

Data Collection Survey for Human Resource Development on Social Work in ASEAN Countries

Final Report

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The analysis and findings in this report are based on the publications and information reviewed in Japan from October 2021 to February 2022. The recommendations are suggested by the Survey Team and do not represent JICA's official cooperation strategy.



Surveyed Countries

Source: [<https://n.freemap.jp/>]

List of Abbreviations

(Common in all chapters)

ADB	Asian Development Bank
COVID-19	Coronavirus disease 2019
CRC	United Nations Convention on the Rights of the Child
CRPD	United Nations Convention on the Rights of Persons with Disabilities
CSOs	Civil Society Organizations
DFAT	Australian Government Department of Foreign Affairs and Trade
GDP	Gross Domestic Products
IFSW	International Federation of Social Workers
ILO	International Labour Organization
JPY	Japanese Yen
NGOs	Non-Governmental Organizations
SDGs	Sustainable Development Goals
THB	Thai Baht
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Fund
USD	United States Dollar
WHO	World Health Organization

(Chapter 2: International Trends)

ACWC	ASEAN Commission on the Promotion and Protection of the Rights of Women and Children
AMMSWD	ASEAN Ministerial Meeting on Social Welfare and Development
ASCC	ASEAN Socio-Cultural Community
ASCC Council	ASEAN Socio-Cultural Community Council
ASWC	ASEAN Social Work Consortium
ATCSW	ASEAN Training Centre for Social Work and Social Welfare
GSSWA	Global Social Service Workforce Alliance
IASSW	International Association of Schools of Social Work
ICSW	International Council on Social Welfare
MRA	Mutual Recognition Arrangement
MSDHS	Ministry of Social Development and Human Security
SOMSWD	ASEAN Senior Officials Meeting on Social Welfare and Development

(Chapter 3: Thailand)

CDD	Community Development Department
DCY	Department of Children and Youth
DEP	Department of Empowerment of Persons with Disabilities
DLA	Department of Local Administration
DMH	Department of Mental Health
DOP	Department of Older Persons
DSDW	Department of Social Development and Welfare
DWF	Department of Women's Affairs and Family Development
HDI	Human Development Index
ICSW	International Council on Social Welfare
LAO	Local Administrative Organization
LPDI	Local Provincial Development Institute
MSDHS	Ministry of Social Development and Human Security
NCSWP	National Commission on Social Welfare Promotion
NCSWT	National Council on Social Welfare of Thailand
NESDC	Office of the National Economic and Social Development Board

NESDP	National Economic and Social Development Plan
OCSC	Office of the Civil Service Commission
OICC	One-Stop Crisis Center
PAO	Provincial Administrative Organization
RI	Rehabilitation International
S-TOP	Project on seamless health and social services provision for elderly persons
SDHSV	Social Development and Human Security Volunteer
SPD	Social Policy and Development
SWPC	Social Work Professions Council
TAO	Tambon Administrative Organization
TASW	Thailand Association of Social Workers
THPM	Tambon health promotion hospital
TSIC	Thailand Standard Industrial Classification

(Chapter 4: Cambodia)

3PC	Partnership Program for the Protection of Children
APSWC	Association of Professional Social Workers of Cambodia
BSST	Basic Social Service Training
CARD	Council for Agricultural and Rural Development
CCWC	Commune/Sangkat Committee for Women and Children
CNCC	Cambodia National Council for Children
CQF	Cambodia Qualifications Framework
CSW	Community Social Worker
DoSVY	Department of Social Affairs, Veterans and Youth Rehabilitation
DPKO	Department of Peacekeeping Operations
IRC	International Rescue Committee
KHR	Cambodian Riel
MEF	Ministry of Economy and Finance
MoEYS	Ministry of Education, Youth and Sport
MoH	Ministry of Health
MoJ	Ministry of Justice
MoLVT	Ministry of Labour and Vocational Training
MoSVY	Ministry of Social Affairs, Veterans and Youth Rehabilitation
MoWA	Ministry of Women's Affairs
MSST	Management Social Service Training
NASLA	National School of Local Administration
NFV	National Fund for Veterans
NISA	National Institute of Social Affairs
NQF	National Qualifications Framework
NSDP	National Strategic Development Plan
NSPC	National Social Protection Council
NSPPF	National Social Protection Policy Framework
NSSF	National Social Security Fund
NSSF-C	National Social Security Fund for Civil Servants
NSSPF	National Social Protection Policy Framework
OSRSG-CAAC	Office of the Special Representative of the Secretary-General for Children and Armed Conflict
OSVY	Office of Social Affairs, Veterans and Youth Rehabilitation
PSE	Pour un Sourire d'Enfant
PSST	Professional Social Service Training
PWDF	People with Disability Fund
SSC	Social Services of Cambodia
TPO	Transcultural Psychological Organization
TWG	Technical Working Group
UNTAC	United Nations Transitional Authority in Cambodia

WCCC	Women and Children Consultative Committee
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(Chapter 5: Indonesia)

ASPEKSI	Indonesian Association of School of Social Work (Asosiasi Pendidikan Kesejahteraan Sosial dan Pekerjaan Sosial Indonesia)
GIZ	Gesellschaft für Internationale Zusammenarbeit
IPSPI	Indonesian Association of Social Workers (Ikatan Pekerja Sosial Profesional Indonesia)
IQF	Indonesian Qualifications Framework
KEMENSOS	Ministry of Social Affairs (Kementerian Sosial)
KPSI	Indonesian Social Work Consortium (Konsorsium Pekerjaan Sosial Indonesia)
LSPS	Social Work Certification Institute (Lembaga Sertifikasi Pekerjaan Sosial)
PKK	Family Welfare Program (Pembinaan Kesejahteraan Keluarga)
POLTEKESOS	Bandung School of Social Welfare (Politeknik Kesejahteraan Sosial)

(Chapter 6: Lao PDR)

BASW	Bachelor of Arts in Social Work
CPN	Child Protection Network
KOICA	Korea International Cooperation Agency
LDC	Least Developed Country
LWU	Lao Women's Union
MOLSW	Ministry of Labour and Social Welfare
NSEDP	National Socio-Economic Development Plan
NSPS	National Social Protection Strategy
NUOL	National University of Laos
USAID	United States Agency for International Development
UXO	Unexploded Ordnance

(Chapter 7: Malaysia)

GNI	Gross National Income
IT	Information and Technology
MASW	Malaysian Association of Social Workers
MWFCD	Ministry of Women, Family and Community Development
RM	Malaysian Ringgit
SWD	Social Welfare Department
UNIMAS	University of Malaysia, Sarawak
USM	University of Science Malaysia
WAO	Women's Aid Organization

(Chapter 8: Philippines)

4Ps	Pantawid Pamilyang Pilipino Programm (4Ps)
APASWE	Asian and Pacific Association for Social Work Education
APCMSWDOPI	Association of Provincial, City and Municipal Social Welfare and Development Officer of the Philippines, Inc.
BSSW	Bachelor of Science in Social Work
CHED	Commission on Higher Education
CoS	Contract of Services
CPD	Continuing Professional Development
CSC	Civil Service Commission
DILG	Department of Interior and Local Government
DOH	Department of Health
DOLE	Department of Labor and Employment

DRMG	Disaster Response Management Group
DSWD	Department of Social Welfare and Development
FI	Field Instruction
FO	Field Office
GASSG	General Administrative & Support Service Group
GSIS	Government Service Insurance System
KALAHI-CIDSS	Kapit-Bisig Laban sa Kahirapan-Comprehensive and Integrated Delivery of Social Services
LGUs	Local Government Units
NASWEI	National Association for Social Work Education, Inc.
NEDA	National Economic and Development Authority
OFW	Overseas Filipino Workers
OG	Operations Group
OSG	Office of the Secretary Group
OWWA	Overseas Workers Welfare Administration
P/C/MSWDO	Principal/City/Municipal Social Welfare and Development Office
PASWI	Philippine Association of Social Workers, Inc.
PDP	Philippine Development Plan
PHIC	Philippine Health Insurance Corporation (PhilHealth)
PNVSCA	Philippine National Volunteer Service Coordinating Agency
PO	People's Organizations
POEA	Philippines Overseas Employment Administration
PRC	Professional Regulation Commission
PWU	Philippine Women's University
RSW	Registered Social Worker
SCG	Special Concerns Group
SOG	Support to Operations Group
SSS	Social Security System
SWDAs	Social Welfare and Development Agencies
SWDO	Social Welfare and Development Officer
UP	University of the Philippines
URSW	United Registered Social Workers

(Chapter 9: Vietnam)

DHO	District Health Office
DivLISA	Division of Labour, Invalids and Social Affairs
DOH	Department of Health
DOLISA	Department of Labour, Invalids and Social Affairs
DSS	District Social Security
IMF	International Monetary Fund
MIC	Ministry of Information and Communications
MIS	Management Information System
MOET	Ministry of Education and Training
MOF	Ministry of Finance
MOH	Ministry of Health
MOHA	Ministry of Home Affairs
MOJ	Ministry of Justice
MOLISA	Ministry of Labour, Invalids and Social Affairs
MPI	Ministry of Planning and Investment
MPSARD	Master Plan for Social Assistance Reform and Development
MPSIR	Master Plan for Social Insurance Reform
NCCD	National Coordinating Council on Disability
NCD	National Council on Disability
OBD	Officials Database
OECD	Organization for Economic Cooperation and Development
PSS	Provincial Social Security

SEDP	5-year Socio-economic Development Plan
SEDS	10-year Socio-economic Development Strategy
TOT	Training of Trainers
UNDP	United Nations Development Programme
USD	United States Dollar
VAE	Vietnam Association for the Elderly
VAVETSOW	Vietnam Association for Vocational Education - Training and Social Work Profession
VFF	Vietnam Fatherland Front
VNCA	Vietnam National Committee on Aging
VND	Vietnamese Dong
VSS	Vietnam Social Security

(Chapter 10: Japan)

DV	Domestic Violence
DWAT	Disaster Welfare Assistance Team
EPA	Economic Partnership Agreement
FY	Fiscal Year
IFSW	International Federation of Social Workers
JACSW	Japanese Association of Certified Social Workers
JAMHSW	Japanese Association of Mental Health Social Workers
JASW	Japanese Association of Social Workers
JASWHS	Japanese Association of Social Workers in Health Services
JFSW	Japanese Federation of Social Workers
JICWELS	Japan International Corporation of Welfare Services
MDTs	Multi-disciplinary Teams
MEXT	Ministry of Education, Culture, Sports, Science and Technology
MHLW	Ministry of Health, Labour and Welfare
MSW	Medical Social Worker
ODA	Official Development Assistance
OJT	On-the-Job Training
SSWs	School Social Workers
US	United States

Data Collection Survey for Human Resource Development on Social Work in ASEAN Countries

Final Report

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Executive Summary

1. Objective and Methodology of the Survey

Since the establishment of the Association of Southeast Asian Nations (ASEAN) in 1967, Southeast Asian countries have further strengthened their relationship as a community to advance political stability, economic development, and national security in the region. On the other hand, there are gaps within the region in terms of economy, health, education, and social protection systems, and some countries are facing emerging issues such as population aging. Especially in inland areas, the trafficking of children and women across borders and the influx of immigrants are also major issues. In addition, economic growth has increased regional inequalities within the country and income inequalities in urban areas, leading to an increase in the number of poor households and street children. Moreover, it may be difficult to detect and even worsen the issues faced by the socially vulnerable people during an epidemic of Coronavirus disease 2019 (COVID-19).

In the ASEAN region, where various social issues are complicated, it is necessary to improve the social welfare system and to expand the quantity and quality of social service workforce who appropriately coordinate the social welfare services to those who need support. Strengthening social service workforce, including social workers, is very important for solving the individual problems that people face and for realizing an inclusive society. However, there are many countries which do not have an established professional regulation system for social workers, or a clear definition of their roles and responsibilities, or even if they do have a qualification system, there is a lack of official data on the number and deployment of social workers. Another challenge for the ASEAN region is that social workers are not regarded as professionals and are therefore forced to work at low wages, resulting in a shortage of human resources.

With the background above, “Data Collection Survey for Human Resource Development on Social Work in ASEAN Countries” (hereinafter referred to as “the Survey”) was implemented with an objective to collect and analyze information on the current situation and issues of the development of human resources on social work in seven countries in ASEAN region (Cambodia, Indonesia, Lao PDR, Malaysia, the Philippines, Thailand, and Vietnam). In addition, it aimed to explore the direction of future cooperation of Japan International Cooperation Agency (JICA), taking into account the international trends and aid trends, and the current situation, issues, and possible resources in Japan.

The Survey was conducted from October 2021 to March 2022. This report was compiled by analyzing information and data collected through literature review, on-line interview survey, and workshop convened in Thailand. The scope of the Survey is “social service workforce” as wide range of human resources involved in social welfare services, not limiting to “social worker” who have academic degree or qualification”. This is mainly because in developing countries, not only professional social workers but also other variety of human resources such as para professionals and volunteers play important roles to deliver social welfare services in the field. The Survey complied to the framework of strengthening social service workforce by Global Social Services Workforce Alliance (GSSWA) and collected information was analyzed in three aspects of “planning”, “development” and “support”. It enabled to match priority issues

of each country with effective approaches in Japan and extract more suitable cooperation approaches in accordance with county needs and policy of ASEAN based on aid trends.

Composition of this report is as follows: overview of the Survey in Chapter 1, international trends and aid trends in Chapter 2, overview and priority issues of social service workforce in seven ASEAN countries in Chapter 3 to 9, and experience and resources in Japan in Chapter 10. Based on Chapter 2 to 10, Chapter 11 summarizes comprehensive analysis and recommendations on direction of future cooperation by JICA.

2. Survey on international trends and aid trends

Since around 2010, emphasis has been placed on strengthening “social service workforce” which includes a wide range of human resources such as professional social workers, para professionals, and volunteers, in order to tackle issues related to social welfare and social protection in developing countries. Led by the GSSWA and UNICEF, mapping studies based on the framework for strengthening social service workforce have been conducted in various countries, and efforts to strengthen the workforce are underway in each country.

In aspiring to realize the ASEAN Community, human security has been emphasized, which has brought an increased attention on human resource development on social work in ASEAN. Together with the international movement mentioned above, UNICEF has been taking the lead in strengthening social work and social service workforce in the region. The ASEAN Social Work Consortium (ASWC) was established in 2010 to improve the status and quality of social service workforce throughout ASEAN, and it has been working on knowledge management and developing common guidelines and training programs in the region. The fact that these efforts led to the establishment of the ASEAN Training Centre for Social Work and Social Welfare (ATCSW) in 2019 and the Ha Noi Declaration¹ in November 2020 is a remarkable achievement. The Road Map² for the implementation of the Ha Noi Declaration has just been formulated in 2021, and it is expected that aggressive efforts will be steadily made at the country and regional levels based on this Road Map.

The ASWC and ATCSW play an important role in promoting the Road Map. These organizations need to take a central role in consolidating knowledge and resources within the region and promoting cooperation among ASEAN member states, which enable them to effectively address common issues and gaps in the region. As an ASEAN training center for human resources on social work, ATCSW is required to develop regional qualification standards, ASEAN core curriculum for social work education, etc., and to develop and deliver training programs that meets the needs of each country. Furthermore, in the longer term, the Centre is expected to develop a competency framework and consider becoming a regional assessment center for providing certification for competency-based training, with a view to the introduction of Mutual Recognition Arrangement for social work.

¹ Ha Noi Declaration on Strengthening Social Work Towards Cohesive and Responsive ASEAN Community

² ASEAN Road Map for the Implementation of the Hanoi Declaration on Strengthening Social Work for Cohesive and Responsive ASEAN Community

3. Survey on the situation in seven ASEAN countries

(Cambodia, Indonesia, Lao PDR, Malaysia, the Philippines, Thailand, and Vietnam)

The Survey results show that the progress and institutional framework regarding the development of social service workforce and professionalization of social workers vary considerably among the surveyed countries. There is also a big gap in progress. While some countries, such as the Philippines, Indonesia, and Thailand, have established professional regulation systems, Cambodia and Lao PDR are just starting to formulate strategic plans and laws for institutionalization. Among the seven countries, the Philippines was the first to establish a professional regulation system for social service workforce. Under the Social Work Law passed in 1965, a qualification system for Registered Social Workers is in operation. In Indonesia, the Law on Social Welfare defined classifications of social service workforce in 2009, and the Law on Social Worker stipulated the certification and licensing system for social workers in 2019, and preparations are now underway for the official operation of the system. In the Philippines and Indonesia, the regulations require licensing and registration to engage in social work, which is a professional license. In Thailand, the Social Work Professions Act was enacted in 2013, which stipulates the licensing of social work profession practitioners. In the rest of the countries, as of February 2022, there is no legislation in place that defines classifications, functions, and responsibilities of social service workforce. However, it was confirmed that these countries were also making active efforts by formulating policies and plans for development of social service workforce.

There were issues common to all countries. Human resource information system is not yet developed in all countries, and both the number of people engaged in each category of the workforce and the number of people trained and needed are uncertain. In order to promote human resource development on social work, it is first necessary to conduct accurate and comprehensive assessment of the status and needs of social welfare service delivery and human resources, and then formulate a plan based on priorities, and take budgetary measures.

In Cambodia and Lao PDR, the number of professional social workers is limited, and there are not enough educational resources to develop them, therefore these countries have to rely on para professionals and volunteers to provide social welfare services in the field. In order to expand the quantity and improve the quality of social service workforce, it is important to strengthen the existing social service workforce at community level such as para professionals and volunteers in line with the professionalization of social workers and their training.

It is important to emphasize that ASEAN has a wealth of experience and resources (human resources, organizations, etc.) in strengthening social service workforce. These include established professional regulation system based on a long history in the Philippines, the active use of volunteers in Thailand, high quality professional education in Malaysia, and active professional associations in various countries. There are also lessons to be learned from countries such as Indonesia that are in a transitional stage of institutionalization. By taking advantage of the unique approaches and resources of each country, effective actions can be taken to strengthen social work and social service workforce in the entire region.

4. Survey on Japanese experience and resources

In Japan, social workers have been established as a profession with the introduction of the national qualification system, and educational institutions for social welfare have been established throughout the country, and thus the infrastructure for developing social workers has been enhanced. On the other hand, since the skills of social work do not involve specific physical techniques, but rather the ambiguous nature of “consultation and assistance”, and since social work is a title-exclusive qualification that allows people to work without qualifications, it is difficult for society to recognize the expertise and importance of social work, and thus social workers have not yet established their social status or secured their economic status. In addition, since social work has been developed in different fields such as mental health and medical care, there are two separate national qualification systems, “certified social workers” and “mental health social workers” in Japan. And each of the social work profession has its own continuing education system and certification system for higher qualifications, making it difficult to develop a common basis as social workers.

Based on the Survey on Japanese experience and resources, the following four points were identified as the strengths, the experience and the lesson learned in Japan that could be useful for ASEAN region: 1) One of the strengths of social work in Japan is the comprehensive support system that has been established in communities in cooperation with multiple professions and institutions along with the legislative reforms to support children, people with disabilities, the elderly, and people with low incomes, etc.; 2) One of the lessons learned from the Japanese regulation system that established two separate national qualifications for social workers is the importance to work towards strengthening the foundations of social work, that is a generic social work. In the ASEAN region, the issues of poverty, disability, child labor, education, gender, etc. are interconnected in complex ways. Therefore, it is recommended to have a system that could strengthen generic social work skills as the foundation of social service workforce, enabling them to respond to various issues in the community; 3) Another lesson learned is to increase the social status of social workers by expanding the standards for their deployment and appointment. In Japan, the qualifications of certified social worker and mental health social worker are title exclusive, which allows people to engage in social work without these qualifications. Therefore, by increasing the number of jobs and services that require holding these national qualifications as a requirement for appointment, a substantial monopoly of work could be achieved, making the expertise of social workers more visible; and 4) Japan as a country with advanced issues has accumulated social work knowledge and experience that may be useful for ASEAN countries in the fields of welfare for the elderly and disaster management.

5. Conclusion: Recommendations for JICA's Future Cooperation in Human Resource Development on Social Work in ASEAN Countries

ASEAN is trying to build on the efforts of the past decade in strengthening social service workforce and further accelerate such efforts in the future. The Road Map setting out priority areas and activities to be undertaken by 2030 was adopted in October 2021, and the momentum for strengthening social work and its workforce is growing in ASEAN as the starting point for the next 10 years. On the other hand, the implementation of the Road Map depends largely on the support (financial and technical) from development partners, and the mobilization and coordination of such support is an urgent issue. In this context, JICA's

cooperation in this area will lead to the enhancement of the effectiveness of the Road Map and may contribute greatly to strengthening social work and social service workforce in the region.

ASEAN, led by ASWC and ATCSW, is trying to strengthen social service workforce throughout the region. As revealed in the country surveys, some ASEAN member states, such as the Philippines, Thailand and Indonesia, have already developed professional regulation systems and accumulated various experience. Furthermore, each country has its own unique initiatives and good practices. With ASWC and ATCSW serving as a hub, these abundant resources within the ASEAN region can be effectively utilized to fill the gap and promote professionalization of social service workforce in the region.

In addition, it is essential for JICA's cooperation to make use of Japanese experience and strengths as mentioned above. Some Japanese experience in developing the professional regulation system for social workers and its current efforts for the workforce development can be useful to ASEAN countries as well as lessons to be learned. Moreover, the experience and knowledge accumulated through addressing diverse and complex social welfare issues in the community in Japan would be useful for ASEAN countries that are expected to face similar challenges in the future. In particular, Japanese contribution is expected to strengthen social work in the areas of welfare for the elderly and disaster management.

Based on the above, as a future direction of JICA's cooperation, it is proposed to work on building a foundation to strengthen social service workforce in the entire ASEAN region through support for ATCSW. Specifically, it can be aimed to enhance capacity of ATCSW to function as an ASEAN training center and fulfill its role as indicated in the Road Map by supporting to strengthen its organizational capacity and to develop training programs that meets the needs of each country. Through the organizational capacity development, ATCSW can sustainably play a pivotal role to lead the social service workforce development and strengthening at the national and regional level.

Chapter 1 Objective and Methodology of the Survey

1.1 Overview of the Survey

1.1.1 Background

Since the establishment of the Association of Southeast Asian Nations (ASEAN) in 1967, Southeast Asian countries have further strengthened their relationship as a community to advance political stability, economic development, and national security in the region. On the other hand, there are gaps within the region in terms of economy, health, education, and social protection systems, and some countries are facing emerging issues such as population aging. Especially in inland areas, the trafficking of children and women across borders and the influx of immigrants are also major issues. In addition, economic growth has increased regional inequalities within the country and income inequalities in urban areas, leading to an increase in the number of poor households and street children. Moreover, it may be difficult to detect and even worsen the issues faced by the socially vulnerable people during an epidemic of Coronavirus disease 2019 (COVID-19).

In the ASEAN region, where various social issues are complicated, it is necessary to improve the social welfare system and to expand the quantity and quality of social service workforce who appropriately coordinate these services to those who need support. Strengthening social service workforce, including social workers, is very important for solving the individual problems that people face and for realizing an inclusive society. However, there are many countries which do not have an established qualification system for social workers, or a clear definition of their roles and responsibilities, or even if they do have a qualification system, there is a lack of official data on the number and deployment of social workers. Another challenge for the ASEAN region is that social workers are not regarded as professionals and are therefore forced to work at low wages, resulting in a shortage of human resources [1].

In response to this situation, ASEAN accelerates measures in strengthening social service workforces. In November 2020, it adopted “Ha Noi Declaration on Strengthening Social Work Towards Cohesive and Responsive ASEAN Community”, which included 11 commitments for strengthening roles of social work. The ASEAN Social Work Consortium (ASWC) has indicated in the “Action Plan 2016-2020” to establish the ASEAN Training Centre for Social Work and Social Welfare (ATCSW) in Thailand, which was launched in 2019. The center will work on developing training courses and curriculum, providing technical and professional information, promoting quality training and capacity building opportunities, and strengthening cooperation among the relevant organizations in ASEAN member states. In addition, the center is expected to play a sufficient role as a platform for promoting social work as a profession and increasing social understanding.

1.1.2 Objective

With the background above, “Data Collection Survey for Human Resource Development on Social Work in ASEAN Countries” (hereinafter referred to as “the Survey”) was implemented with an objective to collect and analyze information on the current situation and issues of the development of human resources on social work in seven countries in ASEAN region (Cambodia, Indonesia, Lao PDR, Malaysia, the

Philippines, Thailand, and Vietnam). In addition, it aimed to explore the direction of future cooperation of Japan International Cooperation Agency (JICA), taking into account the international trends and aid trends, and the current situation, issues, and possible resources in Japan.

1.1.3 Period of the Survey

From 26 October 2021 to 15 March 2022

1.1.4 Composition of the Report

This report explains overview of the Survey in Chapter 1, international trends and aid trends in Chapter 2, overview and priority issues of social service workforce in seven ASEAN countries in Chapter 3 to 9, and experience and resources in Japan in Chapter 10. Based on Chapter 2 to 10, Chapter 11 summarizes comprehensive analysis and recommendations on direction of future cooperation by JICA.

1.2 Framework and Methodology of the Survey

1.2.1 Target Counties of the Survey

Cambodia, Indonesia, Lao PDR, Malaysia, the Philippines, Thailand, Vietnam and Japan

※ Thailand is a priority target county where ATCSW is located.

1.2.2 Scope of the Survey

Concerning the scope of “social worker” as a target of the Survey, “social worker” is used with various meanings regardless of existence of qualification system, for example, some countries use it as qualification name of profession and others broadly use it as “human resources involved in social welfare services”. Moreover, in developing countries, not only professional social workers but also other variety of human resources such as para professionals and volunteers play important roles to deliver social welfare services in the field, and it is emphasized to strengthen “social service workforce” which includes wide range of human resources involved in social welfare services.

Based on the above, the Survey does not limit its target to “social worker” who have academic degree or qualification, but targets “social service workforce” as wide range of human resources involved in social welfare services. Definition and scope of social service workforce is clarified in 1.3(1) of this Chapter.

1.2.3 Framework of the Survey

Figure 1-1 shows the framework of the Survey.

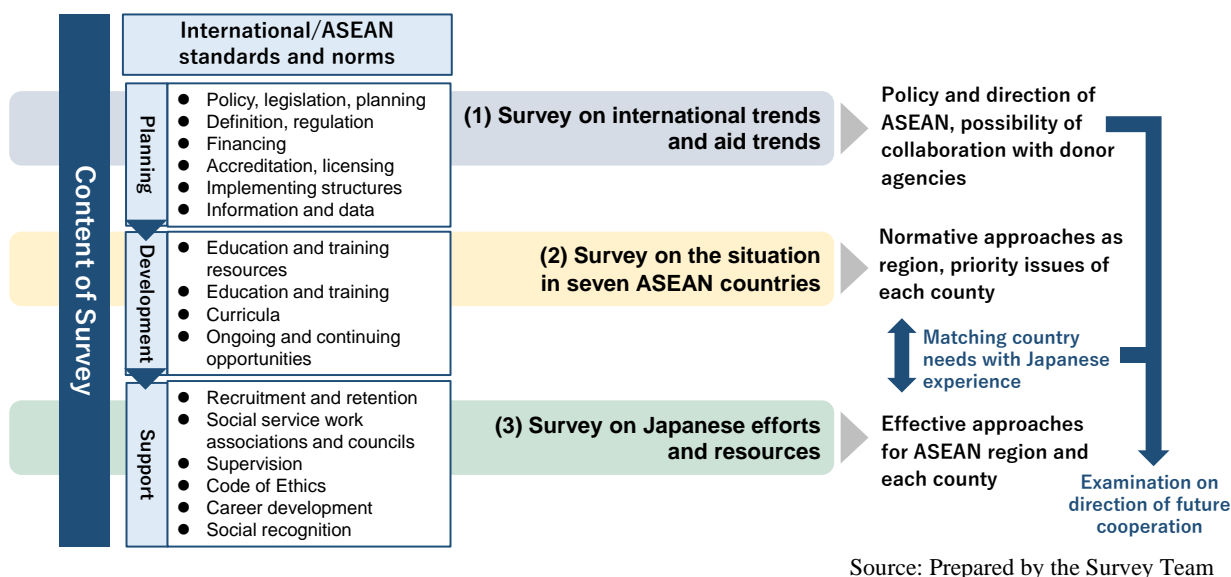


Figure 1-1 Framework of the Survey

The Survey consists of (1) survey on international trends and aid trends, (2) survey on the situation in seven ASEAN countries and (3) survey on Japanese experience and resources. The Survey complied to the framework of strengthening social service workforce¹ by Global Social Services Workforce Alliance (GSSWA) (its details explained in Chapter 2) and collected information was analyzed in three aspects of “planning”, “development” and “support”. It enabled to match priority issues of each country with effective approaches in Japan and extract more suitable cooperation approaches in accordance with county needs and policy of ASEAN based on aid trends.

Concerning contents of the Survey, in (1) the survey on international trends and aid trends, information on international efforts of relevant organizations and trends of international aids were collected and analyzed. Then, ASEAN initiatives on strengthening social service workforce, especially roles of ASWC and ATCSW in ASEAN region, their approaches and future activities were summarized. In (2) the survey on the situation in seven ASEAN countries and (3) the survey on Japanese experience and resources, information on social welfare in each county, and items in “planning”, “development” and “support” shown in Figure 1-1 were collected and analyzed, and priority issues were extracted on developing and strengthening social service workforce in each country. Based on the overall analysis of these survey results, direction of future cooperation by JICA was examined.

1.2.4 Methodology of the Survey

This report was compiled by analyzing information and data collected through literature review, on-line interview survey, and workshop convened in Thailand.

The interview survey was implemented with a preparation of identifying target organizations based on the literature review and making questionnaires, as well as with the supports from the following organizations;

¹ GSSWA developed this framework as guidelines for countries to strengthen social service workforce and establish its system, indicating the importance of intervention at “Planning”, “Development” and “Support” stages to strategically tackle issues in strengthening the workforce [2].

ATCSW, the ASEAN Secretariat, and UNICEF East Asia and Pacific Regional Office for (1) the survey on international trends and aid trends, line ministries and educational institutions such as university and professional associations for (2) the survey on the situation in seven ASEAN countries, and experts for (3) the survey on Japanese efforts and resources. A list of interviewees for the interview survey refers to Annex 1.

Concerning Thailand as a priority target county, it was planned to conduct field survey twice. However, only the first field survey was conducted in December 2021 due to influence of COVID-19. The planned second field survey was substituted by on-line interview survey.

In the first field survey in Thailand, the workshop was convened with 28 participants from relevant organizations such as ATCSW and Ministry of Social Development and Human Security, in which experience of Thailand and Japan was shared, and opinions were exchanged on strengthening social service workforce. Information collected through the workshop was used for analysis of the Survey. The program of the workshop refers to Annex 2.

1.2.5 The Survey Team

The Survey was implemented by the Survey Team members shown in Table 1-1.

Table 1-1 The Survey Team members

Member	Responsibility
Kumiko NISHIMURA	Team Leader/ Analysis of Aid Trends (1)/ Overall Management of Analyses (1)
Chiaki KIDO	Deputy Team Leader/ Analysis of Aid Trends (2)/ Overall Management of Analyses (2) / Analysis of Human Resource Development on Social Work in Malaysia
Shino NISHIMAGI	Analysis of Human Resource Development on Social Work of Donor Agencies and Japan
Rika FUJIOKA	Analysis of Human Resource Development on Social Work in Thailand
Junko YAMADA	Analysis of Human Resource Development on Social Work in Cambodia
Yuko OGINO	Analysis of Human Resource Development on Social Work in the Philippines
Akiko SHIMIZU	Analysis of Human Resource Development on Social Work in Laos
Yukari OSHIMA	Analysis of Human Resource Development on Social Work in Indonesia
Kenji SATO	Analysis of Human Resource Development on Social Work in Vietnam
Kaito ONISHI	Data Collection and Analysis Assistant

Source: The Survey Team

1.3 Terminology in the Report

Terminology used in this report is described in the following.

(1) Social service workforce

Definition of social service workforce by GSSWA is shown in Table 1-2, to which ASEAN complies. It includes wide range of human resources involved in social welfare services.

Table 1-2 Definition of social service workforce

The social service workforce is an inclusive concept referring to a broad range of governmental and nongovernmental professionals and paraprofessionals who work with children, youth, adults, older persons, families and communities to ensure healthy development and well-being. The social service workforce focuses on preventative, responsive and promotive services that are informed by the humanities and social sciences, Indigenous knowledges, discipline-specific and interdisciplinary knowledge and skills, and ethical principles. Social service workers engage people, structures and organizations to: facilitate access to needed services, alleviate poverty, challenge and reduce discrimination, promote social justice and human rights, and prevent and respond to violence, abuse, exploitation, neglect and family separation.

The social service workforce constitutes a broad array of practitioners, researchers, managers and educators, including – but not limited to: social workers, social educators, social pedagogues, child care workers, youth workers, child and youth care workers, community development workers/community liaison officers, community workers, welfare officers, social/cultural animators and case managers. While social work and social pedagogy have the advantage of history, and are quite dominant in the sector, other categories of professionals and paraprofessionals have evolved over time and make invaluable contributions to ensuring human well-being and development.

Source: [2]

Scope and classification of social service workforce indicated in the “Road Map”² which is the latest document to strengthen social work in ASEAN are shown in Table 1-3. While the Survey collected and analyzed information complying to the definition in the Road Map, classification, name and definition of social service workforce vary by country. As earlier mentioned, it should be noted that the term “social worker” has different meanings in different countries, contexts and times. In this report, classification and definition of social service workforce including social worker by country are explained in each chapter. Regarding Japan, scope of the Survey includes “social worker” and “mental health social worker” who are considered to be social work profession, and does not include “care worker” and “childcare worker”.

² ASEAN Road Map for the Implementation of the Hanoi Declaration on Strengthening Social Work for Cohesive and Responsive ASEAN Community (2021)

Table 1-3 Scope and category of social service workforce in ASEAN

Classification	Explanation
social work profession/ social workers	<ul style="list-style-type: none"> • Leading and core profession in the social service workforce. • Definition complies to the “global definition of social work profession”. • Social workers are professionals trained at academic level, or with or qualification/license in field of social work. • Countries use diverse approaches to regulate the social work profession.
para professional/ para social workers	<ul style="list-style-type: none"> • Human resource who are trained through non-degree training to perform certain social work functions at community level. • Working next to or supporting the work of a professional in the same field by performing a specific social work function as paid staff or volunteer.
volunteer	<ul style="list-style-type: none"> • Human resource who contributes to the social service sector. They may be professionals, paraprofessionals or non-professionals, receiving or not receiving a stipend. • They play an auxiliary role by filling gaps not covered by professional qualified staff or paid para professionals, most often at community level.

Source: Prepared by the Survey Team with reference to [3]

(2) Supervision

Supervision in social work aims to assure for social workers to take responsibility of their works accurately and improve their quality of works. Skilled social workers with abundant knowledge and experience are entrusted as supervisors to guide, support social workers with a little experience (supervisees) on professional knowledge and skills, and encourage them to reflect their practices critically.

Supervision is generally understood to have three functions, those are, 1) “managerial function” (instruction and confirmation of executing the works), 2) “developmental function” (learning of knowledge, skills and ethical values necessary for the works), and 3) “supportive function” (recovering identity and psychological support as professions). In addition to these three functions, there is an opinion that supervision also has “mediation function” (mediating relationship between supervisees and other staff or other organizations). Form of supervision includes individual supervision, group supervision³, peer supervision⁴ and so on [4] [5].

(3) Social service and social welfare service

In this report, “social service” and “social welfare service” are used strictly according to original texts and contexts. In general, “social service” is service for general people such as health and education whereas “social welfare service” is welfare service for socially vulnerable people.

³ A form of supervision in which a supervisor provides supervision to a group consisting of multiple supervisees.

⁴ A form of supervision in which the participants reflect on each other's practice on an equal position, rather than the traditional method in which a skilled person provides supervision.

Chapter 2 International and ASEAN Trends in Social Service Workforce Strengthening

2.1 International trends

2.1.1 International organizations related to social work

This section provides an overview of two international organizations related to social work that was founded in 1928 as an outcome of International Conference of Social Work¹, followed by the Social Service Workforce Alliance founded in 2013.

(1) International Federation of Social Workers (IFSW) [1] [2]

IFSW was founded in 1932², and has been the world's leading organization representing over 3 million social workers worldwide. It works for the professional development of and advocacy for social workers for social justice and the protection of human rights. It is designated as a special consultative body of the United Nations Economic and Social Council and the United Nations Children's Fund (UNICEF), and also works with the World Health Organization (WHO), the Office of the United Nations High Commissioner for Refugees (UNHCR) and the Office of the United Nations High Commissioner for Human Rights (OHCHR).

The global office is located in the United States (New York) and an African office in Uganda. There are five regional organizations: Africa, Asia Pacific, Europe, Latin America and the Caribbean, and North America. As of 2020, there are 144 member states (one organization per country). Regarding Japan, the Japan Federation of Social Workers is registered as the coordinating body of four organizations³.

IFSW has a wide range of activities around the world. At the international level, it organizes biennial world conferences jointly with the International Association of Schools of Social Work (IASSW) and the International Council on Social Welfare (ICSW)⁴, and develops international documents on social work including an international definition of social work and makes policy recommendations to UN agencies.

(2) International Association of Schools of Social Work (IASSW) [3]

IASSA was found in 1929⁵, and has been the leading international organization for social work education as a profession. IASSW vision is to promote and develop "excellence in social work education, research and scholarship across the globe, in pursuit of a more just and equitable world". Since 1947 it has been a consultative body of the United Nations Economic and Social Council, with teams in New York, Vienna and Geneva participating in UN activities.

¹ This was the first international conference held with the aim of building cooperation across borders between those involved in social work (professionals, social activists, experts, etc.). More than 2,500 participants from 42 countries, including Japan, attended [2].

² Founded as International Permanent Secretariate of Social Workers and renamed in 1956.

³ Japanese Association of Certified Social Workers, Japanese Association of Social Workers, Japanese Association of Social Workers in Health Services, and Japanese Association of Mental Health Social Workers.

⁴ ICSW was founded after the International Conference of Social Work in 1928, together with IFSW and IASSW. It is an international organization representing civil society organizations from all over the world involved in social welfare.

⁵ Founded as International Committee of Schools of Social Work and renamed in 1956.

The principal office is the seat of the President, which as of 2021 is located in Italy. It has five regional organizations: Africa, Asia Pacific, Europe and South America and the Caribbean. Its members consist of social work education institutions and individual members, and as of 2021 there are 339 registered education institutions and 150 individual members. As for Japan, the Japan Association of Schools of Social Work Education is the coordinating body, with 164 of the national schools of social work education affiliated to the Association [4].

In addition to the aforementioned joint world conference with IFSW and ICSW and the development of international documents, the IASSA publishes an online publication, *Social Dialogue*, and provides grants (up to \$4,000 per organization) to member organizations for projects to enhance their social work education.

(3) Global Social Service Workforce Alliance (GSSWA) [5]

It was launched in 2013 to promote ongoing dialogue and cooperation among relevant organizations to strengthen the social service workforce in low- and middle-income countries. It has grown to be a wide network of more than 2,900 individual members across 147 countries. Funded by the JSI Research & Training Institute's Partnerships Plus project (USAID as the donor) and UNICEF, the GSSWA has a range of initiatives at global, regional and national levels.

GSSWA is a platform for collaboration among a diverse range of actors and institutions, including government agencies, civil society organizations, practitioners and researchers, and is involved in activities related to advocacy, research, knowledge management and capacity building.

There are interest groups with voluntary members in four areas: 1) Advocacy, 2) Case Management, 3) Paraprofessional and 4) Supervision. The groups develop guidelines and tools for social service workforce strengthening.

2.1.2 International documents related to social work

In order to establish the status and role of social work as a profession, the IFSW and IASSW have worked together to develop a common global definition, ethical principles and educational standards. This section provides an overview of each document.

(1) Global Definition of the Social Work Profession [6]

In the late 1970s, the IFSW began to consider the definition of social work, and it has been considered for many years since. It was not until 2001 that full agreement was reached between IASSW and IFSW and approved by the General Assembly of both organizations as a "definition of social work" [2]. Since then, further revisions have been made and a new definition, the Global Definition of the Social Work Profession, was adopted by the Melbourne General Assembly of the IFSW and IASSW in 2014.

Global Definition of the Social Work Profession

Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledges, social work engages people and structures to address life challenges and enhance wellbeing.

The above definition may be amplified at national and/or regional levels.

Interpreting the new definition, including the “commentary notes”, the characteristics of the new definition compared to the old definition of 2001 are respect for diversity, a critique of Western centrism and modernity, and an emphasis on macro-social change. Also, collective responsibility, in which people take responsibility for each other and for the environment, was added as one of the principles, and social development and social cohesion, in addition to social change and empowerment, were placed as the core tasks of social work [7].

The new definition refers to “indigenous knowledge”. This was due to the view that the old definition was based on Western-centered values and ideas, which excluded the unique culture and knowledge of the regions and countries that had been ruled by Western countries during the colonial period, and that in adopting the new definition, the uniqueness of each region and country was to be respected. Each region of the world and each country was then allowed to develop its own definition based on this global definition, without prejudice to its content, in accordance with its own social, political and cultural circumstances. In response to this, “Proposed Amplification for Asia Pacific Region” has been developed for the Asia Pacific region and “Japanese Amplification of the Global Definition of the Social Work Profession” for Japan [8].

(2) Global Social Work Statement of Ethical Principles [9]

In 2004, IFSW and IASSW jointly published the “Ethics in Social Work-Statement of Principles”, which was subsequently revised in 2018 as the “Global Social Work Statement of Ethical Principles” following the revised definition of social work in 2014.

Ethical values are fundamental to the practice of social workers who provide personal assistance, and the code of ethics is important as it sets out the values and code of conduct of the social work profession. A number of countries, including Japan, have developed codes of ethics for the social work profession in accordance with the global statement of ethical principles.

The nine principles set out in this global statement of ethical principles are as follows.

1. Recognition of the Inherent Dignity of Humanity
2. Promoting Human Rights
3. Promoting Social Justice
4. Promoting the Right to Self-Determination
5. Promoting the Right to Participation
6. Respect for Confidentiality and Privacy
7. Treating People as Whole Persons

8. Ethical Use of Technology and Social Media

9. Professional Integrity

(3) Global Standards for Social Work Education and Training [10] [11]

The first Global Standards for Education and Training in Social Work were developed by IFSW and IASSW and adopted in 2004. Subsequently, review of the old standards was required following the new definition of social work profession in 2014 and the global statement of ethical principles in 2018. For the revision, IFSW and IASSW set up a joint task force, and after more than 18 months of consultation, the new standards were adopted in 2020.

The objectives of the new standards include ensuring consistency in social work education and adherence to the values and policies of the profession, ensuring that the next generation of social workers has access to high quality learning opportunities, and promoting collaboration between social work education institutions.

The standards set out, for each of the three areas of “the school”, “the people” (educators, students and service users) and “the profession”, what social work schools should comply with and what they should aim to do where possible. As for the curriculum, along with its standards⁶, the core curriculum is presented as universally applicable to all social work education programs. It states that the core curriculum must be guaranteed to be available for the first professional qualification (or bachelor’s qualification in social work). In terms of field placements, it should be aimed to “provide opportunities for practice placements equivalent to at least 25% of the total teaching activity of the course (calculated in terms of credits, days or hours)”.

2.1.3 International initiatives

(1) The Global Agenda for Social Work and Social Development [12]

The Global Agenda for Social Work and Social Development (2010-2020) is a joint initiative of IFSW, IASSW and ICSW. Consultation began at the World Conference on Social Work and Social Development in 2010 and the official document was published in 2012. The Agenda aims to strengthen the role and values of social work and social work profession and to increase international solidarity as social work responds to global social problems. The Agenda identifies four themes to be addressed by international organizations, local communities and the three organizations (IFSW, IASSW, ICSW): 1) promoting social and economic equalities, 2) promoting the dignity and worth of peoples, 3) working toward environmental sustainability, and 4) strengthening recognition of the importance of human relationships. These themes are focused on in turn every two years and the results of the initiatives are published [13].

And a framework of the Global Agenda 2020-2030 was announced in 2020. The main theme is “Co-building Inclusive Social Transformation” and the theme for 2020-2022 is “Ubuntu: Strengthening Social Solidarity and Global Connectedness” [14].

⁶ The curriculum standards apply primarily to social work degree programs.

(2) Call to Action for Social Service Workforce Strengthening

In 2018, GSSWA announced the “Call to Action: Strengthening the Social Service Workforce to Better Protect Children and Achieve the SDGs”. 31 organizations and networks have signed up to the call.

The document states that strengthening social service workforce is essential to achieving the Sustainable Development Goals (SDGs) and makes policy recommendations for action by countries and the international community. Country level actions include: development or enhancement of a national level, government-led workforce leadership group, conducting assessment of the current status of workforce data and need for workforce mapping, development of a national workforce strengthening strategy, to obtain funding and commitments, and to commit to the importance of monitoring, evaluating and reporting. Global level actions include: contribution to knowledge exchange and building the evidence base, to increase availability and access to funding, and advocacy [15].

(3) Social Work Day

Every year, the third Tuesday in March is World Social Work Day and a number of activities are held at the United Nations and around the world to mark the day. The theme for 2022 is “Co-building a New Eco-Social World: Leaving No One Behind” [16].

2.2 Trends in international cooperation

2.2.1 International level

Assistance for strengthening social service workforce in developing countries has received increasing attention since around 2010. It was recognized that in order to confront social problems such as poverty and inequality, and to guarantee human rights and improve welfare as enshrined in international treaties, it was essential to strengthen social services and social protection systems, and these systems could not function effectively without sufficient and well-developed workforce who run the systems. With the establishment of GSSWA in 2013, efforts to strengthen social service workforce have accelerated with the solidarity of a number of relevant organizations, including UNICEF and other international organizations, NGOs and research institutions. As social service workforce plays a key role in achieving the SDGs, assistance for strengthening the workforce will continue to be emphasized.

UNICEF, together with GSSWA, is leading the way in international cooperation in this area. UNICEF has acknowledged that the workforce must be strengthened as an integral part of child and social protection systems to achieve Outcome 3 of its Strategic Plan (2018-2021): “every child is protected from violence and exploitation (child protection)” [17]. In 2019, UNICEF Headquarters has developed Guidelines to Strengthen the Social Service Workforce for Child Protection to guide regional and country offices’ programming in coordination with national and regional partners. In response to the various impacts of the Coronavirus disease 2019 (COVID-19) on vulnerable populations, UNICEF emphasizes on supporting social service workforce for social welfare service delivery and social protection, and has published various guidelines⁷ on social work in response to COVID-19 and provided training to over 30,000 social service workforce in 23 countries [18].

⁷ Social Service Workforce Safety and Wellbeing During the COVID-19 Response: Recommended actions, COVID-19

The following section introduces initiatives on strengthening social service workforce at the international level, with a focus on GSSWA and UNICEF.

1) Strategic Framework for Strengthening the Social Service Workforce

This framework builds on an earlier framework, which was revised at the Social Service Workforce Conference in South Africa in 2010. The framework has been adopted and widely used by GSSWA, and the mapping and support programs are conducted in line with the framework. The UNICEF guidelines to strengthening the social service workforce are also in line with this framework.

The framework indicates that three aspects of intervention - planning, development and support - are important to strategically address the challenges of strengthening social service workforce. “Planning” includes the formulation of laws and policies, defining types and function of the workforce, and setting human resource policies and data management. “Development” includes education and training systems and educational content, etc. “Support” includes employment and career development, social recognition, etc. It should be noted that social service workforce development in each country depends on country-specific context, including social services and child protection systems, culture, local legislation, labour market.



Figure 2-1 Strategic Framework for Strengthening the Social Service Workforce

2) Mapping and assessment of social service workforce

In developing countries, the provision of social welfare services to vulnerable populations with social problems such as poverty and abuse involves a large number of people, including social workers with professional qualifications, those without qualifications but who have received training, staff of welfare agencies, and local residents who work as volunteers. On the other hand, the reality of the situation has not

Guidance on Remote GBV Services Focusing on Phone-based Case Management and Hotlines, etc.

been sufficiently organized and analyzed, and mapping as an assessment of the situation is first of all important when considering strategies for strengthening social service workforce. In this context, GSSWA and UNICEF are working together to carry out country mapping. To date, the mapping has been carried out in 37 countries, including Southeast Asia, and summarized in reports. In mapping, information is collected and organized according to the framework for social service workforce strengthening. In addition, a leadership group of governments and relevant organizations is formed and involved in the implementation of the mapping, discussing and reviewing the definition of the workforce and the mapping process. This enables stakeholders in each country, including policy makers, to gain a deeper understanding of the current state of the social service workforce in their country and to make more effective policy decisions [20] [21].

3) Development of guidelines

GSSWA, in collaboration with UNICEF, IFSW and others, has developed a range of guidelines on social service workforce. Some of these are as follows [22].

- Social Service Workforce Safety and Wellbeing during the COVID-19 Response (2020)
- Guidance Manual on Strengthening Supervision for the Social Service Workforce (2020)
- Core Concepts and Principles of Effective Case Management & the Case Management Compendium (2018)
- Global Advocacy Toolkit for the Social Service Workforce (2017)

Initiatives by Save the Children on social service workforce strengthening⁸

Save the Children has a long history of supporting countries in strengthening their social service workforce. "A Catalogue of Common Approaches: Delivering our best work for children" also identifies case management as one of the most useful approaches to child protection and welfare [23]. Efforts to build a community-based child protection system include training para-social workers and volunteers to ensure that those in need in the community are identified and referred to appropriate support. In terms of human resource development, Save the Children has started to adopt a competency-based approach, embedding the skills and attitudes required for the job in the job description. They provide a combination of training and on-the-job training to meet the requirements and strengthen competencies specified in the job description, and then offer a certification for completion to those who meet the competencies. In addition to the certifications issued by the Save the Children, a system of granting qualifications in collaboration with CACHE, an external certification body for qualifications, has been incorporated into some training and courses to ensure the quality, impartiality, neutrality and credibility of the certifications. This enables to continue the career as the certifications can also be recognized when working for other organizations.

2.2.2 Aid trends in Southeast Asia

Assistance for strengthening social service workforce in each country surveyed is described in Chapter 3 onwards, but in general, UNICEF has taken the lead in this field. Also, international NGOs such as Save the Children and domestic NGOs provide training for social service workforce in support of child protection and social protection.

⁸ According to the interview with the Save the Children Japan (November 19, 2021)

With regard to the mapping of social service workforce, UNICEF and GSSWA have already conducted mapping surveys of 15 countries in the Asia Pacific region. Under the survey, detailed surveys⁹ were carried out in the countries such as Cambodia, Indonesia, the Philippines, Thailand, and Vietnam. In the report (2019), the findings set out recommendations and priority activities for strengthening social service workforce in the Asia Pacific region [24].

Until recently, the assistance has been focused on strengthening the capacity of individuals such as provision of case management training. However, in recent years, there is an emphasis on support for the mechanisms for strengthening social service workforce, such as the development of plans and regulations based on the framework for strengthening social service workforce and the mapping study. Currently, strategic plans and regulations on social service workforce are being developed in Cambodia and Lao PDR with the support of UNICEF. As for Indonesia, Save the Children has been working with the government and local professional associations since 2010 to develop a regulatory framework for social service workforce, including qualifications for social work professionals [25].

In response to the welfare and social protection of people in the spread of COVID-19, UNICEF and others have stressed the importance of protecting and supporting social service workforce as essential workers. In countries, various support is provided in response to COVID-19 based on previous experience in strengthening social service workforce. In Cambodia, UNICEF had previously supported the deployment of social workers in 5 provinces, and support has extended to deploy social workers in the remaining 20 provinces in response to COVID-19 [26]. In Lao PDR, the United Nations Population Fund (UNFPA) has been working to strengthen the capacity of the Faculty of Social Sciences at the National University of Laos since 2017. As the impact of COVID-19 on women's and young people's mental health became clearer, UNFPA has supported the University to review its curriculum to ensure that social work education includes mental health and psychosocial support [27].

2.3 Trends in human resource development on social work in ASEAN

2.3.1 Framework in ASEAN

(1) Framework related to social welfare

In 2003, ASEAN agreed to aim to realize ASEAN Community by 2015. The ASEAN Community consists of three pillars: the ASEAN Economic Community, the ASEAN Political-Security Community, and the ASEAN Socio-Cultural Community (ASCC). It is the ASCC that covers social welfare. The ASCC Blueprint was also adopted at the 14th ASEAN Summit in 2009, together with the ASEAN Community Roadmap (2009-2015). The ASCC aims to build a social and cultural community around human development with a broad scope¹⁰, including the social welfare sector [28]. Overseeing the various plans

⁹ In addition to the literature review, field surveys (Cambodia, Indonesia and Vietnam), questionnaire surveys of social service workforce and a review of the findings by a national task group of government agencies and universities were conducted. As to Lao PDR and Malaysia, the results of literature review are summarized [24].

¹⁰ In addition to Social Welfare and Development, the areas covered by ASCC include Culture and Arts, Information and Media, Education, Youth, Sports, Gender, Rights of Women and Children, Rural Development and Poverty Eradication, Labour, Civil Service, Environment, Haze, Disaster Management and Humanitarian Assistance and Health.

and programs of the ASCC is the biannual ASEAN Socio-Cultural Community Council (ASCC Council), which has 18 sectoral ministerial bodies and one committee under its jurisdiction. Social welfare is under the jurisdiction of the ASEAN Ministerial Meeting on Social Welfare and Development (AMMSWD) under which the following two bodies have been established [29].

- 1) SOMSWD: ASEAN Senior Officials Meeting on Social Welfare and Development
- 2) ACWC: ASEAN Commission on the Promotion and Protection of the Rights of Women and Children

Of these, SOMSWD is responsible for the ASEAN Social Work Consortium (ASWC), which is described in detail in the next section. The department of the ASEAN Secretariat responsible for SOMSWD is the Poverty Eradication and Gender Division of the Department of Human Development.

Within the framework of the SOMSWD, the ASEAN Plus Three Ministerial Meeting on Social Welfare and Development (AMMSWD +3) and the ASEAN Plus Three Senior Officials Meeting on Social Welfare and Development (SOMSWD +3) were established in 2004 to exchange views with Japan, Korea and China. There is also the ASEAN GO-NGO Forum on Social Welfare and Development that aims to promote cooperation with NGOs (16th meeting to be held in December 2021) [30].

(2) Policy documents

In November 2015, ASEAN 2025: Forging Ahead Together was adopted at the 27th ASEAN Summit in Malaysia. ASEAN 2025 sets out the direction of the ASEAN Community for the next 10 years (2016-2025), comprising the Kuala Lumpur Declaration, the ASEAN Community Vision 2025 and the three Community Blueprints [31]. The social service workforce strengthening is positioned as an initiative towards the realization of the two documents: the ASEAN Community Vision 2025 and the ASCC Blueprint 2025.

- **ASEAN Community Vision 2025 [32]**

The document sets out a vision for the future of the three communities: Political-security, Economic, and Socio-Cultural Communities.

The ASEAN Socio-Cultural Community by 2025 aims to be “one that engages and benefits peoples, and is inclusive, sustainable, resilient, and dynamic”.

- **ASCC Blueprint 2025 [33]**

The document aims to strengthen policies and institutions to improve the lives of all people, including older people, people with disabilities, women and children, through people-centered, people-oriented and environmentally friendly activities, and to achieve resilient and sustainable societies. It has five goals: Engage and Benefits the People, Inclusive, Sustainable, Resilient, and Dynamic. Of these, “Inclusive” is directly linked to social welfare, aiming to promote equitable access to opportunities and to promote and protect the human rights of women, children, young people, older people, people with disabilities, migrant workers and vulnerable groups. It outlines strategic measures for 1) reducing barriers, 2) equitable access for all, and 3) promotion and protection of human rights.

In order to realize the above mentioned ASCC Blueprint 2025, the ASEAN Strategic Framework on Social Welfare and Development has been developed and SOMSWD is working in line with this framework. The 2016-2020 Strategic Framework organizes the key result areas and strategic measures of the ASCC Blueprint 2025 in the categories of “older persons”, “children”, “persons with disabilities” and “other priority areas”, and presents the specific activities associated with them. With regard to social service workforce, “Support the implementation of the Work Plan of ASWC” is listed as an activity under “Other priority areas”, and the country in charge is the Chair of the ASWC, and ASEAN Plus Three is mentioned as a possible partner [34]. The Strategic Framework 2021-2025 has not been published as of January 2022.

(3) Other related documents

The most recent document related to strengthening social service workforce is the Joint Statement of The ASEAN Ministerial Meeting on Social Welfare and Development Mitigating Impacts of COVID-19 on Vulnerable Groups in ASEAN, issued by AMMSWD in November 2020.

The document outlines seven actions that ASEAN countries should take to limit the impact of COVID-19, facilitate rapid recovery and strengthen the resilience of poor and vulnerable groups. One of these relates to social work, stating that to “secure the health and safety of social workers at the forefront of pandemic response at all level. Allot sufficient public expenditure that would warrant the continuity of social welfare, social safety net and social protection delivery”.

2.3.2 Overview of initiatives to strengthen social service workforce ASEAN

This section provides an overview of the ASEAN initiatives for social service workforce strengthening, and then outlines the “Ha Noi Declaration on Strengthening Social Work Towards a Cohesive and Responsive ASEAN Community” (hereinafter referred to as the “Ha Noi Declaration”), which was approved in 2020, and the Road Map for implementing the commitments of the Declaration. The Road Map sets out the next 10 years of efforts to strengthen social work in the region, and ASEAN member states and related organizations will take concrete actions based on this Road Map.

(1) ASEAN initiatives for social service workforce strengthening

Efforts to strengthen social work and social service workforce in the ASEAN region have been active since the mid-2000s, as the focus on human security has increased in the move towards the realization of the ASCC. Through ASWC, established in 2010 under the jurisdiction of SOMSWD, government officials, social work practitioners and educators from ASEAN countries have gathered to discuss and work towards strengthening and raising awareness of social service workforce in the region. These efforts have been facilitated and supported by the UNICEF, which continues to provide technical and financial assistance.

The impetus for the establishment of ASWC was the ASEAN training of social work practitioners and educators in the Philippines in 2005. Subsequently, at the 4th SOMSWD in December 2006, it was decided that the Philippines and Thailand would jointly implement a project to establish the ASWC. A preparatory workshop for the establishment of the ASWC was held in the Philippines in August 2008 and the resolution of this preparatory workshop was approved at the 5th SOMSWD. And in the ASCC Blueprint (2009-2015) adopted at the 14th ASEAN Summit in 2009, it was indicated that an ASEAN network of social workers

should be set up by 2015 and that the ASWC should be established. In response, the ASWC was launched at the 6th SOMSWD in 2010 [35]. The ASWC aims to promote the recognition and development of the social work profession within the ASEAN region, and serves as a mechanism to strengthen the capacity and collaboration of relevant institutions and to share knowledge and resources.

In the course of ASWC's activities, the need for a training center to strengthen social service workforce in the ASEAN region was recognized and the establishment of the ASEAN Training Centre for Social Work and Social Welfare (ATCSW) was indicated in ASWC's Plan of Action 2016-2020¹¹. Subsequently, at the

initiative of the Thai government, the Centre was inaugurated at the 35th ASEAN Summit in Bangkok in November 2019 and started its activities in October 2020. ATCSW is expected to serve as a platform to promote and facilitate understanding of social work as a profession and to provide quality training and capacity building opportunities and strengthen cooperation among relevant institutions in the region [36].

Moreover, as it was recognized that strengthening social service workforce is important in achieving the goals of the relevant ASEAN policy documents, including the ASCC Blueprint 2025, adaptation of declaration on the workforce strengthening was included in the ASWC Work Plan 2016-2020 [37]. In response, a kick-off regional workshop for the development of the declaration was held in Vietnam in 2019. The workshop was chaired by the Government of Vietnam, with technical and financial support from UNICEF and technical assistance from the GSSWA. A draft declaration was developed in the workshop and the Ha Noi Declaration was adopted at the 37th ASEAN Summit in November 2020 [38]. The Declaration is the first regional framework to promote the professionalization of social work and its expansion within ASEAN [39].

The Ha Noi Declaration states that, in collaboration with relevant agencies, a Road Map for implementing the content of the Declaration will be developed and that progress will be monitored and reported. This Road Map was reviewed and approved at the 10th Annual Meeting of the ASWC in September 2021 (chaired by Vietnam), and adopted at the 38th ASEAN Summit in Brunei in October 2021.

It should be noted that UNICEF has played a central role in supporting the above series of activities, and the Ha Noi Declaration and Road Map reflect the findings of the "The Social Service Workforce in the East and Pacific Region: Multi-Country Review" published by the UNICEF and GSSWA in 2019.



Source: Prepared by the Survey Team

Figure 2-2 ASEAN initiatives for social service workforce strengthening

¹¹ ASEAN Social Work Consortium Work Plan 2016-2020 and Beyond

(2) Ha Noi Declaration on Strengthening Social Work for Cohesive and Responsive ASEAN Community

The Ha Noi Declaration lists 11 commitments to promote social work and strengthen its role as a catalyst in realizing a people-centered, people-oriented and inclusive ASEAN Community. A summary of the commitments is shown in the table below [38].

Table 2-1 11 commitments of the Ha Noi Declaration

<ol style="list-style-type: none">1. Develop and strengthen legislation and policies on social work2. Develop a strategic plan for the progressive strengthening of social work3. Adopt, standardize, and strengthen accreditation, certification, registration and licensing systems for social workers and para-social workers4. Enhance interagency coordination at the national level, and cross-sectoral collaboration at the ASEAN level5. Promote the establishment of national associations or councils of social workers6. Promote the retention of social workers through the provision of career progression opportunities and professional development7. Allocate adequate resources to strengthen social work,8. Develop and enhance regional networks of social workers and regional platforms including but not limited to the ASEAN Social Work Consortium ASWC9. Work towards regional professional recognition of social work, render necessary assistance to narrow social work education gaps among ASEAN Member States10. At the national and regional level, endeavor to develop strategies to enhance positive public perception of social work and social workers11. Undertake cross-sectoral and inter-pillar cooperation across the ASEAN Community, as well as engage ASEAN's partners including the ASEAN Plus Three Countries
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Source: Prepared by the Survey Team with reference to [38]

(3) ASEAN Road Map for the Implementation of the Hanoi Declaration on Strengthening Social Work for Cohesive and Responsive ASEAN Community

The Road Map aims to provide practical guidance for ASEAN member states to implement their commitments to the Ha Noi Declaration, a framework for regional cooperation, and indicators for monitoring the implementation of the Declaration. ASEAN member states and relevant organizations, including ASWC and ATCSW, will take concrete actions based on this Road Map.

The Road Map covers a 10-year period from 2021 to 2030, with seven priority areas and a set of activities at national and regional level in each area. Each country is expected to examine the content and implementation schedule of each activity, and to identify cooperation partners as the development status of social work varies from country to country.

Annex 1 of the Road Map summarizes the priority activities to be undertaken for the first five years. A mid-term evaluation will be carried out in 2025 and activities for the second half of the five-year period will be considered.

Seven priority areas are shown in Table 2-2.

Table 2-2 Seven priority areas in the Road Map

1.	Establishing and Strengthening the Legal and Policy Framework for Social Work
2.	Expanding and Strengthening Education and Regulation
3.	National Councils and Associations of Social Workers
4.	Increasing Professional Recognition, Development and Support
5.	Enhancing National, Regional and International Collaboration
6.	Increasing Resource Allocation to the Social Welfare System and for Social Work
7.	Developing Strategies to Enhance Positive Public Perception of Social Work

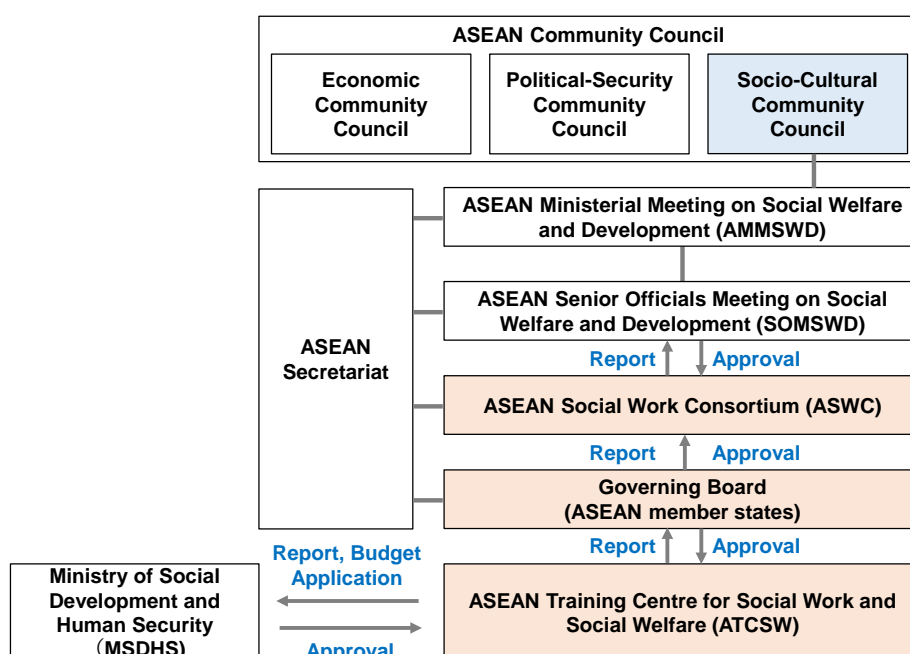
Source: Prepared by the Survey Team with reference to [39]

2.3.3 Initiatives by ASEAN Social Work Consortium (ASWC) and ASEAN Training Centre for Social Work and Social Welfare (ATCSW)

ATCSW is subordinate to ASWC, therefore ASWC’s policies and deliberations are tied to ATCSW’s activities. The two organizations are to take concrete actions based on the Road Map. This section summarizes the organizational structure in ASEAN for social service workforce strengthening, the outline and activities of each organization, and describes the activities that each organization is responsible for as indicated in the Road Map.

(1) Organizational structure in ASEAN

The organizational structure in ASEAN, including ASWC and ATCSW, is shown in Figure 2-3. As described in detail in the next section, ATCSW is currently funded by the Thai government and needs to have approval for its activities and budget from both the Ministry of Social Development and Human Security (MSDHS) and the ATCSW Governing Board, which consists of ASWC country coordinators.



Source: Prepared by the Survey Team

Figure 2-3 Organizational structure in ASEAN for social service workforce strengthening

(2) ASEAN Social Work Consortium (ASWC)

1) Vision and purpose

ASWC's vision is to "strengthen solidarity among social work practitioners, educators and schools of social work" and aims to promote responsive and excellent social work education in the ASEAN region, provide support of policy makers to strengthen the role of social work in social development, work for the formal recognition and enhancement of the status of the social work profession, and promote regional and international networking, etc.

2) Management structure [40]

The lead country is rotated every two years among ASEAN member states, and the secretariat come from the same country as the lead and assist in the tasks and activities of ASWC (no full-time staff is assigned as the ASWC secretariat). So far, the Philippines, Thailand, Indonesia, Malaysia, and Vietnam have taken the role as the lead country, and the Philippines will be in charge again from 2022¹². The state coordinators of the ASWC are the SOMSWD focal point of each ASEAN member states. The lead country is mainly responsible for preparing and submitting the annual report to the SOMSWD, coordinating with the ASEAN Secretariat, and managing the implementation of the annual conference. In the implementation of the annual conference, the lead country is responsible for preparing the agenda, arranging the venue, coordinating with the ASEAN Secretariat, and bearing the costs including the venue.

Membership is open to organizations or individuals representing social work practitioners, educators and schools of social work from ASEAN member states, and SOMSWD focal point is responsible for the membership registration and database of each country.

The operating budget is supposed to be raised from membership fees and donations, but not been able to confirm the actual annual budget in this Survey. It was planned that each country would bear 100 USD each for the operation and maintenance of the website, but currently it is being operated by the Philippine government.

3) Plan of activities

Activities have been carried out based on the "Work Plan 2010-2014" and "Work Plan 2016-2020". The latest "Work Plan 2021-2025" was finalized at the ASWC 10th ASWC Conference held on-line in September 2021 and is now pending approval by the SOMSWD¹³.

The work plan indicates the lead and supporting countries that are responsible for implementation of each activity, and the lead countries are mainly the Philippines, Thailand, and Indonesia. The lead country coordinates the personnel and funds needed to implement each activity, but the funding largely depends on support from development partners.

The Work Plan 2011-2014 sets out specific activities in the key areas of "capacity building", "knowledge development and management", and "strengthening regional and national social work and social welfare institutions".

¹² According to the interview with ASEAN Secretariate (December 21, 2021)

¹³ Ibid.

The Work Plan 2016-2020 has into four priority areas: “capacity building for international social work training”, “promote better knowledge of social work in ASEAN”, “knowledge development and management”, and “strengthening regional and national social work and social welfare institutions”.

ASWC Work Plan 2016-2020 is summarized in Table 2-3. According to the records of the annual conferences posted on the website, working groups have been established for each priority area and deliberations and activities are underway [41]. The establishment of ATCSW is included in the “capacity building for international social work training”.

Table 2-3 Outline of ASWC Work Plan 2016-2020

Priority Area	Activity	Lead country*
Capacity building for international social work training	<ol style="list-style-type: none"> 1. Create a pool of experts 2. Establishment of ATCSW 3. Implement ASEAN Declaration on Strengthening Social Protection 4. Compile rights-based training manuals 	<ol style="list-style-type: none"> 1. Philippines 2. Thailand**¹⁴ 3. - 4. -
Promote better knowledge of social work in ASEAN	<ol style="list-style-type: none"> 1. Submit the research about existing of social welfare and social work practices into the website 2. Conduct action based research and best practices in terms of social work and welfare 3. Submit any training modules and materials related to social work 4. Develop social work guideline of practice on child abuse 	<ol style="list-style-type: none"> 1. Philippines 2. All ASEAN member states 3. Thailand 4. -
Knowledge development and management	<ol style="list-style-type: none"> 1. Develop an ASEAN social work code of ethics (done in 2015) 2. Develop minimum standard/core curriculum and core competence for social workers in ASEAN 3. Establish an accreditation system for schools of social work towards eventual mutual recognition of academic credentials 4. Publish ASEAN Social Work Journal 	<ol style="list-style-type: none"> 1. Thailand 2. Philippines 3. - 4. Indonesia
Strengthening regional and national social work and social welfare institutions	<ol style="list-style-type: none"> 1. Promote the establishment of national professional social work councils, schools and associations in all ASEAN member states 2. Develop a website as online database 3. Promote the establishment of national career development plan for social workers 4. Promote the establishment of Social Work Act/Bill 	<ol style="list-style-type: none"> 1. Philippines, Indonesia, Thailand, Malaysia 2. - 3. All ASEAN member states 4. All ASEAN member states

*If lead country is not specifically mentioned in the plan, it is indicated as "-"

Source: Prepared by the Survey Team with reference to [42]

4) Past activities

In addition to the aforementioned efforts related to the Ha Noi Declaration and the Road Map, the following activities have been carried out.

¹⁴ The original text mentions “Indonesia, Malaysia, Thailand, Vietnam, and Singapore”, but the same is mentioned in the supporting countries, which seems to be a typographical error. Thailand is practically playing the role as the lead country.

- **Annual Conference**

The first annual conference was held in the Philippines in 2011, and every year since, a total of 10 conferences have been held. Knowledge management is promoted through presentations and discussions on social work initiatives and experience in each country. In addition, the progress of the work plan is monitored and evaluated.

- **Publish ASEAN Social Work Journal**

As an activity included in the priority area of “knowledge development and management” in the work plan, Indonesia has been assigned as the lead country, and the ASEAN Social Work Journal has been published by the Indonesian Social Work Consortium. It publishes research and good practices in the field of social work in the ASEAN region. Vol. 9 has been published so far.

- **Others**

In addition to the above, a pool of professionals in the region has been developed, reference information been posted on the website, the ASEAN Social Work Code of Ethics being developed [43], and minimum standards for social work education and the content of various training programs have being considered.

(3) ASEAN Training Centre for Social Work and Social Welfare (ATCSW)¹⁵

1) Vision and purpose

ATCSW’s vision is “to being a leading training center for social work in ASEAN” and it has the following four objectives.

- To develop and provide training courses and curriculum on social work and social welfare for technical and professional skills for the development of social work and social welfare in ASEAN;
- To provide technical and professional skills, knowledge of social work and social welfare in ASEAN;
- To promote and develop quality of trainings and skill development; and
- To enhance collaboration amongst relevant stakeholders in training of social work and social welfare among ASEAN Member States.

2) Management structure

- **Governing Board**

ATCSW is governed by the Governing Board, which consists of ASWC national coordinators and is accountable for the operation of ATCSW. The chair of the Governing Board is the lead country of ASWC, and the Executive Director of ATCSW plays a role as its Secretariat. According to the Terms of Reference of the Centre, the Governing Board is supposed to meet at least once a year to discuss and supervise policies and activities related to the operation of ATCSW, approve work plans including the budget, and manage the budget. The Board then report on ATCSW at the annual ASWC conference.

The Board has met once, in January 2021, under the chairmanship of Vietnam, in which the activities from its establishment to 2021 were confirmed, and the draft work plan for 2021 was approved.

¹⁵ Based on the ATCSW website (<http://atcsw-thailand.m-society.go.th/en/sample-page/>), ATCSW document “JICA-ATCSW Partnership: Rooms for Future Cooperation” (May 2021), materials presented by ATCSW at the workshop of this Survey, field survey in Thailand in December 2021, and on-line interview with the Executive Director in January 2022.

- **Decision-making**

As mentioned earlier, while the Governing Board is responsible for making decisions regarding the ATCSW, the Centre needs to obtain approval from the MSDHS for the work plan and budget as well since the Centre is attached to the Foreign Affairs Division Office of the Permanent Secretary of the MSDHS. The work plan and budget approved by the MSDHS are to be reported to the Governing Board for formal approval. The MSDHS Work Plan for FY2021 includes the activities of ATCSW, stating that “ATCSW to be a center for social worker training in the ASEAN region.

Other than the budget allocated by MSDHS and the activities associated with it, ATCSW has an authority to make decisions and implement them. For example, activities supported by development partners, and hiring new staff with funds outside the MSDHS, can be done under the authority of the ATCSW Executive Director.

- **Budget and funding**

The Terms of Reference of ATCSW states that “Thai government will bear the establishment and initial operating costs of ATCSW”, and “to ensure effective collaboration and financial sustainability, subsequent operating costs will come from various revenue streams of ATCSW and voluntary contributions of ASEAN member states and ASEAN dialogue partners within the region and beyond”. At the time of this Survey, all the funds for the operation and activities of ATCSW are borne by the Thai government. It is to be noted that a consultant hired by UNICEF was assigned as the first Executive Director to ensure the smooth launch of the Centre (labour cost was covered by UNICEF from October 2020 for four months).

The procedures for the application and execution of the budget allocated by the MSDHS are to be carried out in accordance with the Ministry’s system. The ATCSW submits its draft budget and work plan for the next fiscal year to MSDHS around November to December every year, and the budget application is made as part of MSDHS budget (the budget for FY2024 (October 2023-September 2024) will be submitted in November-December 2022).

- **Executive Director and supporting staff**

As of December 2021, ATCSW has an Executive Director and three supporting staff members (one of whom is a government employee and two are contractors) working full-time, in addition to two interns. The supporting staff have reporting obligations to the Executive Director. The first Executive Director was Anothai Udomslip, who was hired by UNICEF and served from October 2020 to September 2021, and the current Executive Director is Wanna Suksriboonamphai, who arrived in November 2021.

The Centre plans to expand to four departments (Administration and General Affairs, Technical and Research, Foreign Cooperation and Training, and Information and Communication Technology) with seven staff members by 2025. However, according to the interview with the Executive Director, it was assumed that it would be difficult to allocate additional staff with the budget allocated by MSDHS, and other funding sources, including support from development partners, would need to be secured. If the employment is not funded by the MSDHS budget, additional staffing can be assigned under the authority of the Executive Director.

● **Office and training center**

The ATCSW office is located in the Foreign Affairs Division of MSDHS, and the training center is located in Chonburi Province, about a two-hour drive from Bangkok. The training center is owned by the MSDHS and was previously used by the Department of Older Persons to display models of facilities for older people and to conduct training. The training center is maintained and managed by MSDHS. The center has 50 rooms for lodging, a main hall with a capacity of about 300 people, and three conference rooms of about 40 people. Since the training center is owned by MSDHS, ATCSW needs to bear the cost of using the facility for lodging and providing meals when ATCSW conducts face-to-face training.

3) Work Plan

ATCSW has just launched in October 2020 and has been focusing on preparing for the delivery of the training program.

The main activities outlined in the Work Plan for FY2021 (October 2020-September 2021), as revised in July 2021, are as follows [44].

- Training needs assessment
- Risk assessment and management
- Conduct of training courses, seminars, workshops (on-line)
- Check other courses conducted by individual ASEAN member states
- Mapping of stakeholders and partners
- Seeking potential/emerging supporters and co-hosts of training courses
- Strategic communication plan and implementation

The Work Plan for FY2022 (October 2021 to September 2022) has been continuously reviewed along with the budget since the current Executive Director took office. The following is a tentative list of activities for FY2022 as presented at the workshop of this Survey.

- Form team, Enhancing public communications through website/Facebook/LinkedIn/Twitter, Knowledge sharing about courses across the world (November 2021~)
- Sub-regional forum, Training Assessment (January 2022~)
- Regional symposium (March 2022)
- Short course delivery (1-2 days) (May 2022~)
- Longer course delivery (August 2022~)
- Secure more funding for FY2023(September 2022~)

4) Past activities

The following is a summary of ATCSW's major activities to date, based on publicly available information¹⁶ and interviews. While activities have been restricted due to the spread of COVID-19, ATCSW has been meeting with various related organizations and development partners to explore future collaboration and

¹⁶ Bimonthly Report (Feb-March, Apr-May, Jun-Jul 2021) and Facebook

development of activities, as well as conducting on-line activities. The Centre is also working to improve the provision of information through Facebook and our website.

• Curriculum development for training program

The ATCSW plans to develop the following six training curriculum. The direction and a framework of the curriculum is based on the content discussed in the working group established in Thailand for the establishment of ATCSW. The training provided by the ATCSW is not meant to duplicate, but to complement, the training provided in ASEAN member states.

1. Global Social Work and Social Welfare
2. Social Protection
3. Protection of Children in the Context of Migration
4. Social Work and Anti-Human Trafficking
5. Capacity Building Re-skill/Up-skill/Multi-skill
6. Special Course on Demand Live online

Table 2-4 shows the proposed training modules for “1” and “2” as presented in the Report on ATCSW Work Plan 2021, developed by the former Executive Director in February 2021. Both modules are proposed to consist of a total of 30 hours. The proposal was presented at the ATCSW Governing Board meeting in January 2021, and it was advised that it should be finalized based on the results of the training needs assessment [45].

Table 2-4 Proposed training module of Global Social Work and Social Welfare and Social Protection

Global Social Work and Social Welfare	Social Protection
<ul style="list-style-type: none"> • Global Social Work and Social Welfare: Concepts and Theories • Trends of Global Social Work and Social Welfare Development • Social Change: New World Order, Non-traditional Security Threats, and New Normal • Social Policy and International Convention and Commitment on Public Issues in the Global Community such as Social Inequality, Human Rights, Gender, and Domestic Violence • Roles and Cooperation of World and International Social Work and Social Welfare Organizations • Roles of ASEAN on Social Work and Social Welfare in the Region • Field Visit 	<ul style="list-style-type: none"> • Introduction of Social Protection • Legal Aspects of Social Protection • Selection and Identification (S&I) • Administration of Social Work Organizations • Coordination of Social Work Organizations • Monitoring and Evaluation (M&E) • Management of Information Systems • Financial Management • Study Visit

Source: Prepared by the Survey Team with reference to [45]

The curriculum is drafted by a steering committee consisting of related organizations and experts from universities, etc., to be formed for each training course, and is to be finalized after trial and evaluation. For Global Social Work and Social Welfare, Thammasat University is taking the lead in developing the curriculum, which will be tried out after August 2022. Protection of Children in the Context of Migration is being prepared by UNICEF on an outsourced basis and is expected to be completed around June 2022. For the remaining courses, efforts will be made under cooperation with universities and development

partners, etc. The specific methods of training delivery (selection of participants and dissemination of the curriculum) is currently under consideration.

- **Training needs assessment**

As mentioned, there is an emphasis on training needs assessment to finalize the training curriculum. To date, focus group discussions were held with stakeholders and organizations in Thailand and the Philippines, respectively, in April 2021. The assessment for Myanmar will be conducted in February or March 2022, and the remaining nine countries will be assessed sequentially from March to May.

- **Others**

Pilot training

A pilot training titled “Public Communication Skills for Social Service Workforce” was conducted from June 28-30, 2021, with the objective of evaluating the effectiveness of training techniques, including training methods and arrangements, for the delivery of training programs. The training was conducted in an on-line format and was primarily attended by MSDHS staff.

Sub-regional Forum

A sub-regional forum titled “Social Work from Inter-disciplinary Perspectives and Integrated Approaches” was held on January 10, 2022. The forum was conducted both face-to-face and on-line, and was attended by NGOs, university officials, and social work practitioners.

Publication

Efforts are also being made to improve the information sharing through Facebook and the website. As part of the information sharing, a list of social work trainings that can be taken on-line is posted on the website¹⁷.

5) Challenges and future directions

The current challenges and future directions identified during the field survey in Thailand in December 2021 are as follows.

- In order for the Centre to have more flexibility in the implementation of activities, it is essential to expand cooperation with partner organizations, such as international organizations, NGOs, and companies, and to secure various resources (including not only funds but also technical assistance and provision of goods).
- The organizational structure is not strong enough in terms of the number of people and expertise required for the activities to be undertaken, and needs to be strengthened in the future.
- In order to promote activities of the ATCSW, increased recognition of the Centre is essential. The Centre plans to strengthen its public relations by holding symposiums and other events.
- Initially, ATCSW envisioned providing face-to-face training programs at the training center in Chonburi Province equipped with accommodations and other facilities. On the other hand, there is a need to provide training programs on-line due to the impact of COVID-19 and the limited financial

¹⁷ <http://atcsw-thailand.m-society.go.th/en/courses-knowledge/>

resources. Further consideration is required how to conduct effective training on-line, especially how to teach social work skills.

- In order to strengthen social service workforce, training qualified academic educators is critical which needs to be considered as ATCSW’s future activity.

(4) Activities of each organization indicated in the Road Map

Both ASWC and ATCSW are expected to play an important role in operationalizing the Road Map. In addition to the implementation of the activities indicated as the implementing body, ASWC is to follow up the national commitments in the ASWC Work Plan 2021-2025 and the Road Map, and share the information on the progress during the annual ASWC Conference. As for ATCSW, it is expected to play a pivotal role in operationalizing the Road Map by building the capacity of social workers and para professionals and to further enhance collaboration amongst relevant stakeholders in training of social work and social welfare among ASEAN member states.

There are a number of activities in the Road Map for which ASWC and ACTSW are the implementing bodies. Table 2-5 lists some of the activities in which both organizations play a major role.

Table 2-5 Activities in which ASWC and ACTSW play a major role in the Road Map

	Priority Area	Priority Actions
2.4	Adopt regional qualification standards in social work education to ensure the high-quality of training programs	<ul style="list-style-type: none"> • Develop regional qualification standards for social work and social service workforce education. • Develop a unified professional standard for teaching/faculty staff • Develop/finalize the ASEAN Core Curriculum for Social Work Education
2.5	Facilitate the availability of education and training opportunities at regional and international level including through the ATCSW and ASWC	<ul style="list-style-type: none"> • Undertake training needs assessment for social work • Develop and deliver general and specialized training programs/certified courses • Standardize the curriculum developed • Develop regional learning exchange opportunities • Develop and implement a regional program to promote raised academic standards in social work • Develop a concept note and plan for ATCSW to serve as a regional assessment center in support of a framework for certification for workers completing competency-based training
4.8	Recognize and facilitate social work as a profession across ASEAN countries, including through promotion of the Mutual Recognition Arrangement (MRA)	<ul style="list-style-type: none"> • Develop a draft strategy and hold a consultation(s) on the steps and actions required for social work to be recognized under an MRA • Develop a plan and hold a consultation on the establishment of a framework and mechanism for mutual recognition of qualifications and licensing for social work • Develop a concept note/plan and hold a consultation on the establishment of a regional accreditation system for schools of social work to support mutual recognition of qualifications • Develop and adopt a regional competency framework for social work and a framework to support assessment of competencies of social workers, para-professional and volunteers
5.5	Strengthen and improve coordination between regional cooperation mechanisms	<ul style="list-style-type: none"> • Convene an intersectoral regional conference on strengthening social work and the implementation of the Road Map • Develop events and create platforms for learning, exchange, collaboration and coordination across sectors, government and NGOs • Undertake an assessment of the reach and impact of the ASEAN Social Work Journal • Revitalize and maintain the ASEAN Social Work website to have up to

		date courses, social work tools, resources, research and opportunities.
5.6	Expand collaboration and coordination with partners	<ul style="list-style-type: none"> • Convene a partners forum on collaboration on strengthening social work, including social work training and implementing the Road Map with ASWC and ATCSW
7.2	Develop and implement a strategy to support region wide recognition of value social work	<ul style="list-style-type: none"> • Develop a strategy to support region wide recognition of social work and social workers • Build on the work of the ASEAN Social Work Consortium, Journal and Training Centre, and on the ASEAN Social Work website to strengthen solidarity and cooperation among social workers • Continue and expand the regional campaign to promote positive perceptions of social work and social workers with regional partners • Initiate the celebration of an ASEAN Day of Social Work • Run annual positive public perceptions campaigns linked with World Social Work Day (March) or ASEAN Day of Social Work
<p>In addition to the above, those that include ASWC as an implementing agency are as follows.</p> <ul style="list-style-type: none"> • Develop a regional guidance on essential social services for groups in vulnerable situations to support ASEAN member states (1.7) • Develop sectoral guidance on the role of social workers and the social service workforce in key sectors, including social welfare, health, education, disaster risk reduction, justice sectors and other priority sectors (1.8) • Develop a regional guidance note on the minimum ratio of social workers per unit of population (1.9) 		

Source: Prepared by the Survey Team with reference to [39]

According to the interview with UNICEF East Asia and Pacific Regional Office, it is recognized that the feasibility of Mutual Recognition Arrangement (MRA) in the field of social work needs to be continued to be examined.

(5) Collaboration and support from development partners for the Road Map¹⁸

UNICEF intends to support the implementation of the Road Map over the next 10 years. In addition, UNFPA, UN Women, Save the Children, International Social Service, Humanitarian Inclusion, World Vision, and Child Fund have expressed their interest in collaborating for the Road Map, and coordination will be made shortly. Although there is no formal donor coordination meeting, the ASEAN Secretariat plays a central role in encouraging aid agencies and NGOs to participate in related meetings where aid coordination is carried out.

In April 2022, a regional meeting of ASWC will be hosted by Vietnam with the support of UNICEF. The meeting will be attended by the ten ASEAN member states, as well as the above-mentioned aid agencies and NGOs, and will discuss concrete ways to functionalize the Road Map and coordinate development partners for technical and financial support.

In the past, UNICEF Thailand Office supported the personnel costs of the first Executive Director of ATCSW, and the UNICEF East Asia and Pacific Regional Office supported the organization of the regional meeting of the ASWC in 2021. Within the framework of the Road Map, UNICEF will continue to provide support to ASEAN including ASWC and ATCSW, and as for ATCSW, the future support will be discussed based on the contents of the next (FY2023) Work Plan of the Centre. UNICEF is particularly interested in supporting the development and implementation of a competency framework and competency-based training programs, in which Save the Children has also shown their interest.

¹⁸ According to the interview with the UNICEF East Asia & Pacific Regional Office (November 19, 2021)

Chapter 3 Current Status of Social Service Workforce: Thailand

3.1 Overview of social welfare sector

3.1.1 Policies, systems and challenges for social welfare

(1) Introduction

In Thailand, charity based on Buddhist philosophy has been practiced since the ancient times. From this practice, it is considered that the history of social welfare based on Buddhist teaching can be traced back to centuries ago. To this date, Buddhist temples have been serving as places of gathering, counselling and entertainment, as well as hospitals, schools and community centers. They also take part in community welfare activities such as support to the elderly without relatives [1] [2].

The Thai Red Cross Society is considered to be the first social welfare organization. It was established in 1893 under the name of “Red Unalom Society”. It undertook relief activities for those affected by the conflict between Thailand and French over French Indochina. After the end of the conflict, the Society continued social welfare activities under the patronage of the royal family. It changed its name to the current one in 1910 [1] [3] [4]. Since that time, social welfare activities by private organizations have continuously been expanding, and activities in various fields have been carried out [1].

Concerning social welfare work by the Thai government, it used to be under the Ministry of Interior, and the Department of Public Welfare was created in the Ministry in 1940. At the time of the administrative reform, the Department was transferred to the Ministry of Social Development and Human Security (MSDHS) in 2002 (to be the current Department of Social Development and Welfare, and thus, the main agency for social welfare under the Thai government was changed from the Ministry of Interior to MSDHS¹ [1].

In the meantime, the family and community have traditionally been occupying central places in Thailand, and the bond within families and with neighbors remain strong. In addition, many children are raised by grandparents for such reasons as the parents’ working away from home. Therefore, sense of respect for the elders is nurtured since early childhood. With this background, the care of the elderly is generally done in families, and mutual help among neighbors and within communities is commonplace [1] [2].

A research report published in late 1970’s pointed out that in Thai society, the Buddhist doctrine of the wealthy provides charity to the indigent was rooted, that familism was traditionally strong, that the sense of mutual help among the relatives was high, and thus the importance of social welfare administration in Thailand had not been much recognized until that time. It nevertheless pointed out that the need for social welfare by the public administration had been increasing with the industrialization since the 1950s [3].

Thailand has achieved longstanding economic growth and outstanding poverty reduction, and it is referred to as a success case of development. However, disparities remain in society such as regional disparities, and its mitigation remains to be a main policy issue [5] [6] . In addition, Thailand faces numerous other issues, including responses to accelerating ageing, strengthening of international competitiveness through

¹ Interview of the Community Development Department (CDD) (12 January 2022).

internationally recognizable human resources and improvement of labour productivity, responses to cross-border crimes as well as internet dependency and rising risk of pertinent crimes, in addition to disasters which are becoming increasingly serious [5] [7] [8] [9] [10].

Thailand aims to be a high income country by 2037, and stable economic growth and social equality constitute the core of its policies [5] [9] . Social service measures in Thailand are highly evaluated internationally, with its scope and targets becoming increasingly comprehensive year by year. However, the quality and standards among services remain uneven. The access to these services also varies among different regions and different groups of society. Hence the fair provision of various social services has been increasing [5] [7] [11] [12]. It is with this background that various public and private organizations undertake social welfare work and activities in their respective fields.

(2) Policies: laws, regulations and national policies

1) Social welfare in the Constitution of the Kingdom of Thailand

In the Constitution of the Kingdom of Thailand of 2017, the Section 27 refers to indiscriminatory equality before the law. It stipulates the State determines that measures in order to eliminate an obstacle to or to promote a person's ability to exercise their rights or liberties on the same basis as other persons or to protect or facilitate children, women, the elderly, persons with disabilities or underprivileged persons shall not be deemed as unjust discrimination (on the grounds of differences in origin, race, language, gender, age, disability, physical or health condition, personal status, economic and social standing, religious belief, education, or political view which is not contrary to the provisions of the Constitution or on any other grounds). The Section 43 refers to the establishment of community welfare system as one of the rights of the community. It stipulates that the rights shall also include the right to collaborate with a local administrative organization or the State to carry out such act. The Section 54 stipulates that the State early shall ensure that young children receive opportunities and care for development, and undertake to provide persons with insufficient means with financial support for educational expenses of children. The Section 71 stipulates that the State should strengthen the family unit, which is an important basic element of society, provide appropriate accommodation, promote and develop the enhancement of health in order to enable people to have good health and strong mind. It also stipulates that the State should provide assistance to children, youth, women, the elderly, persons with disabilities, indigent persons and underprivileged persons to be able to have a quality living, and shall protect such persons from violence or unfair treatment, as well as provide treatment, rehabilitation and remedies to such injured persons. The Section 74 stipulates that the State should protect labour to ensure safety and vocational hygiene, and receive income, welfare, social security and other benefits [13].

2) Social Welfare in the national strategy and plan

2) -1. National 20-year Strategy

The 20-year National Development Strategy (2018-2037) is the first long-term development strategy of Thailand. It upholds national strategies on security, competitiveness enhancement, human capital development, social equity, eco-friendly growth and public sector rebalancing and development [5]. Of these strategies, those with close reference to social welfare are the third strategy which emphasizes lifelong

human resource development and sustainable welfare, and the fourth strategy which stipulates the materialization of social inclusion and equality through the consolidation of welfare services with fair access ensured, distribution of wealth, social empowerment and support to organization, and community capacity building² [5]. The 20-year Strategy also refers to fostering the amiability of society for children and the elderly, enhancing the roles of the community and the local administrative organizations for the strengthening of the family system. It also aims at preventing the transgenerational poverty by accurately identifying the people in need for social welfare and protection (low income groups, people under poverty and those who are subject to recurrent discrimination) based on the targeted social investment [5].

2) -2. National Economic and Social Development Plan

The National Economic and Social Development Plan (NESDP) is a main national development plan of Thailand. The first NESDP was formulated in 1961. Since the 8th Plan (1997-2001), people-centered development based on the philosophy of Sufficiency Economy³ has been at the core. While the 12th Plan was devised to cover the period until 2021, it was extended by one year to 2022, in order for the consistency with the last year of the 20-year National Development Strategy (2037)⁴.

The 12th Plan upholds such elements as the promotion of values based on social norms, the upgrading of skills necessary for the quality of life, and the enhancement of lifelong well-being. The first strategy on the strengthening of human capital refers to workforce on social welfare. The second strategy for the realization of just society and reduction of inequality includes, among the activities for the realization, the encouragement of welfare activities by the community itself. In terms of the consolidation of infrastructure, it places emphasis on the consideration for the needs of society as well as the needs of individuals including children, women, persons with disabilities, the elderly and those in disadvantageous positions⁵ [8].

At the time of This Thai Survey⁶ the 13th Plan is at the drafting stage. It is expected to be submitted to the Cabinet for approval in March to April 2022, and announced in September. With regard to social welfare, continuously from the 12th Plan, the 13th Plan emphasizes support to the elderly and young children and, in this connection, the role of caregivers⁷. Among the development dimensions indicated in the Plan, the second dimension concerning socio-economic opportunities and equality stresses the expansion of opportunities for impoverished households to be relieved from transgenerational poverty, and the consolidation of social protection to facilitate the livelihood of all citizens. It also attaches importance to the provision of highly skilled human resources and materialization of continuous education, of which targets include the workforce concerned with social welfare. In addition, the first dimension stipulates that Thailand becomes a main country regarding high quality health care, that fair access to health services is

² Written response from the Department of Older Persons (DOP) (received on 20 January 2022).

³ Sufficiency Economy is a concept proposed by the former King Rama IX. With the self-sufficiency as the basis, it underlines the balanced development among people, society, economy and environmental resources [103].

⁴ Interview of the Office of the National Economic and Social Development Board (NESDC) (17 January 2022).

⁵ Written response from the Department of Older Persons (DOP) (received on 20 January 2022).

⁶ The survey and the report for Thailand are described as “This Thai Survey” and “This Thai Report”, in order to distinguish from “This Survey” which refers to the “Data Collection Survey for Human Resource Development on Social Work in ASEAN Countries”.

⁷ Interview of NESDC (17 January 2022).

ensured and that emergency management system to respond to health risks⁸.

3) Laws and regulations on social welfare

With regard to laws and regulations on social welfare in Thailand in general, there is the Social Welfare Promotion Act⁹ (enacted in 2003 and revised in 2007) [14] [15]. The Act includes 6 chapters, consisting of consists of the social welfare provision guidelines, National Commission on Social Welfare Promotion (NCSWP), provincial commission on social welfare promotion, Social Welfare Fund (stipulated in its Section 24 as “capital for expenses for the promotion of social welfare provision under this Act”), Public Benefit Organizations and Community Welfare Organizations. The Section 4 stipulates that the “Prime Minister and Minister of Social Development and Human Security shall have charge and control of the execution of this Act. The Minister of Social Development and Human Security shall have the powers to appoint competent officials and issue rules for the execution of this Act”.

Concerning social welfare, its beneficiaries and organizations which provide it, the Section 3 provides definitions as per Table 3-1 (official translation in English) : namely, social welfare is to mean social service system relating to the prevention, remedy, development and promotion of social stability to satisfy the fundamental needs of people to enable them to have good quality of life and self-dependency thoroughly, appropriately, fairly and in accordance with standards in terms of education, health and sanitation, accommodation, occupation and income, recreation, judicial process and general social services. Its beneficiaries include various persons or groups of persons under hardship conditions or in need of assistance, such as children, youth, elderly persons, indigent persons, handicapped or disabled persons, disadvantaged persons, sexually assaulted persons. Social welfare is to be provided by public benefit organizations (defined as “private organizations certified to carry out social welfare provision”) and community welfare organizations (defined as “public organizations established with the purposes of providing social welfare to members of the community or performing social welfare provision of the community welfare organization network and certified to carry out social welfare provision”) [14] [15]. As described below, the Social Welfare Promotion Act also provides the definition of a social worker.

Table 3-1 Definitions under the Social Welfare Promotion Act

Term	Definition
Social Welfare	[A] social service system relating to the prevention, remedy, development and promotion of social stability to satisfy the fundamental needs of people to enable them to have good quality of life and self-dependency thoroughly, appropriately, fairly and in accordance with standards in terms of education, health and sanitation, accommodation, occupation and income, recreation, judicial process and general social services by taking into account of human dignity, people’s entitlement to rights and participation in social welfare provision at all levels
Recipient of Social Welfare Services	[A] person or a group of persons under hardship conditions or in need of assistance, for instance, children, youth, elderly persons, indigent persons, handicapped or disabled persons, disadvantaged persons, sexually assaulted persons or other groups of persons as prescribed by the Commission
Social Welfare Organization	[A] state agency which carries out social welfare provision, public benefit organizations and community welfare organizations

Sources: [14] [15]

⁸ Written response from DOP (received on 20 January 2022).

⁹ Main “Acts” in Thailand are promulgated as “Royal Decrees”.

The scope of social welfare and the fields of social welfare related work are broad, and there is a wide range of legal instruments including acts, regulations and ministerial ordinances concerning these respective fields. There are for instance, the Act on the Elderly (enacted in 2003), National Child and Youth Development Promotion Act (enacted in 2007, and revised in 2017), Child Protection Act (enacted in 2003), Early Childhood Development Act (enacted in 2018), Labour Protection Act (enacted in 1998, and revised in 2003 and 2013), Penal Act (enacted in 1956, and revised in 1999, 2007, 2015 and 2016), Act on Protection of Victims of Domestic Violence (enacted in 2007), Act on the Prevention of Trafficking in Persons (enacted in 2008, and revised in 2015 and 2017), Rehabilitation of Persons with Disabilities Act (enacted in 1991), Empowerment of Persons with Disabilities Act (enacted in 2007) and Mental Health Act (enacted in 2008).

On the subjects of these legal instruments, the strategies and plans have been devised in accordance with the stipulations concerned. The monitoring, evaluation and reporting and the presentation of the recommendations concerning these strategies and plans are carried out by various committees consisting of members such as practitioners, experts and private sector stakeholders in the fields concerned, and / or the sub-committees which are organized as needed, through for instance the regular discussions and information exchange.

(3) Implementation structure

There are various fields of social welfare and its beneficiaries in Thailand, as stipulated in the Constitution and the Social Welfare Promotion Act. During the interviews of This Thai Survey, it was emphasized that social welfare in Thailand involves a range of public and private organizations and personnel¹⁰. Taking these points into account, This Thai Report provides descriptions on the Ministry of Social Development and Human Security (MSDHS) which is the agency assuming main responsibility of social welfare work, as well as other ministries and departments undertaking work related to social welfare. It should be noted that in Thailand departments within a ministry are highly independent, that many of their work activities are undertaken under the initiatives of the respective departments, and the websites are created and managed by the respective departments.

