

**THE UNITED REPUBLIC OF TANZANIA
THE LAW REFORM COMMISSION OF TANZANIA**



**REPORT ON THE REVIEW OF THE LEGAL
FRAMEWORK ON SOCIAL WELFARE SERVICES IN
MAINLAND TANZANIA**

**PRESENTED TO
THE MINISTER FOR CONSTITUTIONAL
AND LEGAL AFFAIRS**

JULY, 2018

THE UNITED REPUBLIC OF TANZANIA

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20th July, 2018

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Hon. Minister,

Re: REPORT ON THE REVIEW OF THE LEGAL FRAMEWORK ON SOCIAL WELFARE SERVICES IN MAINLAND TANZANIA

In terms of section 4(2) of the Law Reform Commission Act, Cap. 171, the Commission may, whether at its own instance or otherwise, review any law or branch of the law and propose measures necessary for:-

- i) bringing that law or branch of the law into accord with current circumstances of Tanzania;
- ii) eliminating anomalies or other defects in the laws

- and; and
- iii) the proper codification and simplification of that law or branch of law.

In purview of the said mandates, the Ministry of Health, Community Development, Gender, Elderly and Children, by a letter with Ref. No. BA.85/99/01/32 dated 07th September, 2017, requested the Law Reform Commission of Tanzania to conduct review of the legal framework governing social work practice in the Mainland Tanzania.

Specifically, the Ministry requested the Law Reform Commission of Tanzania to look into the following areas:

- i) appropriate measures for the improvement of social welfare services in Tanzania;
- ii) an appropriate governance structure and regulatory framework for regulation of social work profession and social welfare services delivery; and
- iii) if appropriate, prepare a draft Bill on the regulation of social work profession.

The Commission has completed the review after extensive literature review, consultative meetings and stakeholders' workshops for the purpose of collecting data, views and recommendations on how to improve social welfare services in Tanzania that has made it possible for the Commission to prepare the Report.

In accordance with section 14 (1) of the Law Reform Commission Act, the Commission has the honor to submit to you, the Final Report on the Review of the Legal Framework on Social Welfare Services in Tanzania.

The Commission is pleased to submit to you the following documents:

- i) The Report on the Review of the Legal Framework on

- Social Welfare Services in Mainland Tanzania,
- ii) A Matrix on Stakeholders' views and recommendations;
and
 - iii) A Draft Bill on Social Welfare Services Act.

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LIST OF ABBREVIATIONS

AAAA	-	Addis Ababa Action Agenda
CEDAW	-	Convention on the Elimination of all forms of Discrimination against Women
COS	-	Charity Organization Societies
CSOs	-	Civil Society Organizations
DSW	-	Department of Social Welfare
FBOs	-	Faith Based Organizations
FYDP	-	National Five Year Development Plan
GBV	-	Gender Based Violence
IASSW	-	International Association of Schools of Social Work
ICCPR	-	International Covenant on Civil and Political Rights
IFSW	-	International Federation of Social Workers
ISW	-	Institute of Social Work
KIU	-	Kampala International University
LGAs	-	Local Government Authorities
LRCT	-	Law Reform Commission of Tanzania
MDGs	-	Millennium Development Goals
MoHCDGEC	-	Ministry of Health, Community Development, Gender, Elderly and Children
MVC	-	Most Vulnerable Children
NCPA	-	National Costed Plan of Action
NGOs	-	Non- Governmental Organizations
NPA	-	National Plan of Action
NSGD	-	National Strategy for Gender Development
NSGRP	-	National Strategy for Growth and Reduction of Poverty
SACSSP	-	South African Council for Social Service Professions
SADC	-	South African Development Community

SDGs	-	Sustainable Development Goals
SUZA	-	State University of Zanzibar
SWOs	-	Social Welfare Officers
UDHR	-	Universal Declaration on Human Rights
UNCRC	-	UN Convention on the Rights of the Child
VAWC	-	Violence Against Women and Children
ZU	-	Zanzibar University
HIV/AIDS	-	Human Immunodeficiency Virus, Acquired Immunodeficiency Syndrome
HTC	-	HIV Testing and Counseling
RMOs	-	Regional Medical Officers
DMOs	-	District Medical Officers

LIST OF NATIONAL LEGISLATION

Principle Legislation

1. Penal Code, Cap.16
2. The Anti-Trafficking in Persons Act No. 6 of 2008
3. The Community Service Act, Cap. 247
4. The Constitution of the United Republic of Tanzania of 1977, Cap 2
5. The Drugs Control and Enforcement Act No. 5 of 2015
6. The National Education Act, Cap 353
7. The Employment and Labour Relations Act, Cap. 366
8. The HIV and AIDS (Prevention and Control) Act No. 28 of 2008
9. The Institute of Social Work Act, Cap.110
10. The Law of Marriage Act, Cap.29
11. The Law of the Child Act, Cap.13
12. The Local Government (District Authorities) Act, Cap. 287
13. The Local government (Urban Authorities) Act, Cap. 288
14. The Mental Health Act No. 21 of 2008
15. The Persons with Disabilities Act No. 9 of 2010
16. The Probate and Administration of Estates Act, Cap 352.

Subsidiary Legislation

1. Local Customary Law (Declaration) (No.4) Order GN. No. 436 of 1963 (The Second Schedule - Laws on Inheritance)
2. The Drugs Control and Enforcement (General) Regulations, 2016
3. The Local Customary Law (Declaration) Order, GN. No. 279 of 1963 (First Schedule - Laws of Persons)

LIST OF POLICIES

National Policy

1. Cluster II of the National Strategy for Growth and Reduction of Poverty (NSGRP II)
2. National Five Year Development Plan 2016/17-2020/21 (FYDP II)
3. National Plan of Action to End Violence Against Women and Children (NPA-VAWC 2017/18 - 2021/22)
4. National Strategy for Gender Development (NSGD)
5. The Human Resource for Health Strategic Plan, 2008 - 2008
6. The National Action Plan for Elimination of Worst Forms of Child Labour, 2009
7. The National Ageing Policy, 2003
8. The National Child Development Policy, 2008
9. The National Costed Plan of Action for Most Vulnerable Children, (2013 – 2017)
10. The National Guidelines for Improving the Quality of Care, Support and Protection for Most Vulnerable Children, 2009
11. The National Guidelines for Provision and Management of Foster Care and Adoption Services, 2006
12. The National Guidelines for the Establishment and Management of Children' Homes, 2006
13. The National Health Policy, 2007
14. The National Multi-sectoral Strategic Framework on HIV/AIDS, 2012
15. The National Policy on Disability, 2004
16. Women and Gender Development Policy, 2000
17. The National Comprehensive Guideline for HIV/AIDS Testing and Counseling, 2013

Regional and International Policy

1. Africa's Agenda 2063: The Africa We Want
2. SADC Regional Indicative Strategic Development Plan, 2005-2020
3. Agenda 2030: Sustainable Development Goals

LIST OF INTERNATIONAL AND REGIONAL INSTRUMENTS

1. The Convention on the Rights of Persons with Disabilities and its Optional Protocol, 2006
2. The African Charter on the Rights of the Children, 1990
3. The Convention on the Elimination of All forms of Discrimination against Women, 1981
4. The Convention on the Rights of the Child, 1989
5. The Declaration of the Rights of the Child, 1959
6. The International Covenant on Civil and Political Rights, 1966
7. The International Labour Organization No.182, 1999
8. The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, 2005
9. The Universal Declaration on Human Rights, 1948
10. The Worst Forms of Child Labor Convention, 1999 (No. 182)

LIST OF LEGISLATION FROM OTHER JURISDICTIONS

1. The Social Workers Act, 2001 (Zimbabwe)
2. The Social Service Professions Act, 1978 (South Africa)
3. The Social Work and Psychology Act, 2004 (Namibia)
4. The Social Workers Registration Act, 2003 (New Zealand)
5. The Social Workers' Council Act, 2007 (Seychelles)

ACKNOWLEDGEMENT

The Commission wishes to express its sincere appreciation to various stakeholders consulted for their co-operation and time devoted in this endeavor.

Special thanks goes to the Technical Working Group comprising of members from the Law Reform Commission, the Ministry of Health, Community Development, Gender, Elderly and Children who prepared a Report on the Review of Legal Framework on Social Welfare Services and a Draft Bill for Social Welfare Services Act, 2018.

The Commission is grateful to the American International Health Alliance for financial support in all stages of the review.

In the final analysis, the Commission bears full and collective responsibility for both the form and content of this Report.

EXECUTIVE SUMMARY

Section 4(2) of the Law Reform Commission Act,⁵ mandates the Commission among others, to review any law or branch of the law and propose measures necessary for bringing that law or branch of the law into accord with current circumstances of Tanzania. In this regard, the Ministry of Health, Community Development, Gender, Elderly and Children, by a letter with Ref. No. BA.85/99/01/32 dated 7th September, 2017, requested the Law Reform Commission of Tanzania to undertake a review of the legal framework governing social work practice and provision of social welfare services in Mainland Tanzania.

Rapid industrialization, urbanization and globalization have created social, economic and psychological vulnerabilities to weaker members of our societies such as orphans and vulnerable children, elderly frail, people with disabilities, widows, unemployed youth and people affected and infected from chronic diseases such as HIV/AIDS.

Social workers and other related social welfare services providers are typically involved in Child Welfare Services for the abused or neglected children, orphans, and children whose parents are physically or mentally incapacitated; Family Welfare Services by providing counseling, health care, and protection to victims of neglect or maltreatment; Medical and Psychiatric Services to persons who are physically or mentally sick or handicapped, in hospitals and clinics; School/ Education Social Work in the schools or colleges setting catering for the needs of youngsters experiencing academic and personal problems; Protective and Correctional Services such as community service orders, probation, and counseling service to offenders or former inmates; and Group/Community Services for

5 The Law Reform Commission Cap. 171.

social and economic empowerment, rehabilitation, educational and recreational services.

The scope of the study included; the review of relevant policies and laws on social welfare provision in Tanzania, in particular, issues related to social welfare service provision to vulnerable groups, social work profession and the need for regulation of welfare services and service providers. The purpose of the study was to review the provision of welfare provision and recommend for the improvement of social welfare services provision and social work profession in Tanzania.

Preparation of this Report involved literature review, field research and focused group discussions and study visit. Amongst the stakeholders involved were the regional commissioners, regional administrative officers, district commissioners, social welfare officers, community development officers, police officers, prison officers, legal officers, medical service providers, administrators and staff from elderly homes, children homes, remand homes, the elderly, people with disabilities, women, children from specified areas of services and other social welfare service providers in both public and private setup. The Commission visited twelve regions of Mainland Tanzania where the opinions and recommendations were collected from various stakeholders of social welfare service delivery and profession.

The present policy and legal framework consists of many pieces of legislation. For instance, there are laws for specific vulnerable groups such as the Law of the Child Act, the Persons with Disabilities Act and the Mental Health Act. Other laws focus on specific social issues such as the Penal Code, the Law of Marriage Act, the Drug Control and Enforcement Act, the Employment and Labour Relations Act, to name a few. Although these laws provide for governance of

social welfare services relevant to the vulnerable group, they do not cover the full spectrum of pertinent issues. Vital issues of accessibility, affordability and quality of the social welfare services provided, are not adequately addressed in the current legal framework. These limitations render the system reactive, and incapable of solving the current challenges which in turn calls for review.

The review underscored that Tanzania has ratified and committed herself to implement international instruments that provide for assurance and a commitment to protect vulnerable populations. These includes, the 1948 Universal Declaration on Human Rights (UDHR)⁶ provides for the right to education; the Declaration of the Rights of the Child, 1959 set forth the rights of the child; The Convention on the Elimination of All Forms of Discrimination against Women, 1981 specifically focuses on equality between women and men; and the Convention on the Rights of Persons with Disabilities and its Optional Protocol, 2006 that set forth to promote, protect and ensure the full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities.

The review indicated that there are African countries that have enacted specific laws on social work. For instance, Zimbabwe has the Social Workers Act, 2001 which is committed to the provision of quality social welfare services to the public through regulation of social work profession. Similarly, South Africa has the Social Service Professions Act⁷ that provide for the establishment of a South African Council for Social Service Professions (SACSSP). The Council has the mandate to register social workers, student social workers, social auxiliary workers, persons practicing in the scope of social work and other related professions. In Namibia, the Social

6 The Declaration was proclaimed by the United Nations General Assembly in Paris on 10, December 1948 Resolution Number 217A.

7 Act No. 110 of 1978.

Work and Psychology Act, 2004,⁸ establishes the Council for social work and psychology professions charged with powers and duties to register and regulate training and qualifications of the practitioners. In 2007, the Seychelles enacted the Social Workers' Council Act, primarily, to regulate the professional conduct of social workers for assurance of quality of social welfare services to the beneficiaries.

Through the review of the international legal instruments, the Commission noted that Tanzania needs to strengthen and enforce protection and provision of quality social welfare services and putting in place a legal framework for regulation of the social work profession.

The main findings indicate that there is inadequate provision of social welfare services to sections of vulnerable population such as GBV victims, the elderly and persons with disability.

The review revealed that the inadequacy is particularly attributed to shortage of social welfare officers especially at the grass root levels, that is, ward, village and mtaa. The findings further revealed that, Tanzania has scattered policies and laws regulating the work done by social workers. As such, there is no specific and comprehensive law which promotes and protects social work practice. Furthermore, it has been noted that despite long list of legislation providing for social welfare services, none of them provide regulatory framework and matters relating to registration, administration and quality assurance of social work profession.

On the other hand, the review revealed that social welfare services are not known among law enforcers and the public in general. Social welfare services are known by a small section of government officials and non – governmental organizations. As a result, social

8 Act No. 6 of 2004.

welfare services are not given priorities during setting up the plans and strategies by local government authorities and of the central government. This also has made the service invisible to most of communities. Social welfare services is about alleviation of social problems that affect the community in the quest for development. Thus, it is important that the value of social welfare services is well appreciated by the local government authority, the central government and the community in general.

The research has found that most of private institutions providing social welfare services lacks professional competency on social work. Institutions that were visited by the Commission, such as centres of elders, children and people with disabilities, are manned by persons not trained on social work. This, to a greater extent affects the quality of social welfare services delivered to the needy persons. This shows that there is a need to have a clear mechanism that ensures that each institution providing social welfare services to needy people are either manned or have access to social welfare officer trained on social work profession.

The research has also found that social welfare services officers employed by the Government includes persons trained in social work, sociology and psychology. It was noted that social work, sociology and psychology are related but differ in substance. Each of the course produce graduates capable of effectively fulfilling duties in the relevant trained discipline. This calls for the need for continuing education to persons working as social welfare officers in order to enhance their knowledge on social work profession.

Likewise, the research revealed that there are problems in colleges and universities providing social work courses. The colleges are few and students enrolled and finally graduating are equally few. As a result, there are few trained persons on social work compared to

the actual demand of social work personnel. It has also been noted that there is inadequate number of tutors and lecturers trained on social work profession. Some of these tutors and lectures are trained in sociology and psychology. Indeed, students graduating from these institutions lacking practical competency was noted during the research. This revealed the need for legal and administrative mechanisms that will ensure quality of education in institutions offering social work courses.

The issue of failing to abide by the rules on confidentiality and privacy was noted with concern. There were revelations that some of social welfare services providers divulges information acquired in the course of advising or solving client's problems. Yet, it was noted that there are no legal mechanisms for addressing this problem, especially, for persons working outside the public service. Taking into account the fiduciary relationship between social work services providers and their clients, there is a greater need of having a legal means of administering professional conducts and ethics standards among social welfare services providers.

The Commission, therefore, profoundly recommended for the Government to enact a law to regulate the provision of social welfare service, promulgate professional conduct and ethical standards, provide for the roles and functions of social workers and other related social welfare services providers, provide for registration, licensing, rights and duties and setting up a regulatory body to oversee social workers and social welfare services providers. In collaboration with national education regulatory bodies there are also a need to regulate training in social work profession. The Government should also employ and deploy more social workers and other related social welfare services providers in order to reach the large number of the population in key social work service settings, both in the rural and urban areas.

CHAPTER ONE

GENERAL INTRODUCTION

1.1 Mandate of the Law Reform Commission

The Law Reform Commission of Tanzania (hereinafter referred to as the Commission), is an independent government institution established in 1983 by the Law Reform Commission Act.⁵ The Commission is an institution, under the Ministry of Constitutional and Legal Affairs with the mandate of ensuring the systematic development and reform of all the laws of the United Republic of Tanzania through regular review.⁶

The Commission may be moved to review an individual law or a whole branch of law following a reference from the Attorney General; any person or group of persons; or on its own volition.⁷ Such review may result in proposals on the measures necessary to bring the reviewed law or branch of law into accord with the prevailing socio-economic circumstances of the country. Other reviews carried out by the Commission may result in the elimination of anomalies or other defects in the law; the repeal of obsolete or unnecessary laws; the reduction of separate enactments; and, the codification and simplification of existing laws.⁸

1.2 Background to the Review

By a letter with reference number BA.85/99/01/32 dated 7th September, 2017, the Permanent Secretary responsible for Community Development in the Ministry of Health, Community Development, Gender, Elderly and Children requested the

5 S.3 Cap.171.

6 Ibid S. 4(1) .

7 Ibid section 8 (1) and 9.

8 Ibid section 4 (2) (a) (1) .

Commission to undertake a review of the legal framework governing social work practice in Mainland Tanzania. The letter specifically requested the Commission to identify challenges facing social welfare service delivery in Mainland Tanzania and recommend:

- a) appropriate measures for the improvement of the prevailing legal framework on social work;
- b) an appropriate governance structure under a new legal and regulatory framework for the regulation of social work service delivery and profession; and
- c) prepare a draft bill as is necessary.

1.3 Concept and Terminologies on Social Welfare and Social Work

Rapid industrialization, urbanization and globalization have created many problems in our society. Society has developed certain specific methods to deal with such problems. Social welfare, social service, social reform, social security, social justice are among them. These relates to the modern social work practice.

1.3.1 Social Welfare as a Concept

The term social welfare signifies the total well-being of the individual and the community. Social welfare is achieved when human needs are met, social problems are managed, social opportunities are maximised.⁹ In Tanzania, the term social welfare is practically understood as a system of integrated services within facilities and programme (including social security) that promote social development, social justice and social functioning of people. Social welfare services are society's efforts to meet human needs. They are developed to help people function more satisfactory in their interaction with others, and thus, lead more fulfilling lives. They are designed to help and improve the well-being of individuals, families groups and communities and create a caring just society

9 Midgley 1997, Social welfare in a global context, London sage.

which respects human rights. As such, social welfare provision can be met through the State and private (non-state agencies) such as the market, voluntary organizations and the family.

1.3.2 Concepts Related to Social Welfare

Other conceptual areas related to social welfare include social service, social reform, social security, social justice and social work. Social reform implies a deliberate attempt to bring about change in social attitudes, social values and social institutions. Social security seeks to provide security against unforeseen contingencies of life. Social security is provided in the form of social insurance and social assistance. Social justice stresses the importance of fairness and justice. Social welfare services are services primarily provided to meet human needs, including those individual, groups and community needs.

These types of social services are predominantly provided by a state for the benefit of its citizens. Social welfare services often connote services to particular vulnerable groups or individuals. Social services are a range of services to the general public intended to bring about a more effective society, services such as education and health services including services towards the general well-being of society.

1.4 Social Work Defined

Social work is a profession which addresses social problems systematically and scientifically. It empowers individuals, groups and communities. It requires specific knowledge, skills and techniques to practice. The social work discipline promotes social change and development, social cohesion, and the empowerment and liberation of people.

1.4.1 Nature of Social Work

The practice of social work requires knowledge of cultural, social and economic institutions, human development and behaviour; and of the interaction of all these factors, social work history, social work values and ethics.¹⁰ Social workers are trained therefore, to work on a variety of social work practice areas at micro and macro levels. At the micro level, social workers intervene at the personal level to solve a wide range of challenges such as drug addiction, marital problems or adoption directly with individuals or small groups. At the macro level, social workers work at a strategic setting with large groups such as policy makers to develop and improve policies and programs; or community organizations to develop or improve services and social conditions.

1.4.2 Social Work Practice Areas

Social work services are required to address various social problems in different areas of life as explained below:

(a) Family/Individual Setting

Social work services are required in solving individual problems in everyday life such as counseling on marital conflicts; dealing with child affiliation and maintenance issues, adoption; issues of drug abuse and addiction etc.

(b) Health Setting

In the provision of health services, social workers are involved in helping patients understand their diagnosis and make the necessary adjustments to their lifestyle, especially when dealing with terminal illnesses. Social workers also help healthcare providers understand the effects that disease and illness have on patients' mental and emotional state of mind. They provide geriatric social work service and are also involved in the provision of hospice and

¹⁰ <http://www.naswnyc.org>.

palliative care. With respect to mental health, social workers help clients with mental illnesses or addictions by diagnosing and treating mental, emotional and behavioral disorders, including anxiety and depression.

(c) School Setting

Workers work with educational stakeholders including parents, teachers, school administrators and other to address problems such as poor attendance, bullying, aggressive behavior, and other issues that affect children education. The services aim at addressing the needs of youngsters experiencing personal and academic problems, including those originating in the family.

(d) Correctional Setting

Social workers work in correctional services such as prisons community and probation services by providing counseling services to offenders and former inmates.

(e) Policy Formulation Setting

Social workers are also engaged in policy formulation, awareness raising and mobilization of communities, community organization and planning services, resource linkages and community welfare projects. Their roles include developing welfare programs and services; and advocacy lobbying for the welfare of citizens. They also help in establishing community centers, educational and recreational services for the youth and elders.

1.4.3 Social Work and Related Professions

Social sciences form an integral part of social work knowledge. They provide basic knowledge about the socio-economic and cultural environment of the people. The knowledge base and practice of the social work profession is very much linked to the behavioral and social science disciplines such as psychology, sociology, economics,

history, politics, management and social anthropology.¹¹

Social work is a profession that is sometimes confused with community development. Whilst social work helps and empowers vulnerable individuals and groups in society to tackle social problems, community development practice refers to measures taken to enable people to recognize own ability to identify their problems and use available resources with a primary focus to earn and increase income and build better lives for themselves.¹² Community development works on problems affecting the community as an entity as opposed to social work which deals with individuals as a primary focus in its interventions.

1.5 Historical Background of Social Work

1.5.1 Global Origins

The origins of social work globally can be traced in several countries. This brief coverage will address the two countries of United Kingdom (UK) and USA of America (USA). In the UK, the social work profession can be traced as far back as the 4th Century where it begun as a call to help the poor whom, by virtue of their circumstances, could not reach their full potential. To ensure a basic standard of decency and amelioration of the physical and mental wellbeing of citizens, the Christian Church started providing hospital and burial services, shelter for the homeless, homes for the aged and orphanages. However, it was only after the Industrial Revolution that actual social work started. The Industrial Revolution represented a drastic change in the economic system and way of life. It demanded large numbers of workers for the factory system thereby causing mass immigration, urbanization and increased poverty. This new

11 The origin and development of Social Work [www.PAUL_PC/AppData/Local/Microsoft/Windows/INetCache/IE/OK36YX6D/DRAFT DISCUSSION PAPER ON SOCIAL WORK zero draft 25-10-2017 final.doc - _ftn1](http://www.PAUL_PC/AppData/Local/Microsoft/Windows/INetCache/IE/OK36YX6D/DRAFT%20DISCUSSION%20PAPER%20ON%20SOCIAL%20WORK%20zero%20draft%2025-10-2017%20final.doc_-_ftn1).

12 Tanzania community development policy.

economic order destroyed the informal helping system of the family and the church gradually replacing it with social welfare services and creating the Welfare State.

Beginning in 1600s, and in the United Kingdom in particular,¹³ the English Poor Law System¹⁴ formed part of the formal system of helping the needy. These statutes dealt with issues related to beggars and vagrancy. Houses were built to house older people who had no families, those people with long term illnesses and those with no other support. With the worsening of conditions, other initiatives were taken including the formation of a collection of charities organized to help the needy known as Charities Organization Society (COS). The first organization in this collection was the London Charity Organization Society formed in 1869.¹⁵ At around the same time the Settlement House Movement was established. This was a movement in which individuals mostly from well to do families volunteered to help the needy.

Most of the movements and in particular COS, believed that the English Poor Laws were inadequate. They also observed that the existence of many charities brought about a general lack of cooperation between charities and disorganization leading to duplication of services, and what was seen at the time, as indiscriminate giving.¹⁶ There were also concerns on poor appreciation of services by users and worries about the creation of a user dependency culture. In the context of these challenges, the movements saw a need to create better ways to help the needy by making sure that there was a robust mechanism for controlling service provision, and that was informed by science and done in a measured way. The essence

13 The Origin and Development of Social Work.

14 the Old Poor Law, 1601; Poor Relief Act, 1662; Poor Act, 1697 etc, 1834.

15 The Origin and Development of Social Work.

16 Kate Wilson et al (2008) Social Work, An Introduction to Contemporary Practice, Pearson Education.

of COS, for example, was its thorough investigation and focus on the family. This provided a key foundation for the development of the Case Work Method of social work in Britain. Social work as a profession was born out of these initiatives.

The many changes brought about by the new world economic order in the UK affected other countries including the USA where similar initiatives were introduced to deal with the repercussions. As in the UK, the Settlement House Movement and the COS played a great role in the development of social work in USA. In 1886, the Settlement House Movement began its work in settlement houses by providing a wide range of services to immigrants and those living in poverty.¹⁷ Jane Addams (1860 –1935) was a founder of the USA Settlement House Movement and is considered one of the early influences on professional social work in the USA. The COS also had significant influence on social work development in the USA. Based on the same principles as its UK counterpart, it focused on making sure that help to the needy was provided in a measured way. Its first leader was Mary Ellen Richmond (1861-1928) was an outstanding practitioner, teacher, and theoretician who formulated the first comprehensive statement of principles of direct social work practice. Her most celebrated book, *Social Diagnosis*, widely hailed as evidence of the professionalization of social work, was based on her lectures and on her wide readings in history, law, logic, medical social work, psychology, and psychiatry.¹⁸ In 1898, Columbia University became the first school of social work in the USA.¹⁹

Overtime, social work evolved and other work methods were developed. These included Group Work, Community Organization, Social Work Research and Social Administration methods. These

17 Jessica Ritter, HalaevaluVakalahi (2015) 2nded 101 careers in Social Work. Springer publishing Company.

18 <http://www.naswfoundation.org>.

19 Jessica Ritter, HalaevaluVakalahi (2015).

movements facilitated the development of a body of knowledge and scientific approaches to addressing social problems and the development of the social work profession as we know it today.

1.5.2 Africa

Traces of social work activities are evident in the nature of traditional African communities. For instance, social needs and problems were dealt with by the family, both immediate and extended. In those days, there was no specialized cadre of workers to handle problems such as poverty, disease or death. Help was provided through the extended family and intervention of neighbors.

Modern social work practice in Africa has embraced curative and developmental social work. Curative social works acknowledges that there are individuals and communities, who due to their circumstances, have been caught up in difficulties and need social workers' intervention to get them out of the difficulties. Developmental social work emphasizes outcomes and processes that emphasize participation in improving the well-being of the poor. The goal and substance of social development is the welfare of the people as determined by the people themselves; the creation or alteration of institutions to create capacity for meeting human needs at all levels; and improving the quality of human relationships and relationships between people and social institutions.²⁰

Other African countries, modern social work came as a by-product of colonialism, particularly, in colonial and post-colonial Africa, where many nations saw a need for establishing systems to address the many new problems, including crime and delinquency, family disorganization, unplanned parenthood, child abuse, alcohol and drug abuse and stress to mention a few. Needless to say, social

20 Christopher Chitereka, 2009.

workers have a vital role to play in alleviating such problems. Part of the efforts to ensure quality social work provision and practice was the establishment of social work education programs. One of the earliest schools of social work in Africa was the Cairo School of Social Work established in Egypt in 1937 and in Zimbabwe in 1964. More Social Work schools in different countries in Africa were established during the colonial and post-colonial era: for instance in Tanzania the the National Social Welfare Training Institute (currently known as the Institute of Social Work) was established in Dar es Salaam in 1973. Today, professional training in social work is well established in the curricula of most African universities.

1.5.3 Tanzania

Social work activities in Tanzania predate colonialism. During that time, people lived in communities and assisted each other in times of need such as hunger, funeral and sickness. Mutual support was a key form of welfare provision. The coming of colonialists facilitated the establishment of formal welfare services to allow achievement of colonial goals. Reports of social service provision backed by specific legislation were recorded in Tanzania beginning in the 1930s. For instance, the Children and the Young Persons Ordinance of 1937, the Affiliation Ordinance of 1949, the Probation of Offenders Ordinance of 1947 and the Foster Care and the Adoption Ordinance of 1955. There is a strong argument that these laws helped lay the basic foundation for modern social work in Tanzania. For example, following the Probation of Offender's Ordinance, 1947, the first probation officers are reported to have been employed in October 1950s. The employment marked some of the initial social work oriented activities in Tanzania.

The provision of social work services to the needy required to be provided in a systematic and structured way. Modern social work in

Tanzania developed in the post-independence period, most notably through the establishment of the Government Social Welfare Department in 1961 and the establishment of the National Social Welfare Training Institute in 1973, currently known as the Institute of Social Work.²¹ The establishment of a training institution was an important step in the development of social work in Tanzania because it gave rise to a professional group of social workers particularly in the government structure who could provide measured and scientifically proven interventions to address social problems. Today, there are more than ten higher learning institutions training social workers in Tanzania.

1.6 Statement of the Problem

Robust traditional social welfare service delivery structures and systems existed prior to the colonial era in Mainland Tanzania. However, with time, changes in the social, cultural, economic and political environments largely due to urbanization, globalization and technological advancement, the local communities and peoples' way of life especially obligation to provide for welfare support to the needy disintegrated. At the political level, the colonial administration introduced formal welfare schemes and services delivered by a special cadre of people to facilitate the achievement of colonial goals. Economic changes resulted in a rural-urban shift and increased poverty in some areas upsetted the traditional set-up at the cultural and social protection levels. The impact of all these changes has been deterioration in terms of quality and quantity, of both government and traditional social welfare delivery structures and systems. The failure to effectively deliver services has been observed in the breakdown of family relationships, rising rate of crimes, violence against children, women and the elderly, poor health including the HIV/AIDs pandemic. These factors have greatly

21 <http://tanzaniasocialworkcentre.webs.com/>.

increased vulnerability in society and accentuated the need for efficient and effective social welfare services.²²

The management of an efficient and effective social welfare service delivery in the changed circumstances need to tackle three key challenges:

- i) a changed social setting – a rural to urban shift as well as changed demographics such as population ageing calls for the formulation of innovative modes of service delivery;
- ii) increased population and poverty levels call for adequate financial and human resources;
- iii) an assured maximum service availability, service accessibility and quality service delivery, require sufficient number of well trained and regulated cadre is key.

The present legal framework consists of many pieces of legislation. For instance, there are specific laws for vulnerable groups such as the Law of the Child Act, the Persons with Disabilities Act and the Mental Health Act. Other laws focus on specific social issues such as the Penal Code, the Law of Marriage Act, the Drug Control and Enforcement Act and the Employment and Labour Relations Act. Although all these laws provide for governance of social welfare relevant to the vulnerable groups, they do not cover the full spectrum of pertinent issues. Vital issues of accessibility, affordability and quality of the social welfare services provided, are not adequately addressed in the current legal framework.

Furthermore, the provision of social welfare services is required to be regulated by social work cadre under an appropriate legal framework. Social work promotes social cohesion, social change and development and works directly with individuals and groups

22 Ministry of Health and Social Welfare, Report for a Mapping Study of Social Welfare Services and Providers in Tanzania, Dar es Salaam, 2013 pg. 6.

seeking their empowerment and liberation. However, many existing policy and legal instruments are not explicitly linked with social work functions and values. As a result, there is limited involvement and utilization of social workers in local and national programs for alleviation of poverty and correcting social injustices. Inconsistent training, classification and practice of social work coupled with inadequate coordination and linkage among key stakeholders in providing social welfare services have weakened the delivery system. These limitations render the system reactive, and incapable of solving the current challenges thereby urgently calling for review.

1.7 Scope

The Commission reviewed all relevant policies and laws governing social welfare provision in Mainland Tanzania. In particular, policies addressing social welfare service provision to vulnerable groups, relative to social work profession and the need for regulation of social welfare services and service providers. The objective of the study was to understand the provision of social welfare services and recommend for the improvement social welfare services provision and Social work profession in Tanzania.

1.8 Justification of the Review

The Commission found the need to undertake the review of the existing policy and legal framework governing social welfare services and Social work profession. The current legal and administrative arrangements governing social welfare services are inadequate and unable to cater for the growing number of needy people. Urbanisation and uneven socio-economic development have gradually weakened the informal family helping system based on traditional structures leading to the emergence of many large groups of different needy people.

The scattered legislation cannot deliver social welfare services in its current form. In undertaking the review, therefore, it was important to examine and address the critical areas of social welfare service delivery that need legal and institutional reform. The critical areas that need reform include:

- i) piece-work or scattered legislation on social welfare services;
- ii) non-involvement of social workers in national and local programs in the alleviation of poverty, inequalities and social injustice;
- iii) inconsistent training and classification of the social work cadre and others involved in the provision of social welfare services;
- iv) lack or poor coordination and linkage among stakeholders, welfare providers and the large and assorted group of welfare recipients; and
- v) issues related to accessibility, affordability and quality in social work services provision.

The review was designed to come up with an effective legal framework governing social welfare services and Social Work profession that will eventually benefit recipients of the services as well as the social work practitioners. The combination of improved social welfare service and social work practitioners would enable accessible, affordable and quality social welfare services for the most vulnerable population.

1.9 Objective of the Study

The main objective of the review was to examine and evaluate the legal framework governing social welfare services for the purpose of identifying challenges and gaps and make recommendations intended to come up with an effective legal and regulatory framework

that will effectively and efficiently regulate the management of social work services.

1.10 Methodology of the Review

In conducting the review, the Commission used various methods to collect primary and secondary data. These methods included literature review, field research, validation workshops and focused group discussions. Under literature review the analysis of literature and other materials on the subject was made under which legislation, reports, articles and international instruments were examined and assessed. Different materials including articles, publications and reports on social welfare services and social work profession and other social welfare related issues from different countries were accessed through visiting their official websites and database.

The Commission also conducted a study visit in South Africa the sampling of the study based on a country which has a specific law to regulate provision of social welfare services and social work professionals. The study aimed at discussing, drawing lessons and good practice on issue related to social welfare provision in social work profession. The discussions involved the Ministry of Social Development and Social Work Council.

Field research was conducted in twelve regions of Mainland Tanzania where the opinions and recommendations were collected from various stakeholders of social welfare service delivery and profession. Selected regions were Kilimanjaro, Manyara, Kagera, Mara, Shinyanga, Njombe, Rukwa, Kigoma, Dodoma, Tabora, Mtwara and Dar es Salaam. In selecting the sample regions, the Commission was guided by three criteria: the magnitude of the vulnerable and needy groups in the area, levels of social welfare services and zonal representation.

CHAPTER TWO

ANALYSIS OF POLICY AND LEGAL FRAMEWORK

2.0 Introduction

This Chapter analyses policies and legal framework relevant to social welfare services in Tanzania. It identifies policies and laws related to services provided by social workers and other providers of social welfare services. It also analyses how they contribute to the national development goal towards middle income country and industrial economy. The review looks at policies and laws that define social welfare functions in the context of remedial/residual welfare services. On the other side, the review looks at policies and laws which amplify social work to developmental functions, including alleviation of mass poverty, unemployment, diseases, disaster management, economic empowerment of marginalized communities and financial inclusions. It looks at the extent to which each policy and law explicitly identifies and directs functions of social welfare services.

2.1 Policies

2.1.1 Introduction

Tanzania has promulgated numerous policies and guidelines to respond to social problems and challenges affecting both urban and rural population. The challenges include high levels of poverty, breakdown of family relationships, gender based violence, violence against children, poor health, rising rate of crime, alcohol and drug abuse, problems related to HIV/AIDS and other social immorality. These policies reflect Tanzania's commitments to empower the communities and protect its most vulnerable population.

2.1.2 Analysis of Existing Policies

2.1.2.1 Cluster II of the National Strategy for Growth and Reduction of Poverty (NSGRP II)

The National Strategy for Growth and Reduction of Poverty (NSGRP II) identifies the most vulnerable groups, whose rights are unprotected, to include street children, widows, people living with HIV and AIDS, youths, orphans, young mothers, people with disabilities, and eligible elders over the age of 60.²³

The Strategy identifies traditions and behaviors that have adverse effects on most vulnerable groups. These include outdated customs, norms, taboos and values, unhappy marriages; domestic and gender-based violence, drunkenness and drug abuse. Other factors causing poverty and vulnerability are mentioned to include natural calamities, HIV and AIDS; low incomes; lack of education and skills; lack of access to clean and safe water; and indecent shelter.

Paragraph 4.2 Cluster II of the Strategy provides for improvement of quality of life and social well-being. The broad outcomes identified under Cluster II includes improvement of quality of life and social wellbeing for enhancing capabilities, with particular focus on the poorest and most vulnerable groups and reduction of inequities in accessing economic opportunities, environment and natural resources, and social services along geographical areas, income, age and gender.

Goal 6 of Cluster II aims at providing adequate social protection and rights to the most vulnerable and needy groups. The Strategy calls for social protection measures to prevent most vulnerable and potentially poor populations from falling into poverty. Thus, the

23 See paragraph 2.3.5 p. 18.

Strategy sets social protection interventions focusing on orphans and vulnerable children; people with disabilities; the elderly; people living with HIV& AIDS and long term illnesses; vulnerable women; and former inmates.

Operation targets which are set by the Strategy are increment of proportion of vulnerable children and adults under effective social protection measures and number of elderly people reached with effective minimum social pension. In order to achieve the targets, the following interventions are provided:

- i) Mainstreaming provision of social protection measures in the plans of state and non-state actors;
- ii) promoting corporate social responsibility to support social protection interventions;
- iii) continuing provision of care and support to HIV & AIDS infected and affected including home-based care and social security schemes including food safety nets;
- iv) strengthening systems for effective access to minimum social protection package and exemptions and waivers;
- v) promoting economic empowerment of most vulnerable groups, through such measures as start-up kits for Income Generating Activities (IGAs) and cash transfers, to enable households with most vulnerable members meet basic needs;
- vi) revising policies and regulations to ease access to financial services and exemptions applicable to most vulnerable groups;
- vii) promoting and coordinating involvement of the government, development partners (DPs), NGOs, faith-based organizations (FBOs), the business sector and communities.
- viii) promoting private sector initiatives in implementing social protection measures; and
- ix) ensuring equitable geographical recruitment and retention of adequate number of social workers.

Social work as a profession has a role to play in reduction of poverty, particularly, through sensitization and empowerment of most vulnerable groups among other possible roles. This role is very critical in situations of persistent poverty since, poverty has a crippling effect on the functioning and well-being of individuals in society.

Considering the role of social welfare service providers in the effective implementation of the Strategy, there is a need of improving provision of social welfare services through an enabling legal environment which provides for duties, obligations and regulation of various stakeholders involved in social welfare services provision.

2.1.2.2 The National Five Year Development Plan 2016/17 – 2020/21 (FYDP II)

FYDP II is built on three pillars of transformation, namely, industrialization, human development, and implementation effectiveness. Specifically, the Plan aspires to, among other things, accelerate broad-based and inclusive economic growth that reduces poverty substantially and allows shared benefits among the majority of the people through increased productive capacities and job creation, especially, for the youths and disadvantaged groups; and improve quality of life and human wellbeing.²⁴

The Plan among other things, deals with reducing poverty; addressing social and economic risks, deprivation and vulnerability; protecting human rights and improving capabilities and labour market results. It addresses various challenges, including, low percentage of population covered by formal social protection frameworks, pensions and health insurance, early motherhood and early marriages caused by low level of education for women, limited access to employment

²⁴ See paragraph 1.3 , p. 2.

opportunities for women and high levels of poverty in families.

The Plan provides intervention in social protection with a view to overcoming challenges facing the community. Intervention is selected for its ability to target social groups that have either been excluded or with no support at all.²⁵ Such groups include the most vulnerable and disadvantaged such as people with disability, and elderly people who cannot support themselves. Social protection is a broad area that encompasses wide range of social groups. The Plan provides that the interventions focus on developing these peoples' capabilities to lift themselves out of poverty; enhance their productive capacity and increase their resilience.

Key interventions provided by the Plan includes, framework for tracking vulnerability; mobilization of resources (financial and human) for health insurance; and promoting and protecting human rights for all, and particularly, poor and people with disabilities (PWDs).²⁶ The Plan provides five major areas of social protection interventions. These are:

- i) social security, which includes health insurance, pensions and unemployment benefits;
- ii) social assistance, which includes interventions provided to the poor and vulnerable groups including people with disabilities to address life cycle risks;
- iii) productive inclusion, with interventions aimed at enabling individuals to engage more productively in livelihoods and employment as well as agricultural input subsidies, public works, financial inclusion programs, livelihoods and youth development programs; and
- iv) social services, which are benefits and facilities provided by the Government and private sector to build the human

²⁵ Paragraph 3.5.2 (d) at p. 45.

²⁶ See paragraph 4.3.7 at p. 75.

- v) capital foundation of long-term prosperity; and good governance which aims at improving public service delivery to all, especially the poor and vulnerable, including access to justice; promoting and protecting human rights for all, particularly for poor women, men and children and other vulnerable groups.²⁷

The Plan has been put in place, among other things, to address poverty and realise social development in Tanzania. With that fact, the involvement of social work is very important in reduction of poverty and hunger, diseases (particularly HIV/AIDS), domestic violence, child mortality and gender inequality, all of which impacts on the functioning and well-being of individuals in society.

2.1.2.3 The National Child Development Policy, 2008

The National Child Development Policy gives vision and mission for providing Tanzania children their rights, welfare and development. The growth of the child involves their physical, health, intellectual, ethical and spiritual. The Policy helps to reduce or to eradicate problems which emanate from non-fulfilment of child essential basic needs. The rationale provided in the Policy is to provide direction for solving problems of children in need especially those with special needs such as orphans, disabled, street children and others living in hardship conditions.²⁸ It provides direction on survival, protection, participation, non-discrimination and development of the child.

The Policy aims at providing an enabling environment for stakeholders to participate fully in the implementation of various programmes that seek to provide children with their rights, welfare and raises standard of life by focusing on appropriate traditions, morals and

²⁷ See paragraph 4.3.8 at p. 76.

²⁸ See Chapter Three of the Policy on Policy Significance.

values. It places special emphasis on a child's right to survival, development, protection, participation and non-discrimination.²⁹

Child protection systems respond to children who have suffered or are likely to suffer significant harm as a result of abuse and neglect.³⁰ Some of issues necessitating child protection includes early marriages leading to early child pregnancies, increase in number of orphans and vulnerable children caused by HIV/AIDS catastrophe, family conflict, violence against women, hunger and drought, moral disintegration in the community and society such as estrangements in the family, marriage breakdowns, difficult life conditions and globalization leading to children imitating undesirable behaviours such as; prostitution, rape, murder, theft, substance abuse, alcohol and cigarette use, violence against children and child abuse in all of its forms.

Among other things, the Policy emphasis on awareness creation to stakeholders with a view to equipping them with necessary knowledge that will accelerate child protection in Tanzania. It also requires the Government to put in place legal framework that ensures, among other things, protection of children against evil actions. Such protection and security is needed in all stages of growth before and after birth.

The Policy stipulates the roles and responsibilities of key stakeholders for children, including the Central Government, local governments, the society, families, NGOs, FBOs, the media, international organisations, extension workers, children's councils through Tanzania Movement for and with Children (TMC).³¹ The main responsibility of enforcing the Policy is placed to community development workers at regional,

29 See Chapter Five, pp. 15-25.

30 See issues 49 to 54 under Chapter III of the Policy.

31 See Chapter 7 of the Policy, pp. 28-29.

council, ward and village levels for effective implementation. The role of social workers in implementing this Policy is critical since issues relating to undesirable behaviors such as prostitution, rapes, murder, theft, substance abuse, alcohol and cigarette use, violence against children, neglect, abandonment, battering, being burnt, raped; female genital mutilation, exploitation, prostitution, human trafficking, children abuse and humiliation, forced labour and discrimination needs social work intervention.

The role played by social welfare service providers includes providing an enabling environment for effective implementation of various programmes for child protection. Law of The Child Act, 2009 legislated on Policy directives given under this Policy. Using statutory authority to safeguard children and encourage change is a crucial part of the role.

2.1.2.4 The National Policy on Disability, 2004

This Policy provides guidelines and sets parameters for service delivery to people with disabilities. It recognizes importance of providing conducive environment for people with disabilities to engage in productive work and the utilization of available resources for improved service delivery.³²

The policy aims at improved life of people with disabilities by encouraging the development of people with disabilities, empowering families of people with disabilities, reviewing legislation that are not disability friendly, improving service delivery, affording the participation of people with disabilities in decision making implementation of important activities in the society enabling families of people with disabilities and the society at large to participate in

32 See paragraph 2.0, p. 10.

decisions and implementation of disability friendly activities.³³

The Policy discourages institutional care of people with disabilities because it targets fewer people, uproots people from their areas of usual domicile, separates people with disabilities from mainstream community life, and evokes negative attitude. On the other hand, it encourages provision of rehabilitation services in the community, it integrates the non-disabled, it builds solidarity between people with disabilities and the non-disabled. The Policy requires the Government to take measures to ensure that Community Based Rehabilitation (CBR) is adopted as a strategy and method of service delivery to people with disabilities.³⁴

The Policy states that service provision to persons with disabilities requires a pool of trained and experienced personnel. It urges the government to take measures to ensure that personnel involved in service delivery to people with disabilities receive professional training.³⁵ It delineates stakeholders' responsibilities to the central government, local government authorities, families, communities and non-governmental organizations.³⁶

The Policy tasks the Government to supervise service provision to people with disabilities, assessment of people with disabilities and their needs, provide protection to people with disabilities, provide basic needs, include people with disabilities in the planning and implementation of income generating programmes and identification of NGOs that provide services to people with disabilities and coordinate their activities. Families and village communities have been tasked to provide protection to people with disabilities and

33 See paragraph 2.1, p. 11.

34 See paragraph 3.13, p. 18.

35 See paragraph 3.20, p. 22.

36 See paragraph 4, p. 26.

plan and implement income generation activities.

Local Government Authority in collaboration with Non-governmental Organizations have been given duties to identify people with disabilities and their needs, provide material assistance to people with disabilities, provide protection, sensitize and ensure their participation and their families in the planning and implementation of income generation activities.

For the implementation of the Policy the Government enacted the Persons with Disabilities Act, 2010.

2.1.2.5 The National Ageing Policy, 2003

The Policy provide guidance for the provision of basic services to older persons and ensure that older persons are reorganized and are given opportunity to participate in matters concerning them and the communities in their daily life.³⁷ The areas of focus for service delivery include health services, care and support, income generating activities and support for families.

The Policy is intended to create conducive environment for the provision of basic services to older people, empower families for sustained support to older people, prepare strategies and programmes geared towards elimination of negative attitudes and age discrimination and provides legal protection to older people as a special group.³⁸

The Policy acknowledges that due to the fact that ability of the oldest people to manage themselves is either minimal or not existing, the society has the responsibility of providing them with care and

37 See paragraph 2.2, p. 7.

38 See paragraph 2.3, p. 7.

support. It insists that the family will remain the basic institution of care and support for older people and that institutional care of older people will be the last resort.³⁹ Since ageing is a cross cutting issue, the implementation of this Policy involves the Central Government, local government authorities, voluntary agencies, families and villages.

The Policy tasks the Government to supervise and coordinate services provision to older people, to ensure older people's participation in the community and national development, to sensitize the society on issues related to older people and to sensitize and empower the youth on their preparation towards responsible old age.

The Local Government Authorities have been tasked to conduct older people's needs assessment in the society; provide care and protection for older people in the community and institutions, to ensure the provision of basic needs for older people, involve older people in income generating activities, sensitize the community on issues related to older people and their participation in the national development, to sensitize and empower the youth on their preparation towards old age.

Voluntary agencies conduct older people's needs assessment, ensure the provision of basic needs to older people, provide care and protection to older people in the community and institutions, mobilize and incorporate older people and their families in income generating activities, sensitize the community on issues related to older people and their participation in the national development and sensitize and empower the youths on preparation towards old age.

The Policy recognizes that, there is no specific law that is in favour of older people's rights and development and it requires the

39 See paragraph 3.2, p. 10.

government to enact a law for the same. To date, no law has been enacted, despite the fact that there are efforts within the Ministry responsible for elderly to enact the law.

Social workers in elderly homes and institutions perform a number of functions for the elderly, including helping older adults adjust to life in their new residences, advocating for their clients' needs and rights, providing supportive counselling and making psychosocial assessments. These professionals, known as geriatric social workers, work in nursing homes, assisted living facilities and similar environments.

2.1.2.6 The National Health Policy, 2007

The Policy aims at raising and improving the health status and life expectancy of the people of Tanzania by ensuring delivery of effective, efficient and quality curative, preventive, promotive and rehabilitative health services at all levels through access to quality primary health care for all; access to quality reproductive health service for all individuals of appropriate ages; reduction of infant and maternal mortality rates by three quarters of current levels; universal access to clean and safe water; life expectancy comparable to the level attained by typical middle-income countries, food self-sufficiency and food security; and gender equality and empowerment of women in all health parameters.⁴⁰

Despite the fact that the Policy does not clearly provide for the role of social work in raising and improving the health status and life expectancy of the people of Tanzania, social work in public health plays the role of helping people who have been diagnosed with chronic, life threatening or altering diseases and disorders. The social work also involves helping healthcare providers understand

40 See paragraph 2.1 of the Policy.

the effects that disease and illness have on patients' mental and emotional state of mind. It also helps connecting patients with plans and resources in order to help them cope. This is because one of the most difficult things a person can go through is dealing with acute, chronic, and terminal illnesses and these social workers provide services to ease these patients' process. These services include advising family care providers, providing patient education and counselling, making referrals to other services, case management interventions, planning hospital discharge, and organizing support groups.

With respect to addiction and mental health, social work offer support and services to those struggling with unhealthy grounding techniques, connecting them with facilities that serve to teach healthier behaviours and get patients back on track. The patients often struggle with mental and emotional problems as well as addictions and substance abuse problems. Generally, social welfare service providers provide the following services to clients:

- i) collaborate with other professionals to evaluate patients' medical or physical condition and to assess client needs;
- ii) advocate for clients or patients to resolve crisis;
- iii) refer patient, client, or family to community resources to assist in recovery from mental or physical illness and to provide access to services such as financial assistance, legal aid, housing, job placement or education;
- iv) investigate child abuse or neglect cases and take authorized protective action when necessary;
- v) counsel clients and patients in individual and group sessions to help them overcome dependencies, recover from illness, and adjust to life;
- vi) plan discharge from care facility to home or other care facility;
- vii) monitor, evaluate, and record client progress according to

- measurable goals described in treatment and care plan;
- viii) identify environmental impediments to client or patient progress through interviews and review of patient records; and
- ix) organize support groups or counsel family members to assist them in understanding, dealing with, and supporting the client or patient.

2.1.2.7 The National HIV/AIDS Policy, 2001

The Policy recognizes HIV/AIDS as a major development crisis that affects all people in all walks of life and decimating the most productive segments of the population. Some of the effects of HIV/AIDS are mentioned to be absenteeism from workplaces and deaths, lowering of life expectancy, increasing the dependency ratio, reducing growth in GDP, reduction in productivity, increasing poverty, raising infant and child mortality; and growing numbers of orphans. The epidemic is cited to be a serious threat to the country's social and economic development and has serious and direct implications on the social services and welfare.⁴¹

The overall goal of the National Policy on HIV/AIDS is to provide for a framework for leadership and coordination of the National multi-sectoral response to the HIV/AIDS epidemic. This includes formulation, by all sectors, of appropriate interventions which will be effective in preventing transmission of HIV/AIDS and other sexually transmitted infections, protecting and supporting vulnerable groups, mitigating the social and economic impact of HIV/AIDS. It also provides for the framework for strengthening the capacity of institutions, communities and individuals in all sectors to prevent the spread of the pandemic. The Policy stipulates roles of the various sectors, roles in the prevention, care and support in HIV/AIDS, ethics

41 See Chapter 1 of the Policy, p. 2.

and principles in HIV counselling and testing, the rights and care of People Living with HIV/AIDS.⁴² The HIV and AIDS (Prevention and Control) Act, 2008 was enacted to give force of law to policy statements.

2.1.2.8 The Third National Multi-Sectoral Strategic Framework for Mainland Tanzania 2013/14-17/18 (NMSF III)

The Framework aims towards long term goals of elimination of new HIV infections, deaths from HIV, and HIV-associated stigma and discrimination. The Framework recognizes that while the national average adult HIV prevalence rate has declined over the last ten years, HIV transmission rates among key populations, women, and in certain regions are not being adequately controlled. It also recognises that there has not been a significant decline in overall HIV prevalence. The Policy also acknowledges that comprehensive needs of People Living with HIV (PLHIV) in the society are often not being met; stigma and discrimination still prevail; and the coordination of the national response is not resulting in all necessary services being available to those who need them.⁴³

The goals to be achieved through implementing the Framework includes increased proportion of eligible PLHIV on care and treatment; increased access and quality of HIV Testing and Counselling; elimination of Mother to Child Transmission; increased male and female condom use during risky sex; elimination of blood borne transmission of HIV; reduced risky behaviour of sexual intercourse among the infected, most-at-risk and vulnerable populations; increased prevalence of Voluntary Medical Male Circumcision (VMMC); increased access to services and quality of treatment of Sexually Transmitted Infections (STIs), Community Based

42 See Chapter 3 of the Policy, p. 11.

43 See Chapter Two of the Framework.

Care and Support Interventions respond to HIV within local context; mainstreaming of HIV in sector-specific policies and strategies; and reduction of all HIV and AIDS related stigma and discrimination.⁴⁴

HIV/AIDS crosses all fields of practice, including mental health, addictions, community development, and health care. Social work practice provides support to persons living with HIV/AIDS and those affected by the disease through direct counselling, treatment intervention, and social justice activities. On an individual level, social workers provide a broad range of services and supports to those living with HIV/AIDS. These include income support, education or training programs, career planning, prescription drug programs, policies, short- and long-term disability programs, housing, human rights legislation, addictions services, legal services, and nutrition and food security.

Social workers also provide therapy and counselling for new diagnosis, disclosure, intimate partner violence, depression, fertility, anxiety, relationships (intimate and familial), grief and loss, and addictions.

2.1.2.9 The National Comprehensive Guidelines for HIV/AIDS Testing and Counseling

The 2012 National Guidelines for HIV Testing and Counselling (HTC) are meant to provide comprehensive guidance that covers all testing and counselling approaches. The guidelines set out to provide practical guidance on key technical and policy issues related to approaches for counselling and testing in health care facilities and in community settings.

The guidelines define the HTC service package as well as the key

44 See Chapter Four of the Framework, p. 38.

population that will benefit the services. Guidance is also provided on promotional issues related to uptake of HTC services. In order to ensure uninterrupted supply of all HTC commodities, practical logistical guidance at all levels of health facilities are also provided.⁴⁵ HIV prevalence is higher among women than men, ranging at 6.2% and 3.8%, respectively.⁴⁶ Persons who engage in socially stigmatized behaviours, including sex work, injection drug use and male-to-male sexual behaviours are disproportionately at higher risk for HIV infection.

The Guideline requires that, counselling to take into account the language and level of understanding of the person(s) receiving HTC. For example, adults and children will require different communication skills, as will persons with different levels of education. The HTC providers need to respond appropriately to the individual, couple, or family counselling needs.⁴⁷ The guideline recognizes interventions performed by the social welfare service providers and identifies different actors to undertake the interventions.

2.1.2.10 The Education and Training Policy, 2014

The Policy has been developed to guide, synchronize, and harmonize all structures, plans and practices intended to ensure access, equity and quality at all levels; as well as proper and efficient mechanisms for management, administration and financing of education and training.⁴⁸

It also aims at increasing access to education by focusing on the equity issue with respect to women, disadvantaged groups and

45 The National Comprehensive Guideline for HIV/AIDS Testing and Counseling, 2013.

46 Chapter 1; Guidelines for HIV/AIDS Testing and Counseling.

47 Chapter 2: Core Principles of HIV Testing and Counseling.

48 See p. Xiii on the Need of Education and Training Policy.

areas in the country. This intends to promote access and equity through making education available to all citizens as a basic right so that talented and gifted, whether disabled or disadvantaged groups shall have equal access to education.⁴⁹

The Policy defines access to education to mean opportunities available to the target population to participate in acquisition of education, whereas equity refers to the fairness in the distribution and allocation of education resources to various segments of the society. The Policy insists on guaranteed access to education without regard to sex, colour, ethnicity, creed or economic status. It acknowledged central planning to accommodate the liberalization and privatization of the provision of public services to guarantee access to pre-primary and primary education, and adult literacy to all citizens as a basic right.⁵⁰

The Policy acknowledges that, despite efforts to make education accessible, certain groups of individuals and communities in society have not had equitable access to education. Some have not had access due to their style of living, for example, hunters, gatherers, fishermen and pastoralists; others on account of marginalization, e.g. orphans and street children. Others have not accessed education on account of their physical and mental disabilities, such as, the blind, the deaf, the crippled and the mentally retarded. The Policy requires the Government to promote and facilitate access to education to disadvantaged social and cultural group.⁵¹

A social worker may counsel students who are suffering from stress, anxiety, relationship problems or depression. With that respect, regulated provision of social welfare services is vital in ensuring

49 Ibid.

50 See Chapter Three on access and equity in education and training, p. 17.

51 Ibid, p. 18.

that the objectives under the Policy are achieved.

2.1.2.11 The Women and Gender Development Policy, 2000

The Policy puts emphasis on integration of gender equality in policies, plans, development strategies and actions in all sectors and at all levels in the development process.⁵² The Policy also provides for women's empowerment by giving more opportunity to women in all spheres including, politics, leadership positions, management and economic development.⁵³ The Policy gives duty to the Government to ensure that there are adequate number of personnel in community development so as to sensitize the community on issues of development, curbing poverty, outdated customs and traditions and social protection. The Government is also required to encourage and register Non-Government Organizations the principle functions of which help the community in combating poverty and exploitation.⁵⁴

The Policy targets at reducing the existing differences between men and women in order to have conducive environment for women to perform their responsibilities by considering gender needs for own development and eliminate poverty and removing the existing gaps for women participation in development activities.

Gender and sex shapes all aspects of lives including access to key resources and services such as information, education, employment, health and credit. Being a socio-cultural construct, in terms of socially and culturally ascribed roles of males and females, gender often produces inequalities between sexes. This is because gender determines the way households allocate resources to sons and daughters.

52 See Chapter One of the Policy.

53 See Chapter Two of the Policy.

54 See Chapter Three of the Policy.

Social work professionals can reduce gender inequalities by facilitating women to have access to formal education which is essential in promoting women's capacity to challenge and act on the conditions of their lives that impede them from enjoying the benefits of society and enhance the capacity of women through empowerment programs that seek to remove barriers that work against them.

2.1.2.12 The National Strategy for Gender Development, 2005 (NSGD)

The aim of the NSGD is to consolidate and speed up implementation of the Women and Gender Development Policy in order to redress gender gaps and inequalities between men and women. It also aims at guiding implementers to incorporate gender concerns into policies, plans, strategies and programmes with a view to implementing commitments at international, regional and national levels.⁵⁵

The strategy underscores that despite various efforts in combating gender violence, violence against women and children still persists in the country. Many cases of violence against women and children occur and are often not reported due to various reasons such as ignorance, fear of intimidation and shying off. Children are vulnerable to abuse and exploitation and are often subjected to sexual abuse, child labour, early marriages, teenage pregnancies, genital mutilation and affected more by HIV/AIDS.

It states that food security exists where all people at all levels have physical, social and economic access to sufficient and safe food to meet their nutritional needs and cultural preference for active and health life. However, poor nutrition is common for children, orphans, pregnant women and lactating mothers and children in difficult

⁵⁵ See paragraph 1.6 of the strategy.

situations.

The strategy tasks the local government authorities to coordinate implementation of programmes at Regional and District levels and also to undertake capacity building measures at the Local Government level. Furthermore, the Ministry will lead in collection and dissemination of gender disaggregated data from grassroots level to the national level and vice versa.

The Local Government Authorities are required to allocate adequate resources to support the implementation of the NSGD as well as to monitor and report progress on gender equality, equity and development and for sensitizing various target groups on gender issues and facilitate generation; utilization and dissemination of gender disaggregated data and information. The provision of social welfare services is essential for the successful implementation of the Policy, particularly, at the Local Government level.

2.1.2.13 The National Plan of Action to End Violence Against Women and Children, 2017/18 – 2021/22 (NPA-VAWC)

The NPA-VAWC has been developed by consolidating eight different action plans addressing violence against women and children with a view to creating a single comprehensive National Plan of Action intended to eradicate violence against women and children. The eight action plans consolidated are:

- i) the National Plan of Action to Eliminate Female Genital Mutilation in Tanzania, 2000 - 2015;
- ii) the National Plan on Eradication of Violence Against Women and Children, 2000-2015;
- iii) the National Plan of Action for the Elimination of the Child Labour, 2009-2014;

- iv) the National Plan of Action to prevent and Respond to Violence Against Children, 2013-2016;
- v) the National Plan of Action of Address the Trafficking of Persons, 2013-2017;
- vi) the National Costed Plan of Action for Most Vulnerable Children, 2013-2017;
- vii) the National Police Gender and Children's Desk National Plan of Action, 2013-2016; and
- viii) the National Child Justice Strategy, 2013-2017.

The NPA -VAWC seek to contribute to the Agenda 2030 Sustainable Development Goals (SDGs) and the African Union Commission's Agenda 2063 by promoting use of evidence-based approaches in supporting those committed to, and charged with, preventing and responding to violence against women and children from Central Government to grassroots and from civil society to the private sector.⁵⁶

It emphasizes actions needed for both preventing and responding to violence and recognizes that investing in violence prevention initiatives has a positive impact on inclusive growth. Thus, strengthening the impact of the diverse investments being made by the Government, development partners and stakeholders on the lives of women, children, families, and subsequently, on communities and Tanzania as a whole, is of paramount importance. The NPA-VAWC is grounded in the Tanzanian context and envisages improved coordination, delivery of quality services, implementation of viable prevention and response measures and application of innovative solutions to end all forms of violence against women and children.

It further represents strategic shift in thinking about how Tanzania should address the problem of violence against women and

⁵⁶ National Plan of Action to End Violence Against Women and Children.

children. Instead of focusing on interventions that are issue based, it focus on building systems that prevent violence against women and children in all its forms, and respond to the needs of victims/survivors. This undertaking is immense in that it requires not only a high level of coordination and cooperation among all duty bearers, but also entails taking concrete steps toward bridging the public and private spheres and reaching communities, families, and individuals, including children and reshaping perceptions of violence as well as gender roles between men and women.⁵⁷

NPA-VAWC recognize the importance of social worker and clearly analyses interventions to be undertaken by social worker in the implementation of the plan, particularly, preventing and responding to violence as an initiative towards inclusive growth. What is important is for the plan to go further and provide the required guidance and ethics in the provision of services related to violence against women and children.

2.1.2.14 The National Guidelines for Improving the Quality of Care, Support and Protection for Most Vulnerable Children, 2009

The Guidelines have been developed so as to harmonize and standardize service delivery. They provide social welfare officers with a range of actions and options to take, based on the individual needs of the child and the desired quality levels. The Guidelines can be used as a tool for both direct service delivery and supervision of service providers. These guidelines outline illustrative activities that are essential to bring change in the lives of Most Vulnerable Children (MVC) and other children in vulnerable households.

⁵⁷ National Plan of Action to End Violence Against Women and Children (NPA-VAWC 2017/18 – 2021/22) (Section: Inspire Strategy).

Lots of efforts have been made to ensure MVC are supported with essential services. However, lack of guidelines for organizations that are offering services to children, together with low level of awareness and shared definitions of quality have created opportunities for wide variations in the content and quality of MVC programs. Food and nutrition, shelter, family-based care and support, social protection and security, primary healthcare, psychosocial care and support, education and vocational training and household economic strengthening are essentially the needed services.

The guidelines provide the importance of social welfare staff in the implementation of the plan in the health sector. However, no comprehensive description of responsibilities is assigned to social welfare officers as well as regulations guiding the carrying out of their duties.

2.1.2.15 The Human Resource for Health Strategic Plan, 2008 – 2013

This Policy document aims at guiding the health sector in proper planning, development, management and effective utilization of human resource. It intends to minimize human resource shortage, and increase the capacity of health and social welfare service providers at all levels through establishment of effective management systems. It recognizes that, the extreme shortage on the social welfare service providers has been caused by, among other factors, the decentralization policy which required social welfare services to be rolled out to all district and ward levels.⁵⁸ The Plan reveals that, today, social welfare services are in great demand due to increasing social problems. The specific problems which need social welfare services interventions are child labour, early pregnancies and

58 Human Resource Strategic Plan for Health and Social Welfare 2008- Executive Summary Section Strategic Plan 2014-2019 (Rationale for the Plan).

marriages, child abuse, child neglect and family rejection, alcohol and drug abuse, increasing level of destitution, commercial sex as well as number of houses headed by children and elderly people. Other increasing social problem includes family disintegration, marriage breakages, human trafficking, increasing number of children in conflict with laws and single parenting.⁵⁹

2.1.2.16 The Africa's Agenda 2063: The Africa We Want

This Agenda looks ahead towards the next fifty years with a vision of an integrated prosperous and peaceful Africa driven by its own citizens and representing a dynamic force in the global arena supported by the Addis Ababa Action Agenda (AAAA) on Financing for Development. The Agenda, among other things, aims at removing obstacles hindering women from inheriting clan property or business, ensuring equal access to and control of productive assets, gender parity in control, representation, advancement, elimination of all forms of violence against women, harmful social norms and customary practices, child labour exploitation, early marriages, trafficking and soldiering. Tanzania being a member of the AU, is implementing the Agenda and social work services are among the key interventions towards the implementation.

2.1.2.17 The SADC Regional Indicative Strategic Development Plan, 2005 -2020

This is a comprehensive development and implementation framework guiding SADC's regional integration agenda over a period of fifteen years (2005-2020). It aims at deepening integration, accelerating poverty eradication and attaining other economic and non-economic development goals. Tanzania, being a member of the SADC, is required to implement the Plan and social work is among

59 HRSP for Health and Social Welfare issues.

the key attributes that will help implementing the Plan.

Among other things, the Plan aims at addressing inequalities, marginalization and vulnerabilities that perpetuate poverty; mitigating the socio-economic impact, especially, in providing support for orphans and other vulnerable children by developing and implementing strategies for social support, like shelter, schooling, nutrition, health and social services; developing and implementing comprehensive programmes of care, support and treatment, including, addressing resource constraints such as a poor healthcare infrastructure and issues of stigma and discrimination.

The Plan require member states to prohibit all forms of gender-based violence; provide for the comprehensive testing, treatment and care of survivors of sexual assault; and preventing human trafficking and provide holistic service to the victims, with the aim of re-integrating them into society.

2.1.2.18 The Agenda 2030: Sustainable Development Goals

This is a global development Agenda succeeding the Millennium Declaration of 2000 which contained the Millennium Development Goals (MDGs) that had 2015 as terminal year. A set of 17 SDGs was adopted which covers issues like ending poverty in all of its forms, everywhere; promoting economic and social prosperity, fighting inequality and injustice, and tackling climate change. The goals seek to build on the Millennium Development Goals and complete what they did not achieve. It also seek to realize human rights, gender equality and empowerment of women and girls. The Agenda focus on the needs of the poorest and the most vulnerable groups. Its goals include ending poverty; agriculture and food security; health; education; gender equity, water and sanitation, energy supplies, infrastructure and industrialization.

Tanzania being a member of the UN, is required to implement the Agenda. It is evident that social work has a significant role to play in implementing various issues under the Agenda that require interventions by all Member States.

2.2 Legislation

2.2.1 Introduction

Unlike other countries which have specific law governing social welfare services and social work profession,⁶⁰ Tanzania does not have a specific law on social welfare services and regulation of the conduct of social workers. Nevertheless, Tanzania has various laws that govern social welfare services provision and related activities. The following part of this chapter analyses laws and highlights the gaps that exist in the laws in relation to social welfare services provision in Tanzania.

2.2.2 Analysis of Existing Laws

2.2.2.1 The Constitution of the United Republic of Tanzania of 1977, Cap. 2

This is the mother law of the country. Under its fundamental objectives and directive principles of state policy, there are, provisions for social welfare services to members of the public. This is provided under Article 11 of the Constitution which, among other things, stipulates that the state authority shall make appropriate provisions for the realization of a person's social welfare at times of old age, sickness or disability and in other cases of incapacity.

60 Zimbabwe (The Social Workers Act, 2001), Namibia (The Social Work and Psychology Act, 2004), South Africa (The Social Service Professions Act No. 110 of 1978), Seychelles (The Social Work and Psychology Act No. 6 of 2009), New Zealand (The Social Workers Registration Act of 2003).

By virtue of this Article, the responsible authorities and public officers who are responsible in providing social welfare services to the people have to discharge their functions and duties to ensure realization of person's social welfare.

Pursuant to article 11, state authority have made various efforts in coming up with appropriate provisions in various laws for the realization of a person's social welfare. However, there is no a specific law enacted to regulate the conduct of social workers who are responsible for the provision of such social welfare services.

2.2.2.2 The Institute of Social Work Act, Cap. 110

The Act establishes the Institute of Social Work and provides for the following functions and objectives, namely, to provide training on principles, procedures and techniques of social welfare, conduct training programs leading to professional qualifications in social work practice, stimulate and promote pursuit of student in studying social work, conduct examinations and grant of awards to qualified students and other related matters.⁶¹

These functions and objectives make the Institute very important in preparing qualified personnel in the area of social work. From this Institute and few others, Tanzania has managed to produce social workers who are practising or providing social welfare services in Tanzania despite their limited number. The law deals specifically with establishment of the Institute and for provision of social work training and not otherwise. In this case, there is a need of having in place, another law that is extensive enough in regulating the functions, duties and regulation of the conduct of social work professionals.

⁶¹ Section 4 of the Institute of Social Work Act, Cap 110.

2.2.2.3 The Law of the Child Act, Cap. 13

The Act provides for the protection of the rights of the child including, non-discrimination, right to name and nationality, right to grow up with parents, right to parental property, right of opinion, protection from harmful employment, protection from torture and degrading treatment, duty to maintain a child, parental duty and responsibility, adoption of a child and penalty for contravention of rights of children. The law mandates and empowers the Minister responsible for Social Welfare, the Commissioner for Social Welfare and social welfare officers to carry out activities for the protection of children's rights.

The law significantly enables social workers to carry out functions aimed at alleviating the conditions of children in need of help or welfare. However, the law does not explicitly provide for the regulatory framework for the conduct of the social workers in the provision of social welfare services to children.

2.2.2.4 The Persons with Disabilities Act, Cap. 184

The law provides for the rights of people with disabilities such as health care, social support, accessibility, rehabilitation, education and vocational training, communication, employment or work protection and promotion of basic rights for the persons with disabilities and such other matters.

The law further empowers the Minister responsible for social welfare, the Commissioner for Social Welfare and social welfare officers to carry out activities in relation to the rights of people with disabilities.⁶² However, the law does not provide for the regulation of social work profession.

62 See Section 9, 16, 17, 20 of the Persons with Disability Act of 2010.

2.2.2.5 The Mental Health Act, Cap. 98

The law provides for the care, protection and management of persons with mental disorders and voluntary or involuntary admission in mental health care facility and other related matters. Section 3 defines 'health care' to include community based treatment and social rehabilitation, and construes 'mental health care facility' to include rehabilitation centre.

Furthermore, Section 5(2) and (3) recognises the significance of social worker involvement in the provision of mental health services thus:

“(2) Where a person who has not attained the apparent age of eighteen years has been received in a mental health care facility, has no parent or guardian or his parent or guardian is incapable of performing or refusing to perform his duty, the officer in charge of the mental health care facility shall inform the District Social Welfare Officer of that fact.”

“(3) The District Social Welfare Officer shall, after receiving that information, give directions for the continued admission or discharge of such patient as may be necessary.”

Despite social workers being involved in the mental health services delivery, the law does not stipulate the rights, duties, functions nor does it regulate the conduct of the social workers when carrying out duties.

2.2.2.6 The Law of Marriage Act, Cap. 29

The law provides wide range of functions and duties that are entrusted to social workers in relation to matrimonial issues, particularly, on issues of separation and divorce of spouses, custody and maintenance of a child, division of matrimonial properties and resolving of conflicts between spouses through Marriage Conciliation

Boards. It provides for matters related to marriage, personal and property rights between husband and wife, separation, divorce, custody and maintenance of a child and other matrimonial reliefs.⁶³

Though the law charges social workers in handling the functions of social welfare services on issues of divorce, distribution of matrimonial properties and custody and maintenance of children, it does not extensively covers the rights, duties, functions and regulation of the conduct of the social workers when carrying out duties.

2.2.2.7 Penal Code, Cap. 16

This law provides for penal offences. Part XV contains provisions for offences against morality, including rape, sexual exploitation of children, grave sexual abuse, sexual harassment, procuration for prostitution, conspiracy to induce unlawful sexual intercourse, woman living on, or aiding prostitution, and so forth.

Some of the offences leaves psychological trauma to victims who, in turn, need psychological therapy and close supervision by a social worker in order to restore the victim to normal living condition.

Since this is a penal law, it does not specifically deal with the regulation of social work personnel who are involved in restoring conditions of victims of the offences, there is a need of having in place a specific law that will, among other things, address how social workers needs to handle victims of penal offenses.

2.2.2.8 The Drugs Control and Enforcement Act, Cap. 95

The law provides for the establishment of an authority for control and combating drugs. Among its obligations, the authority is

63 See Section 99-102, 114-124 and 125-137 of the Law of Marriage Act, Cap 29.

charged with taking measures for preventing drug abuse by making identification, treatment, education, after care, rehabilitation and social integration of drug addicts.⁶⁴

These obligations fall under social welfare services. However, the law neither explicitly empower a social worker to perform that role, nor extensively covers the rights, duties, functions and is short of regulation of the conduct of the social workers.

2.2.2.9 The Drugs Control and Enforcement (General) Regulations GN. No.173 of 2016

These Regulations provide for treatment of drug addicts, treatment centres and other related matters. Regulation 30 provides that:

“Supportive supervision of treatment and rehabilitation services shall be conducted quarterly by the Authority in collaboration with respective stakeholders.”

This regulation presupposes that, among the key players involved in delivering social welfare services, are the social workers as the nature of the obligation lies under social welfare services. However, the Regulations do not explicitly confer power to a social worker to perform that role, nor does it covers the rights, duties and functions. Furthermore, it does not provide regulatory framework for the conduct of the social workers in relation to that role.

2.2.2.10 The Community Service Act, Cap. 291

This law provides for an introduction and regulation of community service by offenders. Section 2 provides that “community service” shall comprise of unpaid public work within a community, for the benefit of that community, for a period to be fixed by the court not

64 See Section 10(2)(c) of the Drugs Control and Enforcement Act, Cap. 95.

exceeding the term of imprisonment for which the court would have sentenced the offender.

The public works which the offender is obliged to perform includes, but not limited, to construction or maintenance of public roads or roads of access, afforestation works, environmental conservation and enhancement works, projects for water conservation, maintenance work in public schools, hospitals and other public social service amenities, work of any nature of a foster home or orphanage, general cleaning and related activities, rendering specialist or professional services in the community for the benefit of the community and for other manual works as may be approved from time to time. Some of these works purely relates with the provision of social welfare services within the society.

In order to enforce a community service order, the law established a National Community Service Committee which comprise of, among others, the Commissioner of Social Welfare, who is responsible to ensure that such community services performed by an offender provide for a social welfare within the society. In spite of this, the law allows the offender to perform social welfare related activities the nature of it being purely limited to purposes for which it was enacted. It does not provide for the regulation of personnel for social welfare services.

2.2.2.11 The Employment and Labour Relations Act, Cap. 366

The law provides for labour rights, basic employment standards, prevention and settlement of disputes and related matters. The relation of this law and social welfare services is provided under section 5 which provides for the minimum age of the employment for children. The section reads as follows:

“5 - (1) No person shall employ a child under the age of fourteen years.

(2) A child of fourteen years of age may only be employed to do light work, which is not likely to be harmful to the child’s health and development; and does not prejudice the child’s attendance at school, participation in vocational orientation or training programmes approved by the competent authority or the child’s capacity to benefit from the instruction received.

(3) A child under eighteen years of age shall not be employed in a mine, factory or as crew on a ship or in any other worksite including non-formal settings and agriculture, where work conditions may be considered hazardous by the Minister;

(4) No person shall employ a child in employment-

(a) that is inappropriate for a person of that age;

(b) that places at risk the child’s well-being, education, physical or mental health, or spiritual, moral or social development.”

It is clear from this section that the law provides minimum age of employment to children and imposes restrictions on the child’s employment. These restrictions have to be administered by the labour officer despite of their limited number.

However, the law does not impose any duty to a social worker in preventing child labour and administering or monitoring the restrictions on the employment of a child under the minimum age of employment.

2.2.2.12 The HIV and AIDS (Prevention and Control) Act, No. 28 of 2008

The law impliedly enables the social worker in providing the needs to people living with HIV and AIDS. Among other things, the law

provides for prevention, treatment, care, support and control of HIV and AIDS, promotion of public health in relation to HIV and AIDS and for appropriate treatment, care and support using available resources to people living with or at risk of HIV and AIDS and for other related matters.

The law insists on the care, support and prohibition of stigma to people living with HIV and AIDS. Social workers play a big role within the society, particularly, in the care, support and prohibition of stigma to people living with HIV and AIDS by improving the living standards and creation of awareness to members of the public on the rights of people living with HIV and AIDS. Nevertheless, the law does not confer mandate to social workers to provide the needs necessary for improving the living standards of people living with HIV and AIDS where it is deemed fit to do so.

2.2.2.13 The Anti-Trafficking in Persons Act, No. 6 of 2008

The law defines traffickers in persons as anyone who recruits, transports, confines, provides or receives a person by any means including under the pretext of domestic or overseas employment, training or apprenticeship, for purposes of prostitution, pornography, sexual exploitation, forced labour, slavery, involuntary servitude or debt bondage.

It provides for the social rehabilitation of victims of human trafficking to be carried out by social welfare officers for the purpose of reinstating the victims back into normal way of life, material assistance, psychological, medical and professional rehabilitation, employment and dwelling place. Section 17 states that:

“17 (1) The public officer in the security services shall be responsible for the security of trafficked persons and provision of basic

temporary material support for the care and protection of rescued victims of trafficking persons.

- (2) Social rehabilitation of rescued victims shall be carried out by social welfare officers for the purpose of re-instating the victim back into normal way of life and may include provision of legal assistance and material assistance, psychological, medical and professional rehabilitation, employment and a dwelling place.
- (3) The Commissioner for Social Welfare shall provide counselling services to the victims of trafficking in persons with a view to assisting in the rehabilitation and re-integration of such persons.
- (4) Without prejudice to the preceding provisions of this section, the best interest of the child or disabled person shall be paramount in any assistance given to rescue, rehabilitate, counsel or re-integrate a child who is a victim of trafficking in persons.”⁶⁵

The law further provides in section 18 that:

“The Minister shall, in cooperation with the Minister responsible for social welfare, take adequate measures for protection, rehabilitation and assistance to rescued victims.”⁶⁶

All circumstances enumerated, makes a social worker a necessary link in rehabilitation of trafficked persons. However, the law does not extensively provide for the functions, duties and regulation of the practice of social worker in performing these significant functions.

2.2.2.14 The National Education Act, Cap. 353

The law provides for central administration of national schools, local

⁶⁵ See Section 17(1) and (2) of the Anti-Trafficking in Persons Act No. 6 of 2008.

⁶⁶ See Section 18 of the Anti-Trafficking in Persons Act No. 6 of 2008.

administration of schools, establishment and registration of schools and management and control of schools. It further provides for compulsory enrolment and attendance of pupils at schools as well as age for pre-primary education. Section 35 and 36 provides that:

“35 (1) It shall be compulsory for every child who has reached the age of seven years to be enrolled for primary education. (2) The parent or parents of every child compulsorily enrolled for primary education shall ensure that the child regularly attends the primary school at which he is enrolled until he completes primary education. (3) Every pupil enrolled at any school shall regularly attend the school at which he is enrolled until he completes the period of instruction specified in respect of the level of education for the attainment of which he is enrolled at the school.

36. Every child of not less than five years of age shall be eligible for enrolment for pre-primary education for a period of two years”.

Despite the fact that the law provides for the right of education to children (as among the rights and welfare of the child), it does not mandate social workers to be part in regulating the conduct of children welfare at schools.

2.2.2.15 The Probate and Administration of Estates Act, Cap. 352

This law provides for the grant of probates of wills and letters of administration to estates of deceased persons, makes certain provisions with regard to the powers and duties of executors and administrators, administration of wakf property, benevolent payments in Islamic estates, and related matters. However, it completely does not provide for the involvement of the social workers in protecting

probate rights of widows and children when they are dealing with inheritance related issues.

The law is restricted to matters of probate and administration of deceased's estate. It does not have provisions relating to functions, duties and regulation of practitioners of social work in their practice.

2.2.2.16 The Local Customary Law (Declaration) Order, GN. No. 279 of 1963 (First Schedule - Laws of Persons)

This Order provides for the welfare of women (maintenance of a divorced wife, maintenance of a barren widow, desertion, and abandonment) and welfare of children. However, the Order is silent on the roles and duties of social workers. This signifies the importance of having a specific law on social work that would provide for the functions, duties and regulation of the practice of social workers in the society.

2.2.2.17 Local Customary Law (Declaration) (No.4) Order GN. No. 436 of 1963 (The Second Schedule - Laws on Inheritance)

Among other things, the Order provides for rights of women and children on inheritance. For instance, women are allowed to inherit except the clan land. They can use clan land without selling it during their lifetime. But if there are no men in that clan, a woman can inherit any such land completely. The widow has no share of the inheritance if the deceased left relatives of his clan, her share to property are to be cared for by her children, just the way she cared for those children.

The Order does not provide for social workers involvement in making sure that the rights and welfare of women and children are well protected, nor does it covers the rights, duties, functions and the

conduct of the social workers in respect of care for women whose property is cared of by her children.

2.2.2.18 The Local Government (District Authorities) Act, Cap. 287

The law provides for establishment, registration and legislative powers of local government authorities and related matters. Among the basic functions is to promote the social welfare and economic well-being of all persons within its area of jurisdiction.⁶⁷

The law further provides that, for the purpose of better execution of its functions, a local government authority shall take all such measures as in its opinion are necessary, desirable, conducive, or expedient for the furtherance and enhancement of the health, education, social, cultural and recreational life of the people. To provides for the relief of poverty and distress, and for the assistance and amelioration of life for the young, the aged and the disabled or infirm.⁶⁸

The law further provides for other welfare functions which the local government authority may perform. These are spelt out under paragraphs 17 and 44 of the first schedule. These includes, build, equip and maintain, or grant sums of money towards the establishment, equipment or maintenance of hospitals, health centres, maternity clinics, dispensaries, asylums for the aged, destitute or infirm or for orphans, or institutions for lepers, to establish, erect, equip and maintain social or welfare centres.

Despite the fact that the law provides for the promotion of social welfare and economic well-being of all persons within the jurisdiction

⁶⁷ See Section 113 (1) (b) of the Local Government (District Authorities) Act, Cap 287.

⁶⁸ See Section 113 (2) (c) and (d) of the Local Government (District Authorities) Act, Cap 287.

of the responsible local government authority, it does not extensively covers the rights, duties, functions and regulation of the conduct of the social workers.

2.2.2.19 The Local Government (Urban Authorities) Act, Cap. 288

The law establishes urban authorities and charges each of them the responsibility to promote the social welfare and economic well-being of all persons within its area of jurisdiction.⁶⁹

The law further provides for other welfare functions which the authority may perform as including, to build, equip and maintain, or grant sums of money towards the establishment, equipment or maintenance of hospitals, health centers, maternity clinics, dispensaries, asylums for the aged, destitute or infirm or for orphans, or institutions for lepers and to erect, equip and maintain social or welfare centers.

2.3 Conclusion

It may be concluded from the literature analysis that, in Tanzania, there exist policy frameworks that address various social problems which needs a well-functioning and vibrant social welfare service delivery system. Such framework demonstrates to a large extent the commitment and political will of the Government to address vulnerability issues in keeping with national laws and international commitments. The assessment has noted, however, that the policies do not provide clear role and duty of social work in overcoming the mentioned social problems. It has been noted that most of policies do not take cognizance of the role of social work in addressing various social problems they intend to address.

A close examination of policies strategies plans and programs, it

⁶⁹ See Section 60 (1) (b) of the Local Government (Urban Authorities) Act, Cap 288.

is apparent that social work has either been overlooked or given little attention. Most of policies directives address issues geared at preventing occurrence of social problems. The policies pay little attention in remedying situations where the problem has occurred and a person need to be pulled out of the problems and that he cannot be trapped in the same problem.

On the other hand, the legal framework governing social welfare services and social work profession is characterized by scattered pieces of legislation. It is also clear that, despite a long list of legislation providing for social welfare services, none of them provide for regulatory framework for registration, administration and quality assurance of social work profession.

CHAPTER THREE

SITUATION ANALYSIS OF SOCIAL WELFARE SERVICES

3.0 Introduction

This chapter analyses the existing situation on provision of social welfare services in Tanzania. The chapter provides various stakeholders involved in provision of social welfare services in different areas. These areas includes elderly homes, children homes, vocational training centres, retention homes, approved schools, dare care teachers training institutions, day care centres, health facilities, police gender and children desk. It also provide for matters related to training and deployment of social welfare service providers in Local Government Authorities, NGOs and other social welfare institutions. There are other social welfare services providing ministries, departments and agencies particularly, the Prime Minister's Office (PMO) which is mandated over people with disabilities. Others are NGOs, FBOs and CSOs.

3.1 Functions of the Ministry in Relation to Social Welfare Services Provision

The provision of social welfare services in Mainland Tanzania is currently under the Ministry of Health, Community Development, Gender, Elderly and Children (MoHCDGEC). The Ministry is responsible for providing expertise and services to children, survival, protection, development of families in difficult situation and welfare of the elderly. The MoHCDGEC is basically tasked with the provision of social welfare services including formulating, reviewing, implementing, monitoring and evaluating policies, plans, strategies, laws, regulations and guidelines on management of social welfare services to most vulnerable groups, including the elderly and children. There are other social welfare services providers.

These are ministries, departments and agencies particularly, the Prime Minister's Office (PMO) which is mandated over people with disabilities. Others are NGOs, FBOs and CSOs.

3.2 Status of Social Welfare Services

Provision of social welfare services in Tanzania has changed from time to time to reflect socio-economic, political and technological advancement that has affected peoples' way of life. Changes are reflected in terms of poverty, breakdown of family relationships, poor health, rising rate of crimes, violence against children and women as well as the neglect of the elderly, HIV/AIDs has also gone down to increasing the rate of vulnerability of the population hence, the need for social welfare services.⁷⁰

The social welfare services are provided in different areas such as, homes for the elderly, children homes, street children homes, vocational training centres for people with disabilities, retention homes, approved school, teachers training institutions, day care centres, health facilities, police gender and children desk and local government authorities and within the society. The Mapping of Social Welfare service provision in Tanzania, conducted in 2013 aimed at assessing the quality of services made the following findings in each of the service area.

3.2.1 Homes for the Elderly

An elderly home is a place where old people who cannot fully take care of themselves and who need a little extra help are sheltered and given the necessary humanitarian amenities including food.⁷¹

70 Ministry of Health and Social Welfare, Report for a Mapping Study of Social Welfare Services and Providers in Tanzania, Dar es Salaam, 2013 pg. 6.

71 Ministry of Health and Social Welfare, Report for a Mapping Study of Social Welfare Services and Providers in Tanzania, Dar es Salaam, 2013 pg. 6.

According to the 2012 census, Tanzania had the population of the elderly of 2,449,030 (1,278,859 females and 1,170,171 males). The number was expected to increase to 2,777,007 by December 2017.⁷² The growing number of the elderly population in Tanzania created the need for providing quality social welfare services for their wellbeing. The elders have traditionally been taken care of by family members and relatives. However, in recent years, social-economic transformations have left many elderly people with inadequate care and support, hence, becoming vulnerable.⁷³ Due to these changes, some of older people have been admitted in elderly homes as last option.

The analysis of the Situation of Older People in Tanzania indicated that they are likely to be poorer, more susceptible to chronic illness and disability, and more likely to suffer from discrimination and social exclusion. Compared to other segments of society, older people are the last to be informed of their rights and entitlements partly due to higher levels of illiteracy and poverty.⁷⁴

It is therefore the duty of a social worker to ensure that the community is well sensitized on elderly rights and encouraged to take care of the elderly the way it to be traditionally. By doing so, it will reduce burden to the Government so that resources that could be used to provide services to elderly homes would be used for other development activities. Besides sensitization, the quality and quantity of social welfare services to the elderly need to be improved including accessibility of these services to the elderly.

3.2.2 Children Homes

The need for children homes is caused by socio-economic

72 Tanzania population census 2012.

73 Ministry of Health and Social Welfare, Report for a Mapping Study of Social Welfare Services and Providers in Tanzania ,Dar es Salaam, 2013 pg.7.

74 Help Age Country Strategy 2010.

transformations taking place in Tanzania over the past two decades. The prevalence of HIV/AIDS, family conflicts and poverty explains the increase. The Mapping study (2013) shows that there were 282 children homes in Tanzania with Arusha having the highest number while Lindi having the lowest number. Only 87 children's homes were registered and licenced while 188 homes were not registered. The effect of not registering is poor services delivery, child abuse, improper admission and owners using children as means of income generation. 79% of the children homes are owned by the CBOs, NGOs and FBOs. Of these, 13% were owned by individuals, 4% by affiliated homes, 0.4% by Government and 4% by individual families.⁷⁵

The Law of the Child Cap. 13 and the Children Home Regulations, 2012 requires admission of children into children homes to be the last option. The best place is family care, foster care and adoption. The Government long-run strategy is to encourage de-institutionalization of children homes so that children having no fixed abode are reunified and integrated in their families.

The Government strategy of reunification and family integration can easily be achieved once the social work profession is adequately regulated by setting required professional standards to be complied with by all social welfare service providers. Regulation of social welfare service providers would reduce the risk of children abuse in children's homes and ensure security and safety of children.

3.2.3 Street Children Homes

The problem of street children has been attributed to various factors associated with the process of urbanization and rural poverty. Other

75 MoHSW, A Report on the Assessment of the Situation of Children in Institutional Care in Tanzania, 2013 pg 13.

factors such as rural urban migration and weak basic education systems, family break-up⁷⁶ and the effects of HIV/AIDS has also been noted.

Street children in major urban cities and towns are now a common sight. The number of children heading families or loitering in urban streets commonly referred to as watoto wa mitaani has tremendously increased.

There are twenty five street children homes spread out in eight regions of Tanzania. Dodoma (8 homes) and Mwanza (5 homes) have the highest number of street children homes. The law requires a licence in order to establish a street children home.⁷⁷ Findings show that only eight of the street children homes operate with licences while seventeen homes operate without licence.⁷⁸

Whatever the immediate cause for children presence in the streets it is essential that strategies for reintegration, care and support as well as overall prevention should be designed in such a way that strategies respond to the causes. Thus, a social worker has a duty to make this strategy to be in place and implemented. A social worker should also focus on resolving family break-ups, close supervision of the existing street children homes to ensure that children living in those homes receive quality services.

3.2.4 Vocational Training Centres for Persons with Disabilities

Findings illustrate the existence of 13 vocational training centres for people with disability. The Government owns seven of vocational

76 MoHSW, A Report on the Assessment of the Situation of Children in Institutional Care in Tanzania, 2013.

77 Section 133(5), 137(2) and 146(2)(a) of The Law of Child Act, No.21 2009.

78 MoHSW, Report for A Mapping Study of Social Welfare Services and Providers in Tanzania (2013).

training centres while the rest are owned by private organisations or individuals. It was established that only 9 of the vocational centers are in operation, out of which, four governments owned vocational centers (Mirongo, Mtapika, Masiwani and Luanzari) were closed twenty years ago. Provision of services in private owned vocational training centers is constrained by financial and human resources.⁷⁹

Currently, there are only two vocational training centres in operation. These are Yombo in Dar es Salaam and Singida VTC in Singida. The roles of SWOs in these institutions are mainly the provision of psychological care, support and rehabilitation to the students with disabilities in order to reduce economic dependency of youths and people with disabilities and enhancing their functioning through personal empowerment. The centres are vital for economic support, skills development and empowerment.

3.2.5 Retention Homes

The study showed that delivery of services in retention homes and approved school are satisfactory. The only limitations are shortage of human resource, dilapidated buildings and insufficiency of funds to meet operating expenses. Additionally, it was observed that 20 regions in Tanzania Mainland do not have retention homes, hence, children in conflict with the law are mixed with adults contrary to the requirement of the law.⁸⁰ Currently, there are three (3) Government children retention homes in the country: Kisutu retention home in Dar es Salaam, Arusha retention home and Mbeya retention home.

In retention homes, social workers are key players to ensure that children get the best experience out of their times in these homes. To ensure that there are quality services, there is a need to have

79 Ibid.

80 MoHSW, Report For A Mapping Study Of Social Welfare Services And Providers In Tanzania (2013) pg. xi - xii.

sufficient number of qualified social workers. It is also important that social work practitioners are regulated for observance of standards and professional conduct for good practice.

