

# **Strengthening the Social Work and Social Service workforce in Europe and Central Asia as an Investment in Our Children's Future: A Call to Action**

5 December 2018

## **The social service workforce is critical to implementation of the UNCRC, CRPD, CEDAW, European agenda for human rights and children's rights and achievement of the SDGs in the Europe and Central Asia region.**

**A well-planned, developed and supported<sup>1</sup> social service workforce is a life-changing and powerful force** for boys and girls, men and women, families and communities and for delivering a wide range of goals in the fight against poverty, social exclusion and violence.

The core functions of the social service workforce are to build human development capacity and promote social inclusion among people who are most excluded and marginalized, including those who live in extreme poverty or are affected by neglect, violence or exploitation. A strong social service workforce can better protect children, help people to address the challenges in their daily lives and change their situation for the better, prevent and respond to discrimination and violence against women, children, persons with disabilities and other excluded groups.

Urgent and long-term challenges common to most countries in the region that a strong social service workforce can significantly help to address<sup>2</sup>:

- More than 22 million children are living below national poverty lines in the Europe and Central Asia Region. Poverty hurts children's cognitive development and, in turn, leads to lower income and health in adulthood
- 5.3 million children are out of school in the ECA region.
- Many of the estimated 5.1 million children with disabilities in Europe and Central Asia are 'missing' from families, classrooms and communities
- Around half of all children in the ECA region experience or witness violent discipline at home and many also experience violence at school
- Children affected by migration across Europe and Central Asia are over 12 million, probably many more, considering 9 million migrant children and over 3 million children left behind by migrating parents. In 2017 alone 20,000 unaccompanied children arrived in Greece, Italy, Bulgaria and Spain.
- 666,000 children living in institutional care in the ECA region
- A study of seven countries in the region documented that when women experience violence in the home, children are likely to experience abuse too. Multi-sectoral services for children, men and women can break the cycle of intergenerational transmission of violence.
- The costs of domestic violence in the ECA region are estimated in the millions, both for services to care for survivors and for loss of productivity and income
- Child marriage compromises access to education, health and individual agency for girls in excluded minority groups and their lives and those of their children are put at risk, and their contribution to national development is lost.

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<sup>1</sup> The Global Social Service Workforce Alliance framework for strengthening the workforce identifies planning, developing and supporting as three core actions required for strengthening the social service workforce. See: <http://socialserviceworkforce.org/framework-strengthening-social-service-workforce>

<sup>2</sup> All data provided by UNICEF ECA Regional Office

**Investing in a strong, well-planned, developed and supported social service workforce represents a strategic investment in the solution to these challenges and in building human capital and inclusive societies.**

A considerable social service workforce of many tens of thousands of personnel has been deployed in the countries of the ECA region over the last 30 years. In many countries their caseloads are high, their competencies are weak and poorly aligned with their responsibilities and functions. They are inadequately supported and fragile compared to other strategically important workforces such as in health or education.

### **This call to action is focused on the social service and allied workforces in the ECA region – who are they?**

The social service workforce is defined according to:

- Role, responsibilities and functions in the system of social services and the competencies required to fulfil them
- Their statutory decision-making responsibilities or their employment in social service-providing organisations
- Professional qualifications, education or training

**Social services are defined as** *'a set of complex actions undertaken to meet the social needs of a person/ family in order to overcome difficult life circumstances and to combat violence against women and children, support protection of vulnerable girls and boys, women and men and support social inclusion of all excluded children and adults.'*<sup>3</sup>

**Who can provide social services?** Both government and non-government organisations, structures and agencies can provide social services.

**Competencies are defined as** *'the skills, knowledge and behaviors or the capacity to do something'*. A competency in any role is the ability to carry out required tasks to a quality, time or cost standard<sup>4</sup>.

**The social service workforce in the ECA region currently** includes:

**1. Social workers** with university degrees in social work and employed in statutory decision-making or in social work roles in social service-providing organisations that require professional competencies in social work. In countries where social work is a protected title, qualified social workers can be employed in any sector and still be considered part of the social service workforce.

**2. Professional specialists** are employed in social service-providing organisations and have professional qualifications other than in social work. In the ECA region these typically include social pedagogues, psychologists, lawyers and speech therapists (defectologists), occupational therapists, physiotherapists or other therapists employed by social service providing organisations.

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<sup>3</sup> Based on a working definition still in development in the UNICEF ECA RO Concept paper: social services, September 2018

<sup>4</sup> Working definition, OPM

**3. Paraprofessionals** are employed in social services in roles that do not have a requirement for any kind of specialised formal education but require training to ensure the specific responsibilities and functions of the role can be executed. This can include home help care workers (often given the job title ‘social workers’ in some parts of the ECA region), residential care workers, foster carers, youth outreach workers, personal assistants for persons with disabilities and other personnel who play an important role in delivering social services, often under the supervision of professional social workers.

Currently in the ECA region there are also many **practitioners employed in statutory decision-making or in performing social work tasks** that require professional competencies in social work **and have no social work degree**. Examples include some personnel engaged in statutory decision-making in child protection systems (such as local authority guardianship and trusteeship specialists) who do not have a social work degree or equivalent certification.

The call to action aims to eliminate this category of personnel by planning for them to either acquire the education to qualify as social workers or professional specialists, or to move into the paraprofessional category performing limited tasks commensurate with their competencies and qualifications or to be made redundant.

