



Social workforce capacity development for local government in Ethiopia

An Ethiopian single mother of four enjoys the benefits of cash transfer and support from a social worker.

Enanye Yeshanea lives in Ebrareg village in Amhara region in Ethiopia. She is single mother of four daughters.

Enanye was allowed to join the Productive Safety Net Programme (PSNP) two years ago. PSNP is a national safety net programme that has been in operation since 2005. PSNP targets the poorest and most vulnerable households. Around 8 million food insecure households receive monthly cash or food transfers from the programme.

The safety net is conditional. One able-bodied household member has to work on a public works programme for the family to get the benefits. Households that don't have able-bodied adult members are considered as 'Direct Support' beneficiaries: they receive their transfers without the requirement to work. Disabled and elderly persons benefit from 'Permanent Direct Support' (PDS), and pregnant and lactating mothers Enanye belong to the category of 'Temporary Direct Support' (TDS).

PSNP Cash entitlements for pregnant women

Enanye participated in the public works programme for a year. "Last year I realized that I was pregnant. The social worker in the village asked me to go to the health clinic for a test. A health extension worker took a test and told me that I was six month pregnant. I have not gone to school. This is why I did not realize earlier that I was pregnant."



Daughters Yezina, 14, Woyzer, 10 and Aregitu, 6, mother Enanye with her 7 month old baby girl in the front of their rented house. Photo: Markku Malkamäki

The health extension worker sent the results of the pregnancy test to the Food Security Development Agent managing the list of PSNP participants. After the results of the 'official' pregnancy test Enanye did not participate any more in the public work programme.

"During the pregnancy the local social worker visited my house almost weekly, and reminded that I need to go to regular health check-ups. She also insisted that I should allow my girls to finish their school and not allow them to be married underage."

During her pregnancy and 12 months after the birth she will receive her cash entitlements without the need to participate in the public works programme. "I am happy that I don't have to work. The baby is so small. Building earth terraces that prevent erosion is hard work." When the baby is 12 months old, Enanye has to return to the public work programme in order to receive her cash entitlement for the family.



The social workers link clients to services and collect information on their situation

Previously no one from the kebele administration visited the Direct Support clients. They just received a cash transfer. Now local social workers visit the homes of the elderly, the disabled and the pregnant mothers, discuss their needs and the various plans they have and link them to services to which they have a right but may not be aware of. Social workers also collect basic information on the PDS and TDS clients, among others whether the children of the PDS and TDS households attend school. If the children do not attend school, the social worker will discuss with parents and the school principal and ensure that the children are able to return to the school.

Further, the duty of social workers is to visit the poor pregnant women in order to inform them that they are exempted from public work activities. They also track that pregnant and lactating women use the prescribed health and nutrition services.

Social workers also assist the woreda Women and Children Affairs Office to open case files for orphan children and children that are victims of violence as well as design and implement care plans for these children. Social workers also identify cases of child marriages and inform the kebele committees for the prevention of harmful practices. In one of the test woredes, Libokemkem, two child marriage cases were identified by the social worker and the kebele committee stepped in and prevented these marriages.

Community Care Coalitions (CCC), the community level volunteers' network, have been established in each kebele. The aim of the CCCs is to assist the most vulnerable persons in the community. But because the CCCs are voluntary organisations, their effectiveness varies.

Hence the trained social workers that also receive a small salary are important to ensure that all the PDS and TDS receive guidance to additional services.



Ms. Atiselech Kassie, the kebele social worker has informed Enanye of her rights and responsibilities as pregnant women. Photo by Markku Malkamäki

The Amhara pilot helps regional authorities improve social protection in selected villages and districts.

Enanye and the social worker supporting her are part of the Amhara Social Workforce Development Pilot which is one part of the Development of the Social Service Workforce in Ethiopia -project implemented jointly by the Ministry of Labour and Social Affairs (MoLSA) and Unicef-Ethiopia, with support from the EU-SPS and Government of Finland. Forty social workers have been hired by the Amhara pilot, and they now work in 40 different kebeles (villages) in Libo Kemkem and West Belesa woredas (districts).

Through the pilot in Amhara region, the EU-SPS/Finland strengthens the capacities of the regional Bureau of Labor and Social Affairs (BoLSA) authorities in the implementation of social protection activities in selected woredas and kebeles of the Amhara region.

The pilot introduces and guides social workers into multi-sectoral teams working together with agricultural and health extension officers at the woreda and kebele levels.



The pilot develops a system to enhance clients' access to basic services through a comprehensive referral and case management system. This is based on a management information system (MIS) and a coordination mechanism between local level social services, health and agricultural services.

The aim of this pilot is also to contribute to the national evidence base on the role of the social service workforce (SSW), particularly the frontline workers, to enable robust advocacy for SSW development in the country. A similar pilot in another

region (SNNP) has already convinced the local woreda decision makers. They recently decided to continue the contract of the social workers after the pilot ended.

The Ethiopian Social Protection strategy notes that there should be at least one social worker in each kebele (village). This would mean around 30000 new social workers at the kebele level alone. However, there is no national consensus that social workers are needed, and what skills and competences they should have, unlike in the case of health extension workers or school teachers.

One of the aims of the pilot was to demonstrate that the community level social workers do indeed a valuable jobs in ensuring that the most vulnerable families in the villages have better access to other services.



The woman in the picture has suffered with polio her entire life, but was only identified as eligible for social protection by a social worker trained under EU-SPS support.

In early 2019, towards the end of the pilot the Amhara the Regional Government decided that there is a need for social worker in each of the 4000 kebeles (villages) in the Amhara regional state. The Amhara Bureau of Labor and Social Affairs has received green light from the Bureau of Finance and Economic Development (BoFED) and is in the process of preparing a budget for social workers. BoLSA is preparing a plan where there are not only one but two social workers in each of the 4000 kebeles.

National level EU-SPS Work in Ethiopia

Context

The pilot in Amhara is part of a larger project where EU -SPS, Finland and UNICEF have agreed to support the Ministry of Labour and Social Affairs (MoLSA) in their effort to build social protection capacity in the country.

MoLSA has recently been designated to lead and implement the Direct Support component of the Productive Safety Net Programme (PSNP). It accounts for up to 20% of the caseload of both the urban and rural safety net programs of Ethiopia. This new responsibility requires MoLSA to develop its social work force rapidly at regional, local (woreda) and community (kebele) levels.

Purpose

The purpose of the broader project is to support the Government of Ethiopia to develop its labour and social service workforce (SSW) under MoLSA and BOLSAs. In addition to the social work pilot in Amhara EU-SPS and Finland support the following activities:

- regional and inter-ministerial assessment of the existing social services workforce
 - an identification of the various social work occupations to be standardized
 - consultations on the priorities of social workforce training
 - an evaluation of the capacity of training and certifying institutions for lower level jobs
- The Amhara pilot helps regional authorities improve social protection in selected villages and districts.



Results Achieved

1. The national labour and social workforce assessment report was prepared with stakeholders

Stakeholders' participation in labour and social workforce assessment was facilitated in five regions (Addis Ababa, Amhara, Gambella, Oromia, and Somali) and at the Federal level.

The EU-SPS/Finland supported a participatory process through regional and national workshops. Workshops enabled discussions among a wide range of sectors from labour and social affairs, women and children's affairs, health, HIV/AIDS control, education, justice, and food security. Feedback and recommendations from the participants were consolidated into the national labour and social service workforce assessment report.

2. The national consultative workshop outlined new occupations for social work

A national workshop was held 17-18 May 2017. It brought together 60 participants from MoLSA, Ministry of Women and Children Affairs and the Federal Technical, Vocational Education and Training Agency (TVET), to discuss the findings of the workforce assessment report. The key issue was to determine what kind of professionals the country would need to implement the National Social Protection Policy and Strategy. New social sector occupations were identified and revisions were proposed for existing occupational standards.

The workshop proposed 18 different social work-related occupations with different competence requirements. The list included social case workers for OSH, social security, youth rehabilitation, school social work, relief work, street outreach work, child protection, child day care workers, elderly care, disability, substance misuse and addictions, mental health, social housing and community service management and volunteer coordination. In addition, MoLSA and TVET prepared concrete plans to prioritize between these professions in the development of occupation standards.

3. Occupation standards developed for selected social work jobs

Technical experts of MoLSA, UNICEF and the Federal TVET Agency have met several times to prepare a de-

tailed plan for development of the occupation standards of the sector under MoLSA. With support from the EU-SPS, a Technical Coordinator has been hired and assigned to MoLSA. The Technical Assistant played a crucial role in planning and facilitating the national consultative workshop. He continues to support planning of meetings and workshops through which the occupation standards will be developed. He also coordinates the National Social Protection Platform.

After the occupational standards were developed, a six month curricula for social worker workforce was designed. In Amhara region three TVET institutions started training community level social workers in March 2019.

4. Lessons learned/Tentative policy recommendations

Social protection cash transfers can effectively reach the poor and vulnerable households. But cash is not all these individuals and families need: Initial findings of the pilot indicate that social workers have a key role in informing them about the public services and benefits they have a right to, and counsel and encourage them to claim their rights.

Community level volunteers (in Ethiopia the Community Care Coalitions, CCC) that assist the most vulnerable at the village level are doing a good job. But their capacities are very stretched, and systems depending entirely on them may not be sustainable. Professional local level social workers – working in teams with the health and agriculture/food security officers – are needed to create a reliable social protection system at the most local level.

Findings indicate that social care workers have an important role to understand the opportunities and obstacles of the vulnerable families comprehensively, and also to ensure a systemic bottom-up feedback loop to make sure that policy makers at higher levels of administration have a realistic understanding of the life realities of the most vulnerable households.

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The views expressed in this briefing note reflect the lessons learned during the 4 years of the EU-SPS Programme, but they are not official positions of the partnering institutions (EU-Commission, OECD, MFA-Finland, THL).