3.2.6 Approved Schools

The need for approved schools is caused by a number of factors; prevalence of HIV/AIDS, family conflicts, single parenthood, family disintegration, decay of traditional values and poverty.

Irambo Approved School is the only school facility in Tanzania established for the juvenile delinquents. Establishment of the approved school is intended to promote, protect and maintain the welfare and rights of children in conflict with the law. The law governing establishment of approved school is in line with Rule 5 of the Beijing Rules that the juvenile justice system on emphasize the well-being of the juvenile and ensure that any reaction to juvenile offenders is always in proportion to the circumstances of both the offenders and the offence.

The facility does not have sufficient social work staff whose duties and professionalism is greatly required in order to change the behaviour of juveniles in conflict with the law. A social worker has a role to play to make sure that causative agents like family conflicts, family disintegration, decay of traditional values and poverty are dealt with in a way that would prevent or reduce the number of children in conflict with the law.

3.2.7 Day Care Teachers Training Institutions

Currently, the number of training institutions is not sufficient to provide for the rising demand of teachers for day care centres. The

existing day care teachers training institutions in Tanzania is 24, but due to the need of human resource for managing day care centres, the number remains insufficient. All institutions follow the curriculum issued by MoHCDGEC with examinations and certificates evaluated and issued by MoHCDGEC. Private day care training centres have not been able to attract many students since most of them operate under capacity.

The other problem is the difficulty for employment of graduate students because training institutions are not accredited by recognized authorities. There is also a problem of shortage of teachers and unsatisfactory teaching environment. Thus, MoHCDGEC in collaboration with NACTE and TCU needs to put in place the required academic standards for all training institutions offering day care courses in order to produce competent and reliable professionals who will provide better social welfare services.

3.2.8 Day Care Centers

Establishment of day care centres is the requirement under the Law of the Child Act. Centres are supposed to be registered and obtain licence before admitting children.⁸¹ Day care centres are necessary because they provide the foundation for nurturing children into cultured and good mannered persons. Available data from MoHCDGEC show that there is an estimated 2,150 day care centres in Tanzania.⁸²

There are more day care centres in urban areas as compared to rural areas. The pattern of ownership shows more day care centres are owned by private/individuals, followed by FBOs. The majority

81 Section 155(5)(a) of the Law of the Child Act 2009, Act No. 21 of 2009.

82 MoHSW, Report for A Mapping Study of Social Welfare Services and Providers in Tanzania (2013) Pg.72.

of day care centres are not registered. It is the duty of social welfare officer to make sure that the minimum standards for operating and the prospective applicant adheres to standards required for managing day care centres. There is no specific curriculum used in day care centres and there is a significant problem of personnel equipped with the required qualifications.

Due to the ever-increasing social - economic activities of parents, going out of their homes, there is an urgent need of having day care centres in the communities in order to take care of their young children. With the current need for strong economy, there is also a need for strong labour force at these centres, supported by strong social welfare systems.

3.2.9 Health Facilities

Most of the health facilities are constrained by shortage of social welfare officers. The roles and responsibilities of social welfare officer in the health facilities at all levels includes, but not limited to, administer medical waivers for patients admitted in designated hospitals and patients who have been abandoned in hospitals.⁸³ The importance of good quality social work services in health sector need no emphasize. This should translate into professionally nurtured social workers and regulating social workers education and practice.

3.2.10 Police Gender and Children Desk

Due to sensitivity and delicate nature of issues related to GBV and child abuse, the Police Force issued guidelines to establish gender and children desks at all police stations. The purpose is to prevent

83 MoHSW, Report For A Mapping Study Of Social Welfare Services And Providers In Tanzania (2013) Pg. Xii & Pg 74.

and respond effectively to all issues related to GBV and child abuse. Human rights report (2013) and Violence against Children Report (2013) show an increase in cases related to GBV and child abuse.

There are 417 gender and children desk operating in Mainland Tanzania and Tanzania Zanzibar.⁸⁴ Dominant cases reported are those involving women abuse. However, coordinators indicated lack of required working tools and space for offices as stipulated in the guidelines for establishing gender and children desks.⁸⁵ Additionally, the purpose for gender and children desk of responding to all issues related to GBV and child abuse is not well implemented due to insufficient social work skills and knowledge to the service providers.

3.2.11 Local Government Authorities

The provision of social welfare services at Local Government Authorities' level is inadequate due to shortage of SWOs, inadequate working environment and tools, shortage of funds and LGAs not prioritizing social welfare issues. Demand has been increasing against minimal supply of social welfare services. Currently, the number of SWOS required is 23,694. The available SWOs stand at 733 giving the deficit of 22,961 social welfare officers.

The major role and functions of SWOs at the district council levels is to implement laws, policies, plans and strategies related to social welfare services. They are also mandated to control the quality of social welfare services provision. However, they are faced with the number of challenges ranging from infrastructure to finances.

84 MoHSW, Report For A Mapping Study Of Social Welfare Services And Providers In Tanzania.

85 MoHSW, Report For A Mapping Study Of Social Welfare Services And Providers In Tanzania (2013) Pg. Xiii & Pg Xiv.

3.3 Human Resources

3.3.1 Education of Social Workers

Training of personnel is an important aspect in the provision of social welfare services.⁸⁶ The right and relevant training as ascertained by the national accrediting institution provides personnel with skills needed to appropriately attend to and handle client needs. Tanzania has a number of accredited higher learning institutions producing social workers ranging from ordinary diplomas, advanced diploma, bachelor degrees, postgraduate studies in social work, including Masters and PhD certificates.

Such higher learning institutions include the Institute of Social Work-Dar-es-Salaam (ISW), the University of Dar-es-Salaam, the Open University of Tanzania (OUT), Hubert Kairuki Memorial University-Dar-es-Salaam (HKMU), (UDSM), Kampala International University (KIU), the State University of Zanzibar (SUZA), Zanzibar University (ZU), St. Augustine University of Tanzania (SAUT), the University of Dodoma (UDOM). Other institutions are Kigoma (Newman) Institute of Social Work and the Kisangara Social Welfare Training Centre. The following table indicate total number of admitted students and graduates from selected universities.

S/N	Name of a Higher Learning Institution	Period of study	Program	Graduates
1	Institute of Social Work, Dar es Salaam	2006 – 2016	Certificate	1482
		1997- 2009	Advanced Diploma	1172
		2009 – 2016	Diploma in SW	1275
		2009 – 2016	Degree in SW	1390
		2016	Masters in SW	3

86 MoHSW, Report for A Mapping Study of Social Welfare Services and Providers in Tanzania (2013) Pg Xiv.

SUB TOTAL				5322
2	University of Dar-es-Salaam	2008-2017	Masters in Sociology	55
		2008-2017	PhD in Sociology	3
SUB-TOTAL				58
3	Open University of Tanzania	2010 – 2017	Bachelor of Sociology	644
		2010 - 2017	Bachelor of Social Work	395
		2010 – 2017	Masters in Social Work	172
		2014- 2017	Post Graduate Diploma in Social Work	38
SUB TOTAL				1249
4	Hubert Kairuki Memorial University - Dar-es-Salaam	2014 - 2016	Masters in Social Work	30
SUB TOTAL				30
5	The State University of Zanzibar	2012 – 2017	Diploma in Social Work	171
SUB TOTAL				171
6	Zanzibar University	2013 – 2017	Degree in Social Work	127
SUB TOTAL				127
7	St. Augustine University of Tanzania-Mwanza	2006 – 2014	Bachelor of Arts and Sociology	1617
		2009 – 2017	Masters of Arts in Sociology	108
SUB TOTAL				1,725

8	Kigoma Training College (Newman Institute of Social Work)	2000 - 2012	Advanced Diploma in Social Work	70
		2013 - 2015	Diploma in Social Work	63
		2013 - 2015	Certificate in Social Work	273
SUB TOTAL				406
9	Kisangara Training Centre Same - Kili-manjaro	2017	Social Welfare Assistants	52
SUB TOTAL				52
GRAND TOTAL				9,140

Source: Registrars of the selected Higher Learning Institutions, 2017

Statistics in the table shows that the requirement of social workers is higher compared to the number of social workers produced by higher learning institutions. Therefore, there is an urgent need for learning institutions to increase the number of students admitted in order to adequately cater for the available demand.

3.3.2 NGOs and Social welfare Services Delivery

There is significant involvement of NGOs in the delivery of social welfare services. In 2013, it was noted that there were more than 31 NGOs, which is 39.7 % of all the institutions. The considerable presence of NGOs in the delivery of social welfare services is associated with commitment to support the government as part of the public - private partnership strategy in the delivery of social welfare services to vulnerable groups.⁸⁷

⁸⁷ United Republic of Tanzania, Ministry of Health and Social Welfare Department of Social Welfare, Assessment of Social Welfare Workforce in Tanzania, pg 19.

It is important that the private sector involvement in the delivery of social welfare services is also regulated to ensure there is standard in service provision. This translates into establishing a regulatory mechanism which involves regulation of social work services by private organisation both in terms of professionalism and organisations. The following table indicate total number of social workers from selected NGOs.

Table: 2 Numbers of Social Workers in NGOs

S/N	Name of the Organization	Number of Social Workers
1.	PACT TANZANIA	120
2.	SAVE THE CHILDREN	85
3.	PLAN INTERNATIONAL	25
4.	JHAPIEGO	45
5.	WAMATA	30
6.	POURTAGE KAGERA	30
7.	HUMULIZA	5
8.	DOGODOGO Centre	10
9.	WORLD VISION	7
10.	SOS	40
	Total	397

Source: Directorate of Non-Government Organisations, 2017

3.3.3 Challenges facing Social welfare Services

In 2013, the MoHSW conducted the mapping of social welfare providers in Tanzania and came up with general conclusions that:

- i) Social welfare services provided are of poor quality, limited in outreach, not comprehensive in meeting all most vulnerable groups;
- ii) Social work profession is not recognized;
- iii) Lack of incentives to social workers;

- iv) The DSW is not properly recognized in Local Government Authorities;
- v) Social welfare services in local government agencies are often provided by unqualified personnel;
- vi) Training of social workers is not tailored to specific client groups;
- vii) Lack of co-ordination of social welfare services at the sub district level, caused by overwhelming shortage of social welfare officers in the districts and further down to the communities.

3.3.4 Regulation of Social Welfare Profession

Provision of social welfare services is governed by different instruments ranging from policies, laws, guidelines and strategies which are very scattered. Thus, there is no specific policy and law regulating the social welfare services provision and the code for professional conduct of social welfare services providers.

Absence of specific law governing social work profession has been seen as one of the reasons for insufficient delivery of social welfare services as there are no means of enforcing standards for professional conduct and ethics to be adhered to by social work practitioners. It is critical to have a law regulating social work profession in Tanzania, in order to address challenges facing social welfare services.

CHAPTER FOUR

INTERNATIONAL INSTRUMENTS AND EXPERIENCE FROM OTHER JURISDICTIONS

4.0 Introduction

This Chapter explores international and regional instruments, and experiences from other jurisdiction, particularly, on matters related to social welfare services. The overall aim is to look at different experience and explore their suitability and adaptability in the Tanzanian context.

4.1 International and Regional Instruments

Under international and regional perspective, a general overview is made on the main legal instruments which address the issues related to social welfare as the basis for enjoyment of various social, economic, political and civil rights. Account is also taken of instruments which are not legally binding but are nevertheless, highly influential in development of regulatory policy in the field of social welfare services provision.

4.1.1 The Universal Declaration on Human Rights, 1948

The Universal Declaration on Human Rights (UDHR)⁸⁸ is a key instrument which sets the basic international principles on human rights. The Declaration set fundamental human rights to be universally protected. The Declaration states that all human beings are born free and equal in dignity and rights.⁸⁹ It provides for the right to recognition as a person before the law.⁹⁰

88 The Declaration was proclaimed by the United Nations General Assembly in Paris on 10, December 1948 Resolution Number 217A.

89 Article 1 of the Universal Declaration of Human Rights.

90 *ibid* Article 6.

The Declaration provides for the right to education which entails right to a child to attend school, learn a profession, develop their talents and learn to respect others and that a parent should have a say in the kind of education a child receive.⁹¹ It provides that education shall be directed to the full development of the human personality and to the strengthening of respect for human rights and fundamental freedoms.

The Declaration also provides for rights to social order. Being responsible to the community, a person's personality can be fully developed within his community and has responsibilities to that community.⁹² The Declaration further provides for the right to freely participate in the cultural life of the community.⁹³ Although, UDHR is not a binding international instruments, nevertheless, states are supposed and have international obligation to uphold dignity and justice of its subjects.

4.1.2 The Declaration of the Rights of the Child, 1959

This is the key instrument which set forth the rights of the child. The Declaration⁹⁴ provides that the child shall in all circumstances be among the first to receive protection and relief,⁹⁵ and that the child shall enjoy special protection and be given opportunities and facilities by law and by other means, to enable the child to develop physically, mentally, morally, spiritually and socially in a healthy and normal manner and in conditions of freedom and dignity.⁹⁶

91 Ibid Article 26.

92 Ibid Article 29.

93 Ibid Article 27.

94 Drafted by the UN Commission on Human Rights and adopted by the General Assembly of the United Nations on 20 November 1959.

95 Article 8 of the Declaration of the Rights of the Child, 1959.

96 Ibid Article 2.

It provides that the child need to enjoy the benefits of social security and that the child is entitled to grow and develop in health. It states that special care and protection be provided both to the child and to the mother, including adequate pre-natal and post-natal care. The child has the right to adequate nutrition, housing, recreation and medical services.⁹⁷

It also provides that the child is entitled to receive education, which needs to be free and compulsory. The Declaration requires that a child be given education which will promote his general culture and enable him, on a basis of equal opportunity, to develop his abilities, individual judgment, and sense of moral and social responsibility, and to become a useful member of society. The best interests of the child need to be the guiding principle to those responsible for the child's education and guidance; that responsibility lies in the first place, with his parents.

4.1.3 The Convention on the Rights of the Child, 1989

The UN Convention on the Rights of the Child (UNCRC) is a follow up to the Declaration of the Rights of the Child which considered that, the child by reason of his physical and mental immaturity, needs special safeguards and care. The UNCRC main focus is on full and harmonious development of the child.

The rights stipulated under the Convention covers all aspects of a child's life and set out the civil, political, economic, social and cultural rights that all children everywhere are entitled to. It also explains how adults and governments must work together to make sure all children enjoy their rights, whereby, every child has rights, whatever their ethnicity, gender, religion, language, abilities or any

97 Ibid Article 4.

other status. ⁹⁸

The Convention provides for parental guidance and child's growing abilities. The family has the main responsibility for guiding children so that they grow, learn and use their rights properly and governments should respect this right. ⁹⁹

The Convention recognizes that children need good health care, clean water, nutritious food, clean environment and healthy education to enable them to stay healthy. ¹⁰⁰ The Convention also provide for right to education¹⁰¹, and that the purpose of the education should develop personality, talents and mental and physical skills to the fullest and prepare children for life. ¹⁰²

The Convention prohibits child labour. It directs State governments to protect children from work that is dangerous to health or development that interferes with education or that might lead people to take advantage of them. ¹⁰³ The State governments should also provide ways of protecting children from being used for producing or distributing dangerous drugs. ¹⁰⁴ The Convention also protects children from any activities that might harm child's development and well-being. ¹⁰⁵

98 *ibid* Article 2.

99 *ibid* Article 5.

100 *ibid* Article 24.

101 *Ibid* Article 28.

102 *ibid* Article 29.

103 *ibid* Article 32.

104 *ibid* Article 33.

105 *ibid* Article 36.

4.1.4 The Convention on the Elimination of All forms of Discrimination against Women, 1979

The Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) is an international human rights treaty that focuses specifically on equality between women and men through ensuring women's equal access to, and equal opportunity in political and public life, among other things, to include right to education, health and employment. The Convention provides for requirement to State governments to take all appropriate measures, including legislation and temporary special measures, so that women can enjoy all human rights and fundamental freedoms.¹⁰⁶

The Convention requires all State governments to condemn discrimination against women in all its forms and agree to pursue a policy of eliminating discrimination against women, embody the principle of equality of men and women in their national constitutions or other appropriate legislation, refrain from engaging in any act or practice of discrimination against women and to ensure that public institutions act in conformity with this obligation.¹⁰⁷

The Convention also directs State governments to take all appropriate measures to eliminate discrimination against women by any person, organization or enterprises, take all appropriate measures, including, legislation and to modify or abolish existing laws, regulations, customs and practices which constitute discrimination against women.¹⁰⁸

Furthermore, the Convention provides for elimination of discrimination against women in the field of health care services in order to ensure,

106 *ibid.*

107 Article 2 of the Convention on the Elimination of All Forms of Discrimination against Women, 1979.

108 *ibid.*

equality of men and women.¹⁰⁹ It implores for State governments to guarantee basic human rights and fundamental freedoms to women on a basis of equality with men through the political, social, economic, and cultural fields.¹¹⁰

The Convention requires State governments to take measures to eliminate prejudices and customs based on the idea of the inferiority or the superiority of one sex or on stereotyped women. It also mandates the State governments to ensure the recognition of the common responsibility of men and women in the upbringing and development of their children.¹¹¹

4.1.5 The International Covenant on Civil and Political Rights, 1966

The UDHR (1944) influenced the development of other human rights instruments, including the International Covenant on Civil and Political Rights (ICCPR). Recognizing the basic rights proclaimed under the Universal Declaration of Human Rights, the Covenant¹¹² provides for civil, political, economic, social and cultural rights. The Covenant requires each state party to respect and ensure to all individuals within their territories, the rights recognized in the Covenant without distinction of any kind, such as race, colour, sex, language, religion, political or other opinion, national or social origin property, birth or other status.¹¹³

The Covenant imposes an obligation on State governments to protect family, which is the natural and fundamental group unit of

109 *ibid* Article 12.

110 *ibid* Article 3.

111 Article 5.

112 The Covenant was adopted by the General Assembly of the United Nations on 19 December 1966.

113 Article 2(1) of the International Covenant on Civil and Political Rights.

the society, particularly, for its establishment and responsibility for the care and education of dependent children.

Obligations imposed by the Convention requires State governments to take special measures for protection and provide assistance on behalf of the children and young person's without discrimination for reasons of parentage or other conditions.¹¹⁴ The Convention also requires State governments to protect children and young persons from economic and social exploitation and are required to set age limits below which any paid employment of child labour should be prohibited and punishable by law.¹¹⁵

State governments are required to recognize the rights of everyone to the enjoyment of the highest attainable standard of physical and mental health and to achieve the full realization of the right which includes, the right to all medical service and medical attention in the event of sickness.¹¹⁶

The Convention further requires State governments to recognize the rights of everyone to education and that education be directed to the full development of the human personality. State governments agree that education should enable all persons to participate effectively in a free society.¹¹⁷

4.1.6 The Worst Forms of Child Labour Convention, 1999 (No.182)

The Convention imposes obligation to State governments to take effective measures to secure the prohibition and elimination of the

114 *ibid* Article 10 (1).

115 *ibid* Article 10 (3).

116 *ibid* Article 12.

117 *Ibid* Article 13 (1).

worst forms of child labour including hazardous and exploitative activities.

The Convention has listed the worst form of child labour to include all forms of slavery, such as, sale and trafficking of children; debt bondage and serfdom and forced or compulsory labour; the use, procuring or offering of a child for prostitution; offering of a child for illicit activities and work which, by its nature is likely to harm the health, safety and moral of children. ¹¹⁸

4.1.7 The African Charter on the Rights and Welfare of the Child, 1990

This Charter recognizes the paramount of human rights and the African Charter on Human and People's Rights. The Charter provides that everyone is entitled to all the rights and freedoms recognized and guaranteed in the Charter, without distinction of any kind such as race, ethnic group, colour, sex, language, religion, political or any other opinion, national and social origin, fortune, birth or other status. ¹¹⁹

The Charter recognizes the importance of education of the child and State governments to take appropriate measures to promote and develop child's personality, talent and mental and physical abilities to their fullest potential. It provide for protection of child from all forms of economic exploitation and from performing any work that is hazardous or likely to interfere with the child's physical, mental, spiritual, moral or social development. ¹²⁰

118 Article 3 of the International Labour Organization No. 182, 1999.

119 Article 3 of the African Charter on the Rights of the Children, 1990.

120 *ibid* Article 15.

4.1.8 The Protocol to the African Charter on Human and Peoples' Rights on the Rights of Women in Africa, 1995

The African Charter on Human and Peoples' Rights calls on all State governments to eliminate every kind of discrimination against women and to ensure the protection of the rights of women.¹²¹ The Protocol to the African Charter requires that every woman to have the right to dignity inherent in human beings and recognition and protection of her human and legal rights, right to respect as a person and to the free development of her personality.¹²²

The Protocol require State governments to adopt and implement appropriate measures for protection of every woman's right, respect for her dignity and protection of women from all forms of violence, particularly, to prohibit any exploitation or degradation of women. Also State governments are directed to adopt and implement appropriate measures to ensure the protection of women from all form of violence, particularly, sexual and verbal violence.¹²³

4.1.9 Convention on the Rights of Persons with Disabilities and its Optional Protocol, 2006

The purpose of this Convention is to promote, protect and ensure full and equal enjoyment of all human rights and fundamental freedoms by all persons with disabilities, and to promote respect for their inherent dignity.

The Convention stipulates a number of principles which includes; respect for inherent dignity; non-discrimination practices; full and effective participation and inclusion in society; respect for

121 Article 18 of the Protocol to the African Chartered on Human and Peoples' Rights on the Rights of Women in Africa.

122 *ibid* Article 3 (1) & (2).

123 *ibid* Article 3 (3) & (4).

difference and acceptance of persons with disabilities as part of human diversity and humanity; equality of opportunity; accessibility; equality between men and women and respect for the evolving capacities of children with disabilities and respect for the right of children with disabilities to preserve their identities.¹²⁴

The Convention provides for requirement for all State governments to ensure and promote the full realization of all human rights and fundamental freedoms for all persons with disabilities without discrimination of any kind on the basis of disability. In doing so, State governments are obliged to adopt all appropriate legislative, administrative and other measures for the implementation of the rights recognized in the Convention.¹²⁵

The Convention imposes obligation to State governments to take all necessary measures to ensure that children with disabilities enjoy full human rights and fundamental freedoms on an equal basis with other children.¹²⁶

Respect for family and home is among the requirement stipulated under the Convention, whereas, State governments are required to effectively take appropriate measures to eliminate discrimination against persons with disabilities in all matters relating to marriage, family, parenthood and relationships, on an equal basis with others.¹²⁷

124 Article 3 of the Convention on the Rights of Persons with Disabilities and its Optional Protocol, 2006.

125 *ibid* Article 4.

126 *Ibid*.

127 *ibid* Article 23.

4.1.10 The Copenhagen Declaration on Social Development, 1995

The Copenhagen Declaration on Social Development provides a platform for social development in addressing poverty. The development agenda was strengthened by the adoption of the Millennium Declaration in 2000 and the Eight Millennium Development Goals (MDGs) in 2001. The MDGs not only emphasize the global commitment to development but also provide an opportunity for Africa to engage and participate as a united front in this global process.¹²⁸

The Declaration directs State governments to address profound social problems i.e. poverty, unemployment and social exclusion, that affect every country, especially, the underlying and structural causes and their distressing consequences in order to reduce uncertainty and insecurity in the life of people.

4.2 Experiences from other Countries

Experience from other countries with regard to legal framework on social work practice has been all that important during the review. The review has revealed that, like Tanzania, some African countries such as Kenya, Uganda, Rwanda, Burundi and South Sudan do not have specific law on social work profession instead, they have scattered legislation on the provision of social welfare services. These include, laws relating to care of children and youths, people with disabilities, people living with HIV and AIDS and the elderly.

¹²⁸ <http://www.un-documents.net/cope-dec.htm> accessed on 18th October, 2017.

¹²⁹ It was necessary to look, separately, at countries which have enacted specific legislation on social work.

4.2.1 Zimbabwe

4.2.1.1 The Social Workers Act, No. 27: 21 of 2001

Zimbabwe has enacted a Social Workers Act in 2001. The Act intended to provide for the registration of social workers and the regulation of the social work practice.

The law establishes the Council of Social Workers ¹³⁰ the main purpose of which is assurance of quality social welfare services provision to the public through regulation of social work profession. Offering of social welfare services was at stake, thus, it was a primary concern to make sure that all social welfare services provided by social workers are of professional quality. Another concern was to ensure competencies and fitness of practitioners and regulates the professional conduct. For these reasons, the law empowers the Council to enforce discipline mechanism to safeguard the public and hold practitioners who commit misconduct accountable. ¹³¹

The Council has a duty to register social workers, conduct examinations to persons for registration as social workers, define and enforce ethical practice and discipline among registered persons, enhance the status and effectiveness of the profession of social work and

129 HIV and AIDS Prevention and Control Act_No.14 of 2006 (Kenya), The Children Act. No. 8 of 2001 (Kenya), The Persons with Disabilities Act No. 14 of 2003 (Kenya), The Senior Citizens Care and Protection Bill of 2014 (Kenya), The National Council for Older Persons Act No. 2013. (Uganda), The Children Act, 1997,(Uganda), The Person with Disabilities Act No. 2006 (Uganda), The HIV & AIDS Prevention & Control Act, 2014 (Uganda),

130 Ibid Section 3.

131 Section 32 of Act no 9/2001.

promote the interests of social workers. The Council also has a role of taking necessary steps in order to elevate and strengthen the unique status and effectiveness of social work profession.¹³²

The law ensures that a social worker is a holder of a Diploma or Degree from a recognised and accredited institution registered and licenced to practice by the Council. It provides that no any other person is employed or practising social work unless that person is registered with the Council.¹³³

According to the law, it is considered to be a criminal offence for any person who is not registered as social worker to practice, either in public or non-public welfare agencies without being registered by the Council for Social Workers.¹³⁴ Following enactment of the law and full functioning of the Council, Zimbabwe has, over a decade, gained a global reputation in Africa where social welfare services are delivered at required standards and ethical principles and that clients are protected from abuses during the process of seeking help.¹³⁵

Apart from the Social Workers Act, Zimbabwe has other laws that govern provision of social welfare services in relation to care of children, youths and people with disabilities, people living with HIV and AIDS and elderlies. Some of the laws include; the Disabled Persons' Act, 1992, the National Aids Council of Zimbabwe Act, 1999 and the Children's Act, 2001.

132 Section 4 of Act 9/2001.

133 Section 23 (1) of Act 9/2001.

134 Section 39 of Act no 9/2001.

135 <http://www.financialgazette.co.zw/social-workers-shun-zimbabwe/> accessed on 17/10/2017 AT 16:40.

4.2.2 South Africa

4.2.2.1 The Social Service Professions Act, No. 110 of 1978

The Social Service Professions Act ¹³⁶ provide for the establishment of a South African Council for Social Service Professions (SACSSP). The Council has the mandate to register social workers, student social workers, social auxiliary workers, persons practising in the scope of social work and other related professions. Currently, the SACSSP consists of two professional boards; the professional board for social workers and professional board for the caring of children and youths care.

According to the law, among other things, SACSSP is mandated to promote co-operation with the training institutions, promote the standards of such training, determine the minimum standards of education and training of persons practising the social service profession, maintain and enhance dignity and integrity of social service professions, guide social service profession, promote social services, control and exercise authority in matters affecting training of persons in the social service and practices pursued in connection with social service professions. ¹³⁷

South Africa has different categories of social workers. These include; students, auxiliary social workers, and specialist social workers. There are different requirement for registration, licensing and disciplinary measures. Students are registered as social workers from second year up to fourth year and they are supposed to pay the professional/nominal fee. Registration begins at the level of studying, nonetheless, licensing is upon completion of four year degree (level 8).

136 Act No. 110 of 1978.

137 Section 14B of the Social Service Professions Act of 1978.

Subject to the Social Service Professions Act, there are in place regulations for social work practitioners. The regulations provides for procedures for registration, licensing and regulation of the conduct of social work practitioners in different cadres such as student social workers, auxiliary social workers, and specialist social workers. Additionally, there are Policy Guidelines for Course of Conduct, Code of Ethics and Rules for Social Workers.

Finally, apart from the Social Service Professions Act, South Africa has other specific laws that govern provision of social welfare services to people of various categories such as children, youths, and people with disabilities, people living with HIV and AIDS and the elderly. The laws are the Older Persons Act, 2006, the Children's Act, 2005 to mention a few.

4.3. Namibia

4.3.1 The Social Work and Psychology Act, No. 6 of 2004

The law addresses matters related to social work and establishes Council for social work and psychology professions. It provides for powers, duties and functions of the Council. It mandates the Council with registration of social workers and allied professions.¹³⁸ The Council also regulates training and qualifications of practitioners and imposes disciplinary measures to social workers and psychology professionals who practice without being registered.¹³⁹

The law further provides for criteria for a person to be a member of the Council. For a person to be registered and licenced, that person must possess degree, diploma, or certificate in related fields from a recognised institution. Thereafter a person is examined in respect of

¹³⁸ *ibid* Section 5 of the Social Work and Psychology Act, 2004.

¹³⁹ *ibid* section 5.

proficiency in a particular field of study. Section 20 defines social worker to mean a person registered by the Council or regarded to be so registered in terms of section 61 of the Act.

Since social workers provides social welfare services, they are obliged to abide with laws that govern the provision of social welfare services such as the Child Care and Protection Act, 2015, the Aged Persons Act, 1967 and the National Welfare Act, 1965.

4.3.2 The Seychelles

4.3.2.1 The Social Workers' Council Act, 2007

The law establishes the Social Workers' Council with duties to regulate the professional conduct of social workers for assurance of quality social welfare service delivery to the beneficiaries. The Council also promotes and uphold the standards in social work profession. It maintains a register for social workers; enquiring into allegations of breaches of ethical standards and professional misconduct of social workers and take appropriate disciplinary measures.¹⁴⁰

The law also provides for criteria for a person to qualify for registration as a social worker. These criteria include attainment of the age of 18 years and national competence standards required by the Council. For competence perspective, a person must complete such training as prescribed and possess a diploma or degree or certificate on social work from a recognised institution.¹⁴¹

The law aimed at ensuring that the people served by social workers benefit most from the services. The law is aimed at changing and

¹⁴⁰ Section 4 of Act No.7 2007.

¹⁴¹ Ibid Section 6.

promoting the social work practice in the country, by promoting empowerment, support and respect of social workers, whilst ensuring continuous professional development.¹⁴²

Other specific laws that govern provision of social welfare services to children, youths, people with disabilities, people living with HIV and AIDS and the elderly in Seychelles are the National Council for the Elderly Act, 1997 the Children Act, Cap. 28 and the National Council for Disabled Persons Act, 1994.

4.3.3 New Zealand

4.3.3.1 The Social Workers Registration Act, 2003

The protection of members of the public has been a major concern in New Zealand. This has led the Government to come up with mechanisms to ensure that social workers are competent and accountable in their practice. For the purposes of protecting the public for services delivered by the social workers, the Government enacted the Social Workers Registration Act, 2003. The Act establishes a board vested with powers for registering social workers and hold them accountable on their professional misconduct. The law establishes a tribunal to determine complaints levelled against registered social workers.¹⁴³

New Zealand has other laws on the provision of social welfare services such as the Children's Commissioner Act, 2003, the Care of Children Act, 2004, the Children, Young Persons and their Families Act, 1989 as well as the Health and Disability Services (Safety) Act, 2000.

¹⁴² Today in Seychelles of 20th October 2010.

¹⁴³ Section 3 of Act no 17 of 2003.

4.3.4 Lessons

This Chapter has reviewed international legal instruments and legislation of various countries. From these legal instruments, the Commission has learnt that there is a need of protecting and providing quality social welfare services to various categories of people such as people with disabilities, people living with HIV and AIDS, children and the elderly. For purposes of having quality social welfare services to the people, Tanzania need to have in place a legal framework for regulation of the social work profession.

The Commission has also learned that, it is important to regulate provision of social welfare services through social workers and other related personnel by establishing a Council charged with the mandates of registering, licensing, imposing disciplinary measures to social workers on professional misconduct in order to ensure competence standards for social work profession.

From the comparative analysis Tanzania can benchmark a legal framework which will ensure the provision of quality social welfare services.

In this perspective, there is a need of having a legal framework that would establish a regulatory body that will register, licence, regulate professional conduct and ethics, and provide standards for social work profession in Tanzania.

4.4 Conclusion

The provision of social services has been covered by various international instruments both at regional and international levels. Tanzania like other countries has international obligation of implementing commitments under international and regional

instruments. Countries like Zimbabwe, Namibia, South Africa, the Seychelles and New Zealand have laws that regulate social workers and related professions.

The justification for establishment of social work Councils in other countries is borne out of similar calls for protection of the citizens and the need to provide the quality social welfare services. In this respect, and for purposes of enhancing social work practice and the provision of quality social welfare service, Tanzania can learn from other jurisdictions to improve the legal framework on social welfare services and regulation of social work profession.

CHAPTER FIVE

RESEARCH FINDINGS AND ANALYSIS

5.1 Introduction

This Chapter contains findings and analysis of stakeholders' views collected during field research. Stakeholders included regional commissioners, regional administrative secretaries, district commissioners, social welfare officers, community development officers, police officers, prison officers, legal officers, medical service providers, the elderly, people with disabilities, women, administrators and care takers of elderly homes, children homes, remand homes, children from specified areas of services and other social service providers in both public and private institutions. The Chapter finally provides the Commission's observations and recommendations on each of the issues found on stakeholders' views.

5.2 Findings and Analysis

5.2.1 Provision of Social Welfare Services to Women

5.2.1.1 Stakeholders' Observations

Stakeholders observed that there is inadequate provision of social welfare services to Gender Based Violence (GBV) victims due to limited number of social welfare officers and working tools. They pointed out that many victims did not report GBV incidences to relevant authorities or seek assistance of social welfare officers for fear of disclosing private issues at non-private places and lack of awareness for the requirement to report any GBV incidences which occurs. Society's unwillingness to reveal perpetrators of GBV was also considered a major factor that contributed to unwillingness to report GBV incidences, thereby, triggering the vicious cycle of abuse and silence.

Stakeholders recommended for increasing number of social welfare officers to reach the needy. They recommended further that Social welfare officers initiate education and awareness programs on the assistance available to victims of abuse and the ills of traditions and customs that exacerbate vulnerability of certain groups of the population in the society.

5.2.1.2 Commission's Observations

The Commission observed that unqualified social welfare service providers lack the necessary professional knowledge and ethical conduct. Yet, social welfare service providers who are trained and positioned to address problems of GBV are limited in number and unevenly distributed. Most of them are found in urban areas. In most of the rural population they are neither known nor readily available. Inadequate working tools have been seen as a factor that compounds the problem of uneven distribution of qualified social welfare officers.

Furthermore, the Commission observed that the Convention on the Elimination of all Forms of Discrimination against Women ¹⁴⁴ requires State governments to take measures to eliminate prejudices and customs based on the inferiority or the superiority of one sex or stereotyped women, and to ensure the recognition of common responsibility of men and women in the upbringing and development of children.

5.2.1.3 Commission's Recommendations

It is recommended that:

- (i) the Ministry responsible for social welfare should carry out

¹⁴⁴ Article 5 of the Convention on the Elimination of All forms of Discrimination against Women, 1979.

awareness campaigns to sensitize society on the evils of a wide range of social injustices against women and identify customs and traditions that exacerbate vulnerability of women;

- (ii) the Government should employ and deploy sufficient number of social welfare officers in order to reach the large number of women in need;
- (iii) the Government should regulate social work practitioners and stipulate ethical standards to ensure professionalism in social welfare service delivery;
- (iv) the Government should provide adequate working tools to social welfare officers.

5.2.2 Provision of Social Welfare Services to Children

5.2.2.1 Stakeholders' Observations

It was observed that, social welfare officers have a great role to play in guiding children during critical years of development. However, there is not sufficient number of social welfare officers to provide and manage advice on social challenges facing children.

It was also observed that even in areas where the law specifically provides for social welfare officers intervention social welfare officers were not available due to their limited number. It follows that the number of social welfare officers be increased for wider coverage and better service delivery.

Stakeholders further observed that other areas that critically require social welfare services provision include schools and children living in difficult and challenging conditions such as children homes, approved schools, day care centers, drop-in centers and retentions homes.

With regard to professionalism and ethical conduct, stakeholders observed and recommended for the regulation of social work practice.

5.2.2.2 Commission's Observations

The Commission observed that, although it is not explicitly provided in the Law of the Child, the school setting is an important point for child social and psychological development. Social welfare service delivery in its current form is inadequate in meeting the large number of children, who generally have a wide range of needs. The Government should supervise and coordinate the provision of welfare services to children, including providing supportive counselling which requires.

The Commission noted that, the National Child Development Policy¹⁴⁵ provides for child protection in relation to child labour, sexual abuse, early marriages, teenage pregnancies, genital mutilation, orphans, disabled and street children, to mention a few. The Policy requires local government authorities to undertake measures to address child abuse and child exploitation. The Policy emphasises on awareness creation on part of stakeholders involved in child protection with a view to equipping them with necessary knowledge that would help promote child protection.

5.2.2.3 Commission's Recommendations

It is recommended that the Government should:

- i) deploy social welfare officers in a sufficient number in order to reach the large section of children in need;
- ii) enact a law to regulate provision of social welfare services to children and generally, social work practice, professional and ethical standards.

145 National Child Development Policy, 2008.

5.2.3 Provision of Social Welfare Services to the Elderly

5.2.3.1 Stakeholders' Observations

Stakeholders observed that there is inadequate provision of social welfare services to the elderly. They stated that, the elderly homes and that most of the elderly population in general are not attended to by social workers. In that regard, planning and implementations of elderly projects do not take cognizance of the needs of the elderly. This is due to lack of social work professionalism in undertaking elderly projects. They cited an example of typical practice by which the elderly are not consulted during planning of activities that affect them. They said that consulting the elderly during planning on matters that affect the elderly simplify social welfare services provision by focusing on relevant social welfare services.

They further stated that, in initiating development projects for the elderly such as housing projects, consultation should involve the recipients of such services and facilities. It is important that the elderly are consulted during and procurement of equipment to be used by the elderly particularly on specifications of needed items.

Stakeholders also pointed out that there is insufficient number of social welfare officers for service provision for elderly homes, and other facilities such as hospitals. They recommended that more social workers be deployed to these facilities to allow better service provision.

It was further pointed out that social welfare services delivery to the elderly is done by personnel who are not professionally qualified as social workers.

5.2.3.2 Commission's Observations

The Commission observed that elderly welfare requires sustainable availability of social welfare services. Elderly people, as a vulnerable group, require social protection guaranteed through policy and law. Elderly welfare requires delivery of social welfare services to the needy on professional level. The findings show that there is inadequate number of skilled social workers in the community. Lack or insufficient number of skilled social workers has resulted in inadequate provision of social welfare services in those homes.

The Commission also noted that social welfare officers do not have sufficient working facilities such as rooms that allow privacy. Better working facilities and adherence to ethical standards would translate into better services to most vulnerable groups who receive social welfare services.

The Commission further observed¹⁴⁶ that the National Ageing Policy requires local government authorities to conduct older people's needs assessment and to provide care and protection for older people in the community and institutions. The local authorities are required to involve older people in income generating activities. They also have a task of sensitizing the community on issues related to older people. These tasks can effectively be executed by social welfare officers.

The Commission noted that social welfare officers in elderly homes and other institutions perform a number of functions for the elderly, including helping adjusting to life in their new residences, advocating for their needs and providing supportive counselling and making psychosocial assessments.

¹⁴⁶ National Ageing Policy of 2003.

Social work brings a unique mix of skills and expertise to situations of complexity, uncertainty, conflict and risk, all of which arise in the cause of rendering social welfare awareness to older people. It is important for social workers to take a positive and proactive approach while working with the elderly, for example, through anti-discriminatory work, by promoting individual strengths and resilience, and helping rebuild confidence, self-esteem and social networks following experiences of loss or change.

5.2.3.3 Commission's Recommendations

It is recommended that the Government should:

- i) ensure proper allocation of social welfare officers in elderly homes and in public institutions in general;
- ii) ensure involvement of social work professionals in planning for the elderly;
- iii) enact a law for the regulation of social work practice; and
- iv) equip social welfare officers with better working facilities.

5.2.4 Provision of Social Welfare Services to Persons with Disability

5.2.4.1 Stakeholders' Observations

Stakeholders observed that the large group of persons with disability does not access social welfare services. They stated that there is inadequate number of social work professionals, which affect efficiency in the provision of social welfare services to persons with disability. They argued that persons with disability, whether in families or in the community, have no access to social welfare services due to limited number of social work professionals and inadequate financial resources for a wider coverage. They recommended for deployment of social welfare officers at the lower level of local

government structure so as to reach a larger number of persons with disability.

Stakeholders also pointed out the existence of communication barrier between social welfare officers and some of the groups of the people with disability, such as the deaf and those with impaired speech.

It was noted that there is no accurate records of people with disability. For instance, those hidden by their families. It was observed that social welfare officers have a responsibility to identify persons with disabilities including those who have been hidden by their parents or relatives in order to provide those persons necessary care and social welfare services. Stakeholders pointed out lack of social work professionals, i. e in terms of their numbers and availability to offer services to people with disability.

Lastly, it was noted that the Ministry responsible for people with disability is not the same Ministry responsible for dealing with social welfare. As a result, social welfare service provision to people with disability is hindered partly due to difficulties in the coordination of services. It was recommended that the problem of two Ministries serving people with disability be resolved in order to improve the provision of social welfare services to people with disabilities.

5.2.4.2 Commission's Observations

The National Policy on Disability recognises that service provision to persons with disabilities requires a pool of trained and experienced personnel while the majority of available personnel have not adequate training. The Commission urges the government to take measures to ensure that personnel involved in service delivery to people with disabilities receive professional training.¹⁴⁷ Under the

¹⁴⁷ See paragraph 3.20, p. 22.

Policy, social work professionals are expected to supervise service provision to people with disabilities, identify and assess their needs, provide material assistance and protection. The Policy also emphasise on sensitizing person with disability, and ensuring their participation in the planning and implementation of income generation activities. The findings show that there is a limited number of social work professionals providing services to people with disabilities. In that regard there is difficulty in achieving the vision envisaged under the Policy.

The Commission observed further that there is lack of adequate knowledge among social welfare officers on issues relating to persons with disability including communication skills with some of the groups with speech impairment. There is a need for better services to people with disability.

The Commission further observed that matters relating to persons with disability have been moved from the Ministry responsible for social welfare. This has created causing a missing link with the Ministry responsible for social welfare, which has specialized personnel required to serve this group and other vulnerable groups.

5.2.4.3 Commission Recommendations

It is recommended that the Government should:

- i) ensure deployment of adequate number of social work professionals at the lower levels of Government administrative structure;
- ii) ensure provision of training to persons working with people with disability so as to equip them with necessary skills in social welfare service delivery;
- iii) enact a law that regulates social work profession;
- iv) place matters relating to persons with disability under the Ministry responsible for social welfare services;

- v) effectively implement the law to ensure friendly infrastructures to people with disabilities.

5.2.5 Provision of Social Welfare Services in Health Facilities

5.2.5.1 Stakeholders' Observations

Stakeholders were of the view that, most of the health facilities do not have sufficient social workers and suitable offices for holding consultation in privacy. Stakeholders proposed that, the Government should employ social workers in all health facilities in order to serve more people who are in need and meet the required standards for the provision of social welfare services.

Stakeholders also observed that the social work curriculum should incorporate medical social work so as to adequately prepare social workers to assume their responsibilities at health facilities; and enable those who are currently working at health facilities, acquire on-job training concerning roles and responsibilities of social welfare service providers at health facilities.

They further observed that professionalism and ethical conduct in relation to the provision of social welfare services in the health sector is not satisfactory. Most of the service providers do not maintain confidentiality of clients. This calls for professional ethical conduct to be developed and a mechanism put in place to ensure the observation of ethical conduct.

5.2.5.2 Commission's Observations

The Commission observes that, there is unsatisfactory social welfare services provision due to shortage of social welfare officers in health facilities. This has been attributed to a large extent by shortage of

social welfare officers in health facilities which causes social welfare services to be provided by non- social workers.

The Human Resource for Health Strategic Plan acknowledges that there is extreme shortage of social welfare staff ¹⁴⁸ leading to increasing social problems which need social welfare service interventions. These problems include child labour, early pregnancies and marriages, child abuse, child neglect and family rejection, alcohol and drug abuse, increasing level of destitution, commercial sex, elderly people, family disintegration, marriage breakages, human trafficking, increasing number of children in conflict with laws and single parenting. ¹⁴⁹

It was noted that social work in relation to public health plays the role of helping people who have been diagnosed with chronic, life threatening or altering diseases and disorders. The social work also involves helping healthcare providers understand the effect that disease and illness have on patients' mental and emotional state of mind. It also helps connecting patients with plans and resources in order to help cope with the prevailing circumstances. Since one of the most difficult things a person can go through is dealing with acute, chronic, and terminal illness.

Social workers provide services of advising family care givers, providing patient education and counselling, making referrals to other services, case management interventions, planning hospital discharges, and organizing support groups. In that regard, involvement of social work professionals in health matters is very important.

148 Human Resource Strategic Plan for Health and Social Welfare 2008- Executive Summary Section Strategic Plan 2014 - 2019 (Rationale for the Plan).

149 HRSP for Health and Social Welfare issues Section: Goals and Priority areas for first ten years of the Agenda.

The Commission further observes that the social work curriculum needs to incorporate medical social work so as to prepare social workers to assume relevant responsibilities at health facilities. Those who are currently working at health facilities, require on-job training on roles and responsibilities of the social welfare services at these facilities.

5.2.5.3 Commission Recommendations

It is recommended that the Government should:

- i) ensure allocation of adequate number of social work professionals in health facilities;
- ii) in collaboration with relevant NGOs, equip social welfare officers working in health facilities with basic social work skills for satisfactory provision of social welfare services;
- iii) enact a specific law to regulate professionalism and ethical conduct of social welfare service providers;

5.2.6 Provision of Social Welfare Services in Learning Institution

5.2.6.1 Stakeholders' Observations

It was observed that, there is insufficient provision of social welfare services in learning institutions. There is a small number of staff in learning institutions who are adequately trained in social work. Social welfare services in learning institutions are mainly offered by teachers who are not trained in social work. They also pointed out that there is no guidelines for the provision of social welfare services in learning institutions thereby affecting the quality of social welfare services offered in schools and colleges.

Stakeholders stated further that the level of professionalism and ethics for social welfare services providers in the education sector

is low. This is mainly caused by the fact that providers of social welfare services in learning institutions are not trained in social work and there are no formal guidelines for providers of social welfare services.

5.2.6.2 Commission Observations

The Commission observes that, there is inadequate provision of social welfare services in learning institutions. The reasons advanced are that there is a limited number of trained personnel on social welfare services in these institutions. As a result social welfare services are provided by teachers who are not well acquainted with social work knowledge and skills. It has been noted further that there are no guidelines to help available personnel in learning institutions.

The Commission noted the importance of addressing problems such as poor attendance, bullying and aggressive behavior, and other issues that affect children in learning institutions. It is important to address the needs of youngsters, staff, parents of school going children about their academic problems and behavioral challenges.

The Education and Training Policy, 2014, among other things, aims at increasing access to education by focusing on equity issues in respect to women, disadvantaged groups and areas in the country.¹⁵⁰ It acknowledges that, certain groups of individuals and communities in society have not had equitable access to education. These individuals and communities include hunters, gatherers, fishermen, pastoralists, orphans, street children, the blind, the deaf, the crippled and the mentally retarded.¹⁵¹

150 *ibid.*

151 *ibid.*, p. 18.

In order to address and ensure equitable access to education to the disadvantaged social and cultural groups, the involvement of social welfare officers is critical. Regulation of provision of social welfare services in learning institutions is therefore indispensable.

5.2.6.3 Commission Recommendations

It is recommended that the Government should:

- i) issue guidelines on the provision of social welfare services in learning institutions;
- ii) ensure availability of social welfare officers in both public and private educational institutions;
- iii) provide continuous social welfare training to non-trained teachers providing social welfare services in learning institutions;
- iv) enact a specific law that will regulate all social welfare service provision in learning institutions;
- v) increase access to education by vulnerable groups.

5.2.7 Provision of Social Welfare Services in Marriages

5.2.7.1 Stakeholders' Observations

Stakeholders were of the opinion that provision of social welfare services to marriage institutions is unsatisfactory. They stated that in most cases persons involved in resolving marriage conflicts have no skills in resolving marriage conflicts. They pointed out that most of the marriage conflicts are mediated by local government leaders and ward tribunals who are not trained in social work, as a result, some marriages which could have been saved are broken down. They recommended that more social work professionals should be deployed to the lower level of governance so as to enable a larger group of the population access these services. They recommended

further that provision of social welfare services should be regulated so as to ensure efficiency in service delivery.

The Law of Marriage Act ¹⁵², gives mandate to reconciliation boards to reconcile spouses in cases of conflicts. They recommended that members of marriage reconciliation boards established under the Law of Marriage Act should be trained on basic social work skills on resolution of marriage conflicts.

5.2.7.2 Commission Observations

It is evident that marriage conflicts or problems are in most cases subjected to persons with no specialized skills on social work. This to a large extent is attributed by shortage of trained social welfare officers. Due to this, some problems that could have been resolved by of specialized personnel remain unresolved and, consequently, leading to break down of marriages. As rightly pointed out by stakeholders, there are no guidelines to help providers of social welfare services in case of marriage conflicts.

The Commission also noted that most of the Marriage Conciliation Boards designated under the Law of Marriage Act ¹⁵³ are composed of members who have not received formal training on social work skills so that most of the marital disputes brought before these boards remain unresolved .

The Commission noted that the International Covenant on Civil and Political Rights ¹⁵⁴, imposes obligation to State governments to protect family (marriage), which is the fundamental unit of the society. Social welfare services are key in strengthening and repairing marriages in case of marital problems.

152 Cap. 29.

153 Ibid Part VI.

154 1966.

The Commission further noted that the social welfare service providers are required to solve marriage conflicts through counseling, child affiliation, adoption and maintenance issues. The involvement of social welfare service providers in resolving family problems is very important. The number of social welfare service providers should be increased to enable the service accessible to a bigger number of marriage institutions. Special training should be given to persons involved in resolving marriage conflicts who have not attained formal training in social work.

5.2.7.3 Commission Recommendations

It is recommended that the Government should:

- i) employ sufficient number of social welfare officers to enable them adequately provide social welfare services up to the grass root level;
- ii) enact a law to regulate the practice of social work in the society in order to improve social welfare service;
- iii) ensure special training is given to all persons involved in resolving marriage conflicts;
- iv) ensure that social welfare service providers are given regular refresher training to enable them serve the society better.

5.2.8 Provision of Social Welfare Services in Prisons

5.2.8.1 Stakeholders' Observations

Stakeholders were of the view that social welfare officers have a duty to counsel prisoners to correct their behaviour and become of good behaviour. However, there are few social work personnel in prisons. It is common that some prisons officers who do not have enough social work skills are ones who are charged to provide such services to inmates.

Stakeholders further stated that, there is no an elaborate mechanism to assist ex – prisoners to adjust to their new living environment after serving sentences in prison. On the other hand, the society is hostile and not prepared to accommodate ex-prisoners. Stakeholders suggested that the Government should as much as possible educate the public on how to handle ex-prisoners in their communities. To make this successful, they suggested that the social workers should come up with special counseling programmes to prepare ex-prisoners to become good citizens in the society after serving their sentences.

Stakeholders further stated that the provision of welfare services to child inmates, pregnant women and women with infants is a challenge. In most of the cases they are not treated well.

5.2.8.2 Commission’s Observations

The Commission noted that, social welfare officers have a duty to counsel prisoners to become good citizens. However, the Government has no an elaborate mechanism to assist ex – prisoners adjust well after serving sentences in prison.

In this regard, the Commission observes that, due to scarce resources the Government might not be in position to employ more social workers to specifically work in all prisons to correct or counsel inmates. In the alternative, the Government can equip prison officers who are social work professionals to provide social welfare services to inmates. Additionally, the Government should educate the community on how to integrate and provide supportive care to ex-prisoners.

The Commission observes further that the provision of social welfare services to children inmates, pregnant women and women with infants need to be improved. The Commission visited Morogoro remand prison and observed that children inmates’ are separated

from adults and women pregnant and women with infants were also separated. They received special social welfare services.

The Commission also noted that the court have stressed on the need of adhering to the law when dealing with children inmates. To this effect, the Court of Appeal, in the case of **Furaha Johnson Vs. Republic**¹⁵⁵ held that:

“Since the appellant at the time of his arraignment and trial was a child, he was not triable by the district court, but a Juvenile Court...even if the appellant had been tried by the appropriate court, the conduct of the trial in the absence of a social welfare officer would have equally rendered the trial a nullity”.

5.2.8.3 Commission’s Recommendations

It is recommended that the Government should:

- i) equip more prison officers with social work skills to help correct inmates’ behaviour;
- ii) recruit more prison officers with knowledge in social work;
- iii) come up with special rehabilitative programmes to inmates and ex-prisoners for preparing them for good conduct and behaviour after serving their sentences;
- iv) establish more approved schools and retention homes for children in conflict with the law.

5.2.9 Provision of Social Welfare Services to the Poor

5.2.9.1 Stakeholders’ Observations

Stakeholders observed that generally there is inadequate provision of social welfare services for poverty reduction. Reasons for such

¹⁵⁵ Criminal Appeal No. 452 of 2015, Court of Appeal at Arusha (Unreported).

inadequacy include shortage of social welfare officers. Stakeholders observed that the shortage of social welfare officers makes persons who are not trained in social work to undertake provision of social welfare services to poor people.

Another reason for inadequate provision of social welfare services to poor people is lack of adequate skills and knowledge among social welfare officers on poverty alleviation. Most of social welfare officers are not adequately informed on the techniques and skills required for social work practice. They recommended for the provision of continuing education for social work professionals and allied cadres in social welfare services towards poverty reduction.

Stakeholders were also of the view that some of the social welfare officers knowledgeable in matters related to poverty do not discharge social welfare services to the required standards. They recommended for a law that would regulate social workers in order to ensure that social welfare officers discharge their duties in a professional manner.

Other challenges affecting the provision of social welfare services in the alleviation of poverty such as financial resources and office tools hinders social welfare officers from reaching a wider part of the poor population.

5.2.9.2 Commission's Observations

It is evident that there is inadequacy in the provision of social welfare services. Poor provision of social welfare services is attributed to scarcity of social welfare officers, lack of adequate knowledge and commitment among providers of social welfare services.

The Commission noted that the National Strategy for Growth and

Reduction of Poverty (NSGRP II) provides for social protection measures to prevent vulnerable and potentially poor populations from falling into poverty. Social welfare service providers have a bigger role to play in the reduction of poverty, particularly, through sensitization and empowerment of vulnerable groups.

Social welfare service providers have an important role to play in contributing measures towards poverty alleviation and the promotion of social development. A well-functioning system on social welfare services provision is necessary in overcoming poverty. The role of social welfare officers is significant in setting - up and implementing plans and strategies for poverty alleviation. The National Strategy for Growth and Reduction of Poverty (NSGRP II) requires the Government to ensure equitable geographical equitable recruitment and retention of adequate number of social welfare officers.

The Government needs to implement the Copenhagen Declaration on Social Development ¹⁵⁶, which provides a platform for social development in addressing poverty by directing State governments to address profound social problems, such as poverty, unemployment and social exclusion that affect every country.

5.2.9.3 Commission's Recommendations

It is recommended that the Government should:

- i) enact a specific law for social work profession and other cadres providing social welfare services;
- ii) allocate adequate budget for social welfare officers to enable them discharge their duties appropriately and effectively. This will include itemizing cost centers for all types of social welfare services provided at council level;
- iii) ensure adequate involvement of social welfare service

156 Copenhagen Declaration on Social Development 1995.

providers in setting up plans and strategies on poverty alleviation;

- iv) ensure adequate knowledge and skills on poverty alleviation to unqualified social welfare officers;
- v) ensure provision of continuing education for social work professionals and educational cadres in providing social welfare services towards poverty reduction.

5.2.10 Provision of Social Welfare Services to Victims of Drug Abuse

5.2.10.1 Stakeholders' Observations

Stakeholders stated that, although social welfare services are highly needed by people affected by drug abuse, provision of these services is inadequate. A small number of social welfare officers involved in helping those affected by drug abuse and lack of adequate budget for social welfare officers was found to be among the factors affecting the provision of social welfare services. Stakeholders recommended for an increase of social welfare officers involved in helping victims of drug abuse up to village and mtaa levels.

Stakeholders also stated that, there are insufficient number of rehabilitation centers and sober houses established by the Government. Most of existing centers have been established and are being managed and manned by ex-drug addicts who have no social work skills. They recommended for establishment of public sober houses or rehabilitation centers in every region.

Stakeholders argued that there is no law or guideline in place for the establishment, management and regulation of sober houses and rehabilitation centers. They recommended for having in place a law

to regulate the establishment and management of rehabilitation centers as well as sober houses.

They also pointed out that there is little awareness among the public on the status and management of victims of drug abuse and recommended that the public should be educated on the need to provide accurate information to social welfare officers to enable them offer necessary services to victims of drug abuse.

Other challenges facing the provision of social welfare services to victims of drugs includes lack of adequate knowledge among social welfare officers in dealing with victims of drug abuse, lack of proper coordination of key players involved in dealing with users of drugs and poor mechanism for identification of users and addicts of drugs.

Stakeholders pointed out that lack of professionalism and ethical conduct of social welfare officers involved in attending drug abuse victims and breach of confidentiality and privacy by social welfare officers. As a result, users of narcotic drugs desist from getting services from social welfare officers for the fear that their social status may be divulged to the general public. They recommended for improvement of professionalism and ethical conduct and the enactment of a specific legislation that will regulate persons providing social welfare services to victims of drug abuse.

5.2.10.2 Commission's Observations

The Commission noted that users of narcotic drugs do not obtain adequate social welfare services in eradicating problems associated with the use of illicit drugs. It has been observed that the number of social welfare officers involved in the provision of social welfare services is small compared to the number of victims in need of social welfare services.

Shortage of adequate skills and fund for social workers, absence of adequate rehabilitation centers and sober houses, lack of regulation for establishment and management of rehabilitation centers, lack of proper mechanism for identification of victims of drugs, poor coordination among stakeholders involved in helping victims of drugs and lack of awareness among the public are among factors affecting the provision of social welfare services to victims of drugs.

The Commission observed further that counseling of victims of drug abuse and intervening during critical situation by social welfare officers is very important. The social welfare officers are also necessary in ensuring advocacy, prevention and education on the effects of illicit drugs and drug abuse. Social welfare officers are also important in counseling families to assist in the understanding and rehabilitating victims of drug abuse.

The Commission noted recent initiative undertaken by the Government in combating use of narcotic drug, trafficking and rehabilitation of victims of drugs. Establishment of a Commission and appointment of top brass officials in the Commission has added importance on Government resolve to eradicate drugs abuse. Of recently, the Government has urged every district hospital to set up a window for distribution of methadone to victims of drug addicts. The Commission is aware that the Government has committed and spent substantial amount of funds in the prevention and combating drug trafficking, use of illicit drugs and rehabilitation of victims of drug abuse.

5.2.10.2.1 Commission's Recommendations

It is recommended that the Government should:

- i) deploy more social welfare officers and other social welfare service providers with social work profession in helping victims of drug abuse from village to mtaa levels;

- ii) establish zonal sober houses and rehabilitation centres for the purpose of rehabilitating victims of illicit drugs;
- iii) provide more awareness to the public on their role in helping victims of drug abuse through social welfare officers and other social welfare providers;
- iv) enact a specific legislation that regulates persons providing social welfare services to victims of drug abuse so as to improve professionalism and ethical conducts among social welfare service providers;
- v) develop a guideline on the establishment and management sober houses.

5.2.11 Provision of Social Welfare Services through Police Gender and Children Desk

5.2.11.1 Stakeholders' Observations

Stakeholders observed that, the situation with regard to provision of social welfare services by some police gender and children desks are not satisfactory due to reason that most of the service providers are not trained on social work skills. Stakeholders recommended that basic training be conducted to the providers of social welfare services under police gender desks to equip them with necessary knowledge on social work skills.

Stakeholders pointed out that in some institutions, infrastructures for provisions of social welfare services are not friendly for victims of GBV. The existing infrastructures do not offer conducive environment for preserving privacy and confidentiality to victims of gender violence. They recommended that infrastructures for provisions of social welfare services be improved.

Stakeholders also pointed that some of gender and police desks do not abide to ethics especially when it comes to question of

confidentiality related to family issues. They noted that in some cases an officer manning police gender and children desk shares information obtained in the course of resolving disputes or attending persons. They recommended that disciplinary measures be taken against service providers who fail to abide to ethical conduct in the course of discharging duty.

5.2.11.2 Commission's Observations

The Commission observed that the Government established special gender and children desks in police stations, Ministries and departments in order to provide special room for handling, GBV in compliance with the women and gender policy and other similar incidents.¹⁵⁷ However, persons working under these desks are not adequately trained on social work skills for helping victims of GBV. Gender desks also lack good infrastructure, such as offices and working tools for ensuring privacy and confidentiality to victims.

The Commission commends Government initiative to put up gender desks in almost all police stations in the country and noted with approval gradual improvements being made.

5.2.11.3 Commission's Recommendations

It is recommended that the Government should:

- i) ensure that people who are manning police gender and children desks should be given special training on social work to assist them discharge their functions professionally;
- ii) educate the society about the role of social welfare service providers and the presence of special police gender and children desks;
- iii) improve infrastructures for provisions of social welfare

157 2000.

services to ensure privacy and confidentiality to victims of gender violence;

- iv) enact a specific legislation to regulate professional conducts for persons working under special gender desks.

5.2.12 Social Work Training Institution

5.2.12.1 Stakeholder's Observations

The stakeholders observed that, social work training in Tanzania is not satisfactory due to the fact that courses offered are more theoretical than practical. They pointed out that each college or university has its curriculum and the graduates from these institutions vary in terms of competence and skills. They also stated that the time scheduled for practical work is too short. Stakeholders recommended that, the time scheduled for fieldwork practice should be extended based on the level of education. They further recommended that there should be established special schools for provision of one year training to graduates of social work and other staff working as social welfare officers. They cited examples of professionals' trainings for lawyers (law schools), procurement specialists (PSPTB) and accountants (NBAA). They pointed out the need for curriculum for social work profession to be uniform in all colleges and universities throughout the country.

Stakeholders stated further that, the social work profession is not well understood by many Tanzanians since it is a new profession. Despite the significance in the society, few students are interested in pursuing social work profession. They recommended that the Government should encourage universities and colleges to introduce courses on social work profession.

Stakeholders also pointed out that some of the lecturers or tutors

teaching social work in various universities do not have qualification in social work and that institutions offering course in social work lack proper coordination and link with social workers working in villages, wards, districts and regions leading to failure to get the feedback on the usefulness of the education given to their students.

Stakeholders pointed that, working environment of social welfare officers is not conducive in terms of budget and other facilities such as transport and office tools. This makes most of students not interested in working under this kind of environment.

5.2.12.2 Commission's Observations

The Commission observed that training of personnel is an important aspect in the provision of social welfare services. The relevant training, as ascertained by the national accrediting institution, need to provide personnel with skills to attend and handle different client needs. Tanzania has a number of accredited higher learning institutions producing social workers from ordinary diplomas to PhD level.

The Commission noted that, there are efforts undertaken to harmonize the standards of training in these institutions. Despite the efforts, it is observed that there are still multiple factors hindering effective provision of social work training in Tanzania. Lack of adequate qualified tutors and lectures, uniform curriculum for all training institutions, adequate field for practical training for students and invisibility of the social work profession affects the quality of education provided for social work professionals.

The Commission also noted that problems facing most of training institutions include the small number of students admitted and graduating from colleges and universities and poor working

environment for social welfare officers. In order to have a vibrant social welfare services, there is a need of addressing these problems. Addressing the problems will allow getting better-trained social workers and eventually better social welfare services provision.

5.2.12.3 Commission's Recommendations

It is recommended that:

- i) the Government should provide practical training to social welfare service providers;
- ii) curriculum for social work profession be harmonized for all colleges and universities by the relevant authorities responsible for curriculum development;
- iii) universities and colleges should be encouraged to introduce courses on social work profession;
- iv) the Government should ensure that, lecturers or tutors teaching social work courses in colleges and universities have adequate knowledge in social work profession;
- v) the Government should enact a law to regulate training on social work profession;
- vi) the Government should ensure continuing social work training to social welfare service providers.

5.2.13 Ethical Conduct of Social Workers

5.2.13.1 Stakeholders' Observations

The stakeholders were of the opinion that some of social workers engage in unethical practices such as corruption, abusive language to clients, sexual exploitation and discrimination against clients and divulgence of client's privacy. They pointed out that this is aggravated by the fact that most of the people providing social

welfare services are not trained in social work and, thus, do not have adequate skills and knowledge in handling their clients. They further noted that there is no prescribed code of conduct for social welfare officers as a result there are no ethical standards to be observed by social welfare officers in the course of discharging their duties. They recommended that there should be a mechanism to ensure that professional ethics are established and adhered to by social work practitioners.

5.2.13.2 Commission's Observations

The Commission observes that some social welfare service providers do not abide to their professional ethics and engages in ill-practice such as corruption, sexually harassment of clients, embezzlement of funds and materials for clients.

The findings further show that there is no prescribed code of conduct for social welfare officers. However, there is a code of conduct for social welfare service providers offered in training institutions. The findings also show that there is no established mechanism for administering professional conduct of social welfare service providers during practice. It is common knowledge that ethical standards are a critical component to any profession, especially to professions rooted in health services.

It is important to have a code of ethics and set of guiding principles for reference when confronted with morally ambiguous issues. It is specifically important to have a code of conduct for persons working as social workers in order to establish the core values upon which the social work profession is based. The code of conduct creates specific ethical standards that will guide and reflect the core values. It will help navigate professional considerations and obligations when ethical uncertainties arise. It also provides ethical standards to which

the social work profession can be held accountable. It also helps in initiating new social workers to the profession's mission, values, and ethical principles and standards. The code will create standards by which the social work profession can assess if a social worker has engaged in unethical conduct.

5.2.13.3 Commission's Recommendations

The Commission recommends that:

- i) the Ministry responsible for social welfare services should prescribe social work ethical standards to be observed by social welfare service providers;
- ii) there should be established a body to oversee ethical conduct of social welfare service providers;
- iii) the specific law on social work be enacted to cater for registration, licensing, rights and privileges enjoyed by social workers and other social welfare service providers.

5.2.14 Accessibility of Social Welfare Services

5.2.14.1 Stakeholders' Observations

Stakeholders observed that generally social welfare services are not accessible to most of the needy persons. Most of the social welfare officers are stationed at the district level and therefore they are not accessible to a larger population. Social welfare officers are not found in schools, health facilities, mtaa, village and ward levels where most of the needy persons are found. They recommended that, the Government should recruit more social welfare officers and improve their working environment.

5.2.14.2 Commission's Observations

The Commission observes that, social welfare services in the country

are not accessible to large number of needy persons. As stated by stakeholders, there is inadequate number of social welfare officers at the mtaa, village and ward levels. As such, the available social welfare officers located at district level, are not accessible to persons seeking social welfare services. This has led to provision of social welfare services by persons who are not trained in social welfare. These persons include vitongoji, mtaa, village and ward leaders and religious leaders.

The Commission further observed that, economic justice calls for provision of social welfare services by trained and regulated cadre under an appropriate legal framework.

The Commission noted that the social work's mission is to enhance human well-being and help meet the basic needs of all people, with particular attention to the needs and empowerment of people who are vulnerable, oppressed, and poor. Social work aims at helping people in need and addressing social problems and challenging social injustice. Yet, it has been noted a large number of people in need of social welfare services do not have access to professional social welfare services. Therefore in order to address social problems and injustice there is a need of ensuring that social welfare services are brought closer to people.

5.2.14.3 Commission's Recommendations

It is recommended that:

- i) the Government should ensure adequate accessibility of social welfare services to the society through deploying sufficient number of social welfare officers at the lower level of governance;
- ii) the Government should provide training to persons not trained in social work who are engaged in the provision of

- social welfare services to public;
- iii) the Ministry responsible for social welfare should permit and regulate para-social workers to provide social welfare services to reduce the existing gap of social welfare officers.

5.2.15 Social Work and Other Related Professions

5.2.15.1 Stakeholders' Observations

Stakeholders were of the view that there is a mindset that sociology, psychology and community development and other fields related to social work are similar. They pointed out that social welfare unit is sometimes confused with community development activities. They pointed that, due to this confusion, social welfare units at district and regional levels do not get adequate budget to finance social welfare affairs.

Stakeholders observed further that the confusion is attributed by lack of awareness by the public on the roles and usefulness of social welfare services and professionals. They noted that it is only those people who had been victims and received the assistance of SWOs who understand and appreciate the role and importance of social work and their services. They recommended for public awareness programmes on social welfare services.

5.2.15.2 Commission's Observations

The Commission has observed the confusion on nomenclature “community development” and “social work” and that the two are often used interchangeably, as if they are the same. It is the view of the Commission that social work helps and empowers vulnerable individuals and groups in society to tackle their social problems while community development practice refers to measures taken

to enable people to recognize their own ability to identify their problems and use available resources with a primary focus to earn and increase their income and build better lives for themselves.¹⁵⁸ Community development works on problems affecting the community as an entity as opposed to social work, which deals with individuals as a primary focus in its interventions. Therefore, professionally, social work and community development are different cadres. The confusion is attributed by lack of knowledge among the public on the roles and importance of social welfare services.

5.2.15.3 Commission's Recommendations

It is recommended that:

- i) the Government should put in place a law that will state clearly the roles and functions of social workers and other social welfare services providers at individuals and families; groups and organization and in community levels;
- ii) the Ministry responsible for social welfare should undertake awareness programmes to Government officials and the public in general on the roles and functions of social workers.

5.2.16 Adequacy of Policies and Laws on Social Welfare Services

5.2.16.1 Stakeholders' Observations

Stakeholders observed that there are scattered policies and laws on social welfare services. These policies and laws relate to children, women, the elderly, persons with disability, health, poverty and education. They observed that most of these policies and laws do not adequately address social welfare issues. The involvement of social welfare professionals in preparing these policies and laws is very minimal even in areas where social problems or injustice are addressed. As a result, these policies and laws fall short of achieving

¹⁵⁸ Tanzania community development policy 1996.

intended results due to the fact that social work interventions were neglected during the preparation stage. Stakeholders observed the need for a specific law, which will regulate provisions of social welfare services in Tanzania. The laws need to provide for services to be offered, key players and their professional conduct.

Stakeholders stated further that, due to little involvement of social welfare professionals in planning process, social welfare services are not prioritized at district and regional levels, hence, affecting smooth social welfare services delivery. They recommended for establishment of special departments or units at district and regional levels to enable efficient execution of social welfare functions.

5.2.16.2 Commission's Observations

The Commission observes that, many of the existing policies and legal instruments are not informed on social work due to limited involvement and utilization of social work professionals in preparing these documents. There is little involvement of social work professionals in local and national programs for alleviation of poverty and correcting social injustices.

Most of the policies and legal instruments geared at alleviating poverty and correcting social injustice do not explicitly provide for roles of social welfare services and professionals in curbing problems addressed by these policies and laws. Less involvement of social welfare officers in decision-making is evidenced at regional and district levels where social welfare officers falls under the RMOs or DMOs. Consequently, social welfare officers at these levels are represented by RMOs or DMOs in management meetings which finally make decisions on social welfare services.

The Commission noted that RMOs and DMOs are not trained in

social work and are not informed on the technical aspects of social welfare services. Therefore, in most cases, issues related to social work are mostly neglected during planning at district and regional levels.

5.2.16.3 Commission Recommendations

The Commission recommends that;

- i) the Government should ensure the involvement and utilization of social work professionals in formulation of policies and laws at local and national levels;
- ii) a specific legislation be enacted to provide for institutional and legal framework for provision of social welfare services in Tanzania;
- iii) social welfare services offered by units at regional and district levels should be elevated to departments to ensure effective involvement and utilization of social workers in planning programs for alleviation of social problems and injustices.

5.2.17 Involvement of the Government in Delivery of Social Welfare Services

5.2.17.1 Stakeholders' Observations

Stakeholders pointed out that delivery of social welfare services is not appropriate and that the respective Ministry is not fulfilling its obligation as required due to minimal number of employed social work practitioners, unpleasant working environment and lack of adequate facilities. They advised the Government to recruit more social welfare officers so as to reach the community at the grassroots level, i.e. wards and villages.

They observed that there is less consideration on part of policy makers on the importance of social welfare services and lack of coordination between the Government and Non-Governmental Organizations. They further observed minimal Government supervision on private organizations that provide social welfare services to the elderly and children homes, orphanage homes and other social welfare institutions.

Stakeholders recommended that the Government should enact a law that spells out hierarchical structure of how social welfare services can be provided in village, ward, district, regional and national levels.

5.2.17.2 Commission's Observations

The Commission noted that the working environment for social welfare service providers is not conducive because working facilities and other social welfare services are limited. The Commission observed that social welfare services that are offered by some Government departments do satisfy the needs of clients and that coordination between some government institutions and NGOs is weak. Paradoxically, the need for social welfare services overwhelms available number of social welfare officers and other related professions.

The Commission further observed that hierarchical structure of social welfare services is not clearly structured within local government authorities where the most services are required.

5.2.17.3 Commission's Recommendations

It is recommended that:

- i) the Government should recruit more social workers and

other social welfare services providers in order to meet the demand;

- ii) the respective Ministries should empower and build capacity for Social welfare officers and non-skilled social welfare service providers for quality and sufficient social welfare services to the public;
- iii) the Government should provide the required standards and supervision to Non-governmental centers that provide social welfare services;
- iv) the Government should ensure conducive working environment for social welfare officers and other social welfare service providers.

5.2.18 Involvement of Individuals and Private Sector in Social Welfare Service Delivery

5.2.18.1 Stakeholders' Observations

Stakeholders pointed out that the private sector and individuals have made efforts in establishing social welfare service centers such as children and elderly homes but most of the centers are non-registered and not professionally maintained and monitored. They proposed that the Government should inspect social welfare service centers to ensure that they meet the required standards.

They also pointed out that despite unsatisfactory management, the need for private sector and individuals to continue to provide social welfare services to vulnerable groups. They recommended for the law to provide disciplinary actions to centers or NGOs that abuse the advantage to establish the centers for personal gains or interest.

Stakeholders stated that most of private centers providing social welfare services are doing so for personal benefits and not primarily

to serve vulnerable groups. They recommended that the Government should establish a mechanism to ensure that donation given by independent organizations and the Government are utilized for the benefits of the needy in the centers.

They also pointed out that most of social welfare service centers have unqualified staff and called on the centers to employ qualified staff for better services.

5.2.18.2 Commission's Observations

The Commission observed that there are several private individuals operating non – registered care centers and the centers are not supervised due to lack of proper monitoring and evaluation plans. It has been observed that social welfare service providers are not involved in ensuring that centers are operating in accordance with existing guidelines and regulations.

The Commission further observed that most of the employees in care centers do not possess the required qualifications of social workers and noted the need to find ways to address this problem.

5.2.18.3 Commission's Recommendations

It is recommended that:

- i) the Ministry responsible for social welfare should ensure that there are proper arrangements for regular inspections to care centers and in fulfilling their obligation;
- ii) the respective Ministry should develop a monitoring and evaluation plan which will enable the care centers to operate more effectively and efficiently towards achieving goals and objectives;
- iii) the private organizations and individuals should continue supporting and providing basic needs to vulnerable groups

- while observing respective rules and regulations;
- iv) the Government should enact a law to regulate social work profession, which will include, regulatory framework for ethical conducts, offences and penalties for social work practitioners.

5.2.19 Involvement of Social Workers in Policy Making

5.2.19.1 Stakeholders' Observations

Stakeholders pointed out that social welfare officers are rarely involved in policy- making process, as a result the relevant policies have not considered the role of social workers in promoting socio economic changes. They were of the view that the Government should ensure that social workers are involved in policy - making process.

Stakeholders further observed that some staff who are employed as community development officers have no sufficient social work skills and knowledge required to perform functions of social work in professional way. This affects the quality of social welfare service delivery.

5.2.19.2 Commission's Observations

The Commission observed that some of the social welfare activities are not afforded priority in policy making process. The Commission further observed that social welfare services do not have an independent department within local government administration; instead, they fall under the Department of Health which, traditionally, is meant for preventive and curative health services. This denies social work officers full participation in policy making as in most

cases they are represented by medical health professionals.

5.2.19.3 Commission's Recommendations

It is recommended that:

- i) the Government should ensure that policy making process involves all key stakeholders including social welfare officers;
- ii) local government authorities are advised to establish an independent department to cater for social welfare services.

5.2.20 Traditional Social Welfare Services

5.2.20.1 Stakeholders Observations

Stakeholders observed that cultural and traditional set up has a great role to play in the delivery of social welfare services. However, most of the people despise culture and customs thereby leading to abandonment of traditional responsibility of providing basic needs to vulnerable groups in families. They recommended for the Government to ensure good cultures, customs and traditions are protected and promoted in order to minimize emerging social problems.

5.2.20.2 Commission's Observations

The Commission observed that many people do not observe cultural and traditional values because of globalization and technology advancement. The Commission further observed that most parents are not performing traditional care to children. Failure to observe cultural, custom and traditional values has led to melting down of behavioral conduct among the youngsters.

The Commission noted that social welfare officers are increasingly not involved in measures taken by the Government in promoting good culture, customs and tradition for the creation of a positive society. Further, the Commission has noted the general attitude that many women are avoiding to consult or seek assistance from social welfare officers in resolving family problems.

5.2.20.3 Commission's Recommendations

It is recommended that:

- i) Ministry responsible for social welfare should formulate sensitization and other related programs for the promotion of traditional social protection systems;
- ii) Government should establish ethical code of conduct for social welfare service providers to allow better service provision.

5.2.21 Governance Structure of Social Welfare Services

5.2.21.1 Stakeholders' Observations

Stakeholders observed that the current governance structure that governs social welfare service delivery is centralized having being mainstreamed in the department of health service at regional and district levels. As a result they do not get adequate attention during planning and implementation of social welfare services. It was stated that Regional Medical Officers (RMOs) and District Medical Officers (DMOs), in their regional and district management meetings draw attention on matters relating to medical problems and pay less attention on matters relating to social welfare.

Stakeholders were of the view that the fusion of social welfare services with health services belittles significance of social welfare

services to the extent that resources required for social welfare services are scarcely located. They recommended that social welfare services be accorded appropriate levels at the regional, district and local government levels.

5.2.21.2 Commission's Observations

The Commission observed that social welfare services at regional level are placed under the Regional Medical Officer while at District, Town or Municipal levels are placed under the District Medical Officer. As a result social welfare professionals do not attend and participate in meetings where decisions are made since they are represented by medical officers, some of whom do not possess adequate knowledge and skills on social welfare services. Thus, social welfare services do not get adequate attention in planning and resources allocated do not adequately suffice the amount required for effective implementation of social welfare services. Taking into account the role played by social welfare services in alleviating social problems and injustices, it is important to elevate social welfare officers to specific departments, sections or unit at regional and district administrative structures respectively.

5.2.21.3 Commission's Recommendations

The Commission recommends for establishment of special departments, sections or units in order to oversee provision of social welfare services at regional, district and other levels of local government set up.

5.2.22 Regulation of Social Welfare Services

5.2.22.1 Stakeholders' Observations

Stakeholders observed the need to regulate social welfare services

in Tanzania. They stated that there are no prescribed standards of social welfare services offered by social welfare services providers. They further noted that there is no prescribed code of ethical conduct to be observed by social welfare service providers in the course of discharging their duties. Malpractice on social welfare services provisions is not addressed by any of the existing laws in terms of standards and procedural requirements. Lack of regulatory requirements, guidelines and regulatory authority for social welfare services was pointed out by stakeholders as a factor that affect the quality and efficiency in the provision of social welfare services.

They recommended for the enactment of a specific law which will, among other thing, establish a regulatory body to oversee ethical standards and conducts of social welfare services providers.

Stakeholders made observations on the issue of funding of the regulatory body. Some of stakeholders were of the opinion that the regulatory body be fully financed subscription fees and donations. They stated that this will relieve the Government from the burden of providing financial resources.

Other stakeholders observed that the regulatory body be financed by the Government since the number of social welfare service providers and other persons working as social workers are not adequately remunerated since most of the services offered are not charged fees. Most of clients of social welfare services providers are either, children, women, the elderly or the most vulnerable population in the society.

5.2.22.2 Commission's Observations

The Commission is of the observation that social welfare services have an important role to play in alleviation of social problems

and injustices. The Commission understands that persons working as social welfare officers in Tanzania are trained in social work, sociology and psychology. These persons have different training backgrounds, and thus, different skills when it comes to the provision of social welfare services.

The Commission noted that social welfare officers have no prescribed standards and ethical conducts to be observed. Social welfare officers in the public service are governed by general laws and regulations in the public service. Social welfare professionals in private sector do not have prescribed standards and ethical conducts.

The Commission further observed that, there are no prescribed sanctions for social welfare providers who violate ethical conducts and standards. This may lead to abuse of fiduciary relationship between the social welfare service providers.

With regard to financing the regulatory body, the Commission observed that the financing of the regulatory body is an important aspect in determining the efficacy of that regulatory body. Establishment and functioning of the regulatory body will require human and financial resources, availability of which need to be clearly known at the outset. The Commission agrees with stakeholders' views that the establishment and functioning of the regulatory body be financed by Government subsidy. Practice from other countries such as, the Republic of South Africa, indicates the preference has been on establishing an independent Council for Social Service Professions, charged with the promotion and enhancement of the development of social welfare. The Council is funded through members fees, Government subsidies, donation, gifts, grants, loans and bequest from donors and any other lawful sources.

The Commission also has observed that, the provision of social welfare services is not a business oriented. As such, it does not provide social welfare service providers avenue to generate adequate money for funding the regulatory body. Taking into account the important role played by social welfare service providers in alleviating social problems and injustices, it is important that the regulatory body have sound financial sources to fund its activities as well as subvention from the government.

5.2.22.3 Commission's Recommendations

The Commission recommends for:

- (a) enactment of a law to:
 - i) prescribe ethical conducts and standards to be observed by social welfare service providers and penalties for their violation;
 - ii) establish a regulatory body to oversee ethical conducts and standards of social welfare providers.
- (b) establishment of a regulatory body to be financed by:
 - i) money as allocated by the Parliament; and
 - ii) such sums as may be payable to the regulatory body by way of donation gifts, grants and loans or bequests from other stakeholders;
 - iii) any other lawful source of funding.

CHAPTER SIX

CONCLUSION AND RECOMMENDATIONS

6.1 Conclusion

The reviews dwelt on the origin, development and the practice of social work at international, regional and national perspectives. Analysis has been made of various national policies, national legislation, legislation from other jurisdictions, international instruments and best practices. The review also analysed field research findings from systematically selected regions in Tanzania.

The review revealed that globally, social welfare services relate to various interventions for economic empowerment, disaster management, poverty alleviation, fight against social evils, human rights and remedial services to various vulnerable groups. The research reveals that there is inadequate provision of social welfare services to the public.

The inadequacy is particularly contributed by shortage of social welfare officers at the grass root level of governance. Currently, most of the social welfare officers are positioned at district, regional and municipal levels and few of them at wards, mtaa and village levels. While most of social welfare clients are found at mtaa and village levels, service availability is often minimal. In that regard, there is a need of ensuring that social welfare officers are placed and available right from grassroots levels and upwards.

Consequently, the mismatch revealed has led to the emergence of unregistered and uncoordinated non-state actors who provide social welfare services. This has raised question on adherence of ethical standards about service provided. These challenges eventually call for a robust single and comprehensive legal framework that will

effectively regulate and manage the social welfare services and social work profession.

The findings also revealed that law enforcers and the public do not appreciate the significance of social welfare services in general. Only few people, government departments and agencies are aware of the importance of social work profession. As a result, social welfare services are not given priority when setting up plans and strategies at the local and central government levels. This also has made the services invisible to the community to a big extent. Social welfare services try to alleviate social problems that affect community development. Thus, it is important for the Government and the community to promote and appreciate the social welfare services in order to enhance the national economic growth and technological development.

Tanzania has scattered policies and laws regarding the work done by social workers. As such, there is no specific and comprehensive law, which promotes and protects social welfare services. The review revealed that, despite long list of legislation providing for social welfare services, none of them provide for regulatory framework for registration, administration and quality assurance of social work profession.

The International instruments on social work, among other things, addresses the issues related to social work as the basis for enjoyment of various social, economic, political and civil rights. The international instruments also influence and promote the need by State governments to establish a law, which will promote and safeguard the social welfare services.

Countries such as South Africa, Namibia, Seychelles Zimbabwe and New Zealand enacted laws that protect social work and other

related professions. These countries have also established social work councils for protection of clients and provision of qualified professional services, including, continuing professional development by practitioners. There are various aspects from other jurisdictions which Tanzania can learn in order to improve the legal framework governing social welfare services in Tanzania.

In the final analysis, there is a need for a robust single and comprehensive legal framework that will effectively regulate and manage the social welfare services and social work profession for the betterment and welfare of the nation.

6.2 Recommendations

6.2.1 Legal Recommendations

The Commission recommends that:

a) The Government should enact a law which will, among other things:

- i) provide for required standards to be observed by social welfare service
- ii) set social work professional code of conduct and ethical standards;
- iii) provide for the roles, functions and responsibilities of social workers and other related social welfare services providers;
- iv) provide for registration, licensing, rights and privileges of social welfare service providers;
- v) provide for governance structures of social welfare service provision;
- vi) establish a regulatory body to oversee social workers and social welfare service providers;
- vii) provide for finance of the regulatory body;
- viii) regulate training in social work profession in collaboration

- with national regulatory bodies;
 - ix) Provides for types of social welfare services to be offered by social welfare providers;
 - x) providers in provision of social welfare services;
 - xi) provide for offences and penalties.
- (b) The established regulatory body be financed by:
- i) money as allocated by the Parliament; and
 - ii) such sums as may be payable to the regulatory body by way of donation gifts, grants and loans or bequests from other stakeholders;
 - iii) any other lawful source of funding.

6.2.2 Non – Legal Recommendations

6.2.2.1 Provision of Social Welfare Services to Women

The Commission recommends that:

- i) the Ministry responsible for social welfare should carry out awareness campaigns to sensitize society on the evils of a wide range of social injustices against women and identify old and modern customs that exacerbate vulnerability of women;
- ii) the Government should employ and deploy sufficient number of social welfare officers in order to reach the large number of women in need;
- iii) the Government should provide adequate working tools to social welfare officers.

6.2.2.2 Provision of Social Welfare Services to Children

The Commission recommends for the Government to deploy social welfare officers in a sufficient number in order to reach the large section of children in need.

6.2.2.3 Provision of Social Welfare Services to the Elderly

The Commission recommends that the Government should:

- i) ensure proper allocation of social welfare officers in elderly homes
and in public institutions in general;
- ii) ensure involvement of social work professionals in planning for the elderly;
- iii) equip social welfare officers with better working facilities.

6.2.2.4 Provision of Social Welfare Services to Persons with Disability

The Commission recommends that the Government should:

- i) ensure deployment of adequate number of social work professionals at the lower levels of Government administrative structure;
- ii) ensure provision of training to persons working with people with disability so as to equip them with necessary skills in social welfare service delivery;
- iii) place matters relating to persons with disability under the Ministry responsible for social welfare services;
- iv) effectively implement the law to ensure friendly infrastructures to people with disabilities.

6.2.2.5 Provision of Social Welfare Services in Health Services

The Commission recommends that the Government should:

- i) ensure allocation of adequate number of social work professionals in health facilities;
- ii) in collaboration with relevant NGOs, equip social welfare officers working in health facilities with basic social work skills for satisfactory provision of social welfare services;

6.2.2.6 Provision of Social Welfare Services in Learning Institutions

The Commission recommends that the Government should:

- i) issue guidelines on the provision of social welfare services in learning institutions;
- ii) ensure availability of social welfare officers in both public and private educational institutions;
- iii) provide continuous social welfare training to non-trained teachers providing social welfare services in learning institutions;
- iv) increase access to education by vulnerable groups.

6.2.2.7 Provision of Social Work Services in Marriages

The Commission recommends that the Government should:

- i) employ sufficient number of social welfare officers to enable them adequately provide social welfare services up to the grass root level.
- ii) ensure special training is given to all persons involved in resolving marriage conflicts;
- iii) ensure that social welfare service providers are given regular refresher training to enable them serve the society better.

6.2.2.8 Provision of Social Work Services in Prisons

The Commission recommends that the Government should:

- i) equip more prison officers with social work skills to help correct inmates' behaviour;
- ii) recruit more prison officers with knowledge in social work;
- iii) come up with special rehabilitative programmes to inmates and ex-prisoners for preparing them for good conduct and behaviour after serving their sentences;

- iv) establish more approved schools and retention homes for children in conflict with the law.

6.2.2.9 Provision of Social Welfare Services to People in Poverty

The Commission recommends that the Government should:

- i) allocate adequate budget for social welfare officers to enable them discharge their duties appropriately and effectively. This will include itemizing cost centers for all types of social welfare services provided at council level;
- ii) ensure adequate involvement of social welfare service providers in setting up plans and strategies on poverty alleviation;
- iii) ensure adequate knowledge and skills on poverty alleviation to unqualified social welfare officers;
- iv) ensure provision of continuing education for social work professionals and educational cadres in providing social welfare services towards poverty reduction.

6.2.2.10 Provision of Social Welfare Services to Victims of Drug abuse

The Commission recommends that the Government should:

- i) deploy more social welfare officers and other social welfare service providers with social work profession in helping victims of drug abuse from to village to mtaa levels;
- ii) establish zonal sober houses and rehabilitation centres for the purpose of rehabilitating victims of illicit drugs;
- iii) provide awareness to the public on their role in helping victims of drug abuse through social welfare officers and other social welfare providers;
- iv) develop a guideline on the establishment and management sober houses.

6.2.2.11 Provision of Social Welfare Services through Police Gender and Children Desks

The Commission recommends that the Government should:

- i) ensure that people who are manning police gender and children desks should be given special training on social work to assist them discharge their functions professionally;
- ii) educate the society about the role of social welfare service providers and the presence of special police gender and children desks;
- iii) improve infrastructures for provisions of social welfare services to ensure privacy and confidentiality to victims of gender violence;

6.2.2.12 Social Work Training Institutions

The Commission recommends that:

- i) the Government should provide practical training to social welfare service providers;
- ii) curriculum for social work profession be harmonized for all colleges and universities by the relevant authorities responsible for curriculum development;
- iii) universities and colleges should be encouraged to introduce courses on social work profession;
- iv) the Government should ensure that, lecturers or tutors teaching social work courses in colleges and universities have adequate knowledge in social work profession;
- v) the Government should ensure continuing social work training to social welfare service providers.

6.2.2.13 Ethical Conduct of Social Workers

The Commission recommends that:

- i) the Government should ensure adequate accessibility of

social welfare services to the society through deploying sufficient number of social welfare officers at the lower level of governance;

- ii) the Government should provide training to persons not trained in social work who are engaged in the provision of social welfare services to public;
- iii) the Ministry responsible for social welfare should permit and regulate para-social workers to provide social welfare services to reduce the existing gap of social welfare officers.

6.2.2.14 Accessibility of Social Welfare Services

The Commission recommends that:

- i) the Government should ensure adequate accessibility of social welfare services to the society through deploying adequate number of social welfare officers at the lower level of governance.
- ii) the Government should provide training to persons not trained in social work but providing social welfare services to public.
- iii) the Ministry responsible for social welfare should permit and regulate para-social workers to provide social welfare services at village or mtaa levels to reduce the existing gap of social welfare officers.

6.2.2.15 Social Work and Other Related Professions

The Commission recommends that the Ministry responsible for social welfare should undertake awareness programmes to Government officials and the public in general on the roles and functions of social workers.

6.2.2.16 Adequacy of Policies and Laws on Social Welfare Services

The Commission recommends that;

- i) the Government should ensure the involvement and utilization of social work professionals in formulation of policies and laws at local and national levels;
- ii) social welfare services offered by units at regional and district levels should be elevated to departments to ensure effective involvement and utilization of social workers in planning programs for alleviation of social problems and injustices.

6.2.2.17 Involvement of the Government in delivery of Social Welfare Services

The Commission recommends that:

- i) the Government should recruit more social workers and other social welfare services providers in order to meet the demand;
- ii) the respective Ministries should empower and build capacity for Social welfare officers and non-skilled social welfare service providers for quality and sufficient social welfare services to the public;
- iii) the Government should provide the required standards and supervision to Non-governmental centers that provide social welfare services;
- iv) the Government should ensure conducive working environment for social welfare officers and other social welfare service providers.

6.2.2.18 Involvement of Individuals and Private Sector in Social Welfare Services Delivery

The Commission recommends that:

- i) the Ministry responsible for social welfare should ensure that there are proper arrangements for regular inspections to care centers and in fulfilling their obligation;
- ii) the respective Ministry should develop a monitoring and evaluation plan which will enable the care centers to operate more effectively and efficiently towards achieving goals and objectives;
- iii) the private organizations and individuals should continue supporting and providing basic needs to vulnerable groups while observing respective rules and regulations.

6.2.2.19 Involvement of Social Workers in Policy Making

The Commission recommends that:

- i) the Government should ensure that policy making process involves all key stakeholders including social welfare officers;
- ii) Local government authorities are advised to establish an independent department to cater for social welfare services.

6.2.2.20 Traditional Social Welfare Services

The Commission recommends that Ministry responsible for social welfare should formulate sensitization and other related programs for the promotion of traditional social protection systems.

6.2.2.21 Governance Structure of Social Welfare Services

The Commission recommends for establishment of special sections and departments to oversee provision of social welfare services at regional and district levels respectively.

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