1) Social welfare work of government agencies

1) -1. Ministries and departments engaged in social welfare work

Of the government agencies at the central level, the one which is mainly responsible for social welfare is the Ministry of Social Development and Human Security (MSDHS). In addition, various departments in other ministries, such as the Ministry of Public Health, Ministry of Labour, Ministry of Justice and the Ministry of Interior carry out work related to social welfare.

MSDHS consists of the Office of the Minister, the Office of the Permanent Secretary, departments in charge of social welfare provisions to the respective targets as per Table 3-2, state enterprises (the National Housing Authority and the Office of the Government Pawnshop) and the Community Organizations Development Institute [16] [17].

¹⁰ Interview of NESDC (17 January 2022).

Table 3-2 Departments in MSDHS in charge of social welfare provision and their missions

Department	Missions
Department of Children and Youth (DCY)	Formulation of policies on children and youth; promotion of and support for life skills appropriate for the respective ages; development of comprehensive protection mechanisms; development of welfare systems for children and youth appropriate for Thailand; coordination with relevant agencies in line with the issues concerned; development of the Department's human resources and organizational management systems for the improvement of work operation [18]
Department of Older Persons (DOP)	Development of plans, measures and innovations including integrated tasks that promote and protect elders' rights and well-being; preparation of society for well-being at the old age; protection and promotion of elders' rights on the access to social welfare systems; promotion of networking of organizations to develop elder-related tasks; improvement of the Department's administration and knowledge management to enhance operational efficiency [19]
Department of Women's Affairs and Family Development (DWF)	Promotion of women's potentials and gender equality; protection of women's freedom of expressions; protection of victims of prostitution and support for employment; promotion, development and strengthening of family institutions for the protection of welfare of the whole family; advocacy of rights and provision of social welfare; dissemination of information on gender equality and family [20]
Department of Social Development and Welfare (DSDW)	Implementation of social development and welfare activities for persons without permanent homes / settled shelters and regular employment (including persons who are without accommodation, indigent, without nationalities, beggars and offenders), residents in the areas designated as the "Self-reliant Residence Complex (for indigent persons)", highland people and other specific targets in partnership with relevant organizations concerned in the respective subjects; implementation of support work for royal projects and special projects [21]
Department of Empowerment of Persons with Disabilities (DEP)	Undertaking of leadership and integration on policies related to the improvement of quality of life of persons with disabilities; promotion of rights and welfare of persons with disabilities and their rights on the access to public facilities; support for the strengthening of organizations and networks concerning persons with disabilities [22]

Sources: Compiled with reference to the sources described in the Table above

The Ministry of Public Health includes various departments and other units, such as the Department of Medical Services, the Department of Health, the Department of Disease Control, the Department of Mental Health (DMH) and the Department of Health Service Support, which undertake social welfare related work in line with their respective duties [23].

In the Ministry of Labour, the Department of Labour Protection and Welfare is responsible for labour protection and labour welfare in terms of the improvement of working conditions and benefits [24]. The Office of Social Security is responsible for the management of the Social Security Fund and the labour compensation [25].

In the Ministry of Justice, the duties of the Department of Correction, the Department of Probation and the Department of Juvenile Observation and Protection include social welfare related work. The work of these department concerns, among others, interviews, counselling, formulation of rehabilitation plans including training and employment promotion and monitoring for the respective targets: i.e. the Department of Correction for offenders serving sentences, the Department of Probation for suspects, offenders and those with drug dependency, and the Department of Juvenile Observation and Protection for children and youth [26] [27].

Concerning the Ministry of Interior, the Department of Local Administration (DLA) supports social welfare

work planned and implemented by local administrative organizations including the provision of allowances to the elderly, persons with disabilities, sick persons and children, as well as support activities to the elderly [28]. The work of the Community Development Department (CDD) includes support to social welfare activities under the community initiatives (e.g., creation and operation of community welfare funds)¹¹ [29].

In addition, the Ministry of Defense undertakes related work such as the medical service at military hospitals and education support in conflict areas, while the Royal Thai Police carries out relevant work such as the medical service at police hospitals and protection of child victims of human trafficking at various locations including child protection centers [30] [31] [32].

The Thai Government promotion inter-agency integration and coordination called “*buranakarn*” in Thai on subjects including social welfare. For example, the One-Stop Crisis Center (OSCC; commonly called “Hotline 1300”), which was established to consolidate the point of reception and response to the problems such as violence, exploitation and trafficking in persons and to expedite the coordination among and response of the respective organizations in charge, began its full-fledged operation in 2014 [33]. Upon reception of the reporting or notification at OSCC, relevant public and private organizations respond to the incidences concerned, including MSDHS (related to areas such as protection and social welfare), the Ministry of Public Health (including the affiliated medical facilities), the Ministry of Labour and the Royal Thai Police [34].

In This Thai Survey also, reference was made to various examples of coordination. For instance, MSDHS collaborates with various agencies including the National Statistical Office (NSO) and the National Electronics and Computer Technology Center for the integration of database concerning social welfare. For this purpose, the information collected for the Social Welfare Card (a program targeting vulnerable groups, under which the government tops up the card for the purchase of necessary goods, allows discounts for gas, electricity and water usage fees and provides subsidies for livelihood and transportation cost for cardholders), which began in 2016, is also utilized¹². With regard also to social welfare related to criminal procedures, in response to the cabinet decision in 2016 concerning the strengthening and integration of the support to suspects and offenders the Department of Probation collaborates with other agencies including MSDHS (such as the implementation of social service activities by the suspects and offenders in bail in the organizations under MSDHS), the Ministry of Labour (such as the promotion and creation of employment after bail) and the Ministry of Education (such as the promotion of education opportunities)¹³.

1) -2. Regional administration and local administration

Figure 3-1 is the outline of the administrative structure of Thailand. The administrative structure of Thailand is complex. It consists of the “regional administration” which includes the provincial and district offices of the ministries and department and the provincial governor and district mayor appointed generally by the Ministry of Interior, and of the “local administration” consisting of local administrative organizations (LAOs) which comprise a locally elected chief officer and council members as well as the clerks affiliated with the Ministry of Interior. The former is generally responsible for police, health and irrigation which are

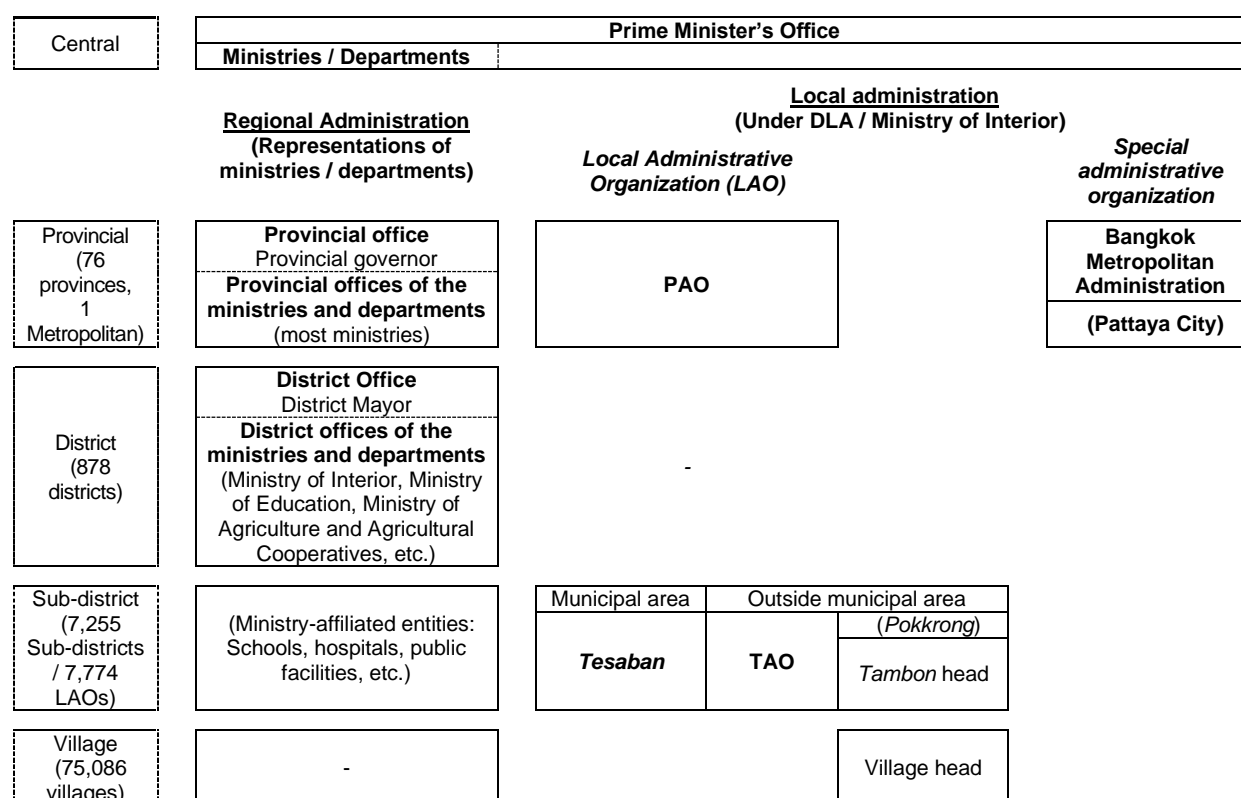
¹¹ Interview of CDD (12 January 2022).

¹² Written response from DOP (received on 20 January 2022) and the interview of NESDC (17 January 2022).

¹³ Interview of the Department of Probation (19 January 2022).

beyond the administrative capacity of the latter. The work of the regional administration is implemented in line with the strategy and planning of the central ministries and departments. As for LAOs, they are under DLA, and undertakes social welfare work including the provision of allowances under its responsibility¹⁴. At the same time, they have corporate status and hence, formulate, implement and manage the respective development plans which are based on the policies and plans of the central government (DLA in the Ministry of Interior which is in charge, and the Office of the Price Minister [35] [36].

In the implementation of social welfare work under this structure, provincial and district offices of the ministries and departments, and the affiliated organizations, coordinate with LAOs, in cooperation with *tambon* heads and village heads and, as appropriate, with community volunteers described below.



Sources: Compiled with reference to literatures including [37] [35] [36]

Figure 3-1 Administrative structure of Thailand

In the regional administration, the staff of the office and the affiliated facilities (see Table 3-3) of MSDHS which assumes the primary responsibility for social welfare, undertakes duties including the survey, analysis and monitoring of social situations of the region in charge, formulation of plans to respond to

¹⁴ LAOs include a Provincial Administrative Organization (PAO) in each province, and one or more municipality (ies) (*tesaban* in Thai) or *Tambon* Administrative Organization (s) (TAO (s)) at the sub-district level. The Bangkok Metropolitan Administration and Pattaya City are special administrative organizations. A *tambon* consists of two or more villages. In addition, village heads (elected by villagers) and *tambon* heads (elected among village head candidates in the *tambon*) who have semi-official status under the Ministry of Interior are responsible for the maintenance of local security described as *pokkrong* in Thai [35] [36].

issues concerning human security, and coordination with other agencies¹⁵.

Table 3-3 Facilities under the jurisdiction of MSDHS offices at the regional administration level

Department	Facility under the jurisdiction	
Department of Children and Youth (DCY)	<ul style="list-style-type: none"> • Facility for protection and reception of children and families • Accommodation facilities for children and families 	30 locations 77 locations
Department of Older Persons (DOP)	<ul style="list-style-type: none"> • Social Welfare Development Center for Older Persons • Learning and Training Center on Older Persons 	12 locations 1 locations
Department of Women’s Affairs and Family Development (DWF)	<ul style="list-style-type: none"> • Training and Development Center for Women and Families 	8 locations
Department of Social Development and Welfare (DSDW)	<ul style="list-style-type: none"> • Facility for protection of persons without permanent homes / settled shelters and regular employment • Center for protection of persons without permanent homes / settled shelters and regular employment • Areas designated as the “Self-reliant Residence Complex (for indigent persons)” • Center for Development of Highland People • Center for Development of Life Skills • Coordination Center for Cooperative Village Project • Museum for Learning of Highland People 	12 locations 77 locations 45 locations 16 locations 4 locations 3 locations 1 locations
Department of Empowerment of Persons with Disabilities (DEP)	<ul style="list-style-type: none"> • Provincial Service Center for Persons with Disabilities • Center for Development of Capacity and Employment of Persons with Disabilities • Center for Promotion of Occupations of Persons with Disabilities • Center for Development of Capacities of Persons with Intellectual Disabilities • Facility for Protection and Development of Persons with Disabilities 	77 locations 8 locations 1 locations 2 locations 11 locations

Sources: Compiled with reference to [38], written response from DOP (received on 20 January 2022), [39] [40] and [41]

The integration and coordination under “*buranakarn*” have also been promoted between the regional administration and the local administration. According to the interviews of This Thai Survey, there is a range of examples of collaborative work and activities among provincial and district offices of various agencies and their affiliated organizations, and LAOs. The division of roles between the regional administration and local administration organizations differ depending on the situations of the respective localities and the development plans of LAOs responsible for the respective localities. Comprehensive information on tangible cases of collaboration among these is not available. It is in general likely that the work requiring higher level of relevant expertise is under the responsibility of regional administrative organizations, and LAOs look after the operational aspects. In addition, it is in practice not possible for the personnel of the regional administrative organizations at the provincial (and some at the district level) to undertake support for all *tesaban*, *tambon* and villages in a province. It is therefore often the case that social welfare work and activities of the respective localities are implemented by LAOs in line with the respective development plans, and more day-to-day social welfare needs (such as advice and/or support concerning how to deal with difficulties related to daily livelihood, and responses to emergency sickness) are responded by community leaders (such as *tambon* heads, village heads and leaders of community groups including

¹⁵ Interview of NESDC (17 January 2022).

women's groups, youth groups and elderly groups) as well as the below-mentioned volunteers (the roles which are often assumed by the community leaders)¹⁶.

Concerning the example of the Project on seamless health and social services provision for elderly persons (S-TOP), which is a technical cooperation project of Japan, in the project sites in Nontaburi Province and Surat Thani Province, LAO personnel in charge of health coordinates with nurses of *Tambon* health promotion hospitals (THPM) (which are under the responsibility of LAOs) and community health volunteers affiliated with the Ministry of Public Health. It provides venues for project activities and arranges transportation to community day care centers for the elderly¹⁷.

1) -3. Volunteers

In Thailand, community volunteers on various subjects undertake work and activities in the localities that their respective localities. The guidance is provided by the personnel of the agencies that they are affiliated with. There are also activities targeting volunteers such as training. The description below concerns volunteers concerning social welfare, who are referred to during the interviews of This Thai Survey. There is a fair number of community residents who serve as two or more of the following volunteers¹⁸.

The Social Development and Human Security Volunteer (SDHSV) under MSDHS was introduced in 2016, as the integration of the conventional volunteers for the elderly and persons with disabilities. Their main tasks include promotion and coordination concerning social welfare, monitoring and provision and advice¹⁹. As of 30 December 2021, 242,401 persons work as SDHSVs throughout Thailand. They receive 50 baht²⁰ as survey expenses, 200 to 400 baht for travel expenses, 120 baht for coordination per case (with the ceiling of 600 baht for this kind of expenses), and 120 baht for meeting expenses²¹. In addition to SDHSV, under the Time Bank Initiative which DOP of MSDHS is in charge (started in 2018), the volunteers registered under the Initiative provide care to the elderly, and in doing so, acquire credits which entitle them to receive similar care when they reach old age. By June 2019, more than 2,00 volunteers were registered, and at the time of This Thai Survey, 2,300 older persons in 28 provinces participate in the Initiative²² [42].

Health volunteers under the Department of Health Support Services of the Ministry of Health (Village Health Volunteers in various locations of the country, and Bangkok Health Volunteers in Bangkok) play an important role concerning particularly primary health care. They are assigned for such objectives as the improvement of health habits and behaviors of the residents of the localities in charge, communication of health related information, dissemination of knowledge and provision of advice, and coordination with relevant organizations concerned with health and hygiene [43]. Their tasks include health survey and data collection, maintenance of family health records, support to public health authorities through, for instance, disease prevention campaigns. At the outbreak of COVID-19, their records of the medical histories of community members were used for contact tracing and health monitoring. At the time of This Thai Survey,

¹⁶ Interview of the Department of Local Administration (DLA) (14 January 2022).

¹⁷ Interview of the Project on seamless health and social services provision for elderly persons (S-TOP) (17 January 2022).

¹⁸ Interview of CDD (12 January 2022) and of the Department of Social Development and Welfare (DSDW) (12 January 2022).

¹⁹ Interview of NESDC (17 January 2022).

²⁰ As of February 2022, 1 Thai Baht is 3.45 yen (rounded off to two decimal places) [101].

²¹ Interview of DSDW (12 January 2022).

²² Interview of NESDC (17 January 2022).

There are approximately 1.04 million health volunteers (of which 15,000 Bangkok Health Volunteers). Concerning the subject of health, there are also volunteers managed by the Thai Health Promotion Foundation, who serve as frontline helpers in hospitals to facilitate various processes that patients need to go through before seeing doctors²³.

With regard to labour, labour volunteers are assigned to serve as representatives of the Ministry of Labour in *tambons* across the country. Their roles include dissemination of relevant information, the coordination, promotion and prevention of labour issues, and the collection of labour data²⁴.

There are also a volunteer programs in the Ministry of Justice. For instance, Probation Volunteers provide assistance to social welfare work of the Department of Probation (including activities for crime prevention)²⁵ [44].

Community development volunteers affiliated with CDD of the Ministry of Interior take part in activities concerning community development in general, including social welfare. They are elected among community residents. *Tambon*-level community leaders, who are elected among them, deal with issues in the communities of the respective *tambons*. As necessary, they coordinate with regional administrative organizations and the affiliated facilities²⁶.

1) -4. National Commission on Social Welfare Promotion

The National Commission on Social Welfare Promotion (NCSWP) was established as based on the National Social Welfare Promotion Act. The tasks of the Commission include the provision of recommendations and opinions concerning laws, rules, regulations, policies, plans and their implementation related to social welfare (such as human resource development and licensing), specification of standards, targets and methods of social welfare provision, and the supervision of the management of the Social Welfare Fund. The Secretariat is located in MSDHS (DSDW). The Prime Minister is the chair, and the members are comprised of representatives from government agencies, public welfare organizations and community welfare organizations, and qualified persons (Table 3-4). There are Provincial Commissions on Social Welfare Promotion chaired by provincial or Bangkok governors [14] [15] [45].

Table 3-4 Composition of National Commission on Social Welfare Promotion

Chair	Vice chair	Member
Prime Minister	(1 st) Minister, MSDHS / (2 nd) one representative from a public welfare organization or a community welfare organization as designated by the Prime Minister	<ul style="list-style-type: none"> Government agencies: permanent secretaries from the Office of the Prime Minister, Ministry of Finance, Ministry of Culture, Tourism and Sports, MSDHS, Ministry of Interior, Ministry of Justice, Ministry of Labour, Ministry of Education, and Ministry of Public Health; Director General of the Bureau of Budget, Secretary General of NESDC (Office of the National Economic and Social Development Board), Director-General of DSDW Eight representatives respectively from public welfare organizations and community welfare organizations, as designated by the Cabinet Meetings Eight persons with qualities, as designated by the Cabinet Meetings

Sources: Compiled with reference to [14] [15] [45]

²³ Interview of NESDC (17 January 2022).

²⁴ Interview of NESDC (17 January 2022).

²⁵ Interview of the Department of Probation (19 January 2022).

²⁶ Interview of CDD (12 January 2022).

2) Social welfare organizations outside the government

2) -1. Private organizations

In the private sector as well, various organizations carry out activities on a range of subjects related to social welfare. The National Council on Social Welfare of Thailand (NCSWT) is a coordinating body of private organizations concerning social welfare in Thailand. As of 31 March 2021, the total of 886 organizations are registered with NCSWT, comprising 8 organizations located abroad, 289 organizations located in Bangkok and 589 organizations located in provinces outside of Bangkok, most of which are private organizations. For instance, of 289 organizations located in Bangkok, there are 137 associations, 125 foundations, 19 other organizations (government agencies and schools), as well as 8 other associate members (similar breakdowns are not provided for provinces outside Bangkok) [46].

NCSWT is a non-profit organization established in 1960, and has been under the royal patronage since 1961. Its objective is to play a central coordination role for public and private organizations on social welfare and social development. Its activities include public relations, fund-raising and research. It also implements projects supported by the royal family. As a national coordinating body of non-governmental organizations on social welfare in Thailand, NCSWT is a member of the International Council on Social Welfare (ICSW) and the Rehabilitation International (RI) [3] [46].

2) -2. International organizations

The international organizations implementing activities concerning social welfare in Thailand include the United Nations Agencies such as United Nations Children's Fund (UNICEF) (on child protection overall), International Labour Organization (on labour, vocational training, trafficking in persons), World Health Organization (on health), United Nations Population Fund (on demographic issues), United Nations Food and Agriculture Organization (on nutrition), international financial institutions, regional entities such as the European Union, and also bilateral partners such as the United States and Australia. There is also a number of research work conducted jointly by public and private organizations in Thailand and international organizations. The examples involving NESDC include cooperation with the World Bank (e.g., "Towards Social Protection 4.0: An Assessment of Thailand's Social Protection and Labor Market Systems") and with the United Nations Thailand (e.g., "Social Impact Assessment of COVID-19 in Thailand"). Under the "United Nations Joint Programme Social Protection 2nd Project", activities to integrate social welfare policies are implemented through cooperation among international organizations including the International Labour Organization, NESDC and MSDHS²⁷.

3) Public-private collaboration

Public-private collaboration is also active, and various cases in this regard have been referred to at the interviews of This Thai Survey. The examples of DSDW and DOP are described in Box 1.

²⁷ Interview of NESDC (17 January 2022).

Box 1: Examples of public-private partnership of DSDW and DOP

In the implementation of its work, DSDW collaborates often with associations and foundations which carry out activities concerning labour issues, child related issues and social issues. One of the reasons is that partnership with foundations and associations is included in the work performance criteria. There is an even larger number examples of partnership with private companies. These include activities undertaken in cooperation for instance with major hotels and department stores in view of supplementing limited government budget and of corporate social responsibility. It was informed that MSDHS presents awards to such private companies in order to further enhance their willingness to cooperate. As for academic institutions, there is also a number of examples of studies and training activities carried out in cooperation for instance with the Thammasat University, the Huachiew Chalermprakiet University and the National Institute of Development Administration (NIDA). In addition, there are experts, qualified persons and academics who are the members of technical sub-committees under the Department²⁸.

DOP also collaborates with various private organizations. For instance, the “Chula-Ari Project”, which is implemented in coloration with Chulalongkorn University, aims at promoting the utilization of robotic technologies in the field of social welfare. Under this project, “Ninja Robot” is utilized to watch over the elderly. The Thai Red Cross Society donates canes for which laser technologies are applied to assist the walking of the elderly. There is also digital education training which have been implemented in cooperation with the Sukhothai Thammathirat University and the Thai Health Promotion Foundation. Furthermore, there are in-kind donations from major private companies and foundations for the work of the Department in support for the elderly²⁹.

4) Budget concerning social welfare

4) -1. National budget by functions of expenditures

The total budget of Thailand for the fiscal year 2022 (from October 2021 to September 2022) is 3,100,000 million baht. Figure 3-2 shows the breakdown of the total budget by functions of expenditures. One of the functions is “Social Protection” (the second low from the bottom), for which 366,201.1 million baht (11.8% of the total) is allocated. The budget for social protection is used on social security for those losing income due to illness and as a compensation to the general public and retiring government employees, as well as on social welfare by providing shelters to various groups of people, as well as other social assistance such as compensation for loss of property due to disasters, along with research and development on social welfare. Of these, there is a large share of the budget for elderly welfare, namely, 80.5% for the fiscal year 2021 (367,402.0 million baht) and 85.1% for the fiscal year 2022 (311,537.5 million baht) (Figure 3-3) [47].

²⁸ Interview of DSDW (12 January 2022).

²⁹ Written response from DOP (received on 20 January 2022).

Fiscal Year Functions	FY 2021		FY 2022		Changes over FY 2021	
	Amount	%	Amount	%	Amount	%
General Services	1,148,817.5	34.9	1,114,700.1	36.0	-34,117.4	-3.0
General Public Services	736,591.5	22.4	731,228.1	23.6	-5,363.4	-0.7
Defence	210,203.3	6.4	196,570.5	6.4	-13,632.8	-6.5
Public Order and Safety	202,022.7	6.1	186,901.5	6.0	-15,121.2	-7.5
Economic Affairs	669,622.6	20.4	685,560.7	22.1	15,938.1	2.4
Economic Affairs	669,622.6	20.4	685,560.7	22.1	15,938.1	2.4
Community and Social Services	1,467,522.4	44.7	1,299,739.2	41.9	-167,783.2	-11.4
Environmental Protection	16,143.4	0.5	8,360.9	0.3	-7,782.5	-48.2
Housing and Community Amenities	147,594.8	4.5	129,886.1	4.2	-17,708.7	-12.0
Health	343,906.2	10.5	322,975.8	10.4	-20,930.4	-6.1
Recreation, Culture and Religion	20,438.9	0.6	18,424.1	0.6	-2,014.8	-9.9
Education	482,764.5	14.7	453,891.2	14.6	-28,873.3	-6.0
Social Protection	456,674.6	13.9	366,201.1	11.8	-90,473.5	-19.8
Total	3,285,962.5	100.0	3,100,000.0	100.0	-185,962.5	-5.7

Source: [47]

Figure 3-2 Breakdown of 2021 and 2022 fiscal year budgets by expenditure functions

Social Protection	FY 2021	FY 2022
1. Elderly Welfare	367,402.0	311,537.5
2. Social Welfare not elsewhere classified	36,952.6	22,801.8
3. Social Protection not elsewhere classified	52,320.0	31,861.8
Total Social Protection	456,674.6	366,201.1
Percentage of the Total Budget	13.9	11.8

Remark: Supplementary information on “2. Social Welfare not elsewhere classified” and “3. Social Protection not elsewhere classified” in the table above is not provided. Presumably, they include the afore-mentioned compensations.

Source: [47]

Figure 3-3 Breakdown of 2021 and 2022 fiscal year budgets for social protection

4-2). Allocation of national budget to MSDHS

Of the national budget allocated ministries and departments, that for MSDHS, which is mainly responsible for social welfare-related duties, is 24,624.9 million baht for the fiscal year 2022. Its share in the total budget is 0.8%, which is relatively low. However, it is higher by 10.8% compared to the previous fiscal year. While the year-on-year change of budget is negative for most ministries, the growth ratio of MSDHS is the second highest following the Ministry of Energy (of which ratio is 18.8%) [47].

Table 3-5 shows the budget figures of the departments, office and institute within MSDHS. The figure of DCY is highest, constituting over 60% of the total in the fiscal year 2021, and over 70% in the fiscal year

2022 [47]. This is due to the large amount of budget for the Child Support Grant³⁰, which is under the responsibility of DCY³¹.

Table 3-5 Budget of MSDHS departments, office and institute

Unit: million baht

Department / office / institute	Fiscal year 2021	Fiscal year 2022
Office of the Permanent Secretary	1,693.5	1,502.3
DCY	14,833.5	18,177.1
DOP	624.6	688.9
DWF	643.5	526.0
DSDW	1,967.6	1,718.2
DEP	827.9	708.6
Community Organizations Development Institute	1,751.2	1,303.8
MSDHS as a whole	22,341.8	24,624.9

Source: Compiled with reference to [47]

In addition to the ministerial budget as per Table 3-5, under the “Revolving Funds as Juristic Persons”, which is a different budget item of the national budget, there is an allocation to the Office of the Permanent Secretary for “Fund for Prevention and Suppression of Human Trafficking” (25.0 million baht for the fiscal year 2022), to DCY for the “Child Protection Fund” (35.0 million baht for the fiscal year 2021 and 30.0 million baht for the fiscal year 2022), to DOP for the “Elderly Fund” (70.0 million baht for the fiscal year 2021 and 63.0 million baht for the fiscal year 2022), to DWF for the “Gender Equality Promotion Fund” (5.0 million baht for both the fiscal years 2021 and 2022), and to DSDW for the “Social Welfare Promotion Fund” (90.0 million baht for the fiscal year 2021 and 85.0 million baht for the fiscal year 2022).

5) Social protection

The social security system in Thailand is complex. The “Overview of Social Security Policies and Recent Developments in East and Southeast Asia (Thailand) 2020: Overseas Situation Report” explains that social security policies in Thailand can be broadly classified into social insurance schemes, social welfare measures and public health measures. The social insurance schemes mainly include old-age pensions, medical insurance and unemployment insurance. The public health measures mainly include health promotion and measures against infectious diseases. The social welfare measures include the provision of welfare services for the elderly, persons with disabilities and children. These are under the responsibilities of different organizations. The Social Security Office of the Ministry of Labour is in charge of the social insurance schemes. MSDHS is responsible for social welfare measures. The Ministry of Public Health is in charge of public health measures. The National Medical Security Office (an independent administrative agency) is in charge of national medical security, while the Ministry of Finance is responsible for medical benefits and pension schemes for civil servants. In addition, wealthy population subscribe to private insurance, while civil servants and their family members are covered by their own medical benefits and pension schemes. Private employees are covered by the government-managed social insurance schemes, while farmers, self-employed persons and unemployed persons, who account for approximately 80% of the

³⁰ The Child Support Grant is one of the priority policy measures of the Thai Government. It is provided to households in poverty or facing the risk of poverty to cover expenses for the development of (new-born) children [102].

³¹ Interview of DSDW (12 January 2022).

total population, are only entitled to the national health care schemes and services provided on the basis of social welfare measures [48].

3.1.2 Situations in the areas related to social service workforce

In Thailand, social welfare workforce is engaged in work on a range of subjects including children and families, persons with disabilities, the elderly and poverty. These will be described more in detail in the section 3.2 onwards as below.

(1) Children and families

Measures to address issues on social welfare for children and families include the protection from sexual abuse and domestic violence, support for victims, elimination of forced labour and protection from exploitation. In addition, as mentioned above, the national development policies of Thailand attach importance to the promotion of early childhood development as the foundation for lifelong human development. Various ministries and departments collaborate in the provision of support, such as the support in facilities such as development centers, and the child support grant targeting households in poverty or facing risks of poverty. Thailand is also a receiving, transit, and sending country for victims of trafficking in persons, including children and women, and efforts are being made to strengthen prevention and control of trafficking and to protect victims through international cooperation.

(2) Persons with disabilities

According to the disability survey conducted in 2017 targeting 109,000 households, there were persons with disabilities in the 12.7% of the target households [49]. The measures devised by the government targeting persons with disabilities include health assistance, livelihood assistance, occupational training, education and dissemination of information [50]. Measures for persons with disabilities include the “Empowerment of Persons with Disabilities Fund” which is a subsidy for education and employment [51], as well as public and private Community-Based Rehabilitation programs.

(3) Older Persons

Thailand entered into aged society in 2015 and complete-aged society in 2021. It is estimated that the country will enter into super-aged society in 2031³² [52]. As described above, responding to accelerating ageing is an important issue for the country, and the Thai government devises multi-faceted support for the elderly social welfare measures such as elderly allowance, promotion of employment of the elderly and the promotion of training. It should also be mentioned that in Thai society, the role of family and community has traditionally been significant in terms of the care to the elderly. Policy documents including NESDP hence emphasizes the importance of elderly care in the community [5].

³² In the Thai Government documents, the elderly refers to persons aged 60 years old or older. Meanwhile, taking also into account the international standards, “aged society” refers to a population in which the proportion of those age 60 years or older exceeds 10% of the total (or a population in which 7% are age 65 years or older). “Complete-aged society” is a population in which the proportion of those age 60 years or older exceeds 20% (or a population in which 14% are age 65 years or older). “Super-aged society” is a population in which the proportion of those age 60 years or older exceeds 28% (or a population in which 20% are age 65 years or older). “Aging society” refers to a population that is aging as indicated by the proportion elderly of the total population that is steadily increasing [104].

(4) Poverty

Thailand achieved significant poverty reduction, with the poverty ratio declined largely from 65% in 1988 to 7.2% in 2015. However, poverty reduction, in terms particularly of mitigating disparities among the population, remains to be a major issue [9]. With this background, the Human Development Index (HDI), which followed upward trend since 1990's to reach 0.765 in 2020, dropped to 0.635 when inequality-adjusted³³ [6]. The National 20-year Strategy and NESDP identify poverty reduction as one of the main policy objectives, and place emphasis on the improvement of income of the poorest population. Efforts are made in the form of social investment for the specific target, which is the poorest population in need for support [5].

3.2 Current status of social service workforce development

3.2.1 Planning

(1) Laws, policies and plans

1) Social work and social workers in the national strategy and plans

The Constitution of Thailand, National 20-year Strategy and NESDP explicitly describe the importance of strengthening workforce from the viewpoint of human development. While no direct reference is made to “social work” or “social workers”, it was emphasized at the interviews of This Thai Survey that persons engaged in social work are among the targets of the strengthening of workforce mentioned above³⁴. Specifically concerning persons involved in the provision of social services including social workers, the importance is attached to the development of the knowledge, skills and ethics as well as professionalism of the workforce related to the promotion of early childhood development and support to the elderly. The establishment, adoption and promotion of mechanisms for licensing and qualification are encouraged³⁵.

2) Laws and regulations on social workers

In Thailand, the Social Work Professions Act was enacted in 2013. The Act consists of 6 chapters: i.e., the Social Work Professions Council (SWPC), the Membership, the Social Work Professions Council Committee, the Proceeding of the Committee, the Control of the Standard and Ethics of the Performance of Social Work Profession, and the Penalties. While the definitions of “social work” and “social workers” are not provided, the term, (a person) practicing social work profession³⁶, is defined (see the section (2) “Definitions and regulations”) [53] [54].

The Social Work Professions Act stipulates the licensing of social work profession practitioners. According to the stipulation, the social at SWPC and issuance of a license by SWPC are required for a person to be qualified as a licensed social work profession practitioner”. The Section 28 of the Act stipulates that the

³³ The inequality-adjusted HDI is calculated based on the average degree of country-wide achievement in terms of 3 aspects of health, education and income, combined with the disparity of achievement within the country. The disparities of the respective aspects are deducted from the indices concerned, to arrive at the inequality-adjusted HDI [105].

³⁴ Written response from DOP (received on 20 January 2022) and the interview of NESDC (17 January 2022).

³⁵ Interview of NESDC (17 January 2022).

³⁶ To be consistent with other country reports under This Survey, “*wichachip*” in the original Thai language is translated as “profession”, when it is used concerning social work. It should be mentioned that in Thailand, “social work profession practitioners” are often not engaged in social work as his / her principal occupation.

professions practiced by persons in the “social worker positions” or the persons in charge of tasks concerning social work (see the section (2) “Definitions and regulations” below for these terms) under the following laws shall be the professions to be practiced by licensed social work profession practitioners [53] [54]:

- laws on criminal procedures
- laws on child protection
- laws on victims of domestic violence
- laws on labour protection
- laws on rehabilitation of persons with drug dependency
- laws on social welfare promotion
- laws on mental health
- laws on juvenile and family courts and criminal procedures of juvenile and domestic crimes
- laws other than the above, which include relevant stipulations

At the interviews of This Thai Survey, reference was often made to the significance of the Social Work Professions Act. In particular, it was stressed that the stipulation of the need for a license, as well as the specification of the subjects of laws for which licensed social work profession practitioners shall be engaged contributed to raising awareness among social workers, especially licensed social work profession practitioners, and to raising recognition of social workers in society in general³⁷.

(2) Definitions and regulations

1) Terms for social welfare and social work

In the section 3.1.1 (2) “Policies: laws, regulations and national policies” above, the definition of social welfare as stipulated in the Social Welfare Promotion Act was described. In the original Thai text of the Act, the term “*sawasdikarn sangkhom*” is used to mean social welfare on English. While “*sawasdikarn sangkhom*” is a terms generally used for social welfare, there is another term used also generally to mean social welfare, which is “*sangkhom songkro*”. In some parts of This Thai Report, understanding the distinction between these terms will be useful or necessary, and therefore, the following information is provided to supplement the understanding of these terms. As for the composition of these terms, “*sawasdikarn*” means wellness or well-being, “*sangkhom*” means society, and “*songkro*” means welfare.

In the literatures acquired for This Thai Survey, clear distinction between “*sawasdikarn sangkhom*” and “*sangkhom songkro*” was not provided. At the interviews of This Thai Survey, inquiries were made on the interpretation of these terms in laws and regulations, as well as in policy, industry and academic documents. It was explained that there were no clear distinctions³⁸. These two terms are used mostly interchangeably, and the translation into English in various literatures including laws regulations is not consistent. The interpretations indicated during the interviews were not always identical. There was an interpretation that “*sawasdikarn sangkhom*” is a broader concept that includes “*sangkhom songkro*”. Another interpretation was that the former refers to support concerning the basic aspects of social welfare and the latter, support to specific targets or on specific subjects. There was also an interpretation according to which the former refers to services on various subjects of social welfare, while the latter means a series of work (including

³⁷ Interviews of DSDW (12 January 2022), of the Thammasat University (13 January 2022) and of TASW (14 January 2022), among others.

³⁸ Interview of NESDC (17 January 2022).

service provision and evaluation) concerning the implementation of social welfare. According to yet another interpretation, the former is used when referring to specific areas of social welfare (such as education and housing), while the latter refers to occupation or profession concerning social welfare³⁹. When comprehensively considering these interpretations and the descriptions in the literatures concerned, it can be understood that “*sawasdikarn sangkhom*” means a state of social welfare (being materialized), while “*sangkhom songkro*” refers to actions to provide social welfare.

With regard to the term “social work”, “*sangkhom songkro*” is consistently used. When “social welfare” and “social work” are described concurrently, “*sawasdikarn sangkhom*” is used to mean the former, and “*sangkhom songkro*” to mean the latter⁴⁰. From this perspective and on the basis of the perspective mentioned above, “*sangkhom songkro*” in Thai for “social work” is a term to refer to actions to provide social welfare.

As a large part of the literatures of This Thai Survey were in Thai and many of the interviews were conducted in Thai, in This Thai Report, “*sawasdikarn sangkhom*” in Thai is in principle described as social welfare, and “*sangkhom songkro*” is described as social work. If official translation into English is provided, the descriptions follow the translation therein.

2) Definitions and regulations of social service workforce and social workers

Table 3-6 shows the overview of the social service workforce (workforce engaged in social work) in Thailand. According to This Thai Survey, the social service workforce herein may be understood to be identical with the workforce engaged in social work related jobs/works, which include “social workers” and “social work profession practitioners” as defined and stipulated in relevant laws and regulations (Social Welfare Promotion Act and Social Work Professions Act). There is also a job position called “social worker” which is used in public and private organizations. In addition, besides those in “social worker positions”, there are those who are not in “social worker positions” but are in charge of or involved in tasks concerning social work (*sangkhom songkro*). They are also considered to be in the “social service workforce”⁴¹ [55].

³⁹ Interview of SWPC (11 January 2022) and of the Thammasat University (13 January 2022), among others.

⁴⁰ Interview of SWPC (11 January 2022).

⁴¹ Interviews of OCSC (17 January 2022) and of TASW (14 January 2022).

Table 3-6 Overview of social service workforce in Thailand

Social service workforce: Workforce engaged in “social work” as per the industrial classification (Including “social workers” / “social work profession practitioners” defined by the Acts concerned)		
Persons in the “social worker positions”		Persons in charge of, or concerned with social work (<i>sangkhom songkro</i>), other than the persons referred in the left cell
Workforce in the public sector	Civilian workforce	Civil servants
		Ordinary civil servants
		Civil servants in PAO
		Civil servants in TAO
		Civil servants in <i>tesaban</i>
		Civil servants in Bangkok Metropolitan Government
		Civil servants affiliated with autonomous bodies
		Teachers and civil servants in education field
		Civil servants in higher education
		Teachers at local administrative levels
		Police
		Civil servants in Lower House
		Judges
		Public prosecutors
Workforce in the private sector	Civilian workforce	Permanent employees
		Temporary employees
		Government employees
		Local temporary employees
		Military workforce
		<i>Tambon</i> heads, village heads and leaders of community groups and / cum volunteers
		Members of community welfare organizations other than the above
		Members of public welfare organizations
		Others (e.g., private company employees engaged in other types of “social work” as per the industrial classification)

Source: Compiled with reference to [14] [15] [53] [54] [56] [57] [58] [59], among others

2) -1. Definitions and regulations concerning “social service workforce”

According to This Thai Survey, an official document providing definition of the workforce engaged in social work is the “Thailand Standard Industrial Classification (TSIC: 2009)”. This classification is used for labour survey and statistics. Of its 22 classifications, social work is included in the classification entitled “human health and social work”. “Social work” here is described as “*gan sangkhom songkro*” in the original Thai text, with *gan* meaning work/job). It can therefore be referred to as “social work related job/work”.

“Social work” or more precisely “social work related job/work” here is defined as to mean social services concerning social services including counselling, referral and other types of social welfare activities, which target individuals and families (including immigrants). Specific examples of various social work related jobs /works are described, such as the provision of advice and protection of violence for children, youth, and women; provision of financial advice on livelihoods; provision of advice on marriage and family matters; provision of advice on assets and consumer liabilities; community activities; support for disaster victims; support for persons without homes and/or in shelters; vocational training for unemployed persons;

determination of social welfare support for those persons facing difficulties to pay rents; activities related to the distribution of food ration coupons; activities related to child adoption; support to persons with disabilities; provision of meals to persons without permanent homes or shelters; and charities based on donations [55].

2) -2. Definitions and regulations on “social workers” and “social work professions (practitioners)”

Concerning a “social worker”, as mentioned above, the Social Welfare Promotion Act provides its definition. The Social Work Professions Act defines a “social work profession (practitioner)” (see Table 3-7). A social worker is to provide social welfare as defined in the Social Welfare Promotion Act (see Table 3-1). While the definition of a social work profession practitioners does not include reference to social welfare, it describes the need for knowledge and skills on social welfare. With regard to qualifications including degrees, it is mentioned only in the Social Welfare Promotion Act.

Table 3-7 Definition of social worker, social work profession and its practitioner

Term	Definition
Social worker	A person performing work relating to social welfare provision who has graduated with no lower than a bachelor degree in the field of social welfare administration or has attended a social work training in accordance with the standard prescribed by the Commission ^(*) or has qualifications as prescribed and notified by the Commission in the Government Gazette
Social work profession (practitioner)	(A person proacting) a profession which requires knowledge and skill on social work in the performance of duty in relation to preventing and rectifying a problem of an individual, family, a group of persons or community to perform their social duty and live their lives peacefully

Remark ^(*): The Commission here refers to NCSWP.
Sources: compiled with reference to [14] [15] [53] [54]

Neither of the Acts provides the definition of social work itself. In the meantime, as mentioned above, social work (*sangkhom songkro*) can be understood as to mean the provision of social welfare (*sawasdikarn*). In addition, according to the interviews of This Thai Survey, social work profession practitioners generally obtained (a) bachelor’s or higher academic degree (s). For these reasons, it can be understood that the meaning of a social worker defined in the Social Welfare Promotion Act and that of a social work profession practitioner defined in the Social Work Professions Act are almost identical. In this regard, it was explained at the interviews of This Thai Survey that in general, a social worker and a social work profession practitioner are used almost interchangeably, except when they are used in official documents such as laws and regulations⁴². Specifically for This Thai Report, the usage of a “social worker” and a “social work profession practitioners” is in principle in accordance with the description in the original literatures in Thai or the remarks made by the interviewees.

With regard to the term “para-social worker” in English, no clear reference was available in the literatures referred to for This Thai Survey. According to the information provided at the interviews of This Thai Survey, while the Thai terms meaning “assistant to social work” and “assistant to social worker” are used in some places, these terms are not standardized for Thailand as a whole, and are not officially used. For instance, in the Bangkok Metropolitan Administration, personnel having graduated from the faculty of

⁴² Interviews of SWPC (11 January 2022) and of NESDC (17 January 2022), among others.

social work and before becoming a civil servant is referred to as an “assistant to social worker”. It was informed that, in view of the potential necessity to assign such personnel in places where the recruitment of the personnel is difficult, such as refugee camps, the development methods of such personnel has been under consideration, along with the formulation of job specification standards concerned⁴³.

2) -3. Social worker positions and position levels

In public and private organizations of Thailand, there is a position entitled “social worker”. At the time of This Thai Survey, there is no job specification standards of “social worker positions” which are applied uniformly to all public and private workforce. With regard specifically to public workforce, there are different classifications as indicated in Table 3-6. It was informed that the job specification standards applied to the workforce in the respective classifications are formulated by different organizations in charge of the workforce in the respective classifications⁴⁴.

Of the classifications of the public workforce, the civil servants affiliated with main ministries and departments belong to the classification entitled “ordinary civil servant” (the top row of the “civil servants” in the “civilian workforce” of the “public workforce” of Table 3-6). They constitute approximately 31% of the civil servants (as of 2020) [58] [59]. The organization in charge of ordinary civil servants is the Office of the Civil Service Commission (OCSC). OCSC establishes job categories, positions and position levels applicable to the respective positions, and formulates relevant job specification standards (“Job Specs”). The position levels include “executive positions” (“higher level” and “primary level”), “managerial positions” (“higher level” and “primary level”), and “knowledge worker positions” (“practitioner”, “professional”, “senior professional” and “expert”) [56] [57] [58] [59].

For the “social worker position” specified by OCSC, position levels for “knowledge worker positions” are established. Table 3-8 shows the outline of the scope of duties for the respective position levels as per the job specification standards of “social worker positions” formulated in 2011. Table 3-9 summarizes the required qualifications as per the job specification standards of the respective position levels. In addition to the requirements in the Table, there are qualifications required for all the position levels, namely, knowledge, skills and capacities necessary to conduct the tasks concerned. The remuneration is not indicated [60] [61] [62] [63].

There are “social worker positions” also for civil servants other than those under OCSC (such as those in LAOs, teachers and police), civilian workforce other than civil servants (permanent employees, temporary employees, government employees and local temporary employees), military workforce, and also for the private workforce. Their scopes of duties are not identical but similar to those described in the job specifications standards stipulated by OCSC. It was also informed that in public and private organizations, there are many who are not in the “social worker positions” but are in charge of or involved in the tasks/activities concerning social work⁴⁵.

⁴³ Interview of SWPC (11 January 2022).

⁴⁴ Interview of OCSC (17 January 2022).

⁴⁵ Interviews of DLA (14 January 2022), of OCSC (17 January 2022) and of the Department of Probation (19 January 2022), among others.

Table 3-8 Outline of scope of duties stipulated by OCSC in the job specification standards of “social worker positions”

Position	Scope of duties			
	Practice	Plan	Coordination	Service
Practitioner	Visit to and interview of a target individual, a family and / or a community; collection and consolidation of information; evaluation of situations; provision of advice, and so forth.	Preparation of planning of duties for projects concerned in accordance with the affiliated team and existing plans, and so forth.	Coordination within and among divisions; provision of information to enhance understanding, etc.	Implementation social welfare support to the target of support; provision of information and advice; cooperation in the implementation of training, and so forth.
Professional	In addition to the above duties, development of systematic knowledge on duties; evaluation of problems of target of support; provision of advice, monitoring, and so forth.	Preparation of planning of duties for the affiliated division based on the exiting plans; problem-solving, and so forth.	In addition to the above duties, presentation of observations and advice at the initial stages, etc.	Implementation of support in more complex situations; provision of systematic information and advice; implementation of training, and so forth.
Senior professional	Duties as above in more serious and urgent situations; compilation of social welfare planning; planning of work / activities for the promotion of social welfare of the target of support, monitoring, and so forth.	Preparation of planning of duties for the affiliated division; problem-solving, and so forth.	Presentation of opinions, advice and observations in the conduct of the above; presentation of observations at committees and working groups, and so forth.	Provision of systematic information and advice for the government, private sector and general public; formulation, management and implementation of training activity plans, and so forth.
Expert	Formulation of directions concerning the duties such as those as above; presentation of observations, and so forth.	Preparation of planning through the coordination among departments; problem-solving; assignment of duties, and so forth.	Coordination with other organizations; presentation of advice and observations; presentation of observations at domestic and international meetings, and so forth.	Provision of advice concerning the above, and so forth.

Sources: Compiled with reference to [60] [61] [62] [63]

Table 3-9 Summary of required qualifications stipulated by OCSC in the job specification standards of “social worker positions”

Position	Required qualification
Practitioner	<ul style="list-style-type: none"> • To have acquired a bachelor’s, master’s and / or doctor’s degree (s) from either one of the faculties of psychology, social work (social welfare), sociology, behavioral science or political science; or a comparable qualification / or • To have acquired a bachelor’s, master’s and / or doctor’s degree (s) from either one or two of the faculties above, as deemed by the government agency in charge to be appropriate for the work or responsibilities to be undertaken / or • To have acquired a bachelor’s degree from the faculties above; or a comparable qualification, as stipulated by OCSC to be applicable specifically for the position concerned / or • To have acquired an academic degree or other qualifications from which the knowledge comparable to the one that can be acquired from the faculties or by other means or as described above, as determined by OCSC and the Department / or • To have acquired an (other) academic degree (s) or other qualifications as stipulated by OCSC to be applicable specifically for the position concerned

Position	Required qualification
Professional	<ul style="list-style-type: none"> • To have the qualifications of social worker practitioner position / and • To have working experiences in any job category (ies) in either one of the following positions: (1) senior professional position of the knowledge worker positions; (2) at least 6 years of practitioner position of the knowledge worker positions; if having obtained a master's degree, 4 years, and if having obtained a doctor's degree, 2 years; (3) depending on cases, position (s) other than the above in accordance with the criteria and procedures stipulated by OCSC / and • To have practiced, for at least 1 year, social work, or another / other related duty (ies) of which work, responsibilities and occupational character are deemed appropriated by the government agency in charge
Senior professional	<ul style="list-style-type: none"> • To have the qualifications of social worker practitioner position / and • To have working experiences in any job category (ies) in either one of the following positions: (1) primary level of the managerial positions; (2) senior professional of the knowledge worker positions; (3) at least 4 years of professional position of the knowledge worker positions; (4) depending on cases, position (s) other than the above (1) (2) (3) in accordance with the criteria and procedures stipulated by OCSC / and • To have practiced, for at least 1 year, social work, or another / other related duty (ies) of which work, responsibilities and occupational character are deemed appropriated by the government agency in charge
Expert	<ul style="list-style-type: none"> • To have the qualifications of social worker practitioner position / and • To have working experiences in any job category (ies) in either one of the following positions: (1) higher level of the managerial positions; (2) primary level of the managerial positions for at least 1 year; (3) professional of the knowledge worker positions; (4) senior professional of the knowledge worker positions for at least 3 years; (5) depending on cases, position (s) other than the above (1) (2) (3) (4) in accordance with the criteria and procedures stipulated by OCSC / and • To have practiced, for at least 1 year, social work, or another / other related duty (ies) of which work, responsibilities and occupational character are deemed appropriated by the government agency in charge

Sources: Compiled with reference to [60] [61] [62] [63]

The job specification standards of OCSC are subject to revisions not on a regular basis but as needs arise. At the time of This Thai Survey, there are no confirmed plans to revise the current job specification standards of “social worker positions”. However, several professional associations and government agencies have been proposing a review and possible revision. Hence, consideration has been given as to whether or not to limit an eligibility for academic degrees to that from social work studies which are directly linked to the work concerned⁴⁶.

With regard to the vacancy announcement for ordinary civil servants under the responsibility of OCSC, application guidelines are prepared and posted on such media as the websites by the respective organizations. The contents of the guidelines are based on the job specification standards of OCSC, and the respective organizations are entitled to include additional requirements. Upon completion of the recruitment, the results are reported from the respective organizations to OCSC for record⁴⁷. In case of DSDW, since 2013 (enactment of the Social Work Professions Act), the acquisition of the degree (s) on social work studies and of the license for a social work profession practitioner has been added to academic qualifications that are necessary for application. This was in response to the increase in the number of instances where more technical skills (such as the methodology and concept of social work) are proved useful or necessary. While these additional requirements are not mandatory at the time of This Thai Survey, it was explained that the

⁴⁶ Interviews of OCSC (17 January 2022) and of TASW (14 January 2022).

⁴⁷ Interview of OCSC (17 January 2022).

consideration has been given to make them mandatory⁴⁸.

When the requirements to apply for a vacancy are more specific, the number of applicants tend to decline. This is the case not limited to “social worker positions”. Therefore, as well recognized by OCSC which establishes job specification standards and government agencies preparing vacancy announcements, attention needs to be drawn to recruiting workforce with highly technical skills by specifying application requirements including academic degrees, and also to ensuring the recruitment of workforce by maintaining flexible application requirements⁴⁹.

3) Occupational Classifications of social workers

Among the official documents in Thailand, the occupational classifications of social workers are provided by a report published by the Department of Employment of the Ministry of Labour, entitled “Classification of Occupational Standards (Thailand)”. This report is prepared based on the International Standard Classification of Occupations, with the objective to clearly indicate occupational classifications as well as the further classifications within the respective classifications. There are no publicly available statistical information and other data in line with these classifications. However, as described in the section 3.2.1 (6) “information and data on workforce” below, the afore-mentioned “social worker positions” and “social workers” as per the occupational classifications are used to mean the same, for such purposes as compiling the data on the number of usage of employment related e-service by the Department of Employment⁵⁰.

The latest version of the “Classification of Occupational Standards (Thailand)” reports were prepared in 2020. There are four volumes, namely, “public health and related work sector”, “digital technology, communication and postal services, computer equipment and electronic circuit manufacturing sector”, “air and land transport, manufacturing and sales of vehicles”, and “manufacturing related to medical services, and herb and related manufacturing sector”. The “social worker” classification is under the “social and religious professionals” of the “legal, social and cultural professionals” of the “public health and related work sector” volume. The occupational classifications for “social workers” are indicated in Table 3-10. There are also classifications of “social welfare experts” under the “social and religious professionals”, separately from “social workers” [64].

Table 3-10 Classifications as per “Classification of Occupational Standards (Thailand)”

	Mission / responsibility	Sub-category
Social workers	<ul style="list-style-type: none"> • To provide social support directly to an individual, a group and / or a community facing problems and difficulties, and being unable to find initial responses, and hence having to depend on support. • To utilize existing resources to respond to the needs and problems of an individual, a group and / or a community. • To foster and develop capacities of an individual, a group and / or a community to solve and prevent problems, and to help himself / herself / itself. • To examine the methods to be used to solve and respond to problems and the ways to prevent problems from occurring, and to devise plans to solve and prevent problems. 	<ul style="list-style-type: none"> • Healthcare social workers • Child social workers • Gerontological social workers • Social workers, person with disabilities • Women and family social workers • Social workers, mild mental patient • Social workers, the destitute

⁴⁸ Interview of DSDW (12 January 2022).

⁴⁹ Interviews of DSDW (12 January 2022) and of OCSC (17 January 2022).

⁵⁰ Inquiries with the Department of Employment by phone calls and e-mails (in January 2022).

	Mission / responsibility	Sub-category
	- A social worker needs to have obtained a bachelor's degree in social work studies, academic fields related to sociology, or academic fields related to psychology; or to have a comparable qualification.	• Social workers, distinct groups
Social work and counselling professionals	<ul style="list-style-type: none"> • To provide advice and recommendations concerning the research and studies concerning social work, social welfare and social development. • To undertake learning, analysis and research concerning social work, social welfare and social development. • To undertake promotion, coordination and planning concerning social welfare and social work. • To collect and analyze information on social situations in order to formulate plans and devise policies in line with the current situations. • To provide advice during follow-up. 	<ul style="list-style-type: none"> • Social welfare experts • Social welfare experts, children • Social welfare experts, youth • Social welfare experts, women and family • Social welfare experts for persons with disabilities • Social welfare experts for social development

Source: Compiled with reference to [62]

(3) Budget

As mentioned above, national development policies of Thailand do not make specific reference to “social work” and “social workers”. With regard to the budget, there are no specific allocations for “social work” and “social workers”. However, the workforce involved in the provision of social services including social workers are among the target of human resource development under several budget items related to workforce development concerning main policy issues such as responses to ageing and support to early childhood development⁵¹.

(4) Licensing system

As described in the section 3.2.1 (1) “laws, policies and plans” above, SWPC is responsible for the registration and the licensing of licensed social work profession practitioners. The examinations for the issuance of the license and its acquisition (hereinafter referred to as “license examinations”) are organized only by SWPC, twice a year. The SWPC members with valid membership are entitled to apply for the examinations. If the membership is expired, the members need to apply for its renewal before applying for the examinations. For persons who are not yet the members, they are required to apply for the membership. Subject to its approval and the registration therein, they are entitled to apply for the examinations [65].

The requirements to apply for the membership is for an applicant to have graduated from the faculty of social work studies; or to have graduated from another faculty and attended training by SWPC (see the section 3.2.2 (2) below) ⁵² [66]. It can be interpreted that in principle, a person who is not a social worker or a social work profession practitioner as defined by the relevant Acts at the time of application is entitled to take the license examinations, on the condition that he/she follows the procedures described above.

The examinations consist of two types of examinations: i.e., one for theoretical subject with 100 questions and another for practical subject also with 100 questions. Both are written examinations with multiple choices. The applicant needs to pass both types of examinations. If the applicant passes either one of those, he/she will be exempted from taking examinations of the type that he/she has passed for the period of 3 years⁵³. Table 3-11 indicates the theoretical and practical subjects of the 2nd examinations in 2020. Table 3-

⁵¹ Interview of NESDC (17 January 2022).

⁵² Interview of SWPC (11 January 2022).

⁵³ Interview of SWPC (11 January 2022).

12 shows the results of the 2nd examinations in 2020 and the 1st examinations in 2021. While the results differ among different examinations, the figures in the table indicate that the number of applicants is not that high (even though it increased for the 1st examinations in 2021), and the percentage of successful examinees is not necessarily high. Considering that the examinees passing both theoretical and practical examinations need to follow additional steps indicated below in order to obtain the license, it is presumed that the year-on-year increase ratio of the number of licensed social work profession practitioners is not so high.

Table 3-11 Subjects of license examinations

	Subject	Score distribution (%)
1. Theoretical subject (Principles, philosophy, social work ethics)	1.1 Concept in terms of social studies and humanity studies	20
	1.2 Social situations and social problems	15
	1.3 Social work philosophy	20
	1.4 Professional ethics in social work	15
	1.5 Empowerment from the perspective of social work	15
	1.6 Laws related to social work	15
2. Practical subject (Practice)	2.1 Processes and methods	40
	2.2 Providing counseling from the perspective of social work	15
	2.3 Tools concerning social work	10
	2.4 Techniques and skills in the practice of social work	25
	2.5 Case management	10

Source: Compiled with reference to [65]

Table 3-12 Results of examinations

		Total number of examinees (persons)	Successful examinees (scored over 60%)		Average score	Highest score	Lowest score
			Number (persons)	Share (%)			
Theoretical aspect	2 nd exam, 2020	142	51	35.9	57.24	73.00	37.00
	1 st exams, 2021	185	97	52.4	59.87	82.00	33.00
Theoretical aspect	2 nd exams, 2020	128	78	60.9	62.25	82.00	41.00
	1 st exams, 2021	152	103	67.8	63.28	82.00	33.00

Sources: Compiled with reference to [67] [68] [69] [70]

For successful examinees of the license examinations, a license with one year validity is issued. Upon completion of various steps which are required to follow depending on the number of years of social work, the license with 4 year validity is issued to replace the previous one. After these initial steps, the license will be valid for 5 years. Its renewal needs to be completed before the expiry, by acquiring 50 points as stipulated by SWPC (see the section 3.2.2. (3) “Continuing education”), and by obtaining the signature from SWPC for approval⁵⁴.

Table 3-13 Procedures to follow after passing examinations

Before engaging in social work	Engaged in social work less than 1 year	Engaged in social work more than 1 year and less than 2 years	Engaged in social work more than 2 years, or engaged in social work since before 6 June 2012 ^(*)
Application for and acquisition of a license which is valid for one year			
Practical training: 240 hours	<ul style="list-style-type: none"> Continuation of work within the organization^(*) Application for a case review examination^(*) more than 10 months after and within 1 year after the application for the license as above 	Preparation of a work report (5 pages), and attendance at a working group meeting ^(*) 10 month after the application of the license as above and 2 years after the start of the engagement in social work	Preparation of a work report (5 pages), and attendance at a working group meeting ^(*)
Application for a case review examination ^(*) more than 10 months after and within 1 year after the application for the license as above			
Change of a license from the above to the one which is valid for 4 years			

Remark (*): No supplementary information or details concerning these points in the table above are not provided.

Source: Compiled with reference to [65]

⁵⁴ Interview of SWPC (11 January 2022).

Social work profession practitioners in Thailand work in various fields. There is only one type of license to be used for those fields as a professional qualification concerning social work, which is the one described above. There is just one exception, which is the case where a social worker is engaged in witness support in line with laws on criminal procedures. In this case, after obtaining the license for social work profession practitioners, separate application for and acquisition of the license concerned (application to the Ministry of Justice and acquisition of the license therein) need to be undertaken⁵⁵.

In Thailand, having or not having the license for social work profession practitioners is not directly linked to the remunerations or professional promotions, which is considered to be one of the reasons why the number of applicants for the license examinations does not increase. For instance, in the application guidelines for “social worker positions” of ordinary civil servants, having the license is not necessarily mandatory. With regard to remuneration, while other job categories such as medical practitioners are entitled to allowances if they have obtained the relevant license, similar allowances are not available for licensed social work profession practitioners⁵⁶.

(5) Implementation structure

In government agencies in Thailand, the persons in the “social worker positions” and others in charge of or involved in social work related tasks are generally assigned to undertake practical tasks related to social welfare work of the respectively affiliated agencies, as described in the section 3.1.1. (3) 1) above. The assignment of ordinary civil servants is undertaken based on the procedures stipulated by OCSC, and in line with the planning of the respective agencies.

At the time of This Thai Survey, the total number of social worker positions for ordinary civil servants is 1,253 positions, of which 1,077 are filled. The reasons for some positions being vacant include that the recruitment is on-going following the retirement of the civil servants who were previously in those positions, and that the potential candidates need to be promoted to the position levels concerned⁵⁷. Table 3-14 shows the number of positions by ministries and by position levels, based on the information made available at the interviews of This Thai Survey (the information concerned is not publicly available). By ministries, the number of positions is highest for MSDHS, which constitutes over 40% of the total, followed by the Ministry of Public Health and the Ministry of Justice. With regard specifically to senior professionals and experts, which are the higher position levels, the number is the highest for the Ministry of Public Health.

⁵⁵ Interview of SWPC (11 January 2022).

⁵⁶ Interview of DSDW (12 January 2022).

⁵⁷ Interview of OCSC (17 January 2022).

Table 3-14 Number of social worker positions for ordinary civil servants

	Number of positions					Of which those occupied
	Total	Practitioner	Professional	Senior professional	Expert	
MSDHS	548	243	255	49	1	451
DCY	74	16	51	7		71
DOP	33	14	12	7		28
DWF	22	15	6	1		15
DSDW	58	24	21	12	1	49
DEP	46	18	23	5		42
Office of the Permanent Secretary	315	156	142	17		246
Ministry of Interior	19	5	12	2		11
Department of Disaster Prevention and Mitigation	19	5	12	2		11
Ministry of Justice	283	67	214	2		260
Department of Probation	2	2				1
Department of Juvenile Observation and Protection	131	29	101	1		125
Department of Correction	150	36	113	1		134
Ministry of Labour	3	2	1			3
Social Security Office	3	2	1			3
Ministry of Public Health	400	119	216	62	3	352
Department of Medical Services	58	30	20	8		53
Department of Disease Control	35	3	6	26		24
DMH	90	33	32	22	3	79
Department of Health	7	2	4	1		6
Office of the Permanent Secretary	210	51	154	5		190
Total	1,253	436	698	115	4	1,077

Source: Compiled with reference to the reference material at the interview of OCSC (17 January 2022)

The tasks of those in the “social worker positions” are undertaken in line with the missions of their affiliated organizations. For instance, DSDW provides social welfare support for a broad range of target groups (see Table 3-2), those in the “social worker positions” are assigned to the central or provincial offices, or the facilities at the regional administration level (see Table 3-3), to provide social welfare support to the target groups in charge. For example, the tasks of the practitioner level civil servants include the visit and interviews of individuals, families and communities, collection of information for the confirmation of facts and analysis of problems, preparation and implementation of action plans concerning the protection of the rights to access government social services including advocacy of human rights, preparation and implementation of cooperation plans with various stakeholders such as SDHSVs and LAOs, and dissemination of relevant information (such as knowledge on entitlements, welfare and social services)⁵⁸. When those in the “social worker positions” visit the sites and conduct tasks including interview, those in other positions within and outside of the Department or the Ministry go together and collaborate in the actual conduct of work. The important aspects of the tasks of those in the “social worker positions” are the collection of information, confirmation of facts and analysis of problems based on the interview, and to do so through the participation of the target groups. The consideration for the human dignity of the target groups and their families is also considered essential⁵⁹.

⁵⁸ Interviews of DSDW (12 January 2022) and of OCSC (17 January 2022).

⁵⁹ Interview of DSDW (12 January 2022).

With regard to the tasks of DMH, the target groups are classified by ages, such as children, youth and the elderly. Those in the “social worker positions” supports the target groups in charge from the perspective of mental health. Specific tasks include the interviews and counselling for the identification of problems and preparation of support plans for the solutions, and the planning and implementation of awareness building activities for mental health at different locations such as schools and facilities for older persons⁶⁰.

Concerning the differences of tasks for the holders of the license for social work profession practitioners, according to This Thai Survey, it appears that there are not many instances where having a license directly affects the assignments or the types of duties (one of such is the nomination for board members and committee members of the committees and commissions concerned with social work professions as described in the section 3.2.1(1)). Nevertheless, it was explained that there is an increasing number of instances where the methodology of social work (such as counselling, analysis of problems and formulation of plans), the code of conducts and other knowledge related to social work are useful, and such knowledge and skills are required⁶¹.

As mentioned earlier, other than those in the “social worker positions”, there are many who are in charge of or involved in the tasks related to social work. This point was reiterated at the interviews of This Thai Survey. Box 2 describes the case of the Department of Probation of the Ministry of Justice on social work related tasks by ordinary civil servants other than those in the “social worker positions”, and the case of DLA of the Ministry of Interior on social work related tasks by LAOs which belong to a classification other than ordinary civil servants.

Box 2: Social work related duties of the Department of Probation and DLA

Under the Department of Probation, there are officials who are not in the “social worker positions” but undertake duties related to social work in line with the mission of the Department which is to provide social welfare to offenders. More tangibly, these official carry out investigation and evaluation to ascertain the truth through the interview of suspects prior to the trial, prepare support plans which include support needed for the suspects, and submit recommendations to the court. After the trial, they conduct interview with offenders serving sentences, investigate and evaluate the truth and, based on the outcome of the counselling, prepare plans concerning necessary support (including support in-cash and / or in-kind from the viewpoint of social welfare) and parole, and carry out monitoring of the offenders who have received support. For persons with drug dependency, they undertake survey, evaluation, planning and counselling in order for social welfare during the rehabilitation⁶².

Under DLA, while no “social worker positions” are attributed to the central level, there are officers who are in charge of the provision of elderly allowance, child allowance and sick persons’ allowance, as well as those in charge of devising support in relation to social welfare work of LAOs to be implemented in their respective jurisdictions. With regard to LAOs, there are 240 persons occupying “social worker positions”, and in addition, there are 7,300 persons occupying “community developer” positions who are responsible for overall community development. The assignment of these positions differs among LAOs in various locations. However, overall, there are persons occupying “social worker positions” in *tesabans* which have a larger number of staff in the organization, whereas in TAOs which have a smaller number of staff, those who occupy community developer positions are also tasked with social work related duties⁶³. There are also staff members responsible for care for children working in the early childhood development centers under the jurisdiction of LAOs. They can also be considered as persons undertaking social work related duties⁶⁴.

⁶⁰ Interview of DMH (12 January 2022).

⁶¹ Interviews of TASW (14 January 2022) and of DSDW (12 January 2022).

⁶² Interview of the Department of Probation (19 January 2022).

⁶³ Interview of DLA (14 January 2022).

⁶⁴ Interview of NESDC (17 January 2022).

(6) Information and data on workforce

1) Information on social service workforce

As mentioned above, the social service workforce in Thailand may be considered to be those engaged in social work related jobs/works under the industrial classification of “human health and social work”. The labour statistics indicate the figures for the workforce in the “human health and social work” as a whole. For instance, the 2020 labour force survey shows that, among others, the number of persons employed in this classification is 689.7 persons, against the number of persons in the total labour force, which is 37,680.2 million persons. It also indicates that the size of the total workforce and the number of persons employed in the classification concerned have remained mostly the same, despite some fluctuations. It can also be understood that the formal employment constitutes approximately 90 % of the workforce of that classification (630.0million persons), and approximately 80% of the persons employed in this classification are women, both for formal and informal employment [55]. However, this classification comprises a large number of job categories in the medical fields, and hence, it is considered difficult to understand the situations specifically of the social service workforce based on the statistical figures related to this classification.

It should also be noted that the statistical information specifically for social work or social welfare is not publicly available from open sources, including the labour force survey. The response from NSO to the direct inquiries made under This Thai Survey was that it does not compile information specifically on social work⁶⁵.

2) Information on social workers / social work profession practitioners

With regard to social workers / social work profession practitioners as defined under the relevant Acts, some information is available from the above-mentioned SWPC and the below-mentioned Thailand Association of Social Workers (TASW) which are the main professional associations for social work. Both associations show the information of their board members and steering committees on the respective websites. However, the number of members of SWPC is not publicly available. For TASW, there is a list of names of members which nevertheless is apparently being updated⁶⁶ [71]. According to the interviews and written responses of This Thai Survey, the number of members for SWPC is 3,975 persons as of the end of 2021, of which 2,967 persons are licensed social work profession practitioners⁶⁷. TASW has approximately 3,000 members. It was explained that confirming the exact number of members is difficult. It is because the membership fee of 200 to 300 baht (500 baht as per TASW website [72]) is relatively low and it is a life-time membership fee, and hence there are many cases where the members do not inform the Association of the change of their personal information including the affiliated organizations and addresses. While the Association is in the process of compiling membership information, also by gender and ages, the information is not publicly available⁶⁸.

Concerning the number of social workers in Thailand as a whole, SWPC sends inquiry forms to relevant

⁶⁵ Inquiries with NSO by phone calls (in January 2022).

⁶⁶ Interview of TASW (14 January 2022).

⁶⁷ Interview of DSDW (12 January 2022).

⁶⁸ Interview of TASW (14 January 2022).

public and private organizations. Under the survey in 2021, there were responses from 10 organizations. The total number of social workers listed in these responses was 2,218 persons. Since not all the organizations returned responses, the actual number of social workers would be higher. Regardless, it was explained that the breakdown of the outcome of the survey is not publicly available⁶⁹.

3) Information on “social worker positions” and position levels

The total number of persons in the “social worker positions” and the total number of the existing positions for ordinary civil servants are indicated in the annual report of OCSC entitled “Government Civilian Workforce in Thailand” [58]. Table 3-14 shows the breakdown by ministries and departments. The information therein was provided as response to the inquiries at the interviews of This Thai Survey, and it is normally not publicly available.

For public workforce, there is a number of classifications as indicated in Table 3-6, and the availability of the information concerning the workforce under these classifications can only be confirmed by different organizations in charge of the respective classifications. For this reason as well, it was informed that comprehensive information or data on the public force is not compiled at the time of This Thai Survey⁷⁰.

4) Occupational classifications of social workers

As described above, there is an occupational classifications concerning social workers within the “public health and related work sector”, and the classifications are described. However, statistical information based on occupational classifications, including those for social workers, are not publicly available. Under This Thai Survey, inquiries were made directly to the Department of Employment of the Ministry of Labour, and the response was that the Department does not comply information by such specific breakdowns. According to the information that the Department provided in response to the request made under This Thai Survey, there were 126 vacancy announcements in the “public health and related work sector” (in both public and private organizations), to which 229 persons applied through the Department’s application system (e-service), and the recruitment was made for 117 positions. It was also informed that the Department did not receive any report concerning the employment of social workers aboard⁷¹.

3.2.2 Development

(1) Academic institutions

1) Universities

1) -1. Overview

The study on social work in Thai is called “*sangkhom songkro sat*” (hereinafter referred to as “social work studies”). At the time of This Thai Survey, 6 universities offer degree programs of social work studies. Concerning all of these universities, the royal family, or individuals or foundations involved in social welfare activities and projects were involved in their establishments, and they are all well-known academic institutions in Thailand. Except for the Huachiew Chalermprakiet University, all are public universities, of

⁶⁹ Interview of SWPC (11 January 2022).

⁷⁰ Interview of OCSC (17 January 2022).

⁷¹ Inquiries with the Department of Employment by phone calls and e-mails (in January 2022).

which Mahachulalongkornrajavidyalaya University and Mahamakut Buddhist University are the only two public Buddhist universities in Thailand. Table 3-15 provides the outline of the degree programs of these universities.

Table 3-15 Universities with Social Work Degree Programs

University	Faculty offering social work course program	Faculty's location	Degree name
Thammasat University	Faculty of Social Administration	<ul style="list-style-type: none"> • Bangkok • Pathum Thani Province • Lampang Province 	<ul style="list-style-type: none"> • Bachelor of Social Work • Bachelor of Arts in Social Policy and Development (<i>English program</i>) • Master of Labour and Welfare Development • Master of Social Work (Social Welfare Administration and Policy) • Master of Social Work • Master of Science (Community Development) • Master of Arts (Justice Policy and Administration) • Doctor of Philosophy (Social Policy)
Mahachulalongkornrajavidyalaya University	Faculty of Social Science	<ul style="list-style-type: none"> • Phra Nakhon Si Ayutthaya Province (main campus) • Chiang Mai Province 	Bachelor of Social Work
Mahamakut Buddhist University	Faculty of Social Science	Nakhon Pathom Province	Bachelor of Social Work (Social Work)
Pibulsongkram Rajabhat University	Faculty of Social Sciences and Local Development	Phisanulok Province	Bachelor of Social Work (Social Work)
Prince of Songkla University	Faculty of Humanities and Social Sciences	Pattani Province	Bachelor of Social Work
Huachiew Chalermprakiet University	Faculty of Social Work and Social Welfare	<ul style="list-style-type: none"> • Samutprakarn Province (main campus) • Bangkok (Yonse campus) 	<ul style="list-style-type: none"> • Bachelor of Social Work Program • Master of Social Work Program in Social Welfare Administration • Master of Management Program in Hospitality Business Management for the Elderly • Doctor of Philosophy Program in Social Welfare Administration

Sources: Compiled with reference to [73] [74] [75] [76] [77] [78]

1) -2. Thammasat University

Of the universities mentioned above, this section provides descriptions of the Thammasat University, where a faculty on social work studies was established the earliest in Thailand, and which offers a range of degrees concerned. The Thammasat University was founded in 1934 by Pridi Banomyong who later served as the Prime Minister for a tenure. The bachelor's, master's and doctor's degree programs are offered in the Faculty of Social Administration [79] [73]. The Faculty is called the Faculty of "*sangkhom songkro sat*" in Thai, and the curriculum offered is about social work. It was explained at the interviews of This Thai survey that in English "Social Administration" is used due to the relations with the Public Welfare Department in the history of the university, by which the word "administration" (indicating public administration) is included⁷².

⁷² Interview of the Thammasat University (13 January 2022).

As indicated in Table 3-16, the Faculty of Social Administration of the Thammasat University offers 2 bachelor's degree programs, 5 master's degree programs and 1 doctor's degree program. Of these, the curriculum of the "Bachelor of Arts in Social Policy and Development (SPD)" is conducted in English language. In SPD, at the time of This Thai Survey, there are approximately 20 to 35 students for one year (approximately 80 to 90 students for the total of four years). Approximately 80% of the students are of Thai nationality, and the rest is mostly from ASEAN countries (including Myanmar, Cambodia and Malaysia). There are also students from Japan, China and Bhutan⁷³. Table 3-16 and Table 3-17 provide the outlines of the curriculums of SPC and the Master of Social Work (Social Welfare Administration and Policy), as the examples of the programs offered by the Faculty of Social Administration.

Table 3-16 Course Programs of the Bachelor of Arts in Social Policy and Development (SPD)

Year	Semester	Subject	Year	Semester	Subject
1	1	<ul style="list-style-type: none"> • Civic engagement • Thailand, ASEAN and the world • Social life skills • Communication skills in English • Creativity and communication • Academic writing 	3	1	<ul style="list-style-type: none"> • Analysis and evaluation of development and welfare programs • Globalization and international development paradigms • Comparative welfare states • International organizations and human rights framework • Negotiation and conflict resolution • Free elective (1)
	2	<ul style="list-style-type: none"> • Life and sustainability • Critical thinking, reading and writing • Fundamentals of religions and philosophy • General psychology • Introduction to sociology 		2	<ul style="list-style-type: none"> • Socio-political economies of global communities • Social welfare policies and development in ASEAN countries • Social protection • Strategic communication for social changes • Civil society management and development • Free elective (1)
2	1	<ul style="list-style-type: none"> • Introduction to political science • Introduction to law and legal system • Introductory economics • Human behavior in the social environment • Social change and social problems • Gender and social diversity 	4	1	<ul style="list-style-type: none"> • Social entrepreneurship and social innovation • Seminar • Transnational corporations and labor welfare • Migration and the changing society • Globalization and child rights • Public health and social well-being
	2	<ul style="list-style-type: none"> • Social research methods for social policy and development • Poverty and rural-urban development • Evidence-based social policy • Business and social development • Social policy theories and practice • Welfare economics 		2	<ul style="list-style-type: none"> • Development and social welfare project • Disaster management and social intervention • Social gerontology • Special topic in social policy and development

Remark: All the units are 3 units.
Source: Compiled with reference to [80]

Table 3-17 Course programs of the Master of Social Work (Social Welfare Administration and Policy)

[To take either one of the following]	Compulsory subjects	Elective subjects	Practice	
<A> Curriculum with a thesis	6 subjects -18 units	2 subjects - 6 units	6 units	Thesis - 12 units
 Curriculum without a thesis	6 subjects - 18 units	4 subjects - 12 units	6 units	Independent study - 6 units

⁷³ Interview of the Thammasat University (13 January 2022).

	Units		Units
Compulsory subjects		Elective subjects	
Human Behavior in Social Welfare System	3	Evaluational Research for Social Welfare Organizational Development	3
Theories and Approaches in Social Welfare	3	Policy Research for Social Welfare System Development	3
Application of Organizational Theory in Social Welfare	3	Social Welfare Organizational Development in Changing Environment	3
Social Welfare Planning and Policy Analysis	3	Strategy In Social Welfare Policy	3
Social Welfare Research	3	Data and Information System for Social Welfare Administration	3
Social Welfare Seminar	3	Social Services for Exceptional Groups	3
		Strategy of Social Welfare Knowledge Building and Development	
Field Work Practicum	6	Strategy in Social Welfare Administration	
Thesis	12	Advocacy	3
Independent Study	6	Utilization of Resources in Social Welfare Activities	3

Source: Compiled with reference to [81]

The bachelor's, master's and doctor's curriculums of the Faculty of Social Administration are revised every 5 years in consideration for instance of socio-economic changes. The bachelor's curriculums are under the review for the revisions to be made in 2 years after This Thai Survey. Concerning the contents of the revision of SPD, for instance, new subjects are planned to be added. These subjects concern the utilization of digital technologies which have increasingly significant impacts on social work and social welfare, and social policies and social work in the business sector which is related to the roles of stakeholders in social work and social welfare⁷⁴.

1) -3. Internship

The curriculums of the faculties on social work studies of the universities listed in Table 3-15 all include internship in organizations working in the fields of the students' academic majors. These organizations include government agencies, community organizations such as those providing support to the elderly, foundations, Thai and international non-governmental organizations and international organizations.

SPD of the Thammasat University organizes a 2-month long internship at the end of the 3rd year. As for the Thai language programs, there are 3 separate internships are in the 4th year of the bachelor's degree program. In the 1st internship, students learn basics of work at recipient organizations. In the 2nd internship, students prepare projects for the community. In the 3rd internship, students select specific topics and prepare projects for the community as in the 2nd internship. The master's degree program also includes internship⁷⁵.

(2) Training

With regard to training opportunities after graduation from the faculties (for those in the workforce), there are those provided by professional associations on social work as described below, and those provided by government agencies as well as their affiliated training institutes. In addition, there are also training activities undertaken as part of the projects implemented by international organizations.

⁷⁴ Interview of the Thammasat University (13 January 2022).

⁷⁵ Interview of the Thammasat University (13 January 2022).

1) Training by professional associations

SWPC and TASW collaborate in the organization of training for the purpose of the development of social workers. The outline of the training is described in SWPC website. The contents of the training are related to the (theoretical) subjects of the license examinations, including social situations and the theory and analysis of social issues; principles and concept of social works; concept of social science and humanities; ethics for social work professions; empowerment from the viewpoint of social work (concept and methodology of empowerment in society, and empowerment of social workers). The duration varies among the subjects, but is between 2 to 5 hours approximately. The requirement for trainees is the bachelor's, master's and/or doctor's degree (s) [82] [83] [84]. It was explained that the outcomes of SWPC activities, including the results of the training, are summarized in the form of the reports to be presented at SWPC Committee meetings, but are not publicly available⁷⁶.

SWPC and TASW are working on the development of workforce by taking into account the socio-economic situations concerning social work as well as the needs of trainees. From this perspective, TASW has been conducting annual questionnaire surveys on training needs for the recent 3 years. The most recent survey conducted before This Thai Survey was that of November 2021. The responses were submitted from members and non-members (several students). Many respondents expressed training needs concerning counselling, social therapy, laws and regulations on social work, application of technology in the conduct of work, as well as child protection and working with children. The outcomes of the survey are utilized for the planning of future training activities⁷⁷. SWPC has also been looking closely at the enactment and revisions of related laws and regulations. The most recent example in this regard is the promulgation of the Abortion Act, and SWPC is considering training contents in the relevant fields⁷⁸.

2) Training by government agencies

Government agencies undertaking social work related tasks, such as MSDHS, the Ministry of Public Health and the Ministry of Justice, organize training on social work targeting their respective staff, staff from other agencies, or in some cases general public. In case of the Department of Probation, there is an initial training of approximately 15 days, where those newly assigned to the Department learn theories and practice of the work, including methods for interviews and counselling. Social welfare is included in the contents of the training. Attending this initial training is required to be entitled to the allowance for probation practitioners (4,000 baht per month). In addition to this training, there are other activities organized on a regular basis, such as on-site training, e-learning, sessions for the exchange of opinions and technical meetings⁷⁹.

The Civil Service Training Institute under OCSC conducts training with the main purpose of developing capacities of ordinary civil servants concerning the management and development of human resources [85]. While the training specifically on social work is not organized, the training offered aims at strengthening more general, practical and administrative capacities, which are useful also in the conduct of social work⁸⁰.

Under DLA, the Local Provincial Development Institute (LPDI) carries out training targeting the staff of

⁷⁶ Interview of SWPC (11 January 2022).

⁷⁷ Interview of TASW (14 January 2022).

⁷⁸ Interview of SWPC (11 January 2022).

⁷⁹ Interview of the Department of Probation (19 January 2022).

⁸⁰ Interview of OCSC (17 January 2022).

local administrative organizations and other local governments. The subjects of the training include the management of human resources on local administration and community development, as well as social work and social welfare administration⁸¹.

(3) Continuing education

SWPC publishes a “continuing education manual for social work profession practitioners”, with a view to developing capacities of licensed social work profession practitioners. The manual is used also as a reference material concerning the steps to follow for the renewal of the license. As described above, the validity of the license is 5 years. It needs to be renewed before its expiry. For this purpose, it is required to accumulate 50 points by participating in the educational activities described in Table 3-18, based on the procedures described in the manual. After the completion of the required procedures, a document needs to be submitted to SWPC for the approval of the accumulated points [86].

Table 3-18 Areas of knowledge required for renewal of social worker license

Areas of education	Point
Knowledge and practical experiences on academic studies, skills, professional ethics and relevant laws concerning social work. and / or knowledge and practical experiences related to the fields of expertise of social work in order for the professional development of oneself (e.g., medical social work, children, youth and family, elderly, persons with disabilities, persons without permanent homes or settled shelters, social work in criminal procedures, community-related work, and work concerning multi-disciplinary meetings, administration and policies utilizing knowledge on social work and social welfare)	40
Knowledge and practical experiences related for instance to social science, humanity studies, psychology, behavioral science, information technology	10

Source: Compiled with reference to [86]

3.2.3 Support

(1) Employment

1) Career paths after graduation

The curriculum guidelines of the universities listed in the section 3.2.2 (1) “academic institutions” above include descriptions of possible career paths after graduation. For all universities, the first career path therein is “social worker”. Other opportunities include work in government agencies on social development, correction and protection, labour arbitration and human resource development; work in medical institutions; teachers and researchers; work in international organizations; work in Thai and international non-governmental organizations; entrepreneurship in social welfare and, in case of Buddhist universities, monks [73] [74] [75] [76] [77] [78].

However, with regard to the actual career paths, it appears that there are not necessarily many students who find employment directly related to their academic majors. In this regard, the case of SPD of the Thammasat University is described in Box 3.

⁸¹ Interview of DLA (14 January 2022).

Box 3: Examples of career options after graduating from SPD of the Thammasat University

The applicants to SPD of the Thammasat University are also interested in career options after the graduation. Many of them wish to find employment in international organizations. Meanwhile, approximately 65% of the graduates from SPD either find employment in private companies not related to their academic majors or join the family business, approximately 20% find employment in the field of international cooperation (e.g., Mae Fah Luang Foundation, International Organization for Migration), approximately 5% in government agencies (e.g., Ministry of Foreign Affairs), and approximately 10% continue on to the master's programs. As for the students in the Thai language bachelor's programs, more than half find employments in private companies. One of the reasons for a smaller number of students finding employments in the fields directly related to their academic majors or in the government is that the income of social work related employments is low. Another reason concerning employments in the government is that the number of available positions is small and the call for application is not frequent. There are a few cases where students are offered employment at the end of their internship as part of the curriculum. In these cases, the offers are presented more often from non-governmental organizations for which recruitment procedures are relatively straightforward when compared for instance to government agencies.

SPD does not officially provide recruitment support such as counselling for career options. Nevertheless, its short-term training for students includes how to prepare standard operating procedure (SOP) and curriculum vitae. After the completion of the internship, the training is provided in such a way as to reinforce the knowledge and skills acquired during the internship. SPD also invites its graduates and experts in relevant fields (including staff from private companies, government agencies, as well as Thai and international organizations), with a view to providing students with opportunities for students to learn about realities and needs at various workplaces⁸².

2) Fields of employment of social workers

As mentioned above, there are no statistical information or data which provide comprehensive information of the social service workforce in Thailand, nor are publicly available information concerning the fields of employment of social workers. Table 3-19 presents the number of ordinary members of SWPC, including those who are licensed social work profession practitioners. This information was provided by DOP in This Thai Survey, as a reference material concerning the number of social workers by the fields of employment (which is not publicly available)⁸³. The majority is in government agencies and organizations, with those in MSDHS constituting approximately one-third of the total.

Table 3-19 Number of permanent members of SWPC and breakdown by place of work

As of 30 September 2020

	Number of persons	Of which those having obtained license
MSDHS	1,328	1,061
Ministry of Public Health	666	586
Bangkok Metropolitan Administration	330	285
Ministry of Justice	317	262
Ministry of Interior	252	183
Ministry of Education	189	160
Thai Red Cross Society	44	41
Royal Thai Police	12	10
Ministry of Defense	10	7
Ministry of Labour	7	5
Universities	3	2
Private organizations	342	255
Others (not specified)	369	110
Total	3,869	2,967

Source: Compiled with reference to the reference material attached to the written response from DOP (received on 21 January 2022)

⁸² Interview of the Thammasat University (13 January 2022).

⁸³ Written response from DOP (received on 20 January 2022).

In This Thai Survey, the information on the actual tasks of these ordinary members or their assignment in the respective organizations was not available. When comparing the numbers in this table concerning MSDHS, the Ministry of Public Health, the Ministry of Justice, the Ministry of Interior and the Ministry of Labour with the number of persons in the “social work positions” indicated in Table 3-13, the number of SWPC members belonging to these ministries is higher. It was not confirmed whether all the persons in the “social worker positions” are the ordinary members of SWPC. However, it can be understood that not all the SWPC members who are social work profession practitioners are in the “social worker positions”.

Literature concerning social work profession practitioners in the private sector are apparently limited. Based on the relevant information obtained, Box 4 describes an example of Chulalongkorn Hospital which is affiliated with the Chulalongkorn University and operated by the Thai Red Cross Society.

Box 4: An example of social workers affiliated with a hospital

At the time of This Thai Survey, 36 licensed social work profession practitioners are affiliated with the Chulalongkorn University. These practitioners work as medical care social workers, and undertake tasks as part of the medical care team in the hospital. Their tasks include the provision of advice based on counselling, undertaking of referrals as deemed necessary, and the formulation of medical care plans based on the examination of facts and analysis of problems. This is with a view to allowing in-patients to receive appropriate treatment and care and also to have good quality of life in families and in society after they are discharged from the hospital. In addition, when necessary, they pay home visits to the patients who were discharged and provide advice in terms also of the living environment. This is to facilitate their recovery, and also to provide physical and mental support to the patients as well as their families both physically and mentally [87].

(2) Professional Associations

SWPC and TASW are main professional associations on social work in Thailand. While they differ in terms of history and missions, they collaborate for the development of social workers through such activities as training.

1) Social Work Professions Council

The Social Work Professions Council (SWPC) is an association which was established as based on the Social Work Professions Act in 2013. Its tasks include the establishment of service provision standards of social workers; registration of license applicants; issuance of the license and related certifications; issuance of notifications in the event of the violation of the code of conduct and service provision standards; promotion of education, training and research; promotion of the work of individuals and organizations involved in social work; validation of degrees for the approval of the membership application; and recommendations on the formulation of social work study curriculums at higher education institutions⁸⁴ [88]. As mentioned above, it is the only association in Thailand which organizes license examinations for social workers (social work profession practitioners).

The members of the SWPC Committee include one representatives from each one of the government agencies (Ministry of Defense, MSDHS, Ministry of Interior, Ministry of Justice, Ministry of Labour, Ministry of Education, Ministry of Public Health, Royal Thai Police and Bangkok Metropolitan Administration), one representative from TASW, two representatives from educational institutions with

⁸⁴ Interview of SWPC (11 January 2022).

social work study programs (elected among educational institutions), four representatives from Public Benefit Organizations (elected among Public Benefit Organizations) and 16 representatives elected among ordinary members. The membership includes ordinary members, as well as extraordinary members, supporting members and honorable members. The registration for the membership is voluntary⁸⁵ [14] [15].

2) Thailand Association of Social Workers

The Thailand Association of Social Workers (TASW) was established in 1958, with the objective to build capacities of social workers in Thailand. Its missions include the promotion of social work professions; promotion of innovations in social work and social welfare; advocacy of rights and empowerment to improve professional performance and capacities of social workers; improvement of work support and promotion in partnership with the networks in various sectors inside and outside of Thailand; and the strengthening of organizational management capacity based on good governance. At the time of This Thai Survey, the TASW Committee comprises 18 members [72]. While the members of TASW are social workers, the acquisition of the license is not mandatory. The registration for the membership is voluntary⁸⁶.

The office of TASW is located in the compound of the Faculty of Social Work of the Thammasat University. The Association is nevertheless an autonomous organization and does not belong to the Faculty. The office is at the current location for historical reasons that main members at the time of its establishment were professors at the Faculty, and that placing the office in its compound was considered favorable in terms of financial viability. In view also of financial viability, annual meetings and training of TASW, as well as the meetings and activities of SWPC are still often organized in the meetings rooms of the Faculty⁸⁷.

As mentioned above, TASW was established earlier than SWPC. Upon establishment of SWPC, various activities which had been carried out by TASW including training have gradually been shifted to be under the main responsibility of SWPC. However, two associations continuously collaborate. While their division of roles is not clearly set, SWPC generally functions as a regulator, while TASW takes charge of capacity building activities. For instance, it is often the case for training that TASW looks mainly after the arrangement of instructors, while SWPC takes charge of the management including the budget. In addition to training, other activities include dissemination of information on social work, and the organization of on-line forums and technical meetings. TASW also summarizes the results of the activities for internal purposes and they are not publicly available⁸⁸.

(3) Code of conduct

The Social Work Professions Act stipulates that social work profession practitioners abide by the regulations of SWPC and the ethics of social work professions. The code of conduct for social workers is established by SWPC. The “Regulations of the Social Work Professions Council on the ethics of Social Work Profession 2019” consists of 6 chapters as described in Table 3-20. The code of conduct is available from the website of SWPC [89].

⁸⁵ Interview of SWPC (11 January 2022).

⁸⁶ Interview of TASW (14 January 2022).

⁸⁷ Interview of TASW (14 January 2022).

⁸⁸ Interview of TASW (14 January 2022).

Table 3-20 Outline of the code of conduct for social workers

Chapter	Content	Outline
1	Personal ethic	Including awareness on one's role and mission, responsibility, honesty, and enhancement of knowledge and skills on a regular basis
2	Professional ethic	Including conduct of work in line with professional principles and service standards, preservation of dignity in conduct of work, avoidance of illegal and illegitimate acts, continuous professional improvement and efforts to respond to changes
3	Ethic for recipients of services	Including respect for a person's rights, values and diversity and consideration for the benefits of recipients, implementation of participatory work in respect for the decisions of recipients, and confidentiality obligation
4	Ethic for persons involved in professional work	Including respect for the rights and missions of the participants in inter-professional / multi-disciplinary teams and networks, mutual support, enhancement of unity, and mutual recognition of work achievements
5	Social ethic	Understanding of social situations, issues and needs (such as contribution to materializing changes to improve people's well-being and social justice)
6	Ethic for affiliated organizations	Including strengthening of organizations for the benefits of the recipients of services, responsibility towards the organization, and preservation of dignity of the organization

Source: Compiled with reference to [89]

In addition, in order to indicate the steps to follow to put into practice the code of conduct, SWPC issued service provision standards for social work profession practitioners. There are six sets of standards, namely, ethical standards, social work professional standards, standards on knowledge and its application to work, standards on professional communication, standards on the conduct of work and recording of information for that purpose, and the standards on supervision for the improvement of the profession. These standards are also available from the website of SWPC⁸⁹ [90].

(4) Career development

The main form of support for career development of social workers in Thailand is the training as described above. For ordinary civil servants, the experiences in the respective fields are taken into account for the promotion of position levels. Training activities and the acquisition of an academic degree to accumulate relevant experiences are also encouraged. With this background, the study leave scheme is available. It is considered to be a right for civil servants, and salaries are continuously provided during the study leave⁹⁰. Box 5 describes an example of academic and career path of a social worker, including the opportunities for such forms of career development.

Box 5: An example of career options and career development for a social worker

Ms. K has obtained a bachelor's degree from the Faculty of Social Work and Social Welfare of the Huachiew Chalermprakiet University. For the internship which was carried out during the last 2 months of the curriculum, she was involved in the counselling work at a Medical Center, in the support work for drug dependent children at YMCA, and in the welfare service work for outpatients at a police hospital. After the internship, while she received an offer of employment from the police hospital, she wished to find employment in a different field and took a civil service examination. After the examination, among the options including the Department of Health and DMD in the Ministry of Public Health and the Department of Correction, she chose DMH which would be the work within the central Ministry. When she entered the Department, she was first assigned to the children's mental education project at a Mental Health School, and then transferred to the current work position concerning support to the elderly.

⁸⁹ Interview of SWPC (11 January 2022).

⁹⁰ Interview of DMH (11 January 2022).

At the time of This Thai S, she is on a study leave and is affiliated with a master's program at NIDA. Upon termination of the study leave, she will return to the elderly support work, and her research thesis at NIDA will be taken into consideration at the time of her career promotion. When she was promoted to a higher position in the past, the experiences that were taken into consideration included her thesis on students' life skills which was based also on the information collected through her work at the Mental Health School, and the articles she wrote on such topics as responses to domestic violence and mental care for the elderly which were posted on the column pages of major newspapers for several years. As for continuous capacity development and career development, she has been taken part in a number of short-term training sessions related to social work and on general work skills (such as computer and human resource development), which have been organized regularly in and out of the Department⁹¹.

(5) Supervision

The tasks of those in the “social worker positions” carried out in line with the missions and duties of the affiliated organizations. The supervision is also provided in accordance with the reporting structure concerned⁹².

With regard to the conduct of work by licensed social work profession practitioners in general, the compliance to the code of conduct is highly recommended. In the event of the allegations for the violation of the code of conduct by a licensed social work profession practitioners, the Ethics Committee of SWPC undertakes investigations and determines possible penalties based on the results of the investigation. The possible penalties include written warning, probation and self-discipline, suspension of the license (for a period deemed appropriate, not exceeding 1 years), and cancellation of the license [14] [15]. There are also specific provisions stipulating on various matters such as the reporting of allegations, and appeals by the suspects [91].

(6) Dissemination and awareness building

Concerning public relations and awareness building activities to raise the recognition of social workers in society, the relevant activities are apparently limited, including those undertaken by professional associations. TASW discuss about this issue at its annual meetings. For instance, annual meetings are organized in the respective regions of the country (North, Central, Northeast and South), where members and stakeholders (including staff members of central and local level government agencies, who are not the members) take part, and in the most recent annual meeting, there was a panel discussions on the roles of social workers⁹³.

An examples awareness building is the “outstanding social worker award”. In Thailand, persons who have made particularly notable contributions in specific fields are regularly presented with awards. For social work, the awards began in 1980 under the initiatives of the then Department of Public Welfare, the Faculty of Social Administration of the Thammasat University, SWPC and TASW. Since then, the awards for social work have been presented annually. In 2020, the awarding ceremony for outstanding social workers of 2019 was organized by DSDW, Dr. Pakorn Angsusing (first awardee) Foundation and other related networks. For the year concerned, 13 persons were awarded. Since its beginning in 1980, the total of 289 persons were presented awards [92].

⁹¹ Interview of DMH (11 January 2022).

⁹² Interview of OCSC (17 January 2022).

⁹³ Interview of TASW (14 January 2022).

With regard to awareness building for social workers in Thailand, it was pointed out at the interviews of This Thai Survey that the recognition and understanding for social workers have remained limited. One of the reasons referred to is that the history of social work is relatively short in comparison to the work of medical services and social services as part of community development. There was also a remark that the media, including the public media, tends to draw attention to the involvement of social workers in the donation of goods and cash and therefore, the social workers' involvement for instance in the survey and research for the solution of problems⁹⁴.

On fact, there is a fair number of social workers whose main responsibilities are to assist in the adjustment of home environment and in the application for social welfare equipment, and to provide various allowances on social welfare⁹⁵. These social workers seem to consider that they provide support to those who need support, and are generally not well conscious that they are carrying out social work⁹⁶.

3.3 Impact of COVID-19 on the social welfare sector

3.3.1 Overview of the impact of COVID-19 on the social welfare sector

According to the Ministry of Public Health of Thailand, the accumulated number of COVID-19 cases in Thailand as of 14 January 2022 is 2,308,615 persons, and the accumulated deaths, 21,898 persons [93].

In Thailand, the first case of COVID-19 in the Southeast Asia was reported on January 13, 2020 [94]. The government set up the COVID-19 Situation Administration in order for the efficient responses and centralize the provision of information [95], with a view to controlling the infection. The economic measures and emergency support measures for companies and vulnerable households by the Thai government include the following, the total of which is equivalent to 15% of GDP [94] [96] [97] [98].

The responses devised in the field of social welfare is described in Figure 3-4. This figure was referred to by NESDC during the interview for This Thai Survey, as part of the response to a question concerning the impacts of COVID-19 on social welfare in Thailand and responses of the Thai government. These include new social assistance payments for workers in the informal sectors, as well as farmers, fishers and herders; the increase in the amount of existing allowance for older persons, persons with disabilities (referred to as PWD in the table), children in impoverished households, poor population and vulnerable population; and the welfare card project targeting poor population and vulnerable population⁹⁷ [99].

⁹⁴ Interviews of DSDW (12 January 2022) and of the Thammasat University (13 January 2022).

⁹⁵ Interviews of DLA (14 January 2022) and of the S-TOP Project (17 January 2022).

⁹⁶ Interview of the S-TOP Project (17 January 2022).

⁹⁷ Interview of NESDC (17 January 2022).

	Target group	Program	# receiving COVID-19 payments	Value benefits for 3 months (baht) 15,000	Implied expenditure (baht)	% of GDP	% of total COVID-19 response package
New emergency social assistance payments	Informal sector workers	"No-one left behind"	15,300,000	15,000	229,500,000,000	1.36%	17.00%
	Farmers, fishers, herders*	Farmer's assistance	7,466,527	15,000	111,997,905,000	0.66%	11.20%
Top-up payments through existing programs	Elderly	Old Age Allowance	4,056,596	3,000	12,169,788,000	0.07%	1.22%
	PWD	PWD Allowance	1,330,529	3,000	3,991,587,000	0.02%	0.40%
	Children in poor families	Child Support Grant	1,394,756	3,000	4,184,268,000	0.02%	0.42%
	Poor/vulnerable individuals	State Welfare Card Program (Apr-Jun)	1,164,222+	3,000	3,492,666,000	0.02%	0.35%
	Poor/vulnerable individuals	State Welfare Card Program (Oct-Dec)	All SWC recipients	1,500	20,922,777,000	0.12%	2.09%
TOTAL SOCIAL ASSISTANCE			30,712,630		386,258,991,000	2.29%	38.6%

Source: [99]

Figure 3-4 Summary of social welfare support measures on the impact of COVID-19

Another major program concerns the approval of a large scale of budget to be allocated to the Ministry of Interior (through the “*Tambon* Smart Team Project”) and to the Ministry of Higher Education, Science, Research and Innovation (through “U2T Project”), in order for the employment of unemployed persons and new graduates as community developers. Community developers collect basic information of *tambons* and villages, as well as data concerning the strength and potentials at the *tambon* and village levels. The data collected is utilized for the formulation of plans to improve the well-being of target sites⁹⁸.

3.3.2 Issues and initiatives in relation to social service workforce

(1) Cases reported at interviews of This Thai Survey

It was pointed out at the interviews of This Thai Survey that the spread of COVID-19 infection and the resultant implementation of prevention measures by the Thai government have largely been affecting the work of social workers. Nevertheless, various measures have been taken in to address the issue.

Th point which was raised by the largest number of interviewees was that the work of social workers is generally undertaken face to face, and for this reason in particular, the impacts of COVID-19 have been serious. Due to the travel restrictions and other preventive measures, the visits to the work sites and target households became difficult. It was explained that in a number of cases, even when the government staff

⁹⁸ Interview of NESDC (17 January 2022).

from the provincial and/or district offices or from the affiliated organizations were able to visit the sites, the central level staff, who would conventionally collaborate in the work on-site, were unable to do so. There have also been cases where the staff from the provincial and/or district offices have also been unable to visit sites, and volunteers who had conventionally been carrying out activities under the instruction of the staff, were obliged to work beyond their officially designated scope of work⁹⁹.

The responses in these situations included increased utilization of such means of communication as telephone or e-mails in lieu of direct visits to the target of support, and introduction or expansion of communication / reporting mechanism based for instance on SNS. At the same time, in order to further support the work of volunteers, on-line training was organized and preventive tools were provided from public and private organizations. If the response from the central, provincial and/or district level staff is required and yet they were unable to visit the sites concerned, as in case for instance of healthcare social workers, the report from the site is sent with photos attached. The central level staff determines relevant responses based on the report and the attached photos. If the case is deemed serious, the staff visits sites by well respecting preventive measures¹⁰⁰. In case of the Department of Probation, the staff has resorted to on-line interviews and counselling, instead of the conventional on-site interviews and counselling. The detention facilities collaborate in terms for instance of setting up and securing internet connection¹⁰¹.

It was also pointed out that further utilization of e-service introduced by the Thai government, such as on-line application, has further been encouraged, and the number of users has increased¹⁰². Concerning the provision of social welfare allowances under the responsibility of LAOs, an increasing number of persons have changed the payment method from the conventional direct cash payment to transfer to bank account. Nevertheless, as the target of social welfare services include a fair number of persons without internet access or necessary equipment. In such cases, community leaders such as village heads and *tambon* heads have continuously been preparing and submitting necessary documents on their behalf. Hence, these community leaders continue to play an important role in the implementation of social welfare work at the local level¹⁰³. Concerning health aspect, there were cases where some of those in the “social worker positions” supported the work of divisions and departments other than their own. For instance, as part of the care for patients at the field hospital which was set up during April and August 2021 (the period when the number of infection cases rapidly increased and lockdown was imposed), the staff of DMS including those in the “social worker positions” worked in shift to provide counselling (in principle by video or telephone) on a temporary basis. With regard to the hotline 1232 of the Ministry of Public Health, which normally responds to callers either by automatic messages or by a dedicated staff, the staff of DMS joined its counselling work for one month when the number of users rapidly rose¹⁰⁴.

COVID-19 also affected the license examinations for social work profession practitioners. The examinations had conventionally been organized in one location in Bangkok in order to provide the same

⁹⁹ Interviews of CDD (12 January 2022), of DSDW (12 January 2022) and of OCSC (17 January 2022), among others.

¹⁰⁰ Interviews of SWPC (11 January 2022), of CDD (12 January 2022) and of DSDW (12 January 2022), among others.

¹⁰¹ Interview of the Department of Probation (19 January 2022).

¹⁰² Interview of DSDW (12 January 2022).

¹⁰³ Interview of DLA (14 January 2022).

¹⁰⁴ Interview of DMH (11 January 2022).

environment for examinees. However, the examinations in December 2021 were organized on-line, for the first time. The examinees were allowed to access the examination venue in Bangkok from different locations including their respective homes, provided that they fulfilled specific requirements (including the installation of cameras to prove that other people were not around). Of 200 original applicants for the examinations, 20 to 30 persons were unable to fulfill the requirements and had to withdraw their applications. Taking this into account, and in view of the instability of internet connections in remote areas, as well as the fact that there are examinees who lack information technology literacy, the examinations for 2020 are planned to be organized both on-line and on-site (on the same date), twice a year¹⁰⁵.

The general civil service recruitment examinations, which all persons wishing to enter civil service need to take, including those seeking “social worker positions” were also affected. While the major recruitment examinations are organized generally once a year in July or August, the ones for 2021 were postponed several times. The further postponement was announced in January, just before This Thai Survey. Some on-line examinations were organized for a small number of applicants. However, this was not sufficient for all the applicants, and most of them continue to wait for the examinations to be organized¹⁰⁶.

There have also been impacts on education. The Thammasat University organized remote lectures for most of the academic periods in 2021. AS of December 2021, it planned to resume on-site classes in January 2022. However, in line with the government directives issued at the end of December, it would continuously provide lectures remotely. When attending classes by sitting in front of the computer the whole day, students would lose concentration. Some students had more arguments for instance with their parents as they spend more time at home. Some students shifted their place of study from homes for instance to a commercial facility and thus were able to better concentrate. In any case, remote classes and lectures have serious psychological impacts on students¹⁰⁷.

(2) Cases reported to OSCC

As mentioned above, OSCC (Hotline 1300) functions as a consolidated point of reception and response to the problems such as violence, exploitation and trafficking in persons [33]. Table 3-21 shows the breakdown of the number of cases reported to OSCC from 2019 to 2021. With regard to the information concerning COVID-19, there were over 100,000 cases of inquiries in 2020 when the first case was detected. The number declined to over 20,000 cases in 2021. While the reason concerned is not provided on the website of OSCC, it was presumably due to the availability of information from various information sources as the infection expanded.

The number of inquiries concerning household poverty was approximately 5,000 cases in 2020, and it exceeded 37,000 cases in 2021. While the reason for this rapid increase was not provided on the website of OSCC, there have been a number of reports from other information sources describing poverty due to COVID-19. The number of inquiries on vagrant (s) and housing / shelter has been increasing since 2019. Similar to the above, the impacts of COVID-19 are deemed serious in this regard as well.

The detailed information on the cases reported, and on the responses taken are not provided, also in the OSCC

¹⁰⁵ Interview of SWPC (11 January 2022).

¹⁰⁶ Interview of OCSC (17 January 2022).

¹⁰⁷ Interview of the Thammasat University (13 January 2022).

website. However, considering the subjects of inquiries, many of them apparently concern social welfare. It should also be noted that OSCC is tasked to receive inquiries, confirm the details, identify necessary support and delegate the work to (a) relevant organization (s). In the conduct of such tasks, especially in the situation where the number of inquiries has been increasing due to the impacts of COVID-19, it is deemed useful to acquire knowledge and skills concerning the methodology of social work including interviews, counselling, confirmation of the facts and coordination with relevant organizations.

Table 3-21 Number of inquiries and reports to OSCC

	2019	2020	2021
Inquiries for information concerning COVID-19	-	114,652	23,518
Household poverty	5,911	5,060	37,099
Violence	3,069	2,296	3,111
Of which domestic	2,108	1,627	2,379
Of which non-domestic	961	669	732
Vagrant	1,570	1,661	4,002
Housing, shelter	1,553	1,607	2,802
Solicitation for money	1,789	761	1,253
Unintended pregnancy	251	-	-
Murder	159	-	-

Unit: case

Source: Compiled with reference to [100]

3.4 Priority issues for developing and strengthening social service workforce

As mentioned above, the term “social worker” is used in Thailand to refer to social workers and social work profession practitioners as defined in the relevant laws and regulations (the Social Welfare Promotion Act and the Social Work Professions Act). It is also used as a name of a position in public and private organizations. In addition to these “social workers”, there is also a number of people who are in charge of or involved in social work (*sangkhom songkro*) for instance in public organizations and private foundations / associations. There are also people who take part in social work in various capacities including *tambon* heads, village heads and community group leaders.

In order to strengthen the social service workforce in Thailand, it is deemed important to improve the overall knowledge and skills of various workforce close to the target of support, and at the same time, to consolidate the mechanism for the enhancement of persons in the “social worker positions” and licensed social work profession practitioners, with a view to developing and increasing the number of social workers with specialized knowledge and skills.

3.4.1 Improvement of knowledge and skills of the social service workforce

In Thailand, human development, including the workforce involved in social work, is an important national issue. It was pointed out in This Thai Survey that subjects concerning social work have been diversifying with socio-economic changes, and that the targets of support for social work (*sangkhom songkro*) have been expanding. In addition to social welfare support for the elderly and children, and the consolidation of community welfare systems, which are important policy issues, there are other intensifying issues and problems that need to be addressed. These include cross-border crimes, disasters, internet dependency with pertaining criminal risks, and most recently, the impact of COVID-19. In this context, swiftly and

continuously attending to these problems on a daily basis has become increasingly important, as in the case of physical and psychological support to the victims of these problems and to people facing risks. In the meantime, the number of persons in the “social worker positions” and of licensed social work profession practitioners remains limited. For the reasons described in the section 3.4.2 below, enhancing these positions and persons would call for a mid- to long-term, and comprehensive approach.

In such a situation, it would be necessary for the social service workforce engaged in on-site social work tasks and activities close to the target of support (e.g. *tambon* heads, village heads, community group leaders, (cum) volunteers and LAO staff) to recognize the problems and issues, endeavor to prevent them by disseminating relevant information, consider appropriate responses to problems and issues when they arise (i.e. providing advice, coordinating with related organizations, requesting government support, and so forth), and to be prepared at least to provide preliminary responses. For this purpose, it is deemed important to strengthen their knowledge of the issues concerned, as well as the knowledge of the methods of support along with the capacity to put the support into practice. In other words, it would be important for instance to upgrade overall understanding of the issues and problems; strengthen capacities to identify specific impacts on community residents as well as persons in need for support and to analyze the content of the support; and to improve understanding of social welfare programs of the public and private organizations in terms for instance of the contents, organization in charge, and the application procedures (including e-service).

3.4.2 Development of social workers with specialized knowledge and skills, and systematic approach for their enhancement

In This Thai Survey, the importance of developing and increasing the number of social workers (i.e. those in “social worker positions” and licensed social work profession practitioner) with specialized knowledge and skills was pointed out. The subjects for which specialization would be required include medical knowledge (such as knowledge and skills related to first aid, emergency treatment and mental health) concerning care for the elderly and children, which is a major policy issue. In addition, as laws and regulations concerning social work in general and related subjects have frequently been enacted or revised, the importance of improving knowledge on laws and regulations was also pointed out. The strengthening of knowledge on the methods of work is also attached importance, such as the counselling and social therapy of the persons needing support and their families, as well as the utilization of technology. According to This Thai Survey, efforts have been made to enhance the specialized knowledge and skills through for instance continuing education by professional associations and capacity development training by public and private organizations, of which reinforcement is deemed important.

In addition to the promotion of the capacity development as such, it is also deemed important to increase the number of social workers with specialized knowledge and skills. The current difficulties in this regard are mainly attributed to the facts that the number of “social worker positions” in the public and private organizations is small and their remuneration is not favorable; the employment of qualified persons for instance with social work degrees is thus not promoted; that the number of persons having received education and/or training necessary for “social worker positions” is small; that in this situation, the number

of candidates to be recruited would further decline if more specialized qualifications added; that the linkage between the acquisition of the license for social work profession practitioners and the performance evaluation or professional promotion; and therefore the number of persons wishing to obtain the license does not increase. Another underlying reason is the limited recognition and understanding of social workers in society in general.

In order to increase the number of social workers with specialized knowledge and skills, it is important to address each one of these factors. Achieving this would require the increase in number of “social worker positions”, improvement of remunerations, strengthening of the linkage between the degrees and license with recruitment and performance evaluation, in addition to the promotion of recognition and understanding of social workers in society. These are the issues that would require mid- to long-term responses at the policy level. Furthermore, there are causal relations among the aforementioned factors, and hence the fundamental solution of issues concerning one factor would require the solution of issues concerning another factor. For instance, in order to recruit a person with specialized knowledge and skills, it is necessary to ensure that there are people with qualifications required for the post concerned, for which further development of human resources with such qualifications would be important. This would only be possible if there is a larger number of applicants for the faculties on social work studies and for license examinations. This in turn requires the consolidation of mechanisms by which the specialized knowledge and skills which are acquired would be linked with the improvement in remunerations. In order to develop and increase the number of social workers with specialized knowledge and skills, it would be important to draw attention to these causal relations among the factors and systematically address the pertaining issues, also at the policy level.

Chapter 4 Current Status of Social Service Workforce: Cambodia

4.1 Overview of social welfare sector

4.1.1 Policies, systems and challenges for social welfare

(1) Introduction

Social work in the Kingdom of Cambodia (hereinafter referred to as “Cambodia”) began in 1947 with the first governing body, the Ministry of Information and Social Affairs, and is now mainly carried out by the Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY). Over the past few decades, the social sector in Cambodia has undergone significant changes. Since the advent of the United Nations Transitional Authority in Cambodia (UNTAC), non-governmental organizations (NGOs) have played an important role in the provision of social services as the Cambodian government has begun to rebuild its infrastructure and the government’s financial and human resources are limited [1] [2].

Under the socialist regime of the 1980s, relief for wounded soldiers, victims of unexploded landmines, and families who had lost their male heads of households was the responsibility of the Ministry of Social Affairs and the Women’s Association, a subordinate organization of the Khmer People’s National Liberation Front. At that time, there was only so much the government could do, and the government had to rely on relatives and a few foreign NGOs. The first line of social work was carried out by a few international NGOs and a small number of Cambodian staff sent by the relevant ministries as “interpreters” and “assistants” to international workers [3].

After the conclusion of the Paris Peace Accords¹ in October 1991 and the subsequent provisional rule by UNTAC, Cambodia rejoined the international community as the new Kingdom of Cambodia after the general election in May 1993 and the promulgation of the Constitution of the Kingdom of Cambodia in September 1993. In the 1990s, a large number of international NGOs and United Nations (UN) agencies that had been engaged in relief activities in refugee camps poured into Cambodia. This rapid increase in aid organizations and their activities led to increased dependence of the government and people on external aid. At the same time, many local NGOs were established by Cambodians, and many Cambodians were involved in the reconstruction process as NGO workers. The content of their activities expanded from emergency relief to addressing various social development issues. At that time, there were no educational institutions that taught social work, but Cambodian social workers grew up by gaining practical experience at international NGOs and taking short-term training courses provided by NGOs [3].

Since the 2000s, Cambodia has experienced stable economic growth, achieving lower middle-income country status by 2015, with the goal of achieving upper middle-income country status by 2030. Driven by the garment industry and tourism, Cambodia has become one of the fastest-growing countries in the world. Since the 1990s, progress has been made in the areas of poverty reduction and human development, mainly through external aid. However, many of the interventions have been partially ad hoc, relying heavily on the financial resources of donors. In response to this situation, in 2011, MoSVY formulated the National Social

¹ The official name of the agreement is the Comprehensive Cambodian Peace Agreement.

Protection Strategy for the Poor and Vulnerable 2011-2015, a strategy for social protection, including social welfare, for the poor and vulnerable, based on the awareness that support for the poor and vulnerable is limited [4]. As stated in the strategy, the challenges and needs in the field of social welfare have become increasingly diverse and complex, including the provision of social services to the poor, disabled, elderly and other vulnerable groups, response to children in alternative care, and prevention and response to violence against women and children. MoSVY, international and local NGOs, UN agencies, and other development partners are required to respond to these challenges and to train and strengthen human resources to deal with them in the field.

On the other hand, in Cambodia, people with difficulties and the elderly have traditionally been cared for by their families and relatives, and when this is not possible, local Buddhist temples have provided a place to live. In Cambodia, social welfare and social work are generally viewed as charity work to help the poor and the unfortunate. It is still a challenge to understand the significance and needs of social work, which includes not only charity and service provision, but also empowerment of the people and actions to improve the environmental context [3] [5].

(2) The Constitution and government policies

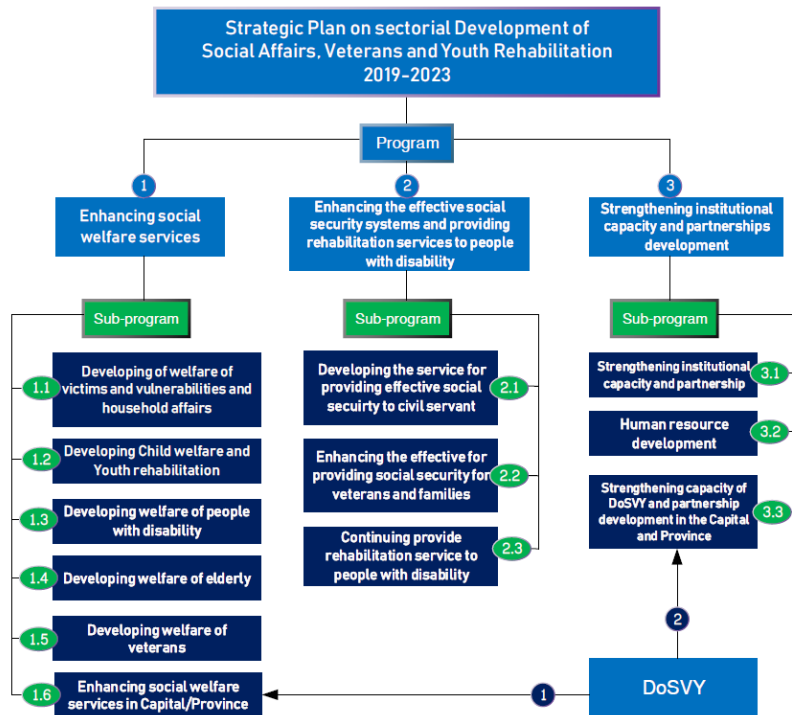
In the Constitution of Cambodia, in relation to social welfare, Article 36 provides for the right to social security and social benefits; Article 46 provides for the protection of women's employment, medical care, children's education, and an adequate standard of living; Article 72 provides for the guarantee of the health of the people and free medical consultations for the poor; Article 73 provides for attention and support for women and children and for the establishment of nurseries; Article 74 provides for the support of the disabled and the families of combatants; and Article 75 provides for the establishment of a social security system for workers and employees [6] [7].

In the National Strategic Development Plan (NSDP) 2019-2023, which is a roadmap for the implementation of the Rectangular Strategy², the national development policy, MoSVY has identified the following three priority areas: (1) enhancing the efficiency of the social welfare services³; (2) improving the efficiency of the social security systems and providing rehabilitation services for persons with disabilities; and (3) strengthening institutional capacity and developing partnerships.

The current strategic plan of MoSVY, the Strategic Plan on Sectorial Development of Social Affairs, Veterans and Youth Rehabilitation 2019-2023, states that in order to realize the Rectangular Strategy and NSDP, the following programs and sub-programs will be implemented as shown in Figure 4-1 [8].

² The Rectangular Strategy for Growth, Employment, Equity and Efficiency: Building the Foundation Toward Realizing the Cambodia Vision 2050, Phase IV. Prime Minister Hun Sen first announced the Rectangular Strategy in 2004 as the national development strategy. The current version is the Fourth Rectangular Strategy, released in 2018. The rectangular refers to growth, employment, equity and efficiency.

³ It includes welfare for the vulnerable and poor, child welfare and youth rehabilitation, welfare for persons with disabilities, welfare for the elderly, and welfare for veterans.



Source: [8]

Note: DoSVY is the Department of Social Affairs, Veterans and Youth Rehabilitation.

Figure 4-1 Structure of the Strategic Plan on Sectorial Development of Social Affairs, Veterans and Youth Rehabilitation 2019-2023

With regard to social security, the National Social Protection Policy Framework (NSPPF) 2016-2025, approved by the Council of Ministers in 2017, sets out a long-term roadmap for the development of social protection systems, focusing on the two pillars of social assistance and social security. Social assistance consists of the four components: (1) emergency response, (2) human capital development, (3) vocational training, and (4) welfare for vulnerable people. Social security consists of the five components: (1) pensions, (2) health insurance, (3) employment injury insurance, (4) unemployment insurance, and (5) disability insurance.

In addition to MoSVY, the Ministry of Economy and Finance (MEF), Ministry of Labour and Vocational Training (MoLVT), Ministry of Health (MoH), Ministry of Education, Youth and Sport (MoEYS), Council for Agricultural and Rural Development (CARD), and others are involved in social security. The National Social Protection Council (NSPC), consisting of representatives from the relevant ministries and organizations, is responsible for overall coordination. An overview of the major social assistance programs is shown in Table 4-1.

Table 4-1 Overview of major social assistance programs

Program	Implementing organization	Benefit type	Target group
Food Reserve System	Ministry of Economy and Finance (MEF)	Food	Food-insecure households affected by natural disasters
Social interventions for emergency and relief	Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)	Food	Households affected by natural disasters and other vulnerabilities
Social Welfare for the Elderly	MoSVY	-	Elderly (65 age or older)
Disability allowance	MoSVY	Cash (5 USD/month)	Disabled people who are poor, elderly, or have no supporting families
School feeding program	Ministry of Education, Youth and Sport (MoEYS)	Food	All students in selected schools in rural/remote areas with food insecurity
Primary school take-home rations	MoEYS	Food	Students in grades 4-6 IDPoor1 and 2 ⁴
Home-grown school feeding	MoEYS	Food-for-work/cash-for-work programs	All students in grades 1-6 in selected schools in rural/remote areas with food insecurity
Scholarship programs (various)	MoEYS	Cash (60–90 USD/year)	Varying coverage, with one nationwide program for grades 4-10
Health Equity Fund	Ministry of Health (MoH)	Fee waivers for public health care	Poor households
Voucher for Reproductive Health Scheme	MoH	Vouchers	Women and children from poor families
Cash transfer for poor families with pregnant mothers/children under five years	Council for Agriculture and Rural Development (CARD)	Cash	Pregnant women and children under 5

Source: Prepared by the Survey Team with reference to [9] and [10]

Social security schemes include the National Social Security Fund (NSSF)⁵ for private-sector employees, the National Social Security Fund for Civil Servants (NSSF-C), the National Fund for Veterans (NFV) and the People with Disability Fund (PWDF)⁶. According to NSPPF, the government plans to consolidate all social security operators, including NSSF, NSSF-C, NFV and PWDF, into a single institution to enhance efficiency and effectiveness in service delivery and cost management.

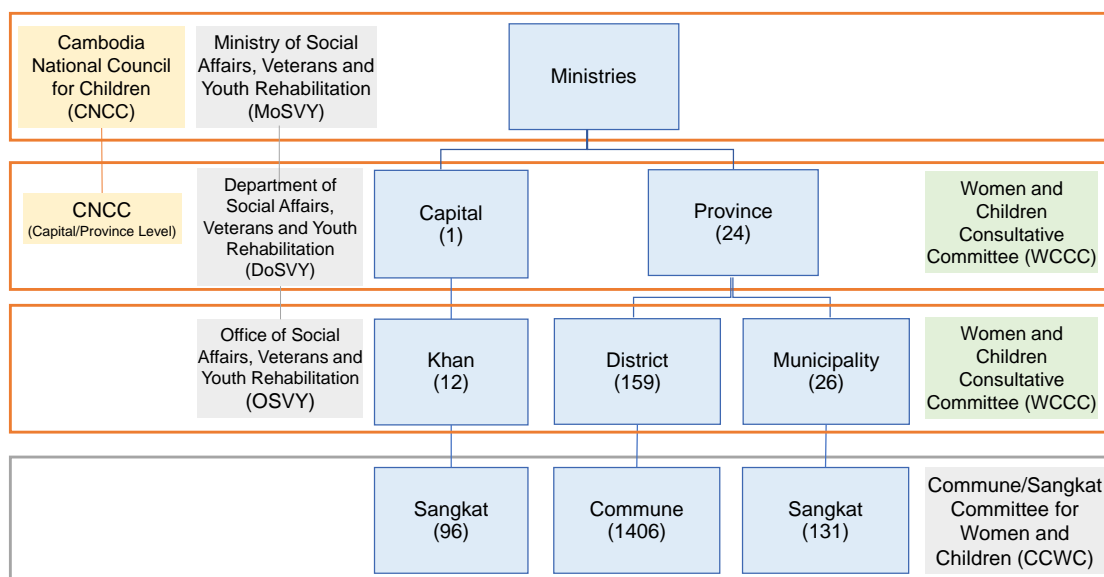
(3) Implementation structure of social welfare

Cambodia's local administration has a three-tier structure. MoSVY has the Department of Social Affairs, Veterans and Youth Rehabilitation (DoSVY) at the Provincial and Capital level and the Office of Social Affairs, Veterans and Youth Rehabilitation (OSVY) at the Municipality, District and Khan level (see Figure 4-2).

⁴ IDPoor (Identification of Poor Household) is a government program to identify poor households, where IDPoor 1 is very poor and IDPoor 2 is poor.

⁵ NSSF is under technical supervision of MoLVT and financial control of MEF.

⁶ NSSF-C, NFV and PWDF are under technical supervision of MoSVY and financial control of MEF.



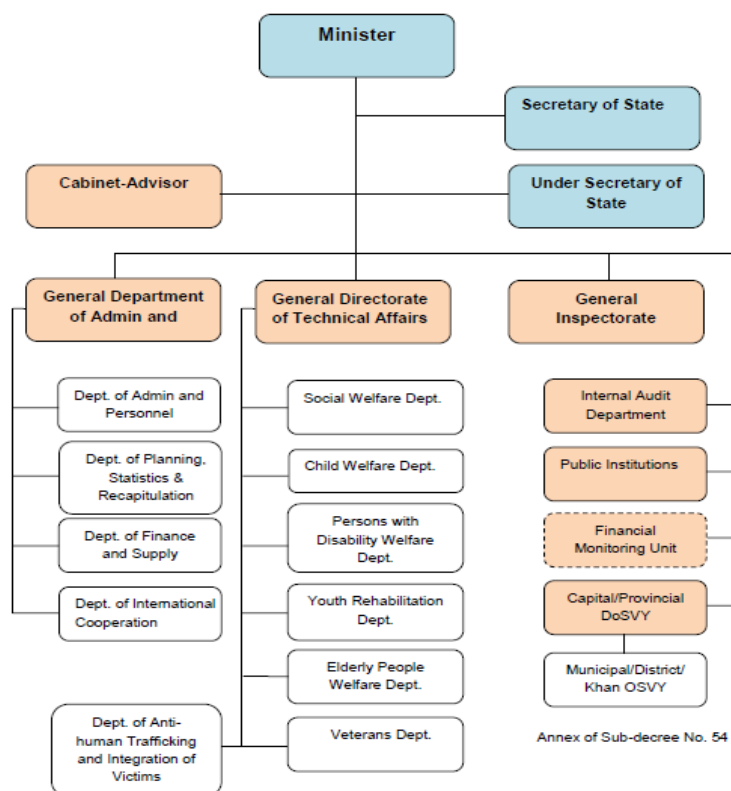
Source: Prepared by the Survey Team with reference to [11]

Note: Numbers in parentheses in the figure are the number of administrative bodies. Sangkat is located in urban areas (Khan and Municipality), while Commune is located in non-urban areas (District) [12]

Figure 4-2 Implementation structure of social welfare

1) Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)

MoSVY is responsible for the social welfare of vulnerable groups (poor, victims of natural disasters, people living with HIV, migrants, etc.), combating human trafficking and supporting the reintegration of victims, child welfare, rehabilitation of youth (protection of children in conflict with the law, etc.), promotion of the welfare and rehabilitation of the people with disabilities, strengthening and enhancing social security and welfare services for the elderly, and strengthening and enhancing the social security system and welfare of veterans. The organization chart of MoSVY is shown in Figure 4-3.



Source: [13]

Figure 4-3 Organization chart of Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)

2) Provincial and Capital level: Department of Social Affairs, Veterans and Youth Rehabilitation (DoSVY)

The organization and functions of the Department of Social Affairs, Veterans and Youth Rehabilitation (DoSVY) are set forth in the Prakas No. 066, dated 12 January 2017. DoSVY is line of MoSVY, has tasked to coordinate and implement the sector of social affairs, veterans and youth rehabilitation in the Capital and Provinces which OSVY is served as subordinates to work with sub-national authorities [8].

3) Municipality, District and Khan level: Office of Social Affairs, Veterans and Youth Rehabilitation (OSVY)

The Office of Social Affairs, Veterans and Youth Rehabilitation (OSVY), as a subordinate agency of DoSVY, is responsible for managing social work, veterans and youth rehabilitation, health programs, women-related programs, religious programs, vocational training programs, and disaster programs at the Municipality/District/Khan level [1].

4) National and international NGOs

In Cambodia, due to the lack of human and financial resources of government agencies, a number of national and international NGOs are providing social services through various programs in cooperation with relevant ministries and international organizations, including MoSVY. At present, 138 national and international NGOs have signed a Memorandum of Understanding (MoU) with MoSVY [1], and have been providing social services through various programs of MoSVY.

For example, the Partnership Program for the Protection of Children (3PC), a tripartite partnership between UNICEF, MoSVY and Friends-International (NGO), is working with 11 NGOs, six technical assistance partners, 40 Civil Society Organizations (CSOs) and other organizations to improve the child protection system and strengthen the capacity of stakeholders.

(4) Social welfare budget

The share of the MoSVY budget in the national budget increased from 2% in 2009 to 4% in 2016. Although the budget allocation increased from USD 45.4 million in 2009 to USD 178.5 million in 2016, the majority of the budget (88.5%) is spent on the NSSF-C and NFV (pensions for civil servants and veterans, etc.) [14]. A breakdown of MoSVY's budget for 2006 is shown in Table 4-2.

Table 4-2 Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY) budget breakdown (2016)

Program	Spending (million KHR)			Spending (million USD)	% of MoSVY expenditure
	National	Provincial	Total		
National Social Security Fund for Civil Servants (NSSF-C)	5,900	265,666	271,566	67.9	38.0
National Fund for Veterans (NFV)	5,352	355,068	360,420	90.1	50.5
Emergency support to vulnerable groups	7,779	6,374	14,153	3.5	2.0
Child welfare	5,236	7,062	12,298	3.1	1.7
Disabled people	10,943	634	11,577	2.9	1.6
Elderly people	327	335	662	0.2	0.1
Others (organizational development, etc.)	205	43,044	43,249	10.8	6.1
Total	35,742	678,183	713,925	178.5⁷	100

Source: [10]

4.1.2 Situations in the areas related to social service workforce

The current status of the areas in which the social service workforce is involved is outlined below.

(1) Children and families

In Cambodia, since the ratification of the United Nations Convention on the Rights of the Child (CRC) in 1992, the government has been working on the development of laws related to the upholding of the rights of children and child protection, the formulation of related policies and guidelines, and the establishment of the Cambodia National Council for Children (CNCC)⁸, the Women and Children Consultative

⁷ The original text says 178.8. However, the total of the numbers in the table is 178.5, thus the figure has been changed.

⁸ CNCC was established in 1995 and is composed of members from 27 ministries and organizations. CNCC is chaired by Minister of MoSVY. As a coordinating body, CNCC is responsible for monitoring the situation of children and making recommendations to the Cambodian government.

Committees (WCCC)⁹ at the Capital/Province and Municipality/District/Khan levels, and the Commune/Sangkat Committee for Women and Children (CCWC)¹⁰ at the Commune/Sangkat¹¹ level. However, there are still many issues related to child protection, such as violence against children, child labor, and institutional care.

Therefore, in order to protect children from all forms of violence, abuse and exploitation, the government, led by the MoSVY, is currently working on the development of a comprehensive child protection system, including the formulation of the National Policy on Child Protection System 2019-2029, a ten-year national policy on child protection systems. Although social workers and other social work personnel are essential to support the child protection system, the number of social service workforce who provide child protection services is insufficient. Therefore, the policy also states the importance of human resource development.

(2) Disabilities

In Cambodia, in order to cope with the serious damage caused by landmines, many international NGOs have continued to provide support such as prosthetic limb production and rehabilitation since the 1980s, and support for the physically disabled due to landmines has been relatively well developed, but support for the physically and mentally disabled due to other causes has lagged behind [15]. Subsequently, efforts to protect and support the rights of people with disabilities are underway, including the enforcement of the Law on the Protection and Promotion of the Rights of Persons with Disabilities¹² in 2009, the ratification of the United Nations Convention on the Rights of Persons with Disabilities (CRPD) in 2012, and the formulation and implementation of the National Disability Strategic Plan 2014-2018 and 2019-2023. In order to implement the plan, the Disability Action Council¹³ has been implementing the Disability Rights Initiative Project in Cambodia, with the long-term goal of improving the quality of life of people with disabilities in Cambodia [16]. Disability assistance is one of the main tasks of MoSVY, DoSVY and OSVY, and the development and strengthening of the social service workforce in this field will become increasingly important in the future.

(3) Elderly people

Recognizing that demographic changes are inevitable in the future and that the increasing proportion of elderly people, in particular, will affect not only the elderly but also the socio-economy in general, the Cambodian government has revised the Policy for the Elderly approved in 2003 and formulated the

⁹ WCCC is under the jurisdiction of the Capital and Provincial Councils at the capital and provincial level, and the Municipal, Khan and District Councils at the municipality, khan and district level. These councils are under the jurisdiction of the Ministry of Interior.

¹⁰ CCWC has been established under Commune Councils (under the jurisdiction of the Ministry of Interior). CCWC consists of the Commune or Sangkat chief and deputy, a focal point for women and children, a commune clerk, a member of the police, a member of the school faculty, a member of the health center and village chiefs from all villages it represents. The main roles and responsibilities of CCWC include awareness-raising on laws and policies related to women and children's rights, mobilizing the public on health, education, child development and protection, and participating in the implementation, monitoring and evaluation of women and child-related work plan [11].

¹¹ Commune/Sangkat covers a population of about 15,000 to 20,000 people.

¹² Royal Kram NS/RKM/0709/010 on the Protection and Promotion of the Rights of Persons with Disabilities

¹³ The Disability Action Council was established in 1997 as a semi-private national coordinating body under MoSVY, comprising representatives of relevant ministries and agencies, NGOs, and individuals involved in improving the welfare of persons with disabilities. The council prepares policies and plans for persons with disabilities in collaboration with government agencies and NGOs [45].

National Ageing Policy 2017-2030. The policy sets the nine priorities: (1) ensuring financial security, (2) health and well-being, (3) living arrangements, (4) enabling environment, (5) Older People's Associations and active ageing, (6) intergenerational relations, (7) elder abuse and violence, (8) emergency situations (disasters, etc.), and (9) preparing the younger population. The policy also states that the demand for social work professionals will be evaluated, and further education and training programs will be arranged to meet the current demand [17].

On the other hand, in Cambodia, issues related to ageing and the elderly have received less attention from international NGOs than other social welfare issues such as orphans, and social welfare programs targeting the elderly are only being conducted on a small scale by Cambodian organizations in urban areas such as Phnom Penh [18].

4.2 Current status of social service workforce development

4.2.1 Planning

(1) Laws, policies and plans

Currently, there is no law in Cambodia that defines the specific roles and responsibilities of social workers and other social service workforce (see Table 4-4 for definition) and gives them the legal authority to perform their duties [19]. Although there are no laws, there are laws that mandate and support the role of social workers. For example, the Law on Juvenile Justice 2016 sets out the powers and responsibilities of social agents¹⁴ and social welfare agencies in assisting children in conflict with the law [20] [21].

On the other hand, there is no standard definition or classification of civil servants involved in social work by the Ministry of Civil Service [1]. Due to the lack of clarity on the roles and responsibilities of social service personnel and the qualifications required to perform their duties, 46 different job titles are used for social service personnel in government agencies and NGOs (e.g., social worker, caseworker, community social worker, etc.) [20]. In this context, in order to formalize the roles of social workers and other social service workforce in government agencies, MoSVY, with the support of the United Nations Children's Fund (UNICEF), developed job descriptions for social workers at DoSVY and para-professional social workers at OSVY. Currently, the job description of the DoSVY social workers is stipulated in the contract between MoSVY and social workers. As for OSVY para-professional social workers, MoSVY issued a Directive¹⁵ (dated 12 November 2021) defining the roles and responsibilities of the staff in charge as para-professional social workers at the Municipality/District/Khan level (see p. 4-24)¹⁶.

One notable current development is that MoSVY, with the support of UNICEF, Plan International Cambodia and others, has been developing the National Strategic Plan on Social Service Workforce 2022-2031, a 10-year national strategic plan on the social service workforce. The plan is in the draft stage and is

¹⁴ Refers to any officer of the ministry, office in charge of social affair at city, provincial and district level or other individual who has completed training in minor and law concerning to minor and appointed or accredited by ministry in charge of social affairs [21].

¹⁵ Sachkdei Naenaom in Khmer.

¹⁶ Interview with UNICEF (23 December 2021)

being reviewed and discussed among stakeholders. The plan will set goals in the areas of planning, development, and support for the quantitative and qualitative enhancement of the social workforce¹⁷.

Prior to the above national strategic plan, MoSVY released its first five-year plan to strengthen social service workforce development, the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025. Since violence against children and institutional care are major issues in Cambodia, there is a high need for child protection, and many social service workers are involved in child protection. Therefore, the title of the national strategic plan includes “focus on child protection”. However, the strategy is not limited to child protection personnel but relates to the social service workforce in general.

The strategic plan was developed by a joint technical working group led by the National Institute of Social Affairs (NISA) with support from UNICEF [1]. An overview of the strategic plan is provided in Table 4-3.

Table 4-3 Overview of the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025

Vision	All social service workforces have the necessary knowledge, skill, and behaviors as well as qualification and professional ethics to provide quality social services.	
Mission	Train the social service workforce to have concrete knowledge skills and behaviors with professional ethics to be qualified as 1. Professional Social Worker, 2. Para-professional, 3. Para Social Worker and 4. Allied workers with high ability to provide social services to client, who are victims ¹⁸ and vulnerable people, especially children.	
Strategic Goal	<ol style="list-style-type: none"> 1. Development of training curriculum and modules for social service workforce 2. Training of social service workforces and improving its efficiency 3. Strengthen the capacity of social service education institutions 	
Activity	Activity Cluster	Implement Agencies
Activities for Strategic Goal 1	1.1 Develop training curriculum/program	NISA, MoSVY, Royal University of Phnom Penh, Saint Paul Institute, NGOs
	1.2 Develop training modules/packages	NISA, Technical Working Group (TWG)
Activities for Strategic Goal 2	2.1 Develop a social service workforce education plan	NISA
	2.2 Align social service workforce education and training programs in accordance with the priorities and practical needs	NISA, TWG
	2.3 Conduct training	NISA, TWG, Royal University of Phnom Penh, Saint Paul Institute, NGOs
Activities for Strategic Goal 3	3.1 Develop a capacity map of trainers and teachers	NISA, TWG
	3.2 Strengthen the capacity of education and training skills of trainers and instructors	NISA
	3.3 Strengthen the capacity of social service education institutions at the national and sub-national levels	NISA, MoSVY, Ministry of Interior

Source: Prepared by the Survey Team with reference to [1]

(2) Definitions and regulations

The Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025 defines social work and social service workforce as below. The definition of the social service workforce is in line with the Guidelines on Basic Competencies for Social Workforce in Cambodia 2019 developed by MoSVY [1]. In the aforementioned definition by ASEAN (Chapter 1, p.1-6), allied workers are not included in the

¹⁷ Interview with MoSVY (24 December 2021)

¹⁸ Victims are not defined in the original text. Usually, the victims targeted by MoSVY include victims of natural disasters, victims of human trafficking, etc.

social service workforce. However, in Cambodia, although they belong to other sectors, allied workers occupy an important position in the provision of social services; therefore, they are considered as part of the social service workforce and are included in the strategic plan for social service workforce development¹⁹.

The strategic plan states that “Social Work is defined differently by many countries, but generally, it is the process of assisting individuals, families and communities to solve their problems and working to address the social injustice and inequality present in any given society” [1].

Concerning the social service workforce, the strategic plan states that “Social Service Workforce refers to those working to ensure improvement of victims’ and vulnerable people’s wellbeing, both government and non-governmental organizations, professional and non-professional, and working for-profit and non-profit. Social service workforce focuses on prevention, response, and support for victims and vulnerable people in the community via elimination of poverty, reducing discrimination, coordination of services, promoting social justice, as well as prevention and response to violence, abuse, exploitation, neglect and family separation” [1]. The categories and definitions of the social service workforce as outlined in the strategic plan are shown in Table 4-4.

Table 4-4 Categories and definitions of social service workforce in Cambodia

Categories	Definitions
Professional Social Worker ²⁰	<ul style="list-style-type: none"> • Graduate of a school of social work who uses his/her knowledge and skills to provide social services for clients (who may be individuals, families, groups, communities, or society in general). • Social workers help people increase their capacities for problem-solving and coping, and they help them obtain needed resources, facilitate interactions between individuals and between people and their environments, make organizations responsible to people, and engage in development, practice and evaluate social policies. • Social workers may work directly with clients addressing individual, family and community issues, or they may work at a systems level on regulations and policy development, or as administrators and planners of large social service systems.
Para-professional	<ul style="list-style-type: none"> • Para-professional would typically work next to or support the work of a professional in the same field. • Para-professional is trained to perform certain functions but not always legally certified or licensed to practice as a full professional, which in some fields requires college or university degrees or specialized training.
Para Social Worker	<ul style="list-style-type: none"> • Para Social Worker is a supervised para-professional staff person or volunteer-often community based-who serves the needs of vulnerable individuals, including children and families, particularly where social welfare systems are underdeveloped or severely stretched.
Allied Worker	<ul style="list-style-type: none"> • Allied workers are workers who carry out social service functions but are associated with other sectors such as education, health or justice. Examples include nurses, lawyers, doctors and teachers, among others. • Allied workers perform a myriad of functions that enhance, support or coordinate with those functions carried out by the social service workforce.

Source: Prepared by the Survey Team with reference to [1]

¹⁹ Interview with MoSVY (24 December 2021)

²⁰ The term “social worker” used in this chapter is used as synonymous with the term “Professional Social Worker” in the definition.

MoSVY has also developed the Guidelines on Basic Competencies for Social Workforce in Cambodia, which sets out the basic competencies of the social service workforce in terms of principles (values), knowledge and skills required to practice social services at all levels. The scope of the guidelines is all agencies and organizations that provide social services in Cambodia and all social service providers who work directly with clients (individuals, families and groups) [22].

(3) Budget

The budget of MoSVY was about USD 219 million in 2018, of which 87.2% was spent on pensions for civil servants and veterans (NSSF-C and NFV), and the second-largest budget item was civil servants’ salaries which set around 4.2% [23]. The amount of the budget related to social service workforce development is unknown, but the fact that more than 90% of the budget is spent on NSSF-C, NFV and civil servants’ salaries suggests that the ministry has a limited budget for other activities such as social service workforce development.

With regard to the budget required for the development of the social service workforce (professional social workers, para-professionals, para social workers, and allied workers), the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025 calls for a combined national and development partner budget of USD 16,711,720 to achieve the three strategic goals in five years from 2021 to 2025 (see Table 4-5) [1].

Table 4-5 Budget requirement to achieve the strategic goals of the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025 (2021-2025)

Strategic Goals	Estimate budget requirement (USD)		
	Total (USD)	State budget	Development partners’ budget
1. Development of social work human resource training curriculum programs and training module packages	99,000	40%	60%
2. Training of social work personnel and improving their efficiency	16,386,720	30%	70%
3. Strengthening the capacity of social work educational institutions	226,000	40%	60%
Total budget required	16,711,720	36.7%	63.3%

Source: [1]

(4) License and qualifications

There is no certification system for social workers and other social service workforce in Cambodia, and the social service workforce has not been institutionalized as professionals. Currently, the establishment of an organization that supervises, registers, certifies, and licenses the social service workforce is under technical discussion in MoSVY, referring to examples in other countries²¹.

The education and training standards and qualification levels required for para-professionals, para-social workers and allied workers, mainly in government agencies, are proposed in the Strategic Plan for Training

²¹ Interview with MoSVY (24 December 2021)

Social Service Workforce Focus on Child Protection 2021-2025, which is based on the Cambodia Qualifications Framework (CQF).

Table 4-6 Proposed education and training standards and certification levels required for social service workforce mainly in government agencies

CQF Level	Certification of technical and vocational training	Type	Main targets	Credit
4	Technical & Vocational Certificate 3	Para-professionals	MoSVY officials	30 credits
3	Technical & Vocational Certificate 2	Para-professionals	DoSVY officials	30 credits
2	Technical & Vocational Certificate 1	Para-professionals	OSVY officials, NGO staff	30 credits
1	Vocational Certificate	Para-social workers	CCWC members, WCCC members	30 credits
-	Certificate	Allied Workers	Persons engaged in child protection, members of relevant committees, members of working groups of ministries and relevant agencies	15 days

Source: Prepared by the Survey Team with reference to [1]

CQF is set in eight levels, as shown in Table 4-7. CQF is the Cambodian version of the National Qualifications Framework (NQF)²² that has been developed around the world. NQF is a means to develop and classify degrees and qualifications based on a set of nationally agreed upon standards for specific levels of learning outcomes.

Table 4-7 Overview of Cambodian Qualifications Framework (CQF)

CQF level	Technical and vocational education and training	General and higher education
8	Doctoral Degree of Technology/Business Education	Doctoral Degree
7	Master's Degree of Technology/Business Education	Masters Degree
6	Bachelor of Technology/Business Education	Bachelors Degree
5	Higher Diploma/Business Education	Associate Degree
4	Technical and Vocational Certificate 3	Upper Secondary
3	Technical and Vocational Certificate 2	
2	Technical and Vocational Certificate 1	
1	Vocational Certificate	
		Lower Secondary

Source: Prepared by the Survey Team with reference to [1] and [24]

(5) Ministries related to social service workforce

The lead ministry for the social service workforce is MoSVY, of which the Department of Social Welfare is responsible for the planning, development and support of the social service workforce²³. NISA, under the auspices of MoSVY, conducts education and training of the social service workforce and research related to social work.

The Ministry of Interior oversees local administration and is involved in the planning, development, and support of the social service workforce at the local level, including oversight of local councils that oversee WCCC and CCWC. In addition, the National School of Local Administration (NASLA) plays a role in providing education and training for civil servants, councils, and other related parties and is expected to play a role in social work education and training for civil servants at the local level.

²² As of 2017, more than 150 countries have developed or are in the process of developing an NQF [49].

²³ Interview with MoSVY (24 December 2021)

In addition, since social work requires multidisciplinary and multi-professional collaboration, the Ministry of Health (MoH), Ministry of Women’s Affairs (MoWA), Ministry of Justice (MoJ), Ministry of Education, Youth and Sport (MoEYS) and others are involved in the planning, development and support of the social service workforce [25].

(6) Human resource information and data

At present, there is no registration system for the social service workforce, including social workers in Cambodia; therefore, the exact number of social service workforce is unknown²⁴. In order to respond to this situation, in the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025, the establishment of a database of social service workforce is planned as an activity, which NISA is the implementing agency [1].

The strategic plan also includes a table titled “mapping the existing social service workforce for child protection” (see Table 4-8). However, the classification of the social service workforce (social worker, para-professional, etc.) in the table is not indicated, and the status of education and training is not clear.

Table 4-8 Mapping of existing social service workforce for child protection

No	Organization	Number of social service workforce
Leadership and oversight		
1	Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)	500 people (118 of them are in charge of child protection) (Total number of officials is 1,202)
Implementation level		
2	Department of Social Affairs, Veterans and Youth Rehabilitation (DoSVY)	471 people (125 of them are in charge of child protection) (Total number of officials is 1,057)
3	Office of Social Affairs, Veterans and Youth Corrections (OSVY)	406 Social Affairs Officers in charge of child protection
4	Sangkat/Commune Committee for Women and Children (CCWC)	21,398 members 3,292 focal points
5	Local and international NGOs	1,170 child protection officers
Coordination mechanism		
6	General Secretariat of the Cambodian National Council for Children (CNCC)	30 officials in charge of child protection
7	Working Group for Children in ministries, institutions	27 officials in charge of child protection
8	Relevant committees chaired and coordinated by ministries and institutions (e.g., National Committee on Child Labor)	40 officials in charge of child protection
9	Capital/Provincial CNCC	650 members and 125 officers
10	Capital/Provincial Women and Children Consultative Committee (WCCC)	400 members and 125 officers
11	Municipal/District/Khan WCCC	3,045 members and 609 officers

Source: Prepared by the Survey Team with reference to [1]

In view of the above, in order to strengthen the social service workforce, there is a need for national mapping to collect reliable data on the number of graduates of social work faculties and departments, social workers and other social service workforce employed by government agencies and NGOs, and para-professionals and others providing social services at the community level [26].

²⁴ The ratio of social welfare workers per population is 1 per 12,500 [23].

4.2.2 Development

(1) Educational institutions and education system

Social work has been taught at universities in Cambodia since 1994, with the introduction of social work as a subject in the bachelor of sociology program at the Royal University of Phnom Penh [1] [27]. In the late 1990s, an ad hoc group including the Royal University of Phnom Penh began to consider the establishment of a degree program in social work. A partnership between the Royal University of Phnom Penh and the University of Washington in the United States was formed in 2004. Later, through the support of the University of Washington, the first bachelor’s degree program in social work in Cambodia was established at the Royal University of Phnom Penh in 2008 [25].

Currently, the higher education institutions offering professional education in social work are the Royal University of Phnom Penh, NISA and Saint Paul Institute. An overview of the degree programs at these institutions is provided in Table 4-9. The number of people who have received higher education (undergraduate and graduate) in social work at these three institutions is 459 to date (375 bachelor’s degree holders and 84 master’s degree holders). The following sections describe an overview of social work education at each institution.

Table 4-9 Overview of Social Work Degree Programs in Cambodia

Educational Institution	Type	Degree program	Start year	Number of graduates
Royal University of Phnom Penh	Public	Bachelor of Arts in Social Work	2008	228
		Master of Arts in Social Work	2009-2019*	84
			2021	-
		PhD	2022	-
National Institute of Social Affairs (NISA)	Public	Bachelor of Arts in Social Work	2012	112
Saint Paul Institute	Private	Bachelor of Social Work	2013	35
Total				459

Note*: Temporarily suspended in 2009 and resumed in 2021.
Source: The Survey Team

1) Royal University of Phnom Penh²⁵

The Royal University of Phnom Penh is a national university established in 1960 as the Royal University of Khmer. During the Pol Pot regime, the university was destroyed and closed down completely. The university was re-established as the Ecole Normale Supérieure in 1980, merged with the Institute of Foreign Languages to become the University of Phnom Penh in 1988, and renamed the Royal University of Phnom Penh in 1996 [1]. The Royal University of Phnom Penh is under the jurisdiction of the Ministry of Education, Youth and Sport (MoEYS) and has the Faculty of Science, Faculty of Social Sciences and Humanities, Faculty of Engineering, Faculty of Development Studies, Faculty of Education, and Institute of Foreign Languages. An overview of the social work degree programs at the Royal University of Phnom Penh is as follows:

²⁵ Unless otherwise cited, this section is based on the interview with the Royal University of Phnom Penh (20 December 2021).

i Bachelor's program

In 2008, the Department of Social Work was established in the Faculty of Social Sciences and Humanities. As stated above, the University of Washington provided support for the establishment of this department. Five Cambodian students who completed the master's program at the University of Washington became faculty members of the Department of Social Work and launched the four-year bachelor's program (Bachelor of Arts in Social Work) in 2008 [3].

The annual number of students enrolled in the program is about 30 to 35. Almost all students enroll directly after graduation from high school. Tuition is USD 600 per year, but almost all students receive scholarships.

The curriculum of the bachelor's program is as shown in Table 4-10. The curriculum is competency-based and has been developed based on expected learning outcomes. The bachelor's degree requires a total of 129 credits in four years. There is a strong emphasis on practicum, and students are required to complete a total of 800 hours of practicum in the second, third and fourth years.

Table 4-10 Bachelor of Social Work Curriculum at Royal University of Phnom Penh

Semester 1	Credit	Semester 2	Credit
Year 1 (30 credits)			
• Introduction to Philosophy	3	• Culture, Civilization and Khmer History	3
• Computer	3	• General Psychology	3
• Fundamental of Sociology	3	• Statistics	3
• English	3	• English	3
• Foundation of Social Work I	3	• Foundation of Social Work II	3
Year 2 (36 credits)			
• English	3	• English	3
• Interpersonal Practice Skills I	3	• Interpersonal Practice Skills II	3
• Community Empowerment Practice I	3	• Community Empowerment Practice II	3
• Poverty	3	• Governance	3
• Developmental Psychology	3	• Organizational Development	3
• Introduction to Professional Practice 1	3	• Introduction to Professional Practice 2	3
Year 3 (33credits)			
• English	3	• English	3
• Interpersonal Skills III	3	• Introduction to Social Work Research	3
• Community Empowerment Practice III	3	• Methods	3
• Introduction to Mental Health	3	• Trauma	3
• Practicum I	4	• Group Work: Task and Treatment Groups	3
		• Practicum II	5
Year 4 (30 credits)			
• Senior Project I	2	• Senior Project II	2
• Advanced Practice I (Advance Micro Practice)	3	• Advanced Practice V (Supervision)	3
• Advanced Practice II (Building Strong Families)	3	• Practicum III	11
• Advanced Practice III (Monitoring and Evaluation)	3		
• Advanced Practice IV (Community Empowerment Practice IV)	3		

Source: [28]

The Department of Social Work produced its first 22 graduates in 2012. The number of graduates to date is 228, and 75 to 80% of graduates are employed by NGOs. A few students were employed by MEF and MoWA. Some students go on to pursue master's degree programs.

ii Master’s program

Ewha Womans University in Korea sent faculty to the Department of Social Work to offer the Master of Arts in Social Work program from 2009 to 2019. The Master of Arts in Social Work program was temporarily suspended in 2019 and resumed in 2021. Since 2021, Cambodian faculty members from the Department of Social Work has been in charge of the master’s program.

The master’s program is offered in English on weekends. Most of the students are working professionals who are studying while working for NGOs, but some students are coming from the Royal University of Phnom Penh and other universities’ bachelor programs. The current curriculum of the master’s program is shown in Table 4-11.

Table 4-11 Master of Social Work Curriculum at Royal University of Phnom Penh

Year	Term	Subject	Credit
Year 1	1	• Introduction to Social Work	3
		• Human Behavior and Social Environment	3
		• Social Welfare Policy	3
	2	• Ethics and Human Rights in Social Work	3
		• Social Work Practice	3
		• Research Methods for Social Work	3
3	• Social Work Counseling and Crisis Intervention	3	
	• Case Management	3	
	• Community Organization and Development	3	
Year 2	4	• Social Work with Children and Youth	3
		• Public Health in Social Work	3
		• Leadership and Management in Human Service Organization	3
	5 & 6	• Field Practicum (135 hours)	3
		• Research Paper	6

Source: [28]

The number of students who have completed the master’s program is 84 so far. Many of the graduates continue to work for the NGOs to which they belong.

iii PhD course

The PhD program will start in 2022. The selection of students has already been completed, and seven students are scheduled to start their studies in 2022.

2) National Institute of Social Affairs (NISA)²⁶

In October 2011, MoSVY received permission from the Cambodian government to establish the National Institute of Social Affairs (NISA). The mission of NISA is training and research on social aspects linked to the needs of the nation and society [8]. NISA has the status of a university and a general department of MoSVY. NISA consists of the Faculty of Social Affairs (including the Department of Sociology and the Department of Social Protection Management, etc.), the Faculty of Prosthetic and Orthotic Engineering (including the Department of Prosthetic and Orthotic Engineering, the Department of Motion Aid Engineering, and the Department of Physical Therapy), and the Vocational Training School for People with Disabilities [1].

²⁶ Unless otherwise cited or indicated, this section is based on the interview with NISA (24 December 2021).

MoSVY and MoEYS approved NISA to establish a Bachelor of Arts in Social Work to offer higher education and vocational and technical education to develop social workers and other social work personnel with social work values, ethics, knowledge and skills. The Bachelor of Arts in Social Work was launched in 2012 [1]. The Department of Social Work implements the Bachelor of Arts in Social Work program and provides continuing education training in social work. The number of lecturers is currently seven, of which three have a master's degree in social work, and two have a master's degree in clinical psychology²⁷. There is no particular international cooperation or academic exchange, but NISA has conducted a study tour to the Faculty of Social Administration at Thammasat University in Thailand.

The average number of students enrolled per year is about 20. Almost all students enroll directly after high school. Tuition fees are USD 300 for the first year and USD 400 per year thereafter, but almost all students receive scholarships.

NISA has been working with local and international educational institutions and NGOs to strengthen the capacity of instructors and improve the curriculum in line with the Cambodian Qualification Framework (CQF) and others [1]. The current curriculum is as shown in Table 4-12. The bachelor's degree requires a total of 144 credits in four years. Courses on human trafficking and social reintegration are provided in line with the actual situation in Cambodia. In addition, emphasis is placed on field practicum (total 900 hours) is conducted in the third and fourth years. The practicum is conducted at MoSVY and partner NGOs.

Table 4-12 Bachelor of Social Work Curriculum at National Institute of Social Studies (NISA)

Semester 1		Credit	Semester 2		Credit
Year 1 (36 credits)					
• Khmer History	3	• Introduction to Economics	3		
• General Administration	3	• Introduction to Psychology	3		
• Khmer Culture and Civilization	3	• Introduction to Social Protection	3		
• Applied Mathematics	3	• English Part II	3		
• English Part I	3	• Introduction to Social Work	3		
• Computer	3	• Introduction to Sociology	3		
Year 2 (36 credits)					
• English Part III	3	• English Part IV	3		
• Contemporary Issues in Cambodian Society	3	• Counseling Theory and Practices	3		
• Case Management		• Social Policy and Welfare	3		
• Principles of Human Rights and Social Justice	3	• Governance	3		
• Human Behavior in Social Environment	3	• Interpersonal Communication Skills	3		
• Social Work with Disability	3	• Basic Practice of Social Work I	3		
	3				
Year 3 (36 credits)					
• English Part V	3	• English Part VI	3		
• Causes and Consequences of Poverty	3	• Drug Addiction Treatment	3		
• Social Work with Mental Health	3	• Organization Management and Development	3		
• Crisis Intervention	3	• Anti-Human Trafficking and Reintegration	3		
• Gerontology	3	• Introduction to Research Method	3		
• Field Practicum I	3	• Child Welfare	3		

²⁷ One lecture has PhD. of Natural Resource Management and Master of Arts in Development Studies and another has Master of Mathematics.

Semester 1	Credit	Semester 2	Credit
Year 4 (36 credits)			
• Methodology of Social Research	3	• Group Research/Thesis	12
• Basic Social Work Practice II	3	• Field Practicum II	9
• Social Work with Community	3		
• Skill Labs	3		
• Introduction to SPSS	3		

Source: [29]

The number of graduates to date is 112. Graduates are employed by government agencies, NGOs, and private companies. A few of them have been employed by MoSVY. However, not all of them are employed as social workers.

Currently, NISA has only a bachelor's degree program, but it plans to establish a master's program.

3) Saint Paul Institute²⁸

Saint Paul Institute is a private university located in the Takeo Province and was established in 2009. It consists of the Faculty of Information Technology, the Faculty of Agriculture, Department of Agriculture, Department of Tourism Management, Department of English Literature, and Department of Social Work.

The Bachelor of Social Work program was launched at the Department of Social Work in 2013. Currently, there are five faculty members, only one of whom is a full-time lecturer and the rest four are part-time lecturers. In addition, lecturers from NGOs such as Caritas Cambodia are invited to give lectures. As for international academic exchange, Saint Paul Institute has an exchange program with the Catholic University of Freiburg in Germany, and one student is studying under the exchange program.

The annual number of students enrolled in the program is about 20 to 30. The number of students enrolled varies from year to year. The number of students enrolled in 2020 was 16. Almost all students enroll directly after high school graduation. Tuition is USD 500 per year, but almost all students receive scholarships.

The curriculum of the bachelor's program is shown in Table 4-13. The bachelor's degree requires a total of 144 credits in four years. Field practicum is provided at partner NGOs such as Louvain Cooperation, Caritas Cambodia, and Pour un Sourire d'Enfant (PSE).

Table 4-13 Bachelor of Social Work Curriculum at Saint Paul Institute

Semester 1	Credits	Semester 2	Credits
Year 1 (40 credits)			
• English Language I	4	• English Language II	4
• Developmental psychology	2	• General Psychology	3
• Computer Application I	3	• Computer Application II	3
• Academic Reading & Writing	3	• Social Work Ethics	3
• Human Biology and Food Security	3	• Introduction to Sociology	2
• Introduction to Social Work I	3	• Introduction to Social Work II	3
• Khmer Culture	2	• ASEAN Cultures	2
Year 2 (38 credits)			
• English Language III	4	• English Language IV	4
• Introduction to Alcohol and Drug Clinical Practice	3	• Trauma Theory and Technique	3
• Social Justice and Equity	3	• Poverty and Social Responsibilities	3
• Social Interpersonal Communication	3	• Social Welfare Policy and Services	3
		• Case Management and Crisis	3

²⁸ Unless otherwise cited, this section is based on the interview with Saint Paul Institute (27 December 2021).

Semester 1	Credits	Semester 2	Credits
<ul style="list-style-type: none"> • Social Work Counseling • Community Empowerment Practice 	3	<ul style="list-style-type: none"> • Intervention • Community Development 	3
Year 3 (38 credits)			
<ul style="list-style-type: none"> • English Language V • Disability & Inclusive Development • Social Work Leadership and Management • Child and Youth Development • Community Mental Health • Introduction to Research I 	4 3 3 3 3 3	<ul style="list-style-type: none"> • English Language VI • Child Abuse and Neglect Concerns • Program Development and Evaluation • Social Work with the Elderly • Child Welfare Service • Introduction to Research II 	4 3 3 3 3 3
Field Practicum (3 months)			
Year 4 (28 credits)			
<ul style="list-style-type: none"> • Social Work Field Training: Elderly • Social Work Field Training: Child, Youth and Family • Social Work Field Training: Mental Health • Social Work Field Training: Disability • Skills Lab • English for Social Work 	3 3 3 3 3 4	<ul style="list-style-type: none"> • Supervised Practicum (6 months) and Thesis 	9

Source: [30]

The number of students who have graduated to date is 35. Some students drop out of the program due to marriage, employment or other reasons. The majority of graduates are employed by NGOs such as PSE and Caritas Cambodia. However, not all of them are employed as social workers. In 2021, three students went on to the master's program at the Royal University of Phnom Penh.

(2) Continuing professional education and training

Since the 1990s, a number of national and international NGOs have started para-professional training programs to enable newly hired staff of MoSVY and NGOs to become social service providers and practitioners. The Social Services of Cambodia (SSC) and the Transcultural Psychological Organization (TPO) are the key NGOs that have provided extensive training in social services to NGO personnel and officials of government agencies such as MoSVY. SSC and TPO are still providing training to strengthen the capacity of service providers in the field [1] [25]. The following is an overview of continuing professional education and training for civil servants and staff from NGOs and other relevant organizations.

1) Education and training for civil servants

Recognizing the importance of strengthening the capacity of MoSVY staff to support social welfare in Cambodia, UNICEF had supported the training of MoSVY staff by SSC from 1997 to 1999. Since 2000, the training program has been revised and divided into three levels: Basic Social Service Training (BSST), Professional Social Service Training (PSST) and Management Social Service Training (MSST) (see Table 4-14). With the support of UNICEF, the training was conducted by TPO staff in addition to the lecturers in MoSVY [25].

As a result of the training of national and sub-national MoSVY officers²⁹ from 2000 to 2010, 718 officers completed BSST, 847 completed PSST and 36 completed MSST [1]. The number of officers per year for each course is shown in Table 4-15.

²⁹ No mention of whether they are DoSVY or OSVY officers.

Table 4-14 Summary of social service-related training

Training program	Period	Overview
Basic Social Service Training (BSST)	2 weeks	<ul style="list-style-type: none"> • Training on knowledge about the field of social work: actors, institutions and techniques. • The course contains 11 modules and practicum: Introduction and social work principles, Knowing yourself, Human needs, Child's rights and attitudes towards children, Gender, Domestic violence, Sexual abuse, Disability, MOSVY mandate: Sub-decree on the establishment of MOSVY, Prakas on the establishment of provincial offices, Children in need of special protection, and Case management.
Professional Social Service Training (PSST)	4 weeks	<ul style="list-style-type: none"> • Training build on the BSST and provides additional knowledge as well as skills and an understanding of attitudes related to the roles and responsibilities of the trainees. • The course contains 12 modules and a practicum: Case management, Interview skills, Monitoring, Directory maintenance, Screening, Awareness raising, HIV/AIDS, Drug abuse, Child Justice, Child Protection Network, Alternative Care, and Counseling.
Management Social Service Training (MSST)	12 weeks	<ul style="list-style-type: none"> • Training built on the BSST and the PSST and provides additional knowledge as well as skills related to their roles and responsibilities, practice and involvement in actual social work activities. • This training focuses on implementation, promotion and sharing of experiences during in class training, acquisition of skills related to specific situations.

Source: Prepared by the Survey Team with reference to [1]

Table 4-15 Number of training participants in social service-related training

Year	BSST	PSST	MSST
2000-2001	40	-	-
2002	70	130	-
2003	53	87	-
2004	84	46	-
2005	71	177	36
2006	58	58	-
2007	96	103	-
2008	101	99	-
2009	68	67	-
2010	77	75	-
Total	718	842	36

Source: [25]

From 2000 to 2010, UNICEF provided financial support for the implementation of BSST, PSST and MSST, but the financial support ended in 2010. However, the training program was not included in the MoSVY budget, thus the training was suspended in 2010 [25].

The Strategic Plan for Training the Social Service Workforce Focus on Child Protection 2021-2025 states that the three training programs have been transferred to NISA to ensure long-term sustainability. However, only the BSST course is currently being conducted at NISA. BSST course is conducted by NISA lectures for MoSVY and local government officials with financial support from UNICEF³⁰.

With regard to the training of civil servants at the sub-national level, the Government of Cambodia has established the National School of Local Administration (NASLA) under the auspices of the Ministry of Interior by Sub-Decree No. 192 dated 14 September 2016 in order to provide capacity development to civil

³⁰ Interview with NISA (24 December 2021)

servants, councils of sub-national administration and other stakeholders, as well as research on governance, and local development [8]. NASLA began offering training programs in 2018 and has so far provided more than 100 training courses to more than 7,200 civil servants [31]. NASLA is also expected to play a role in the capacity building of civil servants in local government agencies in social work. Therefore, the integration of the social service training program into the curriculum of NASLA is planned as an activity in the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025 [1].

2) Education and training for personnel of NGOs and relevant organizations

A wide variety of training programs have been conducted for the social service workforce from NGOs and other organizations. The following is a list of the major ones.

i Royal University of Phnom Penh

In addition to degree courses, the Royal University of Phnom Penh also provides continuing education and training for staff working in social work in NGOs and public institutions. In 2019, the “Social Work Direct Practice Skills (Interpersonal Practice) I” course on interpersonal skills was conducted³¹. The course was held every Saturday for eight weeks, with a fee of USD 200 for the course and USD 20 for training materials³².

ii Social Services of Cambodia (SSC)³³

SSC provides training in the three areas of 1) basic social work, 2) basic counseling (for children and women) and 3) case management to community social workers (CSWs) employed by SSC³⁴ and social service workers from other NGOs and government agencies (DoSVY and OSVY). NGOs pay the course fees for their staff, and UNICEF provides financial support for DoSVY and OSVY officials.

The basic social work training is a 15-day training, and the training content includes violence against children, problem analysis and problem-solving, counseling, positive discipline, child protection, child development, stress management, and communication skills [32].

Recognizing that a 15-day training is not sufficient and that post-training coaching (guidance and support) is essential, SSC provides coaching to CSWs. In the coaching, SSC staff observe CSWs who have completed the training working in the field and provide feedback to the CSWs on areas for improvement. In addition to the coaching after completion of the training, SSC provides continuous support to CSWs through monthly meetings, monthly supervision and coaching³⁵. SSC also provides training on coaching to other NGOs to observe the practice of the trained social work personnel in their organizations, give feedback, and provide the necessary support.

³¹ The course has been temporarily suspended due to COVID-19.

³² Interview with the Royal University of Phnom Penh (20 December 2021)

³³ Unless otherwise cited, this section is based on the interview with SSC (27 December 2021).

³⁴ CSWs go through a recruitment process and receive training by SSC staff and external experts. Applicants must be able to read and write in Khmer. As of April 2020, SSC has 38 CSWs [32]. CSWs work with clients who are suffering from domestic violence against women and children and other problems. CSWs receive a daily allowance and transportation expenses when they perform their duties.

³⁵ The difference between coaching and supervision is not clear, and the contents overlap; according to SSC, post-training guidance and support by the trainer is mainly called coaching, while the guidance and support received from job supervisors is called supervision.

iii Family Care First | REACT

Family Care First | REACT³⁶ started offering a 3-day supervision training in 2018, and as of mid-March 2020, more than 150 people attended. The content of the training covers the effects of primary and secondary trauma, and strategies for managing emotions, transference, and projection, among other psychodynamics [33].

iv First Step Cambodia (FSC)

First Step Cambodia (FSC) is an NGO that protects from child sexual abuse and support those affected by abuse. FSC conducts capacity-building training for NGO staff and officials of government agencies such as DoSVY and CCWC engaged in social work [34]. The training courses and training results in 2019 are provided in Table 4-16.

Table 4-16 Training courses and results of training at First Step Cambodia (2019)

Training course (duration)	Training Achievements
Social Work Practice with Children Affected by Sexual Abuse (29 days)	16 participants received the in-depth training course, developing their social work skills and learning to provide professional support services to child survivors of sexual abuse.
Identification and Response to Children Displaying Sexually Harmful Behaviors (3 days)	44 CSO and government professionals learned how to correctly identify, respond to and refer cases of children displaying sexually harmful behaviors.
How to Support Families Affected by Psychosocial Problems (4 days)	19 participants learned how to work with families, conduct family assessments, engage families to support their children and how families can contribute to the recovery of child survivors of sexual abuse.
How to Support People with Alcohol Problems (4 days)	39 service providers gained the skills to help people with alcohol problems and became more confident in their service provision to parents and families impacted by alcohol abuse.
Social Work Practice: advanced course (7 days)	44 social workers learned about social work values and ethics, theory and models for sound practice, and case management. This course is delivered in collaboration with the Angkor Hospital for Children.
Social Work Case Management Practice (3 days)	18 participants learned how to ensure that clients with complex, multi-faceted problems receive all the services they need in a timely and appropriate fashion, using FSC's case management system and tools.

Source: [34]

3) Future directions and initiatives

The training curricula and packages for the social service workforce currently in place are developed by each organization and are not in accordance with the Guidelines on Basic Competencies for Social Workforce in Cambodia 2019 set by MoSVY and the Cambodian Qualifications Framework (CQF). Therefore, the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025 sets out activities to develop training curricula and modules in order to standardize training based on both [1]. The training curriculum and modules are currently being developed by NISA with the support of UNICEF and are expected to be finalized and approved in the first quarter of 2022³⁷.

³⁶ Family Care First | REACT is a MoSVY-led network of organizations that receive financial support from the European Union, USAID, GHR Foundation, Save the Children Hong Kong, and UNICEF. The network includes 60 organizations such as UN agencies, academic institutions, national and international NGOs and other organizations working to prevent parent-child separation and increase the number of children who are safely reunified with their families.

³⁷ Interview with UNICEF (23 December 2021)

4.2.3 Support

1) Employment and retention

In Cambodia, the majority of social work degree graduates are employed by NGOs. For example, at the Royal University of Phnom Penh, which was the first university in Cambodia to launch an undergraduate program, 75 to 80% of its undergraduate graduates are employed by NGOs; at NISA and Saint Paul Institute, the majority of undergraduate graduates are employed by NGOs as well.

Institutional obstacles, such as hiring freezes in government agencies, make it difficult for those with social work degrees to obtain jobs as social workers in government agencies [20]³⁸. Under these circumstances, MoSVY, with the support of UNICEF, is working towards the employment of the social service workforce at the Provincial/Capital level, as well as at the Municipality/District/Khan level.

Regarding the deployment of social workers at the provincial and capital level, before the COVID-19 pandemic, the MoSVY, with the support of UNICEF, had deployed 17 social workers to DoSVYs in five provinces³⁹. Later, in 2020, in the wake of the COVID-19 pandemic, MoSVY and UNICEF recruited 20 graduates from NISA as social workers and dispatched them to the remaining 20 provinces where there were no social workers as an emergency measure due to the shortage of professionally trained social workers. Prior to the deployment, two and a half days of training was conducted by experts from MoSVY, SSC and UNICEF. For the first time, social workers were placed at the Provincial/Capital level (24 provinces and capital Phnom Penh) [35]. Currently, the social workers deployed earlier are placed on the government's payroll. The contract has been renewed for 20 social workers deployed in 2020, and UNICEF continues to provide financial support. The job description of DoSVY social workers is stipulated in the contract between MoSVY and social workers themselves as follows⁴⁰:

- Participate in disseminating information on the prevention and control of COVID-19 to children, families and communities.
- Help children and families affected by COVID-19 through case management.
- Implement case management and family reunification for children living in institutions and monitor and report the status of integrated cases.
- Assist government officials and support NGO staff to promote permanent planning and placement of orphans or abandoned children through family and relative care and facilitate local adoption.
- Collect and analyze data and report on the situation of children living in care centers.
- Cooperate with local authorities to document complaints and report cases of child abuse to the competent authorities under the guidance of provincial officials.
- Assist the capital and provincial officers in examining and evaluating the cases of children arriving in the center and making permanent plans.

³⁸ A few graduates of NISA's bachelor's program have been employed by MoSVY (national level), but not employed as social workers. Interview with NISA (24 December 2021).

³⁹ Five in Battambang, three in Siem Reap, five in Phnom Penh, two in Kandal and two in Preah Sihanouk [50].

⁴⁰ Interview with UNICEF (23 December 2021)

- Collaborate with Commune/Sangkat Committees for Women and Children (CCWC) in identifying child victims in the family to avoid separating children from the family through the provision of appropriate services, including counseling.

On the other hand, with regard to OSVY at the Municipality/District/Khan level, the Ministry of Interior has issued a Letter (dated 19 August 2021) requesting OSVY to appoint one administrative official as a para-professional social worker. In response, MoSVY issued a Directive⁴¹ (dated 12 November 2021) defining the roles and responsibilities of the staff in charge as para-professional social workers at the Municipality/District/Khan level. The roles and responsibilities of para-professional social workers at OSVY are as follows:

- Disseminate policies and regulations related to social affairs, veterans and youth rehabilitation, and raise awareness about prevention and response to clients who are victims and vulnerable people.
- Conduct service mapping and mobilize resources from national and sub-national institutions and relevant development partners to provide the necessary support and refer clients to receive services as needed.
- Collaborate with DoSVY and NGOs to organize training and provide technical assistance related to social work to CCWC.
- Manage and analyze the data of clients within the competency of the Municipality/District./Khan, including orphans, victim and vulnerable children, children under alternative care, minors in conflict with the law, drug addicts, victims of human trafficking, migrants, elderly people without relatives, homeless people, mentally ill people, people living with HIV, people with disabilities, pregnant women in poverty and children under two years of age, poor families and people affected by natural disasters, etc.
- Manage client cases by following case management procedures using information technology management systems such as Primero⁴² or other available systems.
- Check on all client care centers run by NGOs within the competency of the municipality, district and Khan.
- Identify, select, assess and decide on the closure or continuation of cases of children under alternative care based on the best interests of and ‘do no harm to children in collaboration with DoSVY, CCWC) and relevant NGOs partners.
- Follow up on cases of children under alternative care, children staying in residential care facilities or children facing unnecessary separation from their families and children in need of permanent planning.

⁴¹ Sachkdei Naenaom in Khmer.

⁴² Primero is an open-source software system designed to help gender-based violence and child protection service providers securely and safely collect, store, manage, and share data on case management and incident monitoring. Primero has been developed by a partnership of UNICEF, International Rescue Committee (IRC), Save the Children, United Nations Population Fund (UNFPA), Department of Peacekeeping Operations (DPKO), Office of the Special Representative of the Secretary-General for Children and Armed Conflict (OSRSG-CAAC) [46]. In Cambodia, Primero is a case management system for child protection.

- Participate in the prevention of and response to violence, human trafficking, sexual exploitation, all forms of other abuses and other crisis/emergency situations in collaboration with relevant local authorities and NGOs.
- Follow up with the minors who have received the return and rehabilitation programs and after they have been reintegrated into the families and communities.
- Coordinate the development work for veterans in the community and provide technical support to the Commune/Sangkat Veteran Associations.
- Coordinate and monitor the care work for older people in the community and enhance the capacity of the Commune/Sangkat Old People's Associations.
- Coordinate the implementation of different social assistance programs.

As for the employment of social workers in other sectors such as health care and education, there is a recent case where one graduate of the Royal University of Phnom Penh was hired as a counseling staff as a pioneering attempt by a national hospital under the Ministry of Health [3]. However, no other information on the current status of employment in the health care and education sectors was identified.

2) Professional association and networks⁴³

The Association of Professional Social Workers of Cambodia (APSWC), the first professional association of social workers in Cambodia, was officially registered with the Ministry of Interior on 5 May 2015 [36]. The number of APSWC members fluctuates from year to year, but the current number of members is 15. Membership is open to those with a bachelor's degree in social work or a related field and at least one year of work experience. Membership fees are USD 15 per year.

APSWC builds networks for social workers and disseminates and shares knowledge about social work. APSWC has organized workshops in collaboration with three educational institutions (Royal University of Phnom Penh, NISA, and Saint Paul Institute) and events to improve the image of social work on the occasion of World Social Work Day⁴⁴. During the COVID-19 outbreak, APSWC shared experiences and built networks among stakeholders. APSWC is also involved in policy development, including providing technical input to the Code of Ethics being developed by MoSVY.

APSCW has been working to strengthen the foundation of the organization by establishing an office and hiring administrative staff in order to provide a platform for social workers to connect with each other in order to establish and improve the status of social workers as a profession. However, the organization still faces challenges in terms of both human resources and funding⁴⁵.

At the time of this writing, APSWC is not a member of the International Federation of Social Workers (IFSW) [37].

⁴³ Unless otherwise cited or stated, this section is based on the interview with APSWC (23 December 2021).

⁴⁴ The third Tuesday of March every year.

⁴⁵ Since January 2021, APSWC has received a grant from the Love and Grace Welfare Aid Foundation to establish an office and hire administrative staff, but it is not permanent, thus APSWC still faces the challenge of ensuring sustainability.

3) Code of ethics

In Cambodia, there is no code of ethics that clearly states the code of conduct, obligations and compliance of the social service workforce. Currently, MoSVY is working on a Sub-Decree for a code of ethics for the social service workforce, which is expected to be approved in 2022⁴⁶.

4) Career development

In this survey, any specific efforts or attempts for the career development of the social service workforce was not confirmed. In Cambodia, the establishment of a certification system for the social service workforce is currently under consideration to improve and establish the status of the social service workforce as professionals. Therefore, the career path and career development of the social service workforce are expected to be issues to be addressed in the future.

5) Supervision system

Supervision is an activity to maintain and improve the expertise of social workers and other social work human resources and their ability to perform their duties. Social workers with a wealth of knowledge and experience act as supervisors to provide guidance and advice to their subordinates and successors, which leads to the growth of the social service workforce and the provision of high-quality services [38]. The practice of supervision is essential and indispensable in social work.

Currently, there is no national standard for the implementation of supervision in Cambodia. According to a survey conducted in 2020⁴⁷, social service supervision is in its infancy in Cambodia and within the FCF | REACT network, and its definitions, purposes, functions, benefits, and limitations are just beginning to be understood. In addition, the implementation of supervision training by Family Care First | REACT has led to the development of a positive attitude toward mainstreaming supervision among social work professionals in Cambodia [33].

However, the results of the same survey showed that of those surveyed, 27.6% of supervisors⁴⁸ and 39.2% of supervisees had received educational training in the social sciences (social work and psychology). Both the supervisors and the supervisees lack expertise in social work. It was highlighted that the lack of professional social workers in Cambodia is a fundamental issue in establishing a supervision system. Even if a system of supervision (policy, organization, budget, monitoring tools, etc.) is established in the future, there are still many issues to be addressed, such as the need for education and training and long-term strategies to fill civil service posts with social work trained specialists in order to implement supervision [33].

⁴⁶ Interview with MoSVY (24 December 2021)

⁴⁷ The survey was conducted by Family Care First | REACT to understand the current status of supervision practices in the network organizations in terms of organizational capacity, supervision needs, outcomes and challenges. The survey also sought the views of key stakeholders in order to mainstream supervision into the network as a whole and into the Cambodian social service sector. The survey covered a total of 59 practitioners (30 supervisors and 29 supervisees) in Phnom Penh, Kandal, Siem Reap, Battambang, and Sihanoukville. In addition, 11 key informants with expertise in social services were also interviewed.

⁴⁸ 43.3 percent of supervisors have education and training in business and management.

6) Awareness-raising

In Cambodia, APSWC and NGOs have held events in commemoration of World Social Work Day and have conducted activities to improve the public image of social work and recognition of social workers as a profession. However, no other specific examples of initiatives for awareness-raising were identified.

In Cambodia, the term “social work” is not familiar to the general public, and although the word “social work” can be directly translated into Khmer, it is not the same as the international definition by IFSW. In addition, even those who are engaged in social work often view social work in a narrow sense of assistance and support for individuals and families at the micro-level⁴⁹ [5]. For example, some CCWC members do not have a good understanding of social work and understand that social work is to provide charity to the poor. There are also cases where abuse cases are not referred to community social workers due to a lack of understanding of social work or because CCWC members do not want to bring the issues to the public’s attention⁵⁰.

In light of the above, continuous and more proactive efforts in awareness-raising activities are required in order to change the mindset of people involved in social work and to foster the understanding of the significance and roles of social work and the social service workforce among the general public.

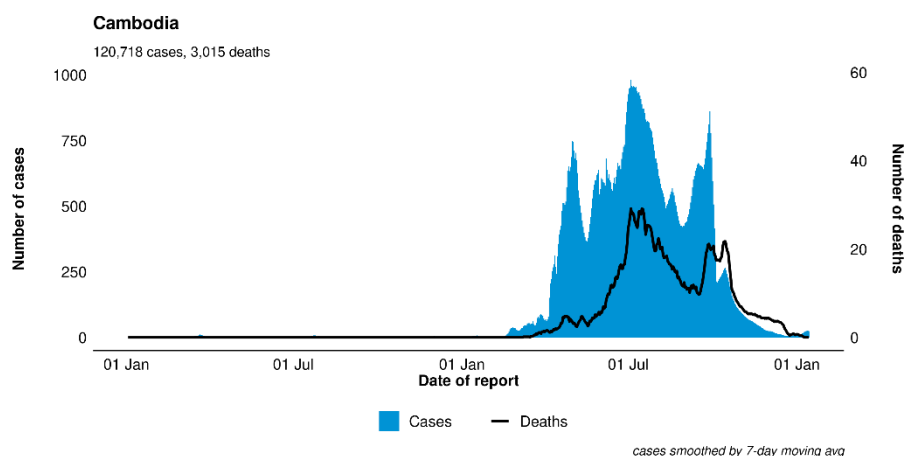
4.3 Impact of COVID-19 on the social welfare sector

4.3.1 COVID-19 situation

The Coronavirus disease 2019 (COVID-19) pandemic has a major impact on Cambodia. Although the first case in Cambodia was confirmed on 27 January 2020, the number of infected people was kept at a low level for more than a year. However, the infections began to increase in late February 2021, and a lockdown was declared for the first time in April 2021. The third wave of COVID-19 occurred from the end of June to mid-July 2021, with a peak of about 1,000 new infections per day. Since then, the number of new infections and deaths has decreased, and as of 16 January 2022, the seven-day moving average of new cases is about 25 per day. Vaccination has also progressed well, and as of 16 January 2022, 81% of the population has received the required number of vaccinations [39]. According to the World Health Organization (WHO), the cumulative number of cases and deaths on 14 January 2022 is 120,718 and 3,015, respectively [40].

⁴⁹ The definition of the National Association of Social Workers in the United States in 1981 states that “Levels of social work practice can be divided into micro, mezzo, and macro”. The micro level (individuals, families) targets difficult situations faced by individuals and families. At the mezzo level (groups, organizations, local residents), the focus is on group organizations and local residents. The macro level (community, policy) is oriented toward the transformation and improvement of society in general, and covers the community, the state, and the international system, and includes policies and institutions. However, these three levels overlap in practice, and the distinction is a matter of convenience [50].

⁵⁰ Interview with SSC (27 December 2021)



Source: [40]

Figure 4-4 Number of COVID-19 cases and deaths in Cambodia

4.3.2 Overview of the impact of COVID-19 on the social welfare sector

The COVID-19 outbreaks have indirect and direct impacts on people in need of social welfare services, including children, the elderly, and people with disabilities. Impacts include those caused by infection with the virus itself, socio-economic impacts derived from measures to prevent the spread of infection (lockdown, school closures, etc.), and long-term impacts due to the cancellation, postponement, or reduction of activities and initiatives related to social welfare.

The impacts are wide-ranging and presumably of varying severity. For example, a survey of socio-economic impacts conducted from August 2020 to March 2021 by UNICEF and the World Food Programme (WFP) in collaboration with the Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations Population Fund (UNFPA) and UN Women found that safety concerns have increased due to lockdown and other restrictions on movement; violent methods (mainly psychological punishment) are used to discipline children in about half of the cases; and households with disabilities and households where the head of household has no formal education are more vulnerable to COVID-19 shocks [41].

On the service provider side, activities such as meetings, seminars, and community support programs of MoSVY and other relevant ministries have been postponed or cancelled to prevent the spread of the disease, which has become an obstacle to the implementation of activities.

4.3.3 Issues and initiatives in relation to social service workforce

Under the circumstances of the COVID-19 pandemic, the social service workforce plays an important role in disseminating correct knowledge about COVID-19 in the community, implementation of prevention and response measures, and continuation of support for vulnerable people. However, even before the COVID-19 pandemic, Cambodia had been facing a shortage of social service workforce, especially social workers with specialized education, and the COVID-19 epidemic made this issue more apparent.

Therefore, as stated earlier, as an emergency measure, MoSVY and UNICEF recruited and dispatched 20 NISA graduates as social workers in order to place social workers in 20 provinces that did not have social workers [35]. Initially, the contract was for a period of four months, but the contract was renewed, and UNICEF continues to provide salary support.

Since social work requires direct interpersonal assistance, there are various difficulties in practicing social work in the context of restricted activities due to lockdown and the need to act to avoid infection risks. In order to support case management by the social service workforce during the pandemic, MoSVY, with the support of UNICEF and Save the Children, developed the Guidelines on Case Management During Infectious Disease Outbreaks (COVID-19) in April 2020. The guidelines provide guidance on how to ensure that children with the highest needs are identified, and community-based interventions are implemented. Online training on these guidelines was held and attended by a total of 480 social service workers from DoSVY and NGOs [42]⁵¹.

As a preventive measure against infection, UNICEF provided personal protective equipment such as masks to social service workers working in the field⁵². As a result, visits to high-risk families continued by social service providers equipped with personal protective equipment [43]. In addition, TPO, with the support of UNICEF, provided counseling services through hotlines and social media to promote the psychosocial support of frontline workers [42].

In terms of case management, the ongoing shift from paper-based to digitalized electronic case management has helped in the implementation of case management during the COVID-19 outbreaks. In addition, Primero, a case management system for child protection launched by MoSVY, is now interoperable with OSCaR⁵³, a case management platform for NGOs and CSOs, which increases its usefulness. The interoperability between Primero and OSCaR is expected to facilitate coordination among partners and lead to the provision of quality and timely services through confidential referrals [44].

4.4 Priority issues for developing and strengthening social service workforce

In Cambodia, mainly MoSVY has been making active and concrete efforts to strengthen the “planning”, “development”, and “support” of the social service workforce in recent years. In particular, in “planning”, the formulation of the Guidelines on Basic Competencies for Social Workforce in Cambodia 2019, which defines the basic competencies required for the social service workforce, and the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025, a five-year strategic plan to strengthen social service workforce development, is a notable example. In addition, once the National Strategic Plan on Social Service Workforce 2022-2031, a ten-year national strategic plan that is currently being developed, is completed and approved, the goals and required activities for “planning”, “development”, and “support” of the social service workforce will be defined and enable stakeholders to work toward expanding the quantity and quality of the social service workforce based on a common strategic plan.

On the other hand, according to the results of the surveys conducted so far and this survey, it is clear that there are still many issues that need to be addressed in all aspects of “planning”, “development”, and “support” of social service workforce in Cambodia. As for “planning”, progress has been made as mentioned above, including the formulation of the strategic plan for the development of the social service

⁵¹ Interview with UNICEF (23 December 2021)

⁵² Ibid.

⁵³ OSCaR is an open source case management and record keeping system developed by Children in Families (a Cambodian NGO) with technical assistance from Save the Children International and funding from USAID [48]. OSCaR is used by Family Care First | REACT.

workforce. As for “development”, the history of social work education is still young, and it has been about ten years since the first bachelor’s degree holders were born in 2012, and the professionalizing social service workforce is in the process of consideration. The shortage of social workers and other social service workforce with specialized education and training in social work is still an issue. As for “support”, although progress has been made on the Code of Ethics, it is the area where efforts have been limited.

The three areas of “planning”, “development”, and “support” are interconnected; therefore, a comprehensive approach is required for enhancing the quantity and quality of the social service workforce. In order to strengthen the social service workforce in Cambodia, firstly, it is necessary to expand the number of para-professional social workers and para-social workers by conducting training based on the standard curriculum. In addition, for the improvement of social work practice in the field, it is important to develop human resources at the Commune/Sangkat level and to improve the implementation system of social work. Furthermore, it is necessary to consider and respond to the future development of social work in other sectors such as education and healthcare. In light of the above, the priority issues for strengthening the social service workforce in Cambodia are as follows:

4.4.1 Enhancement of social service workforce

Currently, there are three educational institutions for professional social workers, and the total number of graduates (degree holders) from the three institutions is about 100 per year. However, with the delayed progress in professionalization and little or no progress in career development, the number of graduates who will be engaged in social work in the field is not certain. In addition, it is difficult for government agencies to hire new employees without financial support from donors. Therefore, it is not feasible and realistic to increase the number of professional social workers in a short period under the current circumstances.

In this situation, the training of existing MoSVY, DoSVY and OSVY officials, WCCC and CCWC committee members as para-professional social workers and newly hired or current NGO staff as para-social workers using the standard curriculum and modules currently being developed may be a practical measure to enhance the social service workforce quantitatively.

However, in order to improve not only quantitatively but also qualitatively, training should be combined with post-training follow-up and coaching. In the follow-up and coaching, the training provider or the staff of the organization to which the social service workforce belong will check whether the trainees are making use of the skills they have acquired, whether there are any problems in practice in the field, etc., and provide necessary guidance and support for improvement. Also, it is necessary for the training providers or the staff of the organizations to train their staff to provide coaching and other necessary support.

Furthermore, it is expected that NASLA will play an important role in the training of the staff of the local administrative agencies such as DoSVY and OSVY. In order to ensure the sustainability of social service workforce development at the sub-national level, it is necessary to provide comprehensive support to NASLA, including not only the integration of curriculum but also the securing of budgets and lecturers.

4.4.2 Development and support of social service workforce at the Commune/Sangkat level

In order to improve the quality of social work, it is essential to support the frontline social service workforce (para-social workers, etc.) at the Commune/Sangkat level, who are directly involved in social work with clients, by strengthening their abilities through training and supervision. At the same time, in order for frontline social service workforce to carry out their activities based on the skills acquired in training, it is essential to promote understanding of the significance and roles of social work among CCWC members and people in the community, to provide training for CCWC members on social work, and to establish a system of cooperation and coordination with social service workforce at the Municipality/District/Khan and Provincial/Capital levels.

However, since there are more than 1,600 Communes/Sangkats in the country, it is not easy to implement the initiatives mentioned above on a nationwide scale, and it is necessary to consider the measures to be taken. Therefore, the following phased approach can be considered: firstly, select a pilot area and use its efforts as a model case to confirm the usefulness and identify issues for application to other areas, and then develop improvement measures before expanding to other areas.

4.4.3 Social service workforce development in other sectors

As violence against children and institutional care are significant issues in Cambodia, the need for child protection is high, and many social service workers are involved in child protection. In the future, however, as social conditions change and needs become more diverse and complex, the field of activities for the social service workforce will expand to include the support for other vulnerable populations such as the elderly and people with disabilities, as well as clients in other sectors such as education, healthcare and justice. As for the development of the social service workforce in other sectors, the strengthening and development of allied workers, which is defined as an activity in the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025, is the first step. At the same time, it is necessary to learn from case studies of other countries (social workers working in other sectors) and consider the development of social work in other sectors in Cambodia, with an eye to the future.

Chapter 5 Current Status of Social Service Workforce: Indonesia

5.1 Overview of social welfare sector

5.1.1 Policies, systems and challenges for social welfare

(1) Introduction

In the Republic of Indonesia, hereinafter referred to as “Indonesia”, the main social issues were focused on improving the macroeconomic situation and reducing poverty until around the early 2000s. The government’s social welfare policies also focused on improving the access of the people in poverty to various social services such as education and health care as part of the poverty reduction policy [1].

In the provision of social welfare services, PKK (the family welfare program: Pembinaan Kesejahteraan Keluarga) which is a national policy family welfare movement, and women volunteers of PKK played a major role. The PKK was started in the 1970s as an initiative of the Indonesian government to reduce poverty and achieve economic growth by encouraging women to contribute to economic growth and social development. It is a social development movement managed mainly by local women volunteers. Although the members were volunteers, an organizational structure was established headed by the Ministry of Home Affairs of the central government, and a certain amount of funds for the activities were allocated from the national and local government budgets. Within the framework of these activities, in addition to raising awareness among the population about maternal and child health, social welfare activities were also carried out, such as the provision of vitamins and food, and surveys of poor households [2]. From 1990 on, in view of the growing awareness towards the challenges of ageing in the country, ageing policies were gradually introduced, and women volunteers in the PKK were trained in preventive care and health education, and these women volunteers also started to provide social welfare services for the elderly.

Following the decentralization in 2001, under a structure in which local governments implement laws and policies enacted by the Ministry of Social Affairs (KEMENSOS: Kementerian Sosial), local governments have also taken responsibility for the provision of public social welfare services, and each local government has developed its own activities [3]. The PKK, on the other hand, continued its volunteer activities based on local needs under the organizational structure headed by the Ministry of Home Affairs even after the decentralization. For example, the PKK provides simple health checkups such as blood pressure measurement etc. and provides meals for the elderly [4].

As described above, social welfare in Indonesia has long been supported by volunteers, mainly women, but nowadays, in addition to volunteers a variety of stakeholders and organizations including the KEMENSOS, local governments, public and private institutions, social workers, and professional associations are involved in providing social welfare services.

(2) Social welfare in social security systems

The social security system in Indonesia can be largely divided into health insurance, labor social insurance, and social welfare [5] [6]. The Table 5-1 gives an overview of each system.

Table 5-1 Social security and welfare scheme in Indonesia

Scheme	Contents
Health insurance	The insured person pays a certain percentage of his /her monthly salary to the medical insurance provider, and can receive medical services free of charge at the medical institution. The insurance covers all Indonesian citizens including foreigners who have been working in Indonesia for more than six months. The universal coverage was targeted when the system was launched in 2014, and as of January 2022, approximately 229.51 million people (84.67% of the population) are insured [7]. For waged workers, the employer and the insured person pay a premium of 5% of the monthly wage (3% for the employer and 2% for the insured person in the case of civil servants, 4% for the employer and 1% for the insured person in the case of non-civil servants), while non-waged workers and non-workers pay a different premium depending on the service benefits they want. [6]
Labor social insurance	The system consists of work injury insurance, death benefit, old-age benefit, and pension benefit for workers. The employer pays all premiums for work injury insurance and death benefit, while both the employer and the worker pay for old-age benefit and pension benefit. The premium rate is 0.24% to 1.74% of the salary depending on the industry for work injury insurance, 0.3% for death benefit, 5.7% for old-age benefit (3.7% for the employer and 2.0% for the worker), and 3% for pension benefit (2.0% for the employer and 1.0% for the worker). The work injury insurance provides compensation payments according to the degree of disability, and the death benefit provides burial fees and consolation money in the event of a worker's death due to reasons other than a work injury. For old-age benefit, the right to receive benefits arises upon reaching the age of 57, and the accumulated premiums and investment profits are paid out as a lump sum payment. For the pension benefit, there are disability pension, widow's pension, and survivor's pension, in addition to the old-age pension, which is paid to those who have been participating for at least 180 months when they reach 57 years old [6].
Social welfare	It provides support to people and households with social problems such as poverty, disability, and disaster damage in the form of various social services such as cash transfers, material transfers, and provision of training etc. by the government, local governments and local communities [8]. The implementation structure, legal basis, and program content of social welfare will be discussed in detail in 5.1.1 and 5.1.2.

As shown in Table 5-1, social welfare in Indonesia is provided in various forms such as cash transfers, provision of material and training. In recent years, the share of government spending on social protection¹ has been maintained at 2% to 3% of GDP (Table 5-2). The percentage of KEMENSOS budget to GDP has ranged from 0.1% to 0.4%.

Table 5-2 Government spending on social protection (in trillions IDR)

	2016	2017	2018	2019	2020
Government spending on social protection [9]	261.2	275.7	353.9	378.2	495
Share in total government expenditure	22.6%	21.8%	24.3%	25.3%	25.1%
Share in GDP	2.1%	2.0%	2.4%	2.4%	3.2%
Budget of the Ministry of Social Affairs [10]	15.2	18.3	33.9	58.9	62.7
Share in total government expenditure	1.3%	1.4%	2.3%	3.9%	3.2%
Share in GDP	0.1%	0.1%	0.2%	0.4%	0.4%

Source: Prepared by the Survey Team with reference to [9] [10] [11]

(3) Constitutional position

The Constitution of Indonesia stipulates that the protection, development, establishment and fulfillment of basic human rights is an obligation of the government, and that the government shall protect the people in poverty and orphans in particular.

¹ Includes government spending on social protection programs from ministries other than KEMENSOS.

The 2009 Law on Social Welfare defines social welfare as “a status in which the material, spiritual and social needs of the people are fulfilled so that they are able to develop themselves in an adequate life and thus to play a role in society”, and the implementation of social welfare is defined as “the integrated and continuous social services carried out by governments, local governments and communities, under policies set by governments, in order to meet the basic needs of all citizens, and includes social rehabilitation, social security, social empowerment and social protection” [8].

Regarding the targets of social welfare, it states that “priority shall be given to those who are living in inappropriate conditions from a humanitarian perspective, with social problems such as poverty, neglect, disability, remote areas, social disabilities, and victims of disasters, violence, exploitation and discrimination” [8].

(4) Government Policy

In July 2020, the KEMENSOS released the Strategic Plan 2020-2024 as a guideline for the direction of social welfare development for the period 2020 to 2024. As a result of the analysis of challenges related to social welfare, the strategy sets out the following major policies for the target period: 1) capacity development for the poor and vulnerable and encouraging their self-reliance; 2) improving the quality of social welfare services; and 3) increasing the accountability and efficiency of the KEMENSOS. With regard to social welfare services, standardization of social welfare services, improvement of the quality of social service workforces, and improvement of the integrated information system are mentioned.

Table 5-3 Challenges and strategies outlined in the KEMENSOS Strategic Plan 2020-2024

Challenges	Policy
<ul style="list-style-type: none"> • Challenges related to improving the quality of life of the people: There are challenges in accessing quality food, social services, housing, water and electricity. Number of government employees are insufficient to provide adequate social services to the people. • Challenges in ensuring equal opportunities for the poor and vulnerable: There are challenges related to securing financial resources, developing human resources, and scaling up businesses for the poor and vulnerable. • Challenges in ensuring the resilience of poor and vulnerable communities: There are challenges in providing age-appropriate social protection. In addition, at present, services are only provided for basic needs, and empowerment is not sufficiently achieved. • Challenges related to the social welfare system: There are challenges in the prompt provision of social welfare services by the local government due to coordination problems within the organization and budget shortage. • Challenges related to the development of laws and regulations on social welfare and poverty alleviation: There is insufficient coordination between the respective laws, such as Law on Social Welfare (2009) and Law on Social Worker (2019). • Challenges related to the budget for social welfare and poverty reduction 	<ul style="list-style-type: none"> • Capacity development for the poor and vulnerable and encouraging their self-reliance: Promote self-reliance of the poor and vulnerable groups through capacity development. • Improving the quality of social welfare services: Improve the quality of facilities providing social welfare services and social service workforces. Improve the integrated information system for social welfare service recipients. • Increasing the accountability and efficiency of operations of the KEMENSOS, etc. : Ensure the transparency and improve the accountability of the KEMENSOS, and realize the effectiveness of the work of the KEMENSOS.

Challenges	Policy
The budget for the provision of social welfare services has not been sufficiently secured. There is still room to increase spending on social welfare in local governments' budgets.	

Source: Prepared by the Survey Team with reference to [12]

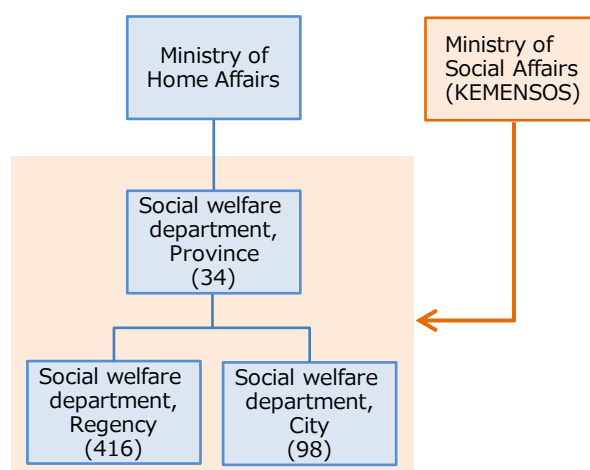
(5) Implementation structure of social welfare

In Indonesia, the domestic administration is divided into central, provincial, and regency/city levels (although regency and city are different in name, the level of administrative division is same, so in the following, the description “regency” shall include the meaning of city). The KEMENSOS is mainly responsible for the formulation of policies related to social welfare and the allocation of the national budget. The provincial government is responsible for implementing social welfare across multiple regencies and allocating funds for social welfare programs in the local budget, while the regency government is responsible for deciding and implementing social welfare programs to be implemented within the regency [8]. The provincial and regency governments have autonomy and are under the Ministry of Home Affairs in terms of ministerial affiliation [13], and the provincial and regency governments, which are actually the organizations responsible for the provision of public social welfare services, are autonomous and not directly subordinate to the KEMENSOS, which has been pointed out as a challenge that prevents the smooth penetration of policies and programs².

The planning and implementation of social welfare services is the responsibility of the social welfare departments of provincial and county governments. The social welfare services provided by each local government are customized from the programs formulated by the KEMENSOS to suit the situation and needs of each province and regency. In addition to the implementation of social welfare programs, the social service workforce belonging to the social welfare departments of provincial and regency governments also conduct surveys of residents who need social welfare services, examine the necessary services and the contents of social welfare services suitable in the community.

At the beginning of each year, the annual plan is shared in a meeting between the central KEMENSOS and the local government social welfare departments, and the social welfare program is implemented based on the plan.

² Interviews with social workers (female, belonging to an orphanage in Jakarta; female, social worker in Yogyakarta) (December 23, 2021)

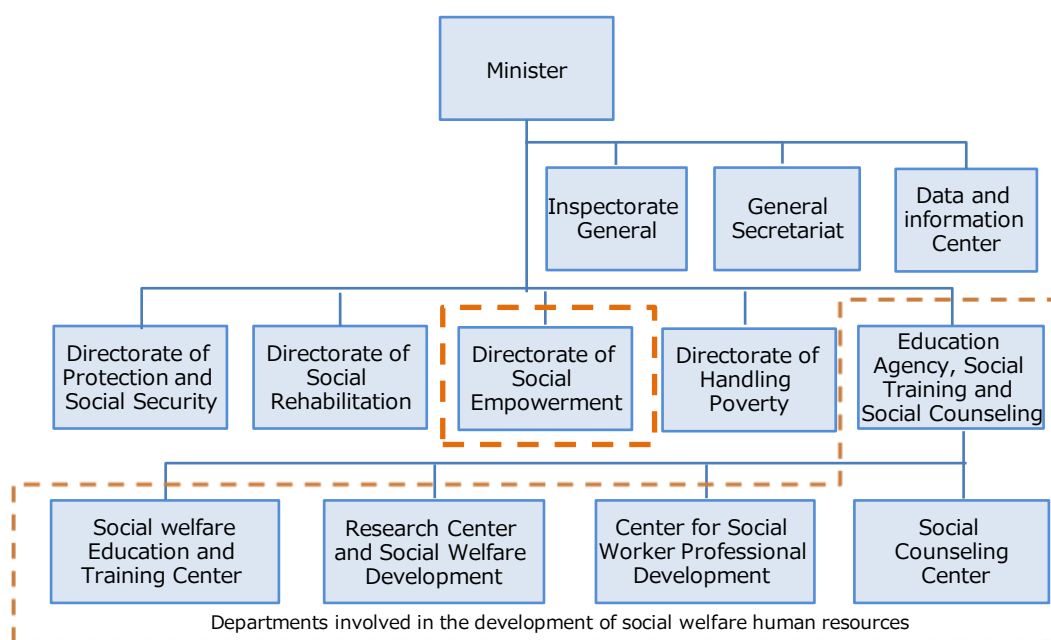


Note: The numbers show the number of administrative government in each level.
Source: Prepared by the Survey Team, the level of administrative division is reference to [14]

Figure 5-1 Implementation structure of social welfare

1) Ministry of Social Affairs (KEMENSOS)

The KEMENSOS is mainly responsible for formulating policies related to social welfare, allocating the national budget, human resource development, standardization of social welfare services, registration, and certification. The organigram of the KEMENSOS is shown in Figure 5-2. The Directorate of Social Empowerment, and Education Agency, Social training and Social Counselling are in charge of the development of social service workforce. The Directorate of Social Empowerment formulates policies, standards and procedures on social empowerment, and provides technical guidance and supervision to social service workforce. The Education Agency, Social training and Social Counselling formulates policies on social service workforce development and certification systems, and accreditation for social welfare facilities.



Source: Prepared by the Survey Team with reference to [15]

Figure 5-2 Organigram of KEMENSOS

2) Social welfare department of provincial government

The social welfare department of the provincial government is in charge of the implementation of social welfare services covering areas across multiple regencies and budget allocation for the implementation of social welfare measures in the local budget.

In this Survey, the Survey Team interviewed the social welfare department of Central Java and West Java, which were introduced by the KEMENSOS. In the social welfare department of these two provincial governments, there are a secretariat for administration and finance, a social empowerment division, a social rehabilitation division, a social protection division, a poverty alleviation division, etc. under the director of the social welfare (the organization of the divisions differs in each province). Social service workforce, including staffs and social workers, are assigned to each division. In addition, there are several social welfare facilities in the province that protect the elderly, children, and the disabled who have no families to care them, and some staff are also assigned to these facilities. Including these facilities, the social welfare department has 815 employees (including 185 social service workforce) in Central Java Province with a population of 32.38 million³, and 350 employees (including 110 social service workforce) in West Java Province with a population of 48.27 million⁴.

³ Population of 2020 [14]

⁴ Population of 2020 [14]

3) Social welfare department of regency government

The regency government is responsible for determining social welfare policies and implementing social welfare programs at the regency level, and the social welfare department of the regency government is responsible for providing public social welfare services.

In this Survey, the Survey Team interviewed the social welfare department of the provincial government of Bondowoso, East Java Province. There are administrative office for administration, finance, and program planning, the empowerment division, the rehabilitation division, the social protection division, and the family planning and women empowerment division, and total of 283 staff members (including 230 social service workforce) belong to the department.

5.1.2 Situations in the areas related to social service workforce

This section outlines the “persons with social welfare problems” as defined by KEMENSOS, and then provides an overview of each field. In addition to children and families, people with disabilities, and the elderly, poverty and human trafficking, which are often the focus of attention in Indonesia, will be discussed.

(1) Target of social welfare

KEMENSOS has issued a Regulation about Data Collection and Management Guideline for Persons with Social Welfare Problems and Potential Source of Social Welfare (2012) and has defined “persons with social problems” as those for whom the government should provide priority assistance. Persons with social problems are categorized into 26 categories, and are defined as people, households or communities that have problems in their lives due to specific disabilities, difficulties, or other factors that make their lives inappropriate from a humanitarian point of view. The specific categories of social problem holders and the number of people and households are shown in Table 5-4 [6] [16] [17]. According to the data released annually by the government of Indonesia, in 2019, there were 637,457 people with social problems in need of assistance, while 155,236 people received government assistance, which is only about 24% of the total number of people with social problems in need of assistance, indicating that there is not sufficient assistance [16].

Table 5-4 Categories and number of persons with social problems (2019)

Persons with social welfare problems			Persons with social welfare problems		
		Number			Number
1	Street children	72	14	Poor family	534,994
		people			household
2	Beggar	147	15	Family with psychological social problems	4,979
		people			household
3	Homeless	197	16	Victims of natural disasters	8
		people			people
4	Abandoned toddler (Under 5 years old)	620	17	Social disaster victim	117
		people			people
5	Homeless child (Over 6 years old)	9,607	18	Migrant workers with social problems	327
		people			people
6	Victims of violence	697	19	People with HIV/AIDS	4,193
		people			people
7	Scavenger	465	20	Children who are at risk of committing a crime*	-
		people			
8	Socio-economic vulnerable women	12,365	21	Children suffering from violence*	-
		people			
9	Abandoned elderly	37,442	22	Children with disabilities*	-
		people			
10	Persons with disabilities	28,504	23	Children in need of special protection*	-
		people			
11	Prostitute	259	24	Minority group*	-
		people			
12	Former residents of correctional institutions	225	25	Victims of human trafficking *	-
		people			
13	Drug abuse victims	439	26	Indigenous people *	-
		people			

*No information on the number of people or households

Source: Prepared by the Survey Team with reference to [16] [17]

(2) Children/Family

With regard to child protection, the Child Protection Law, which came into effect in 2002, stipulates about coordination among local governments and ministries in addition to policy formulation and provision of social welfare services at the national level.

The KEMENSOS has identified children who need to be protected as those who have no families and are at risk of committing crimes, street children, etc. The main program for children is the Integrated Child Welfare Program, which aims to protect children and their families in cooperation with UNICEF since 2015. The program aims to improve access to social welfare services for children and the families by improving the quality, network and management of social welfare services. In addition, such as the provision of vocational training in order to support the self-reliance and social reintegration of children without families, improvement of the birth registration and certification system are being implemented [18]

As for the activities of aid agencies related to child protection in Indonesia, in addition to UNICEF, Save the Children is engaged in activities to improve the quality of child protection, including training for social workers on case management, psychological support for children, child care, and hygiene management. [19].

(3) Persons with disability

Measures have been taken to ensure equal opportunities, rehabilitation, social assistance, and maintenance of social welfare standards for people with disabilities, including the enactment of the Law on Persons with Disabilities in 2009 and the ratification of the United Nations Convention on the Rights of Persons with Disabilities (CRPD) in 2011. For the people with severe disability, the government provides a cash grant called ASPDB (Asistensi Sosial Penyandang Disabilitas Berat: meaning Social Assistance for Persons with Severe Disabilities) . IDR 300,000 per month is provided to persons with severe disability who meet certain conditions proposed by provinces and regencies and approved by the KEMENSOS. In 2017, there were 22,500 beneficiaries [20]. There are 2,186 special schools for children with disabilities in the country. In terms of promoting the employment of people with disabilities, vocational training is provided at the provincial and regency levels, as well as support in the form of materials and equipment, needed to start businesses, are provided. In addition, the Ministry of Labor has established a complaint reception system to deal with discrimination on the basis of disability [21].

As an aid agency, the Department of Foreign Affairs and Trade of Australia Government (DFAT) has a policy of developing projects inclusive in various fields such as economics and governance, education, health, infrastructure, social development, and disaster management. The GIZ (Gesellschaft für Internationale Zusammenarbeit) also deals with job creation for people with disabilities and human rights issues, and continues to provide support in cooperation with the Indonesian government [22].

(4) Elderly person

As of 2020, the percentage of the total population aged 65 and over is 6.26% in Indonesia [23], and the aging rate remains low compared to other countries such as Japan or Vietnam. In Indonesia, family relationships remain strong and most of the care of the elderly is performed by family members; therefore, in many cases, the target of public elderly welfare is limited to the elderly without families and the elderly

with disabilities, etc., and the KEMENSOS, provincial and regency governments, the private sector, and NGOs provide services such as health maintenance activities and recreation to them. In addition, each provincial government operates nursing homes for the elderly, which include services for day care, services with medical care, services for traumatized elderly, home visits and recuperation services where they stay for a certain period of time. Some home visits and day services, provided through NGOs and communities, are free of charge. The services provided in the country are mostly limited to low-income people and elderly people without families, so some of the wealthy people are going abroad with seeking for services [6] [24].

(5) Poverty

The poverty rate in Indonesia has been continuously lowered from 19.1% in 2000 to 9.4% in 2019, reflecting the stable economic growth [11].

Since 2007, the Indonesian government has been implementing a cash transfer program called the Hope Family Program, which provides a cash assistance for households in poverty with pregnant women, children under 18 years old, severely disabled people and elderly people over 70 years old. The program provides IDR 550,000 to 1,000,000 per household annually on the condition that the children to receive necessary health services and compulsory education. Recipients and budgets are continuously expanding from 6 million households (with a budget of IDR 10 trillion) in 2016 to 10 million households and IDR 32.65 trillion in 2019 [25].

World Bank and DFAT are providing support to the Indonesian government on the expansion of this program.

(6) Human trafficking

Indonesia is not only a source country for international human trafficking, but also a destination and a transit country, and domestic human trafficking are also seen. Most of the victims are women and children, but there is also an increasing number of adult males as labor force. In response to the increase in cases of human trafficking, the Indonesian government enacted the Law on Elimination of Human Trafficking Crimes in 2007. Social welfare services provided at the provincial and regency government levels include mental health care for victims, training for self-reliance, and sending victims back to their original place of residence [26].

As an international organization, the International Organization for Migration (IOM) has been working with the Indonesian government to prevent human trafficking, protect people, and strengthening legal measures [26].

5.2 Current status of social service workforce development

5.2.1 Planning

(1) Law, policy and plan

Law on Social Welfare (2009) and Law on Social Worker (2019) have been enforced as laws that regulate social welfare services and social service workforce. In addition to the definition of social welfare as mentioned in 5.1.1(3), Law on Social Welfare defines social service workforce in Indonesia as four types

namely social workers, social welfare workers, social extension workers, and social volunteers. The Law on Social Worker, which came into effect 10 years later, stipulates in detail on the certification required for the position, professional education, scope of social work, and standard codes of practice to be followed by social workers [8] [27].

Although there are no specific policies focusing on social service workforce and its development, the Strategic Plan 2020-2024 of the KEMENSOS mentions the importance of strengthening the capacity of local social volunteers to expand social welfare services in rural areas, and defines the number of training received as one of the indicators for human resource development [12].

As a background of the enactment and implementation of the Law on Social Worker, there was the growing demand for ensuring the quality of social work in Indonesia and advocacy by international organizations such as UNICEF and professional associations such as IPSPI (details on IPSPI to be described in 5.2.3(2)2)).

(2) Definitions and regulations

The Law on Social Welfare defined the implementation of social welfare as a social service provided by the government, local government and the community in order to meet the basic needs of the people, and includes social rehabilitation, social security, social empowerment and social protection. It also defines the human resources involved in the implementation of social welfare, including volunteers, as shown in Table 5-5.

Table 5-5 Classification and definition of social service workforce

Category	Definition
Social worker	A person working in the government or private sector who has specialized knowledge and skills in social work from education, training, and work experience in the field. The Law on Social Worker (2019) stipulates that in order to work as a social worker, a person must pass a competency test and acquire certification.
Social welfare worker	A person with or without specialized education in social problem solving or social welfare services who works for a government agency or private organization in the field of social welfare.
Social extension worker	An employee hired by the KEMENSOS to share information and educate the community in order to promote the social welfare programs implemented. Completion of specialized education is not required.
Social volunteer	A person or group of people, with or without social work experience or remuneration, who work on their own initiative in the field of social work.

Source: Prepared by the Survey Team with reference to [8] [27] and interview with IPSPI

As indicated in the definition of social worker in Table 5-5, the Law on Social Worker, which came into effect in 2019, stipulates that in order to engage in work as a social worker, the social worker needs to be certified. On the other hand, it has just been two years since the Law on Social Worker came into effect, there are many social workers who are not certified. This can be seen from the fact that one of the numerical targets in the Strategic Plan 2020-2024 of the KEMENSOS is as increasing the percentage of qualified social workers to 25% by 2024 [12]. The number of certified social workers as of 2022 is only 14% of this target⁵.

⁵ As described later in 5.2.1(3), these are calculated as reference values based on the information collected.

Of the classifications in Table 5-5, Table 5-6 outlines the Law on Social Worker, which defines social workers in particular.

Table 5-6 Outline of Law on Social Worker (2019)

Scope of social work	<p>The scope of social work includes prevention of social disfunction, social protection, social rehabilitation, social empowerment, and social development, the detailed description is as follows.</p> <ol style="list-style-type: none"> 1. Prevention of social disfunction Provide dissemination, guidance, support, capacity building, training, assistance in accessing social services, and advocacy to prevent disfunction in individuals, families, groups, or community groups. 2. Social protection Protect individuals, families, or community groups from the risk of social vulnerability, and support access to social assistance, advocacy, and legal support. 3. Social rehabilitation Regarding basic social rehabilitation, motivation and psychosocial diagnosis, treatment, mental guidance, physical guidance, social guidance, counseling, access support, social support, and referral are provided to restore social functioning of individuals, families, and community groups. Regarding advanced social rehabilitation, in addition to the contents of basic social rehabilitation, physical therapy, mental therapy, psychosocial therapy, livelihood restoration therapy, fulfillment of appropriate livelihood, and support for access to social services will be provided. 4. Social empowerment Improve the capacity and quality of life of individuals, families, groups, or communities with social problems. Identify social problems, raise awareness, provide training, strengthen community-based activities, and mobilize support in order to increase the number of organizations and individuals engaged in social welfare. 5. Social development Provide social mapping, advocacy, psychosocial education, social campaigning, partnership building, access support, social supervision, and strengthen social integration in order to improve the quality of life and social functioning of individuals, families, groups, or communities through active social participation.
Social work practice standard	<p>Social workers are expected to adhere to social work practice standard, including the following</p> <ol style="list-style-type: none"> 1. Standard operating procedures Initial approach, assessment, intervention planning, intervention, evaluation, referral and termination 2. Standard of competence Knowledge, skills and values in social work practice 3. Standard of service Prevent social dysfunction, and conduct social protection, social rehabilitation, social empowerment and social development.
Professional education	<p>Person who work as social worker must complete social worker professional education. In order to participate social worker professional education, bachelor of social welfare, bachelor of applied social work or other social science bachelor degree related to social welfare are required.</p>
Certification / License	<p>In order to perform social work, social workers need to acquire a certification (STR: Surat Tanda Registrasi). After acquiring the certification, social workers need to register with the local government of the area where they work and be licensed.</p>
Social worker organizations	<p>Social workers should establish an independent social worker organization⁶ that serves to improve social workers' skills, career support, protection, and welfare. Social workers need to belong to this organization. The social worker organization develop a code of ethics, registers social workers, improves their knowledge and skills, protects and supervises social worker.</p>

Source: Prepared by the Survey Team with reference to Law on Social Worker (2019)

⁶ According to interview with IPSPI, social worker organization means IPSPI. Interview with IPSPI on December 21, 2021.

(3) Budget

The budget of KEMENSOS, the main ministry in charge of social welfare, has continuously increased by more than 50% per year on average, from IDR 18.3 trillion in 2017 to IDR 92.8 trillion in 2021. This is due to the shift in the source of the benefit program for households in poverty from other ministries to the KEMENSOS, as well as the response to COVID-19 [10].

The budget of the Agency for Education, Research and Social Extension, which is responsible for human resource development of social service workforces, is enclosed in the orange dotted line in Table 5-7. This budget is allocated to the training centers located nationwide in the country and to the Bandung School of Social Welfare (POLTEKESOS: Politeknik Kesejahteraan Sosial), which is a vocational training school for social service workforces under the jurisdiction of the KEMENSOS, and is used for human resource development.

Considering the budget allocated to the Agency for Education, Research and Social Extension as the budget for social service workforce development, the share of the budget allocated to social service workforce development has been no more than 1-2% of the total budget of the KEMENSOS since 2017. After 2020, the budget for the agency is less than 1% of the total budget of the KEMENSOS, although this may be due to the fact that a large part of the KEMENSOS budget was used to assist individuals and households affected by COVID-19.

Table 5-7 Budget of KEMENSOS (in thousands IDR)

	2017	2018	2019	2020	2021
01 General Secretariat	324,207,478	332,315,654	372,227,070	469,129,710	2,159,314,886
11 SOCIAL PROTECTION	324,207,478	332,315,654	372,227,070	469,129,710	2,159,314,886
01.01 Management Support Program and Implementation of Other Technical Tasks Ministry of Social Affairs	324,207,478	332,315,654	372,227,070	469,129,710	
01.Social Protection Program					1,424,941,221
01.Management Support Program					734,373,665
02 Inspectorate General	35,342,714	35,788,417	47,302,812	46,550,770	43,408,503
11 SOCIAL PROTECTION	35,342,714	35,788,417	47,302,812	46,550,770	43,408,503
02.03 Supervision and Accountability Improvement Program for Ministry of Social Apparatuses	35,342,714	35,788,417	47,302,812	46,550,770	
02.Management Support Program					43,408,503
03 Directorate General of Social Empowerment	2,053,290,989	433,823,251	429,362,610	391,757,849	456,207,360
11 SOCIAL PROTECTION	2,053,290,989	433,823,251	429,362,610	391,757,849	456,207,360
03.08 Social Empowerment Program	2,053,290,989	433,823,251	429,362,610	391,757,849	403,868,545
03.Management Support Program					52,338,815
04 Directorate General of Social Rehabilitation	1,027,550,669	1,006,519,857	1,163,312,583	973,764,729	1,517,485,787
11 SOCIAL PROTECTION	1,027,550,669	1,006,519,857	1,163,312,583	973,764,729	1,517,485,787
04.06 Social Rehabilitation Program	1,027,550,669	1,006,519,857	1,163,312,583	973,764,729	854,100,115
04.Management Support Program					663,385,672
05 Directorate General of Social Protection and Security	13,880,339,636	17,675,677,420	34,765,659,285	31,363,074,415	30,993,505,300
11 SOCIAL PROTECTION	13,880,339,636	17,675,677,420	34,765,659,285	31,363,074,415	30,993,505,300
05.07 Social Security and Protection Program	13,880,339,636	17,675,677,420	34,765,659,285	31,363,074,415	30,893,292,800
05.Management Support Program					100,212,500
06 Directorate General for Handling the Poor	618,489,206	14,122,676,027	21,405,310,213	28,992,250,028	57,256,152,505
11 SOCIAL PROTECTION	618,489,206	14,122,676,027	21,405,310,213	28,992,250,028	57,256,152,505
06.09 Program for Handling the Poor	618,489,206	14,122,676,027	21,405,310,213	28,992,250,028	57,182,820,009
06.Management Support Program					73,332,496

	2017	2018	2019	2020	2021
11 Agency for Education, Research and Social Extension	386,028,666	352,504,520	723,283,806	531,116,093	391,515,950
10 EDUCATION	56,747,855	78,108,141	128,285,360	58,040,705	51,345,827
11.04 Education, Training, Research and Development Program and Social Extension	56,747,855	78,108,141	128,285,360	58,040,705	
11.Management Support Program					51,345,827
11 SOCIAL PROTECTION	329,280,811	274,396,379	594,998,446	473,075,388	340,170,123
11.04 Education, Training, Research and Development and Social Extension Programs	329,280,811	274,396,379	594,998,446	473,075,388	216,331,573
11.Management Support Program					123,838,550
TOTAL as MINISTRY OF SOCIAL	18,325,249,358	33,959,305,146	58,906,458,379	62,767,643,594	92,817,590,291
Ratio of budget for human resource development	2.11%	1.04%	1.23%	0.85%	0.42%

Source: Prepared by the Survey Team with reference to [10]

(4) Certification system

The Indonesian government has introduced the Indonesian Qualifications Framework (IQF) as a national qualifications framework in Presidential Regulation 08, 2012 on concerning Indonesia's National Qualifications Framework. The qualifications are divided into nine levels and are applicable to all occupations in all fields such as medicine, law, and industry in Indonesia [28].

In light of this national trend toward the introduction of qualifications, and in response to the growing demand for ensuring the quality of social workers since the late 2000s, an accreditation system was introduced in 2012, and the Social Work Certification Institute (LSPS: Lembaga Sertifikasi Pekerjaan Sosial), a governmental accreditation organization, was established. However, this accreditation system is based on the KEMENSOS Regulation Number 16/2012 on Certification for Professional Social Workers and Welfare Workforce, which came into effect in 2012, and is not in line with the IQF framework mentioned above.

Thereafter in the Law on Social Worker, which came into force in 2019, a new certification system for social workers in line with the IQF framework was stipulated and a new certification system was launched. According to the provisions of the law, until 2024 is a transition period to establish the new certification system, and during the transition period, accreditation will be continued as before provisionally in accordance with KEMENSOS Regulation Number 16/2012. In the followings, the certification system stipulated in the Law on Social Worker in 2019, which the Indonesian government aims to establish in the future, will be described, followed by a description of the provisional accreditation system until 2024⁷.

1) Certification system as stipulated by the Law on Social Worker

Table 5-8 shows a summary of the provisions regarding certification and license registration of the Law on Social Worker.

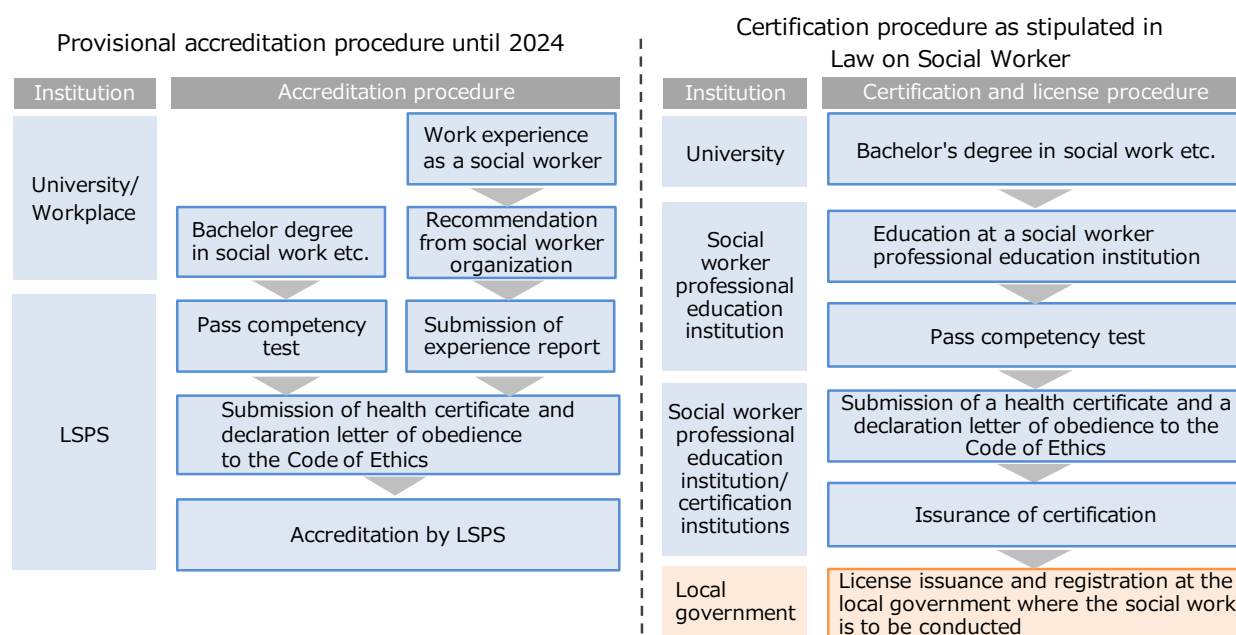
⁷ The certification system stipulated in the Law on Social Worker and the provisional one until 2024 stipulated in KEMENSOS Regulation Number 16/2012 are both termed as certification in Indonesia. But for the sake of clarity, the certification system stipulated in the Law on Social Worker is to be called as "certification" and the provisional one until 2024 stipulated in KEMENSOS Regulation Number 16/2012 is to be called as "accreditation" in this report.

Table 5-8 Law on Social Worker (2019) provisions on certification and license.

Requirements for certification	In order to acquire the certification, a certificate of passing the competency test, a physical and mental health certificate, and a declaration letter of obedience to the code of ethics, etc. are required. The competency test can be taken at a social workers professional educational institution, or it can be interpreted with previous work experience in the field of social work. The details of the interpretation of the competency test with previous work experience will be specified in the KEMENSOS regulations.
Validity period of the certification	The validity of the certification is five years and can be renewed. The certification becomes invalid if it is not renewed after the expiration, if a request for revocation is made, the holder dies, or the holder violates the provisions of the law or the code of ethics for social workers.
License	A license must be issued and registered by the local government where the social work practice is to be conducted. The license is valid for five years and can be renewed.
Provisional regulations for transition period	Social workers who have been performing social work in accordance with the past regulations may perform social work without certification for five years after the enforcement of this law. Accreditations acquired in the framework prior to the enforcement of this law may be interpreted as the new certification stipulated in this law.

Source: Prepared by the Survey Team with reference to [27] and interview with LSPS

This law stipulates the establishment of professional educational institutions and certification institutions for social workers by 2024. And after 2024, as shown in the flow chart on the right of Figure 5-3, competency tests will be conducted and certifications will be issued to those who have completed professional education at professional education. After the certification is issued, one needs to be issued a license and registered with the local government where the social work to be performed.



Source: Prepared by the Survey Team with reference to interview

Figure 5-3 Procedure of certification and licensing

2) Provisional accreditation procedure until 2024

The provisional accreditation procedure until 2024 is shown in left in Figure 5-3. The procedure can be divided into two flows depending on whether or not the applicant has work experience as a social worker

in the past. If the applicant has no past work experience as a social worker and has completed an undergraduate education in social work, applied social work, or other sociology related to social welfare, the applicant must pass a competency test implemented by LSPS, and then submit documents such as a medical certificate and a declaration letter of obedience to the code of ethics to LSPS. After the documents have been reviewed by LSPS, the accreditation will be issued. If the applicant has previous work experience as a social worker, a recommendation is sent to LSPS from a social worker organization such as IPSPI, and the applicant then submits documentation of previous social work experience before accreditation is issued⁸.

The LSPS, which is playing the role of a provisional accreditation body, will be dissolved after the establishment of the social work professional educational institution and certification institutions after 2024.

3) Domestic reactions to the introduction of certification systems

KEMENSOS intends to ensure the quality of social work by increasing the number of certified social workers, and has set a target in its Strategic Plan 2020-2024 to increase the number of certified social workers to 25% of the workforce by 2024. As described in 5.2.1(5), it is difficult to accurately identify the total number of social workers in Indonesia, so it is not possible to confirm the percentage of certified social workers among all social workers. However, if the number of registered social workers in IPSPI (20,500), which is the largest professional organization in Indonesia requiring all social workers to be registered, is used as the parameter, it can be calculated that 14% of them have acquired the certification as of January 2022. One of the reasons for the slow growth in the number of certified social workers since the introduction of the certification system is that the KEMENSOS does not have a special salary framework for certified social workers, and there is no difference between certified and non-certified social workers in terms of salary. Currently, there is no incentive for social workers to acquire certification other than to prove the quality of themselves⁹.

As for the reaction of social workers to the introduction of the certification system, when the accreditation system was introduced in 2012, there were many objections especially from senior social workers who were not familiar with taking a written examination. On the other hand, there were positive comments for the certification system based on the Law on Social Worker in 2019, since it is expected to improve the social status of social workers by defining the certifications within the IQF framework¹⁰.

(5) Human resources information and data

The existing database and number of social service workforces in Indonesia is captured separately by three agencies namely IPSPI, LSPS, and the KEMENSOS. The databases of these agencies are not integrated, and it is difficult to accurately identify the number of social service workforce because there is a possibility that the social service workforce may be registered in duplicate or may not be registered in any of the databases. Among four type of social service workforces defined in the Law on Social Welfare, social worker is registered in LSPS and social extension worker is registered in KEMENSOS. Meanwhile, social

⁸ According to the interview with IPSPI, it is necessary to register and join IPSPI in advance in order to be eligible for accreditation.

⁹ Interview with IPSPI (Feb. 10, 2022)

¹⁰ Interview with social worker (same social worker as in footnote 2) (December 23, 2021)

welfare workers and social volunteers, in particular, are registered in both IPSPI and the KEMENSOS in duplicate, or may not be registered in either of them, and the number of them may not be accurate.

The following is a summary of the each database and the number of social service workforces registered in.

1) Database of IPSPI

IPSPI is the largest independent organization of social service workforces, including social workers (details of IPSPI is discussed later in 5.2.3(2)). All social workers are required to be registered with IPSPI, and as of January 2022, there are 20,500 registered social workers, including social workers with certification, social workers without certification and assistants, etc. [19] [29].

IPSPI collaborates with universities that provide education in social work or develop social workers in order to ensure that students are registered with IPSPI upon graduation. IPSPI recognizes that the accurate registration of social workers is necessary and is in the process of improving its data collection system¹¹.

2) Database of LSPS

The LSPS, which issues accreditation to social workers, has so far issued accreditation to about 3,000 people. Although it is not exactly clear to what extent the LSPS maintains a database of detailed information, the agency at least has information on the number of certified social workers. According to information from IPSPI, it is necessary to register with IPSPI in order to receive certification, so it is likely that these 3,000 overlaps with the number of people who are registered with IPSPI.

3) Database of KEMENSOS

The KEMENSOS database contains a list of social service workforce working in governmental organizations, regardless of whether they are permanent or project staff. Table 5-9 shows the number of social service workforce working in government organizations. In the KEMENSOS, there are about 39,400 social workers and social welfare extension workers at the central and local government levels, and about 400 case workers in the provincial and regency governments, about 39,800 workforces in total registered as engaged in social work.

Table 5-9 Social service workforces in governmental organizations

Ministry	Department	Work title	Number of Staff
Ministry of Social Affairs	Social Rehabilitation (Child Welfare Program)	Social worker	638
		Social worker	1,458
	Extension worker	282	
	Social Protection and Security (Family Hope Program)	Social extension	36,946
		Extension assistant	96
Provincial Government	Integrated Services Centres for Child Protection and Women Empowerment	Case worker	66
District Government	Integrated Services Centres for Child Protection and Women Empowerment	Case worker	322
		Total	39,808

Source: [19]

¹¹ Interview with IPSPI (Dec. 21, 2021)

4) Efforts to identify social service workforces

According to the UNICEF report, there are 68,745 social service workforces in Indonesia as of 2015, including social workers and social welfare extension workers etc., and 45,000 of them belong to government agencies [30]. As a result of this time survey, the number of social workers registered with IPSPI was 20,500 (including 3,000 qualified social workers as identified by LSPS), and the number of social service workforces in government agencies was 38,800. However, the total number of IPSPI registrants and government workers is 59,300, which means that about 9,000 less than the number of social service workforces indicated in the UNICEF report, so at least 9,000 people have not been identified. The KEMENSOS also recognizes the need to accurately identify social service workforces nationwide and has started by receiving information from IPSPI.

5.2.2 Development

(1) Educational institutions and educational systems

In 1946, the Government recognized the needs for a research and educational institution on social welfare and established the predecessor of Bandung School of Social Welfare (POLTEKESOS: Politeknik Kesejahteraan Sosial). This was the first institution to have offered education on social welfare in Indonesia. Since then, with the growing need for social service workforce development and education on social welfare in the country, other universities have also developed courses on social welfare. As of 2017, there are 31 institutions providing education on social welfare or developing social service workforce [31]. These 31 institutions and their programs are listed below.

Table 5-10 Social work degree programs in Indonesia

	Educational institution	Type	Programs and degrees¹²	Province
1	State Islamic University Ar-Raniry	Public	Bachelor of Social Welfare	Ache
2	North Sumatra University	Public	Bachelor of Social Welfare Science	North Sumatra
3	Muhammadiyah University North Sumatra	Private	Bachelor of Social Welfare Science	North Sumatra
4	STISIPOL Chandradimuka Palembang	Private	Bachelor of Social Welfare Science	South Sumatra
5	Bengkulu University	Public	Bachelor of Social Work	Bengkulu
6	State Islamic University in Jakarta	Public	Bachelor of Social Welfare Science	Jakarta
7	Muhammadiyah University Jakarta	Private	Bachelor of Social Welfare Science	Jakarta
8	Widuri College of Social and Political Science	Private	Bachelor of Social Welfare Science	Jakarta
9	Institute Jakarta Social and Political Sciences	Private	Bachelor of Social Welfare Science	Jakarta
10	Binawan University	Private	Bachelor of Social Welfare Science	Jakarta
11	University of Indonesia	Public	Bachelor of Social welfare Master of Social welfare Doctor of Social welfare	West Java
12	Bandung School of Social Welfare	Public	Bachelor of Social Work Bachelor of Rehabilitation Bachelor of Protection and Empowerment Master of Social Work	West Java
13	Padjadjaran University	Public	Bachelor of Social Welfare Master of Social Welfare Doctor of Social Welfare	West Java
14	Langlangbuana University	Private	Bachelor of Social Welfare Science	West Java
15	Pasundan University	Private	Bachelor of Social Welfare Science	West Java

¹² Refer to explanation of the Ministry of Education, Culture, Sports, Science and Technology of Government of Japan, and describe the degrees as S1: Bachelor, S2: Master, S3: Doctor. [58]

	Educational institution	Type	Programs and degrees¹²	Province
16	State Islamic University in Yogyakarta	Public	Bachelor of Social Welfare Science	Yogyakarta
17	Wijaya Kusuma University Surabaya	Private	Bachelor of Social Welfare Science	East Java
18	Muhammadiyah University Malang	Private	Bachelor of Social Welfare Science	East Java
19	Jember University	Public	Bachelor of Social Welfare Science	East Java
20	Muhammadiyah Madiun College of Social and Political Science	Private	Bachelor of Social Welfare Science	East Java
21	Universitas Hasanuddin Makassar	Public	Bachelor of Social Welfare	South Sulawesi
22	Alauddin Makassar State Islamic University	Public	Bachelor of Social Welfare Science	South Sulawesi
23	College of Social Welfare Science Manado	Private	Bachelor of Social Welfare Science	North Sulawesi
24	College of Social Welfare Science Tamalanrea	Private	Bachelor of Social Welfare Science	South Sulawesi
25	University of Technology Sulawesi	Private	Bachelor of Social Welfare Science	South Sulawesi
26	Social Work Academy Kupang	Private	D4 Social Work	East Nusa Tenggara
27	Muhammadiyah University Kupang	Private	Bachelor of Social Welfare Science	East Nusa Tenggara
28	Cenderawasih University	Public	Bachelor of Social Welfare Science	Papua
29	Indonesian Christian University, Maluku	Private	Bachelor of Social Welfare Science	Maluku
30	Haluoleo University Kendari	Private	Bachelor of Social Welfare Science	Southeast Sulawesi
31	Nahdatul Ulama University	Private	Social Welfare Study	Golontalo

Source: Prepared by the Survey Team with reference to [32]

The Law on Social Worker stipulates that in order to be certified as a social worker, a candidate must (1) complete a bachelor's degree in social work, applied social work, or other social science degree related to social welfare, (2) complete a professional social worker education, and (3) pass a competency test. As of January 2022, there are no institutions that provide professional social worker education, and it is stipulated in the law that these institutions should be established by 2024. The law does not specify the details of the professional social worker educational institution, but it states that it is a higher educational institution¹³ organized in collaboration with the KEMENSOS and independent organizations that are responsible for the quality of social workers.

The following is an overview of the independent organizations consisting of higher educational institutions related to social welfare in Indonesia and representative educational institutions of social welfare.

1) Indonesian Association of School of Social Work (ASPEKSI: Asosiasi Pendidikan Kesejahteraan Sosial dan Pekerjaan Sosial Indonesia)

The Indonesian Association of School of Social Work (ASPEKSI: Asosiasi Pendidikan Kesejahteraan Sosial dan Pekerjaan Sosial Indonesia), an independent association of higher educational institutions related to social welfare, was established in 1986 with the aim of developing higher education in social welfare in Indonesia¹⁴. According to the KEMENSOS booklet “the Role of Social Work Institutions in Empowering

¹³ Higher education in Indonesia is divided into (1) 3-year diplomat or bachelor, (2) bachelor with honors, professional bachelor, and (3) general profession within the framework of bachelor equivalent. Of these, the professional social work educational institutions are categorized as (3) general profession.

¹⁴ The name was changed from Indonesian Association of Social Work Education (IPPSI: Ikatan Pendidikan Pekerjaan Sosial Indonesia) to the current ones in 2019. The information in above was of the role of IPPSI in the KEMENSOS booklet. However, it has been confirmed by ASPEKSI that ASPEKSI has inherited the same role (January 17, 2022).

Social Workers”, ASPEKSI has the following roles in the development and education of social service workforces.

Table 5-11 Role of ASPEKSI

- Setting educational competency standards for social work
- Developing an educational curriculum for social work.
- Improving the quality of social work teachers.
- Identifying the current state of social work education in terms of levels of education, courses, etc., and making recommendations for improvement.
- Supporting the exchange of ideas and collaboration among higher educational institutions on social work research and teaching methods.
- Publishing articles on social work.

Source: [31]

2) Bandung School of Social Welfare (POLTEKESOS)

POLTEKESOS is affiliated with the KEMENSOS, and as mentioned in 5.2.2(1), it was the first educational institution in Indonesia to have offered education on social welfare. At the time of its establishment, there were no other institutions that conducting research and education on social welfare, and the strong need for research made the school to focus on academic education and research, but in recent years, POLTEKESOS has been focusing more on providing practical education that is useful in the field of social welfare. In the past, all graduates were employed by the KEMENSOS, but in recent years, graduates have been working in various fields such as social workers and employees in NGOs, government, governmental social welfare programs, local governments, and private companies¹⁵.

The number of undergraduate students is about 450 per academic year (150 males and 300 females), and the number of master's students is about 30 per academic year (10 males and 20 females). The POLTEKESOS has produced 11,088 bachelor degree graduates by 2019 [33].The university does not have a system for providing continuing education to current social service workforces, but a small number of current KEMENSOS employees and social workers (less than 10% of the total student body) are also enrolled and studying at the POLTEKESOS.

(2) Curriculum

1) Development of curriculum

IPPSI, the predecessor of ASPEKSI, developed a basic bachelor-level curriculum in social work in 2011 after several years of consultation among member universities with the support of Save the Children [34]. The curriculum requires 144 credits overall, of which 19 courses (57 credits) are required as the compulsory and the remaining 87 credits can be customized by each university reflecting its own strengths, local culture and needs. The 19 basic curriculum at the bachelor level developed by IPPSI (now ASPEKSI) are shown in Table 5-12. As of now, each university are developing their curriculum based on this basic curriculum [35] [36].

¹⁵ Interview with POLTEKESOS (December 14, 2021)

Table 5-12 Basic bachelor-level curriculum

No.	Subject	Credit
1	Values, Social Work Ethics/Social Welfare and Human Rights or Philosophy, Social Work Ethics/Social Welfare and Human Rights	3
2	Psychology for Social Work/Social Welfare	3
3	Sociology for Social Work/Social Welfare	3
4	Human Behavior and Social Environment or Human Behavior in Social Environment	3
5	Social Law	3
6	Social Service System or Welfare Business System Social	3
7	Social Policy and Planning or Planning and Social Policy	3
8	Introduction to Social Work/Social Welfare	3
9	Generalist Social Work Method or Social Intervention Generalist	3
10	Social Work Methods with Individuals and Families or Social Intervention with Individuals and Families	3
11	Social Work Methods with Groups or Interventions Social with Group	3
12	Methods of Social Work with Communities and Organizations or Social Intervention with Communities and Organizations	3
13	Social Work/Social Welfare Theory	3
14	Social Work/Social Welfare Research Methods	3
15	Human Services Organization Management	3
16	Social Work/Social Welfare in Multicultural Society	3
17	Social Work Supervision or Social Work/Social Welfare Consulting	3
18	Practicum I (Micro)	3
19	Practicum II (Macro)	3
Total		57

2) Curriculum of POLTEKESOS

As mentioned above, the curriculum is developed by each university based on the basic curriculum prepared by ASPEKSI with some adjustments made by each university. The curriculum of POLITEKESOS¹⁶, which is under the KEMENSOS, is used as an example here. Their curriculum is developed based on the needs of the users and is reviewed regularly.

To complete a bachelor degree, an undergraduate student needs to earn a total of 155 credits (95 of which are compulsory, 18 elective, 6 thesis, and 36 practical training) in 8 semesters. The curriculum is shown in Table 5-13.

¹⁶ POLTEKESOS changed its name from Bandung Social Welfare College (STKS: Sekolah Tinggi Kesejahteraan Sosial Bandung) to its current name, POLTEKESOS, in 2019. This curriculum was used in STKS. However, even after the change to POLTEKESOS, it is still an educational institution where students can acquire bachelor and master degrees.

Table 5-13 Curriculum of POLITEKESOS (2017 bachelor degree)

Semester 1	
Subject	Credit
Indonesian Government System	2
Welfare Economy	2
Sociology for Social Work	3
Pancasila Education and Citizenship	2
Religious Education	2
English	2
Basics of Logics	2
Psychology for Social Work 1	3
Indonesian Language for Writing Works	2
Semester 2	
Subject	Credit
Analysis of Social Problems	3
Social Protection System	2
Introduction to Social Welfare and Social Work	3
Values, Ethics and Human Rights in Social Work	3
Social Law	3
Psychology for Social Work II	3
Statistics for Social Work	3
Semester 3	
Subject	Credit
Human Behavior in the Environment	3
Social Work Theories	3
Recording Techniques at Social Work	3
Communication in Social Work Practice	3
Methods of Social Work Practice	3
Social Work in Multicultural Society	3
Social Service System	3
Semester 4	
Subject	Credit
Quantitative Social Work Research	3
Case Management	2
Social Work with Individuals and Family	3
Social Work with Groups	3
Social Work with Organizations and Public	3
Social Counseling at Social Work	2
Behavioral Change at Social Work	3
Service Organization Management	3
Semester 5	
Subject	Credit
Qualitative Social Work Research	3
Psychosocial Therapy	3
Social Policy	3
Social Work Supervision	3
Social Work Practices for the Elderly	3
Social Work Practices with HIV/AIDS	3
Social Work Practices in Industry	3
Social Work Practices in the Health	3
Social Work Practices in Education	3
Semester 6	
Subject	Credit
Practicum I (Practice of Social Workforce)	12
Social Work Practices with Poverty	3
Social Workers Practices with Special Groups	3
Social Workforce Practices with Disasters & Refugees	3
Social Work Practices with Children	3
Social Work Practices with Drugs	3
Social Work Practices with KAT	3
Correctional Social Work Practices	3
Practice Social Work with Disability	3
Social Work Practices in the Education	3
Semester 7	
Subject	Credit
Writing Social Work Scientific Work	6
Practicum II (Micro Intervention)	12
Semester 8	
Subject	Credit
Writing Social Work Scientific Work	6
Practicum II (Macro Intervention)	12

Source: [37]

(3) Continuous training

The training which current social workers receive can be broadly categorized into training provided by the KEMENSOS, training provided by social worker organizations, and training provided by international organizations.

As for the movement in Indonesia regarding the development of social service workforce, the most emphasis has been placed on the certification of social workers under the Law on Social Worker, which came into effect in 2019. And, the KEMENSOS seems to have no detailed policy on continuing education for those who are already working as social workers. Under these circumstances, current social workers are voluntarily participating in workshops and seminars related to their area of expertise in order to improve their professional knowledge, in addition to practicing their skills on a daily work basis¹⁷.

In a survey conducted by UNICEF in 2019, social service workforces including supervisor and manager level pointed out the lack of opportunities for continuing education as an issue to be dealt with [19].

1) Training conducted by the KEMENSOS

The Education Agency, Social Training and Social Counseling of the KEMENSOS provides training and workshops to improve the quality of social service workforce. In addition to the divisions shown in Figure 5-2, the agency has seven training centers across the country as shown in Table 5-14, which are responsible for training social service workforce in the provinces. In addition, the Directorate of Social Empowerment also provides training for social service workforces as well [31].

According to the current social workers, the training provided by the KEMENSOS is considered to be for social service workforces belonging to government organizations, so it is not utilized by social service workforces not belonging to government organizations¹⁸.

Table 5-14 Training centers in provinces under the jurisdiction of the KEMENSOS

	Training center	Location
1	Center for Social Welfare Education and Training, Lembang, Bandung	Bandung
2	Center for Social Welfare Education and Training, Yogyakarta	Yogyakarta
3	Center for Research and Development of Social Welfare Services, Yogyakarta	Yogyakarta
4	Center for Social Welfare Education and Training, Padang	Padang
5	Center for Social Welfare Education and Training, Banjarmasin	Banjarmasin
6	Center for Social Welfare Education and Training, Makassar	Makassar
7	Center for Social Welfare Education and Training, Jayapura	Jayapura

Source: Prepared by the Survey Team with reference to the list shared by KEMENSOS

2) Training conducted by professional organizations

Professional social worker organizations (discussed later in 5.2.3(2)) also provide training to current social service workforces. In particular, IPSPI provide trainings as one of its roles is to improve the expertise of social workers. However, in recent years, IPSPI has been focusing on advocacy for the establishment of a certification system for social workers, and has not been able to provide much trainings for social service workforces. Only a few trainings have been provided in recent years, such as training on mental health related capacity building and training on disaster response for social workers.

¹⁷ Interview with social worker (same social worker as in footnote 2) (December 23, 2021)

¹⁸ Interview with social worker (same social worker as in footnote 2) (December 23, 2021)

3) Training conducted by international organizations and NGOs

International organizations such as UNICEF and Save the Children in collaboration with KEMENSOS and local governments, provide various training programs. A summary of the training provided by each organization is shown in Table 5-15.

Table 5-15 Training provided by international organizations for current social service workforces

Organization	Training contents
UNICEF	A program for child protection is in implementation. The program aims to improve social welfare services through the capacity building of social service workforces, and training for social service workforces is being provided. In particular, training on child protection, psychological support, case management, child care, and child hygiene is provided to social service workforces assigned to provincial and regency governments, which are the providers of public social welfare services. [19].
Save the Children	Training on child protection, psychological support, case management, parenting, and improving child hygiene is provided [19].
GIZ	Collaborating with the KEMENSOS and providing online training in order to improve the content of the Hope Family Program. [38].
IFSW ¹⁹	Training on mental health support for disaster victims was conducted [39].

Source: Prepared by the Survey Team with reference to the source mentioned in table

5.2.3 Support

(1) Employment and retention

IPSPI (discussed later in 5.2.3(2)2)) has as one of its objectives the improvement of the social status and protection of social service workforces, and since it deals with solving various problems related to social work, it plays a certain role in the employment and retention of social service workforces.

In the interview with IPSPI, the disparities in employment environment (such as salary, etc.) between social workers in governmental organizations and those in non-governmental organizations including international organizations and NGOs was mentioned as one of the issues that the IPSPI is aware of. This is not limited to social service workforces, but is due to the fact that the salary regulations applied in government organizations and those applied in international organizations are different from each other. In addition, the salary of the provincial government in Jakarta is also higher than that of other provinces due to the same salary regulations. As a response to these issues, the organization has been advocating to the KEMENSOS for better treatment of social service workforces belonging to government organizations, and these activities also lead to improvement of employment situation. However, most of the actions taken by IPSPI are done as advocacy, and there is no information that a dedicated consultation desk or person in charge has been established for employment and retention.

(2) Social worker organizations and networks

1) Indonesian Social Work Consortium (KPSI)

The Indonesian Social Work Consortium (KPSI: Konsorsium Pekerjaan Sosial Indonesia) was established in 2011 as part of the ASEAN Social Work Consortium, and is responsible for promoting networking among various social welfare related organizations in Indonesia. The main roles of this consortium are: (1)

¹⁹ IFSW: International Federation of Social Workers

to function as a forum to promote collaboration among organizations in order to improve the social status and capacity of social service workforces, (2) to provide technical support and advocacy opportunities to member organizations in order to improve the quality of social welfare services, and (3) to lead improving the social status of social workers as a profession [31]. As of 2018, the following 15 organizations are members.

Table 5-16 Member organization of Indonesian Social Work Consortium

1. Ministry of Social Affairs (MOSA)	9. Indonesian Association of Community Welfare (IPSM)
2. Indonesian Association of Social Workers (IPSPI)	10. Indonesian Association of Social Volunteers (IRSI)
3. Indonesian Association of School of Social Work (ASPEKSI)	11. Indonesian Association of Psychosocial Rehabilitation (JRPI)
4. National Council on Social Welfare (DNIKS)	12. Social Work Sketch (SWS)
5. Institute for Professional Certification of Social Workers (LSPS)	13. Indonesian Association of Child & Family Social Workers (APSAKI)
6. Social Welfare Agency Certification Body (BALKS)	14. Indonesian Association of Addiction Counselor Social Workers (APSANI)
7. Social Welfare Student Communication Forum (FORKOMKASI)	15. Federation of Independent Workers (FPM)
8. Indonesian Association of Social Extension (IPENSI)	

Source: [36]

2) Indonesian Association of Social Workers (IPSPI)

The Indonesian Association of Social Workers (IPSPI: Ikatan Pekerja Sosial Profesional Indonesia) is the largest independent organization of social service workforces including social workers. It was established in 1998 for the purpose of registering and identifying individual social workers engaged in social work in the country. The Code of Ethics for social workers is also developed by IPSPI. An explanation of IPSPI including its role is presented in Table 5-17.

Table 5-17 IPSPI's main roles and types of membership

Main roles	<ul style="list-style-type: none"> • Register and identify social service workforce in Indonesia • Issue recommendation letters to social workers for certification • Protect the rights of social workers in social work practice • Protect social workers and their clients • Develop standards of social work practice in accordance with social work regulations • Improving the expertise of social workers • Cooperate with relevant national and international organizations to improve the quality of social work
Type of membership	<ul style="list-style-type: none"> • General members : Indonesian members who have bachelor's degree in social welfare related fields • Honorable members: Members who have made significant contributions to the social welfare sector • Other members: Students studying social welfare, social workers and assistant social workers who have not completed a social welfare related education

Source: [31]

(3) Code of Ethics

The Law on Social Worker states that social work organizations shall establish a code of ethics for social workers. In accordance with this, IPSPI established and published the Code of Ethics for Social Workers in 2010.

The code of ethics consists of 16 articles that require individual social workers to use their abilities to improve their daily practices, ensure the quality of social work services, protect the interests of clients, respect their colleagues, and participate actively in improvement activities of social work institutions [40].

(4) Career development

There is no identified strategy for the career development of social service workforces in the strategy of the KEMENSOS or other published materials. In addition, in a survey of social service workforces conducted by UNICEF in 2019, the lack of career development opportunities was often mentioned as an issue considered by social service workforces in Indonesia [19].

At the moment, there is not as much focus on the career development of social service workforces, and it is considered to be an area that needs improvement.

(5) Supervision mechanism

Social workers provide services in accordance with the operational guidelines developed for each social welfare service by the KEMENSOS. For example, the Operational Guidelines for Elderly Social Rehabilitation Assistance (2020) includes the background and legal basis of the service, as well as awareness campaigns on elderly welfare and coordination meetings, support for the elderly and their families, explanation of physiotherapy, psychotherapy, detailed explanation of implementation mechanisms, monitoring and evaluation, reporting, and operation of welfare facilities for the elderly. It also states that supervision is conducted to ensure that social welfare services are being implemented efficiently, effectively, and appropriately in accordance with the operational guidelines, and that each department in charge of social welfare services in the KEMENSOS and the local government are responsible for supervision [41].

The provincial and regency government social welfare departments, which are the implementing agencies of provide social welfare services, have several divisions including Social Empowerment Division, Social Rehabilitation Division, Social Protection Division, and Poverty Alleviation Division under the director. Some divisions. The social service workforces work under the supervision of each division head. In addition, for programs that are being implemented nationwide, such as the Hope Family Program, there are meetings where regency officials from across the province gather and discuss the progress, and the integrated information is sent to the central level.

(6) Advocacy campaign

IPSPI has been advocating to the KEMENSOS to address issues in the social welfare sector and to improve and protect the status of social service workforces. So far, IPSPI has been advocating for the legalization of the certification system for social workers, and for the improvement of the treatment of social service workforces in government organizations. It is expected that these activities will continue.

5.3 Impact of COVID-19 on the social welfare sector

5.3.1 Overview of the impact of COVID-19 on the social welfare sector

By January 19, 2022, 4.2 million people were infected in the country and 140,000 people died due to COVID-19 [42]. As a response to COVID-19, the Indonesian government is implementing large-scale economic measures through the National Economic Recovery Program, and providing social security with extending protection to middle- and low-income groups and supporting small businesses [43].

In addition to about 38,000 orphans affected²⁰ by COVID-19, some reports indicate that between 1.3 and 8.5 million people may fall into poverty depending on the level of economic growth [44] [45]. The United Nations Development Programme (UNDP) and UNICEF groups have also reported that a large number of households experienced a decline in income, and that there were a certain number of households that did not receive cash assistance among the group of households that experienced a decline in income or reduced household spending, and that 30% of households are likely to fall into hunger due to reduced income [43].

On the website of the KEMENSOS, there are many news related to support for children, disabled people, people in poverty, etc. affected by COVID-19, and with considering the information from international organizations mentioned above, the needs for social welfare are increasing.

In the interviews with international organizations and regency government social welfare departments, as an response to impact on social service workforces and social welfare service provision, they mentioned that they are continuing activities and meetings related to social work while paying attention to the prevention of infection²¹ and the need for psychological support for social workers who are struggling to cope with COVID-19²².

5.3.2 Issues and initiatives in relation to social service workforce

As an example of a provincial government where social workers provide social welfare services in the field, the Social Welfare Department of the West Java Provincial Government has identified social workers as the top priority recipients of the vaccination, and completed the vaccination for social service workforces in early 2021. Efforts are also being made to reduce the risk of infection among social service workforces by conducting regular infection screening test. In addition, in order to maintain the motivation of social service workforces under the COVID-19 situation, they have introduced a reward system for volunteers²³.

In cooperation with the Indonesian government, UNICEF distributed materials such as sanitizer to social workers to prevent infection. They have also established and are operating a coaching clinic to provide psychological support and advice to social workers who are struggling to provide social welfare services under the COVID-19 situation²⁴.

²⁰ As of November 2021

²¹ Interview with the Department of Social Welfare, Bondowoso Provincial Government, East Java Province (January 19, 2022)

²² Interview with UNICEF (December 23, 2022)

²³ Interview with the Department of Social Welfare, West Java Province (January 17, 2022)

²⁴ Interview with UNICEF (December. 23, 2022)

5.4 Priority issues for developing and strengthening social service workforce

In Indonesia, the KEMENSOS is taking the lead in strengthening “planning”, “development”, and “support” of social service workforce, with advocacy and support from professional organizations such as IPSPI and international organizations such as UNICEF. Regarding the “planning”, the KEMENSOS has just stipulated a certification system for social workers in the Law on Social Worker in 2019 in response to the growing demand for ensuring the quality of social welfare services. At present, it is considered as a transition period until the system stipulated in the law is fully operated, and the establishment of a dedicated certification body is pursued. The KEMENSOS intends to ensure the quality of social workers and social welfare services by promoting the certification of social workers. Regarding “development”, there are already more than 30 higher educational institutions in social welfare throughout Indonesia, and the institutions in charge of developing curriculum in social welfare have been designated. There is a need to establish a professional educational institution for social workers, which is to operate the certification system stipulated in the Law on Social Worker, which has not been established yet. Compared to “planning” and “development”, which are relatively well structured or in the process of being structured, “support” is an area where there are rooms to be improved. Based on the above, the following three points are priority challenges and measures for strengthening social service workforce which were considered based on the results of this Survey.

5.4.1 Mechanism to encourage the acquisition of certification of social workers

Despite the introduction of the accreditation system in 2012 and the transition to the certification system for social workers according to the national qualifications framework in 2019, there is no difference in the salaries between certified and uncertified social workers working in government agencies. This is because the KEMENSOS does not have any special salary regulations for certified social workers. Therefore, there is no incentive for social workers to acquire certification other than to prove the knowledge and skills themselves through certification. This is one of the reasons why number of social workers certified is not increasing well. In particular, salary is a major factor affecting the motivation, therefore in order to ensure the quality of social workers by promoting the acquisition of certifications, it is critical to establish a mechanism to secure incentives for the acquisition of certifications, such as setting allowances for certified social workers.

5.4.2 Data and information management of social service workforce

In order to develop appropriate strategies and plans for the development of social service workforce, it is necessary to organize information such as the number of social service workforce by categories of jobs, organizations they belong to, and their expertise. However, as mentioned in 5.2.1(5), in Indonesia, the registration of social service workforce is being conducted separately in the three agencies, and there may be a certain number of social service workforce who are not registered in any agency or who are registered in multiple agencies. The KEMENSOS also recognizes this as an issue and is making efforts to have an accurate data on the workforce throughout the country by starting with obtaining information from other organizations.

Looking at the classification defined in the Law on Social Welfare, among the social service workforce, social welfare workers and social volunteers, in particular, are registered in both IPSPI and the KEMENSOS in duplicate, or may not be registered in either of them, and the number of them may not be accurate. Therefore, it is firstly in need to establish a data and information management system to organize the number of these two categories of the workforce.

5.4.3 Strengthening continuing education for social service workforce

As mentioned above, after the establishment of the certification system for social workers, the focus of domestic stakeholders, including the KEMENSOS, has been on how to increase the number of certified social workers. As a result, the framework for continuing education, for human resources working in the field, has not been developed sufficiently, and it depends on the efforts of individual social workers.

The current social workers, interviewed in this Survey, voluntarily participate in workshops and seminars related to their field of expertise in order to improve their professional knowledge, in addition to improving their skills through daily practice. However, in order to improve the knowledge and skills of social workers in general, it is important to develop a framework for continuing education. For example, POLITEKESOS, an educational institution under the KEMENSOS, which is in charge of providing training for developing social service workforce, can play a role in provision of continuing education. Additionally, the content of continuing education can be developed based on the discussion with IPSPI, the largest professional organization of social workers in Indonesia.

Furthermore, strengthening training for social service workforce other than social workers is also a challenge. While it was confirmed in this Survey that the KEMENSOS, professional organizations, international organizations and NGOs are providing training, training targeting social service workforce who do not belong to governmental organizations seems to be conducted on only an ad hoc basis. In addition to the identification of actual status of the workforce as described in 5.1.1, capacity development of the social service workforce is necessary to establish a unified training system, by clarifying the abilities and skills required for each type of work, in cooperation with related organizations.

Chapter 6 Current Status of Social Service Workforce: Lao PDR

6.1 Overview of social welfare sector

6.1.1 Policies, systems and challenges for social welfare

(1) Introduction

The Lao government has been making efforts to expand social welfare in line with national development policies and international conventions, although the development of the social welfare sector in the Lao People's Democratic Republic (Lao PDR) is still in its early stage. In addition, the Lao government considers the promotion of social protection, of which social welfare is one component, as part of the strategy for poverty reduction and national growth, and recognizes that the social welfare system plays an important role in preventing people who lifted out from poverty from falling back into it. According to the Social Protection Floor Recommendation (No. 202) adopted by the member states of the International Labour Organization (ILO) in 2012, the social protection floor is defined as “securing protection aimed at preventing or alleviating poverty, vulnerability and social exclusion.” However, the coverage of social protection, including social welfare, provided by the Lao government is very limited at present, and a challenge in the Lao PDR is the lack of systematic welfare services and the insufficiency of social benefits provided to vulnerable groups such as children, the poor, people with disabilities, the unemployed, and the elderly. The public benefit programs are limited to a special benefit program for those who served in the struggle for national liberation before 1954 (Revolutionary Heroes) and their families and descendants, as well as the school grant program for children from poor families. Other programs are dependent on support from development partners. In terms of the social security system, it mainly covers civil servants, the military, police, and their dependents and retirees from these groups, while many informal sector workers are not covered by the social security system. Although some private companies register for the social security system, most of the beneficiaries are concentrated in urban areas [1] [2].

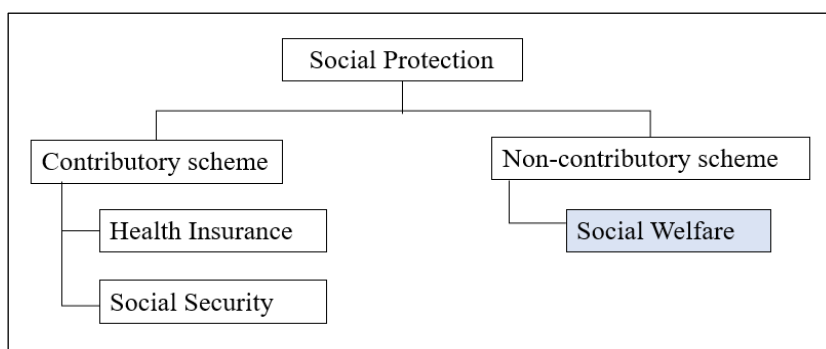
The Lao government has been prioritizing poverty reduction and economic growth, aiming to graduate from being a Least Developed Country (LDC). In the “8th National Socio-Economic Development Plan (NSEDP) 2016-2020,” the government had centered on the development with the economic growth, setting target to achieve an average annual growth rate of 7.5% in gross domestic product (GDP) [3]. Following a steady economic growth in recent years, the country was expected to officially graduate from the LDC status in 2024. However, the global spread of the coronavirus disease 2019 (COVID-19) has caused the biggest economic slowdown in the Lao PDR in nearly three decades [4]. As a result of COVID-19, it was estimated that approximately 500,000 people out of a total population of 7.1 million would lose their jobs and livelihoods, with the unemployment rate jumping from 9.4% in 2017 to 23% in 2020. It is also estimated that about 383,000 people would fall back into poverty [5] [6] [7].

Under these circumstances, the 9th NSEDP 2021-2025, the final draft version formulated in 2021, taking into account the impact of COVID-19 on the economy and society, lowered the target for the average annual growth rate of GDP by about half to 4.0%. In this way, the development strategy has been shifted from focusing economic growth to sustainable growth highlighting the quality of development [8] [3]. One of

the six outcomes set out in the 9th NSEDP 2021-2025 is “Enhancing Well-being of People” as Outcome 3, which specifies the following six outputs relating to social welfare; (1) Reducing poverty in rural and remote areas, (2) Improving access to inclusive and equitable public services, (3) Protecting the rights of women and children, (4) Expanding the social protection services, (5) Developing human capital for youth and promoting their participation in the workforce, and (6) Accelerating the clearance of unexploded ordnance (UXO) from the Indochina war [8].

(2) Social welfare system and policy authority

In the “National Social Protection Strategy (NSPS) 2021-2025”, which was formulated by the Ministry of Labour and Social Welfare (MOLSW) in 2021, the social protection is classified into two types of schemes: contributory and non-contributory. The contributory schemes, in principle, provide benefits on the condition of payment of contributions by the people insured, and these are referred to as “Health Insurance¹” and “Social Security²”. On the other hand, the non-contributory scheme provides benefits based on criteria such as attribution to a particular age group (e.g., children or the elderly), poverty, or vulnerability, regardless of the beneficiary’s contribution payments, and it is referred to as “Social Welfare” [9].



Source: Prepared by the Survey Team with reference to [9]

Figure 6-1 Social protection system in the Lao PDR

Thus, in the NSPS 2021-2025, the social protection is classified into three systems; (1) Health Insurance, (2) Social Security, and (3) Social Welfare. It sets a vision for 2030 that the Lao people have access to basic social protection services in an equitable, adequate, effective, and sustainable way, with three goals of further developing and strengthening the three systems. Of the three systems, Table 6-1 shows plans, status of implementation, and challenges of the goal of the social welfare system “The social welfare system is further developed and strengthen (Goal 3)”.

¹ Poor families, pregnant women, children under 5 years old, and monks identified by the village head are exempted from paying the health insurance contribution [60].

² There are eight types of benefits: sickness benefits; childbirth grant; employment injury and occupational disease benefits; non-work-related disability benefits; pensions; death grants; benefits for insured family members; and unemployment benefits. State officials, military personnel, police officers, and employees of private companies registered with the Ministry of Commerce and Industry are required to contribute to the social security system. The Lao government is working to expand participation in the social security system (voluntary) to the private sector in informal sector.

Table 6-1 Plans, implementation status, and challenges for Goal 3 “The social welfare system is further developed and strengthened”

Plans (2021-2025)	Implementation Status	Challenges
Activity 1: Provide services and benefits to pregnant women and children. Activity 2: Provide services and benefits to people with disabilities and UXO victims. Activity 3: Provide services and benefits to the elderly. Activity 4: Provide services and benefits to victims of natural and man-made disasters. Activity 5: Expand the National School Meal Programme to all state kindergartens, primary and secondary schools in poor district villages throughout the country. Activity 6: Increase allowances for students at the lower secondary level, with priority given to students from poor families and vulnerable groups. Activity 7: Allocate national budget to education on time and expand its coverage. Activity 8: Provide allowances for vocational training, skills development and technical training to ensure that poor and vulnerable working age groups have access to decent employment opportunities. Activity 9: Develop production organizations and public services, and promote access to decent work.	<ul style="list-style-type: none"> - Support for children in need of special protection, people with disabilities, the elderly, UXO victims, etc. (supported by international organizations, NGOs and development partners) - Implementation of the National School Meals Programme for primary and secondary schools in targeted poor districts (supported by various development partners) - Provision of scholarships for secondary education for children from poor families - Provision of School Block Grant - Provision of technical and vocational education and training (TVET) scholarships to students from poor and disadvantaged families (supported by Asian Development Bank (ADB)) 	<ul style="list-style-type: none"> - There are no systematic social welfare services and benefits to children in need of special protection, people with disabilities, the elderly who live alone or do not receive pensions, the unemployed, and other vulnerable groups. - There are insufficient scholarships and the National School Meals Programme for children.

Source: Prepared by the Survey Team with reference to [9]

Besides the above, following various national action plans related to the social welfare were developed led by the Commission for the Advancement of Women and Mother-Child, with technical and financial assistance from the United Nations Population Fund (UNFPA) and the United Nations Children's Fund (UNICEF) as well as funding from the Korea International Cooperation Agency (KOICA) and other development partners [10] [11].

- The Fourth National Plan of Action on Gender Equality (2021-2025)
- The Second National Plan of Action for the Prevention and Elimination of Violence against Women and Violence against Children (2021-2025)
- The Third National Plan of Action on Mother and Children (2021-2025)
- The National Women Development Plan (2021-2025)
- The National Plan of Action on Child Protection System Strengthening (2022-2026) (Under formulation as of January 2022)

In the “Second National Plan of Action for the prevention and Elimination of Violence against Women” (2021-2025), the objective is set to establish a gender-equal society through the protection of women’s rights and interests, the promotion of women’s status and dignity, and the elimination of discrimination and violence against women, with three goals; (1) Reducing violence against women and girls, (2) Ensuring that victims of violence receive the necessary supporting services, and (3) Strengthening support and

monitoring for victims. Meanwhile, in the “Second National Plan of Action for the Prevention and Eradication of Violence against Children” (2021-2025), the objective is set to reduce violence against children through strengthened multi-sectoral coordination targeting violence in schools, online, homes and communities, with four goals; (1) Enhancing the multi-sectoral coordination and monitoring to end violence against children in all settings, (2) Preventing and responding to online violence, including child online sexual exploitation and abuse, (3) Preventing and responding to violence in schools, (4) Preventing and responding to violence in homes and communities [12]. In addition, the “National Plan of Action on Child Protection System Strengthening” (2022-2026) has been drafted under the leadership of the Child Protection and Assistance Committee and is expected to be approved in 2022.

(3) Laws and regulations related to social welfare

The Lao People’s Constitution (amended in 2015), in Article 34, stipulates that the State acknowledges, respects, protects and secures the human rights, including fundamental human rights, of its citizens in accordance with the law [13]. Furthermore, the Lao government is developing various laws and regulations related to the social welfare. Table 6-2 presents the laws related to the social welfare.

Table 6-2 Laws related to the social welfare

Name of the law	Year of Enactment	Main contents
Law on Development and Protection of Women	2004	It defines the development of women as human resources (ensuring physical and mental development, good health, educational development, and vocational/skills development). It provides for the protection of women’s rights and interests and women’s duties, protection of women and children from trafficking in persons and domestic violence [14].
Law on the Protection of the Rights and Interests of Children ³	2007	It stipulates that all children have basic human right. It provides for health care, family registration and raising of children (including obligations of parents or guardians and responsibilities of the State), child development (including education), child protection and assistance, and the response to children in conflict with the law [15].
Law on Preventing and Combatting Violence against Women and Children	2014	It prohibits all forms of violence against women and children, and provides for the protection and assistance for victims, measures against perpetrators, and the prevention of violence against women and children [16].
Law on Anti-Trafficking in Persons	2016	It provides for the prevention of trafficking in persons, legal procedures, and protection and assistance for victims [17].
Law on Persons with Disabilities	2018	It provides for the elimination of all forms of discrimination against persons with disabilities, as well as their self-development, self-reliance, access to social services, and enjoyment of various political, economic, cultural, social, and family rights. It shifted support for people with disabilities from a focus on charity and medical care to a more human rights-oriented approach, and strengthened the protection of the rights and interests of people with disabilities [18] [19].

Source: Prepared by the Survey Team with reference to [14] [15] [16] [17] [18] [19]

Other relevant legislations include the “Decree on Social Welfare, No. 169/PM” (2013), which defines the social welfare as physical and mental support and services including provision of short-term in-kind assistance and long-term regular cash benefits. The Decree stipulates that the categories of beneficiaries

³ With the advocacy of UNICEF, a committee was formed to review and revise the Law on the Protection of the Rights and Interests of Children (2006) and the first technical meeting has just been held in January 2022.

include orphans, children from poor families, people with disabilities, poor elderly people, victims of human trafficking, and victims of natural disasters [8] [20]. Apart from this, the “Decree on People with Disabilities, No. 137/GOV” (2014) stipulates benefits for the poor, homeless, and elderly and others among the disabled [21].

(4) Implementation system for social welfare

1) Lead ministry

The lead ministry for the social welfare sector in Lao PDR is MOLSW. Relevant central ministries include the Ministry of Education and Sports, Ministry of Health, Ministry of Public Security, and Ministry of Justice. The Department of Social Welfare of MOLSW has a total of 28 staff (14 men and 14 women), including a director, two deputy directors, division heads, deputy division heads, and technical staff. At the provincial level⁴, the Provincial Offices of Labour and Social Welfare have a Social Welfare Division, usually staffed by three to five officials. At the district level, there are only one or two officials in each of the District Office of Labour and Social Welfare, and some district offices have a Social Welfare Unit. Under the ministry’s mandates, officials at the provincial and district levels are responsible for a wide range of tasks, including the distribution of financial and material assistance to families identified as poor, the elderly, people with disabilities, and children in need of assistance (mainly orphans), skills development, labor management, and disaster responses. The district offices are also responsible for coordinating with heads of villages to collect data related to vulnerable groups [22]. According to MOLSW and UNICEF report (2021), the lack of human and financial resources is preventing MOLSW from fully fulfilling its roles, and the major challenges are insufficient numbers of recruitment of government officials and the lack of human resources engaged in social welfare in the entire public service at the national and local levels [23].

According to the report of the Sustainable Development Goals (SDGs) Indicators of MOLSW, the share of expenditure on the social protection out of the total government expenditure in 2019 was 3.0% (0.53% per GDP) [24]. Information on the amount of government expenditure on each of the social security, the health insurance, and the social welfare was not available.

Table 6-3 Government expenditure on the social protection

		2015	2016	2017	2018	2019
Government expenditure on the social protection	1,000 Kip	694,028,430	752,245,410	856,764,580	910,600,600	874,456,000
	1,000 Yen*	7,141,553	7,740,605	8,816,108	9,370,080	8,998,152
Percentage of total government expenditure		2.24%	2.46%	2.64%	2.78%	3.00%
Percentage of GDP		0.68%	0.69%	0.74%	0.74%	0.53%

* Calculated based on JICA foreign exchange rate (February 2022)
Source: [24]

2) Other related organizations

Various committees have been set up as government bodies related to the social welfare. These include the Commission for the Advancement of Women, Mothers-Children, Committee of Child Protection and

⁴ The administrative division of Laos consists of Vientiane Capital, 17 provinces, 148 districts, and 8,416 villages (as of 2020) [59].

Assistance, Committee of Anti-Trafficking in Persons, and Committee for Disabled Persons. Each committee has a national committee at the central level, and offices at the provincial and district levels [22].

In the Lao PDR, various mass organizations⁵ are also involved in social activities such as social welfare. For example, the Lao Women’s Union (LWU) was established in 1955 to protect the rights and interests of all women. It has a nationwide network of over one million members and plays an important role in activities related to the protection of women and children, especially at the local level. The headquarters of LWU is located in Vientiane Capital, and provides support in the development of policies and strategies. Each office at the provincial and district levels provides counseling services, legal support such as legal proceedings for women and children who are victims of violence and trafficking in persons, as well as collecting information and monitoring. Usually, there are three to five officials at the provincial and district levels [25] [26] [23].

Other concerned mass organizations include the Lao Youth Union, which is mainly involved in youth activities, the Lao Front for National Construction, which is involved in various social activities, and the Lao Trade Union, which represents the private sector [22].

The main related organizations and their duties and responsibilities as stipulated in some laws related to social welfare are summarized in Table 6-4.

Table 6-4 Related organizations and their duties and responsibilities as stipulated in the laws

Laws	Related Organizations	Main duties and responsibilities
Law on Development and Protection of Women (2004)	LWU	<ul style="list-style-type: none"> - To serve as a focal point for the development and protection of women and to coordinate with concerned parties. - To draft policies, programs, projects, laws, and regulations relating to the women development and the protection of legitimate rights and interests of women and children, and to make recommendations to concerned authorities for considerations. - To guide, monitor, oversee, and promote the implementation of the policies, laws, plans, programs, and projects in the field of the protection of legitimate rights and interests of women and children within the scope of its responsibilities.
Law on the Protection of the Rights and Interests of Children (2007)	Committee of Child Protection and Assistance	<ul style="list-style-type: none"> - To monitor children in alternative care. - To establish a network system (a network to monitor the situation of children in the community and society and to identify situations in which children need special protection). <p>(Although not explicitly mentioned in the law, according to the UNICEF report (2019), the coordination with concerned parties is also its responsibility [22].)</p>
Law on Preventing and Combatting Violence against Women and Children	Commission for the Advancement of Women, Mothers-Children	<ul style="list-style-type: none"> - To propose recommendations to the government on the formulation and revision of policies, strategic plans and laws related to gender equality and the elimination of all forms of violence against women and children. - To develop and implement a national action plan for the prevention and elimination of violence against women and children.

⁵ The Constitution of the Lao PDR stipulates that the organizations shall “unite and mobilize all strata of the multi-ethnic people to take part in the tasks of protection and construction of the country, to develop the right of self-determination of the people and to protect the legitimate rights and interests of the members of their respective organizations” (Article 7). The Lao Constitution also stipulates that the Lao Front for National Construction and the mass organizations at the central level shall have rights to the drafting of laws (Article 59) [13].

Laws	Related Organizations	Main duties and responsibilities
Women and Children (2014)		- To coordinate, support and monitor concerned ministries, local administrations and other relevant sectors in the implementation of measures against violence against women and children.
	LWU	- To propose recommendations to the government on the formulation and revision of policies, strategic plans and laws related to gender equality and the eradication of all forms of violence against women and children. - To supervise, support, manage and monitor the staff or social workers of LWU. - To collect and analyze data on violence against women and children. - To provide counseling, safe temporary shelter, legal assistance, education, vocational training, and community reintegration support for victims, and to represent victims in judicial proceedings.
Law on Anti-Trafficking in Persons (2016)	Committee of Anti-Trafficking in Persons	National Committee of Anti-Trafficking in Persons: - To supervise, monitor, support and coordinate policies and plans formulated by concerned parties. Vientiane Capital and Provincial Committee of Anti-Trafficking in Persons: - To implement plans, programs and projects related to anti-trafficking in persons, and to coordinate with concerned parties.
	LWU	- To provide shelter, rehabilitation, care services, short-term vocational training, and counseling. - To provide support for the protection of the legitimate rights of victims of trafficking in persons, assistance with legal procedures and reintegration into the family and society.
Law on Persons with Disabilities (2018)	Committee for Disabled Persons	- To research and study the policy guidelines, strategic plans, laws and regulations on the rights and interests of persons with disabilities. - To disseminate policy guidelines, strategic plans, laws and regulations on the rights and interests of persons with disabilities to the community and to promote understanding of the rights and interests of persons with disabilities.

Source: Prepared by the Survey Team with reference to [14] [15] [16] [17] [18] [19]

3) Child Protection Network

The Child Protection Network (CPN) was established under the initiative of MOLSW and with the support of UNICEF, and started its activities for child protection at the village level in 2004. Subsequently, CPN was formally integrated into the national child protection system in accordance with the 2017 Ministerial Agreement on the Establishment of Child Protection Networks. According to MOLSW, CPN has been established in 1,284 villages (about 14% of the total number of villages in the country). According to UNICEF, CPN consists of eight members: a village head, two deputy village heads, and five members (including volunteers from LWU, Lao Youth Union, and MOLSW officials). There is no budget allocated to support the establishment and operation of CPN, and the members of CPN work on a volunteer basis [23].

MOLSW and UNICEF, with the support of KOICA and the Australian Government, are developing a pilot model project (2019-2024) for a child protection system, including capacity building of CPN, in villages in Attapeu and Xiangkhouang Provinces. Based on the evaluation of the pilot model (to be conducted in 2023), the model will be expanded nationwide. Meanwhile, it is said that significant time and investment will be required to complete the nationwide expansion of the model [23].

6.1.2 Situations in the areas related to social service workforce

In the Lao PDR, social work generally covers the social welfare sector as well as social security benefits, veterans' affairs, services for the elderly, and disaster relief [22]. Meanwhile, the Universal Periodic Review report of the United Nations Human Rights Council (2020) states that "continued attention to the protection of vulnerable groups such as women, children and persons with disabilities" is a priority issue in the Lao PDR [18]. Based on the above, this section describes four areas that are positioned as particular challenges for vulnerable groups in the Lao PDR: (1) violence, (2) trafficking in persons, (3) children / orphans in institutional care, and (4) disabilities.

(1) Violence

According to the report of the National Commission for the Advancement of Women⁶ (2015), 11.6% of women between the ages of 15 and 64 experienced physical violence, 7.2% experienced sexual violence, and 26.2% experienced psychological violence from their partners or husbands⁷. Moreover, it was reported that 43.1% of the women who experienced physical or sexual violence suffered injuries, and 20.2% of these injuries were repeated five or more times [27]. The Counseling and Protection Center for Women and Children provides free legal assistance, psychological and physical medical support, vocational training and social reintegration support to women and children who are victims of violence and sexual exploitation. The exact number of these centers is unknown, but they have been established at the provincial and district levels and are operated by LWU under the supervision of MOLSW [28] [29]. LWU also works for changing mindsets of both men and women about traditional gender norms and gender-based violence, and eliminating gender stereotypes through awareness-raising activities and campaigns [30].

(2) Trafficking in persons

According to the Trafficking in Persons Report 2021 of the U.S. Department of State, there were 142 victims of trafficking identified by the Lao government during the reporting period (21 victims of sexual trafficking, 39 victims of labor trafficking, 66 victims of fraudulent marriages, and 16 victims of other forms of exploitation). The identified victims were referred to the Shelters for Victims of Trafficking in Persons. The shelters for victims of trafficking in persons are currently located in Luang Namtha and Savannakhet Provinces and are operated by LWU. MOLSW and LWU are responsible for providing reintegration services for victims of trafficking, but in practice the provision of such assistance was largely dependent on non-governmental organizations (NGOs), according to the report [31]. For example, Village Focus International, an International Non-Governmental Organization (INGO), operates two shelters for victims of human trafficking. The shelters provide safe accommodation, nutritious meals, medical care, vocational training, and support for social reintegration [32]. As the "Guidelines for the Protection, Assistance and referral for Victims of Trafficking"⁸ was approved in 2020, the Ministry of Public Security or MOLSW will be required to disseminate the guidelines and provide training to police officers, social service workforce, and other relevant personnel.

⁶ An organization established in 2003 that is responsible for formulating and implementing national policies to improve the status of women and for monitoring the implementation of the Beijing Declaration and Platform for Action.

⁷ Sample size 3000

⁸ It was approved by the National Committee for Anti-trafficking in Persons and issued by the Ministry of Public Security.

(3) Children / orphans in institutional care

Children without parents are generally cared for by their relatives, and the Child Protection and Support Committee and village organizations are responsible for monitoring children who receive such alternative care. The decision to refer the child to a protection and care facility is made after consultation with the relatives, the village head and officials of the responsible ministry [33]. According to UNICEF, MOLSW is working on the development of the “National Guideline on Alternative Care for Children in Lao PDR” and training modules with support from UNICEF since 2020. The guideline outlines the roles and responsibilities of stakeholders with the aim of identifying and supporting children without parents and ensuring their well-being.

In addition, under the supervision of MOLSW, SOS Children’s Villages of Laos, an NGO, accepts children without parents. There are approximately 1,000 children under the age of seven and their siblings living in the six SOS Children’s Villages. Moreover, SOS Youth Facilities, SOS Kindergartens, a SOS Vocational Training Center, SOS Social Centers, and a SOS Medical Center have been established [33] [34]. Apart from the above, Friends-International, an INGO, with 53 staff members, provided day and night outreach, temporary shelters, support for reintegration into educational institutions and families, vocational training and employment linkages for youth, and support for strengthening the livelihood capacity of caregivers. In 2019, Those services were provided to 4,345 marginalized children, youth and caregivers [35].

(4) Disabilities

According to the report of the Statistics Bureau in 2015, the percentage of people with disabilities among the population aged 5 years and above was 2.8% (males: 80,766; females: 80,115). Of these, 1.9% were reported to have mild disabilities, 0.6% moderate disabilities, and 0.3% severe disabilities [36]. It is not clear whether these statistics include victims of UXO, but according to the SDGs government report (2018), the main causes of disabilities in Lao PDR are UXO, road accidents, diseases, and congenital disorders. According to the report, the lack of systematic and disaggregated data related to the status of disability, lack of monitoring of key indicators related to access to basic services and well-being of people with disabilities have been identified as challenges [37].

6.2 Current status of social service workforce development

6.2.1 Planning

(1) Laws, policies, and plans

In the Lao PDR, there is no law that comprehensively defines social service workforce and standardizes their roles and responsibilities. Accordingly, the classification of professional and para-professional social workers (para social workers) is not regulated, and there is no official position/title of professional social worker in government agencies. Thus, the profession of social work is not currently developed. Since there is no clear definition of what roles are considered social service workforce, it is difficult to clarify their responsibilities and their required numbers.

According to the interview⁹ with the National University of Laos (NUOL), in practice, they classify personnel who have the Bachelor of Arts in Social Work (BASW) degree of NUOL as professional social workers, while other personnel engaged in social welfare services (excluding volunteers) are classified as para social workers.

In this context, the Lao government, with the support of UNICEF, has conducted an assessment on strengthening the child protection system and developing the social service workforce since 2019, and its report was finalized in 2021 [22] [23]. According to UNICEF, based on the recommendations for strengthening the child protection system and human resource development derived from the assessment, the “Strategic Guidelines for the Social Service Workforce Development” are being developed. The guidelines are expected to be submitted to the governmental approval body in February 2022. Furthermore, at the request of MOLSW, UNICEF is supporting the development of the Law on Social Work, which is targeted for enactment in 2024. Through the development of such Law and guidelines, the roles, responsibilities, and required competencies and qualification levels of social service workforce are expected to be clarified in the Lao PDR.

(2) Definitions and regulations

As mentioned above, there is no standardized definition or regulation of social service workforce at present, but the social service workforce and their roles/responsibilities described in some each law related to social welfare are shown in Table 6-5.

Table 6-5 Definition and roles/responsibilities of social service workforce in each law

Laws	Workforce	Definition	Main roles/responsibilities
Law on Development and Protection of Women (2004)	Not mentioned	—	—
Law on the Protection of the Rights and Interests of Children (2007)	Social Worker	Persons who are appointed by the state concerned organization to provide assistance to children in need of special protection.	- The interview of children in cases where the children are the victims and witnesses shall be conducted by specially trained investigators and public prosecutors in collaboration with social workers.
Law on Preventing and Combatting Violence against Women and Children (2014)	Social Worker	Persons who are approved or designated by the state concerned organization to help or assist the victim	- To assess the victim’s situation and make an assistance plan for the victim. - To monitor and coordinate with relevant agencies for the provision of necessary protection and support. - To report on the victim’s situation and propose solutions to the relevant authorities. - To participate in interviews, take testimonies from victims, and monitor mediation and judicial proceedings against perpetrators of violence.
	Social Welfare Staff	Staff members or authorities who belong to LWU or MOLSW and is working in social welfare.	
Law on Anti-Trafficking in Persons (2016)	Anti-trafficking in persons officers	Police officers who are appointed according to	- To investigate the situation, take measures in timely manner in order to prevent and suppress trafficking in

⁹ The interview with NUOL was conducted on January 17, 2021

Laws	Workforce	Definition	Main roles/responsibilities
		the related laws and regulations.	persons and rescue victims based on strategic planning, and to initiate criminal proceedings in accordance with the law.
Law on Persons with Disabilities (2018)	Not mentioned	—	—

Source: Prepared by the Survey Team with reference to [14] [15] [16] [17] [18] [19]

(3) Structure for the development of social service workforce

1) MOLSW

Three of the 12 departments in MOLSW; (1) the Department of Social Welfare, (2) the Department of Administration and Human Resource, and (3) the Department of Disability and Aging Policy, are engaged in the tasks of strengthening the capacity of social service workforce. The implementation structure of MOLSW for capacity development of social service workforce is shown in Table 6-6.

Table 6-6 Implementation structure of MOLSW for capacity development for social service workforce

Department	Tasks
Department of Social Welfare	<ul style="list-style-type: none"> - Conducting training on basic psychology and mental health and psychosocial support. - Strengthening the capacity of social service workforce (including CPN members) at the village level¹⁰ - Strengthening the capacity of social service workforce on counseling and life skills for people in drug treatment
Department of Administration and Human Resource	<ul style="list-style-type: none"> - Conducting Para Social Worker Training, mainly on child protection.
Department of Disability and Aging Policy	<ul style="list-style-type: none"> - Strengthening the capacity of social work personnel regarding support for children with disabilities

Source: Prepared by the survey team based on the interview with MOLSW

2) LWU

The LWU headquarters has 12 departments, among which the Counseling and Protection Center for Women and Children (CPCW) Department has 16 officials. With the support of UNICEF and UNFPA, the Counseling and Protection Center for Women and Children conducts training three to four times a year for LWU staff and officials of relevant government organizations. The training covers face-to-face and hotline counseling; identification, protection, support and referral of victims of trafficking in persons; measures to prevent violence against women and children; legal dissemination; and psychosocial counseling [23]. According to the interview¹¹ with LWU, there is a shortage of instructors in specialized fields, a shortage of social service workforce with expertise, and a shortage of budget for training.

(4) Budget for the development of social service workforce

According to the report of MOLSW and UNICEF (2021), MOLSW at the national level was allocated 100 million Kip for social welfare programs in 2020, most of which was spent on disaster response. It is reported that the current level of financial investment is inadequate to maintain even a minimum level of social service provision. The provincial and district offices of MOLSW do not receive budgetary support from

¹⁰ Conduct training on child protection, child development, laws related to education and the rights of the child, assistance and roles of CPNs.

¹¹ The interview with LWU was conducted on January 19, 2021.

the central government, except in special emergency situations, and operate with funding provided by provincial Governor’s offices [23]. According to the interview¹² with MOLSW, there is no government budget allocated for capacity development of social service workforce, and all training is conducted with support from development partners. The amount of funding that MOLSW has received from UNICEF for capacity development of social service workforce is shown in Table 6-7.

Table 6-7 Support funds provided by UNICEF for capacity development of social service workforce

2019	2020	2021
87,438,000 Kip (899,737 Yen*)	99,604,000 Kip (1,024,925 Yen*)	163,955,000 Kip (1,687,097 Yen*)

* Calculated based on JICA foreign exchange rate (February 2022)
 Source: MOLSW

The NSPS 2021-2025 states that in addition to government funding, financial and technical assistance, especially from development partners, will play a central role in implementing the plans set out in the NSPS for strengthening the social protection system. Furthermore, it is also indicated that cooperation with ASEAN countries will be strengthened in accordance with the ASEAN Declaration on Strengthening Social Protection [8].

(5) License and certification system

According to the interview with MOLSW, the regulations on licensing, registration and accreditation of social service workforce will be developed based on the Law on Social Work that is under formulation. MOLSW has requested support from UNICEF for the formulation of the Law, and the initial discussion was held in January 2022 with MOLSW, UNICEF, NUOL and others.

According to UNICEF, the establishment of a licensing, registration and accreditation system for social service workforce, including professional social workers, para social workers and volunteers, is a priority action identified in the “National Plan of Action for Child Protection System Strengthening” (2022-2026) under the Outcome 2 “Development, professionalization and operationalization of the social service workforce in Lao PDR” as well as in the “Strategic Guidelines for the Social Service Workforce Development,” both are expected to be approved in 2022. In order to support the establishment of a licensing and accreditation system for social service workforce using the experience of ASEAN countries while also applying it to the Lao context, UNICEF is seeking cooperation with other development partners, including technical assistance and funding for the review of the experience of ASEAN countries such as Indonesia and the Philippines.

(6) Human resources information and data

Data and mapping of social service workforce at each local level is essential in the process of assessing the needs of human resources and developing visions, strategies and plans for the entire social welfare system. However, in the Lao PDR, the definition of social service workforce and their respective roles have not been well clarified, and there is no data on the number of human resources involved in the provision of social welfare services, the number of trained professionals, and the number of shortages, and thus the actual situation has not been known. As already mentioned in 4.2.1 (1), the roles, responsibilities, required

¹² The interview with MOLSW was conducted on January 11, 2022.

competencies and qualifications of social service workforce will be clarified in the future in the Lao PDR through the development of laws and guidelines.

6.2.2 Development

(1) Educational institutions and systems

The only university in the Lao PDR that offers a bachelor's degree program in social work is the National University of Laos (NUOL). The Bachelor of Arts in Social Work (BASW) program (4 years) was established in the 2011-2012 academic year in the Department of Social Work and Development in the Faculty of Social Sciences.

1) BASW Program

The BASW program requires degrees of the upper secondary school or higher diploma/ college in social science majors such as history, human geography, political science, psychology, economics, educational pedagogies. The tuition fee for the BASW program is approximately 4 million kip (30,000 kip per credit) for four years. A total of 141 credits (including 6 credits for practical training and 6 credits for internship) are required to obtain the degree [38]. The number of subjects and credits of the current BASW program are shown in Table 6-8.

Table 6-8 Number of subjects and credits of the current BASW program

Major Areas/Group of Study	Subjects	Credits	Year
General knowledge subjects	11	20	Year 1
Basic knowledge subjects	15	41	Year 2
Major/ core subjects	27	78	Year 3-4
Electives	1	2	Year1
Total	54	141	

Source: [38]

As of January 2022, 14 professors are involved in the BASW program with a capacity of about 80 students. The number of graduates is shown in Table 6-9.

Table 6-9 Number of graduates of the BASW program

2018	2019	2020	2021
58	39	66	69
(Including 32 women)	(Including 24 women)	(Including 40 women)	(Including 51 women)

Source: NUOL

2) Curriculum of the BASW program

NUOL and UNICEF have signed a small-scale funding agreement (2020-2022¹³) to conduct a partnership program "Evaluating and Improving the Quality of Social Work Curriculum" with technical assistance from MOLSW. The program has been conducted with the aim of adapting the curriculum of the BASW program to international standards, including ASEAN, and the Lao context, and updating the curriculum to be more conducive to practical professional development that meets the needs of students and post-employment practices through feedback from students, graduates, faculty, and industries [39]. The new curriculum is expected to be finalized in 2022. The current curriculum is shown in Table 6-10.

¹³ The initial period was from 2020 to 2021, but it was extended to December 2022.

Table 6-10 Current curriculum for the BASW program

First Semester		Credits	Second semester		Credits
Year 1 (38 credits)					
- Politics	2	- Lao Language	2		
- English 1: Basic English	2	- English 2: General English	3		
- Lao Studies1	2	- Lao Studies2	2		
- Social Studies	3	- General Psychology	2		
- Human Relations	1	- Computer	1		
- Urban Sociology	2	- Sociological Theory	3		
- Ethnology	3	- Child Right and Child Protection	3		
- Sociology of Family	2	- Physical Protection / Defense	1		
- Philosophy of Life	2	- Introduction to Social Work	3		
Year 2 (37credits)					
- English 3: English for Social Science	3	- English 4: English for Social Sciences	3		
- Gender Studies	2	- Theory and Principle of Social Work	3		
- Social Problems Studies	3	- Religion and Social Work	2		
- Social Policy	3	- Voluntary and Community Services	2		
- Social Development Taught	3	- Human Right	2		
- Sociology of Youth	2	- Social Research Methods	3		
- Social Psychology	3	- Criminology	3		
Year 3 (37 credits)					
- English 5: English for Social Work	3	- English 6: English for Social Work	3		
- Social Insurance	3	- Social Safeguard	2		
- Community Studies	3	- Medical Social Work	2		
- Ethics of Social Worker	2	- Social Work Practicum1	3		
- Social Work Education/ Research	3	- Social Work Counseling	3		
- Fund Raising for Social Work	3	- Social Impact Assessment (SIA)	3		
- Disaster Management	3	- Elective subject	2		
Year 4 (29 credits)					
- Project Planning and Management	3	- Internship	6		
- Social Welfare Management	3	- Final Report Writing	6		
- Social Work Practicum 2	3				
- Poverty Reduction Strategies	3				
- Conflict Management	3				
- Introduction to Final Report Writing	2				

Source: [38]

3) Employment situation of graduates of the BASW program

According to the interview with NUOL, most of the graduates of the BASW program have been employed as officials of governmental organizations such as MOLSW, international organizations, INGOs, and consultants for development projects. According to NUOL, not only professionalism but also English skills are required for employment in international organizations, INGOs, and development projects, it is also required to focus on strengthening students' English skills.

(2) Continuing education

1) Training for para social worker and training on child protection

According to NUOL, with the support of UNICEF and other organizations, trainings (short courses) for para social workers are conducted on a regular basis¹⁴, and NUOL faculty members serve as instructors. The content of the training includes introduction of social work, legal and policy framework, child wellbeing and development, understanding child protection and abuse, and coordination with communities,

¹⁴ Basically, it is conducted once a year, but there were years when it was not conducted due to budgetary issues or situations such as COVID-19.

families and individuals. The training has been conducted since 2012, and about 140 government officials and social service workforce participated in the training. The training was not conducted in 2021 due to COVID-19, but is expected to be continued in the future.

MOLSW has been working on the development of the “National Para Social Worker Training Module” and the “CPN Training and Advocacy Toolkits” with the support of UNICEF since 2018. The training module covers a wide range of topics including alternative care, laws and policies on child protection, child development and social welfare. The module was validated in 2020 and updated in 2021 based on feedback from CPN members and other practitioners. Moreover, KOICA and UNICEF regularly conduct training using the module and advocacy toolkit in their pilot model project¹⁵ for child protection systems, including capacity development of CPN. The project plans to provide training on child protection to 480 social work personnel in 80 villages in Attapeu Province [40]. In addition, according to UNICEF, training for 18 MOLSW staff will be provided in 2022.

2) Mental Health and Psychosocial Support (MHPSS) Training

In 2021, MOLSW and UNICEF, in collaboration with KOICA, developed the “Psychosocial First Aid (PFA) and Mental Health and Psychosocial Support (MHPSS) Training Module for the Social Service Workforce.” The training module identifies the needs of mental health care for social service workforce during pandemics and natural disasters, including COVID-19, and presents the required knowledge and skills for prevention and response. With the support of UNICEF, MOLSW has conducted online and face-to-face trainings for 256 participants from the Ministry of Health, MOLSW, Ministry of Education and Sports, LWU, and Lao Youth Union in Vientiane Capital and Sainyabuli Province. It is planned to expand the training to other provinces in 2022 [41].

3) Training on anti-trafficking in persons

In 2020, the National Committee for Anti-trafficking in Persons, led by the Ministry of Public Security and LWU, has developed national guidelines and related training modules on the protection and support of women and children who are victims of trafficking in persons. Training has been provided to national and provincial LWU counselors on victim identification, referral and counseling skills. According to the report of UNICEF (2019), UNICEF supported the implementation of the training to LWU staff in Xiangkhouang and Savannakhet Provinces, although the number of participants in the training is unknown [22]. In addition, the United States Agency for International Development (USAID) and MOLSW have been implementing the “USAID Laos Counter Trafficking in Persons Project” since 2017. According to the first quarter progress report for 2021¹⁶, the project has conducted CPN training on human trafficking and migration (3 days) in Vientiane Capital and five provinces¹⁷, and 104 participants (31 women) including village heads, village police officers, elementary school principals, social welfare workers and LWU members were trained in Savannakhet and Salavan Provinces [42]. Additionally, according to the progress report for the second quarter of 2021¹⁸, CPN training was conducted for 118 CPN members and village representatives

¹⁵ Integrated Programme for Climate Resilience and Empowerment in Attapeu Province – Child Protection (2019-2023)

¹⁶ Progress report for the first quarter of 2021 (October 1, 2020 to December 31, 2020)

¹⁷ As of March 2021, the target areas are expected to be the Vientiane Capital and the provinces of Champasak, Savannakhet, Salavan, Oudomxay, and Luang Namtha.

¹⁸ Progress report for the second quarter of 2021 (January 1, 2021 - March 31, 2021)

(including 28 women) in Vientiane Capital and Champasak Province¹⁹ [43]. Moreover, in 2020, the U.S. government has signed a Memorandum of Understanding (MOU) through USAID to implement a \$2.3 million, three-year Laos Counter Trafficking in Persons (CTIP) Program²⁰ [44].

Cases of social workers' activities

Friends-International, also known as Peuan Mit (meaning “friends” in Lao), has been working closely with UNICEF since 2018, including activities to support children in conflict with the law. In addition, in 2020, Friends-International signed a new partnership cooperation agreement with UNICEF to support the operations of the Child Protection System and to support the COVID-19 response in the amount of US\$534,277, funded by UNICEF Australia, Australian Government Department Foreign Affairs and Trade (DFAT) and KOICA. Some activities of social workers at Friends-International are reported.

Case 1:

A 21-year-old woman living in Vientiane Capital, who used to work as a cook’s assistant in a restaurant to support her family, lost her job due to the COVID-19 pandemic. When she was depressed because of her family situation and her job loss, a social worker provided her with psychosocial support through online and other means, encouraged her to get regular checkups, and introduced her to emergency package assistance for families, including food and rice. The social worker also introduced her to vocational training and she started her own vegetable farm. She said she hopes to stabilize this business and find better job opportunities with a steady income in the future [45].

Case 2

In order to support a 10-year-old girl who had experienced domestic violence and was engaged in child labor, social workers routinely made home visits to help her attend school. Under such a situation, her family lost their jobs due to the COVID-19 pandemic, and social workers supported her family by providing emergency assistance including housing rental fee and food. They also supported her to continue her studies through the provision of school materials and supporting access to remote learning programs. In addition, her mother received vocational training to earn a small income by sewing masks at home [46].

These cases show that social workers play an important role at the village level by identifying children and their families who are in a difficult situation and providing tailor-made support such as reintegration into families and schools, vocational training, etc. With support from UNICEF and DFAT, it has been reported that 79 vulnerable households have received emergency assistance and 1,245 children and youth, including victims of violence, have received a range of protection services since the outbreak of COVID-19 up to December 2020 [46].

¹⁹ According to the progress report for the third quarter of 2021 (April 1, 2021 - June 30, 2021), the training will be suspended due to the COVID-19 [61].

²⁰ The program, implemented by Winrock International, will target the Vientiane capital, as well as Savannakhet, Champasak and Salavan Provinces.

6.2.3 Support

(1) Employment and retention

According to the report of UNICEF (2019), many graduates of the BASW program at NUOL work in departments related to social welfare and social development in government agencies such as MOLSW, where their duties cover a wide range of areas, including social welfare, protection, labor management, disaster management, livelihood improvement, and community development. Officials with BASW rarely provide social work services directly, but many are engaged in policy and research work at the national level [22]. According to the interview with NUOL, the situation where the status of social service workforce is not established, the number of job vacancies and employment is unclear, and there are no professional associations that support social service workforce, has hindered university students who seek to work in social work from finding employment.

(2) Professional associations and networks

According to MOLSW, discussions are underway with LWU, NUOL, and other related organizations to establish an “Association of Professional Social Workers”, based on the Ha Noi Declaration²¹ adopted at the 37th ASEAN Summit (2020). However, no concrete plans such as the timeline for establishment have been made. The establishment of the Association of Professional Social Workers may also be stipulated in the Law on Social Work to be formulated.

(3) Code of Ethics

According to MOLSW, a code of ethics related to social work has not been developed. It plans to work towards its provisions through the establishment of the Association of Professional Social Workers and consultations with other concerned organizations.

(4) Supervision system

According to LWU, although there are no official regulations on supervision of social service workforce, LWU provincial and district offices hold regular meetings²² to discuss difficult cases, check progress, and supervise through case management. LWU has pointed out that the Law on Social Work to be formulated and related guidelines need to include regulations on the supervision system. According to the NUOL, in the ongoing survey on “Evaluation and Quality Improvement of Social Work Curriculum,” interviews were conducted with graduates of the BASW program, and the lack of personnel and systems to consult in performing their work was raised as an issue.

(5) Public awareness

Awareness-raising activities related to violence against women and children and trafficking in persons, as well as awareness-raising activities to disseminate the support and roles of CPNs at the village level, are being conducted within the scope of the LWU activities and support from development partners such as

²¹ Ha Noi Declaration on Strengthening Social Work Towards Cohesive and Responsive ASEAN Community

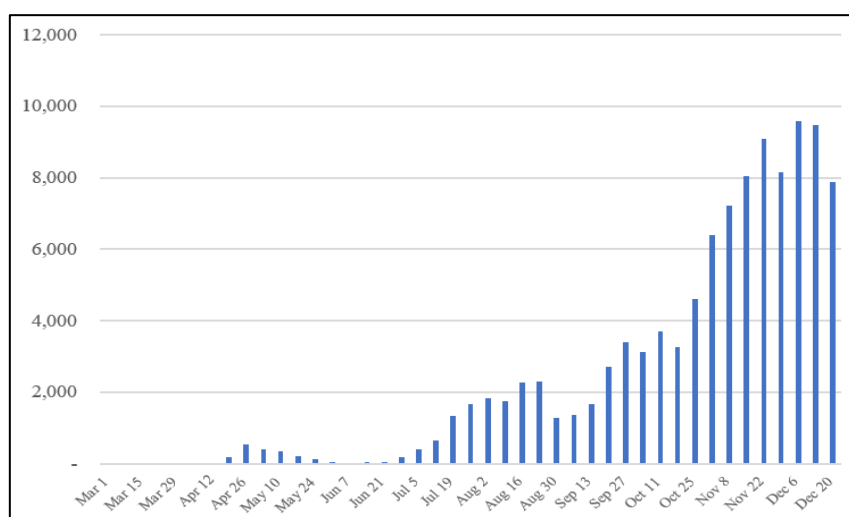
²² According to the interview with LWU, regular meetings are held annually at the provincial level and monthly at the district level.

UNICEF and UNAID. On the other hand, no information on dissemination and awareness-raising activities to improve the status and conditions of social service workforce was obtained.

6.3 Impact of COVID-19 on the Social Welfare Sector

6.3.1 COVID-19 situation

According to the World Health Organization, as of December 27, 2021, the cumulative number of cases of COVID-19 in the Lao PDR is 106,231. The Lao government promptly imposed nationwide containment measures in the early stages of the COVID-19 outbreak, and controlled the spread of COVID-19 in the country until 2020. However, as Figure 6-2 shows, the number of cases increased since April 2021, and a record number of new cases was reported in December 2021. In addition, after the first death due to COVID-19 was confirmed in May 2021, the number of deaths increased rapidly, reaching a cumulative total of 325 deaths as of December 27, 2021 [47]. In terms of vaccination status, as of December 7, 56.5% of the total population had received at least one dose of the vaccine, and 44.3% had completed the recommended dose [48].



Source: [47]

Figure 6-2 Number of new cases of COVID-19 infection (March 1, 2021 - December 20, 2021)

6.3.2 Overview of the impact of COVID-19 on the social welfare sector

Due to the global spread of COVID-19, the Lao PDR is said to be facing a critical situation that could wipe out the hard-won development gains of the last decade with its ambitions for middle-income status. In particular, daily wage laborers living in rural areas and migrant workers inside and outside of the country have been affected, resulting in a sharp increase in unemployment. It is also said that the COVID-19 pandemic could lead to the manifestation of structural inequalities and vulnerabilities in society, exacerbating the existing disparities in poverty. For example, it is concerned that COVID-19 may further entrap socially disadvantaged groups in a negative cycle, such as increasing gender-based violence and increasing the vulnerability of people engaged in informal economic sectors [5] [6].

(1) Poverty

Due to the COVID-19 pandemic, it is reported that an estimated 383,000 people will fall back into poverty, and poor households will be pushed deeper into poverty [6]. In addition to children who were already engaged in child labor, children who were temporarily engaged in work during school closures tend not to return to school after school reopens, leading to a further increase in child labor. It is concerned that these children and adolescents will lose educational opportunities, which will have a long-term negative impact on their lives. Moreover, people in informal economic sectors tend to engage in even more insecure and hazardous forms of work to earn income, as they have no or limited access to public social security [49].

As part of COVID-19 measures in 2020, the Lao government provided three-month tax exemption (from April to June 2020) for low-income workers and micro-enterprises, and postponed business taxes for tourism-related industries [50]. Although their coverage and duration were limited, about 16% of households benefited from personal income tax exemption, 23% of microenterprises were granted business tax exemption and tourism-related industries benefited from tax postponement. In addition, the COVID-19 unemployment benefit program was introduced for those insured by the social security system, but its coverage was very limited, as only 4.3% of the working population was covered by the social security system. While the majority of Lao workers are engaged in informal economic sectors, it can be said that an overwhelming proportion of the workforce has been left without livelihood support [51] [52].

(2) Women and children

It was reported that the widespread COVID-19 has led to economic deprivation, social stress, and social isolation, which has intensified domestic and gender-based violence, and this situation has been referred to as the “Shadow Pandemic.” It is concerned that the lockdown measures imposed in response to COVID-19 have not only isolated many victims of violence in their homes with their perpetrators, increasing their risk of violence, but have also made it difficult for them to access necessary medical and protection assistance due to supply chain disruptions and movement restriction [6] [53].

It was also reported that calls to the hotline of the Counseling and Protection Centers for Women and Children, operated by LWU, increased significantly during the lockdown [30]. The Ministry of Information, Culture and Tourism, in collaboration with MOLSW, LWU, UNICEF Lao PDR, UNFPA and others, has been working to raise awareness through the media about the increased risk of violence against children during COVID-19. With financial support from UNICEF Australia and USAID, seven TV spots, seven radio spots and three public service announcements on child protection and COVID-19 were produced in Lao and other local languages (Hmong and Khmu) [54].

(3) Migrant workers

It is estimated that 1.3 million Lao nationals work abroad, and remittances from these workers have been an important source of national income in the Lao PDR. Approximately 300,000 people were working as migrant workers in Thailand, the largest migration destination, but 100,000 returned home in 2020 following the COVID-19 pandemic. As a result, it is estimated that remittances from migrant workers equivalent to 0.7% of GDP were lost [6]. The number of returnees further increased in 2021, with an estimated total of more than 200,000 migrants having returned to the Lao PDR since the outbreak of

COVID-19. It is estimated that in May 2021, 75% of remittance-receiving households faced a decline in remittances from abroad [49] [55].

In response to the mass return of Laotian migrant workers, quarantine centers have been set up in provinces where entry points are located in order to provide free testing and medical services for those infected or showing symptoms of COVID-19. In addition to procuring medical equipment and protective equipment, the Lao government has been taking measures by providing training to medical personnel and officials, and MOLSW has received US\$35,000 from the International Labour Organization (ILO) to provide emergency relief supplies for 4,500 returning Lao migrant workers during their two-week stay at the quarantine centers [49] [55] [6].

6.3.3 Issues and initiatives in relation to social service workforce

(1) MOLSW

In 2020, UNICEF, with the cooperation of the Government of Japan, USAID, DFAT, KOICA and others, provided personal protective equipment (masks, sanitizers, gloves, etc.) and IT equipment (laptops, projectors, mobile Wi-Fi, printers, etc.) to social service workforce in MOLSW provincial offices. Using these IT equipment, officials of MOLSW provincial offices participated in three online psychological first aid trainings to provide remote case management support. In addition, in February 2021, UNICEF again provided personal protective equipment and IT equipment (worth a total of US\$83,725) to MOLSW, funded by the Australian Government, to work on the child protection and social protection program “Leaving no one behind” during the pandemic [56] [57]. UNICEF calls on the Lao government to recognize social service workforce as essential service providers and to provide adequate remuneration for their services, as well as technology, protective equipment and training [58].

According to the interview with MOLSW, 550 people sought counseling and support related to domestic violence, sexual violence and trafficking in persons in 2020, a 175% increase in demand for assistance compared to 2019 (315 people). In this context, the demand for mental health and psychotherapy has also increased, but the challenge is that the capacity for providing such services is very limited in the whole country.

(2) LWU

Since the outbreak of COVID-19, the shelters operated by LWU have reportedly provided services to more than 387 women and children who were victims of domestic violence and human trafficking. To support these activities, in September 2020, UNICEF, with the support of the Government of Japan, KOICA, and USAID, provided LWU with equipment worth approximately US\$48,545 (one vehicle, 12 laptops, 6 printers, 3 projectors, 6 pocket Wi-Fi, 6 hard drives, hygiene and recreation kits). The equipment is expected to benefit more than 1,000 women and children [58].

According to the interview with LWU, in response to the increase in calls to the hotline due to COVID-19 and the restriction of face-to-face counseling services, measures such as providing online counseling

services through WhatsApp²³ and increasing the number of phone lines are being planned. However, the challenge is to increase the number of staff and strengthen human resources to address such measures.

6.4 Priority issues for developing and strengthening social service workforce

In the Lao PDR, MOLSW is taking the lead in strengthening “planning”, “development” and “support” for capacity building of social service workforce, mainly with the support of UNICEF. Regarding “planning”, the definition of social service workforce, their roles and required qualifications and competencies have not been clarified yet. Regarding “development” of the workforce, based on the “Strategic Guidelines for the Social Service Workforce Development” that is to be formulated, there is a need to further strengthen the capacity of social service workforce through the use of training modules developed and the human resource development at NUOL. Furthermore, with regard to “support”, it is expected to promote the establishment of regulations and systems related to the qualification and accreditation of social service workforce, as well as the establishment of supervision system and professional associations through enforcement of Law on Social Work and the Strategic Guidelines. Thus, the Lao PDR, there are still many issues to be addressed in all areas of “planning”, “development” and “support” for social service workforce. The following three points are considered as priority issues and measures for strengthening social service workforce based on the results of this Survey.

6.4.1 Assessing the current situation of social service workforce

As mentioned above, the definition, roles, and required competencies of social service workforce will be clarified through the “Law on Social Work” to be formulated in the future and the “Strategic Guidelines for the Social Service Workforce Development” to be approved. On this basis, it is essential to promote the quantity and quality of social service workforce through needs assessment of social service workforce to identify the gaps between the required number and capabilities and the current situation, and to identify priority areas to be addressed and required training. For this purpose, the first and more pressing issue is to assess and clarify the current situation of social service workforce at each administration and in each related organization.

6.4.2 Improving expertise of social service workforce

The number of social service workforce is very limited in the Lao PDR. In addition, the lack of training instructors is also an issue although various training programs are being conducted with the support of development partners. Under these circumstances, in addition to improving generic social work knowledge and skills of the workforce, there is a need to develop human resources with expertise in each specific field. In a situation such as the Lao PDR, where resources are limited, it is important to identify the specific fields that should be prioritized through understanding the current situation of social service workforce as described above, and systematically implement training for developing professionals with expertise. For example, social service workforce engaged in combating trafficking in persons are required to have a high level of expertise in identifying the physical and mental conditions of victims and the necessary support, as well as in providing support for prosecution and coordination with relevant organizations. Following the

²³ A messenger application for smartphones launched in 2009.

approval of the Guidelines for the Protection, Assistance and Referral for Victims of Trafficking in 2020, there is a need to strengthen the capacity of social service workforce specialized in anti-trafficking services by disseminating the guidelines and providing training. In addition, there is a growing demand for mental health and psychosocial support for those who have been victims of violence and those who have suffered from psychological stress due to COVID-19. Following the finalization of the “Training Module on Psychological First Aid and Mental Health and Psychosocial Support for Social Work Personnel” in 2021, it is expected to train social service workforce to be able to provide psychological care. Furthermore, it is necessary to consider the establishment of a supervision system using human resources with expertise in accordance with the Law on Social Work and the Strategic Guidelines.

6.4.3 Strengthening the capacity of social service workforce at village level

In parallel with the above-mentioned development of social service workforce with expertise, it is also important to raise the capacity of social service workforce working at the village level. While the needs for child protection and social support for those in need are located largely at the village level, there is an overwhelming shortage of front-line social service workforce, and a heavy reliance on para social workers and volunteers who work on a volunteer basis. MOLSW, with the support of UNICEF and other development partners, has been promoting the national expansion of CPN, but its coverage is still low at 14%. Moreover, although efforts are being made to strengthen the capacity of CPN members working on a volunteer basis, the project is limited to some areas in the country. Under these circumstances, given the current shortage of human resources, it is unlikely that trained professional social workers will be deployed in villages across the country in the near future. Therefore, it is critical for MOLSW to develop capacity building of social service workforce (including CPN members) who are engaged in social welfare services at the village level nationwide. Furthermore, it is important to make effective use of the limited human resources by clarifying the roles to be played by social service workforce at the village level in accordance with the Law on Social Work and the Strategic Guidelines, and by establishing a supervision system to ensure the quality of services provided.

Chapter 7 Current Status of Social Service Workforce: Malaysia

7.1 Overview of social welfare sector

7.1.1 Policies, systems and challenges for social welfare

(1) Introduction

Malaysia is a multi-ethnic country with a population of 32.7 million, which consists of Malay (69.6%), Chinese (22.6%), Indian (6.8%) and others (1%). The proportion of the total population aged 65 and over reached 7.0% in 2020, which means the country has entered the stage of an “aging society”. The total fertility rate in 2021 has fallen to 1.7, and it is expected that the trend of declining birthrate and aging population will continue [1].

In 1991, Malaysia announced a national vision (Vision 2020) with the goal of “becoming a developed country by 2020,” and has adopted a policy that focuses on economic growth. Although it achieved USD 10,570 of Gross National Income (GNI) per capita by 2020, it did not meet the World Bank’s “high-income country” standard (US \$ 12,235 of GNI per capita) [2]. The goal of “becoming a fully developed country” is carried over to the current national vision “Prosperity Sharing Vision 2030”. The Vision aims to eliminate “various gaps between ethnic groups, income groups and regions, etc.” [3].

The “Prosperity Sharing Vision 2030”, which aims to reduce disparities, sets “social welfare” as one of the seven strategic goals, with specific goals such as social security for the low-income group and day care services for the elderly [4]. Malaysia, which has already become the second highest-income country in GNI per capita after Singapore and Brunei among the 10 ASEAN countries, has adopted a policy that puts more emphasis on the enhancement of social welfare.

Traditional Malaysian society used to be a society that emphasized family ties, and it was common for three generations to live together, and there was a pervasive sense that care for elderly parents and children should be done at home. In particular, the Muslims, who make up the majority of the population, are strongly reluctant to bring their parents into the facility because they are religiously obliged to provide care for their parents. In this reason, it was common to look after parents at home with the help of a housekeeper [5] [6].

However, with the changes in the industrial structure in recent years, the outflow of young people to urban areas has increased, and the need for elderly care and child-rearing support has expanded in accordance with growth of the nuclear family. The government is developing service facilities for the elderly and nursery schools, but the quality and quantity of services are required to be further enhanced.

Under these circumstances, Malaysia has reached an important stage regarding the positioning of social workers as human resources responsible for welfare services. Malaysia has a long history of social workers, and in the 1930s, the British colonial government assigned social work personnel to help migrant workers, mainly from China and India, to solve problems such as living environment, health and hygiene. Since the 1950s, the placement of medical social workers working in hospitals, which is British system, become widespread. Medical social workers have been stipulated by the law¹ in 2016 as a result of many years of

¹ Act 774 Allied Health Professions Act 2016

lobbying, but welfare social workers are still waiting for the enactment of the “Social Worker Profession Act”. Relevant organizations are working toward the enactment of the law by the end of 2022, and it is expected that after the enactment of the act, a momentum will be gained toward strengthening support systems such as training for social workers and supervision.

(2) Laws and regulations on social welfare

Malaysia is a federation consisting of 13 states and 3 federal territories. Under the Federal Constitution, each state has its own constitution. Basic human rights are referred in Chapter 2 of the Federal Constitution, but there are no social rights provisions, and protection of them are considered as legal issue [7].

Table 7-1 shows the laws related to social welfare.

Table 7-1 Laws related to social welfare

Name	Year of Enactment	Main contents
Child Care Centers Act	1984	A law that regulates staffing of childcare workers, size, meals and activities of facilities in order to ensure the quality of childcare services [8].
Care Centers Act	1993	A law that regulates registration obligations, operation management, and supervision of day care centers and residential care centers for the elderly [9].
Domestic Violence Act	1994	A law that regulates definitions of domestic violence (DV), protection orders, damages and counseling, and procedures for protection orders [10]. Penalties are imposed by the criminal law, not by the DV law.
Child Act _	2001	A law enacted by integrating the Juvenile Court Law (1947), the Women and Girls Protection Law (1973), and the Child Protection Law (1991) with the ratification of the “United Nations Convention on the Rights of the Child” in 1995. The amendment in 2016 added strict punishment for child abuse and human trafficking [11].
Persons with Disabilities Act	2008	A law that is the first comprehensive law on the welfare of persons with disabilities in Malaysia. Disability was defined as “alienation of participation built by barriers between individual circumstances and society,” and it stipulates that persons with mental illness should also be recognized as persons with disabilities [12].
Sexual Offences against Children Act	2017	A law that regulates specific sex crimes against children (child pornography, grooming ² for sexual activity, etc.) and punishments for them [13].

Source: Prepared by the Survey Team

One of the urgent issues in the field of social welfare is an enactment of “Social Workers Profession Bill”. Although the bill has already been drafted³, the movement toward enactment has been stagnant for about three years due to the influence of the new coronavirus (COVID-19) infection. According to an interview⁴

² An action of approaching, becoming close, and tampering with the child for sexual purposes,

³ The content is not available because it is confidential, but it is expected to include the establishment of a social worker council, issuing of certification, and establishment of a registration system. [45]

⁴ Mr. Patmanathan A / L R. Nalasamy, Senior Principal Assistant Director, Policy & International Relations Division (January 13, 2022)

with the Ministry of Women, Family and Community Development (MWFC) in this survey, they are making efforts on with the aim of enacting it within 2022.

(3) Social welfare implementation system

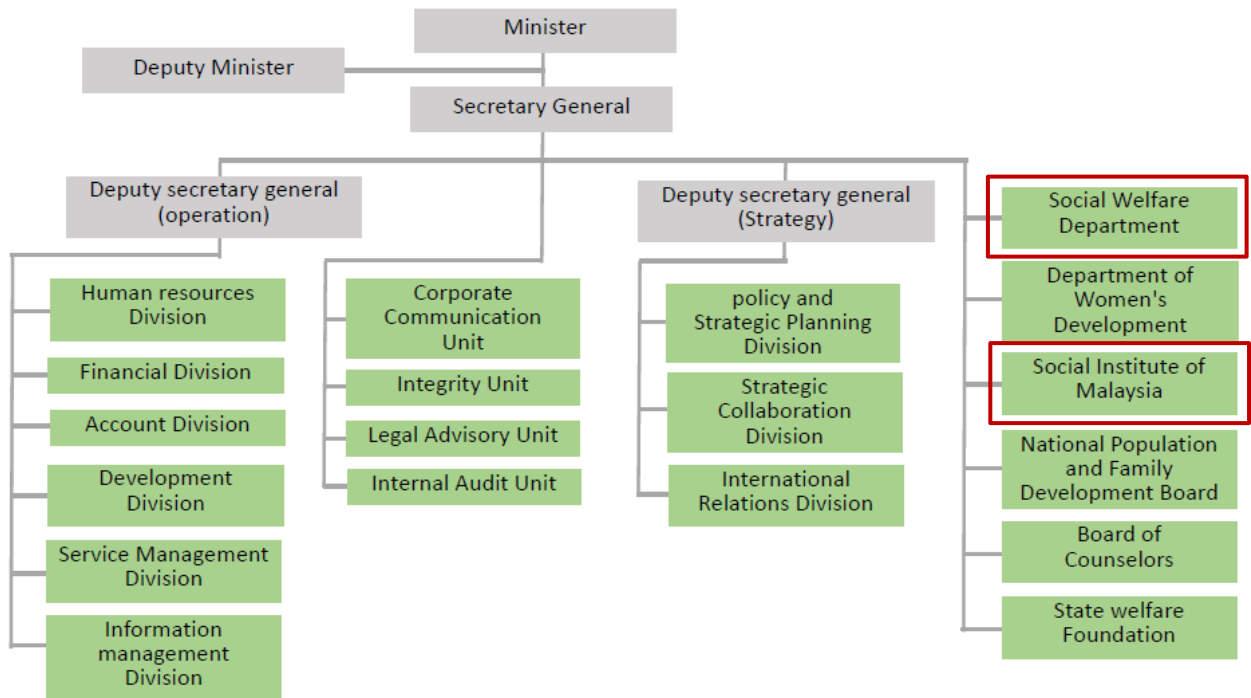
Malaysia's social security system is roughly divided into the public sector and the private sector. In the public sector, "The Social Security Bureau" provides a full range of coverage from old-age coverage (old-age pension and lump-sum retirement allowance) to survivor's pension, disability pension, medical coverage, and workers' accident compensation. On the other hand, in the private sector, the "Malaysian Employees' Provident Fund" is responsible for old-age security, and the "Social Security Organization" is responsible for survivor's pension, disability pension, medical coverage, and occupational accident compensation [14]. There is no overlap between the public and private sectors, but even civil servants are allowed to join the "Malaysian Employees' Provident Fund". Some doctors and technicians who often change jobs to the private sector choose the "Malaysian Employees' Provident Fund" from the beginning even if they get a job as a civil servant [5].

The budget for pensions, severance pay and compensation in 2021 is estimated at RM 27,000 million: Malaysian Ringgit, accounting for 7.6% of the total national expenditure of RM 353,048 (estimated as of November 2020) [15].

The central institution responsible for social welfare is the Social Welfare Department (SWD), which is one of the departments of MWFC. SWD provide welfare allowances to children, elderlies and persons with disabilities, and support for victims of violence and disasters.

1) Government organization

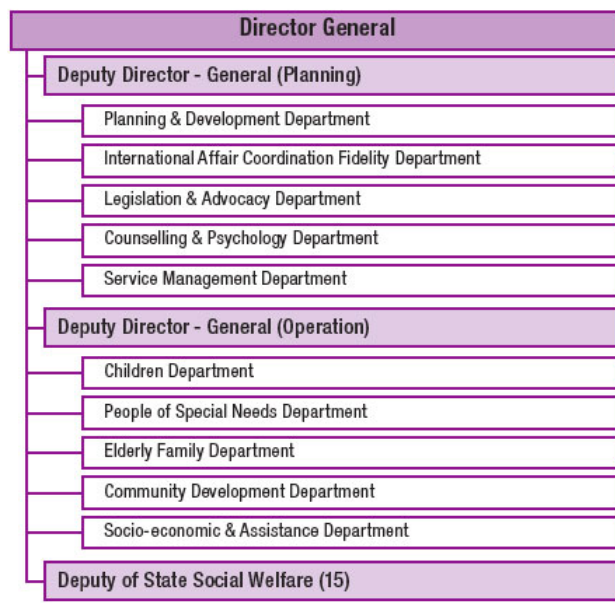
The SWD was established in 1946 immediately after World War II as an organization to deal with poverty and misconduct of adolescents, which were serious social problems at that time. After the several reforms of organization structure, SWD became one of department of MWFC. Organization chart of MWFC is shown in Figure 7-1, that of SWD is shown in Figure 7-2.



Source: Prepared by the Survey Team with reference to [16]

Figure 7-1 MWFC organization chart (Updated January 13, 2022)

In Figure 7-1, the organization surrounded by the red frame is the SWD and the “Social Institute of Malaysia” responsible for human resource development in the welfare field.



Source: [16]

Figure 7-2 SWD organization chart

Malaysia’s administration consists of three layers: the federal, 14 states (provinces in Sabah and Sarawak), three union territories, and 162 cities/districts. SWD, which has jurisdiction over social welfare, has set up a social welfare department at the state level and a social welfare office at the city/district level. Civil

servants in charge of social work, namely Social Welfare Officer or Assistant Social Welfare Officer of SWD receives consultations on support for children, persons with disabilities, the elderly, the poor, DV victims, etc., and intervenes between the parties and formulates support plans as necessary. The SWD has set up 65 welfare facilities nationwide (37 for children, 12 for the elderly, 10 for the person with disabilities, 5 for the poor, 1 shelter for DV victims), and those who have been certified as he/she can use the service by Social Welfare Officers are able to use services at welfare facilities.

2) Domestic and international NGOs

In Malaysia, many NGOs are active as welfare service providers. There was a report in 2001 that “about 330 social welfare NGOs are registered in Malaysia”, [17] but the current data could not be confirmed.

Typical social welfare NGOs in Japan are the Childline Foundation, which works to prevent child abuse [18], Yayasan Generasi Gemilang, which supports education for poor children [19], Women’s Aid Organization (WAO) [20] and Sarawak Woman Society [21] to help victims of domestic violence, Tenaganita, to help improve the status of women [22], Malaysian Confederation of the Disabled, which is a national organization of persons with disabilities [12].

Major social welfare NGOs (Plan International, Save the Children, Care International) have completed their activities in Malaysia.

7.1.2 Situations in the areas related to social service workforce

The current status of the fields related to social service workforce is outlined below.

(1) Children / Family

The Child Act Amendment (2016) provides a basis for Social Welfare Officers to protect children who are harmed, such as neglect, by parents or other guardians, or who are at risk of personal trade or forced labor [23]. The law imposes penalties on reporting obligations for medical institution staff and children’s families who may be aware of child abuse, as well as allowing reporting who do not have reporting obligations [11].

The DV Law (1994) is a law born from enthusiastic campaign activities by NGOs aiming to improve the status of women. Support to DV victims by NGOs are still very active in Malaysia. In the case of WAO, the first NGO in Malaysia to set up a shelter for DV victims, a dedicated social worker will be assigned to each case, a support plan will be created according to the situation of the client, and if necessary, the social worker goes to the court with the client [24].

(2) Persons with disabilities

Persons with Disabilities Act (2008) guarantees access to health services for persons with disabilities and stipulates appropriate measures for that purpose, and as a basic health service provided to persons with disabilities, timely interventions for prevention of recurrence of dysfunction, vaccination, nutrition, environmental protection and conservation, genetic counseling and early detection of dysfunction, identification and rehabilitation are listed [12].

SWD introduced a registration system of persons with disabilities in 1992, issuing disability cards to registrants. Social welfare officer at district social welfare office supports necessary administrative

procedures. Persons with disabilities card holders can receive financial support such as employment support and financial support for entrepreneurship, as well as services at facilities that provide rehabilitation and capacity development [12] [25] [26].

(3) The elderly

In Malaysia, especially among the Malay people who are Muslims, the value that it is desirable for families to care for their parents at home is pervasive [27], and it is common cases where each family cares for the elderly with the help of a housekeeper [5].

There is no public medical insurance system or long-term care insurance system in Malaysia, but people can receive medical services at public medical institutions with a small payment. The elderly who have no means of earning a living and lack a supporting family are provided with an elderly allowance, and households which care for the elderly with disabilities or chronic illnesses whose income is below a certain level are provided long-term care allowance. In addition, public day care centers and residential care centers can be used. Due to the COVID-19 pandemic, all applications for these allowances can be processed online. If someone has any questions about using the service, he/she can call the district social welfare office.

7.2 Current status of social service workforce development

7.2.1 Planning

(1) Laws, policies and plans

As stated in 7.1.1 (2) “Laws and regulations on Social Welfare”, there is an urgent need to enact the “Social Worker Profession Act” in Malaysia, and the final preparation and adjustments are underway with the aim of enacting it by the end of 2020.

Regarding policies in the welfare field, “MWFCDC Strategic Plan (2021-25)” compiled by MWFCDC in line with the current medium-term national development plan “12th Malaysia Plan (2021-25)” is a guideline for the entire ministry. Based on this, the SWD formulates a more specific strategic plan for the department.

Table 7-2 shows the outline of the “MWFCDC Strategic Plan (2021-25)”, which is the strategy of the entire ministry. In addition to the core strategies by targets such as women, children, the elderly and specific groups (begging, the poor, victims of DV/ human trafficking/ disasters, etc.), additional core strategies such as preventing corruption and improving government services One of the eight core strategies, “8. Improvement of efficiency and effectiveness of government service delivery system”, includes the measure of “professionalization of social work services” [28], which represents the ministry’s emphasis on strengthening the capacity of social service workforce.

Table 7-2 Outline of “MWFCDC Strategic Plan (2021-25)”

Vision	Key leader in society development toward common prosperity
Mission	Building a n inclusive, fair and prosperous society through social innovation
Core strategy	<ol style="list-style-type: none"> 1. Strengthening family institutions 2. Empowering women 3. Protecting and development children 4. Supporting a conducive environment toward welfare of the elderly

	<p>5. Empowering persons with disabilities 6. Creating a development program for the independence of specific groups 7. Improving government transparency to the international level 8. Improving the efficiency and effectiveness of government service delivery systems (including “Making social work services a professional service”)</p>
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Source: Prepared by the Survey Team with reference to [28]

There is a policy document on social work named “Social Work Strategy Plan (2018-2020)” formulated by SWD in 2018. Table 7-3 summarizes the outline of the strategy.

Table 7-3 Outline of Social Work Strategic Plan (2018-2020)

Core strategy	Measures
1. Human resource development	<ol style="list-style-type: none"> 1. Improving staff competencies through training 2. Improving knowledge and skills of staff through education 3. Recognition and training of social work field expert⁵ 4. Creating a database of social workers
2. Improving service delivery efficiency	<ol style="list-style-type: none"> 1. Drafting Social Worker Profession Bill and relevant regulations 2. Establishing Malaysian Social Work Profession Council⁶ 3. Disseminating National Competency Standards for Social Work Practice. [29] 4. Matching social work case management system with existing standard operation procedure⁷
3. Research and Development	<ol style="list-style-type: none"> 1. Strengthening research and development in the field of social work 2. Strengthening the evaluation mechanism to improve professionalism of social work
4. Awareness raising	<ol style="list-style-type: none"> 1. Awareness raising on improving professionalism in the field of social work 2. Strengthening multi-sectoral cooperation networks in the field of social work

Source: Prepared by the Survey Team with reference to [30]

“Social Work Strategy Plan (2018-2020)” aimed to draft “Social Worker Profession Bill”. It was already achieved, but the establishment of a social worker council and the construction of a database of social workers were not realized by the target year. The content of this strategy has been taken over by the “SWD Strategic Plan (2021-25)”, which is created in line with the “MWFCDC Strategic Plan (2021-25)”. In the current SWD strategy, one of the seven core strategies is focused on strengthening social work. Table 7-4 shows the outline of the SWD Strategic Plan (2021-25).

Table 7-4 SWD Strategic Plan (2021-2025) Seven Core Strategies

Core strategy	Measures
1.1. Protection and Development of Children	<ol style="list-style-type: none"> 1. Strengthening policy, legislation and research related to children 2. Improving prevention and development program 3. Designing protection and recovery system 4. Strengthening community involvement in the integration of children into society
2. Establishing a supporting environment for the elderly	<ol style="list-style-type: none"> 1. Strengthening policies, legislation and research related to the elderly 2. Raising awareness and promoting strategic alliances for active aging 3. Improving the protective environment for the elderly 4. Strengthening social support for the elderly

⁵ In 2016, Malaysia introduced a system to qualify experts in specific fields (SME: Subject Matter Expert). In accordance with this system, the plan is to award excellent social work personnel working in the field of welfare as field expert certification, and this initiative has been taken over by the “MWFCDC Strategic Plan (2021-25)”, which plans to issue certifications to 30 people annually.

⁶ The SWD’s Social Work Strategy Plan (2018-2020) defines the role of the council as regulation and monitoring of the social service workforce.

⁷ Standard Operation Manuals for children, the elderly, and facilities for the disabled under the SWD.

Core strategy	Measures
3. Empowering persons with disabilities	<ol style="list-style-type: none"> 1. Strengthening policies, legislation and research related to the persons with disabilities 2. Supporting the independent life of persons with disabilities 3. Increasing community understanding and acceptance of persons with disabilities 4. Strengthening social support for persons with disabilities
4. Enhancing independence of specific groups ⁸	<ol style="list-style-type: none"> 1. Strengthening policies, legislation and research related to the specific groups 2. Strengthening service delivery to specific groups 3. Designing development programs for specific groups
5. Strengthening social work practices in welfare services	<ol style="list-style-type: none"> 1. Development of a platform for recognition of social work professionals in SWD⁹ 2. Improving the knowledge, skills and competencies of the staff in the field of social work to ensure the delivery of professional services 3. Strengthening social work training/ courses according to the requirements of the Social Worker Profession Bill 4. Strengthening mechanisms to improve social work professionalism
6. Recognizing and empowering human resources	<ol style="list-style-type: none"> 1. Fostering clean values and integrity among workforce 2. Fostering a safe, healthy and active work culture 3. Strengthening human resources management
7. Improving the efficiency and effectiveness of welfare service delivery in the community	<ol style="list-style-type: none"> 1. Improving service governance 2. Providing a conducive work environment 3. Improving the quality of service delivery to the target groups 4. Promoting the entry of private companies into the care industry 5. Raising awareness of social welfare 6. Strengthening the enforcement of the legislation 7. Strengthening strategic collaboration in welfare services 8. Strengthen media management

Source: Prepared by the Survey Team with reference to [31]

The SWD core strategy 5 “Strengthening social work practices in welfare services”, shown above in Table 7-4, is specialized in social work. Table 7-5 shows its details.

Table 7-5 Core strategies for social work

Strategic measures	Program	Indicator	Target year
1. Development of a platform for recognition of professional social workers in SWD	1. Preparation of professional social work development plan for social SWD staff	• 1 plan	2021-22
2. Improving staff knowledge, skills and competencies to ensure the delivery of professional service in the field of social work	1. Preparation of knowledge / skill sharing platform	• 2 sessions /year • 5 sessions /year	2021-2025
	2. Strengthening the competence of staff in case management	• 2 monitoring session /year • 225 officers have competence in case management /year	2021-2025
	3. Preparation of case management book	• 2 books / year	2021-2025
	4. Strengthening the capacity of officers in crisis intervention	• 225 people /year	2021-2025

⁸ Beggars, poor people, victims of personal transactions and disaster, etc.

⁹ Under the leadership of the State SWD, the District social welfare office, private sector and NGOs will be the main actors.

Strategic measures	Program	Indicator	Target year
	management		
3. Strengthening the content of social work training according to the required level of the Social Worker Profession Bill	1. Providing a data bank for teachers, lecturers and coaches in the field of social work	• 1 databank	2021
	2. Strengthening the implementation of advanced social work Certificate and the postgraduate diploma in social work	• 1 new module related to social work	2021
	3. Preparation of teaching modules in line with standard instruction material in the field of social work	• 2 modules / year	2021-2025
	4. Providing course/ modules related to social work	• 2 courses / module	2023-2025
4. Strengthening mechanisms to enhance social work expertise	1. Expansion of the social work supervision programs at the district and facility level	• 105 District Social Welfare Offices, 68 facilities	2021-2025
	2. Implementation of social work evaluation program	• 2 assessment report per program / year	2021-2025
	3. Monitoring of social work practices at District Social Welfare Offices and facilities	• 1 assessment report / year • 1 inspection report / year	2021-2025
	4. Conducting a survey related to the development of social work	• 1 survey	2023-2025
	5. Recognition of NGO practitioner in the field of care and welfare services	• 50 practitioners' registration	2021-2025

Source: Prepared by the Survey Team with reference to [31]

(2) Definitions and regulations

SWD defined social work as “activities as profession based on social work principles, values, ethics, knowledge, techniques and methods that help individuals, families, groups and communities to improve and reconstruct social functions” [30]. This definition is based on the definition of the Malaysian Social Work Association (2011) and the definition set by the General Assembly of the International Federation of Social Workers / International Social Work Schools (2014).

There is no qualification system for social service workforce in Malaysia, and a bachelor’s degree in social work at a university or college is considered to be a social work specialty. On the other hand, the term “social worker” is also used as a general name for people who work in the field of social welfare, and people who do not have a degree in social work can also have a job in the field of social work. In some cases, private organizations hold a course called “social worker training” and issue a certificate of completion¹⁰.

In 2010, the SWD formulated the “National Competence Standards for Social Work Practice in Malaysia” and listed the 10 competencies required for social work practitioners. These competency standards were created for the purpose of controlling the quality of social work services, and it sets goals for improving individual skills and knowledge, and is expected to be used as a standard for grade evaluation by educational institutions responsible for work monitoring and pre/in-service training [29].

¹⁰ Hearing with UNIMAS in January 2022 (January 27, 2022)

Six of these are the basic abilities of all professionals involved in humanitarian services, and the other four are the abilities specifically required of social work practitioners. Table 7-6 shows the contents.

Table 7-6 Ten abilities required for social work practitioners

Six Generic competencies	Four Specific competencies
1. Ethical behavior	1. Ability to work with individuals, families, groups, communities and organizations using social work values, knowledge and intervention skills
2. Interpersonal communication	2. Ability to work according to the ethics of social work
3. Cognitive reflection and creative thinking	3. Ability to work professionally in an organizational setting
4. Trouble shooting	4. Ability to introspect professionally
5. Task management	
6. Leadership ability	

Source: Prepared by the Survey Team with reference to [29]

(3) budget

Table 7-7 shows the MWFCDC's 2021 budget (estimated as of November 2020), and Figure 7-3 shows the breakdown of the "special programs" that account for 74% of the ministry's budget. Most of the special programs are provided for persons with disabilities, the elderly and poor households, and the total of these three allowances is RM1,756,985 thousand, which is 68% of the ministry's budget.

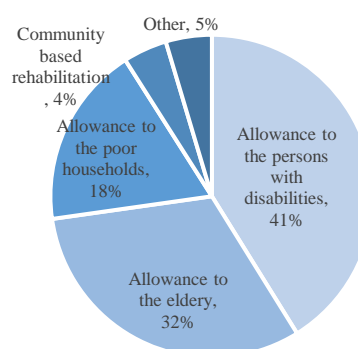
The 2021 budget of the Malaysian Social Research Institute, which is in charge of the MWFCDC training project, is RM 8,101 thousand, which is equivalent to 0.3% of the Ministry's budget.

Table 7-7 MWFCDC 2021 FY Budget

(Unit: RM1000)

	Expense items	Amount	Composition ratio
Operation budget	Management	53,455	2%
	Women, families, social welfare	484,449	19%
	Special program	1,920,030	74%
	One-off spending	978	-
Development budget (capital investment and maintenance)		125,639	5%
Total		2,584,551	100%

Source: Prepared by the Survey Team with reference to [15]



Source: Prepared by the Survey Team with reference to [15]

Figure 7-3 Breakdown of the Special Program, MWFCDC 2021 Budget

(4) License / certification system

Currently, Malaysia does not have a license / certification system for welfare social workers, but a degree of the social work is regarded as a kind of certification. On the other hand, many of the people currently have a job in the field of social work do not received education related to social welfare¹¹. The certification

¹¹ Hearing with Vice Director of MWSA (January 6, 2022)

system is expected to be managed by the council established after the enactment of the “Social Worker Profession Act¹²”.

Medical Social Officers¹³ are legally stipulated as one of the 23 medical professionals such as nutritionists, physiotherapists, radiologists, and dental technicians under the 2016 Act 774 Allied Health Professions Act 2016. The law stipulates the establishment of the allied health professions council, the issuing of certificates by the council, and the introduction of a registration system. The registration with the council is mandatory for medical treatment and interpersonal practice.

(5) Ministries and agencies related to social service workforce

Universities (4 years) and colleges (2 years) are the institutions responsible for pre-service of social service workforce, and are under the jurisdiction of the Ministry of Higher Education, which is the supervising ministry. Social workers who work as civil servants are employees and under the jurisdiction over the SWD, but social work personnel who work in the private sector such as NGOs are not under the supervision of the department.

(6) Human resources information and data

As of January 2022, there are 3,814 social work personnel (Social Welfare Officers and Assistant Social Welfare Officers) working as civil servants at federal, state, and district level¹⁴. The Social Welfare Officer is a person with a bachelor's degree of university or higher, and the Assistant Social Welfare officer is a person with a bachelor's degree of junior college or higher [32].

As of 2016, the number of medical social workers is 319 [33]. Current figures were not obtained.

Currently, Malaysia does not have a registration system for social service workforce, so the number of social work personnel working in the private sector such as NGOs is not known. UNICEF has begun mapping social service workforce, with the draft completed as of January 2022 and awaiting approval from the SWD. After the enactment of the Social Worker Profession Act, the council will be set up, a registration and certification system will be introduced, and a human resources database will be constructed.

7.2.2 Development

(1) Educational institution/ education system

Malaysia has 11 universities and 1 college that offer social work courses. It has approximately 40 students per university/college and produces a total of about 400-450 graduates annually. Of the national universities, four universities offer master's and doctoral programs.

¹² Hearing with Vice Director of MSWA (January 6, 2022). Since the content of the Social Worker Profession Bill is confidential, detailed information on the council such as certification system was not available.

¹³ Generally, the name of Medical Social Worker was used, but in the Allied Health Professions Act, Medical Social Officer was adopted as the official name.

¹⁴ Hearing with the SWD (January 13, 2022)

Table 7-8 Social work degree program in Malaysia

School name	Type	Course
Universiti Malaysia Sabah (UMS)	National	PhD, Master, Bachelor
Universiti Malaysia Sarawak (UNIMAS)	National	PhD, Master, Bachelor
Universiti Sans Malaysia (USM)	National	PhD, Master, Bachelor
Universiti Utara Malaysia (UUM)	National	PhD, Master, Bachelor
Universiti Kebangsaan Malaysia (UKM)	National	Bachelor
Universiti Malaya	National	Bachelor
Universiti Malaysia Kelantan (UMK)	National	Bachelor
Universiti Malaysia Terengganu	National	Bachelor
Asia e University	Private	Bachelor
Open University Malaysia (OUM)	Private	Bachelor
Sunway University	Private	Bachelor
Methodist College Kuala Lumpur	Private	College

Source: Prepared by the Survey Team

1) University of Sans Malaysia (USM)

USM was founded in Penang as Malaysia's second national university in 1969 and was the first in the country to introduce a social work course in 1975. It has a remarkable performance as a place for social work research and education. It has bachelor's, master's and doctoral programs in social work courses and attracts a large number of international students from Islamic countries such as the Middle East, South Asia and Indonesia. Due to the difficulty of accepting international students under the influence of COVID-19, a completely online master's course has also started. The bachelor's degree is taught in Malay, and the master's and doctoral programs are given in English.

The career paths of graduates are government agencies, international organizations, NGOs, etc., but since the recruitment of social workers is limited in Malaysia, people who work outside the social work field and who are active as social workers overseas such as Singapore. Singapore has a shortage of social workers and they offer high wages, many people want to get a job there. In Singapore, a bachelor's degree in social work at a Malaysian university is considered a kind of certification, and it is possible to get a job as a social worker¹⁵. The number of doctoral students is about 15-20 per year, and students from Indonesia, UAE, Bangladesh, Nepal, India and Nigeria are studying in addition to Malaysian. Many people find employment in universities and research institutes after obtaining a PhD. Among the graduates, there are professors at Princess Nuara University in Saudi Arabia and Lahore University in Pakistan. It has also a partnership with a school in Bandung, Indonesia, and has accepted 15 doctoral students so far. After returning to Indonesia, the graduates have been active in government agencies and universities.

USM aims not only to serve as a place for research and education, but also to feedback knowledge to the community. Based on the idea that teachers should not only be in charge of lectures but also practitioners, it establishes a unit to provide community-based rehabilitation to support persons with disabilities. In addition, a childcare room that can be used by both teachers and students has been set up on campus to create an environment for balancing work and education with childcare. USM's activities to set up childcare rooms on campus have been highly evaluated by the government, and childcare rooms will be set up at all national universities with the 2022 budget. In addition, as part of its contribution to the community, USM

¹⁵ Hearing with UNIMAS (January 27, 2022)

is practicing activities to replace needles of drug addicts in order to control HIV infection, and this activity is also used as a place for practical training by students of the social work department.

2) University Sans Malaysia, Sarawak (UNIMAS)

UNIMAS was established in 1992 as the eighth national university in Malaysia in Kuching, the capital of Sarawak, Borneo. The social work department was established in 1993, second to USM in Malaysia. The curriculum of the social work department is only the bachelor's program, and the master's and doctoral programs accept research students.

Bachelor's programs at universities on the peninsula such as USM are held in Malay for four years, while social work course of UNIMAS is characterized by "graduation in 3 years" and "classes in English". As a university located on the island of Borneo, this is a strategy to differentiate it from the universities on the peninsula. The number of units required to graduate is 122, which is the same as that of universities on the peninsula. Classes in English are evaluated as "UNIMAS graduates are good at English" and are said to be advantageous in the employment market.

The social work department has a capacity of 92 students per grade and currently has 255 students on the register. As the only social work department in Sarawak, it has about twice the capacity of universities on the peninsula (40-45 students per grade), but the number of applicants for admission is much higher than the capacity every year. In addition to undergraduate students, there are four research students for writing master's thesis and one research student for writing doctoral dissertation. There used to be international students from Africa, but now there are no international students, and most of the students are from Borneo.

After graduation, most of them want to work as civil servants of SWD, many go to international organizations and NGOs, and some graduates work in Singapore as social workers and university lecturers. In addition, some graduates are currently active as executives in the SWD, and some have become university professors after obtaining a PhD.

(2) curriculum

The USM and UNIMAS curriculum is outlined below. The curriculum for under-graduate education is diversifying according to the needs of the region, and it will be necessary to make adjustments for standardization in the future¹⁶.

1) USM

The Social Work Science Course is set up in the Faculty of Social Sciences and requires 122 units to be accumulated by the time of graduation. Table 7-9 shows the curriculum. The bachelor's degree program is a four-year program that focuses on practice such as group work, community activities, subsequent discussions, and internships, in addition to learning general knowledge about social science through lectures.

¹⁶Hearing with the SWD (January 13, 2022)

Table 7-9 USM social work course, Bachelor's degree curriculum

Social Science Course (16 Units)	Units
Introduction to Anthropology and Sociology	3
Introduction to Political Science	3
Basic Psychology	4
Philosophy of Social Research	3
Statistics for Social Sciences	3
University Course (15 Units)	
Malay IV	2
Academic English	2
General English	2
Islamic and Asian Civilization	2
Ethnic Relations	2
Basic Entrepreneurship	2
Co Curricular/ Option Courses	3
Core Courses (70 Units)	
Introduction to Social Work	3
Social Work Philosophy, Values and Ethics	3
Social Work Skills (Laboratory)	4
Human Behavior and Social Environment	3
Casework with Individual and families	4
Theories in Social Work Practice	3
Group Work Method	4
Laws for Social Workers	3
Practicum I	6
Social Work Practice in School	3
Community Work Method	4
Practicum II	6
Social Planning and Social Policy	3
Social Work Research	4
International and Cross Cultural Social Work	4
Human Service Organizations	3
Practicum III	6
Social Work Seminar	4
Elective Courses (21 Units) *Select 7 courses	
Medical Social Work	3
Social Work with Children, Adolescents and Families	3
Community Organization and Development	3
Spirituality and Social Work	3
Human Sexuality and Social Work	3
Social Work with Marginalized Communities	3
Community Health	3
Family Therapy	3
Social Work Practice with the Elderly	3
Abnormal Psychology	4
Religion and Social Relation	3
Ethnic Relations and Racism	3

Source: Prepared by the Survey Team with reference to [34]

2) UNIMAS

The UNIMAS social work course curriculum was not available, but it uses a curriculum approved by the Ministry of Higher Education and is not significantly different from the USM social work department. The content of the course consists of lectures (theories about social sciences and behavioral sciences) and

practice (strengthening perspectives for problem solving through group work and fieldwork, acquisition of communication skills, internships).

As a future task, the UNIMAS Social Work Course Program Coordinator pointed out that “to remedy a tendency of student who has a perspective of a counselor rather than a social worker during internships and fieldwork”. She said that it is necessary to have people understand through on-site experience that it is the role of social workers to not only listen to the concerns of clients but also to support them in rebuilding their lives. For this reason, UNIMAS plans to reorganize its curriculum into a one that emphasizes more practice.

(3) Continuing education

Malaysian Social Research Institute, one of the MWFCDC organizations, provides in-service training for staff of SWD and other social service workforces. In addition to this, Malaysian Association of Social Workers¹⁷ commissioned by the SWD provides in-service training for social service workforce. However, there is no established training as a continuous education program, and mainly short-term thematic training is provided. For example, there are trainings such as “Introduction to Social Work” and “Social Work Competencies” for staff of the SWD, and “Child Protection of High-Risk Groups¹⁸” for employees of child protection facility, which are held every year.

The SWD plans to introduce multiple training programs such as in-service training (introduction, theory, practice course) for social workers and training for supervisors. Contents of the programs will be developed based on the results of needs assessment.

7.2.3 Support

(1) Employment

To work as a social worker, there are options of working as a civil servant at the SWD or its facilities for children, the elderly, and people with disabilities, as well as working at an organization or facility run by a private or NGO. In Malaysia, the salary of civil servants¹⁹ is at a level that can compete with the private sector, and various allowances and pension systems are well-developed, so many people aspire to become civil servants after graduation [35]. For the social service workforce who provide consultation and support activities at private facilities for children, the elderly and persons with disabilities, and at welfare NGOs, it is recognized that there is considerable improvement in treatment after the full introduction of the minimum wage system in 2014²⁰.

Since Malaysia does not require a specific certification to obtain a social welfare job, many people who work as social workers in SWD or NGOs have no experience of education in the field of social work²¹. At the moment, the occupation of social worker has not been established as a profession, and there is still the

¹⁷ Details are shown in the section 7.2.3 Support (2) Professional association / network

¹⁸ Children subject to abuse, neglect and exploitation.

¹⁹ Although it was not possible to collect information on salaries of SWD social service workforce, according to Salary Explorer, an information site on salaries by occupation, the average monthly salary of Malaysian civil servants was RM 7,200 (about 198,000 yen).

²⁰ Hearing with MASW (January 6, 2022)

²¹ Hearing with the SWD (January 13, 2022) and Hearing with USM (January 21, 2022)

idea of recognizing social workers as volunteers²². Since there are not so many job offers for social workers by government agencies and NGOs, some graduates of the social work course find employment in general companies. In addition, many people get jobs in Singapore in search of professional status and high income. According to the job information search engine, the average monthly income of social workers in the private sector²³ is RM 3,000²⁴ (about JPY 82,000²⁵) in Malaysia²⁶ and 3,600 Singapore dollars²⁷(about JPY 310,000²⁸) in Singapore, which is a big gap.

(2) Professional associations/ network

In Malaysia, the first social worker professional association (Malayan Association of Almoners) was established in 1955. Almoners are a British system that refers to social workers who are stationed in hospitals and provide mental and financial support to patients. The Malayan Association of Almoners was active as a medical social worker organization, but solidarity with welfare social workers was needed to strengthen lobbying to improve the status of social workers. In 1973, MASW was established as an organization that brings together both medical and welfare social workers, and since then, the organization aims to establish a professional status of social service workforce in Malaysia and continue to work to improve competencies for social work practice through education and research.

MASW has also been active as a member of the International Federation of Social Workers since joining in 1974, disseminating information through networks with related organizations.

(3) Code of Ethics

Although Malaysia does not have a code of ethics for social workers, the above-mentioned SWD “National Ability Standards for Social Work Practices in Malaysia (2010)” states that “Taking ethical behavior is a fundamental ability for all practitioners. Respect for others as human beings is a prerequisite for humanitarian services. Respect in the practice of humanitarian services is the basis for ethical practice”. And the following five abilities required to take “ethical behavior” are listed:

1. Ability to respect the morals of others
2. Ability to judge and apply morally, with or without penalties and private interests
3. Ability to identify how to apply one’s own moral beliefs and others’
4. Ability to learn and understand professional code of ethics
5. Ability to apply professional code of ethics in practice

(4) Career development

Malaysia is in the process of formulating a continuing education program with a view to the enactment of the Social Worker Profession Act. Regarding the long-term career development of social service workforce, one of the core strategies of the “SWD Strategic Plan (2021-25)”, “Strengthening the practice of social

²² Hearing with USM (January 21, 2022)

²³ Average of 6 companies as of August 2021

²⁴ https://www.payscale.com/research/MY/Job=Social_Worker/Salary

²⁵ Calculated based on JICA foreign currency conversion rate (February 2022)

²⁶ <https://sg.indeed.com/?from=gnav-title-webapp>

²⁷ Average of 344 companies as of February 2022

²⁸ Calculated based on JICA foreign currency conversion rate (February 2022)

work in welfare services” includes two activities, “Social work vocational development plan” and “advanced certificate of social work”. They are on the process of preparation but specific information on their progress was not obtained by this survey.

(5) Supervision system

Currently, there is no system for supervision regarding the work of social workers. DSW is in the process of preparing a training program to train supervisors for social workers.

(6) Dissemination and awareness raising

MASW is a professional association that aims to improve the status of social workers, but it also carries out a wide range of activities as a leader in public relations and dissemination activities related to social work.

For two days, May 27 and 28, 2021, MASW co-sponsored a symposium with the Malaysian Institute of Social Research and the University of Malaya with the theme of “Social Solidarity and Global Collaboration” to commemorate “International Social Work Day”. Being held online under the COVID-19 pandemic, it was a large-scale event with 203 participants including academic members, students, social work practitioners, government and NGO officials from 11 universities with social work courses [36].

MASW collaborates with multiple universities and holds a number of webinars that can be attended by the general public who are interested in social work. In 2021, they had positive reactions from the participants of webinars on the issues of child protection, mental health and youth due to the increased family stress by prolonged time of “Stay Home” under the pandemic of the COVID-19. In some cases, the webinar encouraged participants to consult with the district social welfare office²⁹.

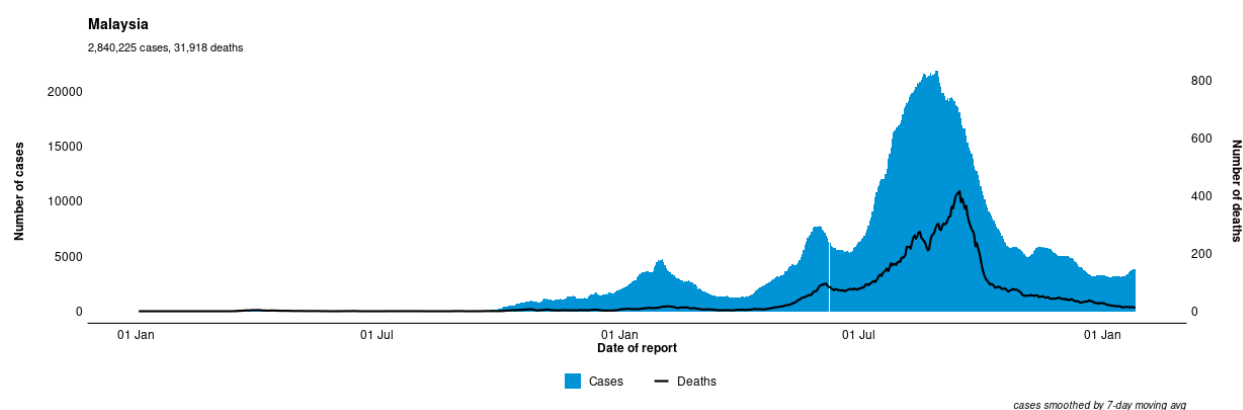
7.3 Impact of COVID-19 on the social welfare sector

7.3.1 Overview of the impact of COVID-19 on the social welfare sector

In Malaysia, the first Malaysian case of COVID-19 infection was confirmed on February 4, 2020, and since then, it has remained at a relatively low level of about 40 new cases per day at most. In March of the same year, the number of new cases of infection exceeded 100 per day. On March 18, 2020, the government issued a Movement Control Order, introducing strict regulations including immigration restrictions and school closures [37]. The Movement Control Order was relaxed after two extensions, but after the rapid spread of infection after April 2021, it was issued again in the metropolitan area and three regions of two states from June 1 to September 10 of the same year. In October 2021, economic activity came back to almost normal with the lifting of the ban on interstate movements as decreased number of newly infectious cases in accordance with the increased vaccination rates. On December 3, the same year, the first infection case with the Omicron variant was confirmed in Malaysia, but the government plans to focus on border measures rather than activity restrictions [38].

²⁹ Hearing with MASW (January 6, 2021)

On a seven-day average as of January 26, 2022, Malaysia reported 3,756 new cases per day. The number of newly infected people is decreasing in comparison with a record high for August 29, 2021 (21,570). The adult vaccination rate (twice) has reached 78.7% of the population (as of January 26, 2010) [39].



Source: [40]

Figure 7-4 Changes in the number of new infections and deaths cases of COVID-19 in Malaysia

Malaysia’s economy slowed down due to strict movement control associated with the pandemic, and the real economic growth rate in 2020 was minus 5.6% from the previous year [41]. The poor in urban areas were particularly severely affected due to unemployment and reduced income from short-term business [42]. SWD provided emergency support such as food distribution to the poor in Kuala Lumpur as more people were in need of living³⁰.

7.3.2 Issues and initiatives in relation to social service workforce

(1) Responding to the needs of social workers

In Malaysia, as a result of increased time of stay home due to long-term movement control, inquiries about problems such as deterioration of mental health and domestic violence among family members are increasing, and social workers are increasingly required to respond. In November 2020, UNICEF compiled a research report on the situation of children and families under the influence of COVID-19 through interviews with social workers. In particular, to strengthen the capacity of social workers, the report made recommendations such as conducting training, reviewing standard operation procedure, and managing the mental health of social workers themselves [42].

In addition, there is an increasing need to instruct social workers on specific case management methods for problem solving under movement control. In June 2020, UNICEF, in collaboration with MASW and Maestral International³¹, developed “Protecting children during COVID-19: Tips for social workers & social welfare practitioners” [43] and they introduced its contents through webinar.

³⁰ Hearing with SWD (January 13, 2021)

³¹ An American NGO working to protect and improve welfare of children, it provides consulting services such as planning and development of various toolkits on behalf of UNICEF and others.

(2) Online utilization for infection control

The SWD has introduced an online application system to meet the needs of various allowance applications during the movement control period and to reduce the risk of infection of social service workforce through face-to-face contact. In addition to providing telephone support to help with online applications, SWD also keeps a face-to-face application window for people who do not have internet access. Under the supervision of the Ministry of Health, they developed 13 guidelines for each field of responsibility³² to prevent infection of employees including social service workforce.

In order to meet the training needs of social workers, MASW started online training, which was previously conducted face-to-face by the entrustment SWD. The online training includes “social work introductory training” for NGO staff and “child protection training” for child protection facility staff. Regarding online training, MASW acknowledged the merit that “participation from remote areas became easier”, but she also pointed out the demerit that “short-term courses of about 1-2 days are becoming more popular but it is not sufficient to be effective, change of participants in the middle of the training became common”³³. In addition, she mentioned the lack of IT specialist as an issue, despite increasing opportunities using online and frequent need of updating of their Facebook and homepages.

7.4 Priority issues for developing and strengthening social service workforce

Malaysia has formulated the “National Ability Standard for Social Work Practice (2010)” that defines the basic competencies required for social service workforce, and the “Social Work Strategy Plan (2018-2020)” that is a development strategy for social service workforce. Therefore, a policy for developing social service workforce with the required competencies to carry out business has already been established. After the enactment of the “Social Worker Profession Act”, which is expected to be enacted within 2022, the Social Work Council, which will be established based on the Act, will issue certification to social service workforce. The current SWD Strategic Plan (2021-25) aims to develop and introduce training modules to support the capacity building of social workers through supervision and in-service training opportunities.

As the country’s movements to strengthen social service workforce are steadily progressing, MASW, a professional association, is involved in training and public relations activities in addition to lobbying for the enactment of the “Social Worker Profession Act”, which has been a long-cherished wish since the organization was established. In particular, their webinars with themes such as mental health are useful for the people who are stressed by stay home under movement control, and they also gave opportunities for people with problems such as DV to know the existence of social workers.

In Malaysia, 11 universities and one college have social work courses, and more than 400 graduates are produced annually. Among them, USM, which established the social work course for the first time in Malaysia, has a reputation for high quality of education, and it accepts many international students from various countries in ASEAN, South Asia and the Middle East in the master’s and doctoral programs. After obtaining a doctoral degree, some graduates became teachers or researchers at universities and research

³² Children, the elderly, people with disabilities, etc.

³³ Hearing with MASW (January 6, 2022)

institutes in their home countries. It is expected to strengthen their capacity to be a hub for fostering international social service workforce.

Through the information gathering in this survey, it was confirmed that the government (SWD), professional associations (MASW), and universities, which are important actors involved in strengthening the capacity of social service workforce, are closely working together in Malaysia. For example, SWD is developing in-service training modules for social workers in collaboration with MASW and universities. Besides that, there are many cases of collaboration of SWD with NGOs and universities in the implementation of one-off seminars and training. In Malaysia, the public and private sectors are in good collaboration for capacity building of social service workforce.

As mentioned above, Malaysia has many advantages for strengthening the capacity of social service workforce, but there are also some issues in expanding the field of social service workforce by making use of these advantages. In addition to the already planned efforts for professionalization of social workers such as establishment of certification system, the issues that are recommended to be prioritized are summarized below.

7.4.1 Strengthening the private sector as place of employment

In Malaysia, the opportunities for human resources development in university education are increasing, but the places of employment of public sector, namely by SWD, are limited. Even if graduates get bachelor's degree in the social work course, some of them find employments in general companies. There are graduates with social work degree who flow out to Singapore, where you can get high wages as social workers. It is necessary to secure employment opportunities in Malaysia.

Currently, services in the social welfare sector are mainly provided by facilities under the SWD, and businesses by the private sector are limited. It is expected that the business will be expanded by the vitality of the private sector, especially in the services for the elderly (day care, residential care and home-visit care, etc.) due to expanding population of elderlies. The SWD also pointed out the need for private sector entry, and at the time of the interview in this survey, there was a comment that "SWD would like to learn the know-how of operating elderly care facilities by the Japanese private sector through training in Japan." It is considered that one of the priorities is to expand employment opportunities for social workers by encouraging the entry of the private sector as a welfare service provider and expanding the number of business establishments.

7.4.2 Sharing knowledge of social service workforce

In Malaysia, it can be said that the cooperation between the government, NGOs and universities involved in the development of social service workforce is extremely close. At present, due to the absence of human resources registration system for social workers, the actual situation of social service workforce is not known, especially for human resources working in the private sector. After the enactment of the Social Worker Profession Act, it is planned to establish a council and introduce a registration system, but it is desirable that the early realization of a human resources network and the promotion of knowledge sharing among social service workforce will be promoted. Collection and sharing examples of case studies and

good practices as common knowledge among all social service workforces in Malaysia, will be extremely useful for strengthening the capacity of social service workforce.

7.4.3 Conducting campaigns related to social work

Due to changes in the living environment under the influence of COVID-19, problems such as DV in the context of increased stress between family members, attract public attention as a social problem. In Malaysia, in spite of efforts by many women's groups working to support victims of DV, some victims are still unaware of the existence of support groups and social workers. The spread of usage of smartphones is changing this situation, making it easier to access information about support groups and allowing anonymous consultations.

The online seminar on mental health introduced by MASW under the influence of COVID-19 is also used as an opportunity to obtain information on social work, but to promote information provision to the general public more intensely, campaigns through the mass media by the government would be effective. By raising awareness about social work and promoting the existence of social service workforce as a familiar consultation desk, it will contribute to raise the needs for social service workforce and expand the opportunities for human resources to play an active role in the society.

Chapter 8 Current Status of Social Service Workforce: the Philippines

8.1 Overview of social welfare sector

8.1.1 Policies, systems and challenges for social welfare

(1) Introduction

In the Republic of the Philippines (hereinafter referred to as the Philippines), social welfare as a basic function of the state was a concept that materialized only after World War II [1]. Looking back at the history of the Philippines before World War II, the forced migration policy during the Spanish colonial period (1571-1898) disrupted the self-sufficient economic system and the mutual aid relationships that had been formed based on it and weakened the function of helping the vulnerable persons in the community. In response to this situation, the catholic church and other organizations conducted charity and relief work for the sick, orphans, and the poor. During the following period of American rule (1899-1945), American social welfare systems and technical theories were introduced. In 1915, the Public Welfare Board was established under the supervision of the ministry in charge of internal affairs, and social welfare was developed as an administrative policy. In addition to the operation of orphanages, the Public Welfare Board was responsible for the organization and coordination of private organizations such as the Red Cross and the Associate Charities¹ [2].

The origin of social workers also dates back to this time. After the war, social workers were hired by the War Relief Office and the Philippine Relief and Trade Rehabilitation Administration under the Department of Health and Public Welfare. It was determined that social workers with no professional education needed to be trained, and a training session was held with United Nations welfare education specialists, attended by officials from the War Relief Office, the Philippine Relief and Trade Rehabilitation Administration, and the Social Welfare Commission. In addition, as part of the United Nations technical assistance program, a special study program in the United States was offered to staff of major social welfare agencies. Upon their return, these officials worked to disseminate new knowledge and skills, helping to promote the professionalization of social work [3]. In 1965, the "Social Work Law" (Republic Act No. 4373) was enacted.

After the post-war reconstruction was over, the Social Welfare Act (Republic Act No. 5416) was enacted in 1965, and the Department of Social Welfare² was born. Later, in 1972, President Marcos declared martial law (which lasted for nine years until it was lifted), and in 1976, the Department of Social Welfare changed its name to the Department of Social Services and Development, aiming at the development-oriented social welfare that began in the 1960s. In 1976, the Social Welfare Administration was renamed the Department of Social Services and Development, aiming to implement the development-oriented social welfare system that began in the 1960s. Development-oriented social welfare is a concept that seeks to find the causes of welfare problems in the structure of society and to solve various problems by removing those

¹ Established in 2017 to channel public fund-raising to charitable institutions and hospitals in the city [79].

² A predecessor organization of the present Department of Social Welfare and Development, but then Department of Social Welfare was not at ministry level.

causes. However, with the prolongation of the Marcos regime's development dictatorship, the distortion of the social structure and the gap between the rich and the poor widened, and the measures taken to deal with welfare problems became more charitable in nature. After the end of the 20-year dictatorship, a new constitution was enacted in 1987, and in the same year, the Social Services and Development Administration was renamed the Department of Social Welfare and Development (DSWD), which is now the lead agency for social welfare administration in the Philippines [2].

In order to promote community-based policies, social welfare in the Philippines today emphasizes partnerships with non-government organizations (NGOs) and community-based organizations, which were adversarial during the Marcos administration [2]. This is in line with Article II, under State Policies, Section 23 of the new 1987 Constitution, which stipulates that "The State shall encourage non-governmental, community-based, or sectoral organizations that promote the welfare of the nation". In addition, under the Local Government Code (Republic Act No. 7160) enacted in 1991, authority was devoluted from the central government to local governments, and in social welfare administration, the direct implementation of programs is now the responsibility of Local Government Units (LGUs) [4]. In the Philippines, the management of the public sector, including social welfare, is mainly carried out through the tripartite cooperation of the government, non-governmental organizations (NGOs), and People's Organizations (POs)³, which has its legal basis in the "Relationship with People's and Non-Governmental Organizations"⁴ as stated in Chapter IV of the Local Government Code [5]. After 30 years since the enactment of the Local Government Code, the Mandanas Ruling⁵ will be implemented in 2022 to further promote decentralization. The DSWD is also planning to transfer more authority to LGUs for the provision of welfare services, making capacity building at the local level an increasingly important issue in the enhancement of social welfare [6].

(2) Social security system and social welfare

In 2007, the government's Social Development Committee defined Social Protection as "*policies and programs that seek to reduce poverty and vulnerability to risks and enhance the social status of and rights of marginalized groups by promoting and protecting livelihoods and employment, protecting against hazards and sudden loss of income, and improving people's capacity to manage risk*". Social Protection mainly consists of (1) Social Welfare, (2) Social Insurance, and (3) Labor Market Interventions [7] [8]. Table 8-1 shows the definitions of each.

³ Peoples' organizations (POs) in the Philippines are equivalent of what in other countries are commonly called community-based organizations. POs are generally composed of disadvantaged individuals and work to advance their members' material or social well-being. POs are grassroots organizations, and their members typically work on a voluntary basis. A group of people, which may be an association, cooperative, federation, or other legal entity, established by the community to undertake collective action to address community concerns and need. NGOs are intermediaries between the State and POs. Many NGOs work to strengthen POs by providing financing, establishing linkages etc. [79] [80].

⁴ POs and NGOs are considered to be a partner and individually or jointly with local government, they can participate in the delivery of certain basic services, operation of public enterprises and economic development projects [25].

⁵ Increasing the budget for LGUs from the national revenues for strong fiscal equalization, and improving transparency and accountability for devolution [6].

Table 8-1 Three pillars of social protection

Three pillars	Definition
(1) Social Welfare	Preventive and developmental interventions that seek to support the minimum basic requirements of the poor, particularly the poorest of the poor, and reduce risks associated with unemployment, resettlement, marginalization, illness, disability, old age and loss of family care.
(2) Social Insurance	Programs that seek to mitigate income risks by pooling resources and spreading risks across time and classes. These are designed in such a way that beneficiaries pay a premium over a given period of time to cover or protect them from loss of income and unemployment as a result of illness, injury, disability, retrenchment, harvest failure, maternity, old age, etc.
(3) Labor Market Interventions	Measures aimed at enhancing employment opportunities and protection of the rights and welfare of workers. Employment enhancing measures include trade policies and skills development and training. Labor protection includes compliance with labor standards such as minimum wages or health and safety in the workplace.

Source: Prepared by the Survey Team with reference to [8] [7] [9]

Social insurance systems such as pensions and medical insurance are administered by government agencies, namely the Social Security System (SSS), the Government Service Insurance System (GSIS), and the Philippine Health Insurance Corporation (PHIC: The Philippine Health Insurance Corporation (PHIC) (commonly known as PhilHealth). Two characteristics of social security in the Philippines are that the SSS aims for universal pension coverage, not only for formal sector employees but also for self-employed farmers and the informal sector, and that it unifies the benefits of both the public and private sectors in its employees' compensation program [4] [10]. For the poor elderly, pensions are provided through DSWD's Social Pension Program for Indigent Senior Citizens. In terms of medical insurance, the Universal Health Care Act of 2019 (Republic Act No. 11223) was enacted, and all citizens are now covered by public medical insurance. There is no system equivalent to Japan's long-term care insurance [11]. An overview of the main social insurance systems (pension and medical insurance) is shown in Table 8-2.

Table 8-2 Social insurance (pension and medical insurance)

Social Insurance	Outline
Pension	<ul style="list-style-type: none"> ● It is overseen by the Social Security Commission, a tripartite body consisting of government, labor, and employer, and is administered by the SSS, which provides pensions to the people. The SSS is an agency under the jurisdiction of the government and provides pension benefits in the form of retirement, death, and disability pensions. Funding comes from social insurance premiums paid by both employers and employees, as well as from SSS's investment activities, loans and other asset management income. Private workers and their employers under the age of 60, domestic helpers with a monthly income of 1,000 pesos or more, and self-employed persons are required to join the SSS. ● In addition to the SSS, there are separate pension schemes such as the GSIS for civil servants, and others for the military, police, and other occupational groups respectively.
Medical Insurance	<ul style="list-style-type: none"> ● It is administered by PhilHealth, an agency affiliated with the Department of Health (DOH). As of 2018, 98% of the population was enrolled in the program. Despite the fact that PhilHealth's efforts have significantly increased the health insurance coverage, the limited number of medical treatments and diseases covered, and the small amounts of benefits have been cited as challenges. ● Under these circumstances, the Universal Health Care Act was passed in February 2019, automatically covering all citizens of the country under the public health care system and allowing the poor and others who do not pay insurance premiums to receive basic medical treatment without any differential billing. As the scope of insurance coverage expands, the government will also work to improve the doctor-patient ratio and hospital functions. As a result of the amendment, the rate of insurance premiums will be raised until 2024 and taxes are expected to increase.

Source: Prepared by the Survey Team with reference to [4] [12] [11] [10]

Looking at the total national budget and sectoral budgets for 2017-2021, social services are the largest sector in the budget. However, social services include education, health, social welfare etc. The amount of money is generally on the increase, especially the budget for social services in 2021, which is 11.6% higher than the previous year due in part to COVID-19 measures. Since data showing the breakdown of Social Protection, Social Welfare, and Social Insurance were not available, Table 8-3 shows the trends in the PhilHealth of the National Health Insurance Program, DSWD budgets and the ranking of DSWD among the top 10 ministries in terms of budget amount for reference.

Table 8-3 Budget trends by sector, PhilHealth, and DSWD (2017-2021) (Unit: billion pesos)

Item	2017	2018	2019	2020	2021
By Sector					
Social Services	1,351.5	1,425.7	1,377.8	1,495.0	1,668.0
Economic Services	922.9	1,153.6	970.3	1,200.0	1,323.1
General Public Services	575.4	655.4	710.9	746.7	747.8
Debt	351.6	370.8	414.1	461.0	560.2
Defense	148.7	161.5	188.6	197.4	206.8
National Budget Total	3,350.1	3,767.0	3,661.7	4,100.1	4,505.9
For reference					
National Health Insurance Program (PhilHealth)	61	54	67.4	71.4	71.4
DSWD	128.4	141.8	177.9	200.5	176.9
Ranking of DSWD among the top 10 ministries in terms of budget amount	5th	6th	5th	4th	6th

Source: Prepared by the Survey Team with reference to [13] [14] [15] [16] [17]

(3) Constitutional status and laws

The Constitution of the Philippines (enacted in 1987) enshrines the public responsibility of the state for the welfare of its citizens in Chapter 13, Article 1 under “Social Justice and Human Rights” and Article 11 under “Health”. While confirming that the state is responsible for the welfare of the people, at the same time, the role of the family is stipulated in Chapter 15 of the Constitution, “The Family”, in meeting the welfare needs of its members. In addition, as already mentioned in 8.1.1 (1), the role of civil society organizations (NGOs, etc.) is clearly stated in Section 23. under State Policies in Article 2 [4] [18].

In the Philippines, the Social Welfare Act (Republic Act No. 5416) was enacted in 1965 and went into effect in 1968. The Act declares that it is the responsibility of the government to provide a comprehensive social welfare program of social welfare services to individuals and groups in need of assistance. It also defines the powers and duties of the Department of Social Welfare (the predecessor of the DSWD) as the agency responsible for developing and implementing the comprehensive social welfare program. Major targets are for those who are handicapped by reason of poverty, youth, physical and mental disability, illness and old age, victims of natural calamities and cultural minorities [19]. In addition to the Social Welfare Act, a list of 55 major laws related to social welfare and development can be found in the DSWD Policy Agenda 2020-2025 [20].

(4) Government policies

In 2015, the government announced the “AmBisyon Natin 2040” (National Long-Term Vision 2040) and formulated the Philippine Development Plan (PDP) 2017-2022 as a medium-term plan to achieve the long-

term vision. In the PDP 2017-2022, the three outcomes of the long-term vision are to be met: (1) Enhancing the social fabric (Malasakit): to build the foundations for a high-trust society by ensuring a clean, efficient, and people-centered governance; guaranteeing swift and fair administration of justice; and increasing awareness of the different cultures and values across Philippine society; (2) Inequality-reducing transformation (Pagbabago): to reduce inequality by expanding economic opportunities, accelerate human capital development, reduce vulnerability, and build safe and secure communities; (3) Increasing potential growth (Patuloy na Pag-unlad): to enhance the factors necessary to accelerate and sustain growth and development by promoting science, technology, and innovation as well as by optimizing the demographic dividend [21].

The DSWD formulated the DSWD Policy Agenda 2020-2025, a blueprint for social welfare and development, in February 2021. It was prepared based on AmBisyon Natin 2040, PDP 2017-2022, responses to COVID-19 and others as outlined in Table 8-4⁶. As for the human resource development, C. Developing Sustained Institutional Capacity for Effecting Social Welfare and Development corresponds to it as follows: (1) Improving the capability of LGUs, which are the entities that implement social welfare services, (2) Setting standards and regulations for social welfare and development agencies, and (3) Professional learning and development for DSWD personnel. (Details will be discussed in 8.2.1 (3))

Table 8-4 Outline of DSWD Policy Agenda 2020 - 2025

Themes	Elements
A. Advancing Social Equity and Social Justice	A1. Protection of Human Rights and Safety Especially of Vulnerable and Marginalized
	A2. Reducing, If No Eradicating, Hunger and Malnutrition
B. Promoting People-Centered Sustainable Development	B1. Social Protection
	B2. Community and Rural Development
C. Developing Sustained Institutional Capacity for Effecting Social Welfare and Development	C1. Technical Assistance and Resource Augmentation for LGUs
	C2. Standard Setting for SWD Agencies (SWDAs) and Civil Society Organizations (CSOs)
	C3. Professional Learning & Development for DSWD Personnel including Memorandum of Agreement Workers
D. Enhancing Governance by Harnessing Whole-of-Government	D1. Research and Data
	D2. Technology
	D3. Resources

Source: Prepared by the Survey Team with reference to [20]

⁶ It is composed of 4 Themes from A to D and 3 Themes of A, B and C are linked to the overall strategic outcomes of AmBisyon Natin 2040 [20].

The main services and programs implemented by DSWD are shown in Table 8-5.

Table 8-5 Major services and programs of DSWD

Services/Programs	Outlines
National Household Targeting System for Poverty Reduction	Database list of poor households eligible for assistance (known as Listahanan)
Protective Service Program	
Alternative Family Care Program	Adoption and foster care
Minors Traveling Abroad	Care for minors traveling abroad alone
Recovery and Reintegration Program for Trafficked Persons	Support for the recovery and reintegration of victims of trafficking in persons
Social Pension Program for Indigent Senior Citizens	Pensions for the poor elderly
Supplementary Feeding Program	Provision of nutritional supplementary food for all children attending day care centers, etc.
Social Amelioration Program	Granting cash subsidy to low-income families including those heavily impacted by COVID-19
Core Programs	
KALAHI-CIDSS ⁷	Grants for projects that promote community-driven developments in local governments selected based on poverty rates and other indicators
Pantawid Pamilyang Pilipino Program (4Ps) ⁸	Conditional Cash Transfer implemented since 2007 with the aim of breaking the intergenerational cycle of poverty.
Sustainable Livelihood Program	Strengthening micro enterprises and employment to enhance community-based capacity
Centers and Institutions	
Regional Rehabilitation Center for Youth	Facility providing rehabilitation care for youth in conflict with the law
Regional Haven for Girls and Women	Facility providing temporary residential care for girls and women
Reception and Study Center for Children	Facility providing temporary residential care for children
Assistance to Individuals in Crisis Situation	
Support for individuals in crisis (social safety nets such as emergency relief, protection, and support in the event of sudden illness or death in the family, disasters, etc.)	

Source: Prepared by the Survey Team with reference to [22] [4] [23] [24] and others

(5) Implementation structure of social welfare

1) Overview

With the enactment of the Local Government Code in 1991, the administrative services of the central government were transferred to the local governments. Since then, DSWD has been transformed from a direct service provider to a technical assistance provider, and the local governments have become the main

⁷ Introduced in 2003 to address poverty, and expanded to Community-Driven Development (CDD) in 2013 to cover the entire country [4].

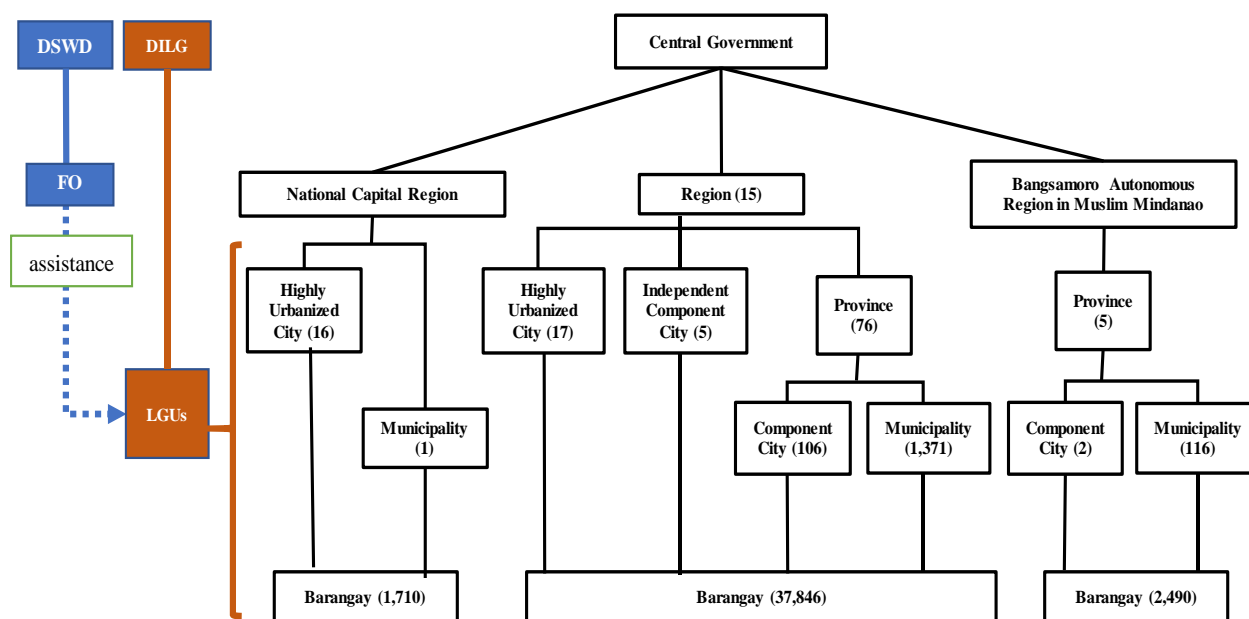
⁸ The program provides cash benefits to poor households with children under the age of 18. Beneficiaries are required to have their children receive regular checkups at health centers, attend school, and expectant and nursing mothers are required to receive maternity checkups [4].

implementers of social welfare services⁹. The DSWD has established a total of 16 Field Offices (FOs) in National Capital Region and 15 other regions to provide assistances to the local governments.

Local government in the Philippines is basically a three-tiered structure consisting of Provinces, Cities and Municipalities, and Barangays. The Department of Interior and Local Government (DILG) is in charge of local government affairs. As of the end of June 2020, there are 81 Provinces, 146 Cities (of which 33 are Highly Urbanized Cities such as Manila and Cebu), 1,488 Municipalities, and 42,046 Barangays.

In all local governments except Barangays, key policies such as taxation, development, construction, social welfare, health etc. have sectoral implementing officers reporting directly to the Local Executives¹⁰. These officers are called Appointive Local Officials¹¹ and include Social Welfare and Development Officers (SWDOs). Assignment of SWDOs is mandatory in Provinces and Cities, and optional in Municipalities. Most Appointive Local Officials are given an office to perform their duties, and the SWDO is responsible for the Provincial/City/Municipal Social Welfare and Development Office (P/C/MSWDO). The DSWD does not have the authority to recruit or supervise the staff of the P/C/MSWDO, as its personnel authority rests with the Local Executives of the local governments [25] [26].

Figure 8-1 shows the relationship between DSWD and LGUs.



Source: Prepared by the Survey Team with reference to [25] and others
Note: There is no DSWD FO in the Bangsamoro Autonomous Region in Muslim Mindanao.

Figure 8-1 Relationship between DSWD and LGUs

⁹ At that time, 70% of the DSWD staff were transferred to local governments (Province/ Highly Urbanized City, City/Municipality) [4].

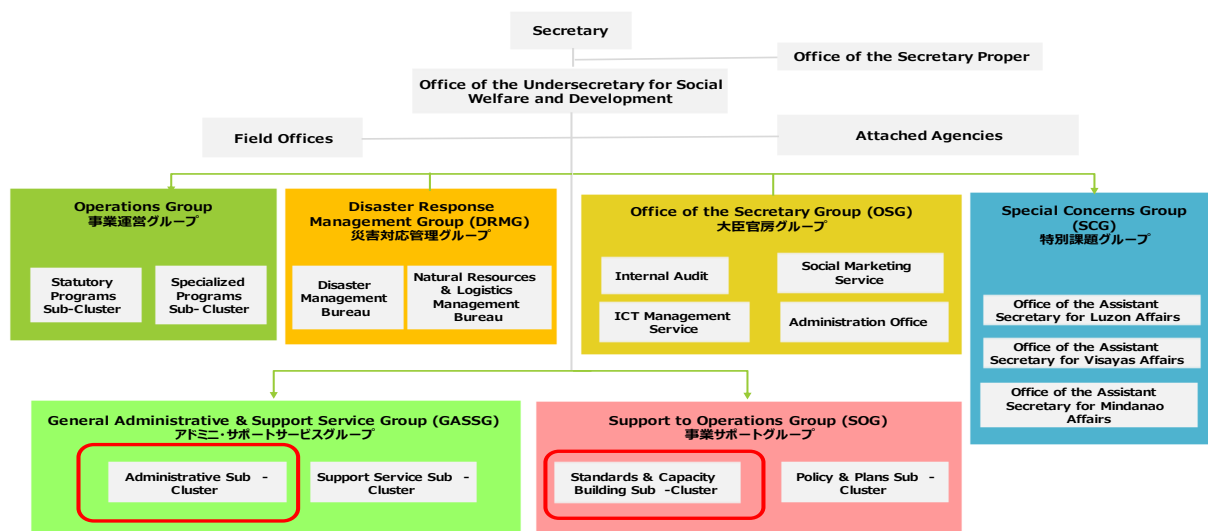
¹⁰ Provincial Governor, City Governor, Municipal Mayor, Punong Barangay

¹¹ A political appointee, equivalent to a department head in a Japanese local government, appointed by the head of the local government with the consent of the respective assembly [25].

2) Department of Social Welfare and Development (DSWD)

DSWD, based on the Social Welfare Act enacted in 1965 as its legal base for creation, envisions all Filipinos free from hunger and poverty, have equal access to opportunities, enabled by a fair, just, and peaceful society. DSWD's mission is to lead in the formulation, implementation, and coordination of social welfare and development policies and programs for and with the poor, vulnerable, and disadvantaged [27]. The DSWD's mandate is to support LGUs, NGOs, other national government agencies, people's organizations (POs), and other members of civil society in effectively implementing programs, projects, and services that will alleviate poverty and empower disadvantaged individuals, families, and communities for an improved quality of life, and to implement statutory and specialized programs which are directly lodged with DSWD and/or not yet devolved to the LGUs [28]. To this end, the DSWD formulates policies for children and youth, women, families and communities, solo parents, older persons and persons with disabilities, and accredits, sets standards and monitors individuals, agencies and organizations engaged in social welfare and development services [29].

As shown in Figure 8-2, the DSWD is composed of 6 groups¹² and 16 Field Offices (FOs). Of these, capability building of DSWD staff and partners (mainly LGUs) is handled by Social Welfare and Institutional Development Bureau, and the Standards Bureau is in charge of accreditation of social welfare and development agencies. Both Bureaus are in the Standards and Capacity Building Sub-Cluster of the Support to Operation Group (SOG). Human Resource Management and Development in the Administrative Sub-Cluster of the General Administrative & Support Service Group (GASSG) is in charge of recruiting, human resource planning and capacitating of DSWD personnel.



Source: Prepared by the Survey Team with reference to [30]

Figure 8-2 DSWD organizational structure

¹² 1) Operations Group (OG), 2) Disaster Response Management Group (DRMG), 3) Support to Operations Group (SOG), 4) General Administrative & Support Service Group (GASSG), 5) Office of the Secretary Group (OSG) and 6) Special Concerns Group (SCG)

3) Provincial, City and Municipal Social Welfare and Development Offices (P/C/MSWDOs) of Local Government Units (LGUs)

As mentioned in the overview section, social welfare services are provided by Provincial, City and Municipal Social Welfare and Development Offices (P/C/MSWDOs), which are headed by Social Welfare and Development Officers (SWDOs) who are responsible for promoting social welfare programs and policies. SWDOs are mandatory in Provinces and Cities, and optional in Municipalities [25] [26].

In 2012, the DSWD formulated guidelines for the social welfare and development service delivery system of LGUs, including monitoring of P/C/MSWDOs by the DSWD and standards for delivery of social welfare and development programs and services. The guidelines also stipulate staffing standards at each level of LGUs, human resource management and development, program management, case management, and helping interventions by target population¹³. The staffing standards are shown in Table 8-6. In the Local Government Code of 1991, one of the eligibility requirements for SWDOs, who are responsible for P/C/MSWDOs, was stated as “a duly licensed social worker or a holder of a college degree preferably in sociology or any other related course” However, in this guideline, it is stipulated that all major posts, including SWDOs, must be a Registered Social Worker (RSW), who has passed the national examination and registered with the PRC’s Professional Regulatory Board for Social Workers [31]. Although assigning RSWs at the Barangay level is not mandatory, some Provinces, Cities, and Municipalities with ample budgets assign RSWs at some Barangays¹⁴.

Table 8-6 P/C/MSWDO staffing standards stipulated by DSWD guidelines

	Staffing Standards: Figures in parentheses indicate numbers	
	Positions who must be a RSW	Others
Province	<ul style="list-style-type: none"> ▪ PSWD Officer (1) ▪ Assistant PSWD Officer (1) ▪ Supervising Social Worker¹⁵ 	<ul style="list-style-type: none"> ▪ Social Welfare Officer II (at least one per every 3,000 households) ▪ Social Welfare Officer I (at least one per 3 municipalities or 3,000 households)
City	<ul style="list-style-type: none"> ▪ CSWD Officer (1) ▪ Assistant CSWD Officer (1) ▪ Supervising Social Worker 	<ul style="list-style-type: none"> ▪ Community Development Officer (at least one per 3 municipalities or 5,000 households) <p><u>The personnel to be employed depending on the programs and services in the operation of each office</u></p> <ul style="list-style-type: none"> ▪ Project Development Officer ▪ Manpower Development Officer ▪ Livelihood Evaluation Officer ▪ Youth Development Officer ▪ Social Welfare Assistant ▪ Social Welfare Aide ▪ Nutritionist ▪ Administrative Assistant I-III, Driver, Administrative Aide etc.
Municipality	<u>1st & 2nd Class</u> <ul style="list-style-type: none"> ▪ MSWD Officer (1) ▪ Assistant MSWD Officer (1) ▪ Supervising Social Worker 	
	<u>3rd & 4th Class</u> <ul style="list-style-type: none"> ▪ MSWD Officer (1) ▪ Supervising Social Worker 	
	<u>5th & 6th Class</u> <ul style="list-style-type: none"> ▪ MSWD Officer (1) 	

Source: Prepared by the Survey Team with reference to [31]

¹³ Child and youth, women, persons with disabilities, senior citizens, family and community, disaster and emergency

¹⁴ Based on the interview with DSWD (24 January 2022).

¹⁵ Under P/C/MSWD Officer responsible for overall Social Welfare and Development Office and Assistant P/C/MSWD- Officer, 1 Supervising Social Worker is to be assigned as head in every district or a specified geographical coverage of SWDO, but with subordinates not exceeding 15 personnel.

4) Private agencies

In the Philippines, in addition to public agencies, private Social Welfare Development Agencies (SWDAs) are licensed by the DSWD to conduct social welfare services. Private SWDAs are non-stock, non-profit organizations that either directly engages in social welfare and development programs and services, whether center based and/or community based, using social work intervention to children, youth, families, women, elderly, persons with disabilities, the poor etc., or indirectly provide programs and services through provision of funds, capacitating staff of other agencies etc. One of the requirements for licensing to employ a sufficient number of qualified personnel and RSWs to supervise and take charge of social welfare services and social work [32]. As of March 2021, a total of more than 1,300 agencies have been registered, licensed or accredited, which include, for example, organizations that provide center-based services such as children's nursing home, temporary protection shelters for children, women, elderly etc. and community-based services such as education, supplementary feeding, psychological counseling, livelihood improvement programs etc. [33].

8.1.2 Situations in the areas related to social service workforce

In addition to children and families, persons with disabilities, and the elderly, disasters, overseas migration, and trafficking in persons are discussed as important areas of social work in the Philippines.

(1) Children and families

In the Philippines, the government and United Nations Children's Fund (UNICEF) took the lead in conducting the first baseline survey on Violence against Children in 2015. The results showed a high incidence of physical, psychological and sexual abuse at 64.2 %, 61.5 % and 22.4 % respectively¹⁶. It also noted that 31.4% of children were living below the poverty line in 2015, and that street children, children with disabilities, and others were deprived of access to basic services, including education [34].

The Child and Youth Welfare Code (Presidential Decree No. 603), enacted in 1974, stipulates the rights, responsibilities and opportunities of children to be guaranteed. In addition, the 1987 Constitution clearly states the role of the state in promoting the growth, survival, protection, and development of children and provides for the protection of children's rights. Children's homes licensed by the DSWD are required to have professionally trained social workers, facility supervisors, house parents, cooks, and security guards, as well as the number of staff and the employment of psychologists, nurses, and visiting doctors according to the age and needs of the children. The operation of the children's homes is financed largely by international NGOs and private companies, and no financial measures are taken by the government. On the other hand, there are 45 children's homes in the country directly operated and managed by DSWD, but the number of children placed in these homes has exceeded the capacity, which has been a problem. In addition, the DSWD takes the lead in the approval process of adoption applications, while foster care applications are received through the DSWD, intermediary agencies, and LGUs, and the assigned social workers conduct home visits and submit reports to the Foster Care Committee [4].

As for the judicial welfare of juvenile delinquents, Republic Act No. 8369 of 1997 established the family court, and the Juvenile Justice and Welfare Act (Republic Act No. 9344) was enacted in 2006. The law

¹⁶ Target is from 13 to 24 years old.

stipulates that child under 15 years of age shall not be treated as criminals, but shall receive support programs from SWDOs of LGUs, who are social workers. In 2013, the law was amended to include provisions for the establishment of rehabilitation facilities for juvenile delinquents including the establishment of the Intensive Juvenile Intervention and Support Center, where interdisciplinary support teams consisting of social workers, psychologists, mental health professionals, doctors, and educational counselors work with children and their families based on individualized support plans [4].

(2) Persons with disabilities

According to the 2010 census, the population of persons with disabilities was 1,442,586, or 1.57% of the total population. Compared to the 2000 census (1.23%), the population of persons with disabilities has increased, but the actual number is said to be higher than official statistics¹⁷. The Philippines is known to be one of the developing countries with relatively early progress in disability legislation [35]. Laws clarifying the rights of persons with disabilities have been developed, such as the Vocational Rehabilitation Act of 1954 (Republic Act No. 1179), the Accessibility Law of 1982 (Batas Pambansa Bilang 344), and the Magna Carta for Disabled Person 1992 (Republic Act No. 7277). In September 2007, the country signed the Convention on the Rights of Persons with Disabilities, which was ratified in April 2008. The 2010 amendment to the Magna Carta for Disabled Person provides for the establishment of institutions at the Provincial, City and Municipal levels to guarantee the provision of policies and services for persons with disabilities [4].

The Magna Carta for Disabled Person recognizes equal opportunity as a right and specifies the legal employment rate for persons with disabilities. In addition, the Department of Labor and Employment (DOLE) has developed programs for vocational training and employment, and packages to support persons with disabilities. DSWD has established vocational training centers, rehabilitation workshops, and public employment security agencies in urban areas for providing employment support [4]. However, about 50% of people with disabilities living in urban areas are unemployed, and the employment situation in rural areas is even worse, and low wages are an issue. As for children with disabilities, although the Magna Carta stipulates the right to education, there are challenges in accessing education and detecting disabilities in the early stages [36].

(3) Elderly persons

The Philippines had a population of over 100 million in 2015, with a young average age of 24, and a total fertility rate of 2.96, although it has been declining over the years. According to the Philippine Statistics Authority (PSA), the rate of citizens aged 60 years or over in the population was 5.59% in 2000, 6.1% in 2005, 6.7% in 2010, and 7.5% in 2015 [4] [37].

Expanded Senior Citizens Act of 2003 (Republic Act No. 9257) enacted in 2004 provides senior citizens aged 60 and above with 20% discounts on public transportation, accommodations, and medicines, and tax credits as well as free medical services. Expanded Senior Citizens Act of 2010 (Republic Act No. 9994)

¹⁷ People with disabilities who receive services from the government are often poor, and people with disabilities who do not need government services are not necessarily registered as disabled, so disability statistics are not accurate [4]. WHO estimates 5-10%, of which two-thirds live in rural areas [12].

provides for the expansion of services and requires establishment of the Office for Senior Citizens Affairs in all cities and municipalities. The public welfare of the elderly as the government special support includes, among other social services, Social Pension for Indigent Senior Citizens¹⁸ and health insurance coverage as a result of the universal health insurance system [4].

Senior Citizen Centers have been established at City and Municipal levels and staffed with social workers who are capable of forming good relationships with the elderly members of the community. For the operation of the centers, social workers are supposed to collaborate with municipal-level councils for the elderly, liaison groups for the elderly, NGOs and community volunteers who can train health care counseling volunteers and self-help groups. As of June 2019, 546 such centers have been opened across the country. On the other hand, free residential facilities for the senior citizens without relatives have been established, but due to limited numbers, the care is provided by private facilities licensed by the DSWD. The Expanded Senior Citizens Act provides for Incentives for foster care for the establishment of residential and group homes for the needy elderly who are neglected or homeless, such as tax incentives and subsidies for utilities [4].

(4) Disasters

The Philippines is one of the countries that is frequently hit by disasters: earthquakes, volcanic eruptions, droughts, floods, and typhoons. In particular, in November 2013, Typhoon Yolanda, one of the largest typhoons ever recorded, caused significant damage. Although the social service system in the Philippines has been established for many decades, much of the recent development in the field has been influenced by responses to the aftermath of Typhoon Yolanda (Haiyan) [38]. Presidential Decree No. 10121 (2010), Disaster Risk Reduction and Management Act, emphasizes the importance of disaster-related actors (local governments, CSOs, and communities) based on the idea of decentralization and focuses on an integrated approach to enhance human and social resilience to hazards. The Act's driving actors include central and local governments, civil society (CSOs, cooperatives, community-based organizations, NGOs, church-related organizations, schools, etc.) businesses, and volunteers. In times of disaster, citizens living in communities are both the people most likely to be affected and the people who will be responsible for providing assistance during disasters [4].

(5) Overseas migration

The welfare of overseas migrant workers is an area that is unique to the Philippines, where 10 million people, or about 10 % of the population, have migrated abroad. In recent years, about 2 million people leave the country every year for temporary jobs, largely in the Middle East and Asia, and then move to the United States and Canada, mostly for permanent residence. Annual overseas remittances account for about 10% of the GDP and have a significant impact on society and economy of the Philippines [39].

The Philippine Overseas Employment Agency (POEA) is responsible for the employment of OFWs (Overseas Filipino Workers), while the Overseas Workers Welfare Administration (OWWA) is responsible

¹⁸ Not a contributory pension system, but a system that provides stipends to indigent senior citizens who meet certain conditions

for their welfare. The National Integration Center for OFWs also provides reintegration assistance to returning Filipino migrant workers [4].

(6) Trafficking in persons

According to the U.S. Department of State's 2021 Trafficking in Persons Report: Philippines, the Philippines is ranked as Tier 1 with the best efforts. According to the report, the DSWD is providing various supports to 1,205 trafficking victims (849 of whom are women, 75% are adults). In addition to psychological support and trauma-informed assistance, DSWD provides case management, temporary shelter, livelihood assistance, education, and training, etc. The DSWD refers the survivors to the SWDOs in their community for follow up services, but lack of the personnel and resources for individualized case follow up including facilities and programs has been often pointed out. In addition, DSWD social workers are deployed in Philippine diplomatic missions in Hong Kong, Kuwait, Malaysia, Qatar, Saudi Arabia, South Korea, and the United Arab Emirates¹⁹ [40].

8.2 Current status of social service workforce development

8.2.1 Planning

(1) Laws, policies and plans

The main laws regarding social work as a profession are the Social Work Law enacted in 1965 and Magna Carta for Public Social Workers enacted in 2007. In addition, there are other laws and guidelines related to the Bachelor of Science in Social Work (BSSW) program as well as to the profession. The main ones are summarized in Table 8-7, and their overviews and current movements for revisions of laws are explained below.

For reference, there are three categories of social service workforce in ASEAN: (1) social work profession/social workers, (2) para professional/para social workers, and (3) volunteer. In the Philippines, (1) social work profession/social workers, i.e., Registered Social Workers (RSW) system, has been established under the Social Work Law. All laws related to social workers are for RSWs, and the existence of laws related to other social service workforce such as (2) and (3) could not be confirmed.

Table 8-7 Laws and guidelines for development of social workers

Law and Title		Description/Objective	Year
Major Laws related to Social Worker			
Republic Act No. 4373	Social Work Law	Defining social worker etc., provisions for licensure examinations	1965
Republic Act No. 5175	Amending Social Work Law	(Amending RA4373 on minor corrections)	1967 (effective in 1968)
Republic Act No. 10847	Amending Social Work Law	Providing for Continuing Professional Development (CPD) etc.	2016
Republic Act No. 9433	Magna Carta for Public Social Workers	Promote the social and economic well-being of public social workers, their working conditions etc.	2007

¹⁹ OFWs are included in the support.

Law and Title		Description/Objective	Year
Policies, Standards and Guidelines for the Bachelor of Science in Social Work Program (BSSW)			
Commission on Higher Education (CHED) Memorandum Order No. 39	Policies, Standards and Guidelines for BSSW program	Policies, national standards curriculum for BSSW etc.	2017
Laws and guidelines on professionals			
Republic Act No. 10912	Continuing Professional Development (CPD) Act	Mandating CPD for all regulated professions	2016
Professional Regulation Commission (PRC) Professional Regulatory Board for Social Workers, Resolution No. 04	Operational guidelines on the implementation of CPD Act for social workers	Providing for CPD for social workers	2018

Source: Prepared by the Survey Team with reference to [20] [41] [42] [43] [44] [45] [46] [47]

● **Social Work Law (Republic Act No. 4373; Republic Act No. 5175; Republic Act No. 10847)**

In the Philippines, the Social Work Law (Republic Act No. 4373) was passed in 1965 (minor amendment No. 5175 was passed in 1967 and went into effect in 1968). In this law, terms of Social Work, Social Worker, and Social Work Agency were defined, and the organization of the Board of Examiners for Social Workers, examination and registration of social Workers etc. were stipulated. By this Law, the possession of BSSW was made a condition for eligibility to take the national examination. It is also stipulated that no person shall practice or be appointed as a social worker or to any position calling for social worker in any social work agency without holding a valid certificate of registration as a social worker [48] [41] [42]. In other words, in the Philippines, a “social worker” is a qualified RSW and is a “professional license” (i.e., a license without which one may not perform the practice (act)). Furthermore, in response to the passage of the Continuing Professional Development (CPD) Act (2016), which covers all professionals, Social Work Law was amended in 2016 to include additional provisions for CPD and others.

Table 8-8 provides an outline of Social Work Law and Table 8-9 provides definitions of terms.

Table 8-8 Outline of Social Work Law

<p>Article I: Definition of Terms</p> <ul style="list-style-type: none"> • Definition of Social Work, Social Worker, Social Work Agency <p>Article II: Organization of the Board of Examiners for Social Workers</p> <ul style="list-style-type: none"> • Name, composition (5 members), qualification, function and duties, terms of office of the Board • [added in 2016] Professional Regulatory Board for Social Workers under the administrative control and supervision of PRC <p>Article III: Examination and Registration of Social Workers</p> <ul style="list-style-type: none"> • Practice of Social Work and Appointment as Social Workers: “No person shall practice or be appointed as a social worker or to any position calling for social worker in any social work agency without holding a valid certificate of registration as a social worker issued by the Board”. • Examination, Registration etc. • [added in 2016] Mandating earning CPD units <p>Article IV: Registration of Social Work Agencies</p> <ul style="list-style-type: none"> • Provisions for registration <p>Article V: Sundry Provisions Relative to the Practice of Social Work</p> <ul style="list-style-type: none"> • Penal Provisions

Source: Prepared by the Survey Team with reference to [41] [43]

Table 8-9 Definitions of social work, social worker and a social work agency

Terms	Definition
Social Work	Social work is the profession which is primarily concerned with organized social service activity aimed to facilitate and strengthen basic social relationships and the mutual adjustment between individuals and their social environment for the good of the individual and of society by the use of social work methods.
Social Worker	A social worker is a practitioner who by accepted academic training and social work professional experience possesses the skill to achieve the objectives as defined and set by the social work profession, through the use of the basic methods and techniques of social work (case work, group work, and community organization) which are designed to enable individuals, groups and communities to meet their needs and to solve the problems of adjustment to a hanging pattern of society and, through coordinated action, to improve economic and social conditions, and is connected with an organized social work agency which is supported partially or wholly from government or community solicited funds.
A social work agency	A social work agency is a person, corporation or organization, private or governmental, that engages mainly and generally, or represents itself to engage in social welfare work, whether case work, group work, or community work, and obtains its finances, either totally or in part, from any agency or instrumentality of the government and/or from the community by direct or indirect solicitations and/or fund drives, and/or private endowment.

Source: Prepared by the Survey Team with reference to [41]

● **Magna Carta for Public Social Workers (Republic Act No. 9433)**

Magna Carta for Public Social Workers, enacted in 2007 (Republic Act No. 9433), sets forth the requirements, career system, working standards, compensation, rights, and human resource development for social workers employed in the government service. It also stipulates that all government social work agencies and institutions shall be headed by RSW, and priority shall be given to RSWs in filling up social work positions [44].

Social Work Law enacted in 1965 clearly stated that it was a professional license (i.e., a license without which one may not perform the practice (act)), but this Magna Carta more specifically established the priority placement of qualified persons, labor requirements, etc. With this Magna Carta, the linkage between the qualification system and the recruitment of practitioners in public institutions and the stabilization of the working environment for social workers were a great step forward for social workers to be recognized as a profession, to improve their basis for activities, and to raise their status. However, how to realize the contents stipulated in Magna Carta for Public Social Workers is the next challenge [5]. In addition, a bill to further improve the treatment of social workers in public institutions has recently been proposed²⁰.

● **Commission on Higher Education (CHED) Memorandum Order No. 39**

The policies, standards, and guidelines for BSSW program are prescribed by CHED Memorandum Order (CMO) No. 39 of 2017. According to the Memorandum Order, social work education in the undergraduate level shall be geared towards the preparation of students for generalist social work, and it requires the acquisition and application of beginning level of knowledge, attitudes, values and skills in enhancing the social functioning of individuals, families, groups, and communities, linking people with needed resources, improving the operation of social service delivery networks, and promoting social justice through organizing and advocacy. There are also provisions on national standard curriculum and faculty

²⁰ Based on the interview with PRC (28 December 2021)

qualifications for BSSW, which will be discussed in detail in 8.2.2 (1). The same guidelines list the expected professions, careers and specific occupations for BSSW graduates as in Table 8-10 [45].

Table 8-10 Expected professions/ careers and specific occupations BSSW graduates

Professions/ careers	<ul style="list-style-type: none"> ▪ Social work graduates work in the private, public or business sectors, addressing social needs, issues and concerns of various sectors such as children, children/youth in conflict with the law, peasants, workers, women, urban poor, migrants, indigenous peoples and others ▪ Among the social work fields of practice are child, youth and family welfare, health and rehabilitation, mental health, corrections and justice (e.g., courts, community diversion²¹ and prevention programs for children/youth in conflict with the law), gerontology, disaster response and management, occupational health and safety, forensic social work, community development, human resource development, education, and international social welfare. 	
Specific occupations	<ul style="list-style-type: none"> ▪ Case manager ▪ Groupworker ▪ Social work counsellor ▪ Community organizer ▪ Researcher in social welfare agencies ▪ Policy legislative advocacy officer ▪ Social welfare and development officer in LGUs ▪ Social agency manager ▪ Officer for program/project development and management 	<ul style="list-style-type: none"> ▪ Trainor ▪ Teacher ▪ Social worker with specific client populations with special needs in and in special circumstances (the elderly, people with disabilities, people with HIV-AIDS, youth in conflict with the law, alcohol and substance abusers, survivors of human rights violations as well as sexual and physical abuse) ▪ International social worker, i.e., professional practice in regional and international settings

Source: Prepared by the Survey Team with reference to [45]

● **CPD Act (Republic Act No. 10912) and operational guidelines on the implementation of CPD Act for social workers**

The CPD Act (Republic Act No. 10912), which provides for Continuing Professional Development for all regulated professions, was passed in 2016. In line with this, Social Work Law was also amended in the same year to add provisions on CPD, and the PRC's Board of Social Work established implementation guidelines for social workers for the CPD Act in 2018 [47]. The registration renewal period for RSWs was set at three years, with the requirement of earning 45 CPD credits through CPD programs for renewal. Details of the guidelines are described in section 8.2.2 (2).

● **Movement of law revision**

Professional Regulatory Board for Social Workers of the PRC is currently conducting a review for the revision of Social Work Law and other related laws. Participating stakeholders include DSWD, Civil Service Commission (CSC), professional associations, and academics. The main points of the review are (1) to ensure consistency with the new global definition of social worker adopted in 2014, (2) to add provisions for career progression and specialization programs as well as career paths²², and (3) to approve SWDAs, which are under the jurisdiction of DSWD. After preparing the drafts for revisions, laws are expected to be amended in the next one to two years²³.

²¹ A process of diverting to the community for rehabilitation and resolving without going through the formal justice procedures

²² Provisions regarding salaries and positions will probably be added (Based on the interview with PRC on 28 December 2021)

²³ Based on the interviews with PRC (18 and 20 December 2021)

● **Human resource development policies and plans**

The Survey Team did not confirm comprehensive human resource development plan or manpower plan (including gap analysis between supply and demand) for either social workers/RSW or social service workforce including others like para professionals, and for universities to produce human resources on social work; it seems that there is no such plan in place²⁴. It is said that human resource development basically depends on the plans and policies of each organization that employs social workers²⁵.

According to DSWD, in preparation for the Mandanas Ruling to be implemented on a full scale starting in 2022, a transition plan for decentralization was prepared and the needs for human resources including LGUs were analyzed. Although details were not available, it was reported that an increase in the number of staff was basically proposed²⁶. The capacity of LGUs has been an issue and their challenges have been raised for long. Social workers assigned to City and Municipal levels are engaged in the implementation and monitoring of various welfare programs and must also conduct home visits. It has been pointed out that the number of Barangays a single person is to cover is large and the workload is heavy particularly in remote areas [49]. In addition, as described later in 8.2.1 (3) 3), the DSWD provides technical assistance to LGUs to improve their quality as an important issue.

(2) Definitions and regulations

In the Philippines, social worker is clearly defined in Social Work Law as shown in Table 8-11.

Table 8-11 Definition of social worker

<p><u>Definition by Social Work Law</u> A social worker is a practitioner who by accepted academic training and social work professional experience possesses the skill to achieve the objectives as defined and set by the social work profession, through the use of the basic methods and techniques of social work (case work, group work, and community organization) which are designed to enable individuals, groups and communities to meet their needs and to solve the problems of adjustment to a hanging pattern of society and, through coordinated action, to improve economic and social conditions, and is connected with an organized social work agency which is supported partially or wholly from government or community solicited funds.</p>
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Source: [41]

On the other hand, it was not possible to identify any established classifications or definitions for other social service workforce such as para professionals and volunteers. What emerged from the interviews with DSWD staff, PRC's Professional Regulatory Board for Social Workers, professional associations, universities, and NGO is as follows.

As for para professional, it is associated with people with expertise other than social work and not directly related to social work; for example, accountants and management in DSWD, and with people like psychologists, counselors, and those with related degrees in social work and community development, who work with RSWs. The job title "Social Welfare Assistant" is also used as a person who assists in social work under the guidance and supervision of the RSW²⁷. For example, DSWD's social work-related posts

²⁴ According to the interview with NASWEI (11 January 2022), such plan is not available.

²⁵ Based on the interview with PRC (18 December 2021)

²⁶ Based on the interview with DSWD (24 January 2022)

²⁷ Based on the interviews with SOS Children's Villages Philippines (18 January 2022) and PWU (29 January 2022)

include Social Welfare Assistant and Social Welfare Officer²⁸, but the former does not require RSW certification [50].

In any case, in the Philippines, “social worker” is a job-exclusive qualification, and the RSW has the authority to prepare and sign the official documents. Therefore, it can be said that para professionals are the general term for those who assist RSWs, or professionals who work in teams with RSWs, but both the terms and definitions are not widely established.

As for volunteers, there are cases where professionals, including RSWs organized by the National Association for Social Work Education, Inc. (NASWEI) as explained latter in 8.2.3 (2), conduct volunteer activities separately from their work, while in other cases, the general public contributes as volunteers. In the Philippines, there is Bayanihang (Mutual Help) Bayan Program/Volunteer Program for Government Service. Based on the spirit of bayanihang (mutual help), the program provides opportunities for private individuals and groups who wish to volunteer in the implementation of government development programs and projects. Types of volunteer assistance include (1) Skills-based (volunteers provide assistance based on their professional or technical expertise), (2) Interest-based (volunteers provide assistance to projects and activities that are aligned with their personal interest or causes, for example, visiting orphanages, tree planting, fire brigade, house build, feeding program, etc.), (3) Resource-based (volunteers contribute financial and other material resources instead of or in addition to volunteer time, for example, funding community projects, donations of clothing, food, books, construction materials, etc.) Modalities of volunteer work are (1) One-shot impact scheme (interested volunteers are mobilized for a one-day to one-week volunteer work such as clean-up drives, distribution of relief goods, involvement in election watch), (2) Short-term scheme (volunteer work that continuously runs for less than one year, for example, social service projects such as medical missions, community mapping, project evaluation), (3) Long-term scheme (continuous project involvement that runs for more than one year) [51]. The Program’s overseer is the Philippine National Volunteer Service Coordinating Agency (PNVSCA), which is the government agency mandated to promote and coordinate volunteer programs and services in the Philippines. NVSCA is one of the attached agencies under the administrative supervision of the National Economic and Development Authority (NEDA), and closely works with other government agencies, NGOs, the academe, the corporate group, the media and other partners in converging and linking the different volunteering efforts and resources so that they are aligned with national priorities and assist especially the marginalized sectors and communities [52].

(3) Ministries and government bodies related to social service workforce

1) Professional Regulation Commission (PRC)

In the Philippines, Professional Regulation Commission (PRC) has been strengthening the capacity of professionals through conducting and administering of granting professional licenses. The PRC currently serves 45 various regulated professions, and social worker is one of them [53]. Professional Regulatory Board for Social Workers is formed and oversees licensure examination, CPD system etc. The Board also

²⁸ Among Social Work Officer I to V, IV is supervisor level and V is Division Chief level (Based on the interview with PWU on 29 January 2022)

reviews various laws and regulations related to social work and revises Code of Ethics for social workers, and monitors universities offering BSSW programs as a member of CHED's Technical Committee²⁹. CPD Council has been established for social workers, and the members include DSWD, experts, professional organizations.

2) Social Work Management and Consultative Council

Magna Carta for Public Social Workers (Republic Act No. 9433) enacted in 2007 stipulates that Social Work Management and Consultative Council shall be created to prepare a uniform career and personnel development plan applicable to public social workers. Such career and personnel development plan shall include provisions on merit promotion, performance evaluation, in-service training grants, job rotation, incentive awards system and other policies. The Council is composed of representatives of the DSWD, CSC, DILG, DOLE, Philippine Association of Social Workers, Inc. (PASWI), Association of Provincial/City and Municipal Social Welfare and Development Officer of the Philippines, Inc. (APCMSWDOPI), the League of Provinces, League of Cities and League of Municipalities. DSWD shall be the head of the Council [44].

3) Department of Social Welfare and Development (DSWD)

Capability building by DSWD mainly targets DSWD staff, LUGs and social welfare and development agencies [54]. In Theme C: Developing Sustained Institutional Capacity for Effecting SWD of Policy Agenda 2020-2025, the following are addressed: (1) technical assistance and resource augmentation for LGUs; (2) standard setting for SWDAs and CSOs which give social welfare and development services as a direct support by social casework and social group work, and through community organization³⁰ to communities, for improving service quality; (3) professional learning and development for DSWD staff such as capacity building on social work, career development pathways etc. [20].

With regard to Technical Assistance to LGUs, the Department conducts assessments of needs and capacities of SWD offices every three years, and assistance plan is formulated and implemented. Technical Assistance aims to enhance the capability of LGUs for the effective implementation of social welfare and development programs, projects and services, through a range of activities such as training, training of trainers, orientation on new policies, demonstration session on cases, workshop, forums, consultation/sharing session, conference, coaching and mentoring [55]. Strengthening the capacity of DSWD staff, considering their diverse educational background and previous work, includes technical skills, particularly social work, public policy, data analytic, as well as learning and improving soft skills such as communication, and sample titles of training (online courses) are listed. However, it is mentioned that policies have to be in place regarding systematic staff capacity development including the specific annual training hours, development of assessment tools, practices on the use of e-learning modalities, and more effective career development pathways, monitoring and policies on succession planning [20]. In addition, DSWD has organized the Social Welfare and Development Learning Network (SWD L-Net) in Metro Manila and the

²⁹ Members are composed of PRC, representatives of professional associations, industry, academe etc. (Based on the interview with PRC on 20 December 2021).

³⁰ Community Organization is one of the social work assistance techniques along with Case Work and Group Work.

15 FOs in the Regions for a knowledge-sharing network of stakeholders in social welfare and development³¹. The participants include government, academics, NGOs, etc. [56]. As part of the capacity building of RSWs in the field of child protection, the “Post Graduate Diploma on Child Protection cum Case Management for DSWD Social Workers” was launched with the support of UNICEF at Miriam College. It is an online course from January to July 2022, with full scholarship funded by UNICEF. 47 RSWs working in DSWD Central Office and FOs are participating in the course [57] [58].

(4) Budget for development of social service workforce

Budget information for development of social service workforce was not available. Of the total budget for operations of DSWD, the budgets for technical assistance and resource augmentation for LGUs are shown in Table 8-12.

Table 8-12 DSWD’s operation budget summary (Units: billion pesos)

Item	2020	2021
Total DSWD’s operation budget	156.56	169.15
Social Welfare and Development Technical Assistance and Resource Augmentation Program	1.02	1.08
Share in the total operation budget	0.65%	0.64%

Source: Prepared by the Survey Team with reference to [59]

According to the PRC and DSWD, in general, after employed as RSWs, the employing organizations provide training opportunities and support for participation fees in the framework of staff development³².

(5) Certification / Licensing

In the Philippines, the qualification system for social worker is stipulated in the Social Work Law, and the PRC's Professional Regulatory Board for Social Works oversees the examination, registration, and renewal. After passing the Licensure Examination for Social Workers, which is held basically once a year, one is registered and officially becomes a Registered Social Worker (RSW). Table 8-13 shows the qualification of applicants, examination subjects and passing criteria.

Table 8-13 Outline of licensure examination for social worker

Item	Outline
Qualification of applicants	<ul style="list-style-type: none"> • Citizen of the Philippines, at least 18 years of age • Bachelor’s degree or master’s degree or its equivalent in social work • A minimum period of 1,000 case hours of practical training
Examination subjects and passing criteria	<ul style="list-style-type: none"> • 5 subjects (20 % each, 100% in total, all multiple choices) <ol style="list-style-type: none"> 1) Human Behavior and Social Environment 2) Social Welfare Policies, Programs, and Services 3) Social Work Practice I: with field instruction I, 4) Social Work Practice II: with field instruction II 5) Social Work Practice III: with field instruction II • Passing criteria: general rating of at least 70 % (with no rating below 50 %)

Source: Prepared by the Survey Team with reference to [41] [60]

Note: Additional requirements for master's degree only

³¹ Based on the interview with DSWD (25 January 2022)

³² Based on the interviews with PRC (18 December 2021) and DSWD (24 January 2022)

In the case of a master's degree in social work without a BSSW, there is a requirement to take additional courses in order to be eligible to take the examination³³. Likewise, BSSW graduates under the old curriculum are required to take additional courses in accordance with the current curriculum to sit for examination³⁴.

Table 8-14 shows the trends in the number of applicants, the number of successful applicants, and the passing rates for the licensure examinations over the past 10 years (2011 to 2021). The trends confirm that the passing rate has been gradually declining, from around 60% to below 50% in 2019 and to the 30% level in 2021. While the pandemic has had an impact, Professional Regulatory Board for Social Workers believes that it is necessary to investigate the factors behind the decline, as it has been on the decline even before the pandemic. The increase in the number of universities offering BSSW programs or their capacity, as well as the quality of the institutions are likely to be the reasons behind the decline. There are schools with low exam passing rates (low performing schools) have problems with faculties and facilities as observed through monitoring by PRC and CHED. Although many courses have been opened due to the increasing demand for social workers, such as the DSWD's 4Ps (conditional cash transfer program for poor households), some of the schools did not fully meet the CHED standards³⁵.

Compared to earlier years, the higher number of applicants of 5,997 in 2017 is due to the fact that the exam was not conducted in the previous year and some of those who were supposed to take exams in the previous year are included. The higher number of applicants in 2018 and 2019, also more than 5,000, is believed to be due to the increase in the number of university enrolments amid the growing demand for DSWD government employment. It should be noted that the number of applicants for the February and August 2021 examinations is low, partly due to COVID-19³⁶.

Table 8-14 Trends of licensure examination results (2011-2021)

Year	No. of applicants	No. of successful applicants	Passing rates
2011	1255	804	64.1%
2012	1429	893	62.5%
2013	1820	1015	55.6%
2014	2031	1110	54.7%
2015	2654	1817	68.5%
2016	Not implemented		
2017	5997	3951	65.9%
2018	5020	2508	50.0%
2019	5880	2723	46.3%
2020	Postpones to Feb. 2021 due to pandemic		
2021 Feb.	1473	495	33.6%
2021 Aug.	1621	612	37.8%

Source: Prepared by the Survey Team with reference to the interview with PRC (20 December 2021)

Note: Not implemented in 2016 due to vacancy in the Board members

³³ Based on the interview with UP (17 December 2021)

³⁴ Based on the interview with PRC (20 December 2021)

³⁵ Based on the interview with PRC (20 December 2021)

³⁶ Based on the interview with PRC (20 December 2021)

(6) Data on human resources

A comprehensive database of social service workforce (social workers/RSWs, para professionals, volunteers, etc.) does not exist due to the lack of officially defined classifications, and the wide variety of social work agencies. Data of PSA includes medical and health personnel as part of the Human Health and Social Work Activities Sector and does not focus on social service workforce as a whole or RSWs only [61]. Since there is a renewal system for RSWs, a certain amount of personnel information on RSWs is expected to be stored in PRC, but the Study Team was unable to confirm the existence of a database of RSWs or survey data on the employment status of RSWs. According to the interview with the PRC, there are currently about 32,000 RSWs, and the majority (75-80%) are practicing³⁷.

A total of 6,267 RSWs are employed by DSWD, which is considered as the main employment agency for RSWs, as shown in Table 8-15 (as of 31 December 2021). Of these, only 12.8 % are permanent and 87.2 % are on contract basis.

Table 8-15 Number of RSWs employed by DSWD (31 December 2021)

	Permanent	On contract basis				Total		
		Casual	Contractual	CoS/MOA	Job Order	F	M	Total
No.	803	4	3,465	1,976	22	5,340	927	6,267
%	12.8 %	0.06%	55.3%	31.5%	0.35%	100%		
		87.2%						

Source: Prepared by the Survey Team with reference to [62]

Note: CoS (Contract of Services), MOA (Memorandum of Agreement); the above figures are as per the information by DSWD although the total number is not consistent.

For the LGUs, it is likely to be in the thousands if they are assigned as per the RSW assignment criteria shown in 8.1.1, Table 8-6, but data on RSWs assigned to LGUs was not available.

In addition, there is no specialty-based qualification for RSWs, but the DSWD certifies RSWs as Social Worker Managing Court Cases who meet certain requirements such as training and experience. As of 9 November 2021, 383 individuals have been certified, mostly LGUs, and the list of accredited individuals is publicly available [63] [64].

8.2.2 Development

(1) Educational institutions and system

1) Overview of social work education

Social work education in the Philippines began in the mid-1930s to educate those who were in the position of social workers without academic training. A non-degree training course was established at the Centro Escolar University. After the war, in 1947, social work training was provided under the auspices of the United Nations to a joint committee composed of representatives of the National Red Cross Committee, the Social Welfare Commission and the Philippine Relief and Trade Rehabilitation Administration. The predecessor of the present Philippine Women's University (PWU) started offering social work programs in 1947. In 1950, University of the Philippines (UP), Centro Escolar University and other institutions started

³⁷ Based on the interview with PRC (28 December 2021)

graduate level social work programs. As the need for direct service workers arose, universities that were offering graduate programs at the time were approved to implement social work curricula at the undergraduate level based on the recommendations of the commission on social work education at the time. In 1965, the Social Work Law was enacted, making BSSW eligible to sit for the licensure examination [48].

Currently, there are more than 100 universities offering BSSW programs in the Philippines. According to NASWEI, a professional association for social work education, there are 80 active member schools of NASWEI (21 of which also have master's programs) and 32 universities under membership pending or on process, for a total of 112 universities³⁸. There is no data on the total enrollment capacity of all universities or the number of graduates. The total number of admissions varies depending on the university, and the minimum and maximum figures can range from 50 to 700 (all levels) with state-owned schools having higher numbers, and the same goes for the number of graduates which varies from 10 to 200 per year³⁹.

As for the graduate programs (master's and doctoral), the national standard curriculum by CHED has not yet been established⁴⁰.

2) National standard curriculum for BSSW

The latest national standards curriculum for BSSWs was published in 2017 by the Commission on Higher Education (CHED) in CHED Memorandum Order (CMO) No. 39: Policies, Standards and Guidelines for the Bachelor of Science in Social Work Program (2017) [45]. BSSW program integrates internationally benchmarked outcomes such as Global Standards for the Education and Training of the Social Work Profession (2004), the global definition of social work (2014), etc., and all higher education institutions offering BSSW courses shall adhere to the provisions in these guidelines. The curriculum outline for BSSW is shown in Table 8-16.

Table 8-16 Curriculum outline for BSSW

Courses		Units
General Education		36
Professional Courses	Human Behavior and Social Environment <ul style="list-style-type: none"> ▪ The Philippine Social Realities and Social Welfare ▪ Filipino Personality and Social Work ▪ Social Environment and Social Work: The Family, Group, Community and Organizations ▪ Social Change and Development Perspective 	15
	Social Welfare Policies, Programs, and Services <ul style="list-style-type: none"> ▪ Social Welfare Policies, Programs, and Services ▪ Social Welfare Project/Program Development and Management ▪ Social Work Statistics (*Note) ▪ Social Welfare Agency Administration ▪ Social Work Community Education and Training ▪ Social Work Research I (Development of A Research Design) ▪ Social Work Research II (Implementation of A Research Design) 	21
	Social Work Practice	24

³⁸ There are some universities that do not apply for membership because of requirements such as government permission and years of establishment. Even if a school is not a regular (active) member of NASWEI, it is possible for the students to take licensure examinations so as not to disadvantage students. (Based on the interview with PRC on 20 December 2021)

³⁹ Based on the interview with NASWEI (11 January 2022)

⁴⁰ Based on the interview with PWU (29 January 2022)

Courses		Units
	<ul style="list-style-type: none"> ▪ Knowledge and Philosophical Foundations of the Social Work Profession ▪ Fields of Social Work ▪ Social Work Communication and Documentation ▪ Social Work Counselling ▪ Social Work Practice with Individuals and Families ▪ Social Work Practice with Groups ▪ Social Work Practice with Communities (Community Organizing and Community-based Social Work Practice) ▪ Seminar on Current Trends in Social Work Practice 	
	Field Instruction <ul style="list-style-type: none"> ▪ Field Instruction I (500 hours) ▪ Field Instruction II (500 hours) 	30
Other Requirements	Physical Education	8
	National Service Training Program	6
Total No. of Units		140

Source: Prepared by the Survey Team with reference to [45]

Note: This subject can be taught by a non-social worker faculty.

As required by Social Work Law, a minimum of 1,000 hours of field instruction (FI) is required for students to spend. FI refers to supervised field work, which is conducted in (1) a social welfare institution and (2) a rural or urban community, each for a minimum of 500 hours, under the supervision and guidance of a designated supervisor who meets certain qualifications.

All professional courses in the BSSW curriculum must be taught by faculty members with minimum qualifications such as a holder of Master of Social Work or related field, RSW, regular member in social work professional organizations, specifically NASWEI and PASWI.

3) Educational institutions

The University of the Philippines-Diliman (UP-Diliman), a national university, and the Philippine Women's University (PWU), a private one, are examples of institutions that have a long history and continue to play an important role in social work education in the Philippines.

● University of the Philippines (UP) - Diliman

UP-Diliman is recognized by CHED as a Center of Excellence in the field of social work [65]. The University of the Philippines began offering social work education at the graduate level in 1950 and established the predecessor of the Department of Social Work in 1961. The University of the Philippines has been one of the leading universities in social work education in the Philippines from the beginning to the present. Currently, the Department of Social Work of the College of Social Work and Community Development in UP-Diliman offers BSSW as well as diploma and master's level social work degree programs [66] [67] ⁴¹. In addition, short-term programs other than degree programs are offered by the Research and Extension for Development Office, a separate department. The passing rates of the licensure examination are high at 100%, while the number of examinees is low at about 10. The enrollment is

⁴¹ Based on the interview with UP (17 December 2021)

currently down to 8 students in the third year from the enrollment of 50 students in 2019⁴². Table 8-17 summarizes the BSSW.

Table 8-17 Summary of BSSW in UP-Diliman

Item	Summary
Students	<ul style="list-style-type: none"> ▪ Admission capacity is 50 (increased from 25 to 50 since 2019) ▪ Mostly direct entrants after Senior High School, and no working students
Faculty	<ul style="list-style-type: none"> ▪ 1 Professor, 4 Associate Professor, 8 Assistant Professor and others
Features in curriculum	<ul style="list-style-type: none"> ▪ In line with CHED's national standards curriculum, some courses were added to meet global standards as original courses. ▪ Of the 1,000 hours of field instruction, 700 hours are in community organizing.
Tuition fees	Free (since 2018 for state universities and colleges)
Graduates	Enrollment and graduation statistics are not publicly available, but of the 50 students enrolled in 2019, enrollment in the same grade as of December 2021 has declined to 8; a similar trend observed from before COVID-19.
Employment	<ul style="list-style-type: none"> ▪ DSWDs, LGUs, hospitals, NGOs, etc. are the main sources of employment. ▪ Students generally apply by looking at the vacancies, and there is also an alumni webpage. ▪ In terms of retention, in general, most students work until retirement. ▪ Tracer study is not available.
Licensure examination	100% passing rates (but number of applicants around 10)

Source: Prepared by the Survey Team with reference to the interview with UP (17 December 2021)

● **Philippine Women’s University (PWU)**

PWU is one of the pioneer universities in the field of social work as its predecessor offered a program in social work in 1947, at the early stage of the development of social work profession. PWU is a private university, and although it is called a women's university, it is now a coeducational institution. The Philippine School of Social Work offers BSSW, master program and other [68]. The BSSW is offered in three semesters per year and students can graduate in as little as three years. About half of the students are working adults who have already graduated and are taking as the second degree to pursue RSW certification. The summary of BSSW is as shown in Table 8-18.

⁴² Although the reason for this was not identified, it was suggested that one of the reasons might be that the 700-hour community organization field instruction was conducted over a long period of time in a remote area with poor living conditions. (Based on the interview with UP on 17 December 2021)

Table 8-18 Summary of BSSW in PWU

Item	Summary
Students	<ul style="list-style-type: none"> ▪ Current (second semester of 2021-2022) enrollment is 55 students, of which 26 are already graduated adult students with other degrees and enrolled in BSSW as the second degree ▪ In 2018, the number of students was 99 (about half of whom are graduates), but this number has decreased due to COVID-19 and other factors ▪ Working students have worked or are currently working for DSWD, NGOs, etc. and are mostly seeking permanent employment or promotion through RSW certification.
Faculty	<ul style="list-style-type: none"> ▪ Three full-time faculty members, including the dean, and other part-time faculty members, with numbers varying by semester. ▪ All faculty members have RSW qualification, social work experience, and a master's degree or higher.
Features in curriculum	<ul style="list-style-type: none"> ▪ In line with CHED's national standards curriculum, some courses are added, which are applicable for whole university. ▪ Professional courses are also offered on Saturdays and Sundays.
Tuition fees	33,000 pesos per semester, and a total of 297,000 pesos for a minimum of 9 semesters until graduation
Graduates	21 students in 2021 (less due to pandemic) and 45 students in 2019
Employment	<ul style="list-style-type: none"> ▪ All graduates, including full-time students, are employed. ▪ Employment opportunities are with the government (mainly DSWD) and NGOs, with the government being more common due to better benefits.
Licensure examination	<ul style="list-style-type: none"> ▪ Usually, higher than average passing rates ▪ There are graduates ranked 7th in individual correct answer rate in 2021 and 10th in 2019.

Source: Prepared by the Survey Team with reference to the interview with PWU (29 January 2022)

(2) Continuing education

In accordance with the Social Work Law (Republic Act No. 10847), as amended upon the enactment of the CPD Law of 2016 (Republic Act No. 10912), the requirement for renewal (every three years) is 45 credits of CPD programs from CPD providers accredited by the PRC's CPD Council [43]. According to the implementation guidelines set by the PRC's Professional Regulatory Board for Social Workers, in addition to CPD programs from accredited CPD providers, self-directed learning is also included [69]. Details of CPD programs/activities with corresponding CPD units are shown in Table 8-19. There is no system for earning credits based on years of experience or areas of expertise; only the number of units is specified⁴³.

⁴³ Based on the interview with PRC (18 December 2021)

Table 8-19 List of CPD programs and activities with corresponding CPD units

Program/ Activity		CPD units
1.0. Professional Track: Accredited CPD provider with approved CPD program by CPD Council		
1.1.	Participant	Approved units for the program
1.2.	Resource Speaker	4 units per hour
1.3.	Panelist/ Reactor	3 units per hour
1.4.	Facilitator/ Moderator	2units per hour
1.5.	Monitor	Twice the number of approved units for participant of the program
1.6.	Local Convention/ International Conference Held in the Philippines	Same as 1.1 ~1.5
1.7.	Professional Track: Self-directed 1. International Convention/ Conference/ Training Seminars Held Abroad 2. International On-Line Courses	To be determined by CPD Council
2.0. Academic Track: Self-directed		
2.1.	Master’s Degree or Related Profession	45 units
2.2.	Doctoral Degree or Equivalent	90 units
2.3.	Post Doctoral Associate	45 units
2.4.	Post Doctoral Fellow	4 to 20 units
2.5.	Professional Chair	Maximum of 25 units
2.6.	Specialization Program	Maximum of 10 units
2.7.	Distance Learning Module	Maximum of 10 units
3.0 Other Self-directed and/or Lifelong Learning Activities		
3.1.	Training Module	Maximum of 10 units
3.2.	Published Research	Maximum of 25 units
3.3.	Professional Journal or Scholarly Journal: Author/s, Peer Reviewer, Editor	2 to 20 units
3.4.	Pamphlet/ Book/ Monograph: Author/s, Editor	10 to 45 units
3.5.	Newspaper/ Magazine Article or Column	5 to 10 units
3.6.	Recognition, Achievement, Professional Awards and Conferment of Titles	10 units, full units and other
3.7.	Others: Socio-Civic Activities Using Profession	Maximum of 10 units and other
3.8.	Tours, Travels, Visits, Fairs and Exhibit: Study Tours Local and Foreign	Maximum of 10 units

Source: Prepared by the Survey Team with reference to [47]

The number of accredited CPD providers available on the PRC website is 25 as of July 2020 [70], and the total number of accredited CPD programs is 725 for the implementation period from 2016 until October 2020 [71]. According to the interview with PRC, 141 accredited CPD programs were offered in 2018, 297 in 2019, 170 in 2020, and 192 in 2021 (as of October) ⁴⁴. In addition to these accredited CPD programs, there are a variety of opportunities for earning CPD units, as shown in Table 8-19.

The Amended Social Work Law (Republic Act No. 10847), which provides for CPD provisions, and its' implementation guidelines state that organizations employing RSWs shall allocate the necessary funding

⁴⁴ Based on the interview with PRC (18 December 2021)

to support the professional development of social workers regardless of employment status for the purpose of complying with the CPD requirement. According to the interview with a NGO, the cost of earning CPD units for RSWs is budgeted and covered by the organization. In addition to the CPD units required for renewal, the cost of participation in various internal and external trainings, trainings by professional associations, webinars, annual meetings, etc. are fully or partially covered by the organization, and probably by many similar organizations as well⁴⁵.

In addition, as part of the response to COVID-19, a special provision was made in August 2021 regarding the earning of CPD units for RSWs who provide essential services during the State of Public Health Emergency due to COVID-19. For example, 45 units are granted for engaging in social amelioration program in LGUs for one month [69] .

8.2.3 Support

(1) Recruitment and retention

The main employment sources for RSWs are government agencies such as DSWD and LGUs, as well as private institutions such as NGOs, etc. DSWD is said to be the major employing agency, with 6,267 RSWs employed as of 31 December 2021, as already mentioned in 8.2.1 (6). In particular, there is a high need for employment in the Conditional Cash Transfer Programs (4Ps), which account for more than half of the total budget of DSWD. As for LGUs, the actual number is not known, but it is assumed to be of a certain size as a place of employment due to the mandatory placement of RSWs. However, there is a possibility that the number of applicants may be small, such as in remote areas. There are some cases where social workers are employed overseas, although not many and not statistically known. Examples are New Zealand, Australia, and the UK, but there are no intergovernmental agreements, and individuals usually apply for the positions at online recruitment advertisement. Currently, there are about 32,000 RSWs nationwide, and as mentioned above, 75-80% of them are practicing, and most of them usually continue to work if there are no personal reasons⁴⁶.

According to interviews with universities and professional associations, government agencies offer higher benefits, while private agencies generally offer lower benefits, although depending on the organization. For example, a DSWD employee as a new to profession and on a contractual basis can be paid at about 24,000 to 27,000 pesos, while in the private sector, it is not uncommon for an experienced RSW to earn about 15,000 pesos. In the public sector, because of the policy of standardizing the salaries of employees, there is no difference between fields. It is also reported that a bill has recently been passed to raise the pay grade of RSWs in government agencies. BSSW graduates often prefer to work in public institutions because of the salary and benefits. With the approval of CHED, NASWEI plans to conduct a tracer study for BSSW graduates on their employability.

As already mentioned in 8.2.1 (1), Magna Carta for Public Social Workers (Republic Act No. 9433) enacted in 2007 has provided various environmental improvements for social workers working in public institutions.

⁴⁵ Based on the interview with SOS Children's Villages Philippines (18 January 2022)

⁴⁶ Based on the interviews with PASWI (16 December 2021), UP (17 December 2021), PWU (29 January 2022)

On the other hand, more than 80% of the RSWs employed by the DSWD are on a contract basis. Even SW Officer IVs at the supervisor level are not necessarily employed on a permanent basis, and it is not uncommon for them to work for long periods of time even on a contractual basis⁴⁷.

SOS Children's Villages Philippines, with which interviews were conducted, is an agency that operates children's family home in eight locations across the country, providing residential care to 1,014 children as of March 2021 [72]. Out of a total staff of 294, five RSWs are employed by the agency. One RSW is supposed to be assigned to each of the eight locations, but three are currently vacant and under recruitment. There are many reasons for leaving jobs, and one of the reasons is to move to a public institution⁴⁸.

(2) Professional associations and network

In the Philippines, there are many professional associations of social workers⁴⁹. Among them, two organizations are presented here, the Philippine Association of Social Workers, Inc. (PASWI) and the National Association for Social Work Education, Inc. (NASWEI), as leading organizations.

1) Philippine Association of Social Workers, Inc. (PASWI)

PASWI is the only professional association for social workers accredited by the PRC (only one association for each profession) and was the first one to be formed in the region, therefore, as the longest-standing professional association in the ASEAN region [38]. It has been working to improve the professional competence, status and treatment of social workers for many years. PASWI was formed in 1947 by a group of trained social workers in the United States, which evolved into the organization of PASWI in 1948, and became the current incorporated organization in 1988. It is also a member of the International Federation of Social Workers (IFSW) and the ASEAN Social Work Consortium (ASWC) [73] [74]. PASWI also participates in the meetings organized by the PRC's Professional Regulatory Board for Social Workers and is positioned as a major stakeholder in institutional and policy making related to social worker.

There are 102 chapters across the country, with over 14,000 members, all of whom are RSWs (as of December 2021). A significant increase is observed considering that the number of members as of 2011 was 3,645 [5]. This increase has been the result of campaigning and other efforts. The main sources of income are participation fees for the annual conventions and conference, meetings and seminars, and annual membership fees⁵⁰.

PASWI holds seminars, webinars, and conventions every year, and participates in national and international conferences including ASWC. As a CPD training organization accredited by the PRC, PASWI also conducts CPD programs. In 2020, 10 free webinars were held, and the annual convention was organized under the theme of "Social Work under the New Normal: Struggles, Resilience and Hope amidst the

⁴⁷ Based on the interview with PWU (29 January 2022)

⁴⁸ Based on the interviews with SOS Children's Villages Philippines (18 and 19 January 2022)

⁴⁹ As the participating members of ASWC, there are PASWI, NASWEI, Association of Local Social Welfare and Development Officers of the Philippines, Inc., DOH League of Medical Social Workers, Association of Medical Social Workers of the Philippines, Inc., National Council of Social Development, Inc., Philippine Association of Court Social Workers, Inc., Association of Child Caring Agencies of the Philippines, Inc. and Association of DSWD Social Workers Inc. among others [74].

⁵⁰ 500 pesos for registration, 50 pesos for ID card, 300 pesos for annual fee, but collecting annual fees is difficult in the midst of pandemic (Based on the interview with PASWI on 16 December 2021)

Pandemic and Complex Emergencies”, which was attended by 3,457 members from all over the country and abroad [75]. The most recent activity in 2021 was a webinar in the field of juvenile justice, which was attended by more than 70 RSWs and about 2,000 participants of staff from 45 juvenile justice-related facilities and others⁵¹.

2) National Association for Social Work Education, Inc. (NASWEI)

NASWEI has played a leading role in the institutionalization of social work education, starting in 1969 as the Schools of Social Work Association of the Philippines, and changing its name to the current NASWEI in 1990. The CHED Memorandum Order mentions that higher institutions offering BSSW shall be a member of NASWEI. NASWEI promotes quality improvement of social work education by monitoring universities as a member of the Technical Committee of CHED. NASWEI is an association of social work education institutions.

NASWEI has a total of 15 chapters in 4 divisions in the country, and there are 80 active member schools (21 of which also have master’s programs) and 32 universities under membership pending or on process, for a total of 112 universities⁵². The total number of faculty members is about 400. The main source of income is the membership fee, which is 2,000 pesos per year for school and 750 pesos per year for each faculty member, for a total of 460,000 pesos per year.

Major activities include training, seminars, annual conventions, surveys and research. As for international partnerships, NASWEI participates in international conferences as a member of ASWC and APASWE (Asian and Pacific Association for Social Work Education). In addition, in March 2020, as part of the response to COVID-19, the United Registered Social Workers (URSW) was launched as a volunteer network by RSW. URSW has more than 500 registered members nationwide in 17 regions and has established a referral system for the rescue of stranded individuals and groups, abuse cases, and trafficked children and women, and has provided free counseling and other services. URSW has also established partnership with DSWD and OWWA to assist returning OFWs [75] [76].

As examples of partnerships with other institutions, NASWEI inked a Memorandum of Agreement (MOU) with the Philippine Red Cross to work towards the promotion and mainstreaming of humanitarian support services in social work education. The partnership includes a student internship, volunteer work, and research. In addition, in order to incorporate the recent issue of online sexual exploitation of children into the professional courses of BSSW, as part of the project supported by the Salvation Army and other⁵³ (January 2021 - December 2022), training for at least 500 students have been conducted and developed modules for students and teachers guide [75] [76]. In addition, NASWEI is planning to conduct a tracer study of BSSW graduates in 2022, with the approval of CHED, to capture the employability of the students.

It is also a CPD training provider accredited by PRC. Table 8-20 shows examples of CPD training programs in 2019-2021.

⁵¹ Based on the interview with PASWI (16 December 2021)

⁵² Based on the interview with NASWEI (11 January 2022), and details are available in the President’s Report NASWEI Accomplishments 2019-2021 [76]. There are some requirements for application for membership such as government permission and years of establishment.

⁵³ Salvation Army and World Hope International are both private agencies based on Christianity and active in child protection

Table 8-20 CPD training programs conducted by NASWEI (2019 – 2021)

Theme	CPD Units
Training on Gender Responsive Case Management (5 days)	40.75
Social Work Research Training Using Case Management (2 days)	40.75
Coaching the Mentors, Training for Effective Social Work Field Supervisor (3 days)	14.0
Workshop on Harmonization of Social Work and Allied Medical Profession’s Practice toward Disability Inclusion (3 days)	22.0
Enhancing the Culture of Research Using Technology in Data Analysis (3 days)	16.0
Trauma Informed Care in Case Management (2 days)	32.0
Field Education Supervision Training for Agency and School Field Supervisors (3 days)	25.0
NASWEI 49 th Biennial Convention (1 day)	25.5

Source: Prepared by the Survey Team with reference to [76]

(3) Code of ethics

The PRC’s Professional Regulatory Board for Social Workers has been revising the Code of Ethics for social workers with professional associations for a few years now⁵⁴. Currently, a draft of the revision has been prepared and is in the process of final review by the concerned parties. In addition, PASWI has its own Code of Ethics, which is available on the PASWI website.

(4) Career development

There are no specific regulations on career progression for RSWs, and the CPD program is not an acquisition system based on experience or specialization. PRC’s Professional Regulatory Board for Social Workers is currently reviewing the relevant laws, and as already mentioned in 8.2.1 (1), the addition of provisions on career progression is under consideration⁵⁵.

In general, career development and promotion are in line with the human resource development policies of the employing agencies. There is an internal promotion test for promotion in DSWD. The DSWD Policy Agenda 2020-2025 includes a review of the current system and the need to develop a clearer career path for DSWD staff.

In addition, there are plenty of opportunities for various trainings, seminars, webinars, etc., allowing for self-improvement according to individual interests. As mentioned in 8.2.2 (1) 3) about PWU, working students can also take the BSSW program as a second degree for career development with the aim of promotion or permanent employment.

(5) Supervision

There is no national system or standard for supervision in the Philippines. It is likely that supervision is provided based on the system for the staff development within the employing organizations. In the UNICEF survey (2019), out of 490 respondents, only 10 (2 %) said that they received no supervision or that it was

⁵⁴ It is not clear that when the present Code of Ethics was prepared but according to the Magna Carta for Public Social Workers (2007), it provides that Social Work Code of Ethics is to be adopted by the Board of Social Work (currently Professional Regulatory Board for Social Workers) within six months from the effectivity of the Act, and therefore it is assumed around that time.

⁵⁵ Based on the interviews with PRC (18 and 28 December 2021)

not adequate. For 415 (84.7 %) respondents, supervision was effective in some way. The main forms of support provided are either technical guidance/consultation or moral support and encouragement [38]. According to the interviews with SOS Children's Villages Philippines, support from senior staff within the organization, internal and external trainings and webinars seem to be the opportunities⁵⁶.

Since LGUs are under the jurisdiction of DILG, DSWD does not have the authority to conduct supervision in the sense of oversight. The actual status of the DSWD monitoring and other activities mentioned in the DSWD Guidelines is also unclear. However, as already mentioned in 8.2.1 (3), DSWD has a mandate to provide technical assistance to LGUs, which is also emphasized in the DSWD Policy Agenda 2020-2025. With the full-scale implementation of Mandanas Ruling starting in 2022, it is expected that the function of supervision in terms of support to LGUs will also be included.

(6) Public awareness

PASWI and NASWEI promote public awareness through various activities such as seminars and annual conventions, etc. There is also an annual Outstanding Professional of the Year Award for Social Work, in which the PRC selects the best social worker. In addition, various events are held on World Social Work Day (every March).

In 2021, President declared June 19 of every year as “Filipino Social Workers’ Day” by Proclamation No. 1176. Recognizing their indispensable role and contribution to nation-building, this is further to raise awareness and recognition of social workers. DSWD is directed to lead the observance of the Filipino Social Workers’ Day [77].

8.3 Impact of COVID-19 on the social welfare sector

8.3.1 Overview of the impact of COVID-19 on the social welfare sector

In the Philippines, an outbreak of COVID-19 infection occurred in January 2020, and the first fatal case was confirmed in February. In March, community quarantine measures were issued to restrict the movement of people, and the Bayanihan Act (Republic Act No. 11469)⁵⁷, a corona response law, was passed. According to the World Health Organization (WHO), from 3 January 2020 to 14 January 2022, a total of 3,092,409 cases of COVID-19 infection have been confirmed and 52,736 deaths have occurred. Vaccines have been available since March 2021, and as of January 5, 2022, a total of 111,908,830 vaccinations had been administered [78].

COVID-19 has serious impact on the Philippine economy. According to PSA, the unemployment rate in June 2020 rose to 17.7 % (7.3 million workers), much higher than the April 2019 unemployment rate of 5.1 %. Since the tourism industry and remittances from OFWs⁵⁸ are directly affected, it has been noted that

⁵⁶ Based on the interview with SOS Children’s Villages Philippines (18 January 2022)

⁵⁷ Bayanihan to Heal as One Act (Republic Act No. 11469): Bayanihan means “mutual help”.

⁵⁸ With the outbreak of COVID-19, governments across the world have imposed lockdowns, disrupting economic activities and employment, including that of migrants. The pursuit of a healthy and resilient Philippines should consider the particular challenges faced by overseas Filipinos in order to protect their rights, promote their welfare, and sustain their contribution to the country’s development. The government will continuously support and assist repatriated and displaced overseas Filipinos and seek to address the increased vulnerability of those who remain abroad. For those who have decided to return to the Philippines permanently, their successful socioeconomic reintegration will be prioritized [39].

the socio-economic impacts of COVID-19 may exacerbate inequalities among the most at-risk groups and increase social tensions.

8.3.2 Issues and initiatives in relation to social service workforce

As already mentioned in 8.2.3 (2), NASWEI launched United Registered Social Workers (URSW) in March 2020, as a volunteer network of RSWs as part of the response to COVID-19. Initially it started to provide psychological support to social work and medical front liners, and later extended to distressed Filipinos affected by the pandemic. It provides free counseling by phone and online, and referrals to support services. In the first month of its launch, more than 300 RSW volunteers were gathered, and later more than 500 have registered nationwide, demonstrating the professional function of RSW in a crisis [75].

Measures have also been taken by the PRC to protect the professional qualifications of RSWs working on the frontline. As mentioned in 8.2.2 (2), as part of the response to COVID-19, a special provision was made in August 2021 regarding the earning of CPD units for RSWs who provide essential services during the State of Public Health Emergency due to COVID-19. For example, 45 units are granted for engaging in social amelioration program in LGUs for one month, and 30 units for 2 to 3 weeks, and 15 units for 1 week. Similar arrangements were made for RSWs who work in various fields [69]. Although face-to-face training has become more difficult, a number of webinars and online trainings have been conducted to promote knowledge sharing and solidarity.

For students enrolled in BSSW, field instruction is particularly affected. Community based field instruction has to be conducted on remote basis⁵⁹. There are also limitations on the monitoring visits to universities by the Technical Committee of CHED, which is an issue from the perspective of improving the quality of educational institutions. DSWD has been working with NGOs that provide institutional care and reintegration services for child victims, but the pandemic has affected the NGOs' direct care and shelter visits. In addition, many pointed out that mental health and occupational health and safety are also issues, on top of the increased workload, including emergency response programs (social amelioration program, etc.).

8.4 Priority issues for developing and strengthening social service workforce

As for “planning”, “development”, and “support” of social service workforce in the Philippines, the results of the survey can be summarized as follows. With regard to “planning”, the legal system regarding social work and qualifications of social workers as professionals, etc., has been developed, starting with the Social Work Law enacted in 1965 and others. Amendments have been made as necessary, and the laws have been put into practice through the formulation of implementation guidelines. On the other hand, regarding social service workforce other than RSWs, the regulations have not been well developed and information on the actual situation is limited. In addition, there is no comprehensive analysis of the needs and gaps of social service workforce including RSWs, or manpower planning. As for “development”, licensure examination system has been operated under the PRC, and social worker as professional qualification is established. BSSW programs are offered in more than 100 universities based on the national standard curriculum and

⁵⁹ Based on the interview with UP (17 December 2021)

earning CPD units are required for continuing education based on the CPD Act. It was also confirmed that various opportunities for capacity building are provided. However, here again, the status of social service workforce other than RSWs is not clear, and since they are not professionals, the CPD Act does not apply to them. In terms of “support”, the conditions of employment for RSWs in public institutions have been improved. Capacity building and awareness-raising activities by professional associations with long history such as PASWI and NASWEI have been actively conducted. However, it is mainly for RSWs. Another challenge is that more than 80% of the employment of RSWs in DSWD is on a contract basis. Although the actual conditions of RSWs in the private sector and non-RSWs among the social service workforce are unknown, it can be said that the private sector is less regulated than the public sector, while the public sector seems to be more competitive in terms of salaries and treatment. The development of social workers as a profession is the role of the PRC’s Professional Regulatory Board for Social Workers and CHED. DSWD is in charge of social welfare and development, and rather than developing social service workforce alone, it has the function of improving the capacity of the entire social welfare and development agencies, and especially the role of providing technical assistance to LGUs.

In this way, the Philippines has the longest history of development of professional social workers and is seen as a country with quite advanced among ASEAN countries in terms of “planning”, “development”, and “support”. On the other hand, issues were found in aspects for social service workforce other than RSWs and for those who work in the private sector among RSWs. Based on the above, the following three points are identified as priority issues for strengthening social service workforce in the Philippines.

8.4.1 Conducting survey of the current status of social service workforce for the formulation of policies of their development and strengthening

In order to conduct a comprehensive national-level human resource development plan and manpower plan for social workers (including gap analysis between supply and demand), it is first necessary to understand the current status of social workers. Since there is a provision for RSWs to apply for renewal every three years, it is likely that the PRC obtains contact information, and for example, a survey of the current status of RSWs via internet may be conducted. A nationwide survey of 32,000 RSWs may be useful to collect information on social workers in the private sector as well whose actual status is unknown. In addition, by covering not only the working situations and benefits of RSWs themselves, but also the human resources and working conditions surrounding RSWs, the current status of social work and the actual needs of social service workforce can be clarified. The results will be used to formulate policies based on the data as fundamental information for the planning of development, enhancement as well improving compensations and conditions of the workforce.

8.4.2 Improving the LGUs’ capacity to provide social welfare services

At the Barangay level, which is the site of social work closest to the community, the deployment of social workers is not a mandatory provision. Social workers in Provinces, Cities and Municipalities are in charge of several Barangays, but it has been pointed out that the number of social workers is not sufficient for the number of Barangays and the workload. In the Philippines, RSWs have the authority over social work, including the preparation and signing of official documents, so the deployment of RSWs at the Barangay

level is necessary for local offices to function as the main body for the implementation of social welfare services. The deployment of more social workers at the Barangay level was frequently raised as a priority issue during the interviews as well. In preparing the transitional plan for the full-scale implementation of Mandanas Ruling, DSWD is proposing to increase the number of staff based on the analysis of the situation of LGUs, and it is hoped that this will be realized. In order to increase the number of human resources, finance will be an issue, but in addition, securing and retaining human resources to apply for social worker posts in remote areas and at the Barangay level will also need to be considered.

8.4.3 Capacity building of educators and educational institutions and systematization of CPD

As can be observed from the trends in the passing rates of the licensure examination, the rates have been on a downward trend in recent years. The increase in the number of universities offering BSSW programs and their enrollment capacity may be causing a decline in quality. PRC's Professional Regulatory Board for Social Workers is also aware of this problem and recognizes the need to investigate the factors. This issue is related to the quality of educational institutions and educators who produce human resources. It is first required to understand the factors behind, and conducting a survey is expected. In addition, there are some restrictions due to COVID-19, especially in the 1,000 hours of field instruction that is currently a requirement in teaching BSSW students. Since this will continue for some time, and perhaps even when the situation improves but will not be the same as before, there is a need to find a way to good education in the "New Normal".

With regard to the present CPD system, it is not progressively structured but rather an open system of acquiring 45 units regardless of years of experience or specializations. Currently PRC's Professional Regulatory Board for Social Workers are discussing on career development together with related stakeholders, and the systematization of the CPD system can be a part of their agenda. Creation of a certain framework for career development using the CPD system, which is observed as requirement for renewal, can serve the enhancement of competency through systematization of continuing education for RSWs.

Chapter 9 Current Status of Social Service Workforce: Vietnam

9.1 Overview of social welfare sector

9.1.1 Policies, systems and challenges for social welfare

(1) Introduction

Social work in Vietnam has been affected by political and socio-economic factors, and its beneficiaries and players have changed over time. Prior to 1862, before Vietnam became a French colony, the autonomy of village communities was prioritized, and the state did not intervene in maintaining security, etc. Therefore, social support was based on mutual assistance among villagers, with the wealthy providing charitable relief, including meals, to the poor. Later, during the French colonial period, Catholic missionaries introduced institutional care centered on charitable activities, and orphanages and facilities for the elderly and disabled were created, which differed from the traditional mutual aid provided by families and communities until then. In addition, social work organizations were formed by Vietnamese themselves (patriotic and revolutionary youth students and workers, etc.) to help the poor [1] [2] [3].

In 1945, Vietnam declared its independence as the Democratic Republic of Vietnam, and the following year entered into the Indochina War with France. France promoted the introduction of its own social work in South Vietnam more than in the previous era, and created the Ministry of Social Welfare. In addition, the French Red Cross established the Caritas School of Social Work, and under French guidance, social workers who studied social welfare as an academic discipline and acquired skills were trained [1] [3].

In 1954, with the Geneva Accords, the Indochina War ended and a new colonial era by the United States began. South Vietnam remained under the influence of the U.S. and was divided into North and South Vietnam. During this period, nearly one million refugees from North Vietnam migrated south. In South Vietnam, the Vietnam Army School of Social Work was established in 1957 by graduates of the Caritas School of Social Work, and social workers were trained at various educational institutions, including a two-year training program and short-term courses. In 1970, the Vietnam Association of Social Workers was established [1] [3].

In 1976, the unification of the North and South was achieved and the Socialist Republic of Vietnam was established. In addition to the banning of all social sciences that originated in the Western bourgeoisie, it was believed that once socialism was established, society would not have any problems. Also, theoretically, it was believed that social work and social workers were not necessary because the organizational structure of the state system, including the government and mass organizations (see 9.1.1(6)), is responsible for the welfare of its members. All social work services provided by non-governmental organizations (NGOs) were discontinued, with the exception of large institutions such as hospitals, nursing homes, and orphanages, and these institutions were placed under the control of the new government. Social workers who lost their jobs were forced to join mass organizations such as the Vietnam Women's Union and the Ho Chi Minh Communist Youth Union, or to work in other fields such as education and journalism [1] [3].

Since the implementation of the Doi Moi policy in 1986, rapid economic development has been achieved and various social problems have emerged. Social workers have become actively involved in community development, urban redevelopment, and environmental protection. However, due to the longstanding understanding that social welfare is unnecessary in socialist countries, the progress of social work in the North has lagged behind that in the South. In addition, since the government’s policy of socialization of public services (minimizing government spending on public services and increasing the burden on beneficiaries and on other institutions), mass organizations have come to be recognized as legitimate and capable institutions responsible for social services [1] [3] [4].

(2) Social welfare in social security systems

In Vietnam, social security is understood as “a system of policies and solutions applied to assist members of society in coping with risks and difficulties that lead to unemployment and serious reduction in income sources and living resources. Based on this understanding, Vietnam’s social security system is designed to: (1) maintain the leading role of the State; (2) build a multifaceted and multi-layered social security system to encompass all citizens; (3) improve the ability of citizens and society to provide for themselves; and (4) emphasize vulnerable groups (the poor, impoverished areas, hill tribe areas, rural areas, and the informal sector), and (5) progress toward international standards. These five basic principles are to be built with the basic functions shown in Table 9-1 and the basic pillars [5]. These indicate that Vietnam’s social security system has two functions: a poverty prevention function to prevent risks and difficulties, and a poverty relief function to provide social support to people in social and economic difficulties, with social welfare positioned as one of the pillars.

Table 9-1 Basic principles, basic functions, and basic pillars of the social security system in Vietnam

Basic functions	<ol style="list-style-type: none"> 1. To prevent various unforeseen circumstances, situations, and difficulties that affect people's daily lives. 2. To control and overcome the unforeseen circumstances, situations, and difficulties when they occur.
Basic pillars	<ol style="list-style-type: none"> 1. Policies, solutions, and programs for the development of the labor market, focusing on vocational training and job creation for the socially vulnerable and underemployed, unemployment benefits and vocational retraining for surplus workers arising from the process of restructuring and equitization of state-owned enterprises 2. Development of the insurance system, including social insurance, health insurance, unemployment insurance, industrial accident compensation insurance, and agricultural production insurance 3. Effective implementation of sustainable hunger eradication and poverty reduction programs 4. Formulate and implement preferential policies for the families of the meritorious, wounded, sick, and heroic soldiers, promote the development of voluntary and humanitarian social assistance and social relief forms, and enhance the role of the state 5. Develop the social welfare system and social service system and improve the accessibility of social services. First and foremost, emphasize basic and essential public services such as medical care, education, culture, and information provision for all people, especially the poor and deprived areas

Source: Prepared by the Survey Team with reference to [5]

(3) Position in the Constitution

In Vietnam, the first constitution was enacted in 1946 and has been amended four times since then, leading to the current constitution (the so-called 2013 Constitution). The first constitution adopted after the

declaration of independence in 1945, the 1946 Constitution, contained few provisions on social rights. Later, the 1959 amendment provided for “fundamental rights of citizens”, and the 1992 amendment provided for “human rights” to enhance welfare. Table 9-2 shows the changes in the enactment and amendment of the Constitution to date.

Table 9-2 Provisions on social rights in the Constitution of Vietnam

Year	Provisions on Social Rights
1946 Constitution	While there are provisions on the right to equality (Article 6) and the right to freedom of speech, publication, association, assembly, communication, residence, and travel (Article 10), there are very limited provisions on social rights.
1959 Constitution	The “fundamental rights of citizens” under the socialist constitution were defined.
1980 Constitution	The provisions on fundamental rights of citizens were fulfilled, and education and healthcare were made free of charge.
1992 Constitution	For the first time, “human rights” were placed in the constitutional provisions and it was stated that “those human rights shall be determined by the Constitution and Laws as the rights of citizens” (Article 50). Provisions on welfare, such as education and healthcare expenses, were deemed to encourage dependence on government subsidies and were revised and adjusted to match the level of economic development of the country.
2013 Constitution (The current one)	Although human rights are still within the limits of the laws, it is clearly stipulated that “citizens have the right to social security (Article 34)”, and this has been fulfilled with regard to improving the welfare of the people.

Source: Prepared by the Survey Team with reference to [6] [7] [8]

(4) Basic policy of the government

In Vietnam, where the Communist Party rules as a single party, the National Congress of the Communist Party (Party Congress), which is held once every five years, is positioned as the supreme leadership organ of the Party. The three main documents adopted and released at the Party Congress are the Political Report, the Five-Year Socio-economic Development Plan (SEDP), and the Ten-Year Socio-economic Development Strategy (SEDS) [9] [10] [11] [12] [13]. Table 9-3 summarizes the social welfare-related goals of the SEDS (2021-2030) adopted and released at the 13th Party Congress (held in January 2021). Compared to the previous strategy (SEDS (2011-2020)), the welfare of the vulnerable and poor, children, and women (gender) has been enhanced.

Table 9-3 Social welfare-related goals of the SEDS (2021-2030)

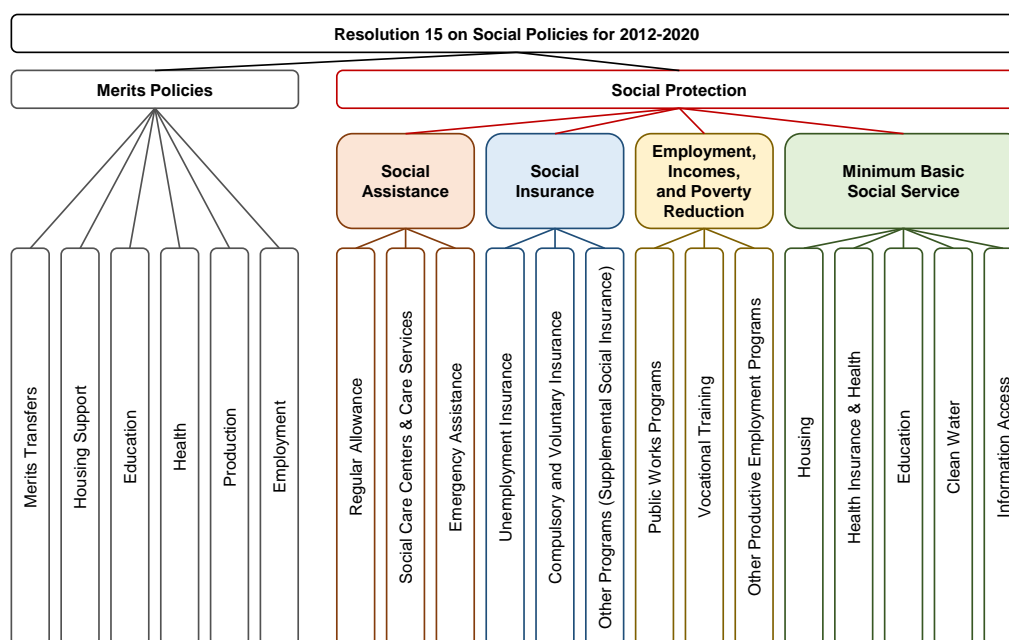
SEDS 2021-2030
<ul style="list-style-type: none"> • Promptly achieve the Sustainable Development Goals (SDGs) by creating conditions for development for all people, especially children, vulnerable groups, ethnic minorities, and immigrants, and creating opportunities for them to receive basic social services. • Focus on solving housing-related issues, such as the development of public housing and the redevelopment of residential areas in areas vulnerable to natural disasters and climate change. • Shift from family planning to slow population growth to a policy of maintaining fertility rates above the population replacement level, maintaining an appropriate gender balance, and other demographic considerations. • Work on the protection and development of ethnic minorities facing the danger of decline, such as those with populations of less than 10,000. • Establish and operate a national database to register and manage all citizens. • Continue to implement effective social security policies, especially for vulnerable and poor groups. Introduce new approaches to strengthen coordination and integration, prioritize resource allocation, and promote the socialization (privatization) of the social assistance sector. • Develop and diversify social support services. • Implement truly harmonious and comprehensive solutions for the healthy development of youth, gender equality, and the advancement of women. • Gradually close the gender gap in political, economic, cultural, social and family affairs. • Fully realize the protection of the rights of children and create a healthy and desirable environment for the child's physical and mental growth and the formation of social relationships. • Improve education, knowledge and skills related to child protection, and control situations such as accidents, violence and abuse. • Reduce the under-five mortality rate to 15% and infant mortality rate to 10% by 2030. • Protect and care for the elderly, find roles for them, and promote their participation in economic and social activities. Achieve 100% health insurance coverage for the elderly and improve their access to tests and treatments, home care, and services in community and public care facilities. • Ensure that about 60% of retirees receive monthly pension benefits by 2030. • Take measures to prevent and combat social ills such as drugs and prostitution. Provide support for the reintegration of drug addicts, sex workers, and victims of human trafficking into the community.

Source: Prepared by the Survey Team with reference to [14]

(5) Major policies and plans in social welfare

Recognizing the challenges in the field of social security, the Vietnamese government has in recent years stepped up its efforts to create a system for social security. Between 2004 and 2010, the Law on Child Protection, Care and Education (2004), the Decree on Preferential Treatment for Revolutionary Workers (2005), the Law on Social Insurance (2006), the Law on Health Insurance (2008), the Law for the Elderly (2009), Law for the Disabled (2010), etc. were enacted [5].

In 2012, Resolution No. 15 on Social Policy was adopted by the Central Committee of the Communist Party of Vietnam. It further divided social protection policy into four areas: (1) social assistance; (2) social insurance; (3) employment, incomes, and poverty reduction; and (4) minimum basic social services. In each of these areas, it was decided to expand coverage and improve the content and level of benefits [15] [16].



Source: Prepared by the Survey Team with reference to [15] [16]

Figure 9-1 Social policy framework established by Resolution No. 15

However, these policies have not always been implemented smoothly. There have been a number of challenges, such as overlapping systems among sectors, limited coverage and benefit levels, weak delivery systems for each service, and lack of financial sustainability of the social insurance system [15] [16]. To solve these problems, the Vietnamese government adopted the Master Plan for Social Assistance Reform and Development (MPSARD) in 2017 (Prime Minister's Decision No. 488/QĐ- TTg). MPSARD evaluates and analyzes the current social assistance system and sets specific targets for expanding the coverage and benefits of social assistance programs for the elderly, people with disabilities, children in need of support and protection, and other people in difficult situations, in order to build a more comprehensive and effective system. In addition, in 2018, the Master Plan for Social Insurance Reform (MPSIR) was adopted by Resolution No. 28 of the Central Committee of the Communist Party. The MPSIR has three main pillars: 1) reform of the public pension system toward universal pensions, 2) expansion of coverage to the informal economy, and 3) adjustments to ensure sustainable financing of the public pension system. Table 9-4 and Table 9-5 summarize the main goals set by the MPSARD and MPSIR.

Table 9-4 MPSARD Targets to 2025

Target type	Set at 8% of GDP per capita, then raised to 10%	Transfer values
Social pension	Age of eligibility gradually reduced to 75 (70 for ethnic minorities); inclusion of social insurance pensioners with low pensions	Gradually increased to 11% of GDP per capita (21% for those with severe disabilities)
Disability benefits	Gradually increase coverage to 100% of disabled persons of working age and their caregivers (1.8% of persons of working age)	Gradually increased to 10% of GDP per capita (20% for those with severe disabilities)
Carers' benefits	Those unable to work due to their care responsibilities for persons with disabilities. A child benefit for children up to 36 months;	Increases to 20% of GDP per capita
Child benefits	A child benefit for all children in special circumstances (as legally defined), regardless of age	Set at 5% of GDP per capita for all children but rises to 10% for children in special circumstances and 20% for

Target type	Set at 8% of GDP per capita, then raised to 10%	Transfer values
(including disability)		children with disabilities or children of single parents.
Benefit for persons with HIV/AIDS	Persons with HIV/AIDS living in poor families initially and gradually expanded to include those in near-poor families	Set at 8% of GDP per capita, then raised to 10%

Source: Prepared by the Survey Team with reference to [17]

Table 9-5 MPSIR Targets to 2030

Target definition	2021	2025	2030
Percentage of working age population participating in social insurance schemes	35%	45%	60%
Percentage of working age population in unemployment insurance scheme	28%	35%	45%
Percentage of persons above normal retirement age entitled to a pension, monthly insurance benefits and social allowances	45%	55%	65%

Source: Prepared by the Survey Team with reference to [17]

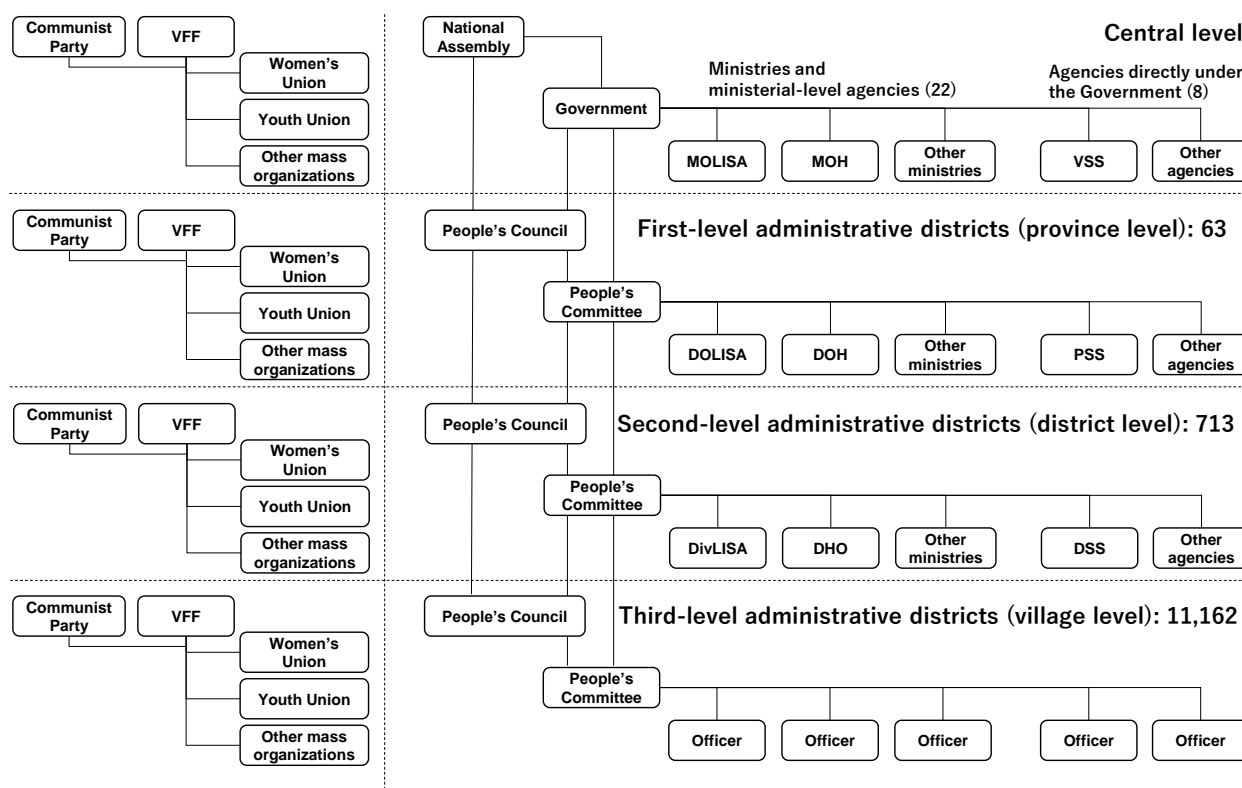
The two master plans for institutional reform, MPSARD and MPSIR, have presented comprehensive and ambitious strategies and targets for the expansion of the social protection system. However, many development partners working in the field of social security in Vietnam have pointed out that more efforts and improvements are needed to realize these strategies and achieve the goals set. The International Labour Organization (ILO) has pointed out that although there is a clear linkage between the two master plans, they are being implemented separately without being coordinated [17]. The United Nations Development Programme (UNDP), which supported the development of the MPSARD, also noted that the reorganization of the Ministry of Labour, Invalids and Social Affairs (MOLISA). Specifically, it proposes to integrate the departments that are mainly responsible for cash transfers, such as social insurance and social assistance, and to establish a new department to oversee social care [15].

The World Bank also points out that the current system for social protection in Vietnam is a hodgepodge of fragmented programs that only partially fulfill the core functions of the system [16]. In particular, the social assistance system has been designed in an ad hoc manner without a core goal or vision, and the delivery system has become inefficient. Based on the recognition, the World Bank implemented a five-year Social Assistance System Strengthening Project from 2014 to 2019. The project supported the establishment of a national database of the poor and social assistance beneficiaries, the nationwide integration of management information systems (MIS), and the trial of integrated social assistance programs in four pilot provinces using these systems [18]. The World Bank has also prepared a policy note, A Vision for the 2030 Social Protection System in Vietnam, which outlines a vision for the social protection system in Vietnam. The policy note is intended to be read not only by relevant ministries such as MOLISA, Ministry of Finance (MOF) and Ministry of Planning and Investment (MPI), but also by key government agencies involved in policy making such as the Office of the Government and the National Assembly, as well as other development partners.

(6) Social security implementation system

The implementation system of the social security sector in Vietnam is based on the one-party rule system of the Communist Party, where social development is controlled by organizations from the center to the provinces. Local administrative units are three-tiered and consist of 63 first-level administrative districts

(province level), 713 second-level administrative districts (district level), and 11,162 third-level administrative districts (village level) [19]. Figure 9-2 shows the relevant agencies from the center to the local involved in the social security sector in Vietnam.



Source: Prepared by the Survey Team with reference to [15] [19] [20] [21]

Figure 9-2 Related organizations in the field of social security

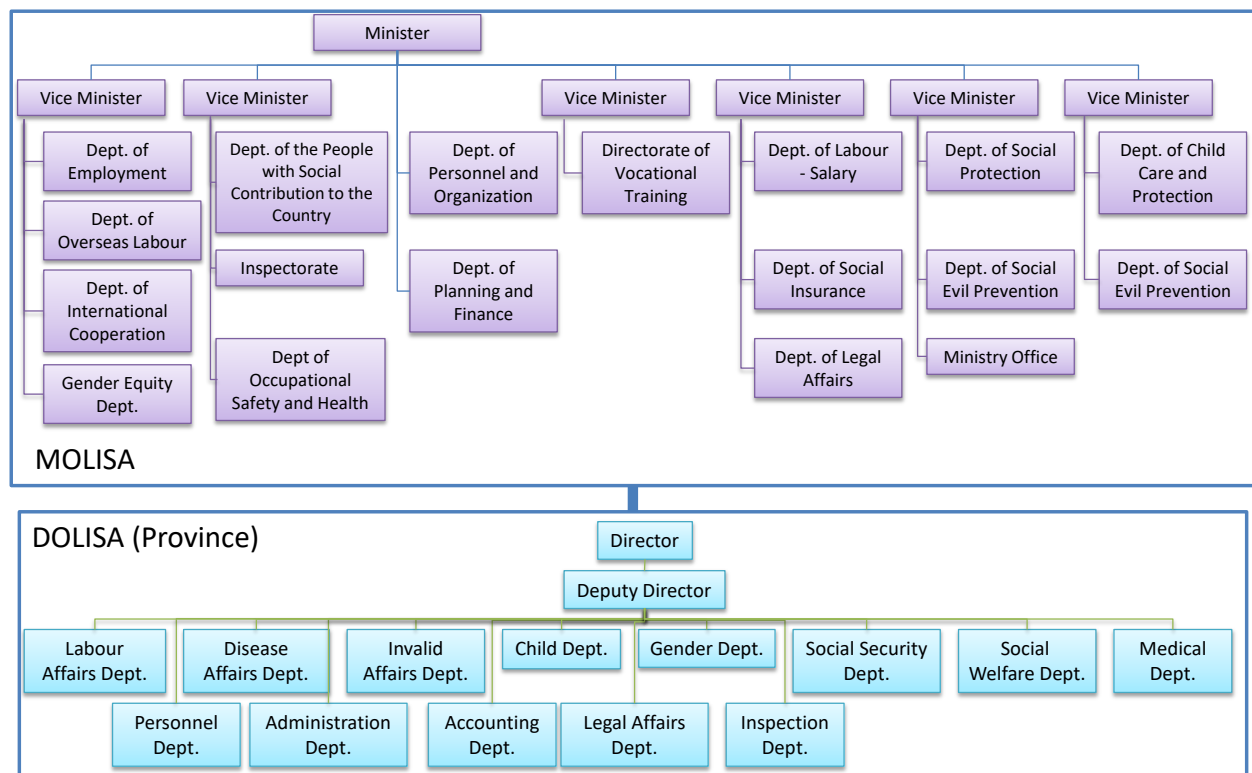
In the central government, the Ministry of Labour, Invalids and Social Affairs (MOLISA) is responsible for overall social security, while the Ministry of Health (MOH) is responsible for health insurance and healthcare services for the elderly. The Vietnam Social Security (VSS) is responsible for the implementation of the social and health insurance systems. At the provincial level, the Department of Labour, Invalids and Social Affairs (DOLISA), the Department of Health (DOH), and the Provincial Social Security (PSS) are under the authority of the People's Council and People's Committee. Similarly, at the district level, there is a Division of Labour, Invalids and Social Affairs (DivLISA), a District Health Office (DHO), and a District Social Security (DSS).

In addition, the Vietnam Fatherland Front, of which the Communist Party is a major member, is an important organization with membership of mass organizations such as the Vietnam Women's Union and the Ho Chi Minh Communist Youth Union, which constitute about one-third of the total social service workforce, and in effect have equal or higher status with the central ministries [22]. These organizations also have a hierarchical structure from the center to the local, overlapping with the above-mentioned administrative organizations and forming a double structure [20]. The organizations at the provincial level and below do not have direct budgetary links with the central ministries, except for some national programs,

and as organizations belonging to the people's committees at each level, they are allocated budgets and execute their work through the people's committees at each level [23].

1) MOLISA: Ministry of Labour, Invalids and Social Affairs

MOLISA is the competent authority for the social security sector. It formulates laws, policies and institutions in the field of social security, and implements, coordinates and monitors measures in the field of social security in cooperation with relevant ministries, associations and People's Committees at various levels. The Department of Social Protection has jurisdiction over social work, including the management and supervision of social protection centers¹, and the identification and certification of the poor and other groups who are in need of support [23].



Source: [23]

Figure 9-3 Organizational structure of MOLISA

2) MOH: Ministry of Health

MOH is responsible for developing laws and regulations, formulating policies, and monitoring the implementation of these policies in local areas. MOH is also in charge of healthcare facilities and research institutes related to medicine. The Department of Health Insurance is in charge of the health insurance system, but the Vietnam Social Security (VSS) is responsible for the overall management and operation of the system. The General Office of Population and Family Planning is in charge of health care for the elderly [23].

¹ Facilities where social welfare beneficiaries with special difficulties, such as poverty or lack of relatives, can live and work. There are 425 such facilities nationwide. There are two types: public social protection centers and private social protection centers. There is no charge for use.

3) VSS: Vietnam Social Security

While MOLISA and MOH are responsible for policy formulation and system design related to social insurance schemes (e.g., sickness benefits, pregnancy and maternity benefits, occupational accident and disease benefits, old-age benefits, survivor benefits, and unemployment benefits) and health insurance schemes, VSS, as the implementing agency, is responsible for collecting premiums, providing insurance benefits, and managing social insurance funds and health insurance funds [23].

4) VFF: Vietnam Fatherland Front

VFF is a constitutionally recognized official political coalition organization, with membership from the Communist Party of Vietnam, the Vietnam People's Army, and various other political, social, and economic organizations. VFF not only carries out propaganda and mass mobilization in line with the Communist Party's line and the government's policies, but also has a great deal of political power, including the selection of candidates for the National Assembly and local council elections. As for the main member organizations, there are a total of 44 "associations" and "societies" as well as "mass organizations" such as the Vietnam Farmers' Union, Vietnam General Confederation of Labour, Vietnam Women's Union, Ho Chi Minh Communist Youth Union, and Vietnam Veterans' Association [4]. Below is an overview of the Vietnam Women's Union and the Ho Chi Minh Communist Youth Union, which are representative mass organizations that also work in the field of social welfare.

- **Vietnam Women's Union**

The Vietnamese Women's Union, formed in 1930, is responsible for functions in the fields of healthcare and social welfare that the state is unable to fulfill. From the end of the 1980s, with the support of Swedish aid agencies and UNFPA, it also began to provide microfinance to poor women [4].

- **Ho Chi Minh Communist Youth Union**

Ho Chi Minh Communist Youth Union conducts volunteer patrols and awareness-raising activities in the village, such as disaster prevention, blood donation, environmental sanitation, and flood prevention. Through participation in these social service activities, the Youth Union aims to train young people who can become future candidates for Party leadership [4].

(7) Social security-related budget

As Vietnam is not a member of the Organization for Economic Cooperation and Development (OECD), it does not publish statistical data on "social expenditure" based on OECD standards, which is often used for international comparisons of social security. In addition, the International Monetary Fund (IMF) Government Finance Statistics database does not include data for Vietnam. Table 9-6 shows the trends in expenditures by sector based on the statistical data on government expenditures published by the Ministry of Finance. Although the Survey Team has not been able to confirm the definition and breakdown of each item, in recent years, the share of expenditure on social security in total government expenditure has remained at around 7-8%.

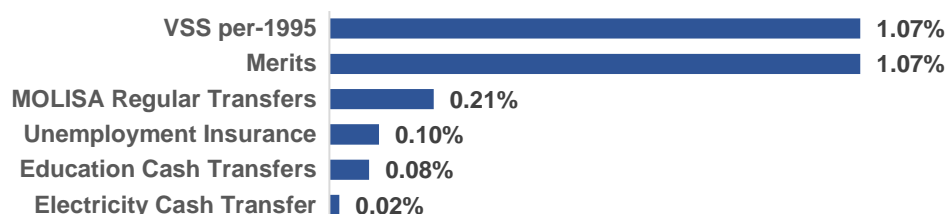
Table 9-6 Government Expenditure by Sector

Items	2017		2018		2019	
	Billion VND	%	Billion VND	%	Billion VND	%
General government expenditure	966,326		1,023,883		1,121,273	
A. Supplement for local budgets	194,250	20.1	198,529	19.4	211,281	18.8
B. Central government expenditure	564,531	58.4	572,610	55.9	586,806	52.3
I. Development investment	81,122	8.4	71,507	7.0	66,817	6.0
II. Interest payment	95,406	9.9	104,443	10.2	104,989	9.4
III. Aid spending	1,362	0.1	1,460	0.1	1,358	0.1
IV. Current expenditure	385,303	39.9	393,268	38.4	411,941	36.7
1. Education, training and vocational training	15,647	1.6	16,925	1.7	15,690	1.4
2. Science and technology	6,975	0.7	8,378	0.8	9,126	0.8
3. Health expenditure, population and family	6,929	0.7	13,929	1.4	11,170	1.0
4. Information and culture	1,339	0.1	1,598	0.2	1,429	0.1
5. Radio, television, news agencies	1,721	0.2	1,568	0.2	1,714	0.2
6. Sports	617	0.1	663	0.1	754	0.1
7. Environmental protection	691	0.1	736	0.1	627	0.1
8. Economic activities	23,463	2.4	22,032	2.2	23,056	2.1
9. activities of state management agencies, parties and mass organizations	43,507	4.5	41,243	4.0	44,415	4.0
10. Social security	82,239	8.5	79,643	7.8	80,544	7.2
C. Transfer resources to the following year	81,215	8.4	113,808	11.1	182,011	16.2
D. Additional specifications for local budgets	126,330	13.1	138,937	13.6	141,175	12.6

*% is the percentage of total government expenditure.

Source: Prepared by the Survey Team with reference to [24]

Figure 9-4 shows the ratio of the government's social security-related expenditures to GDP in Vietnam in 2013 by major program, as presented by UNDP [15]. It should be noted that this figure does not include expenditures on social health insurance schemes and emergency assistance. It can be seen that the overall ratio of social security expenditures to GDP is about 2.6%, and that pensions for civil servants who retired before 1995 (corresponding to “VSS pre-1995” in the figure) and benefits for revolutionary workers (corresponding to “Merits” in the figure) each account for about 1% of GDP. In addition, 0.21% is spent on social assistance (corresponding to “MOLISA Regular Transfers” in the figure), 0.02% on electricity cash transfers for the poor (corresponding to “Electricity Cash Transfer” in the figure), 0.10% on unemployment insurance (corresponding to “Unemployment Insurance” in the figure), 0.08% for scholarships for the poor and ethnic minorities (corresponding to “Education Cash Transfers” in the figure).



Source: Prepared by the Survey Team with reference to [15]

Figure 9-4 Government social security-related expenditures as a percentage of GDP by program, 2013

9.1.2 Situations in the areas related to social service workforce

(1) Elderly people

Vietnam has entered the aging society in 2017, following Thailand and Singapore among ASEAN countries. It is also the second fastest aging society after Brunei. Considering the difference in economic level between Vietnam and Singapore and Brunei, Vietnam is one of the ASEAN countries most likely to face the serious issue of “getting old before getting rich”. The Constitution of 1992 stipulates that the State shall support the elderly, and the Decree on the Elderly (23/2000/PL-UBTVQH10) was adopted in 2000 based on the same Constitution. In response, MOLISA and the Vietnam Association for the Elderly (VAE) jointly prepared a draft law on the elderly, and the Law on the Elderly (39/2009/QH12) was enacted in 2009 and came into effect in 2010. Based on the Law, the Prime Minister's Decision on the National Action Plan for the Elderly 2012-2020 (1781/QD-TTg) was adopted in 2012, and a number of legal documents have been adopted, including the Decree on Guidelines for the Implementation of the Law on the Elderly (06/2011/ND-CP). In 2004, the Vietnam National Committee on Aging (VNCA) was established to assist the Prime Minister in formulating policies and plans for the elderly [23]. Also, in 2020, the Prime Minister's Decision (1579/2020/QD-TTg) on the Health Program for the Elderly until 2030 was adopted.

As for the current status of the elderly, although about 70% of the elderly will be living with their families, including children, as of 2019, the percentage of elderly living alone and households with only elderly couples has increased in the decade since 2009 in both urban and rural areas. Regarding the decline in physical functioning, 25% of the elderly have problems with their eyesight, 19% with their hearing, 26% with their walking, and 21% with their memory and concentration [25]. Regarding abuse of the elderly, the percentage of the elderly who reported having experienced violent behavior or neglect increased from 7.3% in 2007 to 11.6% in 2012. In terms of the nature of the violence, the most common type of violence was damage to self-esteem at 38%, followed by verbal and physical violence at both 23% [26].

(2) Persons with disabilities

According to a national survey on disability conducted with the support of UNICEF in 2016, the number of people with disabilities in Vietnam was reported to be 6,199,408 (7.1% of the population aged 2 years and above) as of 2016 [27]. According to the statistics as of 2005 presented in the Government Report 81/BC-CP, the following types of disabilities were reported: motor disability 29%, nervous system disability 17%, visual disability 14%, hearing disability 9%, speech disability 7%, intellectual disability 7%, and others 17%. In terms of the causes of disability, 36% were congenital, 32% illness, 26% war, 3% industrial accident, and 3% other. With regard to the third factor mentioned, war, this is due to the fact that Vietnam has experienced many wars in recent years, including anti-French, anti-Japanese, anti-US, invasion of Cambodia, and the Sino-Vietnamese War [28]. In addition, some diseases caused by Agent Orange are still a problem in Vietnam, such as those that do not cause any symptoms at birth but develop in adulthood, and those that develop across generations [29]. Although traffic accidents are not mentioned as a factor here, it has been pointed out that the number of people with disabilities caused by traffic accidents will increase because traffic accidents have become a frequent social problem due to various factors such as the spread of motorcycles and automobiles, traffic rules, and road maintenance [30]. In addition,

according to the Review Report on the Implementation of the Master Project on Social Work Development Period 2010-2020, the number of people with mental illness is expected to increase from 10 million in 2019 to around 12 million in 2030 (about 11% of the total population) [31].

The Vietnamese government established the National Coordinating Council on Disability (NCCD) in 2001 with representatives from various ministries and agencies to coordinate domestic support for people with disabilities. In 2010, it adopted the Law on Persons with Disabilities, and in 2012, it launched the National Action Plan on Disability Support 2012-2020, and in 2014, it launched the National Action Plan on Rehabilitation 2014-2020. It also ratified the UN Convention on the Rights of Persons with Disabilities (CRPD) in 2014, and established the National Council on Disability (NCD) in 2015 to replace the NCCD. In 2020, it adopted the Disability Support Program 2021-2030, which outlines activities and targets to be implemented in the areas of healthcare, education, employment and life support, disaster prevention, access to buildings, transportation and information and communication technology, and support for women with disabilities [27].

(3) Children and families

Vietnam was the first country in the Asian region to ratify the United Nations Convention on the Rights of the Child (CRC), which was signed in January 1990 and ratified in February 1990. In 1991, the Decree on the Protection, Care and Education of Children was upgraded to a law [32]. As a result of the rapid economic growth after the Doi Moi policy and the widening disparities among regions, social problems such as child poverty, street children, and unwanted pregnancy and childbirth have become more serious. The country is working to build a multifaceted child protection system, including the development of the National Action Plan for the Prevention and Eradication of Trafficking in Women and Children (2004-2010), the National Program on the Prevention of Child Labor (2016-2020), and the National Action Plan for Prevention of Child Abuse (2020-2025) [33] [34] [35].

As for the current situation in the child and family sector, poverty is a major factor in the vulnerability of children, with 80% of ethnic minority children unable to go to school and living below the general standard of living. In addition, for adolescents, who make up 23% of the population, mental health has become an issue in recent years due to physical, psychological, and sexual violence at home, at school, and online, as well as the stress of education. As for child protection, about 2,000 cases of child abuse are reported annually, 75% of which are sexual abuse. In terms of child labor, 16.5% of children between the ages of 5 and 17 are engaged in some form of labor. However, the child protection system is not functioning properly due to lack of trained personnel and inadequate budget [36].

(4) People in poverty

The poverty rate, which was recorded at 58% in 1993, has been significantly reduced to 14.2% in 2010 and 2.8% in 2020 due to stable economic growth and the implementation of a large-scale poverty reduction plan called “Project 135” since 1998 [37] [38] [39] [40]. In the Political Reports of the Party Congresses, where national development policies are presented, the term “hunger eradication and poverty reduction” was used until the 11th Party Congress (held in January 2011), but in the 12th Party Congress (held in January 2016), the “hunger eradication” part was deleted and replaced with the term “poverty reduction

policies”. This is believed to indicate the government's recognition that the stage of economic and social development and the content and level of social security required by it have reached a higher level than before [41]. However, there are regional and ethnic disparities in the poverty improvement situation. Poverty rates are higher in rural areas than in urban areas, and for ethnic minorities than for the majority Kinh people, and the pace of improvement is slower. Many ethnic minorities live in mountainous areas and highlands, and factors such as inadequate infrastructure are one of the obstacles to improving poverty [38]. In addition, as mentioned earlier, challenges have been observed in the institutional design and delivery system of social assistance, and the government is working to improve these with the support of development partners.

9.2 Current status of social service workforce development

9.2.1 Planning

(1) Laws, policies and plans

Currently, there is no “law” governing social work in Vietnam, and MOLISA is preparing for its early enactment through the preparation and publication of related legal documents. Although there is no clear definition of social work, various provisions related to social work are included in the Penal Code and Civil Code, and are considered to lay the foundation for the existence and establishment of social work.

Although less legally effective than laws, a number of legal documents have been promulgated that are relevant to social work and social service workforce. The main ones are listed in Table 9-7. In addition to the social welfare sector, legal documents have also been issued to promote the implementation of social work in the education and health sectors (Decision 327/2017/QD-BGDDT issued by the Ministry of Education and Training and Circular 43/2015/TT-BYT issued by the Ministry of Health).

Table 9-7 Main legal documents related to social work and social service workforce

Document Code	Year	Overview
Decree		
17/2013/ND-CP	2013	Amending and supplementing a number of articles of the government's Decree No. 204/2004/ND-CP, of December 14, 2004 on salary regime for cadres, civil servants, public employees, and armed force personnel
Decision of Prime Minister		
32/2010/QD-TTg	2010	Approving the scheme on the development of the social work profession during 2010-2020
1791/2016/QD-TTg	2016	Provisions on Vietnam social work day
112/2021/QD-TTg	2021	Promulgation of the social work development programme for the 2021-2030 period
Decision		
35/2004/QD-BGDDT	2004	Framework for higher education in social work at the university and junior college level
327/2017/QD-BGDDT	2017	Social work development in education (2016-2020)
Joint Circular		
11/2011/TTLT/BTC-BLDTBXH	2011	Guidelines for the use and management of funds for the implementation of social work development projects (2010-2020)
09/2013/TTLT/BLDTBXH-BNV	2013	Guidelines for the functions, duties, authority, and organizational structure of social work service centers

Document Code	Year	Overview
30/2015/TTLT/BLDTBXH-BNV	2015	Prescribes norms and standards for each level of civil servants who specialize in social work.
Circular		
08/2010/TT-BNV	2010	Provisions for the title and job code of social work official
34/2010/TT-BLDTBXH	2010	Regulation of professional standards for social work officials
07/2013/TT-BLDTBXH	2013	Professional standards for social work collaborators at the village level
43/2015/TT-BYT	2015	Rules on operations and organizational forms regarding the implementation of social work services in hospitals
01/2017/TT-BLDTBXH	2017	Professional ethical standards for the social work profession
25/2017/TT-BLDTBXH	2017	Provisions on the conditions, content and form pertaining to examinations and examinations for promotion to professional positions of civil servants engaged in social work in the non-operational sectors of the government
02/2020/TT-BLDTBXH	2020	Guidelines for beneficiary management of social work services provided by social welfare facilities

Source: Prepared by the Survey Team with reference to [31] [42]

As a foothold towards the creation of a social work profession, the “Social Work Development Project for the period 2010-2020” was adopted in the Prime Minister's Decision (32/2010/QĐ-TTg). With this decision on social work development, social work was officially classified as a profession. The program focused on five areas: 1) developing and promulgating a system of legal documents on social work; 2) consolidating and developing the network of facilities related to the provision of social work services; 3) conducting training in social work and developing and improving training and vocational programs; 4) providing communication and information to raise awareness of executives, public officials, and the public about the social work profession; and 5) raising funds from international organizations. As a result, the project has been evaluated as having achieved some success [31].

In January 2021, Prime Minister’s Decision (112/2021/QĐ-TTg), the successor to the above decision, adopted a 10-year social work development program, “Program on Social Work Development for the period 2021-2030”, for the further development of social work (Table 9-8).

Table 9-8 Overall goal and activities of Program on Social Work Development for the period 2021-2030

Overall goal	
To further promote the development of social work in sectors and levels appropriate to the socio-economic development conditions of the country in each period; to raise society’s awareness about social work; to strengthen socialization, improve the quality of social work services in different fields to meet people’s demand for the provision of social work services, heading towards the development of a fair and effective society.	
Activities	
1	To develop and improve the legal framework on social work
2	To strengthen and develop the network of social work service providers and workforce
3	To review the social work workforce and allocate social workers or collaborators to detention facilities, reformatory schools, the judicial system, schools, hospitals, and LISA institutions with priority given to those working with social protection beneficiaries, drug addicts, inmates, and other pressing social issues
4	To develop and refine training programmes and curriculums on social work
5	To research and evaluate the results and effectiveness of social work development, especially social work in the fields of social protection, drug rehabilitation, health, education, justice, LISA, thus providing recommendations, solutions, mechanisms, and policies for the development of social work
6	To conduct dissemination and communication activities to raise awareness of public social work practitioners, and the public about social work

Source: Prepared by the Survey Team with reference to [42]

As mentioned above, there is no definition of social work based on law as there is no law governing social work. However, in the “Review Report on the Implementation of the Master Project on Social Work Development Period 2010-2020” developed by MOLISA in 2020, the following definition of social work is provided.

- Social work provides targeted support to marginalized individuals, families, population groups, and communities, including but not limited to the poor, people with disabilities, children in special circumstances, the elderly, and people affected by violence or social vices, so that they can develop their life skills and employ their own resources and community resources to address their own challenges. Social work also aims to address broader social problems such as employment, poverty, and domestic violence. The mandate of social work is to help human beings fulfill their potentials, enrich their life, prevent challenges from happening to them, and help them address their own challenges [31].

With regard to civil servants engaged in social work, the Ministry of Home Affairs’ Circular (08/2010/TT-BNV) on the title and job code of social work officials in 2010 defines three levels of social service workforce: “principal social worker”, “social worker” and “assistant social worker”. These levels are linked to the government's personnel standards. As for social work collaborators who are engaged in social work in various fields and organizations at the commune level, MOLISA developed and issued a Circular (07/2013/TT-BLDTBXH) in 2013, which outlines the requirements for qualifications and competencies of social work collaborators at the commune level [43].

These civil servants and social work collaborators engaged in social work are specified in the Joint Circular of MOLISA and Ministry of Home Affairs (MOHA) (30/2015/TTLT-BLDTBXH-BNV) and MOLISA’s Circular (07/2013/TT-BLDTBXH-BNV) as shown in Table 9-9.

In the future, it is planned to link the three levels of social service workforce with the degrees earned: the master’s and doctoral degrees in social work as principal social workers, the four-year bachelor's degree in social work as a social worker, and the three-year vocational bachelor’s degree in social work and the two-year diploma as a prerequisite for becoming an assistant social worker [43].

Table 9-9 Title and definition of social service workforce

Title	Definition
Principal Social Worker	Having a bachelor’s degree or higher in a social science major related to social work, sociology, psychology, special education, or social work profession. For those with a bachelor's degree or higher in a social science major in a field other than the above, having a certificate of completion of a professional training program in social work offered by MOLISA. (For promotion from Social Worker to Principal Social Worker, the applicant must have a minimum of nine years of experience as a social worker or equivalent, of which the most recent time holding the title of Social Worker is at least three years.)
Social Worker	Having a bachelor’s degree or higher in a social science major related to social work, sociology, psychology, special education, or social work profession. For those with a bachelor’s degree or higher in a social science major in a field other than the above, having a certificate of completion of a professional training program in social work offered by MOLISA.

Title	Definition
	(For promotion from Assistant Social Worker to Social Worker, the applicant must meet the above degree requirements and have been an Assistant Social Worker for at least two years (if the applicant has a vocational bachelor's degree) or three years (if the applicant has a diploma).
Assistant Social Worker	Having an intermediate (vocational bachelor's or diploma) degree or higher in social work, sociology, psychology, special education, or a social science field relevant to the social work profession. For social science majors other than the above, applicants must have a certificate of completion from a professional training program in social work offered by MOLISA.
Social Work Collaborator	Having a certificate of having attended a training course in social work. Or having a professional degree in social work, psychology, sociology, special education and other fields related to social work.

Source: Prepared by the Survey Team with reference to [44] [45]

(2) Budget

Although the budget breakdown of MOLISA was not available, the “Social Work Development Scheme for the 2021-2030 period” indicates that the total investment for the implementation of the scheme is estimated at 10.155 trillion VND (equivalent to about 51.5 billion JPY). On a yearly basis, this is equivalent to about 2.9% of MOLISA’s budget for 2019. It also provides an estimated budget breakdown for each of the activity items in Table 9-8 above. Two of the activity items, Activity 3, “To review the social work workforce and allocate social workers or collaborators (omitted below)” and Activity 4, “To develop and refine training programs and curriculums on social work”, seem to be strongly related to human resource development of social service workforce. The total of these two items is 357.5 billion VND (equivalent to about 1.8 billion JPY), which is about 1.0% of MOLISA's annual budget for 2019.

Table 9-10 Budget estimates related to human resource development in social work indicated in the “Social Work Development Scheme for the 2021-2030 period”

Activities	Budget estimates
3. To review the social work workforce and allocate social workers or collaborators (omitted below)	
Training and retraining	200 billion VND (4,000 people/year x 5 million VND/person x 10 year)
Training for health workers and social workers	5 billion VND (1,000 people x 5 million VND/person)
Advanced training in care and rehabilitation for specific beneficiaries	25 billion VND (500 people/year x 5 million VND/person x 10 year)
Skills training social workers and collaborators	100 billion VND (5,000 people/year x 2 million VND/person x 10 year)
4. To develop and refine training programs and curriculums on social work	
To research, develop, refine, and issue training programs for bachelor, master and doctoral degrees on social work that are suitable for meeting international integration needs, satisfying the requirements of training standards equivalent to those of the other countries in the region, improving the quality of human resources for social work	12.5 billion VND (2.5 billion VND/year x 5 year (2021-2025))
To support faculties with social work training programs in training institutions	5 billion VND (500 million VND/year x 10 year)
To improve the capacity of social work lecturers/ trainers at intermediate schools, undergraduate programs, and postgraduate programs on social work	5 billion VND (500 million VND/year x 10 year)

Activities	Budget estimates
To support professional social work training at the postgraduate level (masters, doctoral) to provide social work lecturers/ trainers for colleges and universities in the country	5 billion VND (500 million VND/year x 10 year)

Source Prepared by the Survey Team with reference to [42]

Currently, there is no licensing and qualification system for social service workforce. Therefore, in order to establish a licensing and qualification system, MOLISA has prepared a draft Decree on social work that includes provisions on licensing and qualification system for social service workforce and aims to adopt it in 2022. The draft of the Decree includes provisions on licensing and qualifications of social service workforce as shown in Table 9-11.

Table 9-11 Provisions on licensing and qualification system in the draft Decree on social work (excerpt)

Article	Contents
Article 20	(Social workers ²) <ol style="list-style-type: none"> Civil servants perform state management of social work State employees doing social work at public non-business units Social workers in establishments providing social work services in the fields of social welfare, healthcare, education, justice and other fields as prescribed by law Social workers in socio-political organizations, socio-professional organizations, non-governmental organizations, associations, enterprises and other mass organizations Independent social worker
Article 21	(Social work practitioners ³) Social work practitioners are a part of the total number of social workers who have been granted social work practice certificates ⁴ by a competent state agency according to the provisions of this Decree.
Article 22	(Conditions for granting practice certificates to Vietnamese people) <ol style="list-style-type: none"> Possess a professional diploma related to social work granted or approved in Vietnam Have a document certifying the process of practicing social work Have a medical certificate that is sufficient to practice social work Pass the examination as prescribed by the Minister of MOLISA Not be prohibited by court judgment or decision from engaging in or practicing any work related to professional social work (omitted below)
Article 23	(Conditions for granting practice certificates in Vietnam to foreigners) <ol style="list-style-type: none"> Satisfy the conditions specified in Article 22 of this Decree Satisfy the requirements for language communication in social work practice Have a criminal record certified by a competent authority of the host country Have a work permit issued by a competent Vietnamese state agency in charge of labor according to the provisions of the Labor Law If a foreigner has a social work practice certificate issued by a foreign country, he/she shall not participate in the examination for issuance of a social work practice certificate as prescribed in Clause 4, Article 22
Article 25	(Certification of social work practice process) <ol style="list-style-type: none"> A person with a professional degree related to social work granted or recognized in Vietnam, before being granted a practice certificate, must have practiced social work for 18 consecutive months or more at a social work service providing establishment. The head of a social work service providing establishment is responsible for certifying in writing the social work practice process for the person who has done social work at his/her establishment, including content, time, professional capacity and professional ethics

Source: Prepared by the Survey Team with reference to [46]

² “Người làm công tác xã hội” in Vietnamese.

³ “Người hành nghề công tác xã hội” in Vietnamese.

⁴ “Chứng chỉ hành nghề” in Vietnamese.

(3) Ministry structure related to social service workforce

MOLISA is in charge of social work and social service workforce, and within MOLISA, the Department of Social Protection is mainly in charge. At the central level, in addition to MOLISA, the Ministry of Health (MOH), the Ministry of Education and Training (MOET), the Ministry of Justice (MOJ), the Ministry of Information and Communication (MIC), and other ministries and agencies, as well as the Vietnam Association for Vocational Education - Training and Social Work Profession (VAVETSOW), Vietnam Relief Association for Handicapped Children, and Vietnam Association for the Elderly (VAE) are involved in the promotion of social work and the planning, development and support of social service workforce.

At the local level below the provincial level, the Department of Labour, Invalids and Social Affairs (DOLISA), the Department of Health (DOH), etc. promote social work and plan, develop and support social service workforce.

(4) Information and data on human resources

Up to now, the contingent of social work civil servants, workers, and collaborators working in social work has about 318,000 people, of which there are 118,000 people working in the public and non-public social work service facilities, nearly 100,000 people work in associations and unions at all levels; over 100,000 collaborators in poverty reduction, social evil prevention, child protection, and community development, etc. Social work collaborators account for about one-third of the total number of social service workforce.

Table 9-12 Breakdown of social service workforce working in public and non-public social work service facilities by affiliation

Level/Institution	Quantity	Organizations employing social service workforce	Qualification ⁵	Total
Commune/Ward	10,614	MOLISA's subordinate organizations at commune level, mass organizations	BT&CG	37,000
District	707	DivLISA, mass organizations	BD	21,500
			PG	2,500
Establishments	500	Social protection establishments, social work centers ⁶	BT&CG	9,000
			BD&PG	21,000
Province	63	DOLISA, mass organizations	BD	5,000
			PG	1,000
Central	8	MOLISA, mass organizations	BD	150
			PG	150
Universities and Colleges	55	Faculties and divisions with social work education	BD	200
			PG	1,000
Hospitals	1,025	Social work departments and groups	BD	4,500
			PG	1,500
Education and training institutions	28,000	Student support departments and groups	BD	10,000
			PG	2,000
Vocational institutions, others	21	Faculties/divisions, NGOs	BD	1,300
			PG	200
Total				118,000

Source: [42]

⁵ BT: basic training in social work at social work center, CG: college graduate in social work, BD: bachelor's degree in social work, PG: postgraduate in social work

⁶ See エラー! 参照元が見つかりません。 .

In addition, the Politburo of the Communist Party of Vietnam is in the process of integrating the information on cadres and staff of the entire political system and other official organizations into the Officials Database (OBD). The database includes the Vietnam Fatherland Front and its constituent organizations, and when it becomes operational, it will be possible to manage information on human resources of officials of public institutions in the field of social work [47].

9.2.2 Development

(1) Educational institutions and systems

Currently, professional education in social work is offered in Vietnam in doctoral, master's, and bachelor's programs, as well as in diploma programs at colleges.

In 1992, after the end of the Vietnam War in 1975, the Faculty of Women at Ho Chi Minh City Open University became the first to offer education and training at the diploma level in social work [49]. Later, in 2004, the Ministry of Education and Training (MOET) adopted Decision (35/2004/QĐ-BGDĐT) on the framework for higher education in social work at the university and college Level, which established the social work bachelor (4 years), vocational bachelor of social work (3 years) and diploma of social work at college (2 years) curricula were approved. This marked the beginning of a full-scale effort on professional education in social work. Master's and doctoral programs in social work were launched in 2011 and 2016, respectively [43].

Currently, 58 universities offer bachelor's programs, 7 universities offer master's programs, 2 universities offer doctoral programs, and 28 other vocational training schools offer diploma programs, creating a comprehensive system of professional education and training in social work in Vietnam [43] [49]. In addition, more than 3,000 bachelor's degree graduates, hundreds of master's degree graduates, and about 3,500 diploma graduates are produced annually. Despite this steady increase in the number of graduates, it has been pointed out that there is too much focus on quantity rather than quality [31] [49].

About 70% of the curriculum of Vietnamese higher education institutions is determined by MOET, and the remaining 30% can be determined by universities on their own. As a result, there are many subjects that are common among universities. For example, "Marxist-Leninist Philosophy," "History of the Communist Party of Vietnam," and "National Defense Education," which are unique to socialist countries, are compulsory. In addition, "Law," "Psychology," "Sociology," and "Logic" are placed as basic subjects, and "Community Health," "Developmental Psychology," "Introduction to Social Welfare," "Social Policy," "Field Training," "Child and Family Welfare," and "Specialized Training" are placed as specialized subjects. In addition, the curriculum approved by MOET in 2004 was revised in March 2010, with fewer courses related to general knowledge and more courses related to specialized knowledge (especially practical) [51].

The following is an overview of social work education at two universities that have been providing social work education from a relatively early stage.

1) Hanoi National University of Education

Hanoi National University of Education, founded in 1951, is one of the largest universities of education in Vietnam, and started a program for human resource development of social service workforce in 2004. The Faculty of Social Work was established in 2011 on the basis of (and partially separated from) the Faculty of Special Education and the Faculty of Political Education [52]. In 2017, a master's program was established. The Faculty of Social Work has 24 faculty members, 70-100 bachelor's students per academic year, and 200 master's graduate students [52].

In the bachelor's program, in the fourth year, students are required to choose from three courses: a course focusing on social policy (Specialization 1: social work for political and social organizations and mass organizations), a course focusing on community welfare (Specialization 2: social welfare and community development), and a course on helping children in special difficulties (Specialization 3: social work for children) (Table 9-13). There are eight credits for practical training.

**Table 9-13 Bachelor Program Curriculum of Hanoi National University of Education
(4th year professional program)**

Specialization 1: Social work in political and social organizations and mass organizations	Specialization 2: Social welfare and community development	Specialty 3: Children's social work
Social equality and progress	Social equality and progress	Social work on street children and child labor
Poverty alleviation and unemployment solutions	Poverty alleviation and unemployment solutions	Social work for orphans
Population and family planning	Population and family planning	Social work for children with disabilities
Social ills and HIV prevention	Social ills and HIV prevention	School social work
Social work in the communist party and the Vietnam fatherland front	Organization and development of urban areas	Social work for ethnic minority children
Duties of labor unions and their promotion to workers	Rural and farmers' social work	Social work for abused children
Juvenile, adolescent, and children's social work	Regional development in mountainous areas and islands	Social work with drug addicted children and children living with HIV
Women's social work	Social work for ethnic minorities	Social work for juvenile offenders
Organization of experienced people and youth volunteers in society	Social work with narcotics patients and sex workers	Social aid
School social work	Social work for the disabled and war victims	Planning and management of regional development plans
Religious social work	Social work for people living on the streets	Mental health of children
Social work for the Elderly Association	People living with HIV and social work	Counseling for children and families
Social work at the Red Cross	Social work with offenders	Child and family welfare
Field training in political and social organizations and mass organizations	Field training in social welfare and community development	Children's rights
Graduation Thesis / Graduation Examination	Graduation Thesis / Graduation Examination	Field training
		Graduation Thesis / Graduation Examination

Source: Prepared by the Survey Team with reference to [50]

The master's program offers a total of five courses (about 50 students per course) focusing on social work in schools and social work in hospitals. It is also aiming to establish a doctoral program, the third in the country after the Graduate Academy of the Social Sciences and the University of Social Sciences and Humanities in Ha Noi.

In terms of career and employment opportunities for students, there is a wide range, including MOLISA and other ministries, local government organizations (provinces and districts), various social organizations, and NGOs, but it does not seem to be a stable employment opportunity [52].

Currently, the Faculty of Social Work has partnerships with universities in the U.S. and Belgium, inviting lecturers from abroad, conducting short-term overseas training for teachers, in order to improve the skills of teachers. The department is also hoping to form partnerships with Japanese universities and has already begun exchanges with Ritsumeikan University and others.

2) Ho Chi Minh City Open University

Ho Chi Minh City Open University is the oldest university in Vietnam that provides professional education for social service workforce before the Decision of MOET in 2004. The Faculty of Sociology-Social Work-South East Asian Studies was established in 2011 after the subsequent reorganization of the Faculty of Women's Studies, which was established in 1992. Currently, the faculty offers an undergraduate program in social work [54]. A four-year bachelor's program was established in 2001. It was when the Faculty of Women's Studies expanded its two-year diploma program to offer a four-year bachelor's degree [48].

The curriculum of the bachelor's program is shown in Table 9-14. It can be said that the curriculum setting has been built up from the experience and achievements of the South in dealing with social problems unique to its experience with capitalism, and the university's own curriculum has been not many due to its policy of setting an example (prototype) for the national curriculum. There are eight credits for practical training [50].

Table 9-14 Bachelor Program Curriculum of Ho Chi Minh City Open University

Subject	Credit	Subject	Credit
[General education courses]	56	Gender development	3
(1) Marxist-Leninist subject group	22	Family studies	3
1. Marxist-Leninist philosophy	6	Sociological research techniques	3
2. Marxist-Leninist Political Economy	5	Developmental psychology	3
3. Scientific Socialism	4	Social psychology	3
4. History of the Communist Party of Vietnam	4	Human behavior and social environment	3
5. Ho Chi Minh Thought	3	(2) Specialized education subject group	50
(2) Social sciences and humanities subject group	20	a. Required subject group	38
1. General education	3	Introduction to social welfare	3
2. Introduction to communication	3	Individuals and social welfare	3
3. Basic management	3	Groups and social welfare	3
4. Macroeconomics	3	Organization and community development	4
5. Social statistics	3	Practical training (1)	6
6. Demographics	3	Practical training (2)	6
7. Introduction to Library Science	2	Social welfare and social problems	4
Foreign language	10	Social policies	3
[Physical education]	5	Counseling	3
[National defense education]	165 hours	Social welfare management	3
[Specialized education courses]	134	b. Specialized subject groups planned by the university	12
(1) Specialized basic education subject group	47	Child and family welfare	3
a. Required subject groups	19	Planning and management	3
Introduction to Vietnamese culture	3	Mental health	3
Introduction to Law	3	Social welfare and people with disabilities	3
Introduction to Psychology	3	c. Supplementary subject group	19
Introduction to Sociology	4	Applications of computer in social science	4
History of world civilizations	3	Special English	10
Logic	3	Small business management	3

Subject	Credit	Subject	Credit
b. A group of courses planned by the university	28	Counseling children who live in exceptionally difficult environments	2
Development studies	3	(4)Final practical training (3)	8
Introduction to Anthropology	3	(4) Graduation Thesis or Graduation Examination	10
Community health	3		
(Continued on top right)			

Source: Prepared by the Survey Team with reference to [50]

In terms of career and employment opportunities for students, many students find employment in local administrative organizations such as the People’s Committee, mass organizations such as the Vietnam Women's Union, the Ho Chi Minh Communist Youth Union, and the Red Cross, while others work for international organizations and NGOs, or engage in research and education [54] [50].

3) Challenges

As challenges related to social work education, it has been pointed out that subjects and teaching materials related to human services are limited [50], and the linkage between theory and practice is weak. The reasons for this are that the curriculum does not place emphasis on practical training and is inadequate in terms of time and quality of training, and that the number of training facilities is still limited [49].

There is also a challenge in the quality of teachers involved in social work education. According to a survey conducted by the Vietnam Association of Schools of Social Work in 2017 among 58 educational institutions, the degree attainment status of all 687 teachers in 46 responding institutions is shown in Table 9-15. This survey revealed that most of the faculty members at institutions that have been providing social work education for many years have a master’s degree of social work. However, even in such institutions, the percentage of faculty with a doctoral degree in social work is very low. This is a challenge in promoting graduate education in social work. In addition, the low number of lecturers with degrees in social work in newly established institutions was also found to be a challenge [49].

Table 9-15 Degree attainment of faculty members in social work educational institutions

Degree \ Major	Social work	Psychology or Sociology	Others (pedagogy, economics, etc.)
Ph.D	1%	13%	6%
Master	15%	27%	23%
Bachelor	3%	3%	6%

Note: Rounding below the decimal point

Source: Prepared by the Survey Team with reference to [49]

(2) Continuing education

Continuing education is primarily under the jurisdiction of MOLISA, which works annually or periodically with universities and other educational institutions to implement the following initiatives [49].

- Conducted training for 500 teachers from universities and diploma colleges across the country in collaboration with universities
- Held 8 advanced training classes for 800 senior social workers and managers in the North and South
- Conducted TOT training for 25 university faculty members

- Supported capacity building for approximately 10,000 social service workforce nationwide on various topics including the persons with disabilities, the elderly, the poor, the person with mental disabilities, and gender
- Conducted training for more than 1,050 staff involved in mental health and welfare nationwide
- Collaborated with the University of Labour, Social Affairs and a number of other educational and training institutions to develop specialized training programs on social work in rural and mountainous areas, social work for children with autism, etc., and conducted capacity building training for hundreds of managers and social service workforce
- Organized training courses for staff working in care, education and rehabilitation facilities, social protection facilities and social work centers for children with disabilities in the northern, central and southern regions in 2019 in cooperation with Hanoi National University of Education and a number of related universities.

In addition to MOLISA, NGOs and other organizations working in the field of social work also provide short-term training programs. UNICEF, for example, emphasizes the importance of social work in the protection of children from violence and abuse, and conducts TOT training. Although these short-term trainings are conducted not only by UNICEF but widely, each training provider has its own program, and there is a need to create a unified program to avoid confusion among trainees [49].

9.2.3 Support

(1) Employment and retention

In this survey, statistical data showing the career paths of graduates of social work universities nationwide was not available. It was confirmed that educational institutions such as Hanoi National University of Education conduct their own surveys of their own students, but there may be currently no nationwide compilation of these results. At the Faculty of Social Work, Hanoi National University of Education, most of the approximately 100 graduates each year are employed in jobs related to social work. Some of them are employed by educational institutions or NGOs. However, it has been reported that in the country as a whole, many graduates majoring in social work do not find jobs related to social work [43].

This can be attributed to the fact that the expansion of the education system is being promoted ahead of the creation and establishment of the social work profession [43]. Another contributing factor is the reduction in the number of civil servants due to the impact of the adoption of Resolution 18/2017/NQ-TW on organizational reform of the government and administration [43] [55].

In the context of the government's policy to reduce the number of civil servants, it has been pointed out that it is not effective to require existing MOLISA/DOLISA staff to carry out more complex case work and social work tasks. As for those who are engaged in social work in mass organizations such as the Ho Chi Minh Communist Youth Union, there is a system of personnel transfer such as rotation, which affects the maintenance of the quality of social service workforce and also increases the cost of human resource development. In addition, the high workload and low wages of social service workforce are also seen as a challenge [43].

(2) Professional organizations

Currently, there is a professional association for social workers in Vietnam called Vietnam Association of Vocational Education - Training and Social Work Profession (VAVETSOW). VAVETSOW was established in 2013 when the former Vietnam Association of Vocational Training absorbed the Vietnam Association of Social Workers [43]. The predecessor, the Vietnam Association of Social Workers, was established in 1970 and was a member of the International Federation of Social Workers (IFSW) [51]. Under the umbrella of VAVETSOW, there is the Vietnam Association of Schools of Social Work [43] [56].

In addition, there are various other professional associations related to the promotion of social work, including the National Association of Psychologists, the Clinical Psychologist Association, and the Child's Right Association [43].

(3) Network

With the adoption of the Joint Circular (09/2013/TTLT/BLDTBXH-BNV) by MOLISA and MOHA in 2013, the establishment of a national network of institutions and facilities providing social work services is underway. In accordance with the Joint Circular, MOLISA and MOHA instructed local authorities to reorganize 425 social protection centers nationwide into social work centers that also provide social work services, and to privatize 40% of the targeted facilities. In cooperation with MOLISA and the Ministry of Finance, about 40 provinces and districts have been designated as priority target areas and a model for social work centers is being developed. The network of institutions and facilities providing social work services includes institutions and facilities in various fields including healthcare and education, as well as related associations, political and social organizations. To date, the model has been reported to be operating effectively in Quang Ninh, Da Nang, Ben Tre, Long An, Thanh Hoa, Ho Chi Minh City, etc. [42] [31].

In addition, the development and issuance of MOLISA's Circular 07/2013/TT-BLDTBXH, which provides criteria for social work collaborators at the village level, has promoted the inclusion of social work collaborators, who account for about one-third of the total number of social service workforce in the country, in the network of social service workforce.

(4) Code of ethics

Circular 01/2017/TT-BLDTBXH (professional ethical standards for social workers) by MOLISA in 2017 establishes ethical standards for social service workforce. The Circular contains provisions very similar to the IFSW's code of ethics with regard to the basic principles of social work and professional ethics [49].

(5) Career development

In Vietnam, efforts to improve and establish the status of social service workforce as professionals are progressing, such as the formulation of a Decree to establish a certification system for social service workforce. However, in this survey, the information about specific efforts or attempts related to the career development of social service workforce was not available. Career paths and career development for social service workforce will be a challenge to be discussed in the future.

(6) Supervision system

Supervision is an important activity to maintain and improve the professionalism of social service workforce and their ability to carry out their duties. In a UNICEF survey of 180 social service workforce, 99.5% had a supervisor and supervision took place. About 88% of them said that supervision was useful [44]. Although supervision is conducted, it is not clear whether supervision is conducted not only from the perspective of education and management of social service workforce, but also to support the execution and continuation of duties by social service workforce (supportive supervision).

(7) Public awareness raising

Since the implementation of the National Program on Social Work Development for the period 2010-2020, various promotional and awareness activities have been undertaken to promote the development of the social work profession. For example, the Ministry of Information and Communication (MIC) developed and published a communication plan for the development of the social work profession for the period 2011-2015. MOLISA established a website⁷ to contribute to the development of the social work profession and disseminate information to researchers, university faculty, the media, and social service workforce, etc. In addition, through media organizations such as Vietnam Television and the Voice of Vietnam⁸, MOLISA disseminates news and articles to the public related to the development of the social work profession, including publicity related to the Social Work Day commemorative activities, and promotes understanding of the role of social work and its services. It also provides financial support to local government organizations at various levels to carry out public awareness activities related to social work [31].

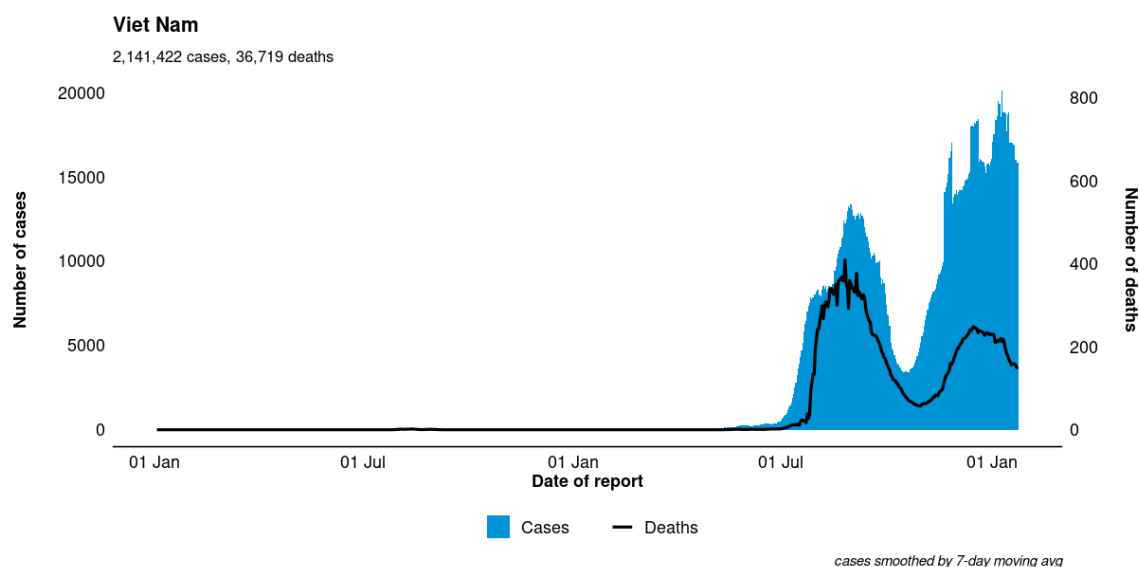
9.3 Impact of COVID-19 on the social welfare sector

9.3.1 Overview of the impact of COVID-19 on the social welfare sector

The trend of the number of COVID-19 cases in Vietnam is shown in the figure below. Although the first case of infection in the country was confirmed on January 23, 2020, strict border control measures were taken to prevent the spread of infection, and the country is initially regarded as a success. On the other hand, the so-called fourth wave, which began on April 27, 2021, has been prolonged and is now in the midst of a wave of infection spread that has surpassed it. As of 9:00 a.m. on January 25, 2022, the cumulative number of infected people was 2,155,784 and the number of deaths was 36,884. The social and economic impact has also been significant, with job losses and reduced incomes across the country, as well as school closures, temporary suspension of healthcare services, and higher prices for food, masks, and other necessities [57].

⁷ <http://congtaqxahoi.molisa.gov.vn>

⁸ A state-run comprehensive mass media company directly under the Vietnamese government, with media including radio, television, newspapers, and electronic newspapers.



Source : [60]

Figure 9-5 Number of new cases of COVID-19 infection and deaths in Vietnam

9.3.2 Issues and initiatives in relation to social service workforce

Residents in social protection centers also faced many difficulties. During the early days of the pandemic, almost all centers faced shortages in supplies, such as soap and hand sanitizers, making it difficult for residents to wash hands to prevent infection. As social distancing measures were introduced, the centers closed doors to visitors, including residents' family members. Residents, especially children, in the centers experienced a deep sense of isolation with no family visiting them, a lack of interaction with friends due to extended school closures and limited or no opportunities to spend time outside centers. All social protection centers experienced challenges with online learning, with most centers' computers unavailable to children [58].

Thus, the residents of social protection centers are experiencing multiple difficulties due to the impact of the spread of COVID-19 infection, and investment in measures to strengthen community-based resident protection and social work systems is an important issue. In addition to building a network of social service workforce at the provincial, district and village levels, there is also a need to strengthen case management systems by training local child protection officers to be able to quickly detect pandemics and other crises and provide services related to child protection [58].

9.4 Priority issues for developing and strengthening social service workforce

In Vietnam, MOLISA is leading various efforts to strengthen “planning”, “development”, and “support” of social service workforce. For “planning”, the “Social Work Development Program 2021-2030” was adopted in January 2021, and specific policies for the development of social work were presented. As for “development” and “support”, policies have been established to enhance training programs, strengthen human resource networks, and share results through social work in line with the program. From now on, it will be necessary to put these policies into practice in concrete ways. The following three points are priority challenges for strengthening social service workforce that were discussed based on the results of this survey.

9.4.1 Enactment of laws pertaining to social work

In the “Social Work Development Program 2021-2030”, which is the guidelines for social work development in Vietnam, the first activity item is “to develop and improve the legal framework on social work”. Many legal documents on social work have already been issued by the MOHA and MOLISA, but it is necessary to enact Laws with stronger effect for the entire Vietnamese government to work on the development of social work rather than under the jurisdiction of ministries. The enactment of Laws will dramatically increase the thrust of policies related to social work.

9.4.2 Improving the quality of pre-graduate education

Numerous educational institutions offer social work programs in Vietnam, including 58 universities and 28 vocational training schools. These institutions produce more than 3,000 bachelor's degree graduates and about 3,500 diploma graduates per year, and the training of social workers in a quantitative sense has been steadily progressing. On the other hand, qualitative improvement of pre-service education is a challenge. Some issues on curriculum such as “limited subjects and teaching materials related to human services”, “weak connection between theory and practice”, and “insufficient time for practical training” have been pointed out, as well as the lack of teachers with degrees in social work. Considering these points, it would be effective for MOLISA, the MOET, universities, and professional associations to review pre-service curricula and consider improvements to meet the needs of the field, and to promote capacity building for teachers.

9.4.3 Strengthening the capacity of social work collaborators

The number of social service workforce in the MOLISA database has reached 318,000, of which about a third are social work collaborators. In the MOLISA’s Circular, social work collaborators are defined as “those with a certificate of participation in a training course in social work or a degree in social work or a related field” and are positioned as those who work in the field of social work in the community or social welfare facilities at the village level. They are those who are directly involved with people who need support, and it is desirable to actively strengthen their capacities and practices through supervision and continuing education. Specifically, it can be considered to increase opportunities for on-the-job training by professional social workers to accumulate practical experience, and to prepare a bridge training program for career advancement from social worker collaborators to assistant social workers.

Chapter 10 Experience and Resources on Developing Social Service Workforce in Japan

10.1 Overview of social welfare sector

This section provides an overview of the field of social welfare in which social service workforce are situated, including the concept of social welfare, relevant laws, policy implementation systems, finance, and the situation in each field of social welfare.

10.1.1 Policies, systems and challenges for social welfare

(1) Concept and definition of social welfare

In Japan, the term “social welfare” was first mentioned in Article 25 of the Constitution of Japan enacted in 1946. As described below, Article 25 of the Constitution of Japan stipulates that all people have the right to life and that the state has the obligation to ensure the lives of the people.

[Article 25, the Constitution of Japan]

All people shall have the right to maintain the minimum standards of wholesome and cultured living.

In all shapes of life, the State shall use its endeavors for the promotion and extension of social welfare and security, and of public health.

In Article 25 of the Constitution of Japan, however, the concept of “social welfare” was not clearly defined, and there are various interpretations by researchers, either as an objective concept or as a policy concept. Later, in 1950, the Advisory Council on Social Security¹ issued the “Recommendation on Social Security System (1950 Recommendation), which defined social welfare as “the provision of necessary guidance, rehabilitation, and other support so that persons receiving state assistance, persons with physical disabilities, children and other persons in need of support are able to live on their own and demonstrate their capabilities [1]”.

(2) Laws related to social welfare

Table 10-1 summarizes the relevant laws in the field of social welfare. Prior to the Second World War, private relief by family members, neighbors, etc. was the basis of social welfare, and relief by the state was limited to those who had no relatives. As mentioned above, after the Second World War, social welfare was positioned as a right of the people with the establishment of the Constitution of Japan. Then, laws relating to child welfare, public assistance, welfare for the people with disabilities and welfare for the elderly were developed, and in 1964 the so-called “Six Welfare Laws²” system was established.

¹ Established in 1949 as an advisory body to the Prime Minister.

² Including “Public Assistance Act”, “Child Welfare Act”, “Act on Welfare of Physically Disabled Persons”, “Act on Welfare of Mentally Retarded Persons”, “Act on Social Welfare for the Elderly”, and “Mother and Child, Father and Child and Widows Welfare Act”.

Table 10-1 Laws related to social welfare

Category	Title	Year	Contents
General Social Welfare	Social Welfare Act	1951	The act aims to specify fundamental particulars in all fields of services aimed at social welfare and, in conjunction with other laws that aim at improving social welfare, to protect the interests of welfare service users and further social welfare in local communities (hereinafter referred to as "Community Welfare "), as well as ensuring fair and appropriate implementation of social welfare services and facilitating the sound development of services aimed at social welfare, and to thereby contribute to increased social welfare.
Protection and Assistance	Public Assistance Act	1950	The purpose of this act is for the State to guarantee a minimum standard of living as well as to promote self-support for all citizens who are in living in poverty by providing the necessary public assistance according to the level of poverty, based on the principles prescribed in Article 25 of the Constitution of Japan.
	Act on Self-Reliance Support for Needy Persons	2013	The act aims to promote the self-reliance of persons in need by providing services related to the support of self-reliance for needy persons.
Child Welfare	Child Welfare Act	1947	Positioned as the basic law for child welfare. It aims at the sound development and continuous promotion of the welfare of all children, not only those in need of social protection.
	Child Rearing Allowance Act	1961	In order to contribute to promoting a stable life and independence of families in which children whose fathers or mothers do not share the same livelihood, the act regulates for the provision of allowance for such children.
	Mother and Child, Father and Child and Widows Welfare Act ³	1964	The act aims to take necessary measures for the stable and improved lives of single-mother families, single-father families , and widows, and to promote their welfare.
	Child Allowance Act	1971	The act aims to contribute to the stable living conditions of families by providing allowances to those who take care of children, and to contribute to the healthy growth of children who will be responsible for the next generation of society.
	Act on Regulation and Punishment of Acts Relating to Child Prostitution and Child Pornography, and the Protection of Children	1999	The act aims to punish activities related to child prostitution and child pornography, to provide for the protection of children who have been victimized, and to protect the rights of children.
	Act on the Prevention, etc. of Child Abuse	2000	The act stipulates the definition of child abuse, the prohibition of child abuse, the responsibility and authority of administration in relation to the prevention of child abuse, the obligation of concerned parties to make efforts for early detection, and the obligation of the discoverer to report the abuse.
Welfare for people with disabilities	Act for the Welfare of Persons with Physical Disabilities	1949	The act aims to promote the welfare of persons with physical disabilities by assisting and, where necessary, protecting them in order to promote their independence and participation in social and economic activities.
	Act for the Mental Health and Welfare of the Persons with Mental Disorders	1950	The act aims to promote the welfare of the persons with mental disorders and to improve the mental health of the people by providing medical care and protection

³ Enacted in 1964 as "Mother and Child Welfare Act" and amended in 1981 to "Act on Welfare of Mothers with Dependents and Widows", which also covers widows, and in 2014 to "Mother and Child, Father and Child and Widows Welfare Act", which also covers fathers and children.

Category	Title	Year	Contents
			encouraging their rehabilitation, self-reliance and participation in socio-economic activities, and by promoting their prevention and other efforts to maintain and improve the mental health of the people.
	Act for the welfare of persons with intellectual disabilities	1960	The act aims to promote the welfare of persons with intellectual disabilities by assisting and providing necessary protection for them in order to promote their self-reliance and participation in social and economic activities.
	Basic Act for Persons with Disabilities	1970	The act aims to promote measures to support the independence and social participation of persons with disabilities in order to achieve a society of coexistence with mutual respect for personality and individuality, regardless of whether or not people have a disability.
	Act on Support for Persons with Developmental Disabilities	2004	The act aims to support people with developmental disabilities in all aspects of their lives in order to contribute to their independence and social participation, and thereby contribute to the promotion of the welfare of them.
	Act on the Comprehensive Support for the Daily and Social Life of Persons with Disabilities	2005	The act aims to contribute to the realization of a community in which citizens, with or without disabilities, can mutually respect their personality and individuality and live with ease.
Welfare for the elderly	Act on Social Welfare for the Elderly	1963	The act aims to clarify the principles governing welfare for the elderly, to implement measures for elderly persons as may be necessary for the maintenance of their physical and mental health and for the stabilization of their livelihoods, and thereby to promote the welfare of the elderly.
	Long-Term Care Insurance Act	1997	The act aims to establish a long-term care insurance system as a mechanism to support long-term care in society as a whole, to provide benefits for necessary health and medical services and welfare services, and to improve the health and medical care of the people and promote their welfare.
	Act on the Prevention of Elder Abuse, Support for Caregivers of Elderly Persons and Other Related Matters	2005	The act aims to contribute to the protection of the rights and interests of the elderly by stipulating the responsibilities of the state and other entities with regard to the prevention of elder abuse, the protection of abused elders, and support for caregivers.

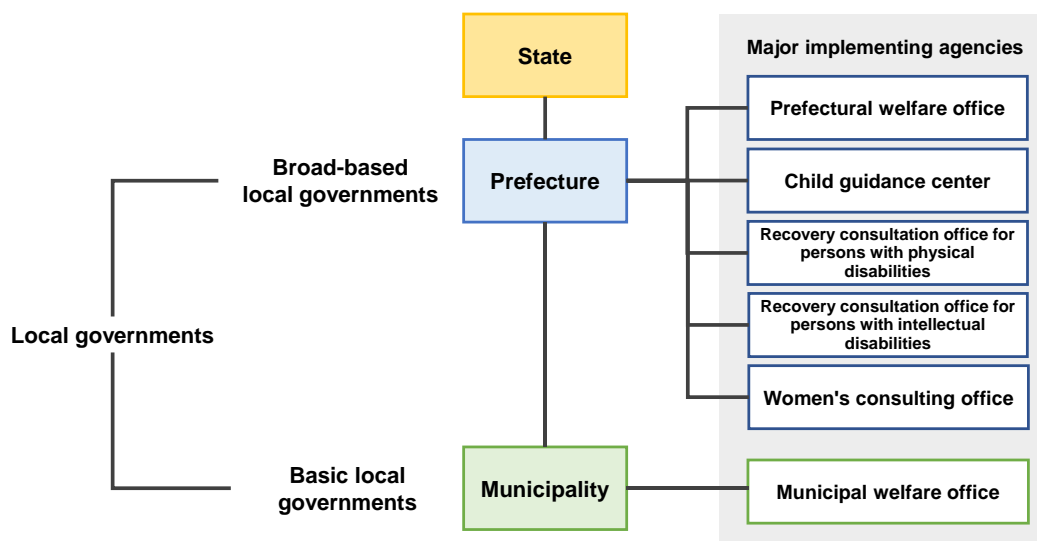
Source: Prepared by the Survey Team based on each law

(3) Implementation structure of social welfare

1) Public sector

Figure 10-1 shows the implementation structure of welfare administration in Japan. The implementing entities are classified as the national government and local governments, and the Ministry of Health, Labour and Welfare (MHLW) is mainly responsible for the affairs related to social welfare at national level. Local governments are divided into two categories: broad-based local governments (prefectures) and basic local governments (municipalities). Since the comprehensive decentralization reform in 2000, the national government and local governments have been considered to be equal and cooperative rather than hierarchical and subordinate. The Local Autonomy Act stipulates that local governments are responsible for “implementing local administration autonomously and comprehensively with the aim of promoting the welfare of inhabitants as the basic principle”.

As the major implementing agencies for welfare administration, prefectures are obliged to establish welfare offices, child guidance centers, recovery consultation offices for persons with physical disabilities, recovery consultation offices for persons with intellectual disabilities, and women’s consulting offices. Prefectural welfare offices carry out the affairs relating to the support and fostering measures stipulated in the Public Assistance Act, the Child Welfare Act, and the Mother and Child, Father and Child and Widows Welfare Act. In municipalities, cities are obliged to establish a welfare office, which carry out the affairs relating to the support, fostering or rehabilitation measures stipulated in the Six Welfare Laws. For towns and villages, the establishment of a welfare office is not obligatory.



Source: Prepared by the Survey Team with reference to [2]

Figure 10-1 Implementation structure of welfare administration

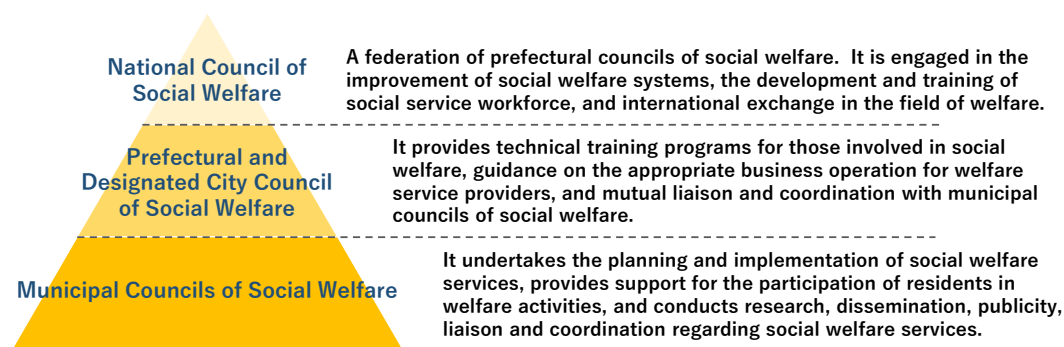
2) Private sector

In addition to local governments, social welfare is promoted by a variety of private organizations in the community. The following describes the major private-sector organizations responsible for social welfare: the Councils of Social Welfare Councils and the Commissioned Welfare/Child Welfare Volunteers.

● Council of Social Welfare

The Councils of Social Welfare are private, non-profit organization consisting of the Commissioned Welfare/Child Welfare Volunteers, other volunteers, representatives of local governments and other relevant organizations, and are established under the Social Welfare Services Act, enacted in 1951. As for the organizational structure, the National Council of Social Welfare, the Prefectural and Designated City Councils of Social Welfare (67 locations), and the Municipal Councils of Social Welfare (1,825 locations⁴) have been established, and are responsible for the roles described in Figure 10-2. The Councils of Social Welfare are partners of local governments in promoting community welfare, and in cooperation with the Community Welfare Plans formulated by the municipalities, the Municipal Councils of Social Welfare are supposed to formulate the Community Welfare Activity Plans.

⁴ As of 1 April 2020 [2].



Source: Prepared by the Survey Team with reference to [3]

Figure 10-2 Organizational structure and roles of the Councils of Social Welfare

● Commissioned Welfare/Child Welfare Volunteer

The commissioned Welfare/Child Welfare Volunteers are part-time local government officials commissioned by the Minister of Health, Labour and Welfare based on the Commissioned Welfare Volunteers Act (enacted in 1948) and Child Welfare Act. They are positioned as cooperating bodies in the welfare administration, and their main duties are to identify the needs of residents, provide consultation and information on welfare services, and coordinate with related organizations. They are not paid a salary, but the costs of their activities are paid through the municipalities. The number of the volunteers is regulated by the size of the population of the municipality. As of 31 March 2020, there were a total of 229,071 (88,483 for males and 145,888 for females) nationwide [2].

(4) Budget for social welfare

1) National government

Figure 10-3 shows the breakdown of the government's budget for fiscal year (FY) 2021: the social security expenditure of the government is 35,842 billion yen, accounting for 33.6% of total general account expenditure and 53.6% of general expenditure⁵. Although the share of social security expenditure in general expenditure decreased compared with the previous year (56.5%), it has been increasing over time [4].

In terms of the breakdown of social security expenditure, as shown in Figure 10-4, pensions account for the largest share at 35.4%, followed by medical services at 33.7%, and long-term care at 9.7%, meaning that the benefit expenditure on public pension, medical services and long-term care insurance accounts for 78.8% of the total. The budget for welfare and other services, which includes expenditure on measures for declining birthrates, living assistance and other social welfare, measures for health and hygiene, and measures for employment and industrial accidents, accounts for 21.1% of the total.

Most of these national social security expenditures are allocated to the MHLW, which is in charge of the social security sector. In FY2021, the MHLW's budget for social security expenditure was 32,793 billion yen [5].

⁵ Total expenditure, excluding government bond expenses and state subsidies destined for municipalities.

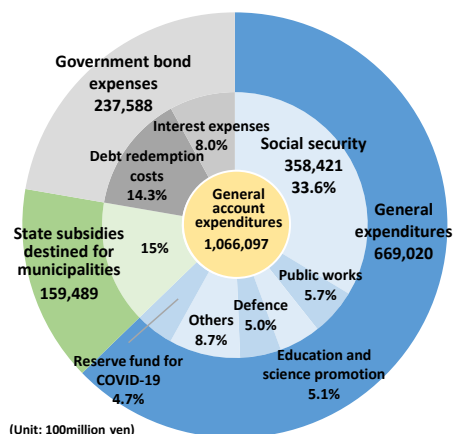


Figure 10-3 General account expenditure (FY2021)
Source: [6]

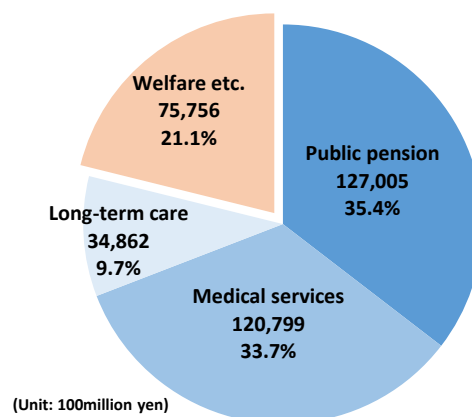


Figure 10-4 Social security expenditure (FY2021)
Source: [6]

2) Local government

The expenses of local governments are broadly classified into council expenses, general affairs expenses, welfare expenses, sanitation expenses, labor expenses, agriculture, forestry and fisheries expenses, etc., according to their administrative purposes, and the expenses related to the implementation of social welfare measures correspond to “welfare expenses”.

Figure 10-5 shows the composition of local government expenditure accounts by purpose in FY2019, and it is clear that welfare expenses account for the largest proportion of the net total, at 26.6%. According to the type of organization (prefectures/municipalities), the share of the welfare expenses is particularly large in municipalities, since municipalities mainly carry out the administration of social welfare, such as child welfare and public assistance.

In addition, as shown in Figure 10-6, in terms of the purpose of welfare expenses (net total), child welfare expenses are the largest, accounting for 34.7% of the total welfare expenses, followed by social welfare expenses⁶ (25.8%), elderly welfare expenses (24.1%) and public assistance expenses (14.8%).

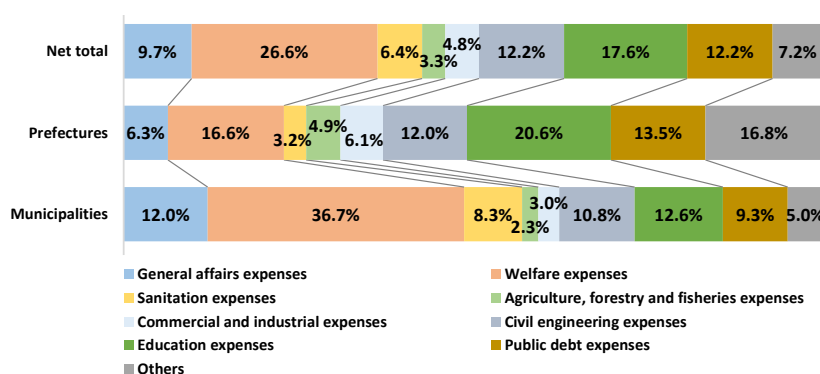


Figure 10-5 Composition of local government expenditure accounts by purpose (FY2019)
Source: [7]

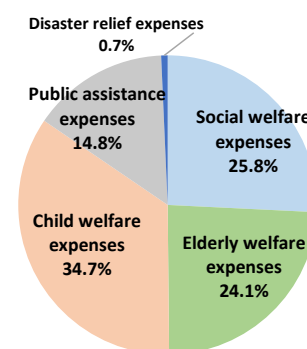


Figure 10-6 Welfare expenses (net total) by purpose
Source: [7]

⁶ Expenditure on welfare measures for people with disabilities and others, and on general welfare measures which cannot be classified under other welfare categories.

10.1.2 Situations in the areas related to social service workforce

Table 10-2 summarizes the social service workforce in Japan. This section provides an overview of the situation in relation to the welfare of children and family, people with disabilities, older people, people with low incomes, the judiciary, and disasters as the main fields in which they are engaged and deployed.

Table 10-2 Social service workforce in Japan

Category	Title	Detail	Major placement
National qualification	Certified Social Worker	See 10.2.1(2)	Government agencies, medical institutions, schools, community-based integrated care center (mandatory for certified social workers), welfare facilities
	Mental Health Social Worker		
Other qualifications (example)	Social welfare officer (public officer)	An appointment qualification required to be appointed as a supervisory officer or an operational work staff at welfare offices.	Welfare office (mandatory)
	Supervisory officer	Provides guidance and supervision of the work at welfare office.	Welfare office (mandatory)
	Child welfare officer	Provides consultation on child protection and child welfare. Requirements for the appointment include qualifications of certified social worker and mental health social worker.	Child guidance center
Volunteer	Commissioned welfare/child welfare volunteer	Part-time local government officials commissioned by the Minister of Health, Labour and Welfare	Community
	Volunteer probation officer	Part-time national government officials commissioned by the Minister of Justice	Community

Source: Prepared by the Survey Team

(1) Children and family

Child and family welfare in Japan began with the Child Welfare Act enacted in 1947, and since then, basic laws such as the Child Rearing Allowance Act, the Mother and Child, Father and Child and Widows Welfare Act, the Child Allowance Act have been developed, as shown in Table 10-1. In 1990, the government of Japan signed the Convention on the Rights of the Child and ratified it in 1994. With regard to the policies related to child and family welfare, as the relief of war orphans was an urgent issue at the time of the enactment of the Child Welfare Act, the protection of children (social care) formed the basis of these policies. However, since the “1.57 shock⁷” in 1989, more emphasis has been placed on support for child rearing and measures against declining birthrates.

One of the recent issues in the field of child and family welfare is the increase in the number of single-parent households, which tend to fall into poverty. In addition, the number of cases of child abuse is increasing every year as the legal system has been improved and it has become easier to recognize. In schools, in addition to issues such as bullying and refusal of attending school, the number of children with disabilities and children from abroad is increasing. There is also a notable increase in the number of children who are victims of child prostitution and child pornography.

⁷ The total fertility rate in 1989 was the lowest ever recorded at 1.57, which is known as the “1.57 shock”.

To cope with these issues, local governments are promoting the placement of “school social workers” in schools. In addition, personnel specializing in child welfare, including child welfare officers, are assigned to child guidance centers, which are responsible for child welfare administration. In communities, Regional Councils for Children in Need of Social Care and Protection⁸ have been established, which are composed of relevant organizations from various fields such as education, healthcare, police, and judiciary, and also the commissioned welfare/child welfare volunteers are assigned to work in the community.

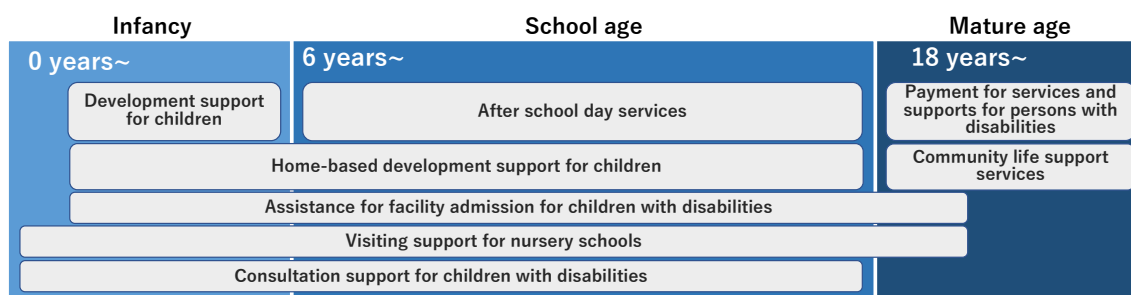
(2) People with disabilities

With regard to welfare for persons with disabilities, there are laws established for each disability, such as physical disabilities, mental disorders, intellectual disabilities, and developmental disabilities, as shown in Table 10-1. Regarding the Convention on the Rights of Persons with Disabilities, which was adopted by the United Nations in 2006, the government of Japan signed it in 2007, and afterwards developed related laws such as the Act on Support for Persons with Developmental Disabilities and the Act for Eliminating Discrimination against Persons with Disabilities, and ratified it in 2014. In accordance with these laws, supporting measures for the welfare of persons with disabilities are implemented.

As for the current situation of people with disabilities, the number of people with physical, intellectual and mental disorders is increasing every year, especially the proportion of people aged 65 and over is increasing due to the aging of the population. In Japan, the high proportion of people with mental disorders who are admitted to psychiatric hospitals is a significant problem, and it is a challenge to support their transition to community life. In addition, with regard to the employment of people with disabilities, although 61% of those who hold a disability certificate (under the age of 65) wish to work, only 28% are employed, and the highest proportion (35%) spends time at home during the day, which means that there are challenges in the aspects of employment and social participation of people with disabilities [8]. As for children with disabilities, despite the declining birth rate, the number of children enrolled in schools for special needs education and classes for special needs education has been increasing. In addition, with the advancement of medical technology, the number of children who require medical care on a daily basis, such as those with tracheotomies and ventilators, is also increasing, and therefore schools are expected to collaborate with medical personnel [9].

In response to these issues, it has been promoted to establish a network in cooperation with the various institutions and organizations in the field of medical care, health, welfare, labor, and other related issues, so that children and persons with disabilities are able to receive seamless support from infancy to after graduation, as shown in Figure 10-7.

⁸ Established by local governments (endeavors obligation), the management varies according to the organization. For example, in Suzaka City, Nagano Prefecture, in addition to providing support for children in need of protection, it also targets a wide range of victims of abuse, including child abuse, domestic violence, elderly abuse, and abuse of persons with disabilities, and works to address these issues at the regular meetings [67].



Source: Prepared by the Survey Team

Figure 10-7 Support for children with disabilities at every life stage

(3) Elderly people

The welfare of the elderly in Japan was initiated by the Act on Social Welfare for the Elderly, which was enacted in 1963, and has developed in line with social changes in terms of population structure and socio-economic environment. As regards the social security system, Japan achieved universal health insurance and pensions in 1961, which has improved income security and access to healthcare for the elderly. The long-term care insurance system was introduced in 2000 as a mechanism to support the care of the elderly by the entire society in the context of the rapid population aging, which entered the aged society in 1994, after 24 years of reaching the aging society in 1970.

Since the introduction of the long-term care insurance system, the welfare of the elderly has been enhanced mainly through the long-term care insurance services. However, with the increase in the number of the elderly with dementia, the elderly living alone or those with multiple chronic diseases, not only the needs for long-term care but also the needs for medical care and living support have increased. In response to this situation, the government is currently aiming to establish a “community-based integrated care system” in which the elderly themselves are involved in maintaining their health and preventing severe illness, while using the necessary services provided by the long-term care insurance, and are supported by people in the community.

To promote the community-based integrated care system, “community-based integrated care centers” have been established in communities by municipalities or organizations commissioned by municipalities. At the center, a certified social worker, a care manager, and a public health nurse are assigned to strengthen the system of cooperation between home-based medical care and long-term care, promote preventive care, and provide general consultation and advocacy for the rights of the elderly, for example by conducting community care meetings in collaboration with the local government and relevant organizations in the community.

(4) People with low incomes

Welfare for people with low incomes began with the Aid Law⁹ of 1874, followed by the previous Public Assistance Act in 1946 and the current Public Assistance Act in 1950. The Public Assistance Act clearly stipulates the guaranteed right to life in accordance with the Constitution of Japan, and the public assistance system, as the last safety net, provides necessary benefits (livelihood assistance, education assistance,

⁹ A certain amount of money for rice was paid to the needy (persons with disabilities, or seriously ill or senile persons over 70 years of age, or persons without relatives who are unable to work due to illness, or persons under 13 years of age).

housing assistance, maternity assistance, occupational assistance, funeral assistance, medical assistance, and long-term care assistance) to all citizens in need according to the degree of need.

In recent years, there has been a growing concern about the diversity of problems faced by public assistance recipients and the length of time they receive the benefits, and in 2005 a program to support their self-reliance was introduced. The self-reliance programs are initiated by the local governments, which categorize the current situation of public assistance recipients and the factors preventing them from becoming self-reliant, and develop the individual support programs according to the categorizations¹⁰. In addition, the Act on Self-Reliance Support for Needy Persons was enacted in 2013 in order to strengthen the measures to support self-reliance at the stage before public assistance. Under this act, local governments with welfare offices are responsible for providing consultation and support services¹¹ for those in need, as well as providing housing benefits and other services.

Regarding the number of households receiving public assistance, although the number of non-elderly households has been decreasing, the number of elderly households has been consistently increasing; as of 2016, the number of elderly households accounted for 51.4% of all households receiving public assistance. Also, looking at the number of people receiving assistance by type of protection, the number of people receiving long-term care assistance has increased significantly since 2000, when the system was introduced, showing the significant impact of population ageing [10].

With regard to the implementation of public assistance, the welfare offices established in prefectures and municipalities (the establishment of welfare offices in towns and villages is not obligatory) are responsible for the administration of decisions and implementation. There are social welfare officers assigned to welfare offices.

(5) Judiciary

In the field of justice, the role of welfare has been particularly demanded in the rehabilitation system. The concept of rehabilitation has been developed mainly through the activities of private citizens and private organizations, starting with the Shizuoka Prisoners' Protection Company, established in 1888, which provided food, clothing and shelter for prisoners released from prison, as well as job placement services. The term "rehabilitation"¹² was first mentioned in the Offenders Prevention and Rehabilitation Act in 1949, which established the rehabilitation system, followed by the Volunteer Probation Officers Act in 1950 and the Offenders Rehabilitation Act¹³ in 2007.

In recent years, the number of prisoners aged or with disabilities has been increasing, making it more difficult for them to become independent. In 2008, the "Service to Promote Community Life Settlement"

¹⁰ For example, in Fukui Prefecture, care workers, public health nurses, and nutritionists work together to support households under public assistance who particularly need health and nutritional guidance by developing a self-reliance support program with the aim of improving illness and maintaining and promoting health (and reducing medical assistance costs) [68].

¹¹ For example, in Takamatsu City, Kagawa Prefecture, a Job Corner (a branch of Hello Work) has been established in the city hall to provide integrated employment support in close cooperation with municipal officials [73].

¹² Activities to help people who have committed crimes or juvenile delinquency to prevent their recidivism, reintegration and independence by providing guidance and support for their recovery in society.

¹³ It merged the Offenders Prevention and Rehabilitation Act (1949) and the Act for Probationary Supervision of Persons under Suspension of Execution of Sentence (1954).

was launched to provide such prisoners with the necessary welfare services to help them settle into community life. In the same year, welfare staff with qualifications, such as certified social workers or mental health social workers, started to be assigned to the offenders rehabilitation facilities to provide welfare support, including the introduction of available welfare services and assistance with the procedures, so that they could achieve an independent life after leaving the facilities.

In addition to such support at the exit stage of the criminal justice system (exit support), the importance of support at the entrance stage (entrance support)¹⁴ has also increased in recent years in order to prevent recidivism, as there has been an increase in the number of cases of people, as the number of cases of re-entry into prison after release has increased, especially for the elderly and those with intellectual disabilities. In this context, certified social workers and mental health social workers are expected to collaborate with prosecutors, lawyers and other professionals as well as with other welfare agencies at district prosecutors offices and prisons [11].

(6) Disaster relief

With regard to welfare in disasters, in recent years with large-scale natural disasters such as the Great East Japan Earthquake and the Kumamoto Earthquake, welfare support is required for “those in need of assistance during a disaster” such as the elderly, people with disabilities, the injured and sick, infants and pregnant mothers. Although the Enforcement Ordinance of the Disaster Countermeasures Basic Act stipulates the standards for designating “welfare shelters” as evacuation shelters for such persons in need of special care during disasters, the lack of prior designation of welfare shelters made it difficult to supply sufficient professional support in the Great East Japan Earthquake. In particular, it has been identified as a challenge to secure supporting staff for welfare shelters and to respond to the diversified needs of people requiring special assistance [12].

In addition, the MHLW promotes the development of welfare support systems in disaster situations, as there are many cases of secondary effects such as a decline in physical functions and an increase in the severity of care required, as a result of the lack of necessary support and the prolonged evacuation of such people requiring special assistance in disaster situations. The “Guideline for the Development of Welfare Support Systems in Disasters” formulated in 2018 stipulates that each prefecture should establish a “Disaster Welfare Assistance Team (DWAT)” to provide welfare support to persons in need at general evacuation shelters, and establish a “Network for Welfare Support in Disasters” through public-private collaboration, including the councils of social welfare, social welfare facilities and other related organizations. It is also stipulated that the composition of the DWAT should be balanced in terms of occupation and gender, including consultation support specialists such as certified social workers [13].

The National Council of Social Welfare also formulated a “Basic Policy on Countermeasures for Large-scale Disasters” in 2013. It outlines the basic approach to ensure that the councils of social welfare, which establish and operate disaster volunteer centers, social welfare corporations and welfare facilities, and

¹⁴ In Fukuoka Prefecture, the “Rehabilitation Support Center” has been established to strengthen the entrance support. The center provides “seamless” and “long-term” support to the elderly and people with disabilities who have committed relatively minor crimes, as well as drug offenders and sexual offenders who have high recidivism rates [63].

organizations such as commissioned welfare/child welfare volunteers are able to cooperate and collaborate under a common understanding during a disaster.

In addition, the Japanese Association of Certified Social Workers (JACSW) and the Japanese Association of Mental Health Social Workers (JAMHSW) have formulated the “Guideline of Disaster Countermeasures” and the “Guideline for Disaster Support”, respectively. In case of a disaster, both of these organizations set up a disaster response headquarters and, in collaboration with the subordinate organizations in the affected areas, dispatch members (certified social workers and mental health social workers) to the affected areas and raise funds to support their activities.

10.2 Current status of social service workforce development

This section outlines the current status of social service workforce strengthening, with a particular focus on the national qualifications for social workers: “certified social workers” and “mental health social workers”.

10.2.1 Planning

(1) Laws, policies and plans

1) Laws

Regarding social workers, there are two laws: the “Certified Social Worker and Certified Care Worker Act”, which regulates certified social workers, and the “Psychiatric Social Workers Act”, which regulates mental health social workers. In 1986, when the Minister of Health and Welfare (at that time) announced that there would be new national qualifications in the medical and welfare fields, the Japanese Association of Social Workers (JASW) proposed the qualification of “Social Worker”, the JAMHSW proposed the qualification of “Mental Health Social Worker”, and the Japanese Association of Social Workers in Health Services (JASWHS) proposed the qualification of “Medical Social Worker (MSW)”.

This section describes the outline of the laws for a certified social worker and a mental health social worker, as well as the points of discussion for legislation, and also summarizes the background to the qualification of medical social workers.

● Certified social worker

The outline of the Certified Social Worker and Certified Care Worker Act is described in Table 10-3. In response to the situation where the needs for social welfare have become more diverse and advanced with the aging of the population, there has been a growing need to review the welfare system from a long-term perspective and to legislate for welfare qualifications. In particular, the following issues were discussed in the consideration of the legalization of welfare qualifications: the need for specialized responses to the increasing needs of welfare; the fact that there are no qualifications for social workers and that the development of welfare professionals in Japan is lagging behind from an international perspective; the need to secure and improve the quality of welfare personnel; and the need for a qualification system in light of the recent trends in care and welfare services for the elderly.

On the other hand, there were some opinions from the trade union side that the qualification system would divide the workers [14]. On this point, particularly with regard to the certified care workers, the Ministry

of Labour (at that time) and other relevant authorities have had difficulties in coordinating with them, considering that the certified care workers would violate the work of home helpers and housekeepers, who were responsible for care work at the time, and threaten the operation of the business [15].

Table 10-3 Outline of the Certified Social Worker and Certified Care Worker Act

Title	Certified Social Worker and Certified Care Worker Act
Date enacted	Enacted on 26 May 1987 (implemented on 1 April 1988)
Purpose	To provide for the qualifications of certified social workers and certified care workers and to promote the appropriateness of their services, thereby contributing to the enhancement of social welfare.
Contents	<ul style="list-style-type: none"> ● Definition of Certified Social Worker and Certified Care Worker (Article 2) ● Qualification methods, etc. of Certified Social Worker (Article 4 ~ Article 38) ● Qualification methods, etc. of Certified Care Worker (Article 39 ~ Article 44) ● Duty of Certified Social Worker and Certified Care Worker (Article 44-2 ~ Article 49)

Source: Prepared by the Survey Team with reference to [16]

● **Mental health social worker**

Table 10-4 describes the outline of the Psychiatric Social Workers Act. Mental health social workers have a long history as a profession, starting in 1948 when they were appointed as “social service nurses¹⁵” and have been placed mainly in psychiatric hospitals and have established various professional associations in different regions to improve their expertise. In 1987, when the Mental Hygiene Act was amended to the Mental Health Act, the government indicated a policy to establish a legal qualification for psychiatric social workers, however, there was an urgent need to develop manpower for long-term care, and the Certified Social Worker and Certified Care Worker Act was approved first [17].

In the process of legislating for mental health social workers, the opinions of the relevant organizations were divided on whether it would involve “medical treatment” and whether it would be a “medical qualification” or a “welfare qualification”. The JAMHSW aimed to establish a qualification covering both the medical and welfare fields, where the work of mental health social workers involves medical treatment and requires a doctor’s order. Later, following the enactment of the Basic Act for Persons with Disabilities (1993) and the formulation of the Plan for Persons with Disabilities (1995), it was expected that consultation support in the field of mental health and welfare would be increased, and in 1997 the Psychiatric Social Workers Act was enacted as a qualification for social workers in the healthcare field.

Table 10-4 Outline of the Psychiatric Social Workers Act

Title	Psychiatric Social Workers Act
Date enacted	Enacted on 19 December 1997 (implemented on 1 April 1998)
Purpose	To provide for the qualifications of mental health social workers and to promote the appropriateness of their services, thereby contributing to the enhancement of mental health and the welfare of people with mental disorders.
Contents	<ul style="list-style-type: none"> ● Definition of Mental Health Social Worker (Article 2) ● Qualification methods, etc. of Mental Health Social Worker (Article 4 ~ Article 38) ● Duty of Mental Health Social Worker (Article 38-2 ~ Article 43)

Source: Prepared by the Survey Team with reference to [18]

¹⁵ Nurses placed as part of the clinical team in the social service department of Kohnodai National Hospital [64].

《Box 1》 Proposed “Medical Social Worker” qualification

Medical social workers have been the subject of legislation since the establishment of the JASWHS in 1953. When the Minister of Health and Welfare announced a policy to establish a welfare qualification in 1986, the Health Policy Bureau of the Ministry of Health and Welfare claimed to establish "Medical Social Workers" as a medical profession, apart from "Social Workers" as a welfare profession, however, the JASWHS disagreed, claiming that it would be a "welfare profession". Although it was also discussed to unify the welfare qualifications into a single qualification, Certified Social Worker, rather than two separate qualifications, the opinions of the relevant organizations were not coordinated, and this did not lead to legislation. As a result, the qualification of certified social workers established in 1987 did not include the health care field and did not allow work experience in health care institutions as a qualification.

Thereafter, in 2003, the MHLW notification on "Standard Work and Appointment Criteria for Medical Social Workers" stipulated that the principle of appointment of medical social workers in national hospitals is to have either (1) a certified social worker or (2) a mental health social worker qualification. In addition, from 2006, "hospitals, clinics and geriatric health services facilities" were added to the designated facilities for the field training, and medical social workers were positioned as social workers in medical institutions [19].

2) Policies

As policies related to social service workforce, from the perspective of securing human resources, the MHLW has issued the "Basic Guideline for Measures to Secure Human Resources in Social Welfare Services". This is a revision of the former guideline issued in 1993 based on the Act on Securing Human Resources for Welfare Workers, and in accordance with the further progress of the aging society with a low birthrate, the diversification of people's lifestyles, and other major changes in the circumstances surrounding welfare and long-term care services, it was issued in 2007 as the new guideline based on Article 89-1 of the Social Welfare Act.

Table 10-5 shows the outline of the Basic Guideline for Measures to Secure Human Resources in Social Welfare Services. In reviewing the guidelines, the following situations were identified: In reviewing the guidelines, the following situations were identified: the high proportion of women in the workforce; the increasing proportion of part-time staff; the high proportion of workers entering and leaving work; the low level of salaries compared with the average of salaries for all workers, including those in other industrial sectors; and the large number of potentially qualified personnel¹⁶. In response to these issues and to secure the necessary human resources in the welfare and long-term care service sector, the following measures were proposed: (1) enhancing the working environment, (2) establishing a career development system, (3) increasing awareness and understanding of welfare and long-term care services, (4) promoting the participation of potentially qualified personnel, (5) promoting the participation of diversified human resources.

¹⁶ Those who have qualifications as certified social workers, certified care workers or home helpers but are not actually working in the welfare and long-term care services sector.

Table 10-5 Outline of the Basic Guideline for Measures to Secure Human Resources in Social Welfare Services

Principles	Details
(1) Enhancing the working environment	To ensure that the job is valued and chosen as an attractive one by young people, and to promote the retention of workers.
(2) Establishing a career development system	To develop the capacity of social service workforce to meet the growing needs for welfare and long-term care, and to ensure high quality services ¹⁷ .
(3) Increasing awareness and understanding of welfare and long-term care services	To increase people's understanding that welfare and long-term care services are worthwhile occupations that support an ageing society, and to encourage people to actively participate in these fields.
(4) Promoting the participation of potentially qualified personnel	To identify potential qualified personnel so that certified social workers and care workers could be utilized effectively.
(5) Promoting the participation of diversified human resources.	To promote the participation of personnel in other fields, elderly people, etc., who could become important human resources in the field of welfare and long-term care services.

Source: Prepared by the Survey Team with reference to [20]

(2) Definitions and provisions

1) Certified social worker

The definition and duties of certified social workers are stipulated in the Certified Social Worker and Certified Care Worker Act, and the outline is described in Table 10-6. As per the duty in Article 48-1 “Restriction on Use of Appellation”, it is a title-exclusive qualification¹⁸.

Table 10-6 Provisions for certified social workers in the Certified Social Worker and Certified Care Worker Act

Definition	A person with expert knowledge and skills who has received the registration and uses the appellation “certified social worker” to provide advice, guidance, or welfare services in consultations about the welfare of persons with physical disabilities or mental disorder and intellectual disabilities or persons facing difficulty in leading a normal life due to environmental factors, and a person engaged in the business of communicating and coordinating with and providing other assistance to doctors, other health and medical service providers, and other related parties.	
Qualification	A person who has passed the certified social worker examination is qualified to be a certified social worker.	
Duty	(1) Duty of good faith	A certified social worker must be in good faith engaged in the services so as to allow the persons under their charge to maintain personal dignity and live an independent life in light of their standing at all times.
	(2) Prohibition of acts that damage credibility	A certified social worker must not commit any acts that may damage their credibility as a certified social worker.
	(3) Duty of confidentiality	A certified social worker must not leak any personal secrets that may become known to them in their course of services without legitimate grounds. The same principle applies after they cease engaging in their services.
	(4) Coordination	A certified social worker must have a person in charge of the services maintain smooth coordination with persons concerned with welfare services, etc. while exerting originality and ingenuity suited to the local

¹⁷ Specifically, the measures include: (1) enhancement of qualification systems and establishment of career paths; (2) establishment of lifelong training systems corresponding to career paths; (3) support for acquisition of national qualifications and ensuring on-the-job training and off-the-job training; (4) appropriate management of educational training benefit systems; (5) human resource development through personnel exchanges among managers; and (6) establishment of a system to certify the more advanced expertise of qualified personnel.

¹⁸ A qualification that only qualified persons are permitted to use the title of. A social worker can provide counselling and assistance services without being a certified social worker, as long as he/she does not use the title “certified social worker”.

		area so as to enable the comprehensive and appropriate provision of welfare service and associated health medical service, and other services.
	(5) Responsibility of quality improvement	A certified social worker must endeavor to steadily improve their knowledge and skills concerning consultation and assistance to adequately and flexibly adapt to any changes in services caused by changes in the environment surrounding social welfare.
	(6) Restriction on use of appellation	A person who is not a certified social worker must not use the appellation of a certified social worker.

Source: Prepared by the Survey Team with reference to [16]

2) Mental health social worker

The definition and duties of mental health social workers are stipulated in the Psychiatric Social Workers Act, and the outline is described in Table 10-7. As with certified social workers, there is a restriction on the use of the name as a duty, and the qualification is a title exclusive.

Table 10-7 Provisions for mental health social workers in the Psychiatric Social Workers Act

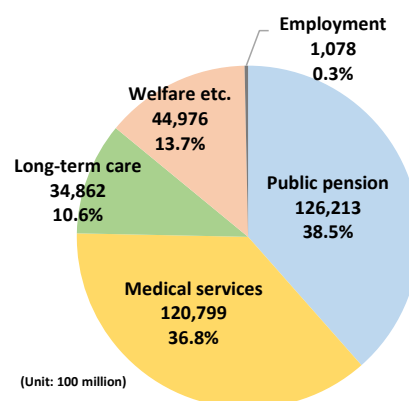
Definition	A person with expert knowledge and skills on health and welfare of people with mental disorder who has received the registration and uses the appellation “mental health social worker” to provide advice, guidance, necessary training for adaptation to daily life and other assistance to persons who receive medical treatment for mental disorder in psychiatric hospitals and other medical facilities or who use facilities intended to promote social rehabilitation of people with mental disorder, regarding the use of community consultation support and other consultation on social rehabilitation.	
Qualification	A person who has passed the mental health social worker examination is qualified to be a mental health social worker.	
Duty	(1) Duty of good faith	A mental health social worker must be in good faith engaged in the services so as to allow the persons under their charge to maintain personal dignity and live an independent life in light of their standing at all times.
	(2) Prohibition of acts that damage credibility	A mental health social worker must not commit any acts that may damage their credibility as a mental health social worker.
	(3) Duty of confidentiality	A mental health social worker must not leak any personal secrets that may become known to them in their course of services without legitimate grounds. The same principle applies after they cease engaging in their services.
	(4) Coordination, etc.	A mental health social worker must cooperate with persons who provide these services and other persons concerned, etc., so that health and medical services, welfare services for persons with disabilities, services concerning community consultation support, and other services are provided comprehensively and appropriately in close cooperation to the person in charge.
	(5) Responsibility of quality improvement	A mental health social worker must endeavor to steadily improve their knowledge and skills concerning consultation and assistance to adequately and flexibly adapt to any changes in services caused by changes in the environment surrounding mental health and welfare of people with mental disorders.
	(6) Restriction on use of appellation	A person who is not a mental health social worker must not use the appellation of a mental health social worker.

Source: Prepared by the Survey Team with reference to [18]

(3) Budget

As described in 10.1.1(4)1), the majority of national social security expenditure is allocated to the MHLW, and a breakdown of social security expenditure in FY2021 is shown in Figure 10-8. The budget for social service workforce is included in the “welfare etc.” category of social security expenditure.

Table 10-8 shows a list of major items in the MHLW's draft budget for FY2021, selected for their relevance to the development and employment of social service workforce. The budget for the development of consultation and support systems for the realization of an inclusive society has increased significantly compared to the previous year (No. 3 in the Table 10-8). In addition, to support the re-employment of those who have left the workforce due to the effects of the Coronavirus disease 2019 (COVID-19) and to secure human resources in the fields of long-term care and welfare for people with disabilities, a new budget has been added for employment support in the fields of medical care, welfare and childcare.



Source: [5]

Figure 10-8 Budget for the MHLW for Social security (FY2021)

Table 10-8 Major items in the draft budget of the MHLW for FY2021

(Unit: million)

Major item	Budget	
	FY2020	FY2021
1. Support for employment in the fields of medical care, welfare, and childcare <ul style="list-style-type: none"> Support for employment in the fields of long-term care and welfare for people with disabilities who have left employment Expansion of specialized support offices for medical care, long-term care and childcare at "Hello Work" and promotion of the "Project to Promote Employment in the Medical and Welfare Fields" etc.	3,957	5,506 (Growth rate: 39.15%)
2. Prompt and strong promotion of child abuse prevention measures and social foster care <ul style="list-style-type: none"> Strengthening of measures to secure specialized human resources and specialized responses in Child Guidance Centers. etc.	173,137	173,537 (Growth rate: 0.23%)
3. Promotion of the development of a comprehensive support system through the integrated provision of consultation support, participation support and community development. <ul style="list-style-type: none"> Promotion of consultation support regardless of attributes, variety of participation support, implementation of the project for the development of a comprehensive support system that integrates support for community building, and human resource development for workers. etc.	3,895	11,584 (Growth rate: 197.41%)
4. promotion of support for children and people with disabilities, including securing welfare services for people with disabilities and support for community life. <ul style="list-style-type: none"> Development of welfare service offices for people with disabilities, etc., and expansion of community life support. Promoting the attractiveness of welfare work for people with disabilities. etc.	2,121,142	2,214,839 (Growth rate: 4.42%)
5. promotion of measures for people with mental disorders, such as support for transition to and settlement in the community, and measures against addiction. <ul style="list-style-type: none"> Establishment of community-based integrated care system for mental disorder. Development of human resources for treatment of addiction and consultation support, development of bases for consultation, etc. etc.	22,229	22,096 (Growth rate: -0.60%)

Source: Prepared by the Survey Team with reference to [21]

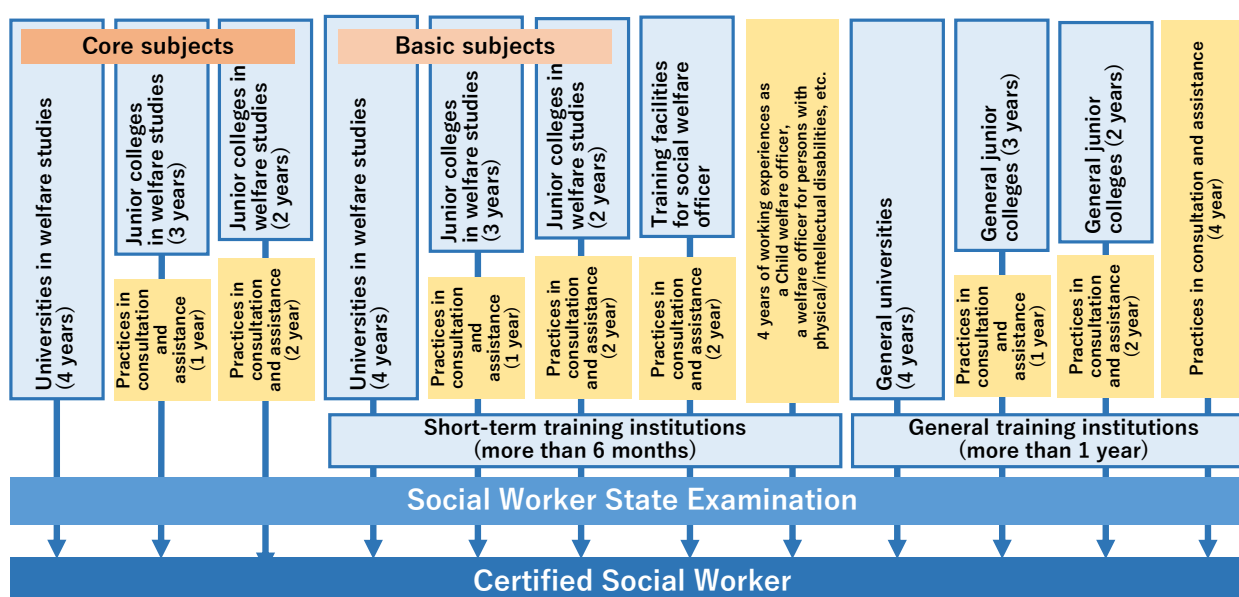
(4) Licensing and qualification system

As described earlier in Table 10-3 and Table 10-4, both certified social workers and mental health social workers are qualified by passing national examinations. The methods of qualification for social workers and mental health workers are explained below.

1) Certified social worker

Figure 10-9 shows the qualification routes of certified social workers. Qualifications for the national examination for certified social workers is granted to those who graduate from four-year universities in welfare studies¹⁹ after completing core subjects, those who engage in practice in consultation and assistance after completing core subjects at two-year or three-year junior colleges in welfare studies, and those who graduate from designated training institutions for certified social workers (short-term and general). As for these educational institutions are described in detail in 10.2.2(1).

In order to acquire a national qualification as a certified social worker, it is necessary to apply for registration with the Social Welfare Promotion and National Examination Center, a public interest incorporated foundation designated by the Minister of Health, Labour and Welfare, after passing the national examination. Once registered, the applicant is allowed to use the title “certified social worker”.



Source: Prepared by the Survey Team with reference to [22]

Figure 10-9 Qualification routes of certified social workers

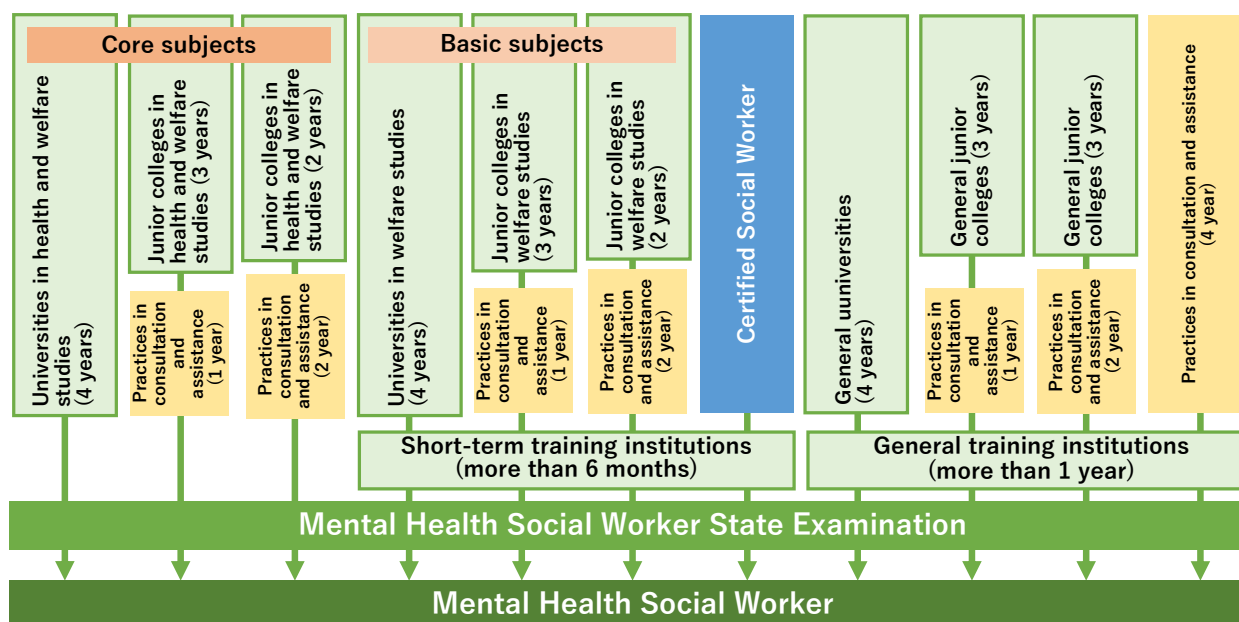
The most recent national examination, the 33rd National Examination for Certified Social Workers, was held in February 2021, and out of 35,287 examinees, 13,333 passed (3,387 males and 6,946 females), with a pass rate of 29.3%. Looking at the trends over the past five years, the 29th national examination (held in February 2017) saw 45,849 examinees, and since then the number has continued to decline. The average pass rate over the last five years is 28.84% [23].

2) Mental health social worker

Figure 10-10 shows the qualification routes of mental health social workers. Qualifications for the national examination for mental health social workers are granted to those who graduate from four-year universities in health and welfare studies after completing the core subjects, those who engage in practice in consultation and assistance after completing core subjects at two-year or three-year junior colleges in health and welfare

¹⁹ A school where students are able to take core subjects or basic subjects related to social welfare.

studies, and those who graduate from designated training institutions for mental health social workers (short-term and general). After passing the national examination, applicants must apply for registration with the Social Welfare Promotion and National Examination Center, and once registered, they are eligible to use the title “mental health social worker”.



Source: Prepared by the Survey Team with reference to [24]

Figure 10-10 Qualification routes of mental health social workers

In the most recent 23rd National Examination for Mental Health Social Workers held in February 2021, 3,955 out of 6,165 examinees passed (1,278 males and 2,677 females), with a pass rate of 64.2%. Looking at the trends over the past five years, as with certified social workers, the number of examinees has been slowly decreasing since the 19th national examination held in February 2017 (the number of examinees for the 19th examination was 7,174) [25]. The average pass rate over the past five years has been 62.78%, which is very high compared to that of the National Examination for Certified Social Workers. This is likely to be due to the large number of people who take the exam of mental health social worker after qualifying as a certified social worker. The pass rates for the 23rd examination by qualification route were 55.5% for the “universities in health and welfare studies (4 years) route”, 29.1% for the “junior colleges in health and welfare studies and work experience route”, and 53.9% for the “general training institutions route”, while the pass rate for the “short-term training institutions route” including certified social workers was 87.7% [26].

(5) Relevant organizations for social service workforce

1) Ministry of Health, Labour and Welfare

The MHLW is in charge of affairs relating to social welfare in general, and implements various measures to secure and train social service workforce. With regard to the training of certified social workers and mental health social workers, the Ministry designates the curriculum for the training courses, the training institutions and the examination institution, and issues the certificates of registration.

2) Ministry of Education, Culture, Sports, Science and Technology

The Ministry of Education, Culture, Sports, Science and Technology (MEXT), together with the MHLW, designates the subjects for training courses for certified social workers and mental health social workers, and designates training institutions. In addition, the MEXT implements the Project for Utilization of School Social Workers, which assigns school social workers (who should be qualified as certified social workers or mental health social workers) to boards of education and schools, and provides them with necessary training.

3) Ministry of Justice

The Ministry of Justice administers correctional institutions, probation offices, and rehabilitation facilities, and recruits and trains welfare officers and rehabilitation coordinators (all of whom must be qualified as certified social workers or mental health social workers) to be assigned to these institutions.

(6) Human resource data

Information on the number of registrants of certified social workers and mental health social workers is managed by the Social Welfare Promotion and National Examination Center, which undertakes the registration of qualifications. Table 10-9 shows the number of registrants of certified social workers and mental health social workers as of the end of March 2021.

Table 10-9 Number of registered certified social workers and mental health social workers (as of end-March 2021)

Certified Social Worker	Mental Health Social Worker
257,293	93,544

Source: [27]

There are also a number of statistics and surveys which compile information on the status of certified social workers and mental health social workers, as shown in Table 10-10.

Table 10-10 Major statistics and surveys related to certified social workers and mental health social workers

Title	Implementing agency	Contents related to certified social workers/ mental health social workers
Welfare Office Personnel Survey	MHLW	A survey of all welfare offices in Japan. The survey examines the qualifications (certified social worker, mental health social worker, social welfare officer) of the supervisory staff and operational work staff assigned to welfare offices.
Social Welfare Facilities Survey	MHLW	A sample survey of social welfare facilities throughout Japan. The results of the survey on the number of full-time equivalent mental health social workers by type of facility are summarized.
Medical Facilities Survey	MHLW	A static survey of all medical facilities in operation at the time of the survey, conducted every three years. The number of full-time equivalent workers at the facilities is surveyed by occupation, including certified social workers and mental health social workers.
Survey on the Treatment of Persons Engaged in Welfare Services for People with Disabilities	MHLW	A sample survey of facilities and offices that provide welfare services for people with disabilities. The survey examines the conditions of employment of certified social workers, mental health social workers, and certified care workers according to their qualifications.

Title	Implementing agency	Contents related to certified social workers/ mental health social workers
Survey on Long-term Care Service Facilities and Offices	MHLW	A sample survey of long-term care service facilities and offices across Japan. The actual number of social workers in care service facilities and offices is summarized as the number of workers by occupation.
Employment Status Survey for Certified Social Workers, Certified Care Workers and Mental Health Social Workers	Social Welfare Promotion and National Examination Center	A nationwide survey of all certified social workers, certified care workers and mental health social workers. The survey covers the actual working conditions and their awareness of their work.

Source: Prepared by the Survey Team

10.2.2 Development

(1) Educational institutions

As mentioned in 10.2.1(4), to qualify as a certified social worker or mental health social worker, it is necessary to graduate from a university or college that offers core subjects or basic subjects for each qualification, or from a training institution (short-term or general). As of 23 June 2021, there are 264 universities, colleges and training institutions that are members of the “Japanese Association for Social Work Education”, which is an organization of social work educational schools (schools that provide education for certified social workers, mental health social workers and social welfare) in Japan [28].

Below is a summary of Japan College of Social Work and Nihon Fukushi University, which are the leading educational institutions in the welfare sector, offering both university training courses and training institutions for certified social workers and mental health social workers.

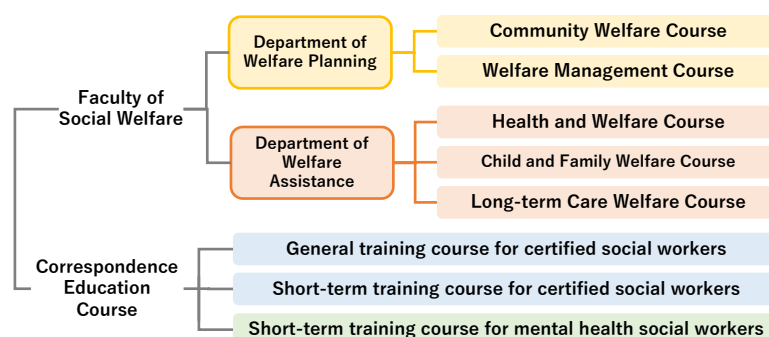
1) Japan College of Social Work

● Outline of the organization

Japan Social Work School was founded in 1946 as the first specialized educational institution for social work in Japan, and was later established in 1958 as Japan College of Social Work commissioned by the MHLW. Although it is a private university, its management is largely funded by the government. From its foundation, the mission of the university has been to develop competent specialists in social welfare and to contribute directly to the promotion of social welfare.

● Education program

Figure 10-11 shows an outline of the faculties of Japan College of Social Work. It has a Faculty of Social Welfare as a four-year university training course for certified social workers and mental health social workers, and a Correspondence Education Course as a training institution.



Source: Prepared by the Survey Team with reference to [29]

Figure 10-11 Faculties at Japan College of Social Work

The Faculty of Social Welfare has two departments: Welfare Planning (maximum of 55 students) and Welfare Assistance (maximum of 105 students), and graduates of either department are eligible to sit for the national examination for certified social workers. As for mental health social workers, students can register for the mental health social worker course (maximum 20 students) at the Faculty of Social Welfare and acquire the necessary subjects to qualify for the national examination for mental health social workers upon graduation.

The Correspondence Education Course offers a general training course (capacity 360 students) and a short-term training course (capacity 140 students) for certified social workers, and a short-term training course (capacity 150 students) for mental health social workers.

● Enrolment, qualifications and career path (Faculty of Social Work)

The enrolment in the Japan College of Social Work as at 1 May 2021 is shown in Table 10-11. In both the Welfare Planning and Welfare Assistance Departments, the number of students exceeds the number of places available.

Table 10-11 Enrolment status at Japan College of Social Work

(1 May 2021)

Faculty/ Department	Capacity		Number of students (% of capacity)				
	Admission	Whole year	1 st year	2 nd year	3 rd year	4 th year	Total
Faculty of Social Welfare	160	680	195 (122%)	205 (128%)	210 (131%)	225 (141%)	835 (123%)
Welfare Planning	55	220	59 (107%)	73 (133%)	64 (116%)	72 (131%)	268 (122%)
Welfare Assistance	105	420	136 (130%)	132 (126%)	134 (128%)	136 (130%)	538 (128%)

Source: Prepared by the Survey Team with reference to [29]

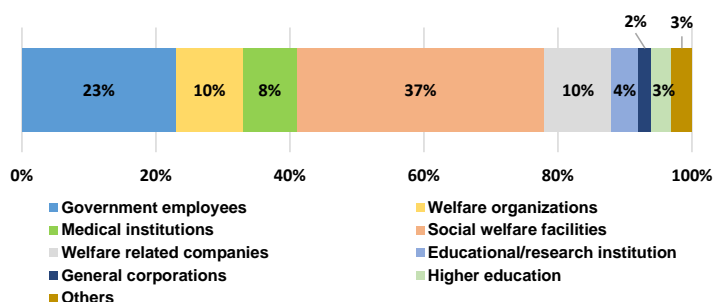
Table 10-12 shows the status of graduates of the Faculty of Social Welfare taking the national examination for certified social workers and mental health social workers for the year 2020. For certified social workers, the pass rate is well above the national average, with more than half of graduates passing the national examination for certified social workers. For mental health social workers, although the pass rate in 2020 was below the national average, the average pass rate over the past five years (2016-2020) was 81.7%.

Table 10-12 Status of the national examination for certified social workers and mental health social workers at Japan College of Social Work (FY2020)

	Certified Social Workers	Mental Health Social Workers
Number of graduates (For the mental health social workers, the number of students registered in the course)	221	20
Number of Examinees	213	20
Number of students passed the exam	119	12
Pass rate	55.9%	60.0%
(Reference) National average pass rate	29.3%	64.2%

Source: Prepared by the Survey Team with reference to [29]

Figure 10-12 shows the career paths of the 217 graduates²⁰ of the Faculty of Social Welfare in 2020. Overall, the faculty has the largest proportion of graduates working in social welfare facilities (37%), followed by government employees (23%).



Source: Prepared by the Survey Team with reference to [29]

Figure 10-12 Career paths for the Graduates of Japan College of Social Work

2) Nihon Fukushi University

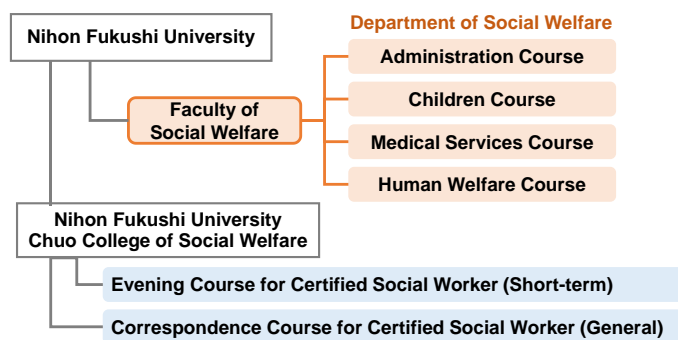
● Outline of the organization

Nihon Fukushi University was first established in 1953 as Chubu College of Social Work, and then in 1957 as Nihon Fukushi University, the first university in Japan to open a Faculty of Social Welfare. Inheriting the founders' spirit of supporting leprosy sanatoriums and orphanages since before the end of the war, the university has developed into a comprehensive welfare university.

Currently, in addition to the Faculty of Social Welfare, there are 8 faculties, 10 departments and 6 graduate schools, including the Faculty of Nursing and the Faculty of Health Sciences, etc., as well as related schools such as Nihon Fukushi University Chuo College of Social Services and Nihon Fukushi University High School, and education and research activities are conducted mainly in Aichi Prefecture.

● Education program

Figure 10-13 shows an outline of the school and faculty structure of Nihon Fukushi University. All courses in the Faculty of Social Welfare (400 students) offer qualifications to sit for the national examination for certified social workers, and mental health social workers could be obtained from the Medical Services Course and Human Welfare Course in the same Faculty. In addition, the Nihon Fukushi University Chuo College of Social Welfare offers short-term and general training courses for certified social workers.



Source: Prepared by the Survey Team with reference to [30] [31]

Figure 10-13 Structure of Nihon Fukushi University

● Enrolment, qualifications and career path

Student enrolment in the Faculty of Social Welfare as at 1 May 2021 is shown in Table 10-13. Although the ratio of students to capacity is 95% for all grades combined, the number of 3rd and 4th year students exceeds the capacity.

²⁰ Although the number of graduates for the year 2020 is 221, only 217 have information about their career opportunities.

Table 10-13 Enrolment status at Faculty of Social Welfare, Nihon Fukushi University
(1 May 2021)

Capacity		Number of students (% of capacity)				
Admission	Whole year	1 st year	2 nd year	3 rd year	4 th year	Total
400	1,680	341 (85%)	352 (88%)	447 (112%)	454 (114%)	1,594 (95%)

Source: Prepared by the Survey Team with reference to [30]

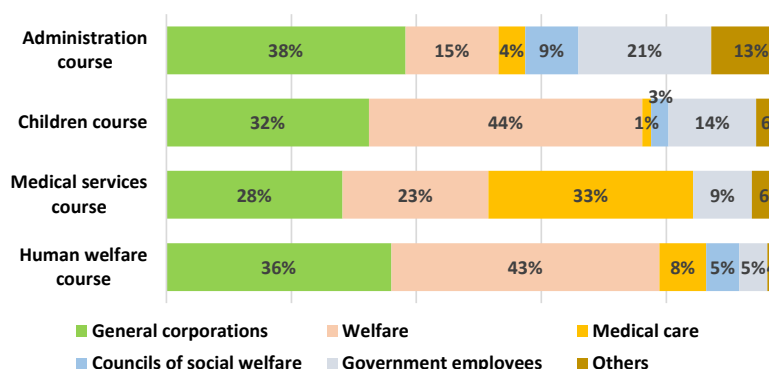
With regard to the status of qualifications for certified social workers and mental health social workers, information on the number of graduates of the Faculty of Social Welfare who have taken and passed the national examination is not disclosed. As for the situation of graduates of the short-term and general training courses for certified social workers at Nihon Fukushi University Chuo College of Social Welfare, Table 10-14 shows that the pass rate of both courses is much higher than the national average.

Table 10-14 Status of the national examination for certified social workers at Nihon Fukushi University Chuo College of Social Welfare (FY2020)

	Evening course (short-term)	Correspondence course (general)	Total
Number of Examinees	30	90	120
Number of students passed the exam	24	52	76
Pass rate	80.0%	57.8%	63.3%
(Reference) National average pass rate	29.3%		

Source: Prepared by the Survey Team with reference to [31]

The career paths of graduates of the Faculty of Social Welfare are shown in Figure 10-14 by course. With the increase in the elderly population, the number of general corporations with “welfare departments” has been increasing, and about 30% of graduates of all courses find employment in these corporations. The graduates of the Children Course and the Human Welfare Course have a large proportion of employment in the welfare sector, while a large proportion of the graduates of the Medical Service Course have employment in the medical care.



Source: Prepared by the Survey Team with reference to [30]

Figure 10-14 Career paths for the Graduates of the Faculty of Social Welfare, Nihon Fukushi University (FY2020)

(2) Curriculum

The curriculum for the training courses for certified social workers and mental health social workers have both been reviewed in 2019 in light of the changes in the circumstances surrounding these social work professions. The new curriculum after the review is shown in Table 10-15. It includes the additional subjects appropriate to the roles required of each profession, as well as an expansion of subjects common to certified social workers and mental health social workers, with 13 subjects common to both qualifications (marked in blue). This indicates that there has been an effort to strengthen the common foundation (generic) of social

work professions while deepening and expanding the professional roles (specific) required of certified social workers and mental health social workers respectively. In addition, the number of hours of practical training for social workers has been increased from 180 to 240 hours.

Table 10-15 New curriculum for the training courses for certified social workers and mental health social workers

*Hours are for day courses.

Certified Social Worker	Hours	Mental Health Social Worker	Hours
1. Outline of Medicine	30	1. Outline of Medicine	30
2. Psychology and Psychological Support	30	2. Psychology and Psychological Support	30
3. Sociology and Social System	30	3. Sociology and Social System	30
4. Principles and Policies of Social Welfare	60	4. Principles and Policies of Social Welfare	60
5. Basics of Social Welfare Research	30	5. Community Welfare and Integrated Support Systems	60
6. Foundations of Social Work and the Profession	30	6. Social Security	60
7. Foundations of Social Work and the Profession (specialized)	30	7. Welfare for the Persons with Disabilities	30
8. Theories and Method of Social Work	60	8. Legal System for Rights Protection	30
9. Theories and Method of Social Work (specialized)	60	9. Criminal Justice and Welfare	30
10. Community Welfare and Integrated Support Systems	60	10. Basics of Social Welfare Research	30
11. Organization and Management of Welfare Services	30	11. Psychiatry and Mental Health	60
12. Social Security	60	12. Issues and Support in Contemporary Mental Health	60
13. Elderly Welfare	30	13. Foundations of Social Work and the Profession	30
14. Welfare for the Persons with Disabilities	30	14. Principles of Mental Health	60
15. Child and Family Welfare	30	15. Theories and Method of Social Work	60
16. Support for People Living in Poverty	30	16. Theories and Method of Social Work (specialized)	60
17. Health Care and Welfare	30	17. Rehabilitation of Mental Disorders	30
18. Legal System for Rights Protection	30	18. Theory of Mental Health Welfare System	30
19. Criminal Justice and Welfare	30	19. Social Work Exercises	30
20. Social Work Exercises	30	20. Social Work Exercises (specialized)	90
21. Social Work Exercises (specialized)	120	21. Social Work Practice Guidance	90
22. Social Work Practice Guidance	90	22. Social Work Practice	210
23. Social Work Practice	240		
Total hours: 1,200		Total hours: 1,200	

Source: Prepared by the Survey Team with reference to [32] [33]

The roles required for each qualification and a summary of the review are detailed below for each.

1) Training course for certified social workers

In 2018, the Expert Committee of the Advisory Council on Social Security compiled the report “The roles required of certified social workers as social work professionals”, due to the fact that it has been 10 years since the 2007 revision of the training course for certified social workers and that their fields of activities have expanded in line with changes in welfare needs.

The report states that, in order to promote the realization of an inclusive society and to respond to emerging welfare needs, certified social workers as social work professions will be required to (1) conduct social work for the establishment of an integrated support system through the collaboration of multiple organizations to address complex and complicated issues, and (2) conduct social work for the establishment

of a system that enable community members to take the initiative in identifying and addressing the local issues [34]. To develop certified social workers with the practical skills to carry out these social work functions, discussions were held to review the educational content and the curriculum of the training course for certified social workers was revised in 2019. The main revisions are shown in Table 10-16.

Table 10-16 Main points of the review of training courses for certified social workers

<ol style="list-style-type: none"> 1. Enhancement of the content of the curriculum <ul style="list-style-type: none"> • Establishment of a subject related to an inclusive society: “community welfare and integrated support system” • Revision of the content and increase the number of hours for judicial subjects: “criminal justice and welfare” • Making core and basic subjects on social welfare compulsory 2. Enhancement of practical training and exercises <ul style="list-style-type: none"> • Increase in the number of hours of practical training to develop practical skills in the function of social work 3. Revision of the range of practical training facilities <ul style="list-style-type: none"> • Expansion of the range of practical training facilities: prefectural councils of social welfare, educational institutions (school social workers), community settlement support centers, etc. were added. 4. Expansion of common subjects <ul style="list-style-type: none"> • Expansion of common subjects with the content of the training course for mental health social workers

Source: Prepared by the Survey Team with reference to [32]

2) Training course for mental health social workers

The training courses for mental health social workers were reviewed in 2012, however, the circumstances surrounding them have changed further since then, following the amendments to the Psychiatric Social Workers Act and the Act on Employment Promotion etc. of Persons with Disabilities. The interim report compiled by the “Study Group on the Training of Mental Health Social Workers” in 2019 describes how the role of mental health social workers is expanding beyond providing support for people with mental disorders to include support for people who have difficulties in their daily lives due to mental disorders and other mental health issues. In addition, the placements of mental health social workers, which used to be mainly in medical institutions and welfare facilities, have been expanded to the education field (schools, etc.), the judicial field (rehabilitation facilities, prisons, etc.), and the industrial/labor field (Hello Work, general corporations, etc.). In light of this situation, the training courses have been reviewed as shown in Table 10-17.

Table 10-17 Main points of the review of training courses for mental health social workers

<ol style="list-style-type: none"> 1. Enhancement of the content of the curriculum <ul style="list-style-type: none"> • Establishment of a core subject for the training of mental health social workers: “principles of mental health” • Establishment of subjects to meet the changing role of mental health social workers: “criminal justice and welfare” and “community welfare and integrated support systems” • Making core and basic subjects on the health and welfare of people with mental disorders compulsory • Enhancement of educational content related to employment support 2. Expansion of common subjects <ul style="list-style-type: none"> • Expansion of common subjects with the content of the training course for mental health social workers 3. Enhancement of practical training and exercises <ul style="list-style-type: none"> • Restructuring of subjects for social work skills • Revision of the requirements for teachers in charge of practical exercises 4. Revision of the range of practical training facilities <ul style="list-style-type: none"> • Expansion of the range of practical training facilities: municipal councils of social welfare, facilities that provide community consultation support, educational institutions (school social workers), and community-based integrated care centers, etc. were added.
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Source: Prepared by the Survey Team with reference to [33]

(3) Continuing education

As mentioned in 10.1.2, the society and welfare needs surrounding social service workforce are changing and the legal system is being revised accordingly. Therefore, social workers need to continuously improve their professional knowledge and skills, and for this reason, it is important to systematize training systems to enable them to continue to receive educational opportunities and self-development after qualification.

One form of systematic continuing education is the “Lifelong Training System” offered by professional associations; as discussed below in 10.2.3(2), the aim of professional associations is to improve the quality of social workers, and they work to develop human resources through the training programs. The following is a summary of the lifelong training systems of the JACSW and the JAMHSW.

1) Lifelong training system by the JACSW

The JACSW has been considering the introduction of a lifelong training system since its establishment. According to the results of a survey of social workers conducted in 1993, a high percentage of members expected the association to provide “information” and “continuing training”. Then, the subsequent surveys were carried out to identify the training needs, and in 1999 the lifelong training center was launched, and the lifelong training system was fully introduced.

Regarding the training program, the JACSW places emphasis on “having a common foundation as a certified social worker”. It also says that the specialty of certified social workers is “consultation and assistance, and the coordination of necessary support”, and that it is important to acquire a common foundation and develop the generic competence as a professional in consultation and assistance regardless of the job field or occupation. Specifically, rather than considering clients in terms of age groups or other attributes of the social welfare system (e.g., children, elderly, people with disabilities, etc.) and providing support within the framework of the system, it is necessary for certified social workers to understand the welfare needs of them as individuals based on their right to life [35].

Based on these principles, the lifelong training system provided by the JACSW consists of “basic courses” and “specialized courses” as shown in Figure 10-15. The purpose of the “basic course” is to learn the values, knowledge and skills commonly required of certified social workers, and to acquire the foundation of social work profession, and all certified social workers who have joined the prefectural association of certified social workers are required to take this course. The “specialized course” consists of “common training” which covers the common contents required as a certified social worker, and “field-specific training” which specializes in the contents depending on the field of work. Members who have completed the basic course are required to make



Source: Prepared by the Survey Team with reference to [35]

Figure 10-15 Lifelong training system by the JACSW

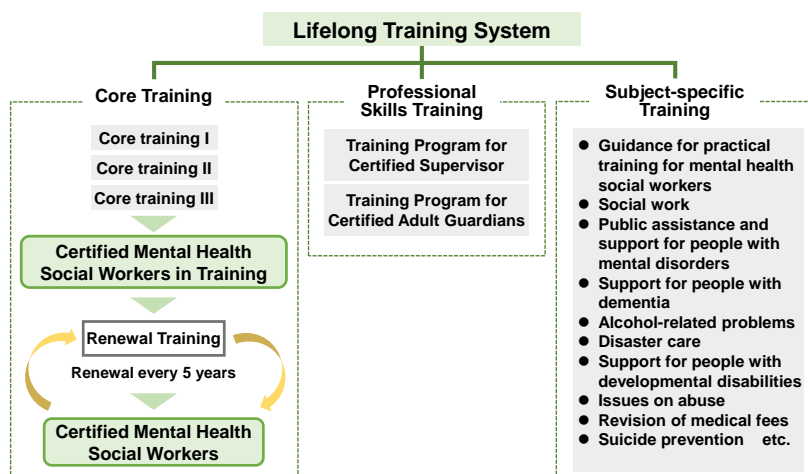
their own training plans and complete the first and second phases of the course, and once they have completed the required number of credits, they are issued with a “Certificate of Completion”. Also, by attending these training courses, the members are able to obtain some of the credits required to qualify as an “Approved Certified Social Worker” (see 10.2.3(4)1)).

In addition to the lifelong training system, the JACSW offers “e-learning courses”, which can be accessed by both non-member and non-certified social workers (the courses that can be accessed and the fees vary depending on the category of member, non-member social worker or general). The members of the JACSW are able to use the credits in the specialized courses of the lifelong training system as credits in the Approved Certified Social Worker System. As of May 2021, 81 courses are available online.

2) Lifelong training system by the JAMHSW

The JAMHSW is working on a lifelong training system for the purpose of “fulfilling the responsibility of mental health social workers to increase trust in them as professionals and enhancing the development of human resources to meet the demands of the society as part of efforts to address policy issues”. Although there is no renewal system for the national qualification of mental health social workers, the JAMHSW uses its own certification system, with a renewal system every five years, to ensure the quality of the members.

Figure 10-16 shows the outline of the lifelong training system by the JAMHSW. There are three types of training: “core training”, “professional skills training”, and “subject-specific training”. The core training is an accumulative training based on the years of experience since joining the association, and all members are eligible to attend. Upon completion of the core training programs from I to III, mental health social workers are certified



Source: Prepared by the Survey Team with reference to [42]

Figure 10-16 Lifelong training system by the JAMHSW

as “Certified Mental Health Social Workers in Training”, and then become “Certified Mental Health Social Workers” upon completion of the renewal training. This certification is renewable every five years, and it is necessary to take the renewal training at the time of renewal.

The “professional skills training” is designed to develop experts based on specific themes. To participate in this training program, participants must be certified as certified mental health social workers in training or certified mental health social workers. The “subject-specific training” is conducted on topics of high interest to meet the needs of the society, and is open to all members and, depending on the topic, to non-members.

So far, the JAMHSW has offered all lifelong training programs in face-to-face settings, however, in response to the impact of the spread of COVID-19, the association began offering training via online from FY2020.

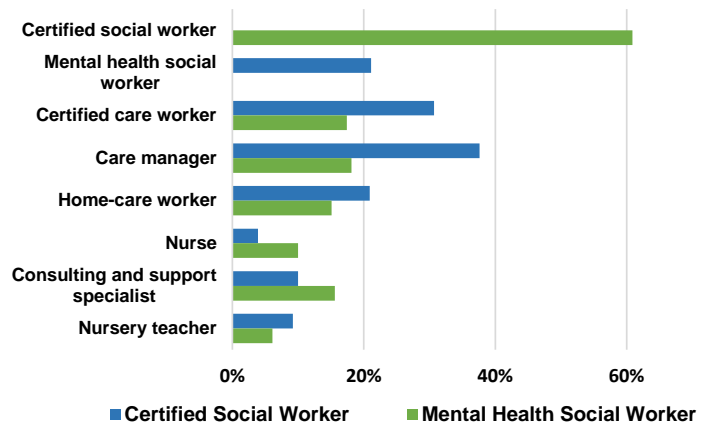
10.2.3 Support

(1) Recruitment and retention

1) Employment status

Regarding the working situation of certified social workers and mental health social workers, the Social Welfare Promotion and National Examination Center has conducted the “Employment Status Survey” for all certified social workers and mental health social workers in Japan, and their actual situation of employment of can be understood from the results of this survey. This section summarizes the results of the survey for FY2020.

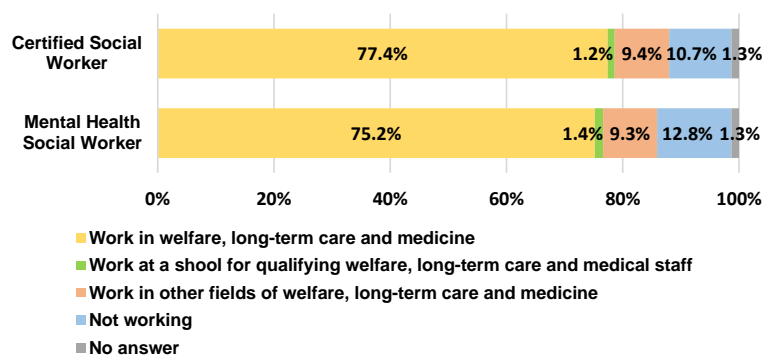
As an overview of the respondents, with regard to gender, 31.5% of certified social workers were male and 68.4% were female, while 28.3% of mental health social workers were male and 71.5% were female. As for the status of other qualifications possessed, as shown in Figure 10-17, most of the certified social workers were also care managers and care workers. For mental health social workers, it was found that more than 60% had both qualifications of certified social worker.



Source: Prepared by the Survey Team with reference to [36]

Figure 10-17 Other qualifications possessed by certified social workers and mental health social workers

Figure 10-18 shows the employment status of certified social workers and mental health social workers. Of those registered for these qualifications, less than 80% are engaged in work in welfare, long-term care and medicine fields, about 10% are engaged in work outside of these fields, and about 10% are not currently working for reasons such as childbirth or child rearing. In addition, about 60% of those working in other fields of welfare, long-term care and medicine, both social workers and mental health workers, answered that they had worked in these

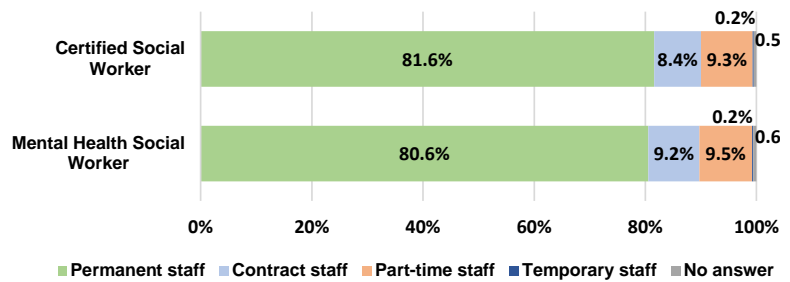


Source: Prepared by the Survey Team with reference to [36]

Figure 10-18 Employment status of certified social workers and mental health social workers

fields in the past, and the common reasons for leaving their previous workplace were “atmosphere and human relations in the workplace”, “illness in physical or mental health”, and “dissatisfaction with salary and wages”.

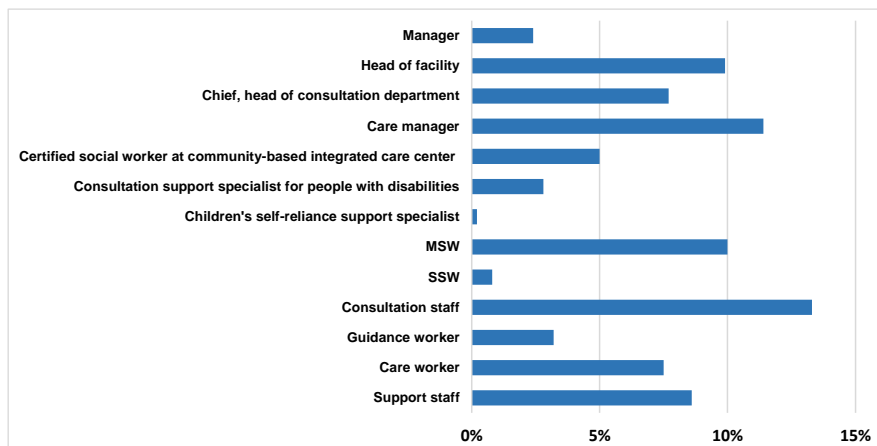
After this paragraph, the status of certified social workers and mental health social workers engaged in work in welfare, long-term care and medicine fields is presented. As for the type of employment, as shown in Figure 10-19, about 80% of both are employed as permanent staff.



Source: Prepared by the Survey Team with reference to [36]

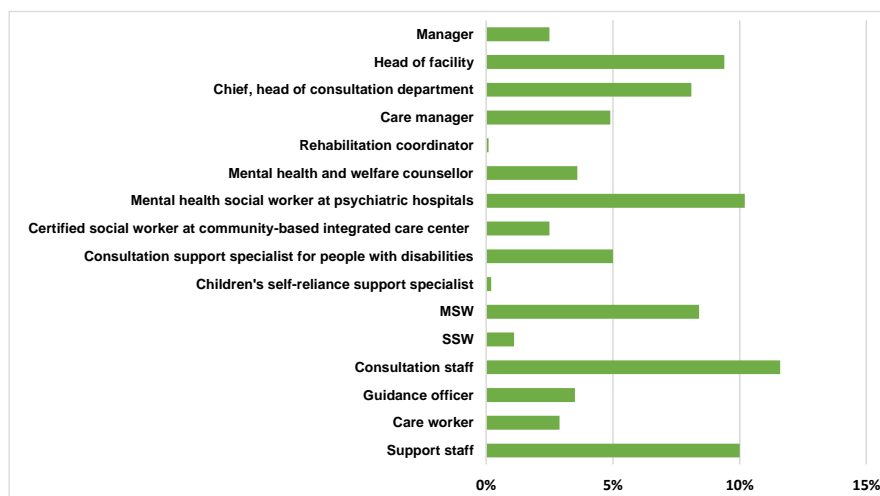
Figure 10-19 Types of Employment for certified social workers and mental health social workers

The occupations and positions of certified social workers and mental health social workers are shown in Figure 10-20 and Figure 10-21, respectively.



Source: Prepared by the Survey Team with reference to [36]

Figure 10-20 Occupations and positions of certified social workers

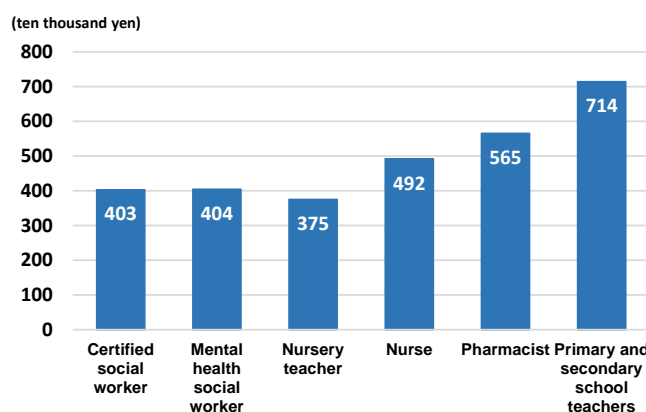


Source: Prepared by the Survey Team with reference to [36]

Figure 10-21 Occupations and positions of mental health social workers

As mentioned earlier on the possession of other qualifications (Figure 10-17), certified social workers and mental health social workers hold multiple qualifications, so the fields in which they work (children, people with disabilities, the elderly, etc.) are broad, and their job titles and positions also varied.

Regarding the status of income and qualification allowance, Figure 10-22 shows a comparison of the average annual salary between certified social workers and mental health social workers and other professions. The average annual salary of certified social workers and mental health social workers is about the same, and although it is slightly higher than that of nursery teachers, it is less than two-thirds of the average annual salary of primary and secondary school teachers.



Source: Prepared by the Survey Team with reference to [36] [69]
Figure 10-22 Average annual salary of certified social workers and mental health social workers

As for the qualification allowance, those who answered that they have a qualification allowance were less than 40% of both certified social workers and mental health social workers, and more than 60% of them were in a situation where they did not receive any benefit of qualification [36].

2) Deployment status

With regard to the assignment of certified social workers and mental health social workers, the following is an overview of the status of staff possessing and assigning these qualifications at each institution.

● Staff at welfare offices

Table 10-18 shows the qualifications held by staff at welfare offices (prefectures, cities, special wards, and towns and villages) across Japan.

Table 10-18 Qualifications of staff at welfare offices (in charge of public assistance)

	2004		2009		2016	
	Supervisory staff	Operational work staff	Supervisory staff	Operational work staff	Supervisory staff	Operational work staff
Certified Social Worker	2.6%	2.8%	3.1%	4.6%	8.7%	13.5%
Mental health social worker	-	-	0.3%	0.5%	1.7%	2.4%
Social welfare officer	82.7%	82.0%	74.6%	74.2%	77.3%	74.9%

Source: Prepared by the Survey Team with reference to [37] [38]

Under the Social Welfare Act, it is stipulated that “supervisory staff and operational work staff at welfare offices must be social welfare officers”. Basically, if a person meets the qualifications for appointment as a social welfare officer (taking at least three subjects related to social welfare, including general education, at a university or junior college, etc.), he/she is able to engage in this work even if he/she does not have qualifications as a certified social worker or mental health social worker. Although the requirements for appointment as a social

welfare officer include the qualifications of certified social workers and mental health social workers, the number of supervisory officers and operational work staff with these qualifications was less than 3% each in 2004. However, over the next 10 years, the percentage of those who hold these qualifications has gradually increased, indicating that they have come to engage in the administrative work of welfare offices with greater expertise in the field of social welfare.

● Staff at municipal councils of social welfare

Table 10-19 shows the percentage of major qualifications held by employees at municipal councils of social welfare and the average number of such qualified personnel per council. Although the municipal councils of social welfare have a large number of certified care workers and care managers who are responsible for the welfare of the elderly, certified social workers are the second largest group after them, and the number is increasing every year.

Table 10-19 Qualifications of employees at municipal councils of social welfare and average number of qualified personnel (FY2018)

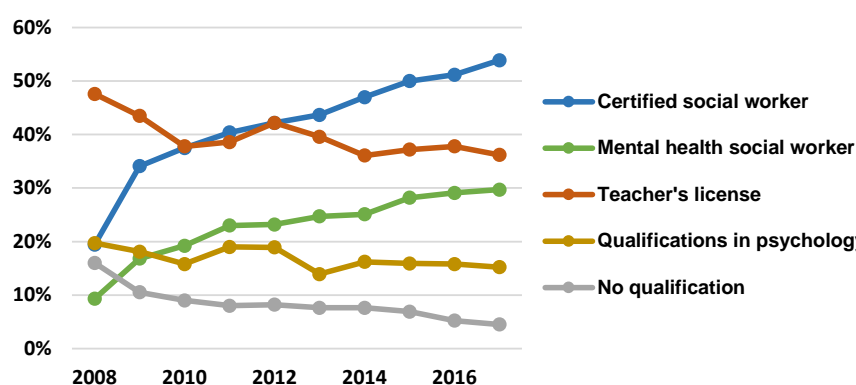
Qualification	Ratio of qualified personnel	Average number of qualified personnel per council (person)
Certified social worker	9.2%	7.2
Mental health social worker	1.9%	1.5
Public health nurse	0.7%	0.5
Nurse	6.8%	5.3
Certified care worker	24.7%	19.3
Nursery teacher	6.8%	5.3
Registered dietitian	0.3%	0.2
Nutritionist	1.0%	0.8
Care manager	13.2%	10.2

Source: [66]

● School social workers

School social workers (SSWs), who are assigned to schools to provide support related to the welfare of students, are expected to have professional qualifications related to welfare, such as certified social worker or mental health social worker, although the qualification requirements are different depending on the local government.

shows the trends in the qualifications held by SSWs. In 2008, it can be seen that those engaged as SSWs were mainly holders of teacher's license, and there were also nearly 20% of those who did not hold any qualifications. However, the percentage of those with qualifications of certified social worker and mental health social worker has increased since 2009, and by 2018, certified social workers accounted for the largest proportion of SSWs.



Source: Prepared by the Survey Team with reference to [65]

Figure 10-23 Trends in qualifications held by SSWs

● **Staff at penal institutions, etc.**

There has also been progress in the assignment of certified social workers and mental health social workers to penal institutions, etc. Table 10-20 shows the trends in the number of certified social workers and mental health social workers assigned to penal institutions and juvenile training schools.

The deployment of certified social workers in penal institutions began in 2004, and has been fully implemented since 2009²¹, following the introduction of special treatment²². In addition to these part-time staff, welfare officers (those with qualifications as certified social workers, mental health social workers, or certified care workers) have started to be assigned as full-time staff since 2014.

Table 10-20 Trends in the number of certified social workers and mental health social workers assigned to penal institutions and juvenile training schools

Year	Welfare officer		Certified social worker		Mental health social worker	
	Penal institution	Juvenile training school	Penal institution	Juvenile training school	Penal institution	Juvenile training school
Number of facilities (as of 2016)	34 locations	2 locations	70 locations	16 locations	8 locations	2 locations
2004	-	-	-	-	2	-
2005	-	-	-	-	4	-
2006	-	-	-	-	4	-
2007	-	-	8	-	8	-
2008	-	-	8	-	8	-
2009	-	-	70	3	8	2
2010	-	-	75	3	8	2
2011	-	-	75	3	8	2
2012	-	-	92	5	8	2
2013	-	-	92	5	8	2
2014	12	-	94	12	8	2
2015	26	2	98	16	8	2
2016	34	2	99	16	8	2

Source: Prepared by the Survey Team with reference to [37]

(2) Professional associations and networks

Professional associations are responsible for maintaining and improving the ethics and quality of professionals by providing necessary training programs, etc. In Japan, there are four professional associations for social workers: (1) the Japanese Association of Social Workers in Health Services (JASWHS), (2) the Japanese Association of Social Workers (JASW), (3) the Japanese Association of Mental Health Social Workers (JAMHSW), and (4) the Japanese Association of Certified Social Workers (JACSW). In addition, (5) the Japanese Federation of Social Workers (JFSW), which consists of these four organizations, functions as the coordinating body in Japan for the International Federation of Social Workers (IFSW). Table 10-21 summarized these five organizations (ordered by year of establishment).

²¹ In 2009, a subject on the rehabilitation system was added to the curriculum for certified social workers.

²² To designate some of the rehabilitation facilities as those that temporarily accept the elderly and people with disability, and to assign staff with qualifications as certified social workers or mental health social workers to provide treatment with consideration for the characteristics and special needs of them.

Table 10-21 Summary of professional associations for social workers

Organization	Year of establishment	Purpose
Japanese Association of Social Workers in Health Services (JASWHS)	1953	To contribute to the promotion of social welfare and cooperation among health, medicine, and welfare through the practice and research of medical social work.
Japanese Association of Social Workers (JASW)	1960 (Re-established 1983)	To contribute to the improvement and development of social welfare in cooperation with a wide range of people and related organizations through the activities such as dissemination and awareness raising, surveys and research, seminars, workshops, and networking with domestic and international organizations.
Japanese Association of Mental Health Social Workers (JAMHSW)	1964	To contribute to the promotion of mental health and welfare of the people by improving the qualifications of mental health social workers, conducting projects such as dissemination and raising awareness about mental health social workers, and promoting professional and social activities for the social restoration and welfare of the people with mental disorders.
Japanese Association of Certified Social Workers (JACSW)	1993	To establish the ethics of certified social workers, to improve their professional skills, to endeavor to improve the quality and social status of certified social workers, and to contribute to the protection of people's lives and rights and the promotion of social welfare in cooperation with prefectural associations of social workers.
Japanese Federation of Social Workers (JFSW)	1997	To establish the ethics of social workers in Japan, enhance their professional skills and qualities, and improve their social status as social workers, exchange opinions among members, and conduct joint projects as a federation when necessary. In addition, the federation communicates with the IFSW, participates in international conferences, and consolidates and decides the unified opinions of Japan on policy matters.

Source: Prepared by the Survey Team

As mentioned earlier in 10.2.1(1), these professional organizations have played an important role in the movement to establish national qualifications and professionalization in the medical and welfare fields. Organizing the profession is listed as one of the six conditions²³ for the establishment of the social work profession, and is essential for acquiring social recognition, establishing social status, and developing into a more advanced profession [14].

Of the four professional associations, the JASWHS was the earliest to be established, organized in 1953, and formulated its “Code of Ethics for Medical Social Workers” in 1961. The JASWHS was established with the purpose of “improving the quality and establishing the qualifications of social workers in the medical field”. In order to secure the status of social workers in the medical field, where doctors, nurses, and other medical professionals exist, they have been actively working to establish qualifications, such as preparing the draft of the “Medical Social Workers Act” (see p. 10-14) [39].

The JASW was established in 1960 in response to a request from the IFSW, and was the 20th to join the federation. However, a few years later, due to financial difficulties and a lack of active members, its activities were temporarily suspended, and it was rebuilt in 1983. Currently, the JASW is working on providing seminars and training courses, as well as dissemination and awareness activities, as a

²³ Six conditions derived from the conceptualization of social work profession research by A. Flexner, E. Greenwood, and G. Miller; (1) systematic theory, (2) transferable skills, (3) purpose of public concern and welfare, (4) organization of the profession (professional associations), (5) code of ethics, and (6) social recognition based on testing or academic credentials.

comprehensive professional organization composed of a wide range of stakeholders involved in social welfare, including children, people with disabilities, the elderly, people with low income, community welfare, government, and researchers.

The professional association for certified social workers, the JACSW, and for mental health social workers, the JAMHSW, are described in detail below.

1) Japanese Association of Certified Social Workers (JACSW)

The JACSW was established in 1993 for the purpose of enhancing the professional competence of certified social workers through self-development, providing high-quality welfare services to people who need assistance, and establishing social recognition as a social work professional. As for the organizational structure, since 2012, the JACSW has been a federation of 47 prefectural associations of certified social workers in Japan, rather than an organization of individual members of certified social workers. The number of members as of the end of March 2021 was 42,631.

The main activities of the JACSW include holding an annual national conference, sharing the results of practice and research at the JACSW, implementing various training programs to support self-development of certified social workers, providing consultation and assistance services at rights protection centers, international activities, and public relations activities. Regarding the training programs, as explained in 10.2.2(3), a “lifelong training system” has been established to maintain and improve the professional knowledge and skills of members. In addition, the associations of certified social workers in each prefecture are also providing various training programs and research activities in their areas.

Table 10-22 shows an outline of the Third Mid-term Plan of the JACSW for 2019 to 2023. In this plan, the goal is to promote the establishment of a system that can demonstrate the functions of social work in order to realize an inclusive society. Towards the realization of an inclusive society, it is necessary to improve the environment so that the functions of social work can be fulfilled, and as a means to achieve this goal, the appointment of certified social workers is to be expanded and their work is to be practically monopolized. Also, as shown in Table 10-22, the JACSW plans to promote understanding of the roles of certified social workers with the three guiding principles: promotion of social work, strengthening of the organizational foundation for activities, and improvement of the members’ expertise.

Table 10-22 Outline of the Third Mid-term Plan of the JACSW (2019-2023)

Principle	Contents
1. Promotion of social work	<ul style="list-style-type: none"> • Strengthen the ability to collect information and disseminate policy proposals, etc. • Strengthen rights protection activities • Promote the establishment of a system that contributes to the realization of an inclusive society • Strengthen the ability to communicate with the international society
2. Strengthening of the organizational foundation for activities	<ul style="list-style-type: none"> • Share the organizational goals and directions of the JACSW and the prefectural associations of certified social workers • Establish sound and stable finances • Support for strengthening the organization of the prefectural associations • Acquire of substantial monopoly of work • Strengthen cooperation with related organizations • Strengthen response to unforeseen circumstances

Principle	Contents
3. Improvement of members' expertise	<ul style="list-style-type: none"> • Enhance practical skills • Enhance the lifelong training system • Develop professional competence

Source: Prepared by the Survey Team with reference to [40]

2) Japanese Association of Mental Health Social Workers (JAMHSW)

The JAMHSW is a national organization of mental health social workers founded in 1964. As mentioned in 10.2.1(1), the history of mental health social workers began in 1948, and they have been assigned mainly to psychiatric hospitals, however, since their social status was low and unstable, the JAMHSW has been aiming for the national qualification of mental health social workers since its establishment. In the statement of purpose for establishment, it is stated that “mental health social work is a profession that places its academic system in social welfare studies, cooperates with the medical diagnosis and treatment of people with mental disorders as a member of the medical team, and contributes to their prevention and social rehabilitation process”, clearly differentiating it from other professions in the field of psychiatry [41].

As for the organizational structure, prefectural branches and prefectural associations have been established in each prefecture. The prefectural branches are responsible for conducting projects as internal organs of the JAMHSW, while the prefectural associations are established in each prefecture and conduct training programs as individual entities. The qualifications for membership vary from the prefectural associations, ranging from mental health social workers to social workers in the mental health field. As of January 2021, approximately 12,000 members are affiliated with the JAMHSW [42].

The activities conducted by the JAMHSW include the protection of the rights of the people with mental disorders, the improvement of the knowledge, skills, ethics, and qualifications of mental health social workers, the enhancement and development of the qualification system and its dissemination and awareness-raising, research and studies on mental health and mental health social workers, and support programs for the people with mental disorders through cooperation with related organizations in Japan and abroad.

Table 10-23 summarizes the Mid-term Vision 2020 of the JAMHSW²⁴. With the goal of “realizing a society in which all citizens, including the people with mental disorders, are able to maintain their dignity as human beings through the powerful development of social work by mental health social workers in all fields, awareness-raising activities, and confronting violations of their rights”, the JAMHSW has set three pillars to work on: policy recommendations, human resource development, and organizational strengthening.

Table 10-23 Outline of the Mid-term Vision 2020 for the JAMHSW (2016-2020)

Principle	Contents
1. Policy recommendations	<ul style="list-style-type: none"> • Policy recommendations based on diverse practices in mental health and welfare, labor, justice, education, etc. • Recommendations on the ideal state of social service workforce based on the collection of practical knowledge and research • Expansion of request activities and dissemination and raising awareness of welfare culture through collaboration with organizations in social work

²⁴ As of January 2022, the mid-term plan for FY2021 and beyond has not been opened to the public.

Principle	Contents
2. Human resource development	<ul style="list-style-type: none"> • Development of human resources who can take charge of comprehensive community support based on social work from the perspective of mental health, and provision of such human resources to society • Enhancement of practical skills by strengthening the lifelong training system and mutual development in multiple professions and fields • Promotion of a “common language” that transcends disciplines and fields, and the discovery and development of human resources who will be responsible for the organization of the next generation.
3. Organizational strengthening	<ul style="list-style-type: none"> • Increasing the organization ratio of active mental health social workers²⁵ to 60%. • Strengthening activities at the branch and block level based on cooperation with the prefectural associations (gathering opinions, holding training) • Promotion of a system for disaster support based on cooperation with prefectural associations and related organizations and groups

Source: Prepared by the Survey Team with reference to [43]

(3) Code of ethics

A code of ethics is a clear statement of the desirable value attitudes of social workers as professionals, a code of ethical conduct in practice, and guidelines for duty, and is an important expression of values by which professionals are aware of their identity and mutually affirm their values and sense of mission. In Japan, the professional associations mentioned in 10.2.3(2) have formulated their own codes of ethics, which have been used as guidelines for their members.

The JASWHS adopted the “code of ethics for MSW” in 1961, the JASW adopted the “code of ethics for social workers” in 1986, and the JAMHSW adopted the “code of ethics for mental health social workers” in 1998 (the JACSW adopted the “code of ethics for social workers developed by the JASW in 1995).

In this context, following the adoption of the “Definition of Social Work” at the IFSW General Assembly in 2000, the JASW and the JACSW began to revise their code of ethics, and then the JASWHS and the JAMHSW also joined to formulate a common code of ethics for the four professional associations. To develop a common code of ethics, in addition to each organization's own codes, the IFSW code of ethics and other countries' codes of ethics were used as reference. As a result, the code was officially published as the “Code of Ethics for Social Workers” in 2005, and each of the four organizations adopted it as the official code of ethics for their respective organizations. In addition, this code of ethics has been revised in response to the “Global Definition of the Social Work Profession” adopted at the IFSW in 2014 and the diversification of the roles of social work professions due to recent changes in the society and was adopted at the Representative Assembly of the Japanese Federation of Social Workers in 2020 [44].

As such, the four professional organizations now have a common code of ethics, which is the foundation of their shared values and identity as a social work profession. Table 10-24 shows the outline of the “Code of Ethics for Social Workers”.

²⁵ Refers to mental health social workers who are engaged in work that utilizes their qualifications as mental health social workers.

Table 10-24 Outline of the Code of Ethics for Social Workers

Item		Contents
Principle	I. Human dignity	Social workers respect all people as irreplaceable, regardless of their origin, race, ethnicity, nationality, gender, gender identity, sexual orientation, age, physical or mental condition, religious or cultural background, social status, or economic situation.
	II. Human rights	Social workers recognize that all people are born with inviolable rights, and will not tolerate the suppression, violation, or plundering of those rights for any reason.
	III. Social justice	Social workers seek to achieve social justice based on freedom, equality, and coexistence, free from discrimination, poverty, oppression, exclusion, indifference, violence, and environmental destruction.
	IV. Collective responsibility	Social workers recognize the power and responsibility of the group and contribute to the realization of a mutually beneficial society by working with both people and the environment.
	V. Respect for diversity	Social workers recognize the diversity that exists within individuals, families, groups, and communities, and seek to realize a society that respects this diversity.
	VI. Holistic existence	Social workers recognize all people as holistic beings with biological, psychological, social, cultural, and spiritual dimensions.
Ethical standards	I. Ethical responsibility to clients	
	II. Ethical responsibility to organizations and workplaces	
	III. Ethical responsibility to society	
	IV. Ethical responsibility as a professional	

Source: [45]

In addition to the Code of Ethics, the JACSW formulated the “Code of Conduct for Social Workers” in 2021, which embodies the code of ethics and shows the actions that certified social workers should take to practice based on the code of ethics. Similarly, as standards of conduct, the JAMHSW and the JASWS have developed the “Guideline for the Services of Mental Health Social Workers (2020)” and the “Guideline for the Services of Medical Social Workers (2020)”, respectively.

(4) Career development

As career development mechanisms for certified social workers and mental health social workers, there is the Approved Certified Social Worker System and the Certified Mental Health Social Worker System. In addition, as a useful tool for career development, the JAMHSW has developed a career ladder. The following is the overview of the system.

1) Approved Certified Social Worker System

The Approved Certified Social Worker System began to be considered around 2006 in response to the increasing, diverse and complex welfare needs of the population, and to train certified social workers who would be able to provide more specialized services. In addition, in the “Basic Guideline for Measures to Secure Human Resources in Social Welfare” mentioned in 10.2.1(1)2), it is stated that “mechanisms should be established to certify a higher level of expertise for qualified personnel such as those with national qualifications”.

In response to this, the Agency for Accreditation and Approval of Approved Certified Social Workers was established in 2011, and the Approved Certified Social Worker System started in 2012. The Approved Certified Social Worker System is a system that supports the career development of certified social workers who are capable of promoting individual support, cooperation with multiple professions and community

welfare using their advanced knowledge and outstanding skills, and certifies their practical abilities. The system offers two levels of accreditation: “Approved Certified Social Workers” and “Approved Advanced Certified Social Workers”.

Table 10-25 summarizes the requirements, roles and fields of training for the approved certified social workers and the approved advanced certified social workers respectively. Once these requirements have been met, an application for accreditation is made to the Agency for Accreditation and Approval of Approved Certified Social Workers, and once accredited, the applicant is registered with the registration authority (JACSW) as an approved certified social worker.

Table 10-25 Outline of the “Approved Certified Social Worker” and the “Approved Advanced Certified Social Worker”

	Approved certified social worker	Approved advanced certified social worker
Requirements	<ol style="list-style-type: none"> 1. Have a qualification as a certified social worker 2. Be a regular member of a social worker professional associations²⁶ 3. Have at least five years of experience in the field of consultation and assistance after qualifying as a certified social worker, and during this period, in principle, have been engaged in work that is equivalent to the work of a designated facility or position in the social worker system. Of these, at least two years must have been in the field for which approval is sought. 4. Have the “necessary experience²⁷” for the work experience period 5. Have completed training program at recognized institutions or accredited training for approved certified social workers 	<ol style="list-style-type: none"> 1. Have a qualification as a certified social worker 2. Be a regular member of a social worker professional associations 3. Be an approved certified social worker 4. Have at least five years of experience in the field of consultation and assistance after qualifying as a certified social worker, and during this period, in principle, have been engaged in work that is equivalent to the work of a designated facility or position in the social worker system. 5. Have the “necessary experience” for the work experience period 6. Have completed training program at recognized institutions 7. Have an approved record of achievement 8. Have published a paper that meets the criteria or made a presentation at a recognized conference 9. Pass an examination
Roles	<ul style="list-style-type: none"> • Dealing with cases combining multiple issues • Leadership within the workplace and practice supervision • Liaison with the community and external agencies, emergency response, response to complaints • Multi-professional collaboration and coordination within the workplace 	<ul style="list-style-type: none"> • Providing guidance and supervision • Developing systems for organizations, including complaint resolution and risk management • Developing systems of cooperation between local institutions and involvement in the formulation of welfare policy • Guidance on practice based on scientific evidence, verification of practice and accumulation of evidence
Fields	The elderly, people with disabilities, children and families, healthcare, community and multicultural field	In addition to their own practice, practicing, collaborating and educating on local issues across multiple disciplines.

Source: Prepared by the Survey Team with reference to [46]

²⁶ As of July 2021, two organizations are recognized: the JACSW and the JASWHS.

²⁷ https://www.jacsw.or.jp/ninteikikou/kojin/shinsei_shinki/documents/betsu_jitsumu.pdf

A register of approved certified social workers is available on the website²⁸ of the JACSW. As of October 2021, there are a total of 1,007 approved certified social workers (385 in the field of elderly care, 134 in the field of disability, 64 in the field of child and family care, 286 in the field of medical care, and 138 in the field of community and multicultural care).

On the other hand, the impact and benefits of being accredited as an approved certified social worker are uncertain at present. According to the awareness survey conducted by the JACSW in 2017 for approved certified social workers, in terms of changes in benefits at their organizations, etc. after accreditation, only 1.7% of respondents said that they had been promoted, while 91.2% said that they had remained the same. Also, in terms of income, 89.2% of respondents said that their income would remain the same (the same as before certification), indicating that five years after the start of the system, the certification system has not brought much of a direct benefit to approved certified social workers [47].

2) Certified Mental Health Social Worker System

The Certified Mental Health Social Worker is a higher-level qualification for mental health social workers established by the JAMHSW as part of its own lifelong training system. As outlined in 10.2.2(3)2), after completing the Core Training I, II and III, a mental health social worker will be certified as a “Certified Mental Health Social Worker in Training”, and then become a “Certified Mental Health Social Worker” upon completion of the renewal training. The certified mental health social workers are required to renew their certification, which can be maintained by attending renewal training every five years. The requirements for certification are: to be a mental health social worker, to be a member of the JAMHSW, and to complete these training courses within the prescribed time frame.

The number of certified mental health social workers in training and certified mental health social workers is 800 and 1,531, respectively, as of April 2019.

3) Career ladder for mental health social workers

The JAMHSW has developed a Career Ladder²⁹, which sets out the competencies that mental health social workers need to acquire in order to develop high-quality practice at each level of their practice experience, so that they can continue to improve themselves as professionals. In 2018, the “Study Group on the Training of Mental Health Social Workers” established by the MHLW pointed out the importance of continuing education and human resource development after qualification, and then surveys and discussions were conducted to develop a career ladder, which was formulated in 2020.

Figure 10-24 shows the framework of the career ladder for mental health social workers. The horizontal axis shows the approximate number of years of experience as steps (five levels) to improve competence. On the vertical axis, the elements for improving qualifications are shown in six major categories, and for each element, the broad objectives required at each stage are presented. By utilizing this career ladder, mental health social workers can see their current competence and the competence that they need to improve.

²⁸ <https://www.jacsw.or.jp/csw/nintei/meibo/index.html>

²⁹ https://www.jamhsw.or.jp/ugoki/kensyu/document/sakura_set/01_Carrier_rudder.pdf

Step	Step 1	Step 2	Step 3	Step 4	Step 5
Years of experience	1~2 years	3~5 years	6~10 years		11 years~
1. Work-life balance	Balancing your life and work		Balancing your life events with your work		Creating a system of work-life balance
2. Skills as a member of society/organization	Beginner (1 st semester)	Beginner (2 nd semester)	Team leader/Head of operations		Manager
3. Skills as a professional/practitioner	Working under guidance	Working independently	Working in a leadership role		Working towards a systematic approach
4. Self-development	Acquiring a taught and learning attitude	Utilizing internal resources and opportunities	Utilizing multi-institutional and multi-professional resources and opportunities		Utilizing multidisciplinary resources and opportunities
5. Professional education and research	Acquiring skills to develop	Verbalizing and transmitting practice/guidance in practice	Visualizing and theorizing practice/training future generations	Sharing and accumulating the results of practice and research/training future generations	Encouraging social improvement/establishing a system for training future generations
6. Awareness as a social worker	A step forward as a social worker	Identifying standing points	Reconfirming professionalism and understanding role conflicts	Confronting ethical dilemmas	Maintaining identity

Source: Prepared by the Survey Team with reference to [48]

Figure 10-24 Framework of the career ladder for mental health social workers

(5) Supervision system

In a study by Kadushin³⁰ in the United States (US), there are three functions of supervision in social work: support, education and management, and this is now a basic understanding in social work education in Japan. Supervision is an important opportunity to support learning and growth in practice, allowing the newer social worker to learn about the attitudes and skills of the human services profession and to improve their practice by receiving direct guidance from a skilled person with a wealth of knowledge and experience.

On the other hand, it has been pointed out that the meaning and methods of supervision are not clearly demonstrated in the practice of social work and the system for implementing supervision has not been well developed in Japan [49] [50]. For example, at the National Association of Social Workers in the US, after graduating with a master's degree in social work, students must spend two years at the same institution receiving supervision and evaluation and acquiring practical experience before they are eligible to sit for the approved social work examination. As mentioned in 10.2.2(2), the number of hours of practical training for certified social workers and mental health social workers ("social worker": 240 hours, "mental health worker": 210 hours) is very limited in Japan (240 hours for certified social workers and 210 hours for mental health social workers) compared to the US. Therefore, the JACSW and the JAMHSW have introduced supervision system as part of their lifelong training programs. The following is a summary of each organization's approach to supervision.

1) Supervision in the approved certified social worker system

The Approved Certified Social Worker System requires a record of supervision as a qualification for approved certified social workers. To be accredited as an approved certified social worker, it is required to receive supervision, while for the approved advanced certified social worker, it is required to both receive and conduct supervision, as they are expected to play a leadership role for other social workers.

For the implementation of supervision, the supervisor and the supervisee sign a contract for one year in principle, and then, after the conclusion of the contract, the supervisor is required to conduct supervision at

³⁰ Kadusin, A. "Supervision in social work" Columbia university Press, 1996.

least six times a year for at least one hour each time (in the case of individual supervision). The Agency for Accreditation and Approval of Approved Certified Social Workers has developed a manual for conducting supervision and a series of formats to be used in supervision, and the supervision will be conducted in accordance with the procedures set out.

The supervisors in the Approved Certified Social Worker System are those who have registered as approved advanced certified social workers with the Agency for Accreditation and Approval, and as of January 2022, there are 769 registered supervisors [46].

2) Training program for certified supervisors by the JAMHSW

As mentioned in 10.2.2(3)2), the JAMHSW has a “Training Program for Certified Supervisors” as one of the professional skills trainings in the lifelong training system. It is held annually to train certified supervisors who practice supervision, which is essential for enhancing the expertise of mental health workers. The training program consists of three days of basic training, followed by practical training in supervision over about a year. The requirements for participating in the training are: to be a certified mental health social worker, to have at least 10 years’ of working experience in social work in the field of mental health and welfare, and in principle to have received supervision by a supervisor certified by the association.

After registered as a certified supervisor, there is a renewal system every five years. The requirements for renewal include continuing to renew certification as a certified mental health social worker, attending the training to renew certification as a certified supervisor, and practicing supervision at prefectural associations of mental health social workers.

《Box 2》 Supervision in school social work

In Japan, school social workers (SSWs) are being assigned to schools in order to deal with various issues faced by students, such as bullying, non-attendance, child abuse, etc. SSWs act as a bridge between schools, families and local stakeholders in order to create a better environment for students. It is desirable for SSWs to have professional qualifications in social work, such as certified social worker or mental health social worker, however, even with these qualifications, it is often difficult for SSWs to fulfil the role required, depending on their areas as well as the type of work they have been involved in and their years of experience. Also, the variety of backgrounds of SSWs makes it difficult to standardize the quality of school social work.

Therefore, some local governments assign SSWs with high expertise and rich field experience as supervisors, in addition to SSWs assigned to schools. In particular, for newly appointed SSWs, the supervisor conducts casework with them in an on-the-job training and supports them through supervision, which enables them to acquire the social work skills necessary for schools and communities and to improve their practical skills³¹.

³¹ Interview with a school social worker (12 December 2021)

《Box 3》 Establishing a supervision system in the region

In the Joetsu region of Niigata Prefecture, the population and resources for healthcare and welfare are concentrated in Joetsu City, and some mountainous areas are difficult to access due to snowfall, especially in winter. In this region, there was a delay in the implementation of supervision due to the lack of experience in supervision or the lack of supervisors, however, a supervision system was to be established through the study meetings of mental health social workers held regularly in the region. Although supervision is considered as “a technique performed by social workers with high quality who are certified as supervisors”, it was reconsidered as “a role that social workers who have reached a certain level of field experience should take on for improving their own expertise and training junior social workers”, and the experienced mental health social workers in the community became the supervisors and conducted supervision for the target group (mainly those with less than 5 years of experience).

In specific, supervisors and supervisees, who belong to different organizations, are paired up and conduct supervision about once a month. The monthly meetings of the Supervisor Committee were held to address concerns and issues faced by the supervisors, and joint meetings between supervisors and supervisees were held to exchange opinions and improve the supervision system.

Accordingly, by considering supervision as a common issue in the region, rather than as an individual issue, and by developing cross-organizational committee activities and study groups around supervision, a supervision network for mutual growth of mental health workers was formed in the region, which led to the improvement of the quality of social work in the entire region [51].

(6) Awareness raising

Although certified social workers and mental health social workers have been positioned as a social work profession by the national qualifications, it has been pointed out that it is difficult to understand the specialty and role of social workers since they work in various occupations and under a wide range of job titles [52]. The role and work of social workers are promoted mainly by professional associations and training institutions through various events such as seminars and symposiums.

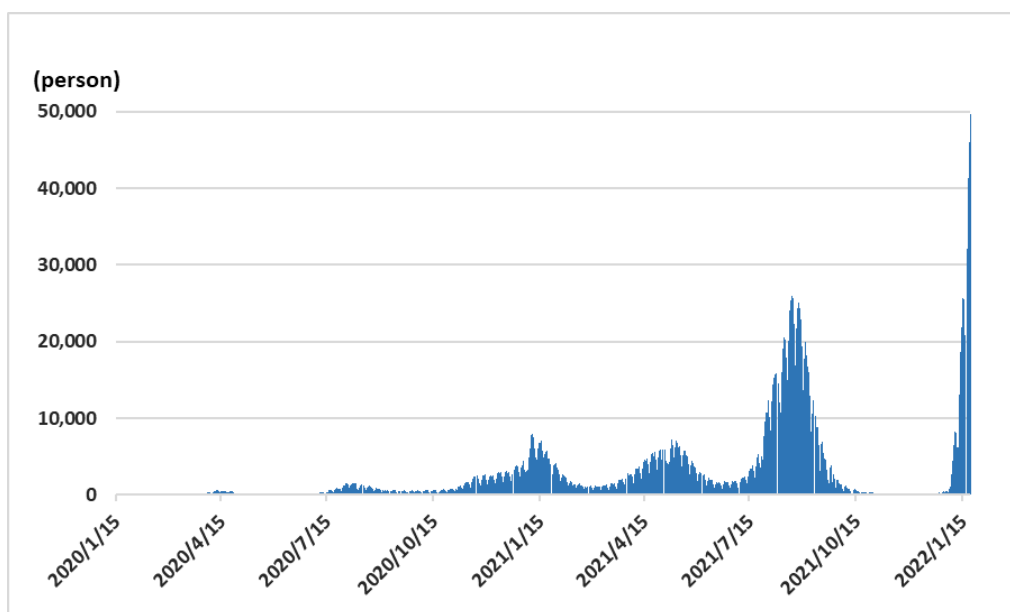
As an example of the initiatives, the JFSW is providing videos of various social work activities taking place in other countries in celebration of World Social Work Day. In addition, in Japan, the Japanese Research Institute on Social Welfare declared the Marine Day in July as “Social Worker Day”, and various organizations related to social welfare, including the JACSW and the JAMHSW, hold events in each prefecture in Japan. In 2021, 12 prefectures held events, mainly online.

The professional associations are also active in policy advocacy, issuing statements, opinions and requests on the systems and policies on social welfare field. For example, in recent years, there have been requests for qualifications in the field of child and family welfare, opinions on the state of the national examination for certified social workers, opinions on the revision of fees for welfare services for people with disabilities, statements on the revision of the Juvenile Act, and statements on support for the socially vulnerable in response to COVID-19.

10.3 Impact of COVID-19 on the social welfare sector

10.3.1 Overview of the impact of COVID-19 on the social welfare sector

In Japan, the first case of COVID-19 infection was confirmed in January 2020 and subsequently spread throughout the country, leading the Japanese government to declare a state of emergency in April and May 2020. During the declaration, people were asked to stay home, to restrict the use of places such as schools and other facilities, and to cancel events, etc. Since then, the number of new infections has continued to increase and decrease, and as of January 2022, it has not yet ended. This section provides an overview of the impact of the spread of COVID-19 on the social welfare sector, particularly for socially vulnerable children, people with disabilities, the elderly and women.



Source: Prepared by the Survey Team with reference to [53]

Figure 10-25 Trend in the number of new cases of COVID-19

(1) Children

In April 2020, more than 90% of kindergartens, elementary schools, lower secondary schools, upper secondary schools, and schools for special needs education closed temporarily due to the declaration of a state of emergency in Japan. At the same time, facilities where people gather were asked to close and people were asked to refrain from going out, and children were forced to stay at home.

According to a survey conducted by the National Center for Child Health and Development since the spread of COVID-19, 15% of elementary school students in grades 4-6, 24% of lower secondary school students, and 30% of upper secondary school students have symptoms of moderate or severe depression. In addition, the number of suicides in 2020 has increased significantly compared to the previous year, also among those under 20 years old, including children, especially women [2].

Regarding child abuse, there have been concerns about the increased risk of abuse due to the increased stress on parents living at home and the fewer opportunities to watch over the children as they refrain from going out. The number of cases of child abuse consulted and dealt with has been increasing every year

although the trend for 2020 is for the rate of increase to remain at a lower level than in the previous year [2].

(2) People with disabilities

Due to the declaration of the state of emergency, a large number of businesses had to close, which also affected the employment of people with disabilities. In terms of the situation of job opportunities for people with disabilities, the number of dismissed workers increased between April and July 2020, with a particularly marked increase between June and July. The number of dedicated job offers also fell significantly in this period compared with the same month last year. Then, the number of dismissed workers increased again in January 2021, however, by March 2021, the increase rate had subsided compared to the same month of the previous year.

At employment transition support facilities, in 2020, the number of persons who transitioned to general employment after completing the transition support program decreased by approximately 10% compared to the previous year, and in particular, in May and June 2020, there was a decrease of approximately 20% compared to the same months of the previous year. In addition, the number of those who conducted on-the-job training also decreased significantly between April and June 2020 compared to the same months in the previous year [2].

(3) Elderly people

With regard to the effects of COVID-19 on the elderly, there have been concerns about a decline in physical and cognitive functions due to a reduction in activity, particularly as a result of refraining from going out or gathering. In fact, the amount of time spent in physical activity by the elderly in April 2020 was approximately 30% less than in January of the same year. According to a survey conducted by the Cabinet Office among the elderly, when asked how many people, excluding those who live with them, they talk to during the day, more than 40% of respondents said they do not talk to anyone or even only one person, an increase of 17.2 points compared to before the outbreak. Also, the research on the physical and mental effects on the elderly shows a decline in cognitive function and depression in the elderly [2].

In addition, the declaration of a state of emergency, which restricted travel across prefectures and required people to avoid returning to their hometowns, meant that elderly people were unable to receive support from their families living apart. In other cases, the fear of infection prevented them from seeking medical attention, and their condition deteriorated [54].

(4) Women

During the COVID-19 pandemic, the food service and accommodation industries were forced to close due to the declaration of a state of emergency. In these industries, the proportion of women employed and the proportion of part-time workers was high, and this affected women's employment. In terms of the number of persons employed, there was a particularly large decline in the number of women in part-time employment between April and May 2020. The number of people absent from work also increased for both men and women over the same period, but in a particularly high proportion of women, 1.5 times that of men.

The concerns were also raised about the risk of domestic violence by spouses as a result of the increased time spent at home with family due to the refraining from going out. According to a survey by the Cabinet Office, the number of domestic violence consultations in 2020 (total) increased by approximately 1.6 times compared to the previous year's total. In addition, trends in the number of suicides show a sharp increase between July and October 2020, with a particularly high proportion of women [2].

10.3.2 Issues and initiatives in relation to social service workforce

As mentioned in 10.3.1, the spread of COVID-19 has led to additional difficulties for the socially vulnerable, and even those who have not previously faced challenges may have fallen into difficulties. In this situation of increasing welfare needs, social service workforce, including the professionals, are expected to identify these needs and link them to the necessary services, however, during the COVID-19 epidemic, it has been difficult to carry out these activities.

Specifically, there were problems such as: it became difficult to identify needs through home visits due to the refraining from going out; there was less opportunity for contact, which led to a lack of consultation from clients; some clients refused services because of the risk of infection; some service providers stopped services; and in the early stages of the COVID-19 pandemic, it was difficult to hold cooperative meetings with multiple professions and institutions due to the lack of an ICT environment, and activities could not be carried out due to the lack of infection prevention supplies [54].

In response to these problems, social workers either as individuals or as an organization have gradually improved the ICT environment and the environment for infection prevention, and have continued to provide consultation and assistance by combining visits and various remote tools (telephone, letter, fax, email, LINE, Zoom, etc.), as well as providing services while confirming the client's concerns about infection. Also, with regard to the operational problems of the social welfare system and the lack of standards for infection control, they approached the local governments by submitting requests and opinions to them [54].

The COVID-19 outbreak also caused challenges in the training of certified social workers and mental health social workers. Following the declaration of a state of emergency, training institutions were forced to close schools and to suspend practical training. As discussed earlier, in the training courses for certified social workers and mental health social workers, practical training is the only opportunity to learn about social work practice, and therefore it was a great challenge how to secure the opportunities for practical training.

The results of a survey conducted by the Japanese Association for Social Work Education in 2020 revealed that more than half of training institutions conducted (or will conduct) all or part of their practical training through alternative programs. The most common alternative programs were "making records equivalent to a record of practical training", followed by "individual and group reviews", "inviting guest speakers", "case study (case analysis, case review)", "experiential learning materials through role-plays and group activities", "online collaboration with institutions and facilities where practical training was planned", and "video materials dealing with social work practice".

However, in preparing for and developing these alternative programs, a lot of respondents expressed difficulties in "coping with the burden on teachers", "scheduling the program", "preparing the timetable for

the program”, “considering and adjusting the content of the program”, and “developing teaching materials (videos and documents)”. In 2021, about half of the institutions have changed their policy on practical training from alternative programs to face-to-face training in the field, though this will be still affected by the COVID-19 situation [55].

10.4 Priority issues for developing and strengthening social service workforce

As discussed in this report, looking at the current situation of social service workforce strengthening in Japan along the framework of “planning”, “development” and “support”, it can be said that social workers have been established as a profession with the introduction of the national qualification system, and educational institutions for social welfare have been established throughout the country, and thus the infrastructure for developing social workers has been enhanced. On the other hand, since the skills of social work do not involve specific physical techniques, but rather the ambiguous nature of “consultation and assistance”, and since social work is a title-exclusive qualification that allows people to work without qualifications, it is difficult for society to recognize the expertise and importance of social work, and thus social workers have not yet established their social status or secured their economic status. In addition, since social work has been developed in different fields such as mental health and medical care long before the establishment of qualification systems, there are two separate national qualification systems, “certified social workers” and “mental health social workers”, each of which has its own continuing education system and certification system for higher qualifications, making it difficult to develop a common basis as social workers. Taking into account these current circumstances, three priority issues relating to the strengthening of social service workforce in Japan are described below.

10.4.1 Establishing a Supervision System

The opportunities to learn practical skills in social work include practical training in the training courses, in-service training after qualification, and supervision. However, in Japan, the hours of practical training are 240 hours for certified social workers and 210 hours for mental health social workers, which are insufficient to acquire practical skills, and the opportunities to receive continuous guidance after qualification are limited to supervision. However, the systematic supervision available to certified social workers and mental health social workers remains within the framework of the accreditation system of each professional association, and has not fully penetrated in general. For example, the number of supervisors under the Approved Certified Social Worker System of the JACSW is 769 (as of January 2022), which is less than 2% of the 42,631 members (as of 31 March 2021). In addition, in light of the current situation where there are approximately 200,000 certified social workers working in the fields of welfare, long-term care and medical fields (approximately 80%) out of a total of 257,293 registrants of certified social workers, it is difficult to meet their needs with the current supervision system.

Considering this situation, it is important to first establish a system of supervision within the workplace as part of human resource development and career development plans. In addition, from the fact that “atmosphere and human relations in the workplace” and “illness in physical or mental health” are often cited as factors in leaving a job as a certified social worker or mental health social worker, it is clear that there is a need for supervision to provide mental support in the workplace. However, the number of certified

social workers and mental health social workers in one workplace is often as few as one or two, which makes it difficult to set up a supervision system in the workplace with an educational function based on the characteristics of social work.

Thus, the current system of supervision in Japan is limited to some members of professional associations, and it is also difficult to establish a system for supervision in the workplace. Therefore, it will be necessary to establish a system of supervision as a professional system in the future. For example, many states in the US have adopted a renewal system for social worker licenses, and it could be considered to position supervisor training in such a renewal system.

Alternatively, it is also useful to work from a regional perspective, for example, to strengthen horizontal cooperation between the same professions on the regional level and to build a supervision implementation system within that network, as seen in the example of the assignment of a supervisor to SSWs in a municipality (see Box 2), and the establishment of a supervision system by utilizing a study group among the mental health social workers in the Joetsu region (see Box 3). By establishing such a network of peer learning in the region, it could be expected to strengthen the practice of individual social workers as well as the ability of the region as a whole to respond to a variety of issues.

10.4.2 Developing a common (generic) foundation for social work

In the past, Japan has developed various systems and policies relating to the welfare of children, the elderly, people with disabilities, and women in response to changes in socio-economic conditions and the declining birth rate and ageing population. In recent years, society and people's values have been changing, and welfare needs have become even more diverse and complex. With the declining birthrate, the ageing of the population and the increasing number of nuclear families, the number of elderly people living alone or in households with only an elderly couple is increasing. In addition, there are many elderly people who are in need and isolated from the community. In schools, in addition to the problems such as bullying, non-attendance at school, and child abuse, the number of foreign children is increasing with the progress of internationalization, and there are also an increasing number of children and their parents who suffer from developmental disabilities and gender identity disorders. Furthermore, such problems are often complicated and interrelated, leading to problems such as the "8050 problem", in which elderly parents in their 80s take care of their children aged in their 50s who have been socially isolated for a long time, or the problem of "young careers", in which children have to take care of their grandparents because of their single-parent families and cannot go to school as a result. In the past, social issues have been solved by systems for different groups or ages of people, such as "the elderly", "children", "people with low incomes" and "people with disabilities", however, there are more cases that cannot be solved within a single legal framework.

In such a society where one person faces multiple difficulties and welfare needs are becoming increasingly diverse and complex, social workers need to develop a common foundation for social work so that they can respond to all kinds of issues by taking a person-centered view and accurately identifying the needs of the person or the community, regardless of their attributes. However, the social work profession system in Japan has developed along with the establishment of professional associations for each field, such as medicine and mental health, seeking qualifications that emphasize each specialty, which has led to the

practice of social work from a more specialized (specific) perspective. Formerly, certified social workers and mental health social workers had different codes of ethics, and used different curriculums in their training courses, and were provided with different continuing education by each professional association. At present, although the “Code of Ethics for Social Workers” common to the four professional associations has been formulated, and common subjects for certified social workers and mental health social workers have been added to the training courses, the system of continuing education has been established by each professional associations, making it difficult to strengthen the common foundation (generic) as a social worker.

In addition, the legal system for social welfare in Japan has been developed by target group and age group, and welfare administration is still carried out vertically, and certified social workers and mental health social workers are also assigned according to these systems. Once assigned to a facility or institution that is segmented according to these fields and targets, the duties of social workers are often limited to the support of the clients within that facility and the management of their daily lives. In addition, when the needs that exist in the community are considered by target group or by system, the needs of people who do not fit into any of the systems may not be recognized, and their conditions may worsen without the necessary support.

Therefore, in Japan, it is a challenge how to foster the generic social work competence of certified social workers and mental health social workers in the future. As mentioned above, Japanese society has experienced various changes over time, and the welfare needs existing in the society have also changed. To recognize the emerging needs and respond to the complexities of these issues, social workers need to be able to see individuals and communities from a more comprehensive perspective, and to approach the identified issues by themselves.

10.4.3 Making social workers visible for reaching out to society

The social work qualifications in Japan, “Certified Social Worker” and “Mental Health Social Worker”, are title-exclusive, which means that people can engage in social work without qualifications as long as they do not call themselves “Certified Social Worker” or “Mental Health Social Worker”. As a result, compared to professionals with specific skills such as doctors and nurses, the expertise of social workers is less visible, and they are less socially recognized as a profession. In addition to this aspect of social work, the employment status of certified social workers and mental health social workers revealed that although they are qualified as “certified social workers” and “mental health social workers”, they work under a variety of job titles such as “consultant”, “support staff” and “supervisor”. Also, in addition to these national qualifications, many of them hold other related qualifications in social welfare, such as “certified care worker”, “care manager” and “home-care worker”. In Japan, the fact that there are various qualifications and job titles related to social work, and that these qualifications do not always match the job titles, and that many people tend to have more than one of these qualifications, leads to a situation where the identity of a social worker is not recognized, and therefore their value is not fully expressed, disseminated or shared with society.

The Code of Ethics for Social Workers articulates social outreach as the ethical responsibility of social workers to society. Social workers are expected to go beyond working with individuals (social work at the micro level), to work with organizations (at the meso level) and with communities, systems and policies (at the macro level) to promote necessary change and development. In order to achieve this, each social worker needs to be fully aware of their role, function and purpose as a social worker and to strengthen their voice in society.

However, it is difficult for individual social workers to fully engage in social action. In particular, to change the systems and policies of social welfare, it is necessary to consolidate the knowledge of social workers as a profession and to work collectively as an organization to advocate to the government. Therefore, each of the four professional associations of social workers, which are currently divided into four groups, must gather the opinions of their members and, as the JFSW, unite their voices to reach out to society.

10.5 Resources on developing and strengthening social service workforce

In this section, Table 10-26 summarizes the organizations that provide international assistance and research activities to strengthen social service workforce.

Table 10-26 Organizations involved in developing and strengthening social service workforce in overseas

	Name of organization	Outline of the organization	Activities to strengthen social service workforce		Source
			Country/Region	Contents	
1	Save the Children Japan	Established in 1986. Save the Children Japan is an international non-governmental organization (NGO) that provides support and awareness-raising activities for children in Japan and abroad in the fields of education, health, nutrition, emergency and humanitarian assistance, disaster prevention, and child protection. Save the Children is active in about 120 countries and regions around the world. Save the Children Japan is working on measures to combat child poverty, prevent abuse, and respond to disasters in Japan.	Mongolia	<ul style="list-style-type: none"> ● Support for the establishment of the social work profession <ul style="list-style-type: none"> - Established the Social Work Resource Center at the National University of Education (which later became the first social work faculty in Mongolia). - Curriculum development for in-service training of social workers. - Development of job descriptions, performance indicators, and operational manuals for social workers. ● Strengthening the capacity of multi-disciplinary teams (MDTs) in child protection <ul style="list-style-type: none"> - Implementation of training for MDTs, mainly social workers, and administrative staff, etc., and strengthen the collaboration system in the community 	[56]
			Uganda	<ul style="list-style-type: none"> ● Child Protection Project for Refugee Children in South Sudan <ul style="list-style-type: none"> - Implementation of trainings, meetings, and dialogues with community residents to strengthen the capacity and coordination of community agencies involved in child protection. - Support for the implementation of case identification, assessment, follow-up and referral of child protection cases by the Child Protection Committee, Refugee Welfare Council and local councils. 	[57]
2	Japan International Corporation of Welfare Services (JICWELS)	Established in 1983 with the aim of contributing to the development of international health and welfare. JICWELS implements training programs, surveys and projects, the Official Development Assistance (ODA) projects, and projects related to Economic Partnership Agreement (EPA) with the	Developing countries in general	<ul style="list-style-type: none"> ● Administrative Officer Training <ul style="list-style-type: none"> - Since 1982, JICWELS has conducted human resource development projects in the field of welfare (social welfare, pharmaceutical affairs, narcotics, infectious diseases, maternal and child health, social insurance, etc.) for administrative officers and others from developing countries in Asia, the Pacific area, Central and South America, Africa, and the Middle East, as well as from Europe and the United States. 	[58]

	Name of organization	Outline of the organization	Activities to strengthen social service workforce		Source
			Country/Region	Contents	
		aim of developing human resources in developing countries, mainly in Asia.		<p>By 2013, JICWELS has accepted 5,026 trainees from 109 countries.</p> <ul style="list-style-type: none"> - In the field of social welfare, training was provided to 377 trainees, who are mainly from Asia. 	
3	Japanese Federation of Social Workers (JFSW)	Consists of four organizations, the Japanese Association of Certified Social Workers (JACSW), the Japanese Association of Mental Health Social Workers (JAMHSW), the Japanese Association of Social Workers in Health Services (JASWHS), and the Japanese Association of Social Workers (JASW). JFSW communicates with the International Federation of Social Workers (IFSW), participates in international conferences, and consolidates the unified views of Japan on policy matters and makes decisions.	Asia - Pacific region	<ul style="list-style-type: none"> ● Strengthening social workers and international exchange project to respond to globalization in the Asia Pacific Region (FY2019) <ul style="list-style-type: none"> - Lectures and group work were conducted in India and Sri Lanka by young social workers from each country and Japan. ● Strengthening social workers and international exchange project to respond to globalization in the Asia Pacific Region (FY2018) <ul style="list-style-type: none"> - Held the International Exchange Workshop “Disaster Social Work - Social Observation, Lecture and Group Work” in Ishinomaki City - Participated in the Asia Pacific Seminar on “Improving Child Protection Systems (Disaster Social Work Child Protection Training)” in the Philippines - Held the World Social Work Day 2019 Commemorative Symposium “Foreign Workers’ Rights and Social Work”. 	[59]
4	Japan National Council of Social Welfare	The Japan National Council of Social Welfare is a national organization of social welfare councils established in municipalities, prefectures, and designated cities. In the fields of community welfare, welfare for the elderly, welfare for persons with disabilities, welfare for children, disaster relief, etc., through the nationwide network of councils of social welfare, they work on liaison and coordination with users of welfare services and persons involved in social welfare, support for activities, and improvement of systems.	Asia	<ul style="list-style-type: none"> ● Training program for social service workforce in Asia <ul style="list-style-type: none"> - Since 1984, the program has aimed to develop human resources in social welfare for private sector in Asian countries. The program is implemented on a yearly basis, focusing on the acquisition of Japanese language skills and training in welfare facilities. By 2019, the program has accepted 165 students from eight countries. - Inviting the graduates back to Japan for follow-up training. - Holding “regional seminars”, which are planned and organized by the graduates. 	[60]

	Name of organization	Outline of the organization	Activities to strengthen social service workforce		Source
			Country/Region	Contents	
				<ul style="list-style-type: none"> ● Holding the Asian Social Welfare Seminar <ul style="list-style-type: none"> - Invites graduates of the "Asian Social Welfare Workers Training Program" to Japan once every five years. The purpose is to contribute to the development of social welfare in Asia by promoting exchange and cooperation between people involved in social welfare in Asia and Japan. 	
5	Japan College of Social Work	Japan College of Social Work was established in 1958 as the predecessor of the Japan School of Social Work, the first educational institution in Japan, specializing in social welfare, which opened in 1946. It has Faculty of Social Welfare, Research Graduate School, Professional Graduate School, and Correspondence Course. Its mission is to contribute directly to the promotion of social welfare by fostering competent specialists in social welfare.	Asia - Pacific region	<ul style="list-style-type: none"> ● Pacific Rim Social Welfare Seminar <ul style="list-style-type: none"> - Held 25 times since 1993 in conjunction with the Asian and Pacific Association for Social Work Education. Various themes such as the elderly, children, disability, poverty, and disasters are covered, and speakers from various countries give lectures and hold discussions. ● International joint research program (To conduct research, surveys, and study tours about various themes in social work. The following are examples.) <ul style="list-style-type: none"> - International Comparative Study of Child Rights Protection in Asia - Developing Country Studies: Vietnam Religion and Social Work (Vietnam) - The Creation and Role of Regional Federations of Social Work in the History of Social Work Education Development in the Asia Pacific Region - (Professional) Social Work and its Functional Alternatives - Human Resource Development for Community-Based Disaster Social Work 	[61]
6	Love and Grace Welfare Aid Foundation	Begun by Aikei Gakuen, established in 1930. The purpose of the Foundation is to contribute to the creation of a prosperous welfare society through mutual help to maintain healthy and cultural life for all people, and it is based on the Christian spirit.	Asia and other regions	<ul style="list-style-type: none"> ● Overseas Welfare Activities <ul style="list-style-type: none"> - To support the development and organization of social service workforce in East Asia. - The project aims to support the organizational activities of the Association of Professional Social Workers of Cambodia and to acquire the ability to promote social change activities by utilizing their functions as a professional group. - As a future project, it is planned to support for the development of social worker's organizations in Myanmar. 	[62]

	Name of organization	Outline of the organization	Activities to strengthen social service workforce		Source
			Country/Region	Contents	
				<ul style="list-style-type: none"> ● Emergency grant programs <ul style="list-style-type: none"> - Grants were provided to social welfare activities and social welfare facilities in Japan and overseas that are affected by the spread of COVID-19. - The social welfare activities and the social welfare facilities in overseas include those of Thailand, India, Bangladesh, Sri Lanka, and Mozambique. 	

Chapter 11 Conclusion: Recommendations for JICA’s Future Cooperation in Human Resource Development on Social Work in ASEAN Countries

11.1 Comprehensive analysis

11.1.1 Analysis of the country survey results

(1) Overview

In this section, the current status of the development of social service workforce in the surveyed countries in Chapters 3 to 9 are reviewed including progress and efforts in “planning”, “development”, and “support”.

1) Planning

With regard to the progress of “planning” such as legal systems related to social service workforce, there is a large gap among the surveyed countries. Among the seven countries, the Philippines was the first to establish a professional regulation system for social service workforce. Under the Social Work Law passed in 1965, a qualification system for Registered Social Workers is in operation. In Indonesia, the Law on Social Welfare defined classifications of social service workforce in 2009, and the Law on Social Worker stipulated the certification and licensing system for social workers in 2019, and preparations are now underway for the official operation of the system. In the Philippines and Indonesia, the regulations require licensing and registration to engage in social work, which is a professional license. In Thailand, the Social Work Professions Act was enacted in 2013, which stipulates the licensing of social work profession practitioners.

In the rest of the countries, as of February 2022, there is no legislation in place that defines classifications, functions, and responsibilities of social service workforce. However, in Malaysia, final preparation and adjustments are underway to enact the Social Worker Profession Act by the end of 2022, and efforts to strengthen the workforce are accelerating, with National Competency Standards for Social Work Practice and Social Work Strategic Plan (2018-2020). Also in Vietnam, the Ministry of Labour, Invalids and Social Affairs is currently working on a decree that specifies licensing and qualification system for social service workforce, which is expected to be adopted by the end of 2022. Cambodia and Lao PDR are in the process of formulating policies and plans for social service workforce development with the support of international agencies such as UNICEF.

Regarding human resource information system, it became clear that even in countries that have systems for certification and registration, the establishment of human resource databases is not yet complete. In Thailand, for instance, although there is a licensing system for social work profession practitioners, there are many social workers who have not applied for registration and licensing, and there are no documents or databases that summarize the total number of social service workforce in the country. As for the Philippines and Indonesia, which also have professional regulation systems, although it is assumed that the organizations that are in charge of registration and certification manage the database of the human resources, the existence of such databases were not confirmed in the Survey. In Indonesia, the information on social

service workforce is managed by three organizations, which may be a duplication of human resource data. In countries that do not have a professional regulation system, it was possible to identify the number of government employees (civil servants) engaged in social work, but not those engaged in the private sector such as NGOs. In Cambodia, 46 different job titles are used for social service personnel in government agencies and NGOs which makes it difficult to have accurate data on the workforce. To respond to this situation, in the Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025, the establishment of a database of social service workforce is planned as an activity to compile the human resource information according to the definition and classification.

As described above, there is no unified database for social service workforce in any of the surveyed countries, and it is not possible to have the whole picture of the workforce in each country such as the deployment of the workforce. In this situation, it is difficult to develop a plan for human resource development and deployment criteria based on the demand and supply needs of social service workforce.

2) Development

In terms of “development” of the social service workforce, there is a gap in progress among the seven countries surveyed. It became clear that educational systems and resources were not necessarily sufficient in countries with well-developed regulation systems such as the Philippines, Indonesia, and Thailand. While in the Philippines, there are 112 universities that offer bachelor’s degree programs in social work, in Indonesia, there are only 31 educational institutions that provide training for social workers, which is small compared to the size of the population. On the other hand, in Vietnam, which is now in the process of developing a professional regulation system, there are 58 universities with bachelor’s degree programs, seven universities with master’s degree programs, two universities with doctoral degree programs, and 28 vocational training schools offering diploma programs in social work. With these sufficient educational resources, there are about 7,000 graduates are produced every year, and it can be said that development of social workers has been progressing in a quantitative sense in Vietnam. However, it was also identified that there were issues in terms of the quality of education, including the educators. In Malaysia, there are 11 universities and one junior college that offer social work programs. Four of the national universities have master’s and doctoral programs, and there are many foreign students coming from overseas, however there is no professional regulation system in place at this time. In Cambodia and Lao PDR, where the professional regulation system is still in the process of being developed, there are not enough educational resources to develop social service workforce, with three institutions in Cambodia and one in Lao PDR.

With regard to a standardization of quality education, the Philippines has developed a national standard curriculum for the Bachelor of Social Work, which higher education institutions offering the Bachelor of Social Work course are required to follow. In Indonesia, 19 courses are set as the basic (compulsory) curriculum for the bachelor’s degree of social work. In Vietnam, which has rich educational resources, the curriculum for the bachelor, vocational bachelor, and the diploma of social work were approved and standardized by the government in 2004. In Thailand, curriculum standards for higher education have been formulated, which also stipulate the procedures for establishing and changing courses, and the format of the course outline. Other countries do not have a standardized curriculum at this time, and efforts are

underway to standardize quality education. In Malaysia, curriculums approved by the Ministry of Higher Education are used in each educational institution, but since these curriculums are modified according to local conditions, the government plans to standardize them at the time of the enactment of the Social Worker Profession Act. In Lao PDR, the National University of Lao PDR, the only educational institution in the country, plans to revise the curriculum to meet international standards and the country context.

The Philippines and Thailand were the only countries that have systematically implemented continuing education for social service workforce in their institutional frameworks. In the Philippines, the Continuing Professional Development (CPD) Act stipulates that continuing education is a requirement for renewal of the Registered Social Worker, and credits are to be earned by attending programs offered by certified CPD providers or through independent study. Similarly, in Thailand, as a condition for renewing a social worker license, it is necessary to complete the prescribed education. In other countries, various education and training programs are provided by government agencies, professional organizations, domestic and international NGOs, and donor agencies, but they are not systematically implemented as continuing education. It is necessary to stipulate continuing education in national guidelines or develop it in conjunction with professional regulation system in these countries. Malaysia and Cambodia are currently considering the way forward.

3) Support

In terms of “supporting” the social service workforce, it was difficult to obtain and confirm reliable information and data in this Survey in most of the countries. As for employment, the deployment of the workforce can be broadly divided into governmental organizations (public sector) and private organizations (private sector) in all countries. In the Philippines, the Department of Social Welfare and Development is said to be the main employment agency, and since it is a mandatory to assign Registered Social Workers in local governments, it is assumed that government agencies account for a significant portion of the workforce. In Thailand, although there are no national statistics or comprehensive data of the workforce, the majority of regular members of the Social Work Professions Council, a professional organization, are employed by government agencies, including the Ministry of Social Development and Human Security. On the contrary, in Cambodia, due to institutional obstacles, such as hiring freezes in government agencies, it is difficult for those with social work degrees to obtain jobs as social workers in government agencies, and the majority are employed by NGOs. In response to this, UNICEF is currently supporting to promote the employment of social service workforce in government agencies.

As for the employment of social service workforce, there are various issues in terms of treatment. In Indonesia, the large difference in salaries between government and private institutions for those engaged in social work is an issue, and professional organizations are advocating to the Ministry for improved treatment. In Malaysia, since the professionalization of social work profession is underway, anyone can work in the social welfare sector without any education on social work, and it is sometimes perceived as a “volunteer” job. As a result, many Malaysian social workers find employment in Singapore, where the social status of social workers is better established, and salaries are higher than in Malaysia. Also in Lao PDR, even after obtaining a bachelor’s degree in social work, few people engage in social work as a job.

The reasons for this are that the professional status of social service workforce has not been established and the number of job openings and recruitment is unclear.

Regarding professional associations, which play an important role in professionalization and improvement of quality of social work, they have been established in each country except Lao PDR. Association of Professional Social Workers of Cambodia plays a pivotal role in supporting the development of a code of ethics, building a network of social workers, and increasing knowledge about social work in Cambodia. The Philippine Association of Social Workers, Inc, a leading professional organization in the Philippines, is a member of the ASEAN Social Work Consortium (ASWC) as well as the International Federation of Social Workers, and is positioned as a key stakeholder in strengthening social service workforce in the ASEAN region.

A professional code of ethics or ethical standards, which is vital for social workers to share values, have been established in the surveyed countries, except in Cambodia and Lao PDR. In Cambodia, the Ministry of Social Affairs, Veterans and Youth Rehabilitation is currently working on a decree for the code of ethics, which is expected to be approved in 2022. As for Lao PDR, the government plans to consider the formulation of the code of ethics with relevant organizations together with the establishment of a professional organization.

Regarding the career development of social service workforce, no system or national regulations exist in any of the countries, or no specific initiatives could be confirmed. In the Philippines, career development is not stipulated in the professional regulation system, and support is provided in line with human resource development plans at workplaces individually. In Thailand, civil servants including social service workforce are encouraged to accumulate relevant experience through raining activities and the acquisition of an academic degree, and the study leave scheme is available.

None of the seven countries has established or could confirm any national standards or mechanism of supervision for social service workforce. As for Vietnam, the results of a survey conducted by UNICEF on social workers reported that almost all social workers have supervisors and supervision is conducted, but the specific implementation structures are unknown. In the Philippines, supervision is limited to within the workplace to which the individual social worker belongs. In Lao PDR, it was pointed out as an issue that social service workers do not have anyone close by with whom they can consult in their work, and it is being considered to stipulate the supervision mechanism in the Social Work Law and related guidelines to be enacted in the future.

(2) Observation

The Survey results show that the progress and institutional framework regarding the development of social service workforce and professionalization of social workers vary considerably among the surveyed countries. There is also a big gap in progress. While some countries, such as the Philippines, Indonesia, and Thailand, have established professional regulation systems, Cambodia and Lao PDF are just starting to formulate strategic plans and laws for institutionalization.

On the other hand, there were issues common to all countries. Human resource information system is not yet developed in all countries, and both the number of people engaged in each category of the workforce and the number of people trained and needed are uncertain. In order to promote human resource development on social work, it is first necessary to conduct accurate and comprehensive assessment of the status and needs of social welfare service delivery and human resources, and then formulate a plan based on priorities, and take budgetary measures.

In Cambodia and Lao PDR, the number of professional social workers is limited, and there are not enough educational resources to develop them, therefore these countries have to rely on para professionals and volunteers to provide social welfare services in the field. In order to expand the quantity and improve the quality of social service workforce, it is important to strengthen the existing social service workforce at community level such as para professionals and volunteers in line with the professionalization of social workers and their training. For improving the quality of para professionals, a supervision mechanism needs to be considered in addition to training. Also, in order to strengthen social service workforce at the community level, it would be effective to utilize social protection and child protection systems, which are already being implemented in many countries.

It is important to emphasize that ASEAN has a wealth of experience and resources (human resources, organizations, etc.) in strengthening social service workforce. These include established professional regulation system based on a long history in the Philippines, the active use of volunteers in Thailand, high quality professional education in Malaysia, and active professional associations in various countries. There are also lessons to be learned from countries such as Indonesia that are in a transitional stage of institutionalization. By taking advantage of the unique approaches and resources of each country, effective actions can be taken to strengthen social work and social service workforce in the entire region.

11.1.2 Analysis on ASEAN initiatives in social service workforce strengthening

(1) ASEAN initiatives

Since around 2010, emphasis has been placed on strengthening “social service workforce” which includes a wide range of human resources such as professional social workers, para professionals, and volunteers, in order to tackle issues related to social welfare and social protection in developing countries. Led by the Global Social Service Workforce Alliance (GSSWA) and UNICEF, mapping studies based on the framework for strengthening social service workforce have been conducted in various countries, and efforts to strengthen the workforce are underway in each country.

In aspiring to realize the ASEAN Community, human security has been emphasized, which has brought an increased attention on human resource development on social work in ASEAN. Together with the international movement mentioned above, UNICEF has been taking the lead in strengthening social work and social service workforce in the region. The ASWC was established in 2010 to improve the status and quality of social service workforce throughout ASEAN, and it has been working on knowledge management and developing common guidelines and training programs in the region. The fact that these

efforts led to the establishment of the ASEAN Training Centre for Social Work and Social Welfare (ATCSW) in 2019 and the Ha Noi Declaration¹ in November 2020 is a remarkable achievement.

The Road Map² for the implementation of the Ha Noi Declaration has just been formulated in 2021, and it is expected that aggressive efforts will be steadily made at the country and regional levels based on this Road Map. The Road Map provides specific directions for the ASEAN member states to strengthen social service workforce clarifying what each country and organization should work on in the next 10 years. On the other hand, some goals seem to be set too high, such as the development of a regional competency framework and efforts related to the Mutual Recognition Arrangement. While the situation and the extent of progress in each country vary significantly, a thorough study is required to develop such common frameworks and mechanisms for the region. In addition, some of the activities and deadlines set for national-level efforts might be too difficult for the countries with less developed legal and policy framework such as Lao PDR. It is critical to support the efforts of each country in accordance with its own situation so that the Road Map can be effectively functionalized.

The ASWC and ATCSW play an important role in promoting the Road Map. These organizations need to take a central role in consolidating knowledge and resources within the region and promoting cooperation among ASEAN member states, which enable them to effectively address common issues and gaps in the region. ASWC is a consortium that is supported by the voluntary efforts of each country, and in this respect, ATCSW is expected to be the actual working force of ASWC. However, as described in more detail in the next section, there may be some challenges for ATCSW to carry out its roles as indicated in the Road Map in the absence of a sufficient operational foundation (human resources, funds, etc.) and long-term visions and plans for the organizational capacity building and future activities.

(2) ASEAN Training Centre for Social Work and Social Welfare (ATCSW)

As an ASEAN training center for human resource development on social work, ATCSW is required to develop regional qualification standards, ASEAN Core Curriculum for Social Work Education, etc., and to develop and deliver training programs that meets the needs of each country. Furthermore, in the longer term, the Centre is expected to develop a competency framework and consider becoming a regional assessment center for providing certification for competency-based training, with a view to the introduction of Mutual Recognition Arrangement for social work. Since its establishment in November 2020, ATCSW has been working to improve its operational infrastructure, but the following challenges were identified in carrying out the roles outlined in the Road Map.

(Organizational structure)

ATCSW has three supporting staff members in addition to the Executive Director, who was recently replaced in November 2021. Although plans to expand the supporting staff have been presented, it is more likely difficult to allocate additional staff with the Thai government's budget. It is necessary to consider how to carry out the activities in the Road Map with a limited number of staff. As ATCSW is already

¹ Ha Noi Declaration on Strengthening Social Work Towards Cohesive and Responsive ASEAN Community

² ASEAN Road Map for the Implementation of the Hanoi Declaration on Strengthening Social Work for Cohesive and Responsive ASEAN Community

working on, collaboration with related organizations such as educational institutions in Thailand is one way. In this sense, it is critical to strengthen the capacity of supporting staff who can promote activities in collaboration with multiple organizations.

(Organizational strategy)

A comprehensive analysis based on interviews with ATCSW and UNICEF shows that there is no concrete vision or strategy on how ATCSW can fulfill the roles indicated in the Road Map. Although UNICEF expects ATCSW to work on a competency framework and prioritized competency-based training on a long-term basis, this has not been integrated into the work plans of the Centre so far. It is required to carefully consider the future vision and the strategy to ensure steady implementation of the Road Map.

(Development of systematic and integrated training programs)

Although the Centre has been working on the development of training curriculums, there seem to be insufficient preparation for the operation of the training programs, including the training target and methods of delivery. Together with the consideration of the competency framework, there is an urgent need to examine systematic and integrated training programs that contribute to strengthening the capacity of social service workforce in each country. To respond this situation, it is first necessary to clarify the current status and needs related to social work and its workforce in ASEAN countries and then to identify priorities regarding targets and training contents. ATCSW plans to conduct a training needs assessment for ASEAN member states from February to May 2022, and the results and outcomes of the assessment need to be followed.

(Sustainability of the Centre)

One of the issues identified by the Executive Director is that not enough budget is being allocated for the activities that ATCSW should be doing. Although the Centre's strategy is to obtain funds and support from various partners to expand the Centre, it is critical to realistically consider how to sustain the Centre, taking into account the above expected roles of ATCSW.

11.1.3 Analysis of the current status in Japan (experience, strengths and lessons learned)

As a result of the Survey on the current situation of the social work profession system and the education and training framework for social workers, etc. in Japan, the following points were identified as the strengths, the experience and the lesson learned in Japan that could be useful for ASEAN region.

(1) Comprehensive support system in cooperation with multiple professions and institutions

One of the strengths of social work in Japan is the comprehensive support system that has been established in communities in cooperation with multiple professions and institutions to support children, people with disabilities, the elderly, and people with low incomes, etc. The welfare needs of individuals have become increasingly diverse and complex due to the declining birthrate and the aging of society, etc., and it has been necessary to respond to these needs by involving a wide range of professionals and related organizations. It is also important that such a comprehensive support system, involving multiple professions and institutions, has been established along with the legislative reforms.

In specific, in the 2007 amendments to the Certified Social Worker and Certified Care Worker Act, the duty of “coordination” has been expanded, requiring social workers to provide comprehensive and inclusive support for the autonomous lives of people in the community by taking into account the characteristics of the community and cooperating with those involved in welfare services. Similarly for mental health social workers, although the duty of “coordination, etc.” had previously only covered doctors and other medical professionals, the 2010 amendments to the Psychiatric Social Workers Act expanded the scope to include various stakeholders in healthcare, welfare for people with disabilities, and community consultation support.

In the field of welfare for the elderly, the 2005 amendment to the Long-term Care Insurance Act established the “Community-based Integrated Care Center”, which acts as a core institution to achieve a “Community-based Integrated Care System” in which housing, medical care, long-term care, preventive care and living support are comprehensively provided. The certified social workers, public health nurses, and care managers assigned to the center are the key persons who support the lives of the elderly in the community. In cooperation with the local government officials and other relevant persons in the community (life support coordinators, commissioned welfare/child welfare volunteers, health providers, etc.), they work to identify the needs, consider the necessary services, and develop the support system. Also, this concept of a “community-based integrated care system” has been applied in the field of mental health and welfare, with the aim of establishing a multi-level cooperation system among the relevant institutions in the community so that people with or without mental disabilities and regardless of their level of disability, are able to live in the community.

In the field of medical care, medical social workers assigned to medical institutions, etc. work to support the lives of patients after their discharge from hospital, in collaboration with those involved in home-based medical, nursing and long-term care services in the community. Through such cooperation in community health system, patients are able to receive seamless care from the acute phase to the recovery and home care. In addition, in the field of child welfare, school social workers assigned to schools coordinate the living environment of students by developing and making use of various social resources in the community, beyond those involved in the school and their parents, in order to address the problems faced by students.

Accordingly, social workers are positioned as members of the professions involved in social welfare, and through cooperation with other professionals in the field of health, medicine and welfare, they support people in the community living with a variety of issues.

(2) Work towards strengthening the foundations of social work

In Japan, the professional associations for social workers have been established for each area of social work, such as medical and mental health, and the qualifications for social workers have been considered for each specialty, which has resulted in the establishment of two national qualifications for social workers: “certified social worker” and “mental health social worker”. It is a lesson learned from the Japanese professional regulation system that the continuing education and supervision systems exist separately within the framework of each qualification system, making it difficult to strