of formal, professional social workers remain low and they tend to be concentrated in urban areas. Curricula do not focus sufficiently on child protection issues such as alternative care.

Questions & Answers from Conference Participants:
Regarding the 2010 court case in the Free State that produced evidence that government was paying NGOs running children’s homes less than half the amount per child per month (R2000) than it allocated to itself for government-run homes (R6000), who paid for the lawyer to represent the case?
The advocate offered his services pro bono. The case was based on inequities between NGO and government residential care and the funding disparity. Salaries at government-run residential care centers were higher and welfare workers trained and employed by NGOs were effectively “poached” by the government centers.

What is the ratio of government workers to NGO workers at the community level?
The majority of workers at the community level are NGO workers. Social workers at the community level are probably about 50% government employees.

SECTIONS ON DEVELOPING THE WORKFORCE

Session 3 Developing the Workforce: Skills Lab
Facilitator: Jim McCaffrey, Deputy Director, HRH and HSS, CapacityPlus, US
Key questions:
• What are the key components of social work education and training programs?
• How can social work education and training programs align more closely to social welfare workforce strengthening plans?
• What is the process for conducting curricula review?
• How can programs improve teaching methods and provide a broad range of professional development opportunities for the social welfare workforce?

This interactive workshop introduced participants to the key building blocks of education and training. It also presented ways to link education more closely with workforce needs, National Plans of Action (NPA), on-the-job support, and OVC and family needs. Also discussed was the role social work schools and faculty can play in pre-service education and in-service training. The workshop identified challenges and inefficiencies within the educational system for Social Welfare workers. Participants then explored innovative opportunities for
expanding access to educational programs and identified practical strategies for professionalizing the SW workforce in Africa.

Session 4  *Developing social work education and training programs to address gaps identified by workforce assessments*

**Moderator:** Sandra Crewe, Associate Dean for Academic and Student Advancement, Howard University School of Social Work, US

**Speakers:**
- Dr. Gidraph Wairire, Department of Sociology and Social Work, Regional Representative for Africa in International Association of Schools of Social Work (IASSW) and University of Nairobi, Kenya
- Dr. Marita Grobler, Professor, University of Namibia
- Charles Kalinganire, Lecturer, National University of Rwanda
- Willard Amos Manjolo, Senior Social Welfare Officer, Ministry of Gender, Children and Community Development, Malawi

**Key questions:**
- How can social work education and training programs better coordinate with workforce planners to meet the growing demand for social welfare workers?
- How can we ensure that social work education and training programs adequately prepare students for the tasks ahead of them?

**Presentation by Gidraph Wairire:  *Organizing internships/field placements for social work students as an integral part of their degree program***

Dr. Wairire discussed the value of social work field placements and internships in preparing future social work practitioners for different roles in social welfare agencies. He explained that many students arrive to training programs with little on-the-job experience in the field of social work. Field placements/internships provide students with hands-on experience in working in communities for NGOs or government agencies and/or working at the national level to develop and implement social welfare policy. Internships allow a student to internalize core social work values and ethical principles and apply them within real-life work settings. They also enable students to develop critical thinking skills and knowledge of human behavior in social environments. Dr. Wairire outlined the roles of and stressed the importance of field work supervisors at academic institutions and at field placement agencies. He warned against internship situations that exploit students and ask them to perform duties beyond their skill level. Challenges include: providing supervision to students placed at sites located a long distance from training institutions; advance planning between schools and field sites; adequate orientation of and communication with field supervisors; and the pressures of paperwork, monitoring and maintaining timelines.

**Presentation by Marita Grobler:  *Pre-service social work training at the University of Namibia***

Dr. Grobler provided an overview of social work education in Namibia. There are currently 200 registered social workers serving a population of 2 million. Each completed a four-year degree program composed of 37 courses, including methods, law, sociology and psychology, child and youth issues, social development, gender and intercultural issues, social/physical/mental health care, care for orphans and vulnerable children, parenting, as well as specialized fields. Curricula focus on indigenization of theories, models and world views; research findings and evidence-based practices; national policies and laws; and gender and intercultural issues. The education program also includes applied social work learning opportunities: visits to organizations, self reflection (year 1); family casework and group work (year 2); family and community project management (year 3); a 108-day, 8-month internship (year 4). A limited number of agencies provide paid internships. There are continuing education requirements for graduates: they must register as a social worker at the Council for Social Workers and Psychologists and make 30 marks per year to maintain registration. There are welfare workers who obtain two-year diplomas and are not fully qualified as social workers. In addition, there are post graduate opportunities for a research masters degree, a course masters degree and a doctorate.
Presentation by Charles Kalinganire: **Innovative training programs for workforce development in case management and social work in Rwanda**

Mr. Kalinganire presented the Social Work Certificate Program in Rwanda carried out in collaboration with Tulane University School of Social Work in Louisiana, United States. He explained that social work was only recently recognized as a profession in Rwanda and provided an historical overview. Before the 1994 genocide, Rwanda has only begun to establish formal structures to train assistant social workers. After the genocide, international NGOs began to organize short social work training opportunities and the National University of Rwanda (NUR) began to develop an undergraduate social work course. There is an ongoing need to increase the number of qualified social workers. The Tulane SW Certificate Program has trained 400 social workers at the university level using a Training of Trainer model. Outcomes included: 38 master trainers trained; 304 persons drawn from the existing social work, community health, psychological and academic workforce trained through 63 trainings; a DVD training package developed; and plans for an online certificate program by April 2011. Next steps include development of: a formal certificate program and a formal masters program at the National University of Rwanda; specializations in case management and community intervention; a national social work association; and synergies with welfare agencies and local communities.

Presentation by Willard Amos Manjolo: **Expanding levels of social work training/education: including diploma and degree programs**

Willard Amos Manjolo described the recent expansion of social work education opportunities in Malawi. He explained that social work in Malawi is a relatively young profession that is not well established or understood. In 2008 a Human Resource Capacity Assessment was carried out and, in 2009, assessments of the Magomero College and of the Ministry of Gender, Children & Community Development (MGCCD) were completed. These assessments identified critical gaps in performance and competencies of MGCCD social welfare and community development staff in districts, especially in comparison to other disciplines with more highly qualified staff. As a result, new curricula and programs for a Diploma and Bachelor in Social Work were developed. Next steps include: present curriculum to University of Malawi Chancellor College for approval; enhance library in terms of staffing, computers, books, and other resources; recruit key academic staff and train and upgrade existing staff; and commence a degree program in September 2011. Upgrading the Social Work Training Program to Diploma/Degree levels will strengthen the MGCCD workforce; enhance credibility and recognition of social work as a profession; enable Malawi to produce professional social workers with the requisite knowledge and competencies; and enhance the overall social welfare system which is reliant on a well-trained work force.

**Questions & Answers from Conference Participants:**

*Are there enough supervisors and agencies for field supervision?*

In Kenya, there are Ministry and NGO/CBO placements. The corporate industry (e.g. Kenya Community Bank) is also offering some community services and can serve as a placement site. In Rwanda, Tulane faculty provide supervision and students participating in internships also complete written assignments for review.

*Are there sufficient professors for the programs?*

In Namibia there are six professors and 20 field supervisors. This is not sufficient for the incoming student body. It leads to heavy burdens on the teachers.

*How is collaboration conducted with other organizations and indigenous organizations?*

In Kenya a school-based field supervisor (coordinator) works closely with agency level supervisors. They must work closely with faculty lecturers who also visit field sites. In Rwanda different NGOs offer placements, as well as Ministries of Health and Gender and Family Promotion.
What are the field placement requirements in terms of length of time and other expectations?

In Kenya, field placements are offered during course breaks (10-week breaks) and concurrent placements (three days per week) are offered for fourth-year students over a 12-week period.

SESSIONS ON SUPPORTING THE WORKFORCE

Session 5  
**Supporting the Workforce: Skills Lab**
- **Facilitator:** Sarah Johnson, Project Director, AIDSTAR-Two Project, Management Sciences for Health (MSH), US

Key questions:
- What are the key components of social welfare workforce support initiatives?
- How can we strengthen systems to improve and sustain social welfare workforce performance?
- What tools and resources are available to improve job satisfaction and retention of social welfare workers?
- How do professional associations enhance the professional growth and development of the social welfare workforce?

This participatory workshop took a practical approach to addressing critical workforce support issues. It introduced participants to the various components of a fully functioning HR management system. It presented ways that HR management systems can be established and applied to support the SW workforce in order to enhance performance and retention. Participants used the “Five Employee Questions” as a practical approach to addressing critical workforce support issues. They also had an opportunity to identify elements of the Human Resource Management (HRM) Assessment Tool that can be used to conduct a rapid initial assessment of their organization’s HRM capacity.

Session 6  
**Developing effective codes of conduct for the social welfare workforce**
- **Moderator:** John Williamson, Senior Technical Advisor, DCOF, USAID
- **Speakers:**
  - Carren M. Ogoti, Assistant Director of Department of Children Services, Kenya
  - Philomena Irene, Senior Program Manager, USAID Nigeria and Noriko Izumi, Chief, Child Protection, UNICEF Nigeria

Key Questions:
- What are appropriate expectations regarding the conduct of social welfare workers?
- How are appropriate standards developed, formally established, and enforced?
- How do these standards ensure the safety of clients and staff as well as enhance effectiveness of social work practice?

Presentation by **Carren M. Ogoti:**  
**Volunteer Children’s Officers Code of Conduct Handbook**

Ms. Ogoti presented the Code of Conduct and Ethics Handbook for Volunteer Children’s Officers (VCOs) in Kenya. She explained that the purpose of the handbook is to improve the standard of service delivery by VCOs; standardize training of VCOs; and enhance VCO understanding of the juvenile justice system. VCOs ensure that the rights of children in communities are protected; they provide guidance to children in need of care and rehabilitate and reintegrate children into communities; and they promote networking and collaboration of services between partners. VCOs operate where Children’s Officers (COs) are not present; they fill in the gaps where the paid COs are not available. The Code of Conduct sets the standard for ethical behavior for VCOs. VCOs must abide by the standards. Standards include shared values and principles that govern attitude, perceptions and behavior, for example: honesty, transparency and integrity, high moral standing and respect in community, best interest of the child, impartiality, and confidentiality. The challenges
faced when rolling out the standards include: lack of funding/budget; difficulty of standardizing social work across the vast and diverse regions of Kenya; and difficulty of recruiting young VCOs since they demand transport stipends as compensation. Achievements include: the development of the code of conduct handbook; streamlined recruitment, especially of older VCOs who are willing to work without compensation; a list of all VCOs and issuance of VCO ID cards; and an increase from 450 VCOs to 500.

Presentation by Philomena Irene and Noriko Izumi: Establishing institutional child protection policies for NGOs

Hope Worldwide Nigeria is in the process of developing codes of conduct for staff in its child protection and OVC programs through a process that has engaged a range of stakeholders: communities, children, and caregivers. A risk assessment was shared with stakeholders at a workshop, who then developed a plan to address risks. They held additional consultations with global and local organizations. The resulting Code of Conduct is clear, unambiguous and written in local languages. It reflects the core values of HOPE Worldwide and was guided by the Child Rights Act 2003 of Nigeria (which in turn was guided by the UN Convention on the Rights of the Child). The policy includes detailed complaint, investigation and discipline procedures. In Nigeria, there is a need to create a common understanding of existing and future workforce needs. There is a mix of formal and informal structures. The federal system is independent and collaborates little with the informal system. At present, there is growing political and financial commitment to improve the capacity of local government and opportunities to capitalize on this commitment to benefit the social welfare workforce at the community level.

Questions & Answers from Conference Participants:

How can we ensure volunteers are vetted and cleared before they start working? We cannot expose children to harm.

In Kenya the vetting of VCOs is a very involved process. The process still has a long way to go. The structures used for recruitment are mandated in the Children’s Act, which clearly states that a VCO must have completed a criminal investigation and receive a certificate of good conduct. The new constitution may result in further revisions to the Children’s Act.

Are there incentives for the volunteer children’s officers? How do you retain VCOs?

In Kenya, VCOs are sometimes given stationery and telephone air time.

If the code of conduct is not promoted by government, to what extent can service providers be held responsible?

Not all states in Nigeria have implemented Child Rights Laws. This creates challenges. The Code of Conduct needs to be anchored into some formal structure. If necessary, this can be done at the local government level. Federal government policies are not always applicable at the local level because some local governments have a different structure. However, local governments can also pass their own legal regulations to anchor codes of conduct.
4.2.3 CONCURRENT INTERACTIVE WORKSHOPS – SET 2

SESSIONS ON PLANNING THE WORKFORCE

Session 7  Carrying out workforce assessments to identify gaps in human resource requirements
Moderator: Karin Turner, Deputy Director, Health Systems Strengthening, USAID Mozambique
Speakers:
- Chiara Gargano, Deloitte Senior Consultant within Human Resources Directorate, Ministry of Women and Social Welfare (MMAS), Mozambique
- Joyce Nakuta, Deputy Director Child Welfare Services, Ministry of Gender Equality and Child Welfare, Namibia
- Togarepi Chinake, Deputy Director, Family and Child Welfare, Ministry of Labour and Social Services, Zimbabwe

Key questions:
- What were the results of recent workforce assessments in Mozambique, Namibia and Zimbabwe and how are these countries addressing or proposing to address capacity gaps?
- What are some useful tips for other countries planning to engage in workforce assessments?

Presentation by Chiara Gargano: Assessing staffing levels and gaps in needed skills to strengthen the delivery of core social welfare functions
Chiara Gargano presented the results of a field survey of Early Childhood Educators and Social Welfare Technicians that was conducted in collaboration with the USAID Health Systems 20/20 Project, the Ministry of Women and Social Welfare, and Austral-COWI. The survey indicates that most social workers are employed by the government, most have education through grade 12 and a little more than half have completed professional training in a related subject. Seventy-three (73%) of those interviewed do not feel they received sufficient training. Most preferred to be trained after work rather than switch to part time. The most frequently reported constraint was transportation. Survey results will inform the development of competency based profiles, update of curriculum and training implementation, and guide strategic planning within the Human Resource Directorate of the Ministry of Social Welfare.

Presentation by Joyce Nakuta: Human resource planning for improved service delivery to orphans and vulnerable children
Joyce Nakuta presented the results of a Human Resources and Capacity Gap Analysis carried out by the Ministry of Gender Equality and Child Welfare. The findings from the analysis were organized around five key themes: The OVC population as a national priority; coordination; structure, staffing and training; and resources and information. The Ministry found that documenting existing resources enabled them to better lobby for funding from the Ministry of Finance. It also pointed to the need for more specific assessments, the creation of residential child care standards, a foster care study, etc. (see diagram at right). The Ministry has now established standards for OVC service delivery. The analysis also helped the Ministry to meet responsibilities outlined in their mandate, ensure better coordination and...
implementation, and develop new legislation, including the Child Care and Protection Bill that will replace the Children’s Act of 1960.

Presentation by Togarepi Chinake: *Independent audit of the human resource and institutional capacity of the Department of Social Services at national, provincial and district levels*

Togarepi Chinake presented the results of an Institutional Capacity Assessment that was designed to assess the capacity of the Department of Social Services (DSS) in Zimbabwe to respond to the needs of Zimbabwe’s orphans and vulnerable children and recommend a strategy for provision of services. The assessment analyzed staffing levels and found that the ratio of DSS social workers to children in Zimbabwe is 1 to 49,587, in comparison to Botswana, for example, where the ratio is 1 to 1,867. However, more social workers are employed by civil society, so this figure may overstate the severity of situation. In addition, other government departments also employ social workers. These social workers are not reflected in this assessment. Another finding revealed a misunderstanding of the role and function of the DSS amongst other agencies given that the DSS is not the primary provider of social welfare services. Most services are provided by NGOs, pushing the government to the background. The assessment found that frontline DSS staff had limited professional qualifications and experience, inadequate access to physical resources, and no access to continuing education. Recommendations include giving the DSS authority to regulate operation of the nearly 180 civil society organizations providing social welfare services. Next steps include developing immediate, short, medium and long-term strategies to present to policy makers in government and incorporating into that a role for Government to set standards, legislation and policy and to monitor and evaluate actors in the system.

**Questions & Answers from Conference Participants**

*Could you do more surveys to collect more qualitative data?*

We are considering this. We would like to carry out focus group discussions, for example, with community leaders.

*You note that one of the constraints to achieving a strong social welfare workforce is transportation. However, you do have money for training. Should you shift training funds to support transportation?*

Improving curriculum is critical but transportation is a big problem. We require funding for both.

*Who costed the Child Care and Protection Bill in Namibia and was MOF involved?*  
A UNICEF colleague helped to estimate the cost of implementing the bill. This colleague will be meeting with MOF to discuss further. MOF would not consider the bill until they received an estimated cost.

*Isn’t it time for our own governments to fund social welfare workforce strengthening rather than depend on external donors for funding?*  
In Zimbabwe, the government is going to provide half of the funds for specific programs. So there is cost sharing.

*Is there a standard related to caseload?*  
Standards have been established but they vary between countries. Different countries and different ministries have different standards. It is difficult to standardize.
Session 8  Workforce realignment and task shifting through establishment of new cadres within the social welfare workforce

Moderator: Tom Fenn, Regional HIV and AIDS Advisor, UNICEF Southern and Eastern Africa

Speakers:
- Margaret Mokgachane, National OVC Program Coordinator, Ministry of Local Government, Department of Social Services, Botswana
- Prosper Msuya, Most Vulnerable Children Program Manager, IntraHealth Tanzania
- Lisa van Rhyn, Deputy Director, Directorate of Social Welfare Service, Ministry of Health and Social Services, Namibia

Key questions:
- What is the process for establishing new cadres of social workers?
- How are appropriate tasks for different cadres determined, and what is the process for shifting tasks among cadres?

Presentation by Margaret Mokgachane: One social worker, many roles: identifying staffing shortages and their implications for effective service delivery

Ms. Mokgachane explained that social work in Botswana is still a developing profession. Formal training programs began in the ‘70s. They emphasized principles of self-reliance. Most social workers in Botswana are employed by the Government (primarily the Department of Social Services and Department of Local Service Management). She explained the roles of social workers at the national, district and local levels and noted that district and village level social workers face challenges of overwhelming workloads; role confusion; being accountable to multiple bosses; having to report to multiple partners (such as DMSAC, DSS, and PEPFAR); using different tools; and receiving little supervision, mentoring and support. This leads to low morale, poor performance, not being able to address a long queue of cases (especially when requests from politicians for attention to individual cases interrupts workflow), and a negative perception of social workers. She concluded by saying that multiple roles and poor supervision demoralize social workers, leading a majority of them to leave the profession and thus weakening the existing social welfare system. Poor service delivery exacerbates negative perceptions of social workers.

Presentation by Prosper Msuya: Filling the social welfare gap in services: recruiting volunteer and para-social workers and potential for inclusion in local government

Prosper Msuya presented the para-social work (PSW) program, which is designed to support the roll out of Tanzania’s National Costed Plan of Action (NCPA) for Most Vulnerable Children (MVC) from 2007-2010. To meet this obligation, the program works in partnership with key stakeholders to promote a cadre of PSW and advocate for the needs of MVC. He explained that the PSW training was initiated due to a request in 2006 by USAID to carry out a human resource assessment to facilitate the NCPA roll out. In 2008 the assessment was completed and concluded that the creation of a new cadre of PSW could serve as a medium-term solution to fill HR gaps. For example, the assessment found that the government employed only 210 welfare officers. However, the NCPA roll out required 3,892. NGOs and FBOs currently provide a large percentage of social welfare services for vulnerable groups, yet few of these NGOs and FBOs make efforts to link with the government.

Mr. Msuya described four main components of the PSW program, which is carried out in collaboration with The Institute of Social Work (ISW), Jane Addams College of Social Work (JACSW) and American International Health Alliance (AIHA): (1) HR & Training Activities: The program trained over 2,400 PSW and 329 PSW supervisors in 25 districts. PSWs were trained to identify most vulnerable children and provide support, advocate for communities, and collect data and information to use for planning and advocacy; (2) Partnership Activities: The program established dialogue and close working relationships with government and NGOs; (3) Strengthening local government infrastructure and advocacy activities: The program is advocating for local government authorities (LGAs) to recruit social workers, encouraging communities to directly care for and
support children, building the capacity of government at LGA level; forming advocacy teams, and providing on-going professional development opportunities for PSW; and (4) Service delivery and monitoring and evaluation activities. Program implementation challenges include: (a) weak data flow from the communities to district offices due to transportation limitations; (b) low morale among PSW due to lack of incentives; (c) unrealistic expectations of PSWs, particularly with regards to material support; and (d) low-capacity among PSWs. In 2010/2011 the program plans to: train 1,000 additional PSWs and 300 PSW supervisors; launch follow-up training; establish and support PSW networks; continue collaboration with partners and stakeholders; orient PSW and supervisors on data collection; and conduct a large-scale program evaluation.

Presentation by Lisa van Rhyn: Namibian experiences with social welfare task shifting
Lisa van Rhyn presented three social welfare cadres in Namibia, including Welfare Workers (WW), Community Childcare Workers (CCCW) and Health Social Welfare Extension Workers (HSWEW). WW undergo a three year training program and receive a certificate but are not registered. They are tasked with problem solving, investigating social problems, supervising foster care services, and planning treatment, group and community work. WW previously complained that they were doing same work as Social Workers (SW) but for less pay. As a result, the University of Namibia established a special course in 1999, which enabled WWs to continue their education and convert to entry level SW posts. However, unclear job descriptions have created ongoing confusion between the positions of WW and SW. In addition, WW do not have a clear career path and often face discrimination. Community Childcare Workers became part of the MGECW structure in 2008. They receive in-service training and a “Children at Risk” certificate. This cadre was established to address gaps in the social welfare workforce by completing administrative or lower skilled social work tasks and enabling higher skilled social workers to focus on more complicated social work activities. CCCW functions include: distributing food, registering OVC, processing foster grants, conducting home visits, tracing parents and guardians, co-facilitating group work with children, and other responsibilities. Although the addition of CCCW has enabled more efficient allocation of staff, each constituency has only one CCCW. As a result, both SW and CCW continue to face overwhelming workloads. Positive results following the introduction of CCCW include: an increase in the number of child grant recipients, more access to child welfare services, a shift from an informal to formal structure, and reduced burden on SW.

In 2008 a National Health & Social Services System Review of the Ministry of Health and Social Services (MOHSS) was completed. It found a need to extend health and social services in a structured manner to communities. A proposal was developed in April 2009 for a health extension program. The Office of the Prime Minister is currently reviewing the proposal and the process of establishing Health Social Welfare Extension Workers (HSWEW) is still underway. This cadre mobilizes communities and bridges the service gap, particularly within difficult-to-reach communities. HSWEW will conduct home visits, disseminate information, and report abuse and neglect. The challenges being faced now are that no training modules are in place, there is great potential for overlapping of services, and health services may fully occupy these workers, leaving no space for social work services.

Questions & Answers from Conference Participants:
How are PSW selected in Tanzania? How do they interface with other community volunteers? How are PSW connected to DSW?
There are selection criteria in place. Minimum qualifications for PSW include local residency and an O Level certificate. Other specific criteria are developed by each district. The district shares selection criteria with each village and the village selects an appropriate PSW. Districts give priority to volunteers already working on children’s issues. DSW Officers stationed at District Offices supervise PSWs.

What informed the ratio of professional versus para-professional cadres within your social welfare workforce? How are social workers using data collected at local levels to inform practice?
In Tanzania there is an acute shortage of qualified social workers and the government struggles to find qualified staff to support children at the community level. PSW feed data collected on the status of vulnerable children at the community level into a database at the district level. This information helps to monitor individual cases at the community level and contributes to analysis of specific protection concerns and trends at the national level.

Comment: It will be essential to realign resources to support this expansion of the social welfare workforce and task shifting. There is a danger that social workers may spend all of their time administering child care grants rather than carrying out risk assessment, abuse investigations and ultimately protecting children.

Comment: In Swaziland, social work is primarily carried out by NGOs, which have different models, and thus has led to a very fragmented approach to social welfare. PSWs work at the chiefdom level to support most vulnerable cases, such as children living in alternative care, and child headed households.

SESSIONS ON DEVELOPING THE WORKFORCE

Session 9 Developing appropriate social work education and training programs for specific social welfare workforce cadres

Moderator: Nathan Linsk, Jane Addams College of Social Work/Midwest AIDS Training and Education Center, University of Illinois at Chicago; American International Health Alliance HIV/AIDS Twinning Center, US

Speakers:
- Leah Omari, Lecturer, Institute of Social Work, Tanzania
- Kabwiku Wynter, Lecturer, University of Zambia

Key Question:
- How can social work education and training programs be adapted to prepare students for specific roles within the social welfare workforce and meet urgent needs for qualified workers as quickly as possible?

Presentation by Leah Omari: Adapting social work training programs at the Institute of Social Work to establish new cadres of social workers, para-social workers (PSW), and social work assistants

The project described by Ms. Omari was launched in late 2006 as an HIV/AIDS social work partnership to improve care and support for OVC in Tanzania. Partners include the Tanzanian Institute of Social Work (ISW) and Jane Addams College of Social Work (JACSW) at the University of Illinois, Chicago. The partnership is supported by the HIV/AIDS Twinning Center, a project of the American International Health Alliance (AIHA), and is funded by the US Department of Health and Human Services, Health Resources and Services Administration (HRSA) through a PEPFAR cooperative agreement. The project is managed by the CDC and USAID in Tanzania. The para-social work training program is intended to decentralize social welfare services, relieve overstretched workers, and address the shortage of human service and social workers. PSWs are identified by a local community leader and tend to serve their communities on a volunteer basis. They receive training to assist with the delivery of foundational social welfare services, including: assessing needs, providing care and support to children and families, referring clients to services and providing ongoing follow-up care. PSW training consists of an eight-day introductory course, followed by a six-month supervised field experience, and a PSW II follow-up course. Supervisors are given additional training. To date, partners have trained 2,408 para-social workers, 329 supervisors, 103 master trainers and 75 district social welfare officers. The outcomes of the project include development of a one-year social work curriculum for social welfare assistants. Qualified PSWs applying for this certificate course will receive priority admission. JACSW and ISW are currently providing technical assistance to emerging social work education programs in other colleges and universities in Africa to foster collaboration and assist in the development of national PSW
program implementation guidelines. The ISW is currently finalizing an MSW program. The ISW has found that the program decreases stigma towards OVC and enhances the quality of services.

Presentation by Kabwiku Wynter: Fast track training of social welfare workers
Mr. Wynter discussed why the numbers of social workers in Zambia are low, what should be done to increase the numbers of social workers in the job market, ways to shorten the training period for social workers without compromising quality, and the potential challenges of off loading high numbers of social workers and para-social workers in the job market. The University of Zambia graduates 40 students per year in its four-year social work degree program. As 60% of the population is rural, and most graduates do not work in rural areas (and many are absorbed into non social work jobs), there is a severe lack of social workers. The lack of social workers to provide access to services has become a social justice issue. Therefore, the University of Zambia is embarking on a program of training social workers at three levels: Certificate (two years), Diploma (three years) and a four-year degree program. The fast track training initiative will strengthen actual skills and research capabilities and improve the competencies and skills of social workers to deliver quality services.

Questions & Answers from Conference Participants:
Is the PSW training program require special funding or is it funded through the regular University budget? Does the program require additional staff?
In Tanzania, University faculty and staff do the teaching within these programs. Initially, they were not paid extra for teaching PSW courses. The courses were considered part of their regular teaching portfolio. However, a recent evaluation indicated that faculty teaching the course were required to complete significant additional tasks. As a result, the Department of Adult Education began providing faculty with a bonus for their additional work. A new office within this Department is being established to oversee these courses.

What is the role of the various cadres of social welfare officers in Zambia?
In Zambia, certificate-level social workers are provided basic skills. The certificate is not sufficient to earn employment within the government system. The government encourages certificate holders seeking government employment to apply for the Diploma Program. Certificate-level social workers are supervised by social welfare assistants. Because they are not employed by the government they are not nationally registered but they are known.