**The allied workforces** work closely alongside the social service workforce and have some responsibilities for social sector processes such as community outreach and mobilisation, early identification, assessment, referral and joint casework. The allied workforces include:

**4. Social protection administrators and specialists** work very closely with the social service workforce and are usually overseen by one Ministry in a unified social protection system. Typically, in the region this allied workforce is comprised of administrators and specialists employed in social assistance, social insurance and employment services concerned with assessing eligibility for and administering cash assistance, social insurance, pensions, benefits and employment benefits and services. In some countries, social workers based in the community are tasked explicitly with supporting access to benefits and social assistance, but they do not assess eligibility or calculate and confer benefits and therefore are part of the social worker category of the social service workforce rather than the social protection workforce.

**5. Professionals, specialists and paraprofessionals employed in other sectors** - health, education, justice etc. - this includes in the health system family doctors, home-visiting nurses, alcohol and drug addiction specialists and counsellors, mental health doctors and nurses; and in other sectors: Roma health or education mediators, employment service personnel, social pedagogues or other education resource personnel employed in schools and kindergartens etc<sup>5</sup>.

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<sup>5</sup> For more examples see Concept Note: ECA Regional Conference on social work and social service workforce strengthening, October 2018

**This call to action seeks to ensure that functions, competencies and qualifications across the social service workforce are aligned so there will no longer be unqualified professionals in roles requiring professional competencies and qualified professionals in roles that do not require professional competencies. There will be a range of personnel deployed across a range of services with the right qualifications for the competencies and responsibilities of their position.**

The call to action and regional monitoring framework (see Annex 1) are focused on **social service workforce planning, developing and supporting** actions and on **developing for the allied workforces** to strengthen competencies that are required for their engagement in social processes such as a person-centred approach, interpersonal communication and community mobilisation and to facilitate cross-sectoral training to reinforce a common understanding of goals and concepts.

### **What are the core functions of the social service workforce and the competencies needed to execute them?**

A fully developed social service system should be stratified to ensure that functions and responsibilities are aligned with competencies, qualifications and professional ethical principles to ensure their effective execution at all levels and where they intersect with the functions and responsibilities of the allied workforce.

Higher-level competencies are needed to undertake comprehensive and holistic assessments rooted in theories of human and social development that inform decision-making and that can fundamentally alter the trajectory of individual lives and to provide complex specialised, therapeutic or rehabilitative interventions all guided by professional ethical codes of conduct. The social service workforce encompasses professional occupations such as social worker, psychologist, social pedagogue, speech therapists and physiotherapists that require a university degree-level educational qualification and are competent to fulfil these functions. The social service system also includes functions such as providing home care services to older people and the workforce is also comprised of occupations such as home-care assistants and social care staff requiring less specialised competencies and of personnel with general management, technical management or supervision, administration, research and policy-making responsibilities at a range of levels within the system of social services.

Each occupation has its own specific functions that are defined and mandated according to the legislation and regulatory framework in each country, and according to professional competencies and professional ethical principles. There are functions that many social service occupations have in common: to help, empower and mobilise individuals, groups and communities to change their situation and overcome challenges. And at higher occupational levels to assess needs, strengths and weaknesses, opportunities and risks, to establish active partnerships with individuals and groups and with other professionals to achieve clearly defined goals, to analyse and identify root causes of problems and their solutions, to engage in reflective, evidence-based practice, within an agreed ethical framework, that also involves research and analytical skills. Social workers and other social service workforce personnel may be deployed in social services that have a range of target groups and require a range of specialised skills, for example social services that are working mainly with youth and harm reduction or with women and domestic violence or services that work mainly with people with disabilities and providing services that support social inclusion and independent living. Depending on the main goals, tasks and functions