Who are MVCCs?
In Tanzania, MVCCs are comprised of village extension workers, local government offices, community members and caregivers. They work at the community-level to address the needs of vulnerable children and families.

What is the quality of the work of para-social workers given limited incentives, etc.? From the beginning, PSWs in Tanzania are told that participating in training does not guarantee remuneration. Many PSWs were serving their communities on a volunteer basis before receiving training. During the training, they are provided information on how to access resources through various community organization and some are able to apply for small incentives. The policies and protocols of each organization determine the incentive amount. These organizations and PSW supervisors monitor the quality of tasks performed by PSWs.

The lack of social workers to provide access to services has become a social justice issue.

- Kabwiku Wynter, University of Zambia
Session 10 Providing feedback to the Social Welfare Workforce Strengthening Framework

Facilitators:
- Jim McCaffery, Deputy Director, HRH and HSS, CapacityPlus, US
- Stephanie Asare, Consultant, National Association of Social Workers, US

Key Questions:
- How can we improve the Social Welfare Workforce Strengthening Framework?
- What terms or aspects are unclear or difficult to understand, what critical components are missing?

A small group met to discuss the draft Social Welfare Workforce Strengthening Framework. Suggestions for changes and general discussion covered the following topics:
- Change the name, as “social welfare” has too many negative connotations
- Change the graphic in the context box to reflect the dynamic relationship between the elements and how to influence that process
- Include a situational analysis (e.g. current state of play in the country, number of social workers, etc.)
- Refrain from using the term “volunteer” which undermines the value of work provided by a labor force, which is often made up of competent and experienced community-based caregivers. Recognize that they should be compensated for their work.

SESSIONS ON SUPPORTING THE WORKFORCE

Session 11 Developing tools, resources, and initiatives to improve job satisfaction and retention

Moderator: Gretchen Bachman, Senior Technical Advisor for OVC, USAID

Speakers:
- Naomi Hill, Project Director, The Thogomelo Project, South Africa
- Nicolette Bessinger, Deputy Director, Church Alliance for Orphans, Namibia
- Zeni Thumbadoo, Deputy Director, National Association of Childcare Workers, South Africa

Key Questions:
- What motivates social welfare workers, particularly volunteer workers?
- How can we reinforce these incentives and provide better psychosocial support for social welfare workers?

Presentation by Naomi Hill: Quality care for children through enhanced psychosocial well-being and child protection capacity of community caregivers

Ms. Hill described the cadre of Community Care Givers (CCG), which was developed to relieve the burden of care for vulnerable children being placed on communities. The type of work carried out by CCGs takes an emotional and physical toll and results in stress, burnout and compassion fatigue. The Thogomelo Project is piloting an accredited training program to promote self care and psychosocial well-being among CCGs. The project also provides CCG supervisors within the training and skills to help create a healthy work environment. At the conclusion of the training, supervisors will 1) understand the concept and practical application of psychosocial support in the personal, social, cultural and organizational context; 2) demonstrate an understanding of community care giving and the personal motivation for community care giving in relation to their psychosocial well-being; 3) be able to identify causes of stress in one’s own life and demonstrate/indicate techniques to manage stress; 4) describe and demonstrate how to manage reactions arising from a traumatic event, loss, grief or bereavement for self and beneficiaries; 5) understand and demonstrate how to build psychosocial well-being; 6) demonstrate an understanding of how to identify and respond to abused, neglected and exploited children; 7) be able to demonstrate how to incorporate psychosocial well-being in a family, organization and community context; 8) demonstrate the ability to build community relations for effective referrals and community involvement; and 9) understand how to build a caring and supportive environment. A study of the psychosocial well-being of CCGs found that those who offer what they may perceive to be fragmented services to children are significantly more likely to have a lower level of
psychosocial well-being. Those experiencing the most burnout reported lower levels of education and a lack of organizational support and appreciation. The program has found that informal and formal, indigenous and Western approaches to psychosocial well-being are all valuable.

Presentation by **Nicolette Bessinger**: *Working with children through volunteers: A case study from a Namibian Community Service Organization*

The Church Alliance for Orphans (CAFO) is a grassroots FBO with a volunteer-based service provision to the OVC population using a holistic psychosocial support methodology. CAFO operates a small grant program that empowers communities through funds for OVC-related activities and small income generating projects. The organizational structure of CAFO’s programs allows for a small degree of upward movement for volunteers. Some are able to become paid staff on a part-time or full-time basis. Volunteers have clear tasks, duties and roles and they receive a stipend once M&E or monitoring reports are submitted. Retention strategies include the opportunities to obtain skills in service delivery and program implementation that can eventually qualify volunteers for employment within CAFO or other NGOs. Lessons Learned include: building capacity of volunteers at the local level creates a sustainable local care and support structure; properly recognizing the contribution, time and dedication of volunteers is essential for a project to succeed; and the importance of providing an incentive (monetary value) to ensure quality services are rendered.

Presentation by **Zeni Thumbadoo**: *Career Pathing: A South African experience developing volunteers into professionals*

Ms. Thumbadoo described the Isibindi project and the process through which the project recruits and develops community-level volunteers into childcare professionals. The Isibindi project targets and recruits people who are unemployed but want to work. The project has trained 900 CCGs. They are deployed in every province and serve 50,000 children. Professional development opportunities provide CCGs with accredited, rural focused training; supervision, consultation and mentorship; and membership in a professional association. The professional association, in particular, involved a national network of members, promotes a sense of identity and belonging, showcases a capacity to organize and influence, and offers opportunities for leadership development through seminars, workshops, and gatherings. The professional association also contributes to advocacy efforts and policy development. Ms. Thumbadoo emphasized that clearly defined roles for different cadres within the workforce are important and the child worker cadre also helps promote quality social services.

Questions & Answers from Conference Participants:

*What is the ratio of CCG to children and is there a gap in coverage?*

If the project trained another 1800 CCG they could serve every child-headed household. The Isibindi project is designed to be scalable.

*Volunteers make up the majority of the workforce in the CAFO project. How is the project ensuring sustainability?*

CAFO is working with the government to find ways to absorb volunteers within the public social welfare workforce. The project is also continuing to mobilize resources in an effort to continue programming.

*What is being done to address gender issues? How are these initiatives empowering men to play a care giving role?*

The Isibindi project does not recruit many male CCGs. There is at least one male on every team but the project has found that clients do not always like males to visit their homes. Traditional gender roles are still very rigid. Male caregivers have been more successful as organizers of sports activities, safe park initiatives, and young male empowerment programs.
Session 12 Strengthen systems to improve and sustain social welfare workforce accountability and effectiveness
Moderator: Luisa López, Director, Human Rights & International Affairs Division, National Association of Social Workers, US
Speakers:
- Charles Mbugua, President, Africa Region, International Federation of Social Workers (IFSW)
- Dorcas Amolo, Regional Quality Improvement Advisor, University Research Co., Kenya
- Irene M’Bahia Adouko, OVC Technical Advisor, US Centers for Disease Control (CDC), Côte d’Ivoire

Key Questions:
- What are appropriate mechanisms for promoting accountability of the social welfare workforce?
- What is the impact of quality standards on social welfare worker performance?
- How can these standards increase feedback and improve accountability?

Presentation by Charles Mbugua: Quality assurance tools and support provided by social work associations
Mr. Mbugua noted that social work has a distinct way of operating and its own set of principles. These are based on respect for the worth, equality, inalienable rights and inherent dignity of all people. He noted that welfare services should be delivered skillfully and recipients treated with care, empathy and dignity. Social work practice is a values-laden profession. Social workers are accountable to the people who receive their services, as well as to colleagues, employers, professional associations, and the law. Tools and instruments have been developed to support social workers, including an international definition of social work (which has been translated into about 30 languages) and an international Code of Ethics (almost all national associations have developed their own code of ethics or have adopted the IFSW code); standards of practice; and policy statements on human rights and social justice. The purpose of these instruments is to enable practitioners to operate within the ethical guidelines; to help meet consumer expectations; to maintain integrity, to recognize boundaries between personal and professional life; to address each situation as an individual situation without generalizing; and to operate within the pillars of confidentiality, compassion and empathy. Mr. Mbugua stated that when social work associations gain legal status, they are better able to develop and enforce nationally recognized standards and codes of ethics.

Presentation by Dorcas Amolo: Lessons learned from applying quality standards for programs for orphans and vulnerable children to social welfare worker performance
Dorcas Amolo presented lessons learned from “Care that Counts,” a quality improvement initiative for OVC programs. Ms. Amolo explained that the HIV/AIDS community had been operating in emergency response mode due to the overwhelming needs created by the epidemic. During the early stages of the epidemic, there was an outpouring of support and many new programs were established to respond to these needs. However, now there is a need to look more closely at the effectiveness and sustainability of services. Are we doing “unintended harm?” Did we replace the work of the families, the community, and the government? In a number of cases, Care that Counts found that children supported by the HIV/AIDS projects were further stigmatized due to the special support they received under these projects. The initiative has supported efforts to improve the quality of OVC services by developing country-specific standards and defining desired outcomes in seven countries. In several countries, the initiative has also piloted standards and strengthened communication and networks across countries and USG partners to share lessons learned. It uses a team approach, including government, NGOs, CBOs, and other stakeholders. Standards must be measurable. Countries must reach consensus regarding definitions of vulnerability. Implementers must know with whom they can coordinate and to whom they can make referrals. Services must be appropriate to the age and gender of the children. Giving the same package to all children may not be appropriate. Communities can be empowered to analyze issues, decide what they want to do, follow results and know whether they are achieving results. Sharing practices enhances quality. In conclusion, Ms. Amolo emphasized that services should make a difference in the lives of children and not make children different. She invited participants to
visit Ovcsupport.net to find at quality standards, materials and tools. “Care that Counts” is developing an e-learning course and to be posted to the www.OVCsupport.net website.

Presentation by Irene M’Bahia Adouko: **The impact of quality standards for programs to support orphans and vulnerable children on social work accountability and effectiveness**

The Côte d’Ivoire team is involved in a process of standards development for the OVC population to promote accountability and effectiveness. The process is led by the National Program for OVC Care and Support (PNOEV), which is responsible for social affairs and is the national OVC leader. In 2009-2010, the Cabinet approved and completed standards development. Thirty-eight champions were trained and the work has been piloted in four sites. Activities are based at and led by the local social centers. Leadership by ministry officials has significantly contributed to the success and sustainability of these initiatives. Improvements were documented in the four pilot sites in 2010. Social centers and large implementing partners support Quality Improvement training and exchange sessions during monthly OVC coordination platform meetings. In addition to improved within services, social workers reported that they have begun to look at other areas of their work through the lens of quality improvement, resulting in increased attention to detail and pride in their work.

Challenges faced include: maintaining a focus on quality at all levels of the ministry despite competing priorities and changing leadership; ensuring a minimum level of resources at all districts, even those with very low HIV prevalence; and transitioning support for the project from PEPFAR-URC to the ministry. Ms. Adouko reported that in Côte d’Ivoire, when quality improvement advocates think about quality, they must also think about sustainability. They recognized the need to involve key stakeholders in the development of standards. For this reason, defining the minimum standards involved the Ministry, NGOs, and children.

**Questions & Answers from Conference Participants:**

*The link between formal social workers and volunteers is not clear. What is the link between formal social workers and volunteers with regard to quality assurance?*

There is a need to create a system where the volunteers, professional social workers and others operating within the various cadres can help each other observe standards and codes. Even volunteers must abide by a code of conduct and observe other standards for protecting clients.

*How do we alleviate burn-out?*

Social workers need to be able to discuss concerns, stress and frustration with others who face similar challenges. They need to know about all available services so that they can make appropriate referrals and not feel obligated to address every problem on their own.

*With quality improvement (QI) standards, the assumption is that there is a minimum level of services, and there is pressure to report achievement against standards to the donor. On the other hand, we know that we must also invest in systems strengthening. How do you balance the two – can we use the standards to measure systems strengthening? Quality Improvement seems to have focused primarily on service delivery rather than systems strengthening.*

Quality improvement is a science that can be applied to a range of interventions – not just service delivery. Quality improvement asks “What are we providing? Where are the gaps? Why are there gaps?” Many of these gaps in service delivery are due to gaps within the social welfare system.
4.2.4 PLENARY CASE STUDY: ASSESSING THE HUMAN RESOURCE CAPACITY OF THE MINISTRY OF GENDER, CHILDREN AND COMMUNITY DEVELOPMENT IN MALAWI

Speaker:
- Angela Odiachi, Care and OVC Advisor, USAID Malawi

In an effort to illustrate one promising practice for improving social welfare workforce planning, Ms. Odiachi presented the results of a recent human resources capacity assessment of the Ministry of Gender, Children and Community Development, Malawi (MGCCD) in Malawi. The Ministry had been characterized as having low capacity, poor resources, high vacancy rates, and low grading of entry positions for frontline staff. Government started a decentralization agenda and wanted to shift work to the district level. The goals of the assessment were to identify what the MGCCD needed to carry out its mandate and what was lacking within current structures, capacity and resources. An assessment team of 18 people reviewed the structure of the ministry, resource planning, staff development, the human resource plans, and communications within the district. The findings included: 1) functions at the national level do not correspond to priorities at the district level and several central functions have not yet been devolved to districts; 2) programmatic overlap of technical departments at ministry; most programs are implemented in silo fashion with no interaction; 3) absence of written job descriptions and a performance based Human Resources system; 4) absence of career ladders; 5) in terms of staff training, there is limited capacity at Magomero College, the country’s premier social work training institution, to provide courses; 6) funding is inadequate to support service delivery and case management; 7) there are no guidelines for resource allocation at district level; and 8) transport for workers is limited. Recommendations included proposing a new structure for the Ministry, clarifying mandates, establishing career ladders for staff; finalizing job descriptions; reviewing and upgrading curriculum at Magomero College; conducting supervision and leadership training. Since the assessment, Malawi has already established career ladders for frontline staff, conducted supervision and leadership training, revised and disseminated job descriptions, implemented organizational development interventions to improve and strengthen MGCCD performance and upgraded the Magomero training curriculum.

Questions & Answers from Conference Participants:

**What prompted the Ministry to review their work?**
Malawi received resources from the Global Fund. The Fund alluded to the fact that capacity was low and increasing it was important for implementing Global Fund activities. USAID was also ready to invest in efforts to address capacity gaps.

**Can you talk about the reaction by parliament to increasing the budget and getting resources?**
There was a willingness by Ministry leadership to address the gaps. Political will was key in mobilizing resources from government, UNICEF and USAID. So far, Malawi has mobilized almost $700,000 for follow-on assessment work.

**What was the provisional guideline for the assessment?**
Technical support was provided through USAID’s Capacity Project and UNICEF consultants. Assessment teams were multi-disciplinary, bringing different but complementary skill sets.
4.2.5 FACILITATED DISCUSSION: LINKING PROFESSIONALS IN EFFORTS TO BUILD AND SUSTAIN THE SOCIAL WELFARE WORKFORCE

Facilitator:
Gary Newton, US Government Special Advisor for Orphans and Vulnerable Children

Discussants:
- Brou Clementine Amelie Anderson Koua, Former Director, National Program for OVC Care/ Ministry of Family, Women and Social Affairs, Côte d’Ivoire
- Jacqueline Odoul, Secretary for Children Affairs, Ministry of Gender, Children and Social Development, Kenya
- Leah Omari, Lecturer, Institute of Social Work, Tanzania

Key question:
- How can we most effectively bridge the different layers of the workforce, encourage cohesiveness and better coordinate training, workloads and service provision?

Mr. Newton introduced the panel of speakers and described the session as a “conversation” to stimulate thoughts about the roles and functions of different cadres of the workforce (community volunteers, social workers, para-professionals, and others) and how these roles can be effectively coordinated and supported. How do we ensure people who are working towards the same goal are doing so in a collaborative way? In most locations, there are not enough workers and social workers face heavy workloads and insufficient status. The workforce is comprised of workers from several sectors and disciplines. Amidst all of this, how can we engender teamwork and collaboration? Mr. Newton posed a number of questions to which the panelists provided responses.

Question 1: Can you give a short description of the role that professional social workers and para-professional social workers play in the system of care for vulnerable children in your country?

**Dr. Anderson Koua:** In Côte d’Ivoire, social workers provide care and support to the OVC population. These social workers are often official ministry representatives who play a leading role in efforts to mobilize communities. They identify vulnerabilities and resources, contact families and individuals, and are a voice for people who would not otherwise have one. They are trained at national training institutes and then become regional or district directors of social centers. Para-social workers often receive in-service training and do not normally go to the national institutes.

**Professor Odoul:** In Kenya, social workers receive reports about children who have been abused; they represent them in court, and help to mediate family issues. Para-social workers often work with NGOs at the local level. The district is the smallest level of government that is staffed by a social worker or district officer. Para-professionals work at the village level and pass information on to social workers at the district level.

**Ms. Omari:** In Tanzania, para-social workers who work at the local level go through an eight-day training plus six months of field internships. Prior to their recruitment, most have already worked with the OVC population. At the village level, they identify OVC and assess their needs, identify resources, and link families to services. They are only trained in basic skills, so they refer more complicated cases to social welfare officers (professionals) who work at the district, regional or national level. Most of the social welfare officers have Bachelor’s degrees.
Question 2: What are some of advantages and disadvantages of relying on an increasing number of para-professional social workers?

Dr. Anderson Koua: In Côte d’Ivoire, there are 2,000 social workers for a population of 20 million. Formal social workers go through three years of training. 350 graduated, but the ministry supports only 120 of them. There is a large deficit of social workers at social centers and still not enough funding. Para-social worker community counselors are filling the gap. The advantages are that they are known to the community, they are capable of mobilizing communities, and they are from the five major ethic groups that speak over 60 languages. The challenges include sustainability, salaries, motivation, and resources. The Ministries of Finance and Social Welfare are preparing a budget for para-professionals. This issue is currently being discussed at the cabinet level.

Prof. Odoul: The advantages are outreach and coverage. Kenya’s Ministry currently has 380 children’s officers, which is not enough. Volunteers working for NGOs tend to live in the communities they serve and help to create linkages with these communities. Abuse is more easily addressed when police are involved. Para-social workers and children’s officers should be offered short courses carried out in collaboration with government agencies and NGOs with built-in debriefing sessions to strengthen relationships between professionals and para-professionals. Currently there is no clear system for recognizing and incentivizing unpaid work, supporting para-social workers to travel long distances to submit reports, and ensuring adherence to standards and ethics. NGOs have had to let some of the volunteers go, as there was no way to confirm that they were operating within codes and demonstrating sufficient competence and skills. There is always a question of whether para-social workers have the proper skills to do the work.

Ms. Omari: Tanzania has over 2,000 para-social workers and 329 supervisors in eight regions. Previously, there was often confusion regarding who is a social welfare officer and who is a community development officer. However, with the establishment of a new cadre of para-social workers this differentiation is now clear. Communities now know where to refer child protection concerns, and at the grassroots level there is generally better awareness about the field of social work. The major constraint is the number of para-social workers. There is only 1 per 10 villages.

Question 3: How can we effectively coordinate the work of para-professionals with professional social workers over the next 5 years? What are some successful or illuminating examples of how the different cadres of the workforce have worked or could work together?

Dr. Anderson Koua: 32 OVC situation analyses have been conducted throughout the nation. A national-level decision was made to open social centers as the official coordinating platform for social services. At these social centers, social workers chair meetings attended by NGOs and the community. Counselors coordinate activities and work to avoid duplication of services. Community care groups identify children in need and make referrals. There is a legal cell within centers that brings together police, judges, and medical aid for children who have been abused or exploited. It acts as a referral system to support children and families who have court cases. These legal cells can be considered a promising practice. Cote d’Ivoire has established a clearly-defined minimum package of services and standards of services, updated national M&E tools, and launched a national quality improvement initiative. NGOs are required to coordinate through the ministry.

Prof. Odoul: In Kenya, there are clear definitions, recognition and respect for roles and functions of professional and para-professional social workers. There are a national association of social workers and other professional networks.

Ms. Omari: Tanzania has made efforts to strengthen monitoring and evaluation capacity at the national level, to provide professional training, and address other social welfare workforce challenges. The country has
established a forum for facilitating partnerships, sharing of experiences, and advocacy. The Twinning Project partnerships with Ethiopia support efforts to share information and experiences regionally. Academicians conduct studies and have formed a network of researchers.

**Questions & Answers from Conference Participants:**

*In Tanzania, who becomes responsible when there is a shortage of qualified social workers? Who supervises para-professionals?*

Social welfare supervisors are drawn from those social workers who have more experience and education, such as a bachelor degree or advanced diploma. Most are working at the district and regional level. Since para-social workers are required to refer cases, the social workers meet with para-social workers on a regular basis.

*Legal cells were documented as a best practice in Côte d’Ivoire. Can we hear more about these?*

Every social center has made a commitment to host these multi-sectoral coordination platforms. The cell is comprised of a judge, representative from the police, traditional chiefs, community leaders, youth groups, etc. Clients can be referred to the cell or social center for accompaniment, help with a court case, etc. It is not a permanent structure, but rather convenes and provides referrals when needed.
4.3 DAY THREE

4.3.1 PLENARY CASE STUDY: TRAINING SOCIAL WORK PARA-PROFESSIONALS AND LINKING TO ADDIS ABABA UNIVERSITY: LESSONS LEARNED

Speakers:
- Kidest Hailu, Country Director, American International Health Alliance - Twinning Center
- HaileMichael Tesfahun, Instructor, School of Social Work, Addis Ababa University, Ethiopia

In an effort to illustrate one promising practice for developing the social welfare workforce, Mr. Hailu and Mr. Tesfahun described para-social work training in Ethiopia. In 2004 the American International Health Alliance (AIHA) and the US Health Resources and Services Administration (HRSA) launched the HIV/AIDS Twinning Center to support the US President’s Emergency Plan for AIDS Relief (PEPFAR). The primary objective of the initiative is to build capacity of institutions through peer-to-peer partnerships that link health and allied professionals. This approach to partnerships promotes collaborative development of work plans and joint investment and ownership. The program is based on the principle that arming caregivers with the knowledge and practical skills they need will result in better care to orphans and vulnerable children. Para-social workers often bridge gaps and address needs not otherwise being met. From 2004 to 2010, AIHA has helped establish 30 North-South and 9 South-South institutional twinning partnerships in 11 countries in Africa and Eurasia.

In Ethiopia, there are several ongoing partnerships between different institutions. This presentation focused on the partnership between Addis Ababa University School of Social Work and the Jane Addams College of Social Work and Midwest AIDS Training and Education Center at the University of Illinois at Chicago. Through this partnership, over the past three years, Ethiopian partners have trained 49 Para-Social Workers, 64 Para-Social Worker Supervisors and 85 Master Trainers (MSW and PhD students).

The Institute of Social Work in Tanzania forms the third partner in this Twinning partnership. The partnership has two objectives: 1) to improve the capacity of the partner institutions to deliver pre-service quality social work education; and 2) to design and implement programs for MSW social workers (field instructor & alumni) to train and supervise psychosocial case managers at the grass root level about HIV/AIDS information and linkages to care and support.

Achievements included: the implementation of a national psychosocial care needs assessment related to HIV care giving support in seven regions in Ethiopia; the strengthening of hospital social work units in four national hospitals in Ethiopia to deliver quality in-service social services; the establishment of teaching exchanges; and the development of an MSW program at the Institute of Social Work in Tanzania. Through this project, partners participate in peer-to-peer exchanges of information and skills-based training that help institutions make the best use of limited financial, material, and human resources. Partnerships help reduce duplication of effort by facilitating the dissemination of best practices. They pave the way for rapid scale up of much-needed programs and services. Decision-making among partners is collaborative, not top-down, so the plans developed have a sense of joint ownership. Capacity will remain even once Twinning Center funding is exhausted.

Questions & Answers from Conference Participants:
*How do you get “twinning?” What is the process?*
Countries interested in “twinning” must first allocate funding for the AIHA Twinning Center project. Then the project can help to match new or struggling training institutions with stronger institutions. In Ethiopia, the Ministry of Health is very active in the process of selecting training institutions, identifying the types of partnerships required, and matching training institutions.
What is Twinning between African schools like?
It is much easier to do South-South partnership and there is less risk that project staff will emigrate to the United States. The Twinning Center is currently promoting more South-South partnerships. Jane Adams College of Social Work was invited to partner with Addis Ababa University School of Social Work in 2001. Shortly after that, the Twinning Center recognized the value of inviting stakeholders engaged in Tanzanian para-social work training to form a South-South partnership with Addis Ababa University. Jane Adams continued to assist both schools and facilitate the three-way partnership. All schools developed work plans together and the para-social work model developed in Tanzania was adapted for the Ethiopian context.

4.3.2 CONCURRENT INTERACTIVE WORKSHOPS – SET 3

SESSIONS ON PLANNING THE WORKFORCE

Session 13  Workforce realignment and task shifting through decentralization of social welfare responsibilities
Moderator: Brigette DeLay, Child Protection Specialist, UNICEF West Africa
Speakers:
- Abner Dlamini, Director, Department of Social Welfare, Swaziland
- Maria Francisca Lucas, Deputy Director, Child Health Department, Ministry of Women and Social Welfare, Mozambique

Key questions:
- How does the process of decentralizing social welfare responsibilities to regional and local levels enable more efficient use of human resources?
- How are tasks allocated among central and local level social welfare workers?
- How can systems of communication, coordination and accountability among central and local level actors within the social welfare workforce be made more effective?

Presentation by Abner Dlamini: Decentralizing the Social Welfare Workforce structure in Swaziland
Mr. Dlamini explained the country context and statistics relevant to the OVC populations in Swaziland. He then reviewed the Department of Social Welfare (DSW) mandate, roles and organizational structure. He explained that the primary objectives for decentralization included: improved access to services, tangible results for children and families, and improved identification, referrals and follow-up of cases of children and families in need of social welfare services. The decentralization plan includes staffing at many levels as well as community-level child welfare committees. As part of the Human Resources Development plan, there are pre-service and in-service training programs under development by the University of Swaziland, with support from Regional Psychosocial Support Initiative (REPSSI), the African Centre for Childhood, and the University of KwaZulu Natal. The plan has faced many challenges, including shortage of trained staff, policy changes, and weak monitoring and evaluation and management information systems. The decentralization model will be piloted in one of the 55 inkundlas (districts) with UNICEF support. Experiences and results will be documented and used to inform roll out of the decentralization plan.

Presentation by Maria Francisca Lucas: Creating partnerships between provincial and national governments to strengthen coordination and improve direct services
Ms. Francisca Lucas addressed the topic of strengthening the link between provincial and national government and between civil society and the government to improve service delivery. She explained that gaps in service delivery are due to staffing shortages, low technical competency of social workers, and lack of financial resources. There are also structural impediments, particularly around gathering and monitoring data.
Provincial level working groups are the major actors responsible for implementing the National Plan of Action for OVC. These groups were formed to help strengthen the national program to support the OVC population, including creating stronger linkages between civil society and the government. They play a key role in coordinating stakeholders and encouraging broad participation. These groups have found that improved civil society and government coordination, better flow of information, and consensus between different actors ultimately improves direct service delivery for target populations.

Questions & Answers and Conference Participants:
The Plan shows social workers at the different levels – are they all deployed and employed by the national ministry or are some employed at the local level?
Social workers for government are employed at the national and regional level. At the lower level, such as village and community, social workers tend to be employed by other partners, such as NGOs.

Of the 50 Social workers, only seven have professional backgrounds. What is your immediate plan to address this?
We are currently working with the Embassy of Swaziland and UNICEF to develop a certificate-level training program and offer both the certificate and diploma-level courses through distance learning. We are also continuing to develop our partnership with the University of KwaZulu Natal.

How do we link all levels of the social welfare system and workforce, from the community level to the national level, in a formalized way?
With heavy staffing shortages we have had to substitute professionals with volunteers. This week we need to define what we want from a volunteer with reference to incentives since they are often full-time workers.

Why did Swaziland decide to shift the DSW from the MOH to the Office of the Deputy Prime Minister?
The main reason was to elevate the important issue of social welfare so that it would be easy for the Deputy Prime Minister to make a case for it.

Comment: Decentralization in Africa is sometimes problematic because often decentralization of authority is not accompanied by decentralization of resources. There is a need to advocate for the general council to use decentralized funds in an efficient manner.

Session 14 Building alliances to strengthen leadership and collaboration among stakeholders
Moderator: Ben Isquith, Technical Advisor, HIV/AIDS, USAID
Speakers:
- George Mkamanga, Director of Community Development, Ministry of Gender, Children and Community Development, Malawi
- Hellen Macha, Assistant Director, Prime Minister’s Office, Regional Administration and Local Government, Tanzania
- Baryayebwa Herbert, Acting Director Social Protection, Ministry of Gender, Labour and Social Development, Uganda

Key questions:
- What are effective mechanisms for mobilizing and coordinating actors from different sectors within the social welfare workforce - including the health, education, justice and the private sectors?
- How can we better engage these actors in efforts to strengthen the social welfare workforce and social welfare system?
Presentation by **George Mkamanga**: *Building Ministry Human Resource Capacity through Organizational Development: The Malawi Experience*

Mr. Mkamanga described a number of organizational development initiatives within the Ministry of Gender, Children and Community Development (MGCCD), including functional reviews (1997, 2005) and strategic plans adapted in 2005. In addition, an HR gap analysis was carried out in 2008 and in 2009. The ministry developed clearer job descriptions and a staff training strategy. In 2010, the ministry began the process of upgrading Magomero Training College to offer diploma and degree programs in social work. The organizational development strategy has included organizational culture change management, staff development and training, partnerships, strategic leadership and performance monitoring. Challenges include: ownership and commitment at the leadership level, slow pace and consistency of implementation, resource needs, different conceptualizations of social work, change management capabilities, and linkages with other stakeholders. Through this process they have learned that organizational development can be a slow process that requires visible top leadership commitment and inclusive approaches. Nothing moves until there is internal drive, ownership, teamwork and commitment, especially at the leadership level.

Presentation by **Hellen Macha**: *Enhancing the ability of District and Regional Social Welfare Officers to address HIV and OVC issues and supervise other social work cadres*

Hellen Macha began by describing the role of the central government including the Prime Minister’s Office Regional Administration and Local Government (PMO-RALG), which has responsibility for policy formulation, facilitation and coordination. She explained that the LGAs do the actual implementation as they operate at the community level. Prior to the decentralization process, Social Welfare Officers (SWOs) were concentrated at the central government level. There are now 114 District SWOs in 133 LGAs and there were provisions to employ 431 SWOs in 2010. At the ward level, there are community development officers and future plans to hire welfare assistants. At the village level, they have trained 2,408 (PSWs) and at least 4,000 village-level volunteers. To support the social welfare workforce, they have developed policies to support the decentralization of roles and functions of the Social Welfare Department to LGAs, reviewed and developed structures to allow SWOs at regional levels to supervise and coordinate the work at the LGA level, and strengthened the ability at the ward level to supervise PSWs. In addition, they have supported the creation of most vulnerable children committees (MVCCs) at the village, ward, district/municipal/city levels. Challenges include: too few accredited social welfare training institutions, lack of retention strategies for staff employed by LGAs, confusion about the difference between SWOs and Community Development Officers and not enough weight being given to social welfare activities. Ms. Macha proposed hiring and retaining more SWOs, recruiting more volunteers to implement social welfare activities at the community level, and enhancing collaboration amongst partners.

Presentation by **Baryayebwa Herbert**: *Determining the role of local government in efforts to carry out and share the results of social welfare workforce assessment at the zonal level*

The social welfare workforce in Uganda includes public sector workers at the national and local government levels within the Social Development Sector. The Central Ministry of Gender, Labour and Social Development (MGLSD) outlines the government agenda for addressing social welfare workforce concerns in the Social Development Sector Investment Plan. The Ministry is also responsible for building the capacity of the social welfare workforce through Planning, Management and Human Resource Development. The MGLSD conducted a capacity needs assessment to determine MGLSD and district needs in terms of leadership, management, coordination and M&E for the OVC response. The assessment identified low staffing levels, low motivation, inadequate and intermittent induction of newly recruited staff, irregularities in performance appraisals, insufficient supervision and limited human resource development programs at both national and local government levels. There was also limited funding for management information systems, computers and internet. Therefore, they contracted Technical Services Organizations (TSOs), civil society or private sector organizations, to provide technical backstopping to districts on behalf of MGLSD. The TSOs assisted districts to carry out mapping, create strategic plans, establish multi-sectoral coordination committees at the district and
lower local government levels and carry out capacity building for staff. As a result, the social welfare workforce at the local government level is familiar with policies, strategies, systems, standards, guidelines and tools. All 80 districts have developed OVC strategic plans that have been integrated in the respective district development plans. TSOs have helped establish data systems and strengthened public and private partnerships and coordination. Central level social welfare workers have more time to concentrate on their statutory functions, including the development of policies, guidelines, standards and mobilization of resources. Next steps include strengthening partnerships between training institutions and the social welfare sector and developing curriculum which is tailored to the needs of the sector. In addition, there is need to revitalize the national association of social workers.

Questions & Answers and Conference Participants:
What has been done to encourage education and health ministries to integrate the cost of OVC support within their budgets as part of an integrated inter-ministry effort?
In Uganda, the Ministry of Development leads coordination efforts and all relevant ministries are encouraged to find ways to address OVC issues within their work plans. In Tanzania, multiple ministries of health and social welfare, community development, ministry of gender and education engage in a range of coordination activities; (Prime Minister’s Office – Regional Administration and Local Government) PMO-RALG also has coordination responsibilities. The Permanent Secretaries of the various ministries address issues of duplication.

Who tracks what OVC activities are implemented by which ministries or private groups?
In Tanzania, Local Government Authorities (LGAs) are the local implementers. PMO-RALG coordinates ministry activities. Coordination also occurs through a Division of Sector Coordination. In Uganda, the Ministry of Gender, Labour and Social Development takes on a coordination function and the Social Protection Committee brings together other ministries and civil society stakeholders to coordinate with each other in an effort to avoid duplication of effort.

SESSIONS ON DEVELOPING THE WORKFORCE

Session 15 Reviewing curricula and incorporating indigenous/local knowledge as well as international best practices on improving the well-being of children and families
Moderator: Linda Sussman, US Government Deputy Special Advisor for Orphans and Vulnerable Children
Speakers:
- Pierson R.T. Ntata, Senior Lecturer, Chancellor College, University of Malawi
- Nathalie Bogui Konan, Executive Director, National Agency for Rural Development, Côte d’Ivoire
Key questions:
- How can we ensure that curricula are appropriate to the African context and make use of African approaches to caring for vulnerable children and families?
- How can we ensure that curricula reflect new innovations in the field of social work practice?

Presentation by Pierson R.T. Ntata: Conducting curricula reviews and developing new curricula to address gaps in the social welfare workforce at the Public College of Social Work
Pierson Ntata presented work currently being done in Malawi to develop curriculum for frontline social workers. Currently, Magomero College is the only college in Malawi that offers basic and upgrading courses for frontline staff in social work and community development. It is operated by the Ministry of Gender, Children and Community Development (MGCCD), which has the mandate to oversee and coordinate services for vulnerable groups. In 2008, a human resource capacity assessment identified various gaps within the Magomero College training programs. In particular, the assessment found that the certificate course offered does not qualify its graduates for higher level government positions. As a result, the assessment offered a
The curriculum content was inconsistent with indigenous knowledge systems... One of the challenges has been to identify core competencies that are relevant to the local context and at the same time enable the school to be internationally comparable and competitive.

- Dr. Pierson R.T. Ntata, University of Malawi

series of recommendations to improve curricula, staffing, physical infrastructure, teaching and learning resources, funding and resource allocation. This presentation focused on the section of the review which focused on the curriculum. It found that the curriculum was based on an outdated framework and no differentiation between core and foundation courses. The curriculum content was inconsistent with indigenous knowledge systems. The College is now undergoing a detailed, consultative curriculum development process and will develop curriculum for generic social work training as well as three-year diploma and four-year degree programs in social work. The College will also shift to a semester calendar and modular courses consisting of foundation, core and elective courses. One challenge has been to identify core competencies that are relevant to the local context and at the same time will enable the school to be internationally respected and competitive. For example, communities have their own definitions of vulnerability and several issues specific to communities in Malawi, such as the issue of witchcraft and its impact on vulnerability, might not be a concern elsewhere and therefore are not addressed in standard definitions presented in international social work curricula. Likewise, communities do not always accept the international definitions of child abuse and child rights. In Malawi, if a child is not properly trained by parents, more stringent techniques are often used to overcome perceived deficits. This is considered as essential to a child’s development rather than abuse. Communities in Malawi might consider failure to correct a child’s inappropriate behavior to be child neglect. Dr. Ntata suggested that further anthropological research is needed to accurately reflect community based concepts of child protection and protection efforts within social work curriculum.

Presentation by Nathalie Bogui Konan: Incorporating best practices and local and indigenous knowledge into social welfare workforce training

Nathalie Konan began by providing a context for the social welfare workforce and OVC in Côte d’Ivoire. The National Program for OVC Care and Support (PNOEV) falls under the lead of the ministry in charge of social affairs (MFFAS). Many of the child welfare services are coordinated out of social centers, which are MFFAS decentralized structures with the mandate to address key social issues. Assessments of social centers and their impact on the welfare of OVC indicated a lack of capacity among service providers and a lack of synergy among public, private and community actors. Social workers and informal education staff receive good training at National Institute for Training Social Workers (INFS) and National Institute for Sport and Youth Training (INJS). These are national professional training schools for social workers and early childhood educators, informal women’s training educators and special educators who work in social centers, schools, youth centers, private sector organizations and health centers. However, the curricula for courses provided at INFS and INJS did not teach how to work with community groups and support them to become key actors within OVC service delivery. Côte d’Ivoire is now making efforts to engage both formal and non-formal structures in efforts to protect and support children. In addition, MOH and MFFAS are now considering how to budget minimal pay for community or “lay” counselors. In many cases, individual motivation has been sufficient to engage informal structures. The government is now planning to reinforce coordination at the district level, organize community support groups, and form legal units in an effort to engage the right actors to address specific needs beyond the scope of work for social workers. MOH, MFFAS, Ministry of Finance and the Ministry of HIV/AIDS received cabinet approval of minimum competencies for lay counselors. This is a big step towards recognizing counselors as “para-professionals” and sourcing funding to support coordinate with official social centers. The quality of services has improved and there is better synergy and collaboration between the social centers and local leaders, CBO/NGOs, faith-based groups, mayors or other local government.
Questions & Answers and Conference Participants:

Comments: Community based initiatives are important but there is concern that community-based initiatives do not always coordinate with other more formal programs. In addition, there are concerns that the proliferation of community-based initiatives may lead to the “deprofessionalization” of social work. The key is to maintain a distinction between para- and professional social workers to ensure credibility.

- There is a need to broaden the concept of social welfare to include development. The concept of “social welfare” assumes communities do not have the capacity to respond to their own needs. In reality, communities care for vulnerable children in their own way. Curricula for professional social workers should recognize and include community responses.

- Research and practice must occur simultaneously. Sometimes there is very little documentation or data to inform practice because the history of a country has not been well-documented. However, there are people within a country or community who can share this history as well as unwritten cultural codes. Encouraging students to carry out research and creating student publications might be one way to incorporate indigenous knowledge and practice within social work curricula. Additionally class discussions are also important to elucidate cultural issues below the surface.

- There is a need to organize another workshop to focus specifically on curricula so that greater detail can be offered on “how to” develop culturally appropriate curricula. This session was more of a philosophical agreement that incorporating indigenous practices are important. Next we must provide specific curricula development guidance.

- Papers should be written, collected, and disseminated on models of indigenous curricula. These could be published as a special journal edition by an African Association in collaboration with NASW and serve as the focus of a future workshop.

Session 16 Providing professional development opportunities for social welfare staff through in-service training and distance learning
Moderator: Kirk Felsman, USAID Southern Africa
Speakers:

- Lynette Mudekunye, Deputy Executive Director, Regional Psychosocial Support Initiative (REPSSI), South Africa
- Daniel Trah Dibi, Program Coordinator, National Institute for Training Social Workers, Côte d’Ivoire

Key questions:

- How can social work education and training programs cater to students who are unable to attend courses full time or to access courses due to location?
- How can programs recognize and build on knowledge and skills acquired on the job?
Presentation by Lynette Mudekunye: Delivering a certificate program in community-based work with children and youth by supported distance learning
Ms. Mudekunye presented information on the Regional Psychosocial Support Initiative (REPSSI) distance learning program. She noted that distance learning allows us to meet the needs of the workforce by providing a relevant, up-to-date formal qualification without leaving home or stopping work. REPSSI’s distance learning course includes six modules: 1) Management and Professional Development; 2) Human Rights and Child Protection; 3) Child and Youth Development; 4) Care and Support of Children; 5) Integrated Development in Communities; and 6) Service Learning Project. The process is based on facilitated discussions in mentor groups of 15 to 20 students that meet for one day every three weeks (or four sessions per each module). Many groups meet more than just the requisite amount. This is evidence of the value of having a community of practice. A mentor helps focus students on key issues and provides support and feedback to students. At present the program is operating in ten countries in Eastern and Southern Africa. In five countries, accredited schools of social work have been directly involved in training delivery. The program has demonstrated that it is possible to develop the capabilities of community child and youth caregivers through situated distance learning. Success is due to good collaboration among various agencies in the field, well-designed course materials, mentor support, and regular assessments. Logistics can be a challenge, especially when students are located in hard-to-reach villages. However the program has adapted to ensure this is not a major issue. Students’ commitment to the program is admirable. In Zambia, for example, one student traveled 80 kilometers on bike and canoe to attend a training session. The content will continue to be further expanded and will include three additional REPSSI tools: Tree of Life, Kids Clubs, and Journey of Life. REPSSI aims to expand the program into additional countries such as Mozambique.

Presentation by Daniel Trah Dibi: Development of a strategy to strengthen social centers through training
Daniel Trah Dibi described pre-service and in-service training offered to social welfare workers in Côte d’Ivoire. There are two primary formal training institutes. The National Institute for Training Social Workers (INFS) supports special education workers, early childhood educators and social workers who may be employed by social centers, schools, health centers, justice ministry or the private sector. The National Institute for Sport and Youth Training (INJS) supports vocational and life skills trainers and counselors who may be placed in women’s training and education centers, ministry of youth counseling centers, mayor’s youth-cultural offices, or serve as community extension agents. After validating training modules with the leadership of PNOEV, INFS and INJS, a national pool of OVC care and support trainers was established to lead in-service and pre-service training initiatives. PEPFAR funded a program to graduate 50 social workers per year. Funding remains an issue: Although the World Bank and the Global Fund have provided some financial support, the Ministry has provided little. From 2007 to 2010, almost 4,000 students received pre-service training and over 2,000 received in-service training. Going forward, INFS would like to retain a link with social worker graduates to learn how training is being used and the experience of social workers employed in different types of structures and ministry programs.

Questions & Answers from Conference Participants:
To what extent is the REPSSI curriculum adapted to different country contexts?
The curriculum is standard. One advantage of a regional program is that we do not have to reinvent wheel. However, mentors are local and can adapt training to local contexts. Learning must be based on local experience. In the first cycle, REPSSI found that the material and curriculum was relevant but there is still room for ongoing refinement. For example, module two relates to human rights and this requires mentors to introduce students to local country laws.

How are students funded?
Most students are sponsored by REPSSI, though in some countries other organizations have funded students. For example, UNICEF sponsored students in Swaziland, the government sponsored students in Malawi, and the
Red Cross supported students in Zimbabwe. REPSSI recommends that NGOs consider funding students in order to localize training.

**Does the REPSSI program use information technology?**

At this point, REPSSI does not make use of information technology. Many students do not have electricity. Students send in assignments by courier. In the five countries where REPSSI works with academic institutions, students travel to the institutions to meet with tutors in person. The institutions are located in larger city centers, where they might be able to make use of information technology. The current system for collecting assignments does create challenges especially with regards to the timeliness of feedback. In addition, many assignments are handwritten. If an assignment is lost en route, often there are no copies and the assignment must be rewritten.

**Have organizations thought about mapping who has been trained? In Haiti there are many, many actors engaged in child protection activities. Mapping cadres of personnel for government and NGOs may help to determine gaps?**

Gaps are considered when students are selected. Those trained receive a certificate. Many NGOs report this list to Ministries of Health, who maintain a database of health and social workers. However, this database is only useful if continually updated. This is an ongoing challenge.

**Do individuals find it valuable for their career to be certified? Are certified students better able to earn promotion, receive more pay, etc.?**

Once students complete the REPSSI training, they are eligible to apply to serve as mentors – which could result in additional income. In Côte d’Ivoire, students are certified at the end of their training. The National Training institute allows a person to formalize their skill levels but there are no official benefits from the training in terms of career development.

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### SESSIONS ON SUPPORTING THE WORKFORCE

**Session 17 Understanding the role of professional associations – establishing codes of ethics, standards of practice, credentialing and continuing education**

**Moderator:** Amy Bess, Sr. Practice Associate, National Association of Social Workers, US

**Speakers:**
- Kgomotso Jomo Jongman, President, Botswana Social Workers Association
- Dr. Pius Mutuku Mutie, Kenya National Association of Social Workers and Senior Lecturer, University of Nairobi
- Charles Mbugua, President, Africa Region, International Federation of Social Workers

**Key questions:**
- What are the primary functions of professional associations for social workers?
- What is the benefit of forming or joining a professional association?

**Presentation by Kgomotso Jomo Jongman: Challenges faced setting up the Botswana Social Workers’ Association: Implications for social work practice**

Mr. Jomo Jongman described the profession of social work in Botswana and the development of the Botswana Social Workers’ Association (BOSWA). He explained that social work is a relatively new profession in Botswana; the University of Botswana has offered a Certificate in Social Welfare and Community Development since 1985. The challenges facing the profession include: a lack of recognition of professional skills, role ambiguity, poor supervision, and minimum criteria for entry into university courses (which has attracted students who have chosen social work as a last resort when they did not qualify for other courses). This final point gives the impression that social workers are unqualified and not valuable. Some certified social workers
do not want to be associated with the profession. Additional challenges facing the Association in particular include minimal funding and limited membership (only 250 out of an approximate 2,000 social workers in the country have paid the annual membership dues of 18USD to join the association). BOSWA will continue to advocate for the social work profession. The Association will be re-launched on March 26, 2011.

Presentation by Dr. Pius Mutuku Mutie: Kenya National Association of Social Workers: Child focused interventions in Kenya-- prospects and retrospectives
Dr. Mutie discussed the challenges facing the Kenya National Association of Social Workers (KNASW) as they strive to support social workers. He explained that there are no laws that regulate the practice of social work and many children’s officers are not trained in social work. This increases the risk of potential harm inflicted by untrained workers. There is not enough recognition for the profession by government and NGOs. A lack of coordination between NGOs and government leads to unclear mandates and referral challenges. There is a need for KNASW to re-launch and become revitalized. KNASW can play a role in promoting better coordination between social workers, the government, and development partners. KNASW can also help to advocate for an increase in budget allocations for children’s affairs and champion children’s rights. They can also offer research and training and help to provide professional development to members.

Presentation by Charles Mbugua: The role of the International Federation of Social Workers
Charles Mbugua provided an overview of IFSW and described ways that they support national associations. IFSW was formed in 1928 and is a global federation of national unions and associations of social workers. IFSW is organized into five regions and has 90 country-level members (one association per country is a member), which in turn have a total of 745,000 individual members. In Africa, 23 countries have national-level associations that are members of IFSW. The role of IFSW is to: accredit national associations; set conditions for accreditation, education and training; provide a global code of ethics; support adoption of the IFSW General Code; operate the Regional Development Fund; coordinate regional and global conferences; facilitate networking and coordination within and amongst regions; and produce policy and position papers on key topics. Their website is www.ifsw.org.

Questions and Answers from Conference Participants
How can we use the network from IFSW and other national professional social work associations to pair up needs in countries and provide assistance to one another?
IFSW may be able to connect countries that are in the process of forming or strengthening social work associations with other countries that are interested and have the resources to participate in country-to-country exchanges. Regional support networks could be very useful.

How can mapping the social welfare workforce support the development of associations?
If social work associations are apprised of the outcome of mapping efforts (or asked to conduct them), inviting the association to play a role in the next steps of social welfare systems strengthening would be a way to support their development. It would also be helpful when conducting membership recruitment and developing continuing education programs based on workforce needs.
Session 18 Mobilizing community support for the social welfare workforce
Moderator: Nankali Maksud, UNICEF Southern and Eastern Africa
Speakers:
- Megan Briede, Program Coordinator, Child Welfare South Africa
- Serena Williams, Program Coordinator, CHF International Rwanda
- Lameck Kanyuka, Ministry of Community Development and Social Services, Zambia

Key questions:
- How do community members and civil society organizations support the social welfare workforce?
- What support structures and mechanisms are necessary to facilitate community support for vulnerable children and recruit community members to the social welfare workforce?

Presentation by Megan Briede: Community Empowerment as a tool to strengthening the social welfare workforce
Ms. Briede highlighted the work of Child Welfare South Africa, the umbrella development, capacity building and coordinating body for 160 member organizations, 38 developing child welfare organizations and 38 community outreach projects; and South Africa’s largest NGO working on child protection issues. Asibavikele (Let’s Protect Them) is a nationally-driven program that facilitates community-based care and support to orphans and vulnerable children in disadvantaged communities. South Africa has 14,072 social workers and 2,065 social auxiliary workers. However, the personnel needed to implement the new Children’s Act has been estimated at 16,504 social workers and 14,648 social auxiliary workers. Ms. Briede reported that in remote areas, social workers are regularly required to manage between 200-500 cases. In other remote areas there are no social workers at all. The goal of the Asibavikele program is to strengthen the capacity of community-based structures to provide social services to reduce the burden on social workers. In order to support Asibavikele’s 1,699 community volunteers, the program provides professionally developed training materials, organizes training events and workshops, provides individual mentoring and bi-weekly group mentoring sessions, individual counseling for volunteers, and career development opportunities. These support programs enable volunteer staff to offer critical child welfare services, such as: facilitation of alternative care; referrals to appropriate community resources (health clinics, legal services, food aid etc.); assistance to apply for social grants and school fee exemptions; psychosocial support, including memory work and storytelling; and support to develop long term care plans for children and living wills. While they have a standardized approach to service provision, they elicit extensive community input to tailor services to the local context. The program has inspired several related projects such as food gardening tunnels (which provide food and income for families), peer education, and programs to empower girls.

Presentation by Serena Williams: Extending the reach of Rwandan civil society organizations through community volunteers
Ms. Williams described challenges faced by OVC in Rwanda. Many young people in their late teens have lost parents due to genocide and many more have lost parents due to AIDS (Rwanda has a 13% prevalence rate). The public social welfare workforce is limited in Rwanda. Social services are provided by private organizations and NGOs, such as the CHF program. Under this program, “Abahuza” – community psychosocial workers – help children and families cope with grief, loss and stress due to HIV. The volunteers are members of the communities that they serve (teachers, farmers, nurses and others) and many are HIV positive. They currently support 24,000 families. They are trained in the “Helpful Active Listening” technique and in family counseling, with a focus on trauma, grief, loss, and action planning. By October 2014 (the end of the grant period), the project aims to train 2,970 community psychosocial workers in 20 districts. The project has retained 60% of their volunteers since 2005.

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Presentation by Lameck Kanyuka: Task sharing through Community Welfare Assistance Committees

Mr. Kanyuka described services provided by the Ministry of Community Development and Social Services and the role of Ministry staff. The social welfare workforce within the Ministry is comprised of nine provincial SWOs, 30 district social welfare officers, community development assistants, and District Welfare Assistance and Area Coordinating Committees. He further explained the role of the Community Welfare Assistance and Area Coordinating Committees (CWACs), which are unpaid, volunteer structures. According to Mr. Kanyuka, CWACs collaborate with other community structures, ensure compliance with Ministry regulations, assist with cash transfers, and report to the District Social Welfare Office. By task shifting certain social welfare functions to CWACs, the Ministry has enhanced human resource capacity. Because they engage directly with beneficiary households, CWACs put a face on Ministry programs and contribute to sustainability. The Ministry plans to continue to lobby for increased staff and increased funding for social welfare in the national budget; continue to strengthen CWACs, and continue to engage other community structures and Ministries in social welfare efforts.

Questions & Answers from Conference Participants:

Many of these programs are rely heavily on volunteers. How do you sustain volunteers?

In Rwanda, it is not an ideal situation. It is a temporary measure. There needs to be implementation of policies to address these issues. The Ministry of Social Welfare in Rwanda is small and stretched. The University of Rwanda currently offers a BA of Social Work and there are plans to offer a master’s degree in Social Work. Beyond this, social welfare workforce strengthening efforts are limited. CHF is trying to strengthen the workforce from the ground up as well as work with the national government. Currently volunteers are motivated by their desire to help their neighbors.

In South Africa, volunteerism is essential to most social service programs. Yet often volunteers are not sufficiently trained to work with children. Because the Child Welfare program has a large pool of volunteers, the program is able to identify “gems,” foster their leadership and career growth, and encourage them to take on more challenging positions.

In Zambia, volunteers are often teachers who are already working in the community. They receive stipends.

How does Child Welfare South Africa work with Department of Social Development?

All of our work is subsidized by government and, because of this we frequently interact. We report to government and coordinate with government at all levels.
4.4 DAY FOUR

4.4.1 PLENARY CASE STUDY: REVITALIZING A NATIONAL ASSOCIATION OF SOCIAL WORKERS AND LOCAL SOCIAL WORK NETWORKS

Speaker: Dr. Leonard Mbilinyi, President, Tanzania Social Work Association

In an effort to illustrate one promising practice for supporting the social welfare workforce, Dr. Mbilinyi identified the ways in which social work associations support, educate, and provide resources for social welfare professionals. Using The Tanzanian Social Work Association (TASWA) as an example, he explained that the mission of the association is to support the social work profession to enhance well-being and promote social and economic justice. The association’s roles are to: 1) advocate for the social work profession, 2) promote social work values and ethics, and 3) promote social justice and rights-based policies and practices. Dr. Mbilinyi discussed the process of revitalizing TASWA and developing a strategic plan in partnership with the Twinning Center project and the National Association of Social Workers-US. The goals of this revitalization process are to strengthen the organizational capacity of TASWA and to unite, promote, and regulate social work activities to address HIV/AIDS and other pertinent social work practice issues. Finally, he shared lessons learned, noting that to be effective, associations must maintain administrative independence and membership must include all levels of those in the profession. They must also develop professional management practices and have a strategic plan.

Questions and Answers from Conference Participants

How many members are trained social workers?
We are just putting together a database to determine this and help us track our membership.

Could organizers look at way to exchange information from our journals? It is a wonderful way to access and exchange indigenous ideas?
That is a great idea. We encourage exchange of ideas with other countries. Recently five colleges and universities in Tanzania met and we are forming an editorial board for a new social work journal. We would welcome and encourage other colleges to join us.

Comment: It is important that TASWA is stressing the importance of performing an organizational diagnostic, identifying and addressing weaknesses, sharing with other countries to learn from them, and actively looking for opportunities to strengthen the association.

4.4.2 PANEL PRESENTATION: CREATING SOCIAL WELFARE WORKFORCE CHAMPIONS, FOSTERING ADVOCACY AND MOBILIZING SUPPORT FOR WORKFORCE PLANS

Moderator: Patricia Lim Ah Ken, UNICEF, US

Speakers:
- Dr. Djeneba Coulibaly-Traore, HIV Care and Treatment Deputy Branch Chief, US Center for Disease Control, Côte d’ Ivoire
- Jeanne Ndyetabura, Assistant Commissioner, Ministry of Health and Social Welfare, Department of Social Welfare, Tanzania

Key question
- Who has the power to move forward the Social welfare Workforce agenda and how do we engage them?
Presentation by Dr. Djeneba Coulibaly-Traore: Engaging high-level actors and identifying social welfare workforce champions in order to operationalize plans for strengthening the workforce

Dr. Djeneba Coulibaly-Traore explained that in 1998, international and national experts created a task force named Cellule de Reflexion sur les Orphelins du SIDA (CEROS), which mobilized policy action and leadership to address challenges experienced by HIV-affected children and families. CEROS met regularly and advocated for prioritization of the needs of children accessing HIV care services and creation of a national OVC plan, policy and coordination program (PNOEV) within the ministry in charge of social affairs (MFFAS). CEROS held its first workshop in 2000. To demonstrate the importance of engaging champions in advocacy, Dr. Coulibaly-Traore listed findings drawn from 32 OVC situation analyses (carried out between 2007-2010) that showed complex challenges requiring multi-sectoral interventions involving different ministries and civil society groups. These same studies also found that the quality of service delivery to OVC populations and their families varied significantly and was poorly coordinated at many sites. She stressed that advocates are critical to successful implementation and sustainability over the long term and that engagement at the highest levels of the Ministry is possible and necessary. For example, in Côte d’Ivoire, the Minister has been involved in key events and meetings and recognized CEROS as a formal group.

Dr. Coulibaly-Traore outlined several strategies to engage champions such as promoting involvement of decentralized leadership through public events and discussion, and involving them in planning, support and funding. She also emphasized the importance of actively planning and funding participation of child and youth peer advocates at national events and policy workshops. Strategies also require donor collaboration. Commitment of champions can help move an agenda forward. Lessons learned highlighted the importance of Ministry leadership and identifying a core group of diverse leaders to serve as advocates.

Presentation by Jeanne Ndyetabura: Facilitating intra-ministerial dialogue to generate the political will, legislative framework, and resource allocation necessary to strengthen and support the social welfare workforce

Ms. Ndyetabura spoke about facilitating dialogue to generate political will and outlined the mandate of the Department of Social Welfare (DSW). The role and responsibilities of DSW are outlined in a number of policies and supportive legislation which: 1) ensure effective social welfare services to the vulnerable groups; 2) promote community-based care, support and protection for vulnerable children and other vulnerable groups; 3) promote efficiency in social work practice; and 4) provide services that enhance the well-being and protection of orphans and vulnerable children, the elderly and people with disabilities. The department consists of three functional sections: family and child; elderly; and correctional services. There is also a training division. All of these sections are headed by assistant commissioners. Historically, the DSW has been moved from one department to another and from one ministry to another. It has frequently been ‘delinked’ from the ministry to which it belongs, resulting in inadequate recognition of the department. Even when positioned in a large Ministry with a large budget, the Department receives only a small portion of the needed funds. The implications for the social welfare workforce include a lack of a systematic career development plan and delays in mainstreaming social welfare services into the Local Government Agencies (LGAs) resulting in a shortage of SWOs. In 2009 there was over an 80% SWO vacancy rate. There is also uneven distribution of SWOs at the local government level, which results in heavy workloads and a tendency to assign social welfare roles to non-professional SWOs. In the face of the current situation, social welfare workforce champions are needed to advocate for professional social work recognition.

Tanzanian champions have been able to lobby the government for more resources, by engaging different government departments to work closely to advocate for the social welfare workforce. She emphasized that
reform happens when an open dialogue is maintained with the President’s office, the public sector office and the Ministry of Finance, which determines budget allocations. Another important strategy for leveraging political will and resources is promoting a legal and policy framework, including promoting innovation and initiatives for social welfare workforce development. Actors must be engaged at the district level. An example is the strengthened professionalization of the social work role through clear definitions of their statutory responsibility in civil and criminal legal proceedings to protect most vulnerable populations, for example, through the Law of the Child (2009). Other potential champions include development partners, international organizations, local organizations, social work training institutes, parliamentarians, the community, the private sector, individuals. There is the need for government to foster continued dialogue, to hold consultative meetings, and to create an enabling environment through policies and laws.

Questions and Answers from Conference Participants:

Can you explain how the department interacts with the Ministry of Education in Tanzania?

We have developed an integrative policy where all of the ministries work together.

Can panelists talk a bit more about how to support champions? What data and what arguments are most persuasive to increase resources?

As donors, we tell government we are part of the team and we are here to assist in identifying gaps. It is important to include government at the beginning of the process and get them involved. We let them know when we are doing site visits so they are aware or can take part. We can help with technical assistance and coordinating. As donors we have to come with ideas and not just money. We are pushing for a national program and not just running a project. At the district level, SWOs collect information and send it to a national level. We have an update on the situation of OVCs every month. However, we need to conduct situational analyses of the social welfare workforce. We need to collect the right data to convince the government to see the need for a larger cadre of social welfare workers.

Have you done any work with faith-based organizations? In what way is the faith-based community engaged as champions?

In Tanzania, we work with faith-based organizations. History shows that they were the first champions to support OVC population and vulnerable communities. They are seated within our national coordination committees. They are working at the community level and participate in activities at other levels as well.

In Lesotho we are interested in keeping volunteers. Is Tanzania going to hire para-social workers currently working as volunteers and give them formal recognition?

The Tanzanian government cannot absorb all of our volunteers. Most para-social workers in Tanzania are volunteers. However, some receive support from NGOs. In order to work in government, social welfare assistants must have earned a one year social work certificate. Para-social workers will be prioritized for acceptance within the certificate program. Once para-social workers achieve this certificate, they can be employed as social welfare assistants.
Facilitator: Renee DeMarco, Team Lead, HIV Prevention and Social Services, USAID Ethiopia

Discussants:
- Multi-lateral Donor: Tom Fenn, stood in for Rachel Yates, UNICEF
- Government: Hellen Macha, Assistant Director for Human Resource Management, Prime Minister’s Office – Regional Administration and Local Government, Tanzania
- Bi-lateral donor: Kirk Felsman, Senior OVC Technical Advisor, USAID Southern Africa

Key questions:
- How are the social welfare workforce and efforts to strengthen the workforce financed?
- Who provides funds and what activities do these funds support?

Renee DeMarco introduced panelists and noted that the panel’s topic had been discussed throughout the conference. Participants noted the importance of identifying an entry point and being equipped with the data and costing information in order to convince the Ministry of Finance and other donors to invest in the Social Welfare Workforce and Workforce Strengthening efforts.

Presentation by Tom Fenn: Financing challenges for social welfare workforce strengthening
Mr. Fenn spoke of four main challenges: 1) Getting social welfare and social protection on the stage with HSS and strengthening communities; 2) defining the fiscal space; 3) articulating the costs, results and impact of social work workforce strengthening; and 4) ensuring that HIV/AIDS and health initiatives identify the importance of social welfare. He emphasized the ‘value added’ of social protection systems strengthening, noting overlaps between health systems, the community systems, and the social protection/welfare systems.

He stated that we need to unpack social protection funding and health funding. He pointed out that while funding for social protection and human capital and OVC population have increased in the last four years in some countries, for most it has not.

Mr. Fenn highlighted opportunities for leveraging resources to support of the social welfare sector: 1) making your case with Ministries of Finance, ensuring Social Welfare Ministries get their ‘fair share’ of domestic funds, ensuring expenditure frameworks prioritize social welfare and social work; and 2) seeking the right balance between systems strengthening and service delivery and a balance between public and civil society systems. Mr. Fenn stressed that to make a convincing case for supporting social welfare in the HIV/AIDS agenda we need to be clear about how strengthening the social welfare workforce contributes to HIV/AIDS results. He provided two examples. In Zimbabwe, there is now a harmonized system for donor support. Uganda’s Civil Society Fund has been set up to channel multiple donor resources to civil society, as well as to local government.

Presentation by Kirk Felsman: Funding the social welfare workforce: a bilateral donor perspective
Dr. Felsman explained that USAID is supporting activities that are intended to yield effective, short-term impact, while trying to keep an eye on longer terms goals. This is a challenge. In working with other bilateral donors, the overall objective is to increase access of basic services for vulnerable households and their children at the country level. Continuity of care is an essential yardstick. He stressed that ‘what we do’ should support local ownership through alignment with national plans of action and legislation. Legislation, such as a Children’s Act, provides donors with leverage, allowing more clarity with relevant ministries around defined priorities, realistic targets and more measurable achievements.

Substantial donor funding is being provided for the direct support of training, while there is need to better address central policy issues and challenges, such as, realistic compensation for trained childcare workers and
an agreed upon time frame for transition from donor funds to host government resources. Donors also continue to make investment in local and regional institutions for research and advocacy, all of which contributes to system strengthening. Bilateral donor resources can be amplified through collaborative planning and evaluations. Dr. Felsman noted that in southern Africa, regional OVC donors have collaborated on situation and gap analyses at country level. Such joint field assessments have led to complementary funding of key regional meetings, and shared strategies to address critical priorities.

Dr. Felsman suggested that bilateral donors could be collaborating more creatively with private foundations. Some of the private foundations are more nimble than bilateral donors, especially with regard to the flexibility in their granting procedures. Some private foundations already provide broad support for general scholarships, including child welfare training. Regional OVC donors have supported capacity building for the social welfare workforce, but efforts around coordination can be improved. There is potential for much stronger training opportunities at regional level. For example, some countries in the region lack schools of social work, yet spaces in institutions within the region could be reserved and supported. Those same students could complete internships and fellowships within a Social Welfare Ministry in their home country. Such arrangements should include an obligation on the student’s part to return home and serve in the Ministry for a reasonable, set time period.

Dr. Felsman then highlighted a number of USG related resources that are not always factored into workforce planning, including the Fulbright Program, and the Peace Corps Response Program, which provides individuals who possess technical expertise and solid field experience. He referenced regional platforms such as the Southern Africa Development Community, which currently hosts a ‘children’s desk.’ However, this is a seconded position. He noted that efforts should be made to regularize the position and source funding from member states. Dr. Felsman also noted that it might be worthwhile to hire economists to support Ministries of Social Welfare to lobby the Ministry of Finance for additional government resources.

Presentation by Hellen Macha
The government of Tanzania is responsible for ensuring the well-being of people in Tanzania, including children and other vulnerable groups, and works with donors and development partners to do so. The definition of social workforce includes professionals and para-professionals: social welfare assistants, para-social workers, and professional social workers. The government pays social welfare workers at the central and local level. They expect to have the first group of social welfare assistants paid by government this year. The para-social worker volunteers are not paid. But local government authorities are trying to provide incentives through, for example, providing transport and stationery.

Dr. Macha stressed that the government cannot do it alone. Donors are providing support. Currently, donors support capacity building for the social welfare workforce. One donor provides funds to employ social welfare officers and health workers who are posted to hard-to-reach areas for three years. Dr. Macha noted that if people really plan and have developed strong justification, it is not difficult to get the funding for salaries of social welfare officers. Dr. Macha also presented an overview of challenges. The social welfare department is not recognized as a ‘department’ under local government authorities. The social welfare section is a new section that has been recently decentralized. It is a section under the community development department in local government. The community development department has a very small budget. With this small funding, it is difficult for social welfare to get funding. She also noted the confusion that can emerge when so many donors support NGOs to work on social welfare issues. Passing such funding through government would be a way to lessen confusion.
Questions & Answers from Conference Participants:

Donors sometimes pay employees in hard to reach areas higher salaries. Ultimately they are expected to be integrated into the government payroll. What implications does this have for other colleagues who have the same qualifications but are paid lower salaries?

In Tanzania, sometimes staff members who are newly employed through donor support get paid three times more than existing staff. As government, we were concerned about how we would mainstream staff within three years. The staff themselves were concerned their salaries would decrease once they are mainstreamed within government. An agreement was reached, whereby if someone worked in a donor-supported position within local government for three years, they would be compensated at the level of someone with three years of experience once they officially joined the government (rather than a starting salary level). They will not be at the level of a starting salary. Another issue is that staff can be transferred anywhere. For example, a woman who begins work in a hard-to-reach area might get married and then follow her husband to an area that is not hard-to-reach.

There is lots of talk about funding and financing systems strengthening to improve performance. But how is funding used? Capacity building without accountability means nothing. How can we finance government systems and ensure accountability? What about performance-based financing? How might this be done? Can we do this through local government grants with clearly defined outcomes for end users? What accountability structures can be established for workforce strengthening?

Tom Fenn: Accountability issues plague much of development work. We need to start by demonstrating impact, as we focus too much on reporting at the activity level. We need to be able to demonstrate cost effectiveness and long-term impact. Making sure resources that go to implementing partners are accounted for – it can be done. We must be willing to spend money on administrative overhead to track resources. With the Civil Society Fund in Uganda, we had to be completely transparent within everything that went into granting an award. We’ve had to be open and fair, and we’ve had to be severe about violations – no exceptions.

The mechanism for the Program of Support (POS) in Zimbabwe streamlines resources to numerous organizations, and hence substantial amounts of funds are invested in OVC work. However, the recent capacity assessment in Zimbabwe highlights that POS funding was primarily directed to civil society and ultimately weakened the government mandate with regard to leadership. How can the mal-alignment be addressed?

With regard to the funding mechanism in Zimbabwe, the Program of Support, UNICEF has been perceived as the organization with the money. The level of resources provided to civil society pulled staff from government to work for civil society projects. This undermined public sector workforce strengthening. It is possible to keep government in a leadership role, even if they are not receiving or disbursing funds. It is about positioning, being able to take the back seat. UNCEF should have been the government’s financial management agency, moving the funds. Government should have been up front. They should have been able to lead the response. We should have done a better job of that.

PEPFAR is supposed to support 140,000 health workers across Africa. Have we established targets for social welfare workers?

We have not established targets for social welfare workers. However, we can count new social workers created with the support of PEPFAR efforts towards the 140,000 health worker target.
4.4.4 PANEL PRESENTATION: WHERE DO WE GO FROM HERE?

Moderator: Gretchen Bachman, Senior Technical Advisor for OVC, USAID US
Speakers:
- Alyson Clark, Program Officer, AIDSTAR-Two Project, Management Sciences for Health, US
- Grace Mayanja, Chief of Party, International HIV/AIDS Alliance, Uganda
- Limakatso Chisepo, Director, Department of Social Welfare, Ministry of Health & Social Welfare, Lesotho
- Pierson Ntata, Senior Lecturer, Chancellor College, University of Malawi
- Le Hong Loan, Chief of Child Protection Section, UNICEF Vietnam

Presentation by Alyson Clark: OVCsupport.net: What can it do for you?
Ms. Clark highlighted the website www.OVCsupport.net as a potential venue for sharing resources and continuing discussions on strengthening the social welfare workforce. The website has six main sections and features eight technical areas. There are approximately 1,000 documents in the library. To continue this global dialog, presentations will be available on the conference site and conference participants can engage in ongoing discussions through the discussion board. There will be an online quarterly newsletter published by OVCsupport.net, with a special section highlighting social welfare issues and referencing any newly added documents, new discussion posts, social welfare events, and other activity. Participants are encouraged to contribute publications, articles, events and videos to the site via the e-mail address: ovcsupport@msh.org.

Conference Reflections were provided by conference delegates.

Limakatso Chisepo asked if the problem was that leaders intentionally did not give proper attention to the social welfare workforce or simply did not understand what the workforce does. She emphasized that we must advocate for social work to be recognized as a profession. We may have to educate the workforce as well. Education activities might include: disseminating codes of ethics, forming alliances through twinning and carrying out south-south exchanges, and reviewing curriculum and making sure children’s issues are reflected. As we are advocating for this profession, we might advocate for a Ministry of Social Welfare. Each country should have its own Ministry of Social Welfare or a Ministry of Children rather than inclusion of Social Welfare within other ministries. She emphasized the imperative of making our governments realize the relationship between economic growth and social affairs.

Grace Mayanja reflected that social welfare is grossly under-resourced across sub-Saharan Africa. Macroeconomic and structural issues contribute to this situation. Public sector reforms must also consider these issues. Government needs to prioritize the social sector and invest in people. Para-professional social workers can help relieve the workload of the social welfare workforce. However para-professionals need regulation and standardization to ensure ethical conduct and standards of practice. The Social Welfare Workforce needs remuneration. Advocacy is critical. Achieving universal education and health will not be possible if we do not invest in a social welfare workforce. Government leadership and ownership is critical. Technology can help to ensure quality and accountability of services.

Pierson Ntata presented three major reflections. First, he suggested that when conference participants return home, they need to organize workshops at national, district, and community level. This is where things are happening and we can use the Social Welfare Workforce Strengthening Framework to plan, support, and develop the workforce at all levels. Second, Dr. Ntata expressed his amazement at the similarity among country experiences regardless of the number of individuals affected by HIV/AIDS. What was striking was the similarity in shortages of personnel. There is a great need to strengthen the social welfare workforce in all countries. Democracy has come to Africa and now it is time to use democracy to advocate for strengthened social welfare programs. Social welfare workforce advocates should engage new donors and promote collaboration amongst countries with stronger and weaker workforces. Third, professionalism needs to be
maintained and yet be practical and address local realities. When examining most of the conference presentations, Dr. Ntata recognized the tension between professionalization and the reality on the ground. He posed several challenges to conference participants, asking them to consider how standards of professionalism were established, and asking if it is necessary to establish standards within an African context. He encouraged participants to look at norms within local communities, and not worry so much about doing something unprofessional. He also challenged participants to adapt practices to the context in their own countries.

Le Hong Loan identified a few key strategies for moving forward the social welfare workforce strengthening agenda and reflected on similarities between the workforce in Africa and the workforce in Vietnam. She noted that it is especially important to promote professionalization of social work. Partners like UNICEF and USAID must work with governments to support their development of strategic frameworks for the social welfare workforce. Elements could include a strong and clear legal framework. Social workers must be recognized as professionals. The profession needs to work with government training institutes to develop training curricula. There must be standards applied to new staff, existing staff, para-professionals, and professionals. Continuing education should be provided for para-professionals and/or volunteers. Social workers should be appointed in key government ministries. Strengthening the social welfare workforce should be part of national socio-economic development planning. We need to work to help the government and donors recognize this. The social welfare workforce has to be a core part of the strategy. We need to help governments fund and achieve equity and human rights for children and the disadvantaged.
4.4.5 CLOSING REMARKS

Speaker:

- **Consul General Alberta Mayberry, US Embassy, Cape Town, South Africa**

Consul General Alberta Mayberry noted that there are many people who care about vulnerable children but even those with passion and funds cannot do what social workers do. Social workers are professionals. She closed with the comment: “This week has been a week to change not only your lives, but also the lives of professionals you interact with and the lives of children you work for. What a week it has been. I thank you for your future commitment and all that you will do.”
5. RESOURCE FAIR

The Resource Fair, held on Wednesday, November 17, provided the opportunity for participants to “shop” for information at tables staffed by donors, regional bodies and other organizations. Several country teams also had tables to share resources from programs discussed during breakout sessions.

Organizations hosting tables at the Resource Fair included:

1. AIDSTAR-Two Project
2. AIHA Twinning Center
3. Better Care Network
5. CapacityPlus Project
6. Côte d’Ivoire Country Team
7. Ethiopia Country Team
8. Electronic Data Base for OVC Program in Nigeria
9. Howard University School of Social Work
10. International Federation of Social Workers (IFSW)
11. Lesotho Country Team
12. Namibia Country Team
13. National Association of Child Care Workers (RSA)
15. Population Council
16. Regional Psychosocial Support Initiative (REPSSI)
17. Rwanda Country Team
18. Sesame Square Nigeria
19. South African Council for Social Service Professions
20. Tanzania Country Team
21. Thogomelo Project
22. Uganda Country Team
23. UNICEF
24. University Research Co. LLC, Healthcare Improvement Project

Philip Goldman, Maestral International, providing information on the Global Toolkit to Map and Assess Child Protection Systems
6. COUNTRY TEAM MEETINGS

6.1 DESCRIPTION OF THE PROCESS OF DEVELOPING COUNTRY TEAM ACTION PLANS

A series of meetings by country teams were a central component of the SWWS Conference design. Country teams (CTs) were provided with an opportunity to meet every day both formally (as defined by the conference schedule) and informally (as needed and agreed upon by the CT members). Each CT was assigned a CT liaison to help guide teams through planning processes. Teams also selected a team facilitator.

On the first day of the conference, teams were invited to begin the process of identifying, analyzing, and prioritizing workforce challenges within their own country. By the end of the day, teams had identified one to two critical challenges, outlined results that could be achieved in a short time frame (6-12 months), and established indicators for measuring progress towards these results. In addition, teams also identified root causes of challenges.

On the second day of the conference, teams were invited to discuss and document current efforts to plan for, develop and support the social welfare workforce. Teams discussed how these efforts compared to strategies presented during the concurrent sessions, how they fit within the Social Welfare Workforce Strengthening Framework, how efforts might be improved or expanded, and what new efforts should be launched.

On the third day of the conference, the teams convened twice to develop Country Team Action Plans, including a vision statement, defined measurable results, and reframed challenges into questions for discussion. Teams expanded their list of root causes and identified priority actions to meet the challenge. Once again, teams used the Framework to discuss options for planning, developing, and supporting the workforce. Teams used a Challenge Model to pursue a systematic approach for working together as a team to identify and face one challenge at a time and to achieve results.

During the second meeting on day three, the teams translated the Challenge Model discussion and outcomes into a Country Team Action Plan. This plan provided teams with a clear path for taking action, monitoring progress, and measuring results.

On the final day of the conference, the teams convened one final time to review and complete their Action Plan. Each team then created a brief PowerPoint Presentation highlighting the following: 1) The challenges facing the workforce in their country, and 2) the two priority challenges focused on during the conference, highlighting for each challenge the current situation, a measurable result, root causes of the challenge, and priority actions to address the challenge.

During the afternoon of the fourth and final day, teams presented their plans within three regional meetings.

The following pages present a summary of Country Team Action Plan challenges and measurable results. Annex 4 of this report includes full Country Team Action Plans. All Country Team Action Plans and final presentations can also be found on www.ovcsupport.net.
<table>
<thead>
<tr>
<th>Country</th>
<th>Challenges</th>
<th>Measurable Results</th>
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</table>
• Definition of who the SWW is.  
• National assessment of the SWW for OVC (capacity gap analysis).                                                                                                                                                                                                                       |
|             | 2. How can we achieve quality standard operating procedures for coordinated and comprehensive service delivery in light of multiple players to service delivery?                                                                                                                                                                                     | • Standards of practice developed and adopted by the responsible ministry/ministries.  
• Dissemination of completed standards of practice.                                                                                                                                                                                                                                                                                       |
| Cote d'Ivoire | 1. How can we achieve more adequate training of professional and informal social welfare workforce in the light of insufficient coordination of training strategy for all at the national level, according to their roles?                                                                                          | • Revise/produce two training modules according to identified competencies, gaps and needs to reinforce quality of training and increase numbers of social welfare workforce (professional and informal workers) in 12 months.                                                                                                           |
|             | 2. How can we strengthen the informal community social worker given the high turnover rate and little visibility?                                                                                                                                                                                                                       | • By 48 months, 80% of the 1,700 informal community social workers are retained more than 3 years.                                                                                                                                                                                                                                                                     |
| Ethiopia    | 1. Lack of coordination mechanisms and leadership in the social welfare                                                                                                                                                                                                                                                                  | • A coordinated mechanism of social welfare service provision at Federal, regional and local administrative levels                                                                                                                                                                                                                                                     |
|             | 2. Limited availability and access to social welfare services                                                                                                                                                                                                                                                                            | • Availability and accessibility of Social welfare services to vulnerable children and families                                                                                                                                                                                                                                                                           |
| Haiti       | 1. Lack of a national level social welfare workforce framework                                                                                                                                                                                                                                                                           | • By completion of the first national conference of government, civil society and international stakeholders that will develop a multi-sectoral framework and vision for SWW workers in the protection of children that is agreed upon and disseminated for immediate use.                                                                                                                     |
|             | 2. Lack of dedicated funding for social welfare workforce programming by the Government of Haiti and the International Community                                                                                                                                                                                                  | • Within six months, the Interim Haiti Reconstruction Commission prioritizes SWW programming interventions  
• Within six months, Government of Haiti agrees to dedicate x% of the national budget to SWW programming and related ministries                                                                                                                                                                                                 |
<p>| Kenya       | 1. Professional training                                                                                                                                                                                                                                                                                                                  | • A curriculum that is responsive to the Kenyan context developed for volunteer SWWF by December 2011                                                                                                                                                                                                                                                                     |
|             | 2. Inadequate resources                                                                                                                                                                                                                                                                                                                 | • Increase of financial allocation on children matters from XXX to YYY by December 2011                                                                                                                                                                                                                                                                                     |</p>
<table>
<thead>
<tr>
<th>Country</th>
<th>Challenges</th>
<th>Measurable Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Lesotho</td>
<td>1. How can we strengthen the capacity of 50 child welfare officers at DSW in the light of emerging child protection issues?</td>
<td>• By the end of 2011, the Lesotho team will have ensured conceptualization of the training format, collection and adaptation of training tools and implementation of the in-service training.</td>
</tr>
<tr>
<td></td>
<td>2. How can we regulate establishment of child welfare organizations for purposes of enhancing the quality of services provided?</td>
<td>• Development of guidelines for regulation, accreditation and supervision of child welfare organizations by 2011.</td>
</tr>
<tr>
<td>Malawi</td>
<td>1. Current cadre of social workers not well trained</td>
<td>• Upgrading of current cadre of social workers to diploma level commences by September 2011</td>
</tr>
<tr>
<td></td>
<td>2. No institutional framework or strategy for social work</td>
<td>• Social welfare policy, strategy and plan developed by Sept 2011</td>
</tr>
</tbody>
</table>
| Mozambique | 1. Weak coordination and monitoring of capacity at all levels, but specifically at district level                                                                                                                                                                                                                                          | • Increased percentage of filled vacancies within MMAS filled at the various levels.  
• Increased percentage of students graduated in social work.                                                                                                                                                                        |
|         | 2. Weak social welfare workforce, in terms of quality and number of trained personnel                                                                                                                                                                                                                                                        | • Availability of relevant accredited pre-service training at university and vocational levels  
• Updated certificate courses for in-service training                                                                                                                                                                              |
| Namibia | 1. Fragmented and uncoordinated social welfare response                                                                                                                                                                                                                                                                                     | • Plan of action developed and consensus reached towards multi-sectoral social welfare coordination and cohesiveness  
• Consensus reached on process to develop wellness support system for social welfare workforce practitioners                                                                                                           |
| Nigeria | 1. How can we achieve a strong and effective Social Welfare Workforce in the light of a lack of regulatory mechanism for the Social Welfare Workforce and System in Nigeria?                                                                                                                                                                            | • Six months result: Report on Assessment of HR Structure, Function and competencies on (1) social work education and training; and (2) child protection services  
• One year result: Action plan on developing a systematic approach to Social welfare                                                                                                                                 |
|         | 2. How can we achieve a regulated social welfare workforce in the light of a lacking Political and Financial commitment and buy-in for social welfare system at all levels of Government in Nigeria?                                                                                                                                    | • Six months result: Available advocacy information (budget, vision, situation analysis and estimated needs) to engage with Government and other stakeholders at different levels.  
• Buy-in of all Stakeholders in the Nigerian Social Welfare System                                                                                                                                                              |
<p>| Rwanda  | 1. What process does the Government of Rwanda (GOR), in partnership with stakeholders (civil society organizations, bi and multi lateral agencies, institutions of higher education, NGOs, etc.) need to pursue in order to create a clear, well-defined, draft social welfare workforce system for the country?                                               | • By November 2011, the Government of Rwanda will have 1 completed, fully-developed, draft social welfare workforce framework document that includes costing, job classifications and terms of references and a sufficiently detailed organizational chart with multi-year development plan, shared broadly both within and outside of GOR for review. |</p>
<table>
<thead>
<tr>
<th>Country</th>
<th>Challenges</th>
<th>Measurable Results</th>
</tr>
</thead>
<tbody>
<tr>
<td>Rwanda (continued)</td>
<td>2. How can the GOR design an effective training and support system for all categories of community-based social welfare workers (including those currently designated as psycho-social workers), particularly building upon the model that already exists for Community Health Workers in Rwanda?</td>
<td>• By June 2012, the Government of Rwanda will have 1 completed, fully-developed, draft curriculum (or series thereof) for training the agreed-upon cadres of community-based social welfare workers. This work is linked to the work done under Challenge #1, in developing a SWW framework at the national level.</td>
</tr>
<tr>
<td>South Africa</td>
<td>1. Uncoordinated, incomplete, under-funded, under-developed, and ill-defined social welfare workforce</td>
<td>• Within 12 months, categories for the SW workforce, as articulated in the Children’s Act, will be defined with functions and skill sets</td>
</tr>
<tr>
<td>Swaziland</td>
<td>1. How do we strengthen the institutional structures to effectively deliver social welfare services in Swaziland?</td>
<td>• Strategic plan for DSW finalized • Structural re-organization of DSW (organogram, job descriptions and interdepartmental linkages defined)</td>
</tr>
<tr>
<td></td>
<td>2. How can we develop/improve the HR skills in social welfare in light of the increased demand for service provision?</td>
<td>• Capacity Gap Assessment developed • Human Resource Development Plan developed</td>
</tr>
<tr>
<td>Tanzania</td>
<td>1. Inadequate qualified manpower at the LGA level</td>
<td>• At least four Social Welfare Officers per district council by December 2011</td>
</tr>
<tr>
<td></td>
<td>2. Lack of national social welfare workforce strategy</td>
<td>• Training and accredited social welfare workforce, recruitment of human resources, linkages with other ministries</td>
</tr>
<tr>
<td>Uganda</td>
<td>1. Inadequate numbers of staff</td>
<td>• 10% increase in staffing levels by December 2011</td>
</tr>
<tr>
<td></td>
<td>2. Poor facilitation – inadequate funding for service delivery (tools and transportation)</td>
<td>• 1% increase in the budget by June 2012</td>
</tr>
<tr>
<td>Vietnam</td>
<td>1. Low technical capacity and lack of quality training program on social work</td>
<td>• National curriculum on two-year social work program developed • In-service training programs developed • 300 field supervisor/mentors trained</td>
</tr>
<tr>
<td></td>
<td>2. Poor M&amp;E and Supervision Systems</td>
<td>• Comprehensive framework on Social Welfare Workforce Strengthening developed • Improved capacity of government counterparts on M&amp;E, especially at local level</td>
</tr>
<tr>
<td>Zambia</td>
<td>1. Quality control for social workers: How can we achieve quality control for social workers given low recognition, financing and lack of regulations?</td>
<td>• Association and accreditation system developed by December 2011</td>
</tr>
<tr>
<td></td>
<td>2. Inadequate structure that translates to inadequate staffing</td>
<td>• Completed situational analysis that reviews the social welfare needs and the current workforce structure needed</td>
</tr>
<tr>
<td>Zimbabwe</td>
<td>1. How can we develop the applied skills of workforce – new and existing – to carry out the necessary functions of their job?</td>
<td>• Commencing 09/2011, existing staff carrying out statutory functions for child welfare (govt. and civil society) complete standard induction package within six months, and subsequently new staff within six months of taking up post</td>
</tr>
<tr>
<td></td>
<td>2. How can we achieve effective frontline M&amp;E and good quality professional mentoring, coaching &amp; supervision?</td>
<td>• Provincial SSO visits each district once per quarter; district SSO visits each ward once per quarter (to supplement monthly visits made by member of core team for child care and protection)</td>
</tr>
</tbody>
</table>
7. SUMMARY OF FEEDBACK FROM PARTICIPANTS

Summary of Final Conference Evaluation Results

1) Please tell us how satisfied or dissatisfied you were with the following:

<table>
<thead>
<tr>
<th></th>
<th>Very Satisfied</th>
<th>Satisfied</th>
<th>Dissatisfied</th>
<th>Very Dissatisfied</th>
<th>total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) The pre-conference planning process</td>
<td>64 (50%)</td>
<td>55 (43%)</td>
<td>9 (7%)</td>
<td>0</td>
<td>128</td>
</tr>
<tr>
<td>Positive opinion: 93%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) The conference materials provided</td>
<td>54 (43%)</td>
<td>64 (51%)</td>
<td>8 (6%)</td>
<td>0</td>
<td>126</td>
</tr>
<tr>
<td>Positive opinion: 94%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) The speakers/presenters</td>
<td>53 (42%)</td>
<td>71 (57%)</td>
<td>1 (1%)</td>
<td>0</td>
<td>125</td>
</tr>
<tr>
<td>Positive opinion: 99%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) The conference facilities</td>
<td>87 (69%)</td>
<td>38 (30%)</td>
<td>2 (2%)</td>
<td>0</td>
<td>127</td>
</tr>
<tr>
<td>Positive opinion: 98%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

2) Please tell us how much you agree or disagree with the following statements:

<table>
<thead>
<tr>
<th></th>
<th>Strongly Agree</th>
<th>Agree</th>
<th>Disagree</th>
<th>Strongly Disagree</th>
<th>total</th>
</tr>
</thead>
<tbody>
<tr>
<td>a) The content of conference sessions was appropriate and informative</td>
<td>69 (54%)</td>
<td>58 (46%)</td>
<td>0</td>
<td>0</td>
<td>127</td>
</tr>
<tr>
<td>Positive opinion: 100%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>b) The conference was well organized</td>
<td>87 (74%)</td>
<td>31 (26%)</td>
<td>1 (1%)</td>
<td>0</td>
<td>118</td>
</tr>
<tr>
<td>Positive opinion: 99%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>c) Conference staff were helpful and courteous</td>
<td>96 (78%)</td>
<td>27 (22%)</td>
<td>1 (1%)</td>
<td>0</td>
<td>123</td>
</tr>
<tr>
<td>Positive opinion: 99%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>d) The conference has helped me think about practical and useful next steps</td>
<td>83 (66%)</td>
<td>42 (33%)</td>
<td>1 (1%)</td>
<td>0</td>
<td>126</td>
</tr>
<tr>
<td>Positive opinion: 99%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>e) The country team action planning process will be useful for my team</td>
<td>76 (70%)</td>
<td>30 (28%)</td>
<td>3 (3%)</td>
<td>0</td>
<td>109</td>
</tr>
<tr>
<td>Positive opinion: 98%</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
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</table>

Following are the main themes of responses to the following questions:

3) What did you like most about the conference?
   - Interaction within country teams (opportunity to sit together, identify challenges and develop action plans)
   - Exchange of ideas/best practices/practical examples
   - Quality (and variety/quantity) of plenary and concurrent sessions
   - Quality of participants (passionate, engaged professionals, serious practical discussions, diverse views/representation)
   - Sign of commitment to and recognition of the social welfare workforce and future possibilities

4) What did you like least about the conference?
   - Timing of program was tight, not enough time given
   - More free time needed, nothing in the schedule to allow for sightseeing
   - Concurrent sessions, missed information due to being able to only attend one session at a time
o Needed broader representation (too PEPFAR-focused, needed more implementing partners and multilaterals, too many specialist/advisors)
  o Food was too sweet/no healthy options

5) What aspects of this conference were most interesting or useful for your work?
  o Country team planning/action plans and regional report-back
  o Experiences shared between country teams in breakout sessions - the commonality of challenges and learning from one another to find solutions

6) In what ways could this conference have been improved?
  o More time for informal interactions with participants
  o Broader representation at conference – invite additional ministries and encourage higher level of political participation; add more social workers, workforce experts, civil society implementers, national associations of social work; bring social welfare stakeholders (orphans, caregivers, etc).
  o Increase the days/time for the conference
  o More time for presentations

7) What types of follow up actions do you think will be most useful after the conference?
  o Follow up on country team action plans
  o Organize a follow up conference, have regular forums (annually, biannually)
  o Continuous interaction with participants
  o Use OVCsupport.net for virtual discussions, follow up, listserv, reengage participants
  o Pool technical expertise, collaborate to provide technical assistance
  o Regional workshops/country/ministry workshops

8) Additional comments:
  o Well organized, excellent work, thank you, keep it up!
  o Need for follow up conference
  o Was inspiring, timely, relevant
  o Would like to share tools, resources, utilize OVCsupport.net
8. RECOMMENDATIONS FOR NEXT STEPS

Recommendations for Social Welfare Workforce Strengthening (SWWS) Conference Next Steps

The following recommendations are taken directly from feedback provided by conference participants via conference evaluation forms and discussion boards and from statements posted on the Conference Learning Tree. In compiling the statements below, most of it remains in the participants’ own words. USAID and a future taskforce/alliance of key stakeholders will continue to refine and look at ways to operationalize these conference participant recommendations.

1. Efforts to be undertaken at the Global Level

Research / data collection and analysis

- More clearly define the added value of social welfare system strengthening
  - Collect data to make the case for SWWS to policy makers on topics such as:
    - Economic benefits of investing in SWWS and cost of not investing in SWWS
- Support research projects on other potential research topics identified by participants including:
  - Competencies required of different workforce cadres in countries/regions
  - Common terms and definitions for key concepts
  - Assessment of the impact of social protection on social work practice/how to integrate other social work functions within administration of grants
  - Using existing human resource assessments and ongoing systems mapping work, determine the need/demand for skills/workers and the supply of training at national and regional levels – estimate the magnitude and nature of SWW gap regionally and globally
- Support development of social welfare journals to publish research findings

Coordination

- Organize follow-up conference in different location in two years for same participants plus additional stakeholders to assess progress towards addressing SWWS challenges
- Engage additional actors (donors, governments and health sector) in dialogue about ways to strengthen the social welfare workforce
- Establish an Alliance (similar to the Global Health Workforce Alliance) to support the global community of social welfare workforce policy makers and practitioners to collectively implement actions to address the chronic shortage of social welfare workers

Advocacy

- Have a common rallying point and a common ground for advocacy
  - Clarify definitions, agree to common terminology
  - Use research gathered and conference framework as a starting point for discussion and advocacy
- Advocate with health colleagues to support the SWWS cause
  - Integrate SWWS within the Global Health Alliance Agenda
    - Develop Technical Brief re: the linkages between SW and broader health outcomes, and between SW/CP and child health outcomes
    - Identify opportunities for collaboration between HRH and the WHO Global Health Workforce Alliance and the SWWS Alliance to achieve shared and individual goals
- Identify and engage multi-lateral, bi-lateral and private donors to support SWWS
  - Review achievements of the conference and assess current investment and potential future investments
  - Convene donors meeting to establish commitments
• Gain more support (recognition and resources) for the emerging role of paraprofessionals

2. Efforts to be Undertaken at the Regional and National Levels

Coordination
• Hold Regional Meetings
  o Quarterly Regional Conference calls (for example, between country teams or country team liaisons in a particular region – Southern, Eastern, and Western Africa, Asia, Latin America and the Caribbean)
  o Bi-annual face-to-face Regional Meetings - Rotate hosting of conferences sub-regionally and ensure each country accounts for implementation on regionally agreed work plan
• Carry out in-country coordination, maintaining and building on partnerships formed during conference
• Create inter-disciplinary regional networks to exchange research, ideas, curricula and tools (among professionals working for children, such as lawyers, special educators, psychologists, and others)
• Organize regional study tours and professional exchanges to and between countries with ongoing SWWS initiatives and social work associations

Advocacy
• Pursue efforts at the country and regional levels to mobilize continued political commitment and ensure government inclusion and buy-in
  o Isolate key issues for engaging governments in raising the profile of SWWS and commit various players to the cause. Use framework as a starting point for discussion and advocacy.
  o Secure government support to help create legitimate, legal, accountable bodies for social welfare in order to support professionalism and standardization
  o Integrate SWWS within SADC and AU Agenda
• Identify and support champions and advocates and help them to develop leadership skills

3. Resources, technical assistance and/or information sharing requested

• Provide follow up support to country teams on their action plans
  o Keep in touch with country team focal points and review the plans of action and provide comments
  o Presentation of work plan to key stakeholders by all participants is critical therefore organizers should keep following up with country teams.
  o Have consultations among and between country teams to identify feasible ways of getting political and financial support
• Highlight on-going, in-country capacity building and training efforts
• Develop a menu of existing technical service providers – a mini “Users’ Guide”
  o Raise awareness about existing technical service providers
  o Solicit feedback on current performance (consider regional menus as well as a global menu)
  o Organize a webinar for service providers to present resources/services
• Provide regional technical assistance for countries at similar points in process; provide technical assistance around similar priority actions
  o Gather input from other countries on how they have harmonized the workforce, share between participants from this conference
• Work with countries to develop a Scope of Work for technical assistance
• Identify funding for technical assistance

• Use OVCSupport.net as a virtual global hub for sharing information, events, reports, resources, tools, and engaging in ongoing discussions on SWWS topics
  • Use the site as a launching point for an ongoing monthly listserv to raise issues, flag new resources, announce events, new documents, and highlight new and ongoing discussions, or send bi-monthly newsletters summarizing activity on OVCSupport.net

• Provide organizational development support/strengthening of SW associations
  • Social work associations require legal backing to protect the profession
  • Strengthening of social welfare workforce country-specific associations can help advocacy

• Develop a publication of papers developed from conference presentations

• Support development of education and training programs for professional and para-professional social workers
  • Develop additional Twinning Programs to support the establishment of academic social work programs
  • Disseminate curricula and resources on training programs/standard courses for para-professionals and social workers across countries

• Support para-professionals
  • Recognize the importance of equipping para-professionals with required skills and resources and supervising them with a formal child welfare system. With a huge shortage of social workers, the use of para-professional social workers is important for continuing service delivery.
  • Support government to develop standard courses for para professionals

• Organize a series of Webinars on specific technical topics to be identified and prioritized by conference participants
  • Potential topics identified by conference participants include:
    ▪ Repeat of popular concurrent sessions from the conference
    ▪ Discussions of available Social Welfare Workforce Training Curricula and how to implement them
    ▪ Integrating quality improvement within curricula
    ▪ Discussions for specific stakeholder groups: SWW Trainers, SW Professional Associations, Government Officials
    ▪ Regional Discussions
    ▪ Country Case Studies
    ▪ Country Feedback Discussions to report on progress towards achieving Action Plans
    ▪ Discussion for countries addressing similar challenges or at similar stages in SWWS effort
    ▪ Financing the SWW
    ▪ Joint discussions with HRH colleagues and how to position SWWS within larger HRH agenda and health systems strengthening agenda
    ▪ Community mobilization and inclusion of para-professionals within the workforce
    ▪ Stories from para-social workers and social workers working with NGOs and ways to engage them in more formalized systems
    ▪ Stories and input from social work clients (e.g., children, families, elderly, disabled)
    ▪ Discussions with Ministers of Finance
    ▪ Discussions with and between SWW Champions in different countries
    ▪ Addressing gender issues in provision of social services
    ▪ Discussions with HR experts/lessons learned from the field of Workforce Development
    ▪ Discussion on the Twinning Project and how to form twinning partnerships
• Discussion on availability of technical resources within a region – building opportunities for mutual support

• Collect existing in-country technical tools/resources/guidelines or develop new tools to support implementation of Action Plans
  o Initial ideas identified include:
    ▪ Tools to support efforts to secure funding for the SWW and SWWS initiatives/Talking points for presentations to Ministers of Finance
    ▪ Tools to support costing and budgeting
    ▪ Tools to support advocacy efforts and to recruit and develop SWWS champions
    ▪ Tools to support additional (long-term) strategic planning
    ▪ Tools to establish country-level SWWS Working Groups
    ▪ Tools to support SWW assessments and planning processes
    ▪ Tools to retain and support members of the social welfare workforce
    ▪ Tools to support the development of Social Work professional associations
    ▪ Tools to support regulation of social work training and practice
    ▪ Codes of conduct for SWW and Codes of Ethics available through the International Federation of Social Workers and social work associations
    ▪ Sample training curricula for specific cadres of social workers
  o Identify specific tools and lessons learned by HRH which may be applicable
MONDAY, 15 NOVEMBER 2010

8:00am - 8:30am  Registration and Coffee
8:30am     Conference Convenes
8:30am - 9:15am  Welcome
                Speakers:
                • Maria Mabetoa, Department of Social Development, South Africa
                • Donald H. Gips, US Ambassador to South Africa

9:15am - 9:30am  Review of Meeting Objectives and Agenda
                Conference Facilitators: Chipo Mwetwa and Maury Mendenhall, USAID

9:30am -10:00am  Opening address: “Strengthening the world’s most important workforce -- those who care for and protect vulnerable children”
                Speaker: Gary Newton, US Government Special Advisor for Orphans and Vulnerable Children

10:00am -11:00am  Panel Presentation: Social Welfare Systems and Workforce in Africa
                   Panel 1: “Systemic Approaches to Social Welfare: How systems protect children”
                   Speakers:
                   • Kendra Gregson, UNICEF
                   • Philip Goldman, Maestral International
                   • Jonna Carlson, UNICEF Kenya
                   What is a Child Protection System? How does a systems approach change our understanding of child protection? How can mapping and assessment of child protection systems support better social welfare systems?

11:00am - 11:30am  Tea Break
11:30am - 12:30pm  Panel Presentation: Social Welfare Systems and Workforce in Africa
                   Panel 2:  “How the workforce protects children and the challenges they face”
                   Speakers:
                   • John Williamson, USAID
                   • Prof. Jacqueline Oduol, Ministry of Gender, Children and Social Development, Kenya
                   What do we mean by “Social Welfare Workforce”? Who comprises the workforce, what do they do, how do they relate to each other, and where do they fit within Social Welfare Systems? What are some of the key challenges facing the social welfare workforce in Africa?

12:30pm - 1:00pm  Film
1:00pm - 2:00pm  Lunch
2:00 pm - 2:15pm  Presentation: Country Team Meetings – Identifying and Analyzing Challenges
                   Facilitator: Sarah Johnson, AIDSTAR-Two
                   What challenges does the social welfare workforce face in your country? What are the root causes of these challenges?

2:15pm - 4:00pm  Meetings by Country Team – Identifying and Analyzing Challenges
4:00pm - 4:30pm  Gallery Walk with Tea Break (VOC North, 3rd floor)
4:30pm – 4:45pm  Day’s Wrap-up, Announcements (VOC North, 3rd floor)
5:30pm - 7:00pm  Reception (VOC Lobby, 3rd floor)
TUESDAY, 16 NOVEMBER 2010

8:30am – 8:45am  Review of Daily Agenda
8:45am – 9:25am  Panel Presentation: “Systematic Approaches to Workforce Strengthening”
  Moderator: Jim McCaffrey, CapacityPlus
  Speakers:
  • Ummuro Adano, AIDSTAR-Two
  • Luisa Lopez, National Association of Social Workers, US
  What can we learn from efforts to strengthen the healthcare system and healthcare workforce? How might these lessons help us frame our efforts to strengthen the social welfare workforce? What strategies offer promise for (1) planning, (2) developing and (3) supporting the social welfare workforce?

9:30am - 11:00am  Concurrent Interactive Sessions
  (Choose one of the following six sessions to attend)
Theme I: Planning the Workforce
Session 1  Planning the Workforce: Skills Lab
  Facilitator: Ummuro Adano, AIDSTAR-Two
  What are the key components of social welfare workforce planning? What is a Human Resources Information Management System? How can organizations improve social worker recruitment, hiring, and deployment practices? Which critical actors must be engaged in strategic planning for the workforce, what are their roles and responsibilities, and how can we engage them? This session will provide a series of experiential exercises and small group work.

Session 2  Determining the cost of meeting human resource requirements and strengthening mechanisms for financing and accountability
  Moderator: Nankali Maksud, UNICEF
  Speakers:
  • “Budgeting for human resources for social welfare services”
    – Paula Proudlock of the Children’s Institute, University of Cape Town
  • “Costing the social welfare workforce in Ethiopia”
    - Doug Webb, UNICEF Ethiopia
  How is the cost of the social welfare workforce determined? What are some common challenges faced during this process and how might these challenges be overcome? Representatives from South Africa and Ethiopia will share lessons learned from recent workforce costing exercises.

Theme II: Developing the Workforce
Session 3  Developing the Workforce: Skills Lab
  Facilitator: Jim McCaffrey, CapacityPlus
  What are the key components of social work education and training programs? How can social work education and training programs align more closely to social welfare workforce strengthening plans? What is the process for conducting curricula review? How can programs improve teaching methods and provide a broad range of professional development opportunities for the social welfare workforce? This session will provide a series of experiential exercises and small group work.
Session 4  
**Developing social work education and training programs to address gaps identified by workforce assessments**

Moderator: Sandra Crewe, Howard University School of Social Work

Speakers:
- “Expanding levels of social work training/education: including diploma and degree programs”
  - Willard Amos Manjolo, Ministry of Gender, Children and Community Development, Malawi
- “Organizing internships/field placements for social work students as an integral part of their degree program”
  - Gidraph Wairire, International Association of Schools of Social Work
- “Pre-service social work training at the University of Namibia”
  - Dr. Marita Grobler, University of Namibia
- “Innovative Training Programs for Workforce Development in Case Management and Social Work in Rwanda”
  - Charles Kalinganire, National University of Rwanda

How can social work education and training programs better coordinate with workforce planners to meet the growing demand for social welfare workers? How can we ensure that social work education and training programs adequately prepare students for the tasks ahead of them? Representatives from Malawi, IASSW, Namibia and Rwanda will discuss efforts to build education programs that are flexible and responsive to the changing needs within their countries.

**Theme III: Supporting the Workforce**

**Session 5**  
**Supporting the Workforce: Skills Lab**

Facilitator: Sarah Johnson, AIDSTAR-Two

What are the key components of social welfare workforce support initiatives? How can we strengthen systems to improve and sustain social welfare workforce performance? What tools and resources are available to improve job satisfaction and retention of social welfare workers? How do professional associations enhance the professional growth and development of the social welfare workforce? Session will provide a series of experiential exercises and small group work.

**Session 6**  
**Developing effective codes of conduct for the social welfare workforce**

Moderator: John Williamson, USAID

Speakers:
- “Volunteer Children’s Officers Code of Conduct Handbook”
  – Prof. Jacqueline Oduol, Ministry of Gender, Children and Social Development, Kenya
- “Establishing Institutional Child Protection Policies for NGOs”
  - Philomena Irene, USAID Nigeria, and Noriko Izumi, UNICEF Nigeria

What are appropriate expectations regarding the conduct of social welfare workers? How are appropriate standards developed, formally established, and enforced? How do these standards ensure the safety of clients and staff as well as enhance effectiveness of social work practice? Representatives from Kenya and Nigeria will discuss efforts to establish codes of conduct for staff and volunteers who work with vulnerable children within individual institutions as well as a nationwide standard for childcare workers.

11:00am - 11:30am  
Tea Break
11:30am - 1:00pm  **Concurrent Interactive Sessions**
(Choose one of the following six sessions to attend)

**Theme I: Planning the Workforce**

**Session 7**  
**Carrying out workforce assessments to identify gaps in human resource requirements**

Moderator: Karin Turner, USAID Mozambique

Speakers:
- “Assessing staffing levels and gaps in needed skills to strengthen the delivery of core social welfare functions”  
  - Paulo Beirão, Human Resource Department, Ministry of Women and Social Welfare, Mozambique
- “Human resource planning for improved service delivery to orphans and vulnerable children”  
  - Joyce Nakuta, Ministry of Gender Equality and Child Welfare, Namibia
- “Independent audit of the human resource and institutional capacity of the Department of Social Services at national, provincial and district levels”  
  – Togarepi Chinake, Ministry of Labour and Social Services, Zimbabwe

What were the results of recent workforce assessments in Mozambique, Namibia and Zimbabwe and how are these countries addressing or proposing to address capacity gaps? What are some useful tips for other countries planning to engage in workforce assessments? Representatives from each of these countries will share lessons learned from their experiences with workforce assessments and the impact of these assessments on the structure of the social welfare system and service delivery to vulnerable children and families.

**Session 8**  
**Workforce realignment and task shifting through establishment of new cadres within the social welfare workforce**

Moderator: Tom Fenn, UNICEF Southern and Eastern Africa

Speakers:
- “One social worker many roles: identifying staffing shortages and their implications for effective service delivery”  
  - Margaret Mokgachane, Ministry of Local Government, Department of Social Services, Botswana
- “Filling the social welfare gap in services: recruiting a cadre of volunteer and Para-social workers and potential for inclusion in Local Government”  
  - Prosper Msuya, IntraHealth Tanzania
- “Namibian experiences with social welfare task shifting”  
  - Lisa van Rhyn, Ministry of Health and Social Services, Namibia

What is the process for establishing new cadres of social workers? How are appropriate tasks for different cadres determined and what is the process for shifting tasks among cadres? A representative from Botswana will describe the impact of multi-tasking on social workers. Representatives from Tanzania and Namibia will share challenges and successes from their efforts to achieve a more equitable and functional distribution of tasks among the social welfare workforce.
Theme II: Developing the Workforce

Session 9  Developing appropriate social work education and training programs for specific social welfare workforce cadres
Moderator: Nathan Linsk, Jane Addams College of Social Work/Midwest AIDS Training and Education Center, University of Illinois at Chicago; American International Health Alliance HIV/AIDS Twinning Center
Speakers:
- “Adapting social work training programs at the Institute of Social Work to establish new cadres of social workers, para-social workers, and social work assistants”
  - Leah Omari, Institute of Social Work, Tanzania
- “Fast track training of social welfare workers”
  - Wynter Kabwiku, University of Zambia

How can social work education and training programs be adapted to prepare students for specific roles within the social welfare workforce and meet urgent needs for qualified workers as quickly as possible? Representatives from Tanzania and Zambia will share lessons learned from efforts to train new cadres of social workers including para-social workers and assistant social welfare officers.

Session 10  Providing feedback to the Social Welfare Workforce Strengthening Framework
Facilitators: Jim McCaffery, CapacityPlus and Stephanie Asare, Consultant, National Association of Social Workers, US

How can we improve the Social Welfare Workforce Strengthening Framework? What terms or aspects are unclear or difficult to understand? What critical components are missing? Are the recommendations relevant? Representatives from CapacityPlus and the National Association of Social Workers will facilitate a discussion to gather your ideas for improving the framework.

Theme III: Supporting the Workforce

Session 11  Developing tools, resources, and initiatives to improve job satisfaction and retention
Moderator: Gretchen Bachman, USAID
Speakers:
- “Quality care for children through enhanced psychosocial well-being and child protection capacity of community caregivers”
  - Naomi Hill, The Thogomelo Project, South Africa
- “Working with children through volunteers: A case study from a Namibian Community Service Organization”
  - Nicolette Bessinger, Church Alliance for Orphans, Namibia
- “Career Pathing: A South African experience developing volunteers into professionals”
  - Zeni Thumbadoo, National Association of Childcare Workers, South Africa

What motivates social welfare workers, particularly volunteer workers? How can we reinforce these incentives and better care for social welfare workers? Representatives from South Africa’s Thogomelo Project, the National Association for Childcare Workers, and Namibia’s Church Alliance for Orphans will share ideas for improving workplace conditions, psychosocial support and career opportunities for social welfare workers.
Session 12  Developing or strengthening systems to improve and sustain social welfare workforce accountability and effectiveness  
Moderator: Luisa Lopez, National Association of Social Workers, US  
Speakers:  
- “Quality assurance tools and support provided by social work associations”  
  - Charles Mbugua, International Federation of Social Workers  
- “Lessons learned from applying quality standards for programs for orphans and vulnerable children to social welfare worker performance”  
  - Dorcas Amolo, Healthcare Improvement Project  
- “The impact of quality standards for programs to support orphans and vulnerable children on social work accountability and effectiveness”  
  - Irene M’Bahia Adouko, US Center for Disease Control, Côte d’Ivoire  
What are appropriate mechanisms for promoting accountability of the social welfare workforce? What is the impact of quality standards on social welfare worker performance? How can these standards increase feedback and improve accountability? Representatives from the International Federation of Social Workers and Healthcare Improvement discuss lessons learned from efforts to apply quality standards to workforce performance. A representative from Côte d’Ivoire will provide a case study to illustrate the use of quality standards to improve performance of social welfare workers hired by social centers.

1:00pm - 2:00pm  Lunch  
2:00pm - 2:30pm  Plenary Case Study: “Assessing the human resource capacity of the Ministry of Gender, Children and Community Development in Malawi”  
  Speaker: Angela Odiachi, USAID Malawi  
2:30pm - 3:15pm  Facilitated Discussion: Linking para-professionals, community workers, social workers, and volunteers in efforts to build and sustain the social welfare workforce  
  Facilitator: Gary Newton, US Government Special Advisor for Orphans and Vulnerable Children  
  Discussants:  
  - Brou Clementine Amelie Anderson Koua, Former Director, National Program for OVC Care/ Ministry of Family, Women and Social Affairs, Côte d’Ivoire  
  - Prof. Jacqueline Oduol, Ministry of Gender, Children and Social Development, Kenya  
  - Leah Omari, Institute of Social Work, Tanzania  
  How can we most effectively bridge the different layers of the workforce, encourage cohesiveness and better coordinate training, workloads and service provision?  
3:15pm - 3:30pm  Presentation: Country Team Meetings - Discuss and Document Current Efforts to Plan, Develop and Support Your Workforce  
  Facilitator: Sarah Johnson, AIDSTAR-Two  
  How does your country currently plan, develop and support the social welfare workforce? What works well and what are opportunities for improvement?  
3:30pm - 4:45pm  Meetings by Country Team with Tea Break- Discuss and Document Current Efforts to Plan, Develop and Support Your Workforce  
4:45pm - 5:00pm  Day’s Wrap-up, Announcements
WEDNESDAY, 17 NOVEMBER 2010

8:30am – 8:45am  Review of Daily Agenda

8:45am - 9:20am  Plenary Case Study: “Training social work para-professionals and linking to Addis Ababa University: Lessons Learned”
Speaker: Kidest Hailu, Twinning Center, Ethiopia

9:30am - 11:00am  Concurrent Interactive Sessions
(Choose one of the following six sessions to attend)
Theme I: Planning the Workforce

Session 13  Workforce realignment and task shifting through decentralization of social welfare responsibilities
Moderator: Brigette DeLay, UNICEF West Africa
Speakers:
- “Decentralizing the Social Welfare Workforce structure in Swaziland”
  - Abner Dlamini, Department of Social Welfare, Swaziland
- “Creating partnerships between provincial and national governments to strengthen coordination and improve direct services”
  - Maria Francisca Lucas, Ministry of Women and Social Welfare, Mozambique

How does the process of decentralizing social welfare responsibilities to regional and local levels enable more efficient use of human resources? How are tasks allocated among central and local level social welfare workers? How can systems of communication, coordination and accountability among central and local level actors within the social welfare workforce be made more effective?
Representatives from Swaziland and Mozambique will share lessons learned from recent efforts to decentralize responsibility for the care of vulnerable children and their families.

Session 14  Building alliances to strengthen leadership and collaboration among stakeholders
Moderator: Ben Isquith, USAID
Speakers:
- “Building Ministry Human Resource Capacity Through Organizational Development: The Malawi Experience”
  - Presenter: George Mkmamanga, Ministry of Gender, Children and Community Development, Malawi
- “Enhancing the ability of District and Regional Social Welfare Officers to address HIV and OVC issues and supervise other social work cadres”
  - Hellen Macha, Prime Ministers’ Office Regional Administration and Local Government, Tanzania
- “Determining the role of local government in efforts to carry out and share the results of social welfare workforce assessment at the zonal level”
  - Baryayebwa Herbert, Ministry of Gender, Labour and Social Development, Uganda

What are effective mechanisms for mobilizing and coordinating actors from different sectors within the social welfare workforce - including the health, education, justice and the private sectors? How can we better engage these actors in efforts to strengthen the social welfare workforce and social welfare system? Representatives from Malawi, Tanzania, and Uganda will share lessons learned from efforts to enhance inter-ministerial dialog at the national level, and empower local government authorities and develop private-public partnerships to coordinate implementation of services to vulnerable children and families at the local level.
Theme I: Developing the Workforce

Session 15  
Reviewing curricula and incorporating indigenous/local knowledge as well as international best practices on improving the well-being of children and families

Moderator: Linda Sussman, US Government Deputy Special Advisor for Orphans and Vulnerable Children

Speakers:
- “Conducting curricula reviews and developing new curricula to address gaps in the social welfare workforce at the Public College of Social Work”
  - Pierson R.T. Ntata, University of Malawi Chancellor College
- “Incorporating best practices and local and indigenous knowledge into social welfare workforce training”
  - Nathalie Bogui Konan, Côte d’Ivoire National Agency for Rural Development

How can we ensure that curricula are appropriate to the African context and make use of African approaches to caring for vulnerable children and families? How can we ensure that curricula reflect new innovations in the field of social work practice? Representatives from Malawi and Côte d’Ivoire will discuss curricula development and review experiences, including lessons learned from engaging local communities and clients in efforts to determine appropriate social work practice methods.

Session 16  
Providing professional development opportunities for social welfare staff through in-service training and distance learning

Moderator: Kirk Felsman, USAID Southern Africa

Speakers:
- “Delivering a certificate programme in Community Based Work with Children and Youth by supported distance learning”
  - Presenter: Lynette Mudekunye, Regional Psychosocial Support Initiative (REPSSI)
- “Development of a strategy to strengthen social centers through training”
  - Presenter: Daniel Trah Dibi, National Institute of Social Work, Côte d’Ivoire

How can social work education and training programs cater to students who are unable to attend courses full time or to access courses due to location? How can programs recognize and build on knowledge and skills acquired on the job? Representatives from the Regional Psychosocial Support Initiative and Côte d’Ivoire discuss two examples of distance and in-service training programs.

Theme III: Supporting the Workforce

Session 17  
Understanding the role of professional associations – establishing codes of ethics, standards of practice, credentialing and continuing education

Moderator: Amy Bess, National Association of Social Workers, US

Speakers:
- “Challenges faced setting up the Botswana Social Workers’ Association: Implications for social work practice”
  - Kgomotso Jomo Jongman, Botswana Social Workers Association
  - Dr. Pius Mutuku Mutie, Kenya National Association of Social Workers
“The role of the International Federation of Social Workers”
- Charles Mbugua, International Federation of Social Workers

What are the primary functions of professional associations for social workers? What is the benefit of forming or joining a professional association? Representatives from Botswana and Kenya will share their experience establishing and managing professional associations for social workers. A representative from the International Federation of Social Workers will discuss the role of the International Federation of Social Workers (IFSW) in relation to national associations and the resources and support available through IFSW.

Session 18  Mobilizing community support for the social welfare workforce
Moderator: Nankali Maksud, UNICEF Southern and Eastern Africa

Speakers:
- “Community Empowerment as a tool to Strengthening Social Welfare Workforce”
  – Megan Briede, Child Welfare South Africa
- “Extending the reach of Rwandan civil society organizations through community volunteers”
  – Serena Williams, CHF International Rwanda
- “Task sharing through Community Welfare Assistance Committee”
  – Lameck Kanyuka, Ministry of Community Development and Social Services, Zambia

How do community members and civil society organizations support the social welfare workforce? What support structures and mechanisms are necessary to facilitate community support for vulnerable children and recruit community members to the social welfare workforce? Representatives from Child Welfare South Africa, Rwanda’s Higa Ubeho Program, and Zambia’s Ministry of Community Development and Social Services share the advantages and challenges faced when mobilizing key communities to augment the formal social welfare workforce.

11:00-11:30am  Tea Break

11:30-11:45pm  Presentation: Country Team Meetings - Developing Action Plans
   Facilitator: Sarah Johnson, AIDSTAR Two
   Using what we have learned at the conference, how can we more effectively address challenges facing the social welfare workforce?

11:30-12:30pm  Meetings by Country Team - Developing Action Plans

12:30pm-1:30pm  Lunch

1:30pm – 3:00pm  Resource Fair/Resource Market with Tea Break

3:00pm-4:30pm  Meetings by Country Team - Developing Action Plans

4:45pm- 5:00pm  Day’s Wrap-up, Announcements
THURSDAY, 18 NOVEMBER 2010

8:30am - 8:45am  Review of Daily Agenda
8:45am - 9:15am  Plenary Case Study: “Revitalizing a national association of social workers and local social work networks”
                  Speaker: Leonard Mbilinyi, Tanzania Social Workers Association
9:15am-10:15am  Panel Presentation: Creating social welfare workforce champions, fostering advocacy and mobilizing support for workforce plans
                  Moderator: Patricia Lim Ah Ken, UNICEF
                  Speakers:
                  • “Engaging high-level actors and identifying social welfare workforce champions in order to operationalize plans for strengthening the Social Welfare Workforce”
                    - Djeneba Coulibaly-Traore, US Center for Disease Control, Côte d’Ivoire
                  • “Facilitating intra-ministerial dialogue to generate the political will, legislative framework, and resource allocation necessary to strengthen and support the social welfare workforce”
                    - Jeanne Ndyetabura, Ministry of Health and Social Welfare, Department of Social Welfare, Tanzania
                  Who has the power to move forward the Social Welfare Workforce agenda and how do we engage them?
10:15-10:45am  Tea Break
10:45am - 11:45am  Facilitated Discussion: Financing the workforce: The role of government and donors
                    Facilitator: Renee DeMarco, USAID Ethiopia
                    Discussants:
                    • Government : Hellen Macha, Prime Minister’s Office - Regional Administration and Local Government, Tanzania
                    • Multi-lateral Donor: Tom Fenn, UNICEF - ESARO
                    • Bi-lateral Donor: Kirk Felsman, USAID Southern Africa
                    How are the social welfare workforce and efforts to strengthen the workforce financed?
                    Who provides funds and what activities do these funds support?
11:45am -1:00pm  Meetings by Country Team - Developing Action Plans
1:00pm - 2:00pm  Lunch
2:00pm - 3:45pm  Sharing of Country Team Action Plans with Tea Break
                    • Region A: Southern Africa
                      o Botswana, Lesotho, Mozambique, Namibia, South Africa, Swaziland, Zimbabwe
                    • Region B: Western and Central Africa
                      o Côte d’Ivoire, Haiti, Liberia, Nigeria, Rwanda, Vietnam
                    • Region C: Eastern Africa
                      o Ethiopia, Kenya, Malawi, Tanzania, Uganda, Zambia
3:50pm - 4:30pm  Plenary Closing Session: Where do we go from here?
                    Moderator: Gretchen Bachman, USAID
                    Speakers:
                    • “OVCSupport.net: What it can do for you”
                      - Alyson Clark, AIDSTAR-Two
                    • “Conference Reflections”
                      - Selected Conference Participants
                    What have we achieved during the conference? What do we hope to achieve when we return home? What additional resources, technical assistance, and other support are required to further social welfare workforce strengthening efforts at the country level and global level?
4:30pm – 5:00pm  Closing Ceremonies: A Call to Action
Social Welfare Workforce Strengthening Framework:

*A framework for investing in those who care for children*

*Conference Edition*
Introduction

A functioning social welfare system serves as a vital safety net for children and families made vulnerable by HIV/AIDS and other challenging circumstances. When the system is functioning effectively, families and children have access to an array of quality services that promote wellness and protect them from harm. Services can include family support and early intervention, child protection to address abuse and neglect and alternative care for children separated from their family of origin. Historically, the social welfare workforce has played a critical role within social welfare systems, from provision of direct services, to administration of government agencies, policy development, research, workforce education and preparation, and advocacy.

Unfortunately, for many countries around the world, the social welfare workforce is weakened by unclear or overlapping mandates, extremely high need with little to no resource allocation, unclear or conflicting policy and programmatic mandates, little access or availability to quality training and education, and overwhelming demands for social welfare assistance, which has a direct impact on service delivery for children and families made vulnerable by HIV/AIDS. Often times, the end results are detrimental to the overall well-being and safety of children who are underserved, may not be receiving life-saving treatment, support and care services, and are further marginalized.

The President’s Emergency Plan for AIDS Relief (PEPFAR) has prioritized efforts to mitigate the impact of HIV/AIDS on children orphaned or made vulnerable by the disease. Over the past six years, PEPFAR has successfully provided critical support to nearly 4 million children, most of whom live in Sub-Saharan Africa. The second phase of PEPFAR emphasizes strategies intended to improve the sustainability of these initiatives. As a result, there has been a growing interest in strategies to strengthen systems – primarily health systems but also social welfare systems. Likewise, PEPFAR has increased its efforts to strengthen the healthcare and social welfare workforce. PEPFAR has established Technical Working Groups focusing on Health Systems Strengthening and Human Resources for Health and funded several workforce strengthening projects and training programs. Several additional initiatives supported by UNICEF, DFID, and others concerned with the welfare of vulnerable children have contributed to the development of a growing body of knowledge and resources to support efforts to strengthen the social welfare workforce and social welfare systems. The results of these initiatives indicate that successful efforts require a multi-faceted approach, including strategies to improve planning for, development of and support to the social welfare workforce.

One step in this multi-faceted approach involves supporting efforts by country teams to draft a national action plan that will serve as a guide to strengthen the social welfare workforce, and to measure key indicators of success to achieve outcomes. It is important to note that the framework or model proposed in this document is intended only as a guide to support country efforts to strengthen the social welfare workforce and social welfare systems. Ultimately, country ownership will be a driving force in achieving the successful implementation of national action plans.

Defining the Social Welfare Workforce

In this framework document, the term ‘social welfare workforce’ is used throughout. It should be made clear from the outset that this is meant to be an inclusive term, describing the broad variety of different workers – paid and unpaid, governmental and non-governmental – that presently make up the workforce. These workers are called by different titles in different countries, such as social workers, para-social workers, community counselors, community development workers, community health workers, and so on. It is not possible at this point to put forward a few terms that everyone in the field would recognize and agree on, so we are using a more general term. It will be important as the field is strengthened to agree on the social workforce functions. This can inform common definitions with regard to titles. This would also avoid some of the divisive conflicts within some countries over what some of the titles mean.
Country specific context, including social welfare, child protection, justice, education, and health systems, and culture, local legislation, labor market, economy

It is important to note that this framework – like the work of the social welfare workforce – takes place within a country specific context that includes social welfare, child protection, justice, education, and health systems, and cultural, legislative, labor market and economic factors that have an impact on all three areas of the framework. Social workforce strengthening decisions need to be made while taking these contextual factors into consideration. It will be very helpful if plans are built after undertaking an environmental scan that takes into account all these broad and sometimes overlapping aspects of context: national, regional, political, social, cultural and economic contexts with legal and regulatory laws and ordinances, national social welfare, protection, health and education policies and other government as well as donor priorities. This range of characteristics must be considered to effectively design and build viable workforce plans.

Cultural context, in particular, has a significant impact on the social welfare system and thus the work of the social welfare workforce. This context may vary dramatically even within a country. This could involve issues regarding the respective roles that community and families play with respect to vulnerable children. Indigenous practices ought to be considered in different parts of the system, but might be especially important in planning for the training and education of workers, as well as in how they are supported.

The “labor market” refers to the market in which workers compete for jobs and employers compete for workers. And just like other workers, social workers are active agents in the prevailing labor market, and they respond to both pressures and incentives to decide where they want to work, who they want to work for and for how much pay. As such, it is important to carry out some sort of analysis of the labor market to establish the likely source of social welfare workers and to determine the reasons for turnover within the present workforce. This is especially important considering that, in some countries, the workforce includes a large contingent of unpaid workers – even bringing up the issue of whether the term ‘workforce’ applies in this situation.

Finance remains a critical crosscutting issue in planning, developing and supporting the social welfare workforce. It is the least resourced and recognized workforce, often without a grading system, salary structure, and not always supported by their own governments. In countries where the economy is low performing, this situation is exacerbated and must be taken into account when planning workforce strengthening initiatives and to ensure long-term sustainability. In these situations, donors often play a key role, and the ways in which that role gets played also needs to be considered.

Activities to Plan the Social Welfare Workforce:

* Adopt a strategic approach to planning the social welfare workforce
  * Identify human resources requirements and costed plans to carry out national legislation and policy for meeting the needs of highly vulnerable children
  * Determine the current composition of the social welfare workforce (e.g., numbers and distributions)
  * Carry out periodic workforce assessments to identify gaps in human resource requirements
  * Promote appropriate workforce realignment and task shifting among different cadres of social workers and through decentralization of appropriate social welfare responsibilities
  * Create stronger, effective links with the social welfare workforce education and training system to address future workforce needs
  * Strengthen mechanisms and capacity for financing, accountability and producing costed plans
Collect and share HR data and promote data-driven decision making

- Build and strengthen Human Resources Information Systems (HRIS) – bring key stakeholders together to identify where sound social welfare workforce data exist, to discuss gaps and shared data needs, and agree on requirements of an HRIS
- Establish and use common definitions and functions across multiple disciplines (e.g., social worker, community worker, para-social worker, social work assistant)
- Set up systems for monitoring progress to create a feedback loop for future planning
- Determine costs and budgets for utilizing useful technological resources to share timely and accurate data and information

Improve recruitment, hiring, and deployment practices and systems that take into account urban, peri-urban, and rural areas and decentralization plans

- Recruit individuals into various certificate, diploma and degree social work education/training programs
- Use a competency model to develop clear job descriptions for social welfare workforce cadres
- Establish fair, transparent, and efficient practices for recruiting, hiring, and promoting for social workers and para-social workers and others in the social welfare workforce
- Create or strengthen systems for hiring and deploying social workers to underserved areas; engage community leaders in helping to transition new social workers into their work

Build alliances to strengthen leadership and advocacy among broad range of stakeholders

- Advocate for intra-ministerial dialogue and coordination at central and district levels to generate the political will, legislative frameworks, and resource allocation to strengthen and support the social welfare workforce
- Develop a national advocacy agenda for the social welfare workforce, identifying the roles and responsibilities for government and non-government, national and local stakeholders in efforts to implement the agenda; this includes advocating to emphasize the work and for increased financial commitments to the social welfare system
- Solicit input from the social welfare workforce and the communities that it serves to contribute national and local advocacy agenda and social welfare workforce strengthening strategies
- Identify champions and leaders who are willing and able to work together to advocate for needed change

Activities to Develop the Social Welfare Workforce:

Align education and training for the social welfare workforce with effective workforce planning efforts

- Develop social work pre-service education and in-service training programs to address gaps identified by workforce assessments
- Use competency based job descriptions to develop appropriate social work education and training programs for specific social welfare workforce cadres
- Identify ways to ‘fast track’ social welfare education and training to meet urgent and critical needs
- Ensure information from education programs (i.e. number of expected graduates, what level, gender and home region) is fed into the Human Resource Information System
- Develop capacity to plan, budget and advocate for needed resources to make improvements to the pre-service education and in-service training system
Ensure curricula incorporate both local/indigenous knowledge as well as international best practices for improving the well-being of children and families

- Conduct periodic curricula reviews by recognized experts as well as local practitioners and develop new curricula, as needed
- Promote best practices and curricula that focuses on indigenous knowledge and culturally competent methods of practice; that strengthens the capacity of social welfare workers to utilize best practices within their communities (e.g. community-based care)
- Allow for both standard curricula to enable students to achieve social work qualifications as well as electives to promote innovation and diversity

Strengthen faculty and teaching methods

- Establish competency standards for social work educators and periodically assess their performance against standards
- Encourage social work education programs to send faculty and professionals for regional and international exchanges; as well as host international faculty in order to learn new perspectives and approaches and promote exchange of ideas and best practices
- Require internships/field placements for social work students prior to graduation and promote field placements for para-professionals.

Provide broad range of in-service professional development opportunities for workers

- Organize flexible courses and/or internet or smart phone based courses (where practical) for workers or volunteers living in remote areas or unable to leave their employment for full-time study
- Establish specialized credentials and in-country credentialing systems
- Encourage social welfare workers access to additional in-service coursework and test-based credentials in order to achieve advanced credentials
- Expand access to diploma and degree programs for social welfare workers
- Facilitate ways to recognize non-formal and on-the-job learning (e.g., by offering competency based assessments)

Activities to Support the Social Welfare Workforce:

Develop or strengthen systems to improve and sustain social welfare workforce performance

- Improve mechanisms (including leadership development) for supervising and managing the social welfare workforce; seek out any special mechanisms that may be needed for volunteers
- Create guidelines for formal induction of staff, including formal orientation program, and peer mentorship from seasoned staff
- Improve systems for measuring social welfare workforce effectiveness (e.g., performance evaluations, measuring deliverables based on clear and realistic job descriptions with clear expectations and timeframe, performance feedback, etc.)
- Solicit input from community members and clients on service delivery and quality
- Provide incentives for high performing social workers and develop and implement performance improvement plans for poor performing workers
- Develop standard operating procedures for more coordinated and comprehensive services between national and district governments for children and families (e.g. better tracking and documentation of services, referrals, and ongoing support for children and families)
Develop tools, resources, and initiatives to improve job satisfaction and retention

- Solicit and implement ideas from social welfare workers for improving the workplace conditions aimed at enabling them to carry out their responsibilities more effectively
- Provide the social welfare workforce with the tools and resources that they require to carry out their jobs to the best of their ability, particularly in under resourced rural settings (e.g. vehicles and fuel, offices, computer, printer, copier, phones or phone cards, etc.)
- Consult with social welfare workers and volunteers to identify ways to acknowledge achievements or incentives and (merit-based) promotions to provide for individuals who stay with organizations for longer periods of time
- Solicit data from volunteers about what would motivate them, and implement interventions to the extent possible (e.g. explore possibility of providing stipends to volunteers for travel and other applicable expenses, subsidized access to training)
- Develop viable career ladders for workers and mobilize support for these among employers, funders and other appropriate stakeholders
- Ensure adherence to International and national labor policies, legislation & regulations for conditions of employment and workplace standards (e.g. salaries, case loads, working conditions, gender discrimination, medical benefits/insurance plans, etc.)
- Engage in on-going monitoring to measure progress of job satisfaction and retention interventions and make appropriate changes based on evidence.

Support professional associations in their efforts to enhance the professional growth and development of the social welfare workforce

- Strengthen professional social work associations where they exist and support the establishment of new ones
- Encourage networking and mutual support among social welfare workforce professionals (e.g., communities of practice list serves, electronic job postings, job fairs, social media )
- Support ongoing development and updating of association-based professional standards and codes of ethics for the social welfare workforce
- Advocate for and encourage adherence to professional standards and ethics for the social welfare workforce
- Issue positions, and policy statements in addition to lobbying decision makers on behalf and in support of the social welfare workforce
ANNEX 3: COUNTRY TEAM ACTION PLANS

(note that complete Country Team Action Plans are also available on www.OVCSupport.net)
### Name of team: Botswana

**Date:** 18 November 2010

#### Challenge 1:
*How can we improve the human resource management practices to strengthen the SWW for efficient service delivery in light of multiple employers, absence of an accreditation system and HRIS?*

**Measurable Results:**
- Definition of who the SWW is.
- National assessment of the SWW for OVC (capacity gap analysis).

**Indicators:**
1. OVC TWG functioning
2. Definition of SWW completed
3. Capacity assessment completed

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make appointment to meet with the Department of Social Services management.</td>
<td>DSS National OVC Coordinator</td>
<td>1st week December</td>
<td>None</td>
</tr>
<tr>
<td>Make appointment to meet with the Permanent Secretary in the Ministry of Local Government (MLG).</td>
<td>Director – DSS</td>
<td>2-3rd week of December</td>
<td>None</td>
</tr>
<tr>
<td>Resuscitate OVC TWG.</td>
<td>National OVC Coordinator</td>
<td>End of January 2011</td>
<td>None</td>
</tr>
<tr>
<td>Definition of terms – SWW.</td>
<td>OVC TWG - Chairperson</td>
<td>End of March 2011</td>
<td>Refreshments</td>
</tr>
<tr>
<td>Conduct capacity (gap) analysis of SWW.</td>
<td>OVC TWG - Chairperson</td>
<td>End of June 2011</td>
<td>$$</td>
</tr>
</tbody>
</table>

#### Challenge 2:
*How can we achieve quality standard operating procedures for coordinated and comprehensive service delivery in light of multiple players to service delivery?*

**Measurable Result:**
- Standards of practice developed and adopted by the responsible ministry/ministries.
- Dissemination of completed standards of practice.

**Indicators:**
1. Reference group constituted.
2. Terms of reference developed.
3. Consultant recruited/hired.

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Constitute a reference group.</td>
<td>MLG/DSS OVC Coordination</td>
<td>End of March 2011</td>
<td>None</td>
</tr>
<tr>
<td>Develop terms of reference for the consultant.</td>
<td>Reference Group</td>
<td>Mid April 2011</td>
<td>None</td>
</tr>
<tr>
<td>Recruit and engage a Consultant.</td>
<td>Reference Group</td>
<td>Mid May 2011</td>
<td>$$</td>
</tr>
<tr>
<td>Develop the Standards Operating Procedures (SOP’s).</td>
<td>Consultant</td>
<td>End of August 2011</td>
<td>$$</td>
</tr>
</tbody>
</table>
**Name of team: Côte d’Ivoire**

Date: 17 November 2010

**Challenge 1:**
How can we achieve more adequate training of professional and informal social welfare workforce in the light of insufficient coordination of training strategy for all at the national level, according to their roles?

**Measurable Result:**
Revise/produce two training modules according to identified competencies, gaps and needs to reinforce quality of training and increase numbers of social welfare workforce (professional and informal workers) in 12 months.

<table>
<thead>
<tr>
<th>Activities</th>
<th>Organization/Institution</th>
<th>Time Period</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>1- Analyze gaps and trend results of the 32 districts OVC situation analyses so as to assess demand.</strong></td>
<td>PNOEV</td>
<td>January to March</td>
<td>Funding; consultant and collaboration DPED, PNOEV – TWG C-ROS</td>
</tr>
<tr>
<td><strong>Write TOR for the analysis process</strong></td>
<td>PNOEV, PEPFAR, UNICEF</td>
<td>January 2011</td>
<td>Human Resources</td>
</tr>
<tr>
<td><strong>Recruit consultants for analysis</strong></td>
<td>PNOEV</td>
<td>January to February 2011</td>
<td>Human Resources</td>
</tr>
<tr>
<td><strong>Validate national consolidated analysis report with C-ROS</strong></td>
<td>PNOEV</td>
<td>February to March 2011</td>
<td>Financial Resources</td>
</tr>
<tr>
<td><strong>Produce national document with recommendations for competencies to address needs</strong></td>
<td>PNOEV consultant</td>
<td>February to March 2011</td>
<td>Financial Resources</td>
</tr>
<tr>
<td><strong>Disseminate and advocate for use of national document in HRH planning</strong></td>
<td>PNOEV</td>
<td>March 2011</td>
<td>Financial Resources</td>
</tr>
<tr>
<td><strong>2- Advocate for recruitment of qualified social welfare workforce (professional and para-professionals)</strong></td>
<td>PNPEC, MLS, PNOEV, MoF, MFFAS</td>
<td>January to June 2011</td>
<td>TWG for core competencies – including INFS and INFAS</td>
</tr>
<tr>
<td><strong>Finalize and validate the current draft national guide for harmonizing actions of community actors, based on lessons learned from SWWC</strong></td>
<td>Social Welfare Champions, PNPEC, MFFAS</td>
<td>February to March</td>
<td>Human resources: C-ROS (2), INFS (1)</td>
</tr>
<tr>
<td><strong>Disseminate the validated national guide on community interventions</strong></td>
<td>PNPEC</td>
<td>March 2011</td>
<td>Technical implementing partners</td>
</tr>
<tr>
<td><strong>Advocate for a national decision for use of lay counselors connecting to official health structures</strong></td>
<td>PNPEC – for health section, MLS for coordination, PNOEV for informal social workers and MoF for workforce planning coordination</td>
<td>March to December 2011</td>
<td>Financial Resources: Donors (PEPFAR, UNICEF), civil society networks</td>
</tr>
<tr>
<td><strong>Advocate for clarification of the role and supervision of lay counselors</strong></td>
<td>PNOEV, PNPEC, MLS &amp; donors</td>
<td>February to March</td>
<td>Human Resources: DGS and Dir CAB</td>
</tr>
<tr>
<td><strong>Advocate for creation of a para-professional staff or effective financial support</strong></td>
<td>Same</td>
<td>January to December 2011</td>
<td>Ministry of Fonction Publique and Ministry of Finance</td>
</tr>
</tbody>
</table>
Advocate for more recruitment of professionals social workers as civil servants (from 34 to 60%) **

**MFFAS, Association of Social Workers**  
January to December 2011  
Financial Resources: Donors (PEPFAR, UNICEF), partners

### Challenge 2:
How can we strengthen the informal community social worker given the high turnover rate and little visibility?

**Measurable Result:**

By 48 months, 80% of the 1,700 informal community social workers are retain more than 3 years

**Indicators**

- Availability of a summary document of good practices in community work
- Availability of national guidance on community work-roles/services
- % of community workers who use national guidance on community work-roles/services
- The number of memorandum of argument are signed with local governments for allocation to sustain community workers

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Activity 1: summary document of good practices in community work by actors to increase visibility of the importance and value of community workers is produced within 09 months</td>
<td><strong>Elaborate a TOR to document community best practices</strong></td>
<td>MSW</td>
<td>January 2011</td>
</tr>
<tr>
<td></td>
<td><strong>Collect best practices on the field</strong></td>
<td>MSW</td>
<td>February to March 2011</td>
</tr>
<tr>
<td></td>
<td><strong>Validate best practices document with all stakeholders</strong></td>
<td>MSW</td>
<td>April 2011</td>
</tr>
<tr>
<td></td>
<td><strong>Produce a summary document of good practices in community work by actors</strong></td>
<td>MSW</td>
<td>June 2011</td>
</tr>
<tr>
<td></td>
<td><strong>Disseminate the summary document of good practices in community work by actors</strong></td>
<td>MSW</td>
<td>August 2011</td>
</tr>
</tbody>
</table>

**Activity 2: national guidance on community work-roles/services is revised produced /disseminated within 12 months**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Review and update the current national guidance on community work-roles/services</strong></td>
<td>MSW</td>
<td>February 2011</td>
<td>Human Resources, Financial Resources</td>
</tr>
<tr>
<td><strong>produce the national guidance on community work-roles/services</strong></td>
<td>MSW</td>
<td>April 2011</td>
<td>Financial Resources</td>
</tr>
<tr>
<td><strong>disseminate national guidance on community work-roles/services</strong></td>
<td>MSW</td>
<td>June 2011</td>
<td>Logistic Resources</td>
</tr>
</tbody>
</table>

**Activity 3: 32 memorandum of understanding are developed and signed with local governments to ensure adequate allocation of resources to sustain community workers**

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Elaborate data base fact sheet of 32 OVC “plate form”</strong></td>
<td>MSW</td>
<td>March to June 2011</td>
<td></td>
</tr>
<tr>
<td><strong>Conduct advocacy activities among local government in the 32 districts with OVCS plate form</strong></td>
<td>MSW</td>
<td>July to December 11</td>
<td>Logistic Resources, Human Resources, Financial Resources</td>
</tr>
<tr>
<td><strong>Sign a memorandum of understanding with local governments in 32 districts</strong></td>
<td>MSW</td>
<td>July to December 11</td>
<td>Logistic Resources</td>
</tr>
</tbody>
</table>
### Name of team: Ethiopia

**Date:** 18 November 2010

#### Challenge:

1. Lack of coordination mechanisms and leadership in the social welfare
2. Limited availability and access to social welfare services

#### Measurable Result:

- A coordinated mechanism of system of social welfare service provision at Federal, regional and local administrative levels
- Availability and accessibility of Social welfare services to vulnerable children and families

#### Indicators:

1. Identified, legitimate body that will coordinate the social welfare service system
2. Inter-ministerial coordination mechanism established with agreed Terms of Reference
3. Revised and approved National developmental social welfare policy that recognizes social welfare workforce roles and responsibilities
4. National operational plan of social welfare services adopted together with accompanying tools (code of practice)
5. Number of children and households accessed social welfare services
6. Number of social workers placed to provide and facilitate the provision of social welfare services
7. Secured budget allocation for the operation of social welfare workforce.

<table>
<thead>
<tr>
<th>Activities</th>
<th>Other Partners</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Result 1</td>
<td>Social welfare services are provided to vulnerable children and families</td>
<td>Ministry of Labor and Social Affairs and Ministry of Women, Children and Youth Affairs</td>
<td>Higher learning Institutions (AAU, School of Social Work, and other Universities offering trainings at different levels)</td>
</tr>
<tr>
<td>functions of government defined at all levels</td>
<td>UNICEF</td>
<td>MoLSA and MoWA</td>
<td></td>
</tr>
<tr>
<td>cross walk HEW model with social welfare service division HR scheme</td>
<td>USAID</td>
<td>MoLSA and MoWA, and region bureaus</td>
<td></td>
</tr>
<tr>
<td>Pilot test coordinated care model for service provision</td>
<td>School of Social work/Twinning Center</td>
<td>MoLSA and MoWA</td>
<td></td>
</tr>
<tr>
<td>Pre-and in- service training curriculum standardized among UNICEF, PEPFAR and other partners</td>
<td>School of Social work/Twinning Center</td>
<td>MoLSA and MoWA</td>
<td></td>
</tr>
<tr>
<td>Initiation of accreditation process for social worker professionals and para-professionals</td>
<td>AAU School of Social Work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Start/Strengthen association for social welfare workers</td>
<td>AAU School of Social Work</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Conduct HR assessment of government ministries overseeing placement and retention of social welfare service providers</td>
<td>AAU/UNICEF</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

*Social Welfare Workforce Strengthening Conference Report*
| Setup data management system on service provision | USAID/UNICEF | MoLSA and MoWA |
| Review family folders for inclusion of social services | AAU | Ministry of Health |
| Performance standards articulated for professional and para-professional social welfare service providers | USAID/UNICEF | AAU School of Social Work |

**Result 2  Governance and Coordination mechanism in place regarding social welfare service provision at national level**

| Organize consultative meeting for defining the scope and responsibility of the coordination mechanism | MoLSA and MoWA | UNICEF and USAID |
| Develop Terms of Reference for the multi-sectoral Coordination structure | AAU School of Social Work | MoLSA and MoWA |
| Adopt an MoU articulating the roles and responsibilities of members of the coordinating body | AAU School of Social Work | MoLSA and MoWA |
| Support the revision of the developmental social welfare policy to ensure recognition of social welfare workforce | UNICEF | MoLSA and MoWA |
| Develop operational plan together with the tools (code of practice, etc) | AAU School of Social Work | MoLSA and MoWA |
| Conduct national assessment/mapping of educational, human resource and operation of the social welfare workforce to identify prevailing needs and gaps | MoLSA and MoWA | AAU School of Social Work |
**Name of Team: Haiti**

**Date:** 17 November 2010

**Challenge 1:** Lack of a national level social welfare workforce framework

*Desired results:* By completion of the first national conference of government, civil society and international stakeholders that will develop a multi-sectoral framework and vision for SWW workers in the protection of children that is agreed upon and disseminated for immediate use.

**Challenge 2:** Lack of dedicated funding for social welfare workforce programming by the Government of Haiti and the International Community

*Desired results:* Within six months, the Interim Haiti Reconstruction Commission prioritizes SWW programming interventions; within six months, Government of Haiti agrees to dedicate x% of the national budget to SWW programming and related ministries.

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person/Organization Responsible</th>
<th>Start/End Date</th>
<th>Resources</th>
<th>Activity complete? Date/ Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>By January, completion of the first meeting of government, civil society and international stakeholders that will discuss and outline the Action Plan to achieve a multi-sectoral SWW framework and vision for SWW workers with a focus on children</td>
<td>MAST and FASCH with support from Save the Children, UNICEF, USAID Participants: MAST, IBESR, Justice including BPM, Women’s Affairs, Education, Plan, MSPP, IHRC, local NGOs, international NGOs, Church leaders, representatives of certain residential care centers, other donors (EU, DFID, CIDA)</td>
<td>Meeting to be held by January 31, 2011</td>
<td>Technical support to be provided by Save the Children, UNICEF, and USAID</td>
<td></td>
</tr>
<tr>
<td>Joint inter-agency concept paper on reform to SWW to be circulated, and feed into the IHRC’s planning which includes Social Protection and Human Rights – Need to get SWW and children on the agenda. Including costing on Social Welfare Provision of services and staffing</td>
<td>John Williamson, Christina Torsein, Tamika Allen, with sign off from MAST and Plan</td>
<td>Final draft available December 5, 2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Advocacy regarding the national budget and need for specific and substantive funding for SWW – to MAST, Justice, Health, Plan, etc. (inter-ministerial).</td>
<td>Ministry of Plan (leading on Social Protection) UNICEF and USAID</td>
<td></td>
<td>Role of DFID</td>
<td></td>
</tr>
<tr>
<td>Hold meeting with Economic Growth and Agriculture actors on Household Economic Strengthening and Workforce Development to decide on best household level interventions to promote family preservation</td>
<td>USAID IHRC Cardno Emerging Markets</td>
<td>January 31, 2011</td>
<td>The Economist</td>
<td></td>
</tr>
<tr>
<td>Alternative Care is an integral component of social welfare strengthening and given the inordinate number of orphanages and crèches, there is a serious need to conduct national analysis of alternative care with a particular focus on residential care, with a view towards transforming the existing system towards a family care approach. Alternative Care is integral</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Task</td>
<td>Responsible Parties</td>
<td>Status/Notes</td>
<td></td>
<td></td>
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<td>----------------------------------------------------------------------</td>
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<td>------------------------------------------------------------------------------</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Encourage shift in business model regarding residential care centers becoming vocational training centers/schools, and promoting family reunification.</td>
<td>MAST, IEBSR, HNP, BPM, Affaires Fem, MSPP</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Decentralization of Government services related to social welfare. Ongoing, need to further outline a plan to get to scale, keeping in mind challenges of support, and long term sustainability.</td>
<td>UNICEF Haiti and MAST</td>
<td>completed by end of January 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Mapping of Social Welfare Service provision and workforce</strong> planned, resource needs, and services available.</td>
<td>USAID Haiti and implementing partner</td>
<td>By 6 December 2010</td>
<td></td>
<td></td>
</tr>
<tr>
<td>USAID meeting with PEPFAR OVC Team and Governance to discuss forthcoming human resource assessment (Gov Office)</td>
<td>UNICEF Haiti</td>
<td>1st week of December</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Possible UNICEF HQ mission to look at CP processes put in place for Separated Children, would include SWW planning (ideally broader ToR) – link between all this work, collaboration and partnership.</td>
<td>USAID Haiti and Legislative and Parliamentary Support Partner UNICEF MINUSTAH</td>
<td>Ongoing support, voted on during the next session of Parliament in 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Provide legislative and policy support to MoJ to ensure passing of social welfare legislation— TIPs, People Living with HIV/AIDS, Integration of People with Disabilities</td>
<td>USAID Haiti and Legislative and Parliamentary Support Partner UNICEF MINUSTAH</td>
<td>Ongoing support, voted on during the next session of Parliament in 2011</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Legislation and policy directives are revisited to ensure that the current practice of Social Work and Social Welfare in Haiti is both relevant and timely; includes revision of licensing and certification of para-professionals and professionals</td>
<td>MAST Ministry of Planning Ministry of Education USAID Haiti and Legislative and Parliamentary Support Partner UNICEF</td>
<td>Ongoing support, voted on during the next session of Parliament in 2011</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
**Name of Team: Kenya**  
Date: 17 November 2010

**Priority Challenge 1: PROFESSIONAL TRAINING**  
Current situation: Multiple level training; inadequate training opportunities, inappropriate skills; mismatch between curriculum, placement and cultural context; no career growth, no HR assessment

Measurable Result: A curriculum that is responsive to the Kenyan context developed for volunteer SWWF by Dec. 2011

Priority Actions: Curriculum Review, TNA, Identification of traditional knowledge (re)sources

**Priority Challenge 2: INADEQUATE resources**  
Current situation: Low allocation (Kshs.1.6 b) relative to other sectors despite increased allocation; inadequate numbers of child care workers and facilities

Measurable Result: Increase of financial allocation on children matters from XXX to YYY by Dec 2011

Priority Actions: Partner coordination mechanism; HR assessment; identification & support of champions; costed needs of SWWF for negotiation with MoF and DPK
## Name of team: Lesotho

**Date:** 17 November 2010

**Challenge:** How can we strengthen the capacity of 50 child welfare officers at DSW in the light of emerging child protection issues?

**Measurable Result:** By the end of 2011, the Lesotho team will have ensured conceptualization of the training format, collection and adaptation of training tools and implementation of the in-service training.

**Indicators:**
1. Training format/content in place
2. Training tools assembled and adapted.
3. Number of DSW staff who received training.
4. Number of DSW trainees provided with supervision.

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Set up a training task force and develop TORs.</td>
<td>PS DSW</td>
<td>Jan 2011</td>
<td>Human and financial resources</td>
</tr>
<tr>
<td>Design materials, collating and reviewing existing materials and adapting available materials if need be.</td>
<td>Task Team</td>
<td>Jan – March 2011</td>
<td>Human and financial</td>
</tr>
<tr>
<td>Train 40 DSW staff</td>
<td>Task Team</td>
<td>May, July and September 2011</td>
<td>Human and Financial</td>
</tr>
<tr>
<td>Supervise trained staff</td>
<td>Task Team</td>
<td></td>
<td>Human and Financial</td>
</tr>
</tbody>
</table>

**Challenge:** How can we regulate establishment of child welfare organizations for purposes of enhancing the quality of services provided?

**Measurable Result:** Development of guidelines for regulation, accreditation and supervision of child welfare organizations by 2011.

**Indicators:** Guidelines developed by Dec 2011

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Setting up a team and developing TORs</td>
<td>Principal Secretary Social Welfare</td>
<td>Dec 2010 to Jan 2011</td>
<td></td>
</tr>
<tr>
<td>Hire a consultant to facilitate the drafting of guidelines.</td>
<td>PS Social Welfare</td>
<td>April 2011</td>
<td>Human and financial</td>
</tr>
<tr>
<td>Drafting of guidelines for accreditation and supervision</td>
<td>Consultant</td>
<td>April to July 2011</td>
<td>Human and financial</td>
</tr>
<tr>
<td>Gazetting the guidelines</td>
<td>PS Social Welfare (Legal Dept)</td>
<td>Sept 2011</td>
<td>Human and Financial</td>
</tr>
</tbody>
</table>
### Name of team: Malawi

#### Date: 17 November 2010

**Priority Challenge 1: Current cadre of social workers not well trained**

<table>
<thead>
<tr>
<th>Measurable result</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Upgrading of current cadre of social workers to diploma level commences by September 2011</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current situation</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Ad hoc, outdated training</td>
<td>• Underdevelopment curriculum</td>
</tr>
</tbody>
</table>

| Priority actions                                                                 | Action-10% (60) current cadre of SW enrolled in Diploma/degree programme |

**Priority Challenge 2: No institutional framework or strategy for social work**

<table>
<thead>
<tr>
<th>Measurable result</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Social welfare policy, strategy and plan developed by Sept 2011</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Current situation</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• No comprehensive social welfare policy</td>
<td>• Fragmented response</td>
</tr>
<tr>
<td>• No clear institutional role and responsibilities</td>
<td>• No career path</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Priority actions</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>• Conduct situation analysis</td>
<td>• Develop policy, strategy and action plan in social welfare</td>
</tr>
</tbody>
</table>
## Name of team: Mozambique

**Date:** November 2010

**Challenge:** Weak coordination and monitoring of capacity at all levels, but specifically at district level

**Measurable Result:**
- Increased percentage of filled vacancies within MMAS filled at the various levels.
- Increased percentage of students graduated in social work.

**Indicators**
- % decrease of unfilled vacancies
- % increase in number of qualified social welfare workforce
- Improve the management capacity, motivation, and retention of health and social worker
- Functional HRIS implemented and in use (needs operationalization)
- Ratio of population to professional health technician (clarify cadres)

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Present action plan to MMAS</td>
<td>MMAS, with team support</td>
<td>1st week December</td>
<td>None</td>
</tr>
<tr>
<td>Undertake the capacity and needs analysis at district level around social welfare, including mapping formal and informal work force</td>
<td>MMAS</td>
<td>January – April 2011</td>
<td>USD 100,000 – USD 150,000</td>
</tr>
<tr>
<td>The human resources assessment tool, which would be undertaken by and within MMAS, to be discussed within MMAS for their interest.</td>
<td>MMAS</td>
<td>January – April 2011</td>
<td>USD 50,000</td>
</tr>
<tr>
<td>Undertake a costing exercise and analysis of human resource needs to implement the revised Plan of Action for Children/OVC</td>
<td>MMAS</td>
<td>January – March 2011</td>
<td>USD 50,000</td>
</tr>
<tr>
<td>Develop a coordination group for donors on social welfare strengthening</td>
<td>USAID</td>
<td>Current – February 2011</td>
<td>None</td>
</tr>
</tbody>
</table>

**Challenge 2:** Weak social welfare workforce, in terms of quality and number of trained personnel

**Measurable Result:**
- Availability of relevant accredited pre-service training at university and vocational levels
- Updated certificate courses for in-service training

**Indicators**
- Existence of BA degree programme on social work
- Existence of updated training materials for vocational pre-and in-service levels.
- Number of community health and para-social workers who successfully completed a pre-service training program (Subset: Para-Social Workers)
- Number of health care workers being supported in a pre-service training institution (Subset: Social Workers)
- Number of new health care workers who graduated from a pre-service training institution (Subset: Social Workers)

<table>
<thead>
<tr>
<th>Activities</th>
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<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Introduce a BA degree in social work at the University of Eduardo Mondlane, with the possibility of ‘twinning’ support provided by an external university</td>
<td>UEM</td>
<td>Current – February 2012</td>
<td>USD 500,000</td>
</tr>
<tr>
<td>Task</td>
<td>Organization(s)</td>
<td>Timeframe</td>
<td>Status</td>
</tr>
<tr>
<td>---------------------------------------------------------------------</td>
<td>-----------------</td>
<td>-------------------------</td>
<td>--------</td>
</tr>
<tr>
<td>Roll-out an accredited certificate programme on child and youth carers from REPSSI</td>
<td>UEM</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Update and approve materials for pre-service training at vocational (medium) level.</td>
<td>Deloitte, UEM, USAID, MMAS</td>
<td>Current-July 2011</td>
<td>None</td>
</tr>
<tr>
<td>Continuously update skills and knowledge of personnel, where and when relevant.</td>
<td>MMAS</td>
<td>Ongoing</td>
<td>Dependent on course</td>
</tr>
</tbody>
</table>
**Name of team: Namibia**

**Date: 17 November 2010**

<table>
<thead>
<tr>
<th>Challenge: Fragmented and uncoordinated social welfare response</th>
</tr>
</thead>
</table>

<table>
<thead>
<tr>
<th>Measurable Result:</th>
</tr>
</thead>
<tbody>
<tr>
<td>• POA developed and consensus reached towards multi-sectoral social welfare coordination and cohesiveness</td>
</tr>
<tr>
<td>• Consensus reached on process to develop wellness support system for social welfare workforce practitioners</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Indicators</th>
</tr>
</thead>
<tbody>
<tr>
<td>• Plan of action developed</td>
</tr>
<tr>
<td>• TOR finalized</td>
</tr>
<tr>
<td>• Process plan developed on wellness support system</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Taskforce constituted to draft plan</td>
<td>MOHSS</td>
<td>27 January 2011</td>
<td>Venue</td>
</tr>
<tr>
<td>Concept note developed to document problems regarding coordination and fragmentation</td>
<td>MOHSS, MGECW, USAID, UNICEF, CAFO, UNAM (Task Force)</td>
<td>27 January 2011</td>
<td>Each team compiles issues related to sector paper for the meeting</td>
</tr>
<tr>
<td>Develop TOR and clear roles, responsibilities and mandate of task team</td>
<td>MOHSS, MGECW, USAID, UNICEF, CAFO, UNAM (Task Force)</td>
<td>End February 2011</td>
<td></td>
</tr>
<tr>
<td>Identify key activities to achieve measurable results and reach consensus</td>
<td>MOHSS, MGECW, USAID, UNICEF, CAFO, UNAM Taskforce</td>
<td>February – March 2011</td>
<td></td>
</tr>
</tbody>
</table>

NB: In process to establish a steering committee to develop Social Development Policy to address e.g. Fragmentation, etc
Name of team: Nigeria

Date: 17 November 2010


Challenge:

How can we achieve a strong and effective Social Welfare Workforce in the light of a lack of regulatory mechanism for the Social Welfare Workforce and System in Nigeria?

Measurable Result:

6 months result: Report on Assessment of HR Structure, Function and competencies on:

1. social work education and training
2. child protection services

1 year result: Action plan on developing a systematic approach to Social welfare

Indicators

- Assessment reports guiding decisions
- Preparation and dissemination of Nationally endorsed Road Map
- National and State implementation plans
- Feedback from Stakeholders

<table>
<thead>
<tr>
<th>Activities</th>
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</thead>
<tbody>
<tr>
<td>Identify the different stakeholders – Ministry, Departments &amp; Agencies,</td>
<td>TWG</td>
<td>26th November 2010</td>
<td></td>
</tr>
<tr>
<td>Academia, NGOs, Development partners, Associations etc</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Brief the Hon. Minister of Women Affairs</td>
<td>TWG</td>
<td>23rd November 2010</td>
<td></td>
</tr>
<tr>
<td>Hold a Consensus building forum with the Stakeholders</td>
<td>TWG</td>
<td>2nd week January 2011</td>
<td></td>
</tr>
<tr>
<td>Develop a Road Map</td>
<td>TWG &amp; Stakeholders</td>
<td>2nd week January 2011</td>
<td></td>
</tr>
<tr>
<td>Share the road map with identified stakeholders</td>
<td>TWG</td>
<td>3rd week January 2011</td>
<td></td>
</tr>
<tr>
<td>Engage consultants to gather available information on SWWD in Nigeria.</td>
<td>Ola</td>
<td>December 2010</td>
<td></td>
</tr>
<tr>
<td>Finalize Selection criteria for Pilot States</td>
<td>TWG</td>
<td>3rd December 2010</td>
<td></td>
</tr>
<tr>
<td>Review the membership of existing task force</td>
<td>Noriko, Philo Mari, Oby</td>
<td>26th November 2010</td>
<td></td>
</tr>
<tr>
<td>Finalize SOW for Capacity Plus</td>
<td>Philo, Mari, Noriko</td>
<td>03 December 2010</td>
<td></td>
</tr>
<tr>
<td>Engage Capacity Plus for Comprehensive Situational Assessment</td>
<td>Revised TWG</td>
<td>4th week January 2011</td>
<td></td>
</tr>
<tr>
<td>Plan the Situational Assessment</td>
<td>Revised TWG and Capacity Plus</td>
<td>January 2011-February 2011</td>
<td></td>
</tr>
<tr>
<td>Conduct Situational Assessment of Social Welfare Workforce Gap Analysis in selected States</td>
<td>Capacity Plus and in-country partner (tbd)</td>
<td>Feb-Apr 2011</td>
<td></td>
</tr>
<tr>
<td>Conduct Child Protection System Mapping</td>
<td>Noriko, TWG and Consultant</td>
<td>February-July 2011</td>
<td></td>
</tr>
<tr>
<td>Engage Chairpersons of Senate and House</td>
<td>TWG</td>
<td>June 2011</td>
<td></td>
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</tbody>
</table>
Committees on Women and Children

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Share findings with Stakeholders</td>
<td>TWG</td>
<td>August 2011</td>
<td></td>
</tr>
<tr>
<td>Develop Action Plan</td>
<td>TWG</td>
<td>September 2011</td>
<td></td>
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</tbody>
</table>


Challenge:
How can we achieve a regulated social welfare workforce in the light of a lacking Political and Financial commitment and buy-in for social welfare system at all levels of Government in Nigeria?

Measurable Result:
1. 6 months result: Available Advocacy information (budget, vision, situation analysis and estimated needs) to engage with Government and other stakeholders at different levels
2. Buy-in of all Stakeholders in the Nigerian Social Welfare System

<table>
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</thead>
<tbody>
<tr>
<td>Identify the different stakeholders – Ministry, Departments &amp; Agencies, Academia, NGOs, Development partners, Associations etc</td>
<td>TWG</td>
<td>26th November 2010</td>
<td></td>
</tr>
<tr>
<td>Develop a communiqué/ Advocacy information package</td>
<td>TWG</td>
<td>26th November 2010</td>
<td></td>
</tr>
<tr>
<td>Brief the Hon. Minister of Women Affairs</td>
<td>TWG</td>
<td>23rd November 2010</td>
<td></td>
</tr>
<tr>
<td>Hold a consensus building forum with the stakeholders</td>
<td>TWG</td>
<td>2nd week January 2011</td>
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<td>Develop a road map</td>
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<td>Share the road map with identified stakeholders</td>
<td>TWG</td>
<td>3rd week January 2011</td>
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<tr>
<td>Review the membership of existing task force</td>
<td>Noriko, Philo Mari, Oby</td>
<td>26th November 2010</td>
<td></td>
</tr>
<tr>
<td>Engage Chairpersons of Senate and House Committees on Women and Children</td>
<td>TWG</td>
<td>June 2011</td>
<td></td>
</tr>
</tbody>
</table>
### Challenge: What process does the Government of Rwanda, in partnership with stakeholders (Civil Society Organizations, bi and multi lateral agencies, institutions of higher education, NGOs, etc.) need to pursue in order to create a clear, well-defined, draft social welfare workforce system for the country?

### Desired results: By November 2011, the Government of Rwanda will have One (1) completed, fully-developed, draft social welfare workforce framework document that includes costing, job classifications and terms of references and a sufficiently detailed organizational chart with multi-year development plan, shared broadly both within and outside of GOR for review.

#### Indicators
1. Formation of task force/advocacy mechanisms to raise profile of SWWS issues within GOR
2. Completion of gap and situational analyses regarding existing workforce/cadres of workers engaged in social welfare work throughout the country
3. Completion of 1 draft SWW system framework document

#### Activities

<table>
<thead>
<tr>
<th>Activities</th>
<th>Manager</th>
<th>Date of start and completion of each activity</th>
<th>Resources</th>
<th>Activity completed? Date/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Present conference highlights and action plans to donors (USAID, CDC, UNICEF, Global Fund) with a view to forming a united front for further presenting to GOR</td>
<td>Serena (Note: initial presentation will be by email with in-person follow up as needed with full delegation + donors)</td>
<td>November 26, 2010</td>
<td>Conference CD-Rom of key materials</td>
<td></td>
</tr>
<tr>
<td>Directly engage the USAID/Rwanda mission to improve engagement on SWWS issues so that the mission staff are better prepared to actively participate in moving agenda forward</td>
<td>USAID/Washington</td>
<td>November 26, 2010</td>
<td>n/a</td>
<td></td>
</tr>
<tr>
<td>Present SWWS conference achievements and proposed next steps (actions plans) to GOR—specifically: MIGEPROF, MINALOC, MOH, CNLS, MINEDUC</td>
<td>Donors, 4 delegates</td>
<td>December 17, 2010</td>
<td>Venue, handouts, projector, flip chart, etc.</td>
<td></td>
</tr>
<tr>
<td>Establish SWWS systems design task force</td>
<td>MINALOC</td>
<td>December 22, 2010</td>
<td>Venue, handouts, projector, flip chart, etc.</td>
<td></td>
</tr>
<tr>
<td>Conduct and complete situation and gap analyses</td>
<td>Task Force</td>
<td>May 31, 2011</td>
<td>Financing, transportation/staff &amp; logistics, internet, computer resources for analysis, etc.</td>
<td></td>
</tr>
<tr>
<td>Using gap &amp; situational analyses results, map out staffing needed at</td>
<td>Task Force</td>
<td>August 31, 2011</td>
<td>Financing, transportation/staff &amp; logistics, internet,</td>
<td></td>
</tr>
</tbody>
</table>
all levels of SWW system, cost from recruitment through retention and ongoing support/training, engage stakeholders to ground truth the above costs and plan, disseminate initial plan

Draft and share framework broadly within GOR and down to district and sector levels, engaging constituents for feedback

Challenge: How can the GOR design an effective training and support system for all categories of community-based social welfare workers (including those currently designated as psycho-social workers), particularly building upon the model that already exists for Community Health Workers in Rwanda?

Desired results: By June 2012, the Government of Rwanda will have 1 completed, fully-developed, draft curriculum (or series thereof) for training the agreed-upon cadres of community-based social welfare workers. This work is linked to the work done under Challenge #1, in developing a SWW framework at the national level.

Indicators
1. One (1) set of specific recommendations on the training needs of community-based workers in line with the vision for this level of social welfare work, spelled out within the framework and related terms of reference.
2. One (1) nationally-approved, standardized curriculum (or series thereof) for training community-based social welfare workers

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<th>Resources</th>
<th>Activity completed? Date/Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Conduct and disseminate the results of gap and situational analyses on existing vs. needed training (including trainer qualifications) for community-based social welfare work</td>
<td>MINALOC to designate research team through Task Force</td>
<td>May 31, 2011</td>
<td>Financing, transportation/staff &amp; logistics, internet, computer resources for analysis, venue/s, etc.</td>
<td></td>
</tr>
<tr>
<td>Create a community-based worker recruiting strategy</td>
<td>Task Force</td>
<td>June 30, 2012</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Name of team: South Africa

**Date:** 17 November 2010

<table>
<thead>
<tr>
<th>Action</th>
<th>Who</th>
<th>When</th>
</tr>
</thead>
</table>
| Appoint country team steering committee: USAID, UNICEF, DSD (who will call monthly meetings) | Chair: Dr. Mabetao  
Secretary: Heidi Loeing-Voysey  
Convenor: Anita Sampson | 17 Nov                                   |
| Concept paper/ issues brief and scope of work for technical assistance team (this paper needs to identify gaps which would then give permission to researcher to gather information from other government departments) | Consultant to be appointed by USAID (suggest Paula Proudlock and team to comment on it) | By 10 Dec                                |
| DSD DDG to present the paper to DG and HR as brief from conference | Dr. Mabetao (with delegation from team) to Vusi Madonsela and Eugene Webster | Before Dec vacation/ January (latest end of January) |
| Country team meeting to plan way forward and agree on technical team which USAID will fund (ensure that Civil Legodu and Isabella Sekawane are part of team) | Steering committee to call meeting. Iveda Smith to ensure that Civil Legodu attend the meeting. Iveda to ensure that contact details of sector skills person is sent to Anita for her to include in country team invites. | 26 January                                |
| Contract TA service provider team (with some international expertise) | USAID | By end of January |
| Country team meeting to become familiar with various policies and frameworks | Steering committee to call | 1st week of March |
| Broad stakeholder meeting | USAID to pay for venue  
DSD to be motivated to pay for key stakeholders | 5,6,7 April |
| Defined categories of workforce with functions and skill sets | Country team | By end of June |
| Inputs to policy and sector skills framework | Country team | By end of June |
| Country team meeting | Country meeting | July |
| HR strategy | | |
**Name of team: Swaziland**

**Date:** 17 November 2010

**Challenge:** How do we strengthen the institutional structures to effectively deliver social welfare services in Swaziland?

**Measurable Result:**
1. Strategic plan for DSW finalized
2. Structural re-organization of DSW (organogram, job descriptions & interdepartmental linkages defined)

**Indicators**
- Strategic plan is approved by DPM’s Office
- Revised organizational structure approved by cabinet for immediate implementation

<table>
<thead>
<tr>
<th>Activities</th>
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<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Solicit Cabinet approval for reform process</td>
<td>PS</td>
<td>January 2011</td>
<td></td>
</tr>
<tr>
<td>2. Engage Public Service and Finance on the proposed reform (schedule regular meetings, letters)</td>
<td>PS</td>
<td>January 2011</td>
<td></td>
</tr>
<tr>
<td>3. Engage consultant to finalize strategic plan</td>
<td>PS/UNICEF</td>
<td>December 2010</td>
<td>Technical assistance &amp; financial resources</td>
</tr>
<tr>
<td>4. Engage consultant to undertake organizational review</td>
<td>PS/Public Service/PEPFAR</td>
<td>February 2010</td>
<td>Technical assistance &amp; financial resources</td>
</tr>
<tr>
<td>5. Define linkages with other departments</td>
<td>PS</td>
<td>January 2010</td>
<td>N/A</td>
</tr>
<tr>
<td>6. Create action plan for restructuring</td>
<td>PEPFAR and DSW</td>
<td>Mid December, 2010</td>
<td>Task team – Human Resources</td>
</tr>
<tr>
<td>7. Develop organogram</td>
<td>PS/PEPFAR/Public Service/DSW</td>
<td>March 2011</td>
<td>TA and Financial Resources</td>
</tr>
<tr>
<td>8. Carry out job profiling in line with desired structure</td>
<td>Public Service/DPM’s Office/PEPFAR</td>
<td>May 2011</td>
<td>TA &amp; financial resources</td>
</tr>
<tr>
<td>9. Desired organizational structure costed</td>
<td>Public Service/DPM’s Office/PEPFAR</td>
<td>June 2011</td>
<td>TA &amp; financial resources</td>
</tr>
<tr>
<td>10. Phased implementation of new structure</td>
<td>DPM’s Office</td>
<td>September 2011</td>
<td>TA &amp; financial resources</td>
</tr>
</tbody>
</table>

**Challenge:** How can we develop/improve the HR skills in social welfare in light of the increased demand for service provision?

**Measurable Result:**
3. Capacity Gap Assessment developed
4. Human Resource Development Plan developed

**Indicators**
1. Capacity Gap Analysis conducted
2. Human resource development plan completed

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>11. Stakeholder debriefing from conference</td>
<td>PS/DPM’s Office/conference /participants</td>
<td>30 Nov 2010</td>
<td></td>
</tr>
<tr>
<td>12. Multisectoral team to be convened to assist</td>
<td>Director, Social Welfare</td>
<td>30 November 2010</td>
<td>Collaboration with stakeholders (PEPFAR, UNICEF, Ministry of</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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<tr>
<td>---</td>
<td>---</td>
<td>---</td>
<td></td>
</tr>
<tr>
<td>13. Engage a Consultant to assist with the Capacity Gap Analysis</td>
<td>DSW with the reform processes</td>
<td>Public Service, UNISWA</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Permanent Secretary and PEPFAR</td>
<td>January 2011</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical assistance and financial resources</td>
<td></td>
</tr>
<tr>
<td>14. Task team to develop a human resource development plan</td>
<td>Director, Social Welfare</td>
<td>June 2011</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical assistance and financial resources</td>
<td></td>
</tr>
<tr>
<td>15. Development of schemes of service (Liaise with Ministry of Public Service for technical support)</td>
<td>DPM and Ministry of Public Service</td>
<td>January 2011 (Engagement with Public service) September 2011 (Schemes of service)</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Technical assistance and financial resources</td>
<td></td>
</tr>
<tr>
<td>16. Create a database of unemployed social workers (diploma and degree level)</td>
<td>Director, Social Welfare</td>
<td>26 November 2010</td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td>Financial resources</td>
<td></td>
</tr>
</tbody>
</table>
**Name of team: Tanzania**

**Date:** 18 November 2010

**Challenge:**
Inadequate qualified man power at the LGA level

**Measurable Result:**
At least 4 Social Welfare Officers per district council by December 2011

<table>
<thead>
<tr>
<th>Indicators</th>
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</table>

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Map and assess the current distribution of social welfare officers in the LGAs</td>
<td>Ass. Director HR PMO-RALG</td>
<td>23-30 November 2010</td>
<td>Air time</td>
</tr>
<tr>
<td>Consult with LGAs to determine future plans for hire social welfare officer</td>
<td>Ass. Director HR PMO-RALG</td>
<td>23-30 November 2010</td>
<td>Air time</td>
</tr>
<tr>
<td>Re-issue the circular of employment and deployment of social welfare officers in LGA</td>
<td>Ass. Director HR PMO-RALG</td>
<td>23-30 November 2010</td>
<td></td>
</tr>
</tbody>
</table>

**Challenge 2:**
Lack of national social welfare workforce strategy.

**Measurable Result:**
- Training and accredited social welfare workforce, Recruitment of human resources, Linkages with other ministries

<table>
<thead>
<tr>
<th>Indicators</th>
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</thead>
</table>

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify task force from the conference member feed back to commissioner for social welfare</td>
<td>Assistant Commissioner, Social Welfare Department</td>
<td>23-27 November 2010</td>
<td>NIL</td>
</tr>
<tr>
<td>Task force to develop the ToR for the group who will develop the strategy</td>
<td>Task Force Members</td>
<td>December 2010</td>
<td>Conference Package</td>
</tr>
<tr>
<td>Identify the champions to support development of national social welfare workforce strategy</td>
<td>Assistant Commissioner, Social Welfare Department</td>
<td>January 2011</td>
<td>Conference Package</td>
</tr>
<tr>
<td>The task force to discuss with social protection working group on the social welfare workforce strategy</td>
<td>Assistant Commissioner, Social Welfare Department</td>
<td>December 2010</td>
<td>Conference Package</td>
</tr>
<tr>
<td>Facilitating forum for the drafting review</td>
<td>Assistant Commissioner, Social Welfare Department</td>
<td>January 2011</td>
<td>Conference Package</td>
</tr>
</tbody>
</table>
**Name of team: Uganda**

**Date:** 18 November 2010

**Challenge:**
1) Inadequate numbers of staff
2) Poor facilitation – inadequate funding for service delivery (tools and transportation)

**Measurable Result:**
3) 10% increase in staffing levels by December 2011
4) 1% increase in the budget by June 2012

**Indicators**
1) % increase in social welfare workforce
2) % increase in the social development sector budget

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Developing a cabinet paper on the importance of investing in child protection with clear recommendations on: Funding for Social Welfare services and staffing</td>
<td>Director Social Protection</td>
<td>By 31st December 2010</td>
<td>Technical Assistance for needs assessment</td>
</tr>
<tr>
<td>Developing a local government issues paper on the importance of investing in child protection with clear recommendations on: Increasing funding for the Social Welfare services and staffing</td>
<td>Director Social Protection</td>
<td>By 12th December 2010</td>
<td>Technical assistance</td>
</tr>
<tr>
<td>Disseminate the issues paper to key local governments and development partners</td>
<td>Permanent Secretary</td>
<td>By 31st January 2011</td>
<td>5,000 US $</td>
</tr>
<tr>
<td>Incorporate child protection issues in the sector budget framework paper</td>
<td>Principal Economist</td>
<td>By 31st January 2011</td>
<td></td>
</tr>
<tr>
<td>Hold advocacy campaigns with child rights groups</td>
<td>SUNRISE and OVC</td>
<td>By 31st January 2011</td>
<td>Technical and financial</td>
</tr>
<tr>
<td>Incorporate the required resources in the budget</td>
<td>MoFPED</td>
<td>May 2011</td>
<td>Technical Assistance</td>
</tr>
</tbody>
</table>
Name of team: Vietnam
Date: 17 November 2010

Priority Challenges to be addressed:
1. Low Technical Capacity and lack of quality training program on social work

Current situation:
- 35,000 staff working in the ministry of Labour and Social Welfare performing social work functions do not have training on social work
- Poor practicum in social work education program
- No national curriculum on social work at 2-year level
- Poor in-service teaching methodology

Measurable results
- National curriculum on 2-year social work program developed
- In-service training programs developed
- 300 field supervisor/mentors trained

Roots causes
- Social work not recognizing as a profession in Viet Nam
- Limited human and financial resources

2. Poor M&E and Supervision Systems

Current situation:
- Lack of awareness on the importance of M&E
- Low technical capacity, especially at local level
- Lack of a good monitoring framework, including lack of a good set of indicators

Measurable results
- Comprehensive framework on Social Welfare Workforce Strengthening developed
- Improved capacity of government counterparts on M&E, especially at local level

Roots causes
- Low recognition of the role of M&E
- Low priority given to M&E
- Limited human and financial resources investment
**Name of team: Zambia**

**Date: 17th November 2010**

**Challenge 1: Quality control for social workers. How can we achieve quality control for social workers given low recognition, financing and lack of regulations?**

**Measurable Result:** Association and accreditation system developed by December 2011

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Identify and meet with association of social workers</td>
<td>MCDSS and Social Workers Association</td>
<td>15th December 2010</td>
<td>Stationery</td>
</tr>
<tr>
<td>Conduct stakeholders meeting</td>
<td>MCDSS and other stakeholders such as MSYCD, USAID , MOH, etc</td>
<td>February 2011</td>
<td>Financial resources (stationery other workshop logistical requirements)</td>
</tr>
<tr>
<td>Review association constitution</td>
<td>Social Workers Association and MCDSS as well as other stakeholders</td>
<td>March 2011</td>
<td>(output of stakeholders meeting)</td>
</tr>
<tr>
<td>Establish working group to develop criteria for accreditation of social workers</td>
<td>Social Workers Association, University of Zambia and MCDSS</td>
<td>February 2011</td>
<td>(output of stakeholders meeting)</td>
</tr>
<tr>
<td>Consensus building meeting to present constitution and other deliverables of the working group</td>
<td>MCDSS and Social Workers Association</td>
<td>May 2011</td>
<td>Financial resources (stationery and other workshop logistical requirements)</td>
</tr>
<tr>
<td>Prepare and submit CAB memo</td>
<td>MCDSS</td>
<td>July 2011</td>
<td>N/A</td>
</tr>
<tr>
<td>Operationalize the activities of the association</td>
<td>Social Workers Association and MCDSS</td>
<td>August</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Challenge 2: Inadequate structure that translates to inadequate staffing**

**Measurable Result:** Completed situational analysis that reviews the social welfare needs and the current workforce structure needed

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Submit report to ministry of MCDSS, MSYCD and cooperating partner heads (Permanent Secretaries and other heads)</td>
<td>MCDSS and SWW workshop participants</td>
<td>23rd November 2010</td>
<td>N/A</td>
</tr>
<tr>
<td>Constitute working group for the situation analysis</td>
<td>MCDSS and MSYCD</td>
<td>18th December 2010</td>
<td>N/A</td>
</tr>
<tr>
<td>Develop TORs</td>
<td>Working group</td>
<td>11th January 2011</td>
<td>N/A</td>
</tr>
<tr>
<td>Conduct situational analysis to assess social welfare needs, human resource gaps and</td>
<td>MCDSS</td>
<td>April 2011</td>
<td>Funding</td>
</tr>
<tr>
<td>Task</td>
<td>Responsible Party</td>
<td>Date</td>
<td>Funding</td>
</tr>
<tr>
<td>----------------------------------------------------------------------</td>
<td>-------------------</td>
<td>------------</td>
<td>---------</td>
</tr>
<tr>
<td>Examine the current social welfare workforce structure including community level workforce</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Formulate a strategy for a strengthened workforce</td>
<td>MCDSS</td>
<td>November 2011</td>
<td>Funding</td>
</tr>
</tbody>
</table>
### Name of team: Zimbabwe

**Date:** 17.11.2010

**Challenge:** How can we develop the applied skills of workforce – new and existing – to carry out the necessary functions of their job?

**Measurable Result:** Commencing 09/2011 existing staff carrying out statutory functions for child welfare (govt. and civil society) complete standard induction package within 6 months and subsequently new staff within 6 months of taking up post

**Indicators:**
- Standard induction package developed and endorsed by MoLSS and civil society organizations
- Numbers of employees completing induction

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Buy-in meeting</td>
<td>DSS &amp; UNICEF</td>
<td>02/2011</td>
<td>Meeting Room</td>
</tr>
<tr>
<td>Forming technical working group</td>
<td>As above</td>
<td>02-03/2011</td>
<td>N/A</td>
</tr>
<tr>
<td>Developing SIP</td>
<td>DSS (with support Save the Children &amp; UNICEF)</td>
<td>01-06/2011</td>
<td>Existing policies, procedures &amp; regulations; printing</td>
</tr>
<tr>
<td>3 x day dissemination &amp; orientation; 5 x people per province (50)</td>
<td>DSS &amp; UNICEF</td>
<td>06-09/2011</td>
<td>Three day conference costs and DSA</td>
</tr>
<tr>
<td>Resource mobilization</td>
<td>DSS, UNICEF, USAID &amp; Save the Children</td>
<td>12/2010-07/2011</td>
<td>N/A</td>
</tr>
</tbody>
</table>

**Challenge:** How can we achieve effective frontline M&E and good quality professional mentoring, coaching & supervision?

**Measurable Result:** Provincial SSO visits each district once per quarter; district SSO visits each ward once per quarter (to supplement monthly visits made by member of core team for child care and protection)

**Indicators:** Numbers of vehicles available in each provincial and district office
- Number of monitoring reports submitted to national level DSS by SSO’s and core team members (indicating number of visits made)
- Number of CSO monitoring reports on interventions /support provided to children is collated by DSS
- Number of monitoring visits to community level structures

<table>
<thead>
<tr>
<th>Activities</th>
<th>Person</th>
<th>Dates</th>
<th>Resources Needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Resource mobilization</td>
<td>DSS, UNICEF, USAID &amp; Save the Children</td>
<td>Immediate and on-going</td>
<td>Vehicles</td>
</tr>
<tr>
<td>National scale-up village OVC register</td>
<td>DSS</td>
<td>Immediate and on-going</td>
<td>Printing</td>
</tr>
</tbody>
</table>
ANNEX 4: CONFERENCE PARTICIPANT LIST
Social Welfare Workforce Strengthening Conference Participant List

**BOTSWANA:**
Mr. Joshua Andi Emmanuel; Chief-Child and Adolescent Protection and Participation; UNICEF Botswana
Mr. David Kanje; OVC Programs Officer; Project Concern International
Mr. Kgomo Jomo Jongman; President; Botswana Social Worker’s Association
Ms. Margaret Mokgachane; National OVC Coordinator; Ministry of Local Government/ Department of Social Services
Ms. Mosarwa Segwabe; OVC Program Specialist; USAID Botswana
Ms. Kgomotso Nana Sejoe; Executive Director; Marang Child Care Network Trust
Ms. Monica Smith; Human Capacity Development Specialist; CDC Botswana

**COTE D’IVOIRE:**
Ms. Irene M’Bahia Adouko; OVC Technical Advisor; CDC Cote d’Ivoire
Dr. Amélie Clementine Anderson-Koua Brou; Senior Technical Advisor, Former Director; National Program For OVC Care/Ministry of Family, Women And Social Affairs
Dr. Djeneba Coulibaly-Traore; HIV Care and Treatment Deputy Branch Chief; CDC Cote d’Ivoire
Mr. Daniel Trah Di; Program Coordinator; National Institute for Training Social Workers, Early and Special Education Workers
Dr. Nathalie Bogui Konan; HIV/AIDS Program Executive Director ANADER (National Agency for Rural Development)
Dr. Jean Konana Kouame; HIV AIDS Specialist (OVC and Primary Prevention among Young People); UNICEF Cote d’Ivoire
Ms. Therese Wingate; HIV Prevention Branch Chief; CDC Cote d’Ivoire

**ETHIOPIA:**
Mr. Nikodimos Alemayehu; Program Specialist; UNICEF Ethiopia
Ms. Renee DeMarco; Team Lead, HIV Prevention and Social Services; USAID Ethiopia
Mr. Kidest Hailu; Country Director of AIHA; Twinning Center Ethiopia
Mr. Abebe Medhin; Ministry of Labor and Social Affairs
Mr. Haile Michael Tesfahun; Social Work Instructor and Trainer; Addis Ababa University, School of Social Work
Mr. Tsegaye Tilahun; Psychosocial Support Advisor; USAID Ethiopia
Mr. Doug Webb; Chief of Section; Adolescent Development, Child Protection and HIV UNICEF Ethiopia
Mr. Mesfin Zewdie; Ministry of Women, Youth, and Children’s Affairs

**HAITI:**
Ms. Tamika Allen; Foreign Service Officer; USAID Haiti
Ms. Christina Torsein; Child Protection Specialist; UNICEF

**KENYA:**
Mr. George Gachuhi Kibuku; Assistant Director of Children’s Services, Department of Children’s Services
Ms. Jonna Carlsson; Child Protection Specialist, UNICEF Kenya
Ms. Monica Nyambura Maina; Vice Chair, Kenya National Association of Social Workers
Ms. Ogoti Carren Morangi; Assistant Director of Children Services, Department of Children Services
Dr. Pius Mutuku Mutie; Senior Lecturer, University of Nairobi
Prof. Jacqueline Adhiambro Oduol; Secretary for Children Affairs; Ministry of Gender Children and Social Development Kenya
Ms. Kate Vorley; OVC Specialist, USAID KENYA
Mr. Waruinge Muhindi; Secretary, Street Families Trust Fund; Ministry of Local Government

**LESOTHO:**
Ms. Limakatso Chisepo; Director; Department of Social Welfare, Ministry of Health and Social Welfare
Dr. Itumeleng Kimane; Senior Lecturer; National University of Lesotho
Ms. Mantsenki Mphalane; Chief Child Welfare Unit; Department of Social Welfare (DSW), Ministry of Health and Social Work
Ms. Farida Noureddine; Child Protection Specialist; UNICEF - Maseru
Ms. Brenda Yamba; OVC Program Manager; USAID Lesotho

**MALAWI:**
Ms. Jacqueline Kabambe; Child Protection Specialist, OVC; UNICEF
Ms. Juliet Kamanga; Principal; Magomero College
<table>
<thead>
<tr>
<th>Country</th>
<th>Name</th>
<th>Title/Position</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mozambique</td>
<td>Ms. Isabel de Bruin Cardoso</td>
<td>Child Protection Specialist; UNICEF Mozambique</td>
</tr>
<tr>
<td></td>
<td>Ms. Chiara Gargano</td>
<td>Institutional Capacity Coordination Advisor; Deloitte Consulting LLP – Health Systems 20/20 Project</td>
</tr>
<tr>
<td></td>
<td>Ms. Maria Francisca Sales Lucas</td>
<td>Deputy Director of the Child Health Department; Ministry of Women and Social Welfare</td>
</tr>
<tr>
<td></td>
<td>Mr. Dionisio Matos</td>
<td>OVC Program Manager; USAID Mozambique</td>
</tr>
<tr>
<td></td>
<td>Dr. Nair Teles</td>
<td>Professor and Head of Sociology Department; Eduardo Mondlane University</td>
</tr>
<tr>
<td>Namibia</td>
<td>Ms. Nicolette Bessinger</td>
<td>Deputy Director; Church Alliance for Orphans (CAFO)</td>
</tr>
<tr>
<td></td>
<td>Ms. Connie Botma</td>
<td>Chief, Special Protection for Vulnerable Children, UNICEF Namibia</td>
</tr>
<tr>
<td></td>
<td>Mr. Matthew Dalling</td>
<td>Child Protection Specialist; UNICEF Namibia</td>
</tr>
<tr>
<td></td>
<td>Dr. Marita Grobler</td>
<td>Professor; University of Namibia</td>
</tr>
<tr>
<td></td>
<td>Ms. Silke Felton</td>
<td>Technical Advisor for Orphans and Vulnerable Children; USAID Namibia</td>
</tr>
<tr>
<td></td>
<td>Ms. Joyce Nakuta</td>
<td>Deputy Director Child Welfare; Ministry of Gender Equality and Child Welfare</td>
</tr>
<tr>
<td></td>
<td>Ms. Liza van Rhyn</td>
<td>Deputy Director; Directorate of Social Welfare Service, Ministry of Health and Social Services</td>
</tr>
<tr>
<td>Nigeria</td>
<td>Dr. Yinka Falola Anoemuah</td>
<td>Resident Advisor (OVC); MEASURE Evaluation Nigeria</td>
</tr>
<tr>
<td></td>
<td>Mr. Ola Clement</td>
<td>Chief Executive Officer; Hope Worldwide</td>
</tr>
<tr>
<td></td>
<td>Mr. Jenis Maiyamba Dawalle</td>
<td>Director of Child Development; Ministry of Women Affairs and Social Welfare</td>
</tr>
<tr>
<td></td>
<td>Ms. Mari Hickmann</td>
<td>OVC Specialist; CDC Nigeria</td>
</tr>
<tr>
<td></td>
<td>Ms. Philomena Irene</td>
<td>Senior Program Manager OVC, Care and Support; USAID Nigeria</td>
</tr>
<tr>
<td></td>
<td>Ms. Noriko Izumi</td>
<td>Chief, Child Protection; UNICEF Nigeria</td>
</tr>
<tr>
<td></td>
<td>Ms. Fadairo Alaba Olawunmi</td>
<td>Director of Child Development; Lagos State Ministry of Women Affairs and Poverty Alleviation</td>
</tr>
<tr>
<td></td>
<td>Ms. Oby Josephine Chinelo Okwuonu</td>
<td>Social worker; Ministry of Women Affairs and Social Development, Federal Secretariat, Abuja</td>
</tr>
<tr>
<td>Rwanda</td>
<td>Mr. Riccardo Lazise Bevilacqua</td>
<td>AVSI</td>
</tr>
<tr>
<td></td>
<td>Mr. Emmanuel Habyarimana</td>
<td>Program Manager; FXB – RWANDA</td>
</tr>
<tr>
<td></td>
<td>Mr. Charles Kalinganire</td>
<td>Lecturer, National University of Rwanda</td>
</tr>
<tr>
<td></td>
<td>Ms. Serena Williams</td>
<td>Program Coordinator; CHF International</td>
</tr>
<tr>
<td>South Africa</td>
<td>Ms. Nontsikelelo Botswana</td>
<td>Administrative Assistant; UNICEF South Africa</td>
</tr>
<tr>
<td></td>
<td>Ms. Megan Briede</td>
<td>Coordinator; Child Welfare South Africa</td>
</tr>
<tr>
<td></td>
<td>Ms. Johanna De Beer</td>
<td>Director; Department of Social Welfare</td>
</tr>
<tr>
<td></td>
<td>Ms. Bulelwla Plaatjie</td>
<td>South African Council for Social Service Professions (SACSSP)</td>
</tr>
<tr>
<td></td>
<td>Ms. Naomi Hill</td>
<td>Thogomelo Project Director; Health Development Africa</td>
</tr>
<tr>
<td></td>
<td>Mr. Malik Jaffer</td>
<td>Health &amp; Social Welfare System Strengthening Advisor; USAID South Africa</td>
</tr>
<tr>
<td></td>
<td>Dr. Maleka Kganakga</td>
<td>Chief Director; Department of Social Welfare</td>
</tr>
<tr>
<td></td>
<td>Ms. Heidi Loening-Voysey</td>
<td>OVC Team Lead; UNICEF South Africa</td>
</tr>
<tr>
<td></td>
<td>Dr. Maria Mabeto</td>
<td>Deputy Director General; Department of Social Welfare</td>
</tr>
<tr>
<td></td>
<td>Naletsana Masango</td>
<td>USAID South Africa</td>
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