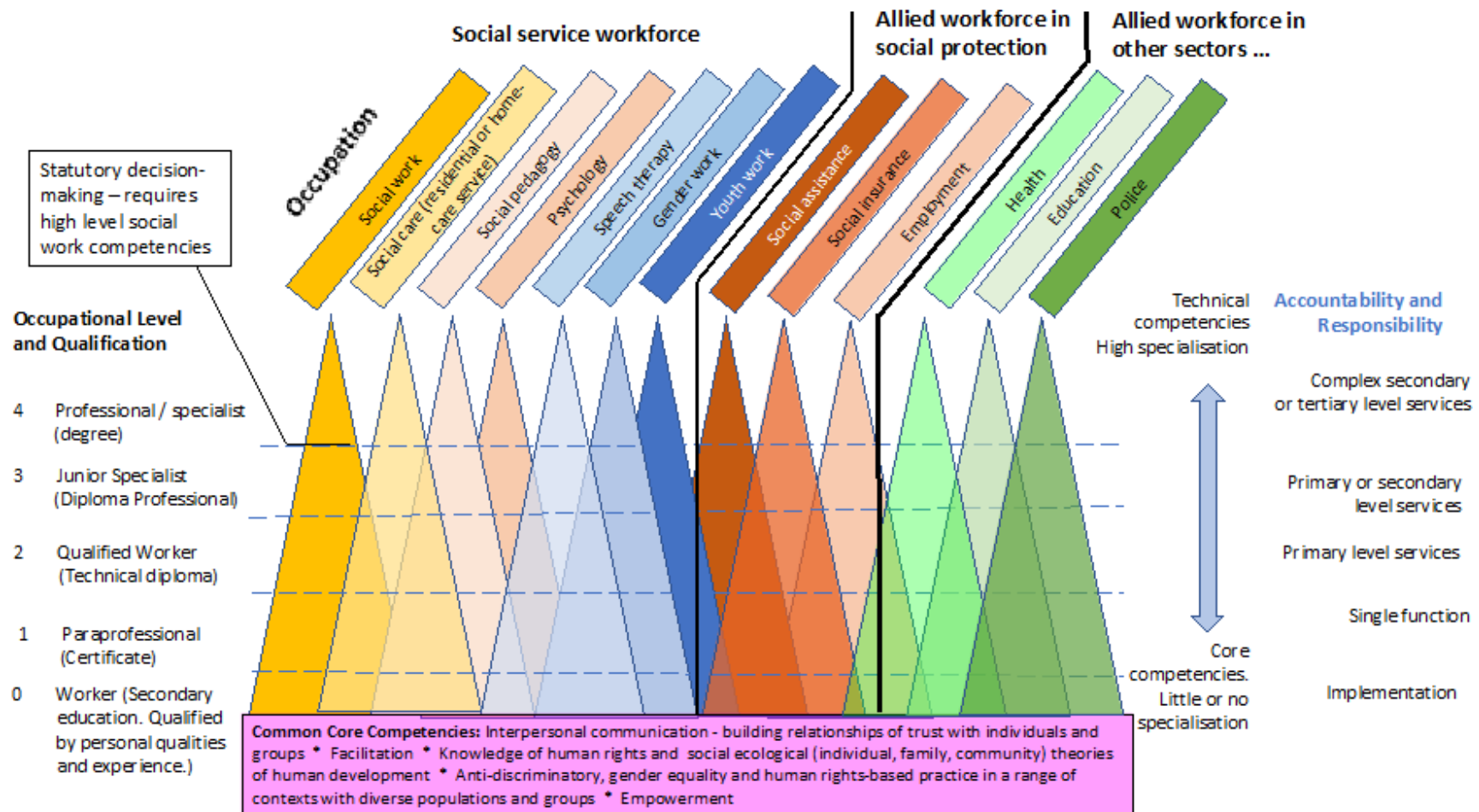
of these types of services, personnel with competencies and specialisms in disability, children (child care and child protection), youth, older people (active ageing) or gender may be required.

As Figure 1 illustrates, there are knowledge and skill-sets that overlap across different social service occupations (at levels 2 and 3) and competencies that are fundamental to a range of social service occupations (at level 1). These competencies at level 1 include knowledge of social-ecological models of human development including the bio-psycho-social model of disability<sup>6</sup>, human rights and person-centred approaches, interpersonal communication, understanding and knowledge of helping and empowerment processes, skills and knowledge to mobilise personal, family, community and groups of people, including people, towards behavioural and social change in a variety of settings and without discrimination or judgement. Social service workers have the opportunity to promote positive roles, norms and practices in relation to gender, disability, ethnicity and other areas of discrimination, thereby securing healthier relationships, social inclusion and positive outcomes for girls, boys, men, women and families.

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<sup>6</sup> As defined in the United Nations Convention on the Rights of Persons with Disabilities, UN 2006

Figure 1 Qualifications and core competencies for selected examples of social service and allied workforce occupations



Source: OPM and P4EC



There should be sufficient numbers of personnel deployed to ensure reasonable caseloads at each level of occupation. For example, home care workers providing personal social care services in the home to older people and persons with disabilities in Kazakhstan and Moldova (occupational levels 0 and 1 in Figure 1) have caseloads of between 6-10 individual clients per worker which seems a reasonable case load to permit individualised service delivery in the home and taking into account distances to be travelled<sup>7</sup>, but depending on the goals of the service, for example in terms of achieving active participation in society and social inclusion, may be too high.

The Law on Social Work introduced in Georgia in 2018 caps caseloads at a maximum 50 cases per social worker with statutory decision-making responsibilities, which is high given that social workers in these positions are engaged in intensive complex casework that also includes travel to households. It is nevertheless lower than the current documented caseload of over 70 cases per social worker. The Georgian Association of Social Workers recommends an optimum caseload of one social worker per 20-25 open cases at any given time, but notes that caseloads of statutory social workers include a range of intervention types from provision of information through to complex child protection casework and further analysis is required to determine an optimal caseload for statutory social workers in this context<sup>8</sup>.

There are no established international standards for social work caseloads, but guidance from the International Federation of Social Workers European region<sup>9</sup> suggests that a caseload of between 10-20 cases open at any given time for each qualified social worker enables effective casework depending on a number of factors:

- i) Distribution of working time – suggesting that this should be typically 70% direct and 30% indirect work with the client
- ii) Number of clients around 10 - 30 per social worker permitting a minimum of 4 - 12 hours of direct work with each client per month depending on the intensity and rapidity of the working process required which in turn will depend on;
- iii) Risk – including for example, lack of support services, lack of information, vulnerability, likelihood of significant harm
- iv) Complexity of the case – including factors such as multiple problems, child protection issues, multi - agency involvement, care placement
- v) Travel – for example siblings in different locations, location of court proceedings, location of services, high frequency contact

The IFSW Europe standards guidance suggests that ... *'the heavier and more intense the working process, the more demanding the service needs of the clients and their objectives, the more urgent their rehabilitation needs and their condition, and the more limited the available consultation or other support services, the closer to the minimum the maximum number of clients should be.'* (IFSW Europe, 2010<sup>10</sup>) It should be emphasised that this guidance does not apply for residential or family-based alternative care services.

A strong social service system would therefore expect highly qualified social work professionals and their immediate supervisors at the top of the social work pyramid in

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<sup>7</sup> Kazakhstan Case Study report, UNICEF ECARO, 2018

<sup>8</sup> Georgia Case Study report, UNICEF ECARO, 2018

<sup>9</sup> <http://ifsw.org/publications/standards-in-social-work-practice-meeting-human-rights/> cited in Rogers, J. UNICEF Moldova Human Resources and Training Needs Assessment in Social Work in the Republic of Moldova, p.31, UNICEF, 2015

<sup>10</sup> Ibid.



Figure 1, who are working on complex cases such as statutory child protection proceedings, to have a caseload of between 10-20 cases. Occupational standards should govern caseload targets for other professional specialists such as therapists or psychologists.

Personnel with social service management, administration, research or policy making roles and responsibilities require different competencies and qualifications than the frontline workforce, but are also part of the workforce and can also be represented along the continuum of occupations and specialisms in Figure 1. In some cases, qualified social workers and professional specialists may progress in their careers into management, policy-making and academic roles. One of the challenges in workforce strengthening currently noted<sup>11</sup> in the ECA region has been the lack of social workers and other professional specialists with strong practice experience in these roles.

### Why and in what is investment needed?

#### INVESTMENT IN PLANNING THE WORKFORCE

**Across the region, the social service workforce is inconsistently defined and incorporated into occupational and professional frameworks and this leads to a chronic lack of data on numbers of different types of social service workforce personnel.**

It has not been possible to determine the numbers of different types of personnel in the social service workforce as existing data both within national settings and across countries is either not gathered or the data that is gathered is poorly defined. In Georgia for example, the national statistics agency regularly gathers important data on various categories of workforce, but classifies social workers in a single category with health sector workers thereby not permitting disaggregation<sup>12</sup>. In Serbia, licensing regulations classify lawyers and psychologists working in social services as social welfare workers alongside social workers<sup>13</sup>, but it is not a typical practice in the region to include lawyers in social service workforce monitoring data. In Kazakhstan significant investments in social work and social service workforce positions across ministries has resulted in a strong base for the workforce. However, there are nine different occupations that include the title 'social worker', not all of them are monitored or counted in official data and a large number of them are in fact paraprofessionals who do not have, and are not required to have, social work qualifications<sup>14</sup>.

**Across the region unqualified personnel are in positions that require higher levels of competency.**

Social work is a core social service workforce occupation, but across the region important statutory social work positions are not staffed by social workers with a degree in social work especially in family support and child protection and public guardianship bodies. In some countries, psychologists graduating from university are

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<sup>11</sup> Case Study reports; Literature review report; UNICEF ECARO, 2018

<sup>12</sup> Georgia Case Study report, UNICEF ECARO, 2018

<sup>13</sup> Literature review, ECARO conference on social work and social workforce strengthening, 2018

<sup>14</sup> Kazakhstan Case Study report, UNICEF ECARO, 2018

not able to find work in the system of state social services as there are no such positions in the sector. In Romania, Moldova and several other countries, legislation on the qualifications of child protection social workers include clauses permitting personnel without social work degrees to be appointed even though the legislator has made clear that a social work qualification is required and would be preferred<sup>15</sup>. In some countries **there are not enough qualified social workers and professional specialists** to fill funded vacancies and in other countries the **qualified social workers and professional specialists are not entering the social service workforce**, as there are not enough posts commensurate with their qualifications<sup>16</sup>. Many countries do not have a vocational pathway for practitioners working in statutory decision-making roles or performing social work tasks in social services providing organisations or other personnel to work towards achieving a qualification or certification.

**Investment in effective workforce planning is required** to ensure that there are sufficient numbers of qualified personnel at each occupational level, especially at the higher professional levels engaged in statutory positions and in providing specialised social services, and to ensure that data is available to monitor progress in implementation of workforce strengthening plans. Investment is also required in building competencies in workforce planning and strengthening for managers and decision-makers at all levels including at policy-making levels.

## **INVESTMENT IN DEVELOPING THE WORKFORCE**

**Degree-level curricula in social work, psychology and other professions central to the social service workforce need to be introduced, upgraded or modernised in most countries of the region.**

Social work, although a core social service workforce profession, is new to many countries of the ECA region, having emerged in the last 25 years. Nearly every country now recognises social work as a profession and there are bachelor degrees in social work available in nearly all countries of the region. The content of the social work bachelor degree courses in some countries is limited to social administration, assessment and referral functions, rather than encompassing social work as an academic discipline and profession.

Other important social service workforce professions that are new to most countries of the region include psychology, occupational and physio-therapy. Speech therapy in the region has existed for longer under the occupational title of 'defectology' and has undergone considerable modernisation in the last 25 years, but ongoing review and upgrading is required to ensure that speech therapists are keeping up with international developments in the profession. Social pedagogy in the region also requires upgrading to align with developments in social pedagogy in other parts of the world.

Continuous professional development for the social service workforce in the region is unsystematic and ineffective in ensuring they are fully competent to address complex challenges in the lives of children, families and communities – this applies to all types

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<sup>15</sup> Romania Case Study report, UNICEF ECARO, 2018; Literature review, ECARO conference on social work and social workforce strengthening, 2018

<sup>16</sup> Albania Case Study report, UNICEF ECARO, 2018

of social service personnel including paraprofessionals who also require continuous development and support to be effective in their roles.

**The principle of investing in regular review and updating of university and college curricula and teaching and in-service training and continuous professional development programmes** for social workers and other social service workforce professionals is central to strengthening and maintaining the effectiveness of the workforce.

**Trust in the social service workforce is low and discriminatory attitudes and behaviours have been noted amongst social service and allied workforces in the region<sup>17</sup>.**

**Investment in workforce development is required both in the social service and allied workforces to upgrade skills and knowledge** to ensure that ethical principles and core competencies such as person-centred approaches, interpersonal communication, human-rights based anti-discriminatory practice and community engagement become embedded in pre-service and in-service education and training programmes and become habitual in everyday practice. Investment in cross-sectoral training will help to ensure that all parts of both the social sector workforce and allied workforces have a common understanding of inter-sectoral policy goals and effective ways for achieving them.

#### **INVESTMENT IN SUPPORTING THE WORKFORCE**

Across the region, **working environments are challenging, pay is low, caseloads high and the status of the social service workforce is low.** In countries where social work is not a protected title, there are no professional ethical codes of practice. The workforce needs strengthening both to build trust in the workforce among service users and colleagues from other sectors and to reduce staff turnover and burnout. Supporting the workforce will ensure a strong supply of qualified and motivated social workers, professional specialists and paraprofessionals to meet the needs of the whole system of social services provision.

As a result of these challenges in planning, developing and supporting the workforce, **reforms and new policies** in child protection, justice, migration, social protection, youth, disability, elderly care and poverty alleviation **are being implemented inefficiently and without achieving planned results.** Without strategic investment, achieving SDGs, supporting social inclusion and protecting children from violence cannot become a reality.

**Investment in the workforce is an investment in human capital for inclusive growth and achieves positive outcomes for individual girls, boys, men and women, families, communities and society as a whole.**

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<sup>17</sup> Literature review, ECARO conference on social work and social workforce strengthening, 2018

# A call to action

**UNICEF calls on governments, donors, NGOs, academic institutions and other national and international organisations in the ECA region to support the principles of:**

## **1. Agreeing to a common set of definitions of the social service and allied workforces in the ECA region**

The workforce typology and definitions set out in this document provide a framework for the countries of the region to define and monitor workforce strengthening. We call for agreement to adopt these definitions for a medium to long-term period through to 2030 to facilitate pursuit of a common ECA regional agenda on social service workforce strengthening and regular comparative monitoring. Considering the challenges that we have in common in the region, this will permit us to reflect and work together on finding effective solutions and to learn from each other.

Countries can continue to have their own definitions defined in national legislation and regulatory frameworks, but for the purpose of working together to find solutions to common challenges in the region, we call for commonly defined indicators to also be monitored and progress shared.

## **2. Effective long-term planning of the social service workforce and aligning functions, processes, competencies and qualifications**

- Defining the functions, processes and responsibilities of the social service workforce and the required qualification and competencies for the positions they occupy across the system and reflecting these in the regulatory framework (legislation or standards) for social services.
- Committing to developing comprehensive long- medium- and short- term plans for social service workforce strengthening including actions for developing and supporting the workforce.
- Ensuring personnel with responsibilities for participating in statutory decision-making processes and informing life-changing interventions have the higher-level technical competencies, ethical codes of practice and professional support necessary to make well-informed decisions and effective interventions.
- Ensuring reasonable caseloads for optimum effectiveness at different levels of the system with a goal at the 'top of the triangles' in Figure 1, where professional specialists are working on complex interventions, to meet international professional standards and guidance. For qualified social workers, this means no more than 10-20 clients per social worker for complex casework.
- Committing to no longer having unqualified personnel in positions requiring higher level competencies, especially child protection statutory decision-making positions, by 2030. Creating clear pathways for practitioners currently performing these functions, including those performing social work tasks, based on demonstrable competencies to a) be placed under the supervision of qualified social workers and b) become qualified in a reasonable timeframe, or c) to move to positions with

limited responsibilities that match their competencies under the supervision of a qualified social worker, or d) to be made redundant.

- Committing to the principle of ensuring financial mechanisms are in place to underpin workforce planning with adequate financing to ensure equity in the deployment of the social service workforce with the right competencies and in sufficient numbers in key statutory positions and in social services including in rural and hard to reach areas and in excluded or minority communities.
- Ensuring adequate investment for workforce planning developing and supporting (ensuring that minimum obligations are met).
- Encouraging gender, disability and ethnic balance in the social service workforce at all levels of staffing and management

### **3. Developing the competencies of the social service workforce**

- All social work and other specialist bachelor degrees being aligned with international standards and latest developments in education and training for the respective discipline. Periodic review of curricula as part of the long-term workforce planning cycle to ensure core competencies such as person-centred approaches, interpersonal communication, human rights approaches, community empowerment and social-ecological models of human development are incorporated and to ensure relevance to current and emerging social policy challenges and priorities in each country and in all sectors and services.
- Building the capacity of the academics researching, teaching and supervising practice placements for the social service workforce professions including fostering of partnerships between universities in different countries both within and outside of the ECA region
- Creating incentives or other mechanisms, that are aligned with short, medium and long-term social service workforce plans, to ensure that social work and other professional specialist university students are willing to be deployed to rural or excluded communities upon graduation.
- Providing significant pre-service practice experience in a range of social services as part of all social work or other professional specialist university degrees.
- Establishing funding or co-funding mechanisms to support robust in-service training for all social service workforce personnel including managers and policy-makers.
- Providing induction training and mentoring when immediately taking up a new position in a social service for all social service workforce personnel.
- Providing continuous in-service professional development in a systematic and coherent system linked to the short, medium and long-term planning cycle to ensure competencies are relevant and based in latest developments in the social work profession nationally, regionally and globally and at all levels from frontline engagement with children and families through management and supervision, sectoral research and policy-making.
- Ensuring that paraprofessionals and practitioners performing tasks in social work are accessing regular in-service training needed to build the competencies and ethical values required for their positions and are adequately supervised by social workers.
- Supporting the training required for building career pathways for social workers, other professional specialists and paraprofessionals where relevant. Ensuring that experienced professionals have opportunities to enter management and supervision roles or to develop as researchers and teachers of social service

professions and disciplines. Commit to ensuring that experienced social service professionals or academics can inform policy and have opportunities to enter roles with responsibilities for government decision-making about the social service workforce.

- Introducing where possible technology advances to support the work of social service workforce, in order to introduce greater efficiencies and effectiveness.

#### **4. Supporting the social service workforce**

- Ensuring adequate pay, working conditions and contractual terms for social service workforce personnel that are commensurate with the health and education sectors.
- Ensuring adequate financial support and safety measures for community-based outreach work where social service workforce personnel are expected to travel to visit clients in their homes and communicate with them by phone.
- Ensuring ethical codes of practice are in place and enforced and ensuring that adequate professional, empowering, supervision and self-care is provided to social service workforce personnel in positions with direct work with clients in difficult life circumstances.
- Ensuring that managers and policy makers with responsibilities for social service workforce deployment, support, planning and development have the knowledge and skills they need to fulfil their responsibilities
- Recognising that many of the social service workforce are women, ensuring investments in workplace safety and dignity.

#### **5. Developing the allied workforces**

**Strengthening the core competencies of the allied workforces** in areas such as person-centred approaches, inter-personal communication and community engagement will ensure improved outreach and more effective implementation of policies, programmes and services focused on prevention of violence and promotion of social inclusion and on empowerment of vulnerable children, women, persons with disabilities, migrants and excluded minority communities as well as mobilisation of community resources and changes to harmful attitudes, behaviours and social norms.

- Building relevant competencies into the pre-service training of the allied workforces with outreach, early identification, referral and joint casework functions or requiring core interpersonal communication, person-centred and community engagement skill-sets including: social assistance and employment personnel, police, education and health professionals, early childhood development workers, public administration professionals and their managers.
- Incentivising and providing funding or co-funding to support multi-sectoral and inter-disciplinary education and training programmes as part of systematic in-service training and continuous professional development for the allied workforces with social work functions. This includes joint inter-sectoral training to develop a common understanding of social work, the issues that it addresses and a common competence base for all actors involved in inter-sectoral collaboration for example on child wellbeing or family strengthening work.



# Annex 1 Regional monitoring framework

This framework sets out a core set of eight indicators for monitoring progress in the region in implementing the call to action and six other important indicators that can be used in monitoring implementation of workforce strengthening plans.

## Call to Action 1. Defining the workforce

**Core indicator 1: Each country produces a document providing a definition of the social service and allied workforces, agreed with the government, that is aligned with the definitions in the call to action and setting out clearly which personnel are included in each category of the social service workforce.**

This indicator defines the scope of the monitoring for all other indicators. The personnel described in categories 1-6 can be employed in both government and non-government organizations, and at any level or part of the system of social services in any of the following roles: outreach, service provision, supervision, management, academic or other teaching and training, research and policy advice or decision-making. Outreach and frontline service providing personnel should always be disaggregated from management, administration or technical support, and academic education/training or research/policy personnel.

Category 1. Social workers – this category includes only social workers with degrees in social work. In countries where social work is not a protected title, the document provides a definition of what professional social work and qualified social workers mean in the national context – using the definition in the call to action – a degree in social work - as a guideline, citing where relevant national legislation and regulatory frameworks, ethical codes of professional practice and describing which functions and processes qualified social workers are typically engaged in, including management, supervisory, research, teaching and policy roles, the goals they are expected to achieve and the expected competencies (defined as knowledge, skills and behaviours) required for each type of role. This is a first step in analysing the workforce and the processes in which it is engaged and can form the basis for workforce planning under Call to Action 2 as well as for monitoring.

Category 2. Professional specialists – all specialists employed in social services, both government and non-government should be counted here including junior professionals. If social pedagogues, youth workers or early childhood development specialists are employed by schools or kindergartens or by NGOs delivering education services, they should be counted in the allied workforce (Category 5). If they are employed by NGOs delivering social services, they should be counted in Category 2 of the social service workforce. Social service managers, administrators, researchers, academics and teachers and policy advisors who are not qualified social workers and counted in Category 1 should be counted here as sub categories of professional specialists.

Category 3. Paraprofessionals – sets out the relevant personnel in each country who are not expected necessarily to have a professional qualification or education, but who may have to undergo training in order to be able to implement specific types or components of the social service providing organisations in which they are employed and receive remuneration. In many countries personnel providing home care services to older people



and persons with disabilities and foster carers would fit into this category if they have an employment contract with the local authority or an NGO and are receiving a salary for their work. Each country will have to decide on the characteristics of its own paraprofessional workforce and whether or not to include, for example, kinship carers who receive childcare allowances and who are monitored by the child protection authorities, but who are not formally employed by any service. Other types of personnel where decisions need to be taken at the national level include: personal assistants for persons with disabilities, parents or other primary caregivers receiving care allowances for children with disabilities, youth outreach workers, residential care workers. Any paraprofessionals who are employed in health or education structures, such as Roma mediators, are not included in this category but are included in Category 5, the allied workforce.

Category 4. Allied social protection workforce – administrators and specialists employed in the social assistance, social insurance and employment services concerned with assessing eligibility for and administering cash assistance, social insurance, pensions, benefits and unemployment benefits and services. This workforce in the region often sits in a unified social protection system together with the social service workforce. This workforce typically has responsibilities for assessing whether households fall below income thresholds and are eligible for benefits, they also calculate amounts of benefits and administer payments. In some countries, social workers based in the community are tasked with supporting access to benefits and social assistance, but themselves do not engage in assessing eligibility so do not fall into the allied workforce, but are counted in the social service workforce categories 1 or 6 depending on whether they have a social work degree.

Category 5. Allied workforce – this category includes all personnel, professional and paraprofessional, employed in other sectors and that interact with the social service workforce on a regular basis through multi-disciplinary teams, referral systems or community outreach mechanisms. Typically these include health and education personnel such as home-visiting doctors and nurses, teachers and early childhood development specialists, school and kindergarten directors, health or education mediators and other outreach workers in hard-to-reach communities.

Category 6. Practitioners performing social work tasks – provides a list of positions that meet the definition for qualified social workers and monitors the qualifications of the personnel filling these positions. Some countries may not have any personnel that fit into this category. Most countries in the region have child protection specialists in positions requiring the competencies of qualified social workers, but which are filled by personnel without social work qualifications and limited training and these specialists would be counted as ‘practitioners performing social work tasks’ unless they become qualified when they can be counted in category 1 or 2. If they do not become qualified, they continue to be counted in category 6 unless their tasks are changed and limited to match their competencies. The call to action aims for all statutory child protection specialists and other positions requiring social work technical competencies to be filled by qualified social workers by 2030 so this category would be eliminated by 2030.

## **Call to Action 2. Planning the workforce and aligning functions, processes and competencies.**

**Core indicator 2: Completed steps towards creating and regularly updating a national plan for workforce strengthening in each country that is based**

## **on defining policy priorities across sectors, workforce needs assessment to meet those needs, planning, implementation and regular review.**

This indicator provides information on progress in creating a national plan for social service workforce strengthening that is comprehensive in looking at the whole workforce and its inter-sectoral linkages with allied workforces. The indicator also includes measurement of the quality of workforce planning by suggesting that the following steps are completed:

1. **Defining the workforce profile.** Inter-sectoral policy and policy objectives are defined to create the social service workforce priorities and define the workforce profile required to deliver those objectives including all characteristics: size, distribution, level, functions and required competencies, qualifications, training, the institutional framework within which the various social service workforce groups are employed. It is anticipated that a mechanism for multi-sectoral coordination will be required for planning across the social service workforce to addressing priority policy and national agendas.
2. **Needs assessment** based on the workforce profile identifies constraints, skill stock, bottlenecks and gaps in the workforce or where unqualified personnel are in positions requiring higher competencies. RACI charts (a map of who is Responsible, Accountable, Consulted, Informed) are one of a range of important tools that can be used for this kind of analysis to determine levels of responsibility and competency.
3. **Drafting workforce development, support and deployment plans** to fill gaps in the workforce whether in numbers, type, level, functions, competency levels, development and support needs or other aspects in the short, medium and long term. This will involve determining the training and recruitment capacity required for such a workforce.
4. **Implementation of plans** to address constraints and bottlenecks e.g. structural issues affecting capacity development or staff retention.
5. **Monitoring and regular review** to adjust plans as policy objectives or other factors change.

It is expected that the following core and other indicators related to planning will form a part of the indicators in the national workforce strengthening plans that will be produced under Call to Action 1 so data will be generated regularly in monitoring of the implementation and regular review.

### **Core indicator 3: The number of personnel in categories 1-3 and 6 (and the rate per whole population and per targeted population for social workers).**

This indicator provides information on whether sufficient numbers of personnel are deployed at different levels of the system of social services and how qualifications are in the process of aligning with required competencies across the workforce. Based on definitions approved in each country under Call to Action 1, each country monitors the numbers of social workers deployed in category 1 and practitioners performing social work tasks deployed in category 6 and calculates the rate per whole population and rate per child population as relevant, depending on the target groups with which the social workers or practitioners are working. Countries should also monitor numbers of each type of personnel defined in categories 2 and 3. Where possible disaggregation should be provided by gender, ethnicity and disability, by role and by geographical/ administrative or territorial location.

Governments should aim to gather data on personnel across the whole social service workforce, including all government and non-government organisations providing social services. If the government does not have data on all social service workforce employed in NGO social service providing organisations, then as a minimum they should gather data on any NGO social services that are funded by the government or fall within government regulatory systems.

**Other planning indicator a):** Average caseload of each type of social service workforce category 1-2 and 6 in each country (disaggregated for employment in working with children and adults and rural/urban/excluded communities)

This indicator provides information about the quality of planning in terms of ensuring that enough personnel with the right competencies for specific service types are deployed equitably across the country. The indicator is calculated by dividing numbers of service users by the number of social service workforce personnel defined in Core indicator 3 disaggregated for each type of personnel listed in the Call to Action 1 document categories 1-2 and 6. Monitoring this indicator should be based on readily available and regularly collected data. Ideally this indicator should be disaggregated for each type of service user (boys, girls, men, women, age, disability, rural/urban, minority community etc). Each country should develop a definition of case type and complexity in order to distinguish short-term/less complex cases from long-term care caseloads (as in home-visiting services for older people or persons with disabilities or residential care services) and high-intensity community based services such as high-risk child protection caseloads. If this disaggregation is not possible the most important indicator is the caseload of social workers and practitioners performing social work tasks in child protection services.

**Other planning indicator b):** Number of graduates in social work and other social service professions annually and the proportion of graduates entering and remaining in the workforce (disaggregated for employment in working with children and adults and rural/urban/excluded community).

This indicator provides information about whether the workforce plan that is produced under Call to Action 2 is ensuring an adequate supply of qualified professionals in categories 1 and 2 for the needs of the system and whether it is adequately supporting them to remain in the workforce. The data collection required for this indicator requires coordination with the universities that educate the social service workforce professionals and the employers providing data for indicator 3. The data required for monitoring this indicator will be reported in the workforce needs assessment under step 2 of the Call to Action 2 and will need regular monitoring in order to update annually.

### **Call to Action 3. Developing the competencies of the social service workforce**

We propose monitoring of development in keeping with short, medium and long-term goals in the workforce strengthening plans prepared under Call to Action 2. Indicators proposed for regional monitoring are:

**Core Indicator 4: Gap analysis of the content of social work Bachelor degrees and other professional specialist degrees (Category 2) undertaken**

**to benchmark against international standards in each profession at least once every 10 years.**

This indicator provides information on whether the education and training of the social service workforce is aligned with competencies and ethical values needed to address new and emerging challenges and changing policy priorities, including practice placements. This indicator also provides information on whether curricula contain important gaps given that social work theory and practice and that of other social service workforce professions is continuously evolving in a cycle of research and evidence-informed practice. This kind of curriculum review will form an important part of the needs assessment and regular review steps of the workforce planning cycle under Call to Action 2.

**Core indicator 5: Minimum standards in place for planned and resourced lifelong learning and continuous professional development of the social service workforce.**

**Core indicator 6: Standards in place to ensure core competencies (see Figure 1) form the basis for pre-service education programmes for social service workforce professions and that a diversity of practice placements is available as part of pre-service education.**

**Other developing indicator a):** Mechanisms in place for practitioners performing social work tasks or other tasks requiring a professional qualification to be placed under supervision of professionals and enabled to access formal training that leads to professional qualification (numbers completing professional qualification each year) or to eventually be made redundant by 2030 (numbers made redundant each year).

## **Call to Action 4. Supporting the workforce**

We propose that indicators for supporting the workforce are built into the social service workforce strengthening plans developed under Call to Action 2. Indicators proposed for regional monitoring are:

**Core indicator 7: Average level of pay for statutory social workers and other social service personnel as a proportion of average level of pay for teachers and health workers.**

**Other supporting indicator a):** i) Proportion of vacancies and ii) staff turnover rates disaggregated for each category of social service workforce described in Call to Action 1.

**Other supporting indicator b):** Standards in place and enforced for ethical codes of practice and for systematic professional empowering social work supervision and self-care of social workers in categories 1 and 6 who are working directly with clients.

**Other supporting indicator c):** Financial and logistical resources in place to ensure that social service workers required to carry out outreach and home-visiting are able to do so without being incurring expenses themselves and to do so safely.

## Call to Action 5. Developing the allied workforces

**Core indicator 8: Standards for ensuring core competencies (see Figure 1) are strengthened among the allied workforce personnel defined in Categories 4 and 5 and to support multi-sectoral training and education opportunities.**

This indicator can be measured by monitoring inclusion of core competencies such as ability to adopt person-centred approaches, anti-discriminatory, human rights and gender equality -based practice and interpersonal communication in job descriptions and performance management systems across sectors. This indicator could also include social service workforce coordination related indicators in other sector professionals' competency frameworks. For example, that benefits administrators, teachers, police and medical personnel are able to work with social workers and social services in a constructive manner.

This indicator can also help to track whether standards for continuous professional development in a range of sectors (core indicator 5 for the social service workforce) make provision for multi-sectoral training and education as a requirement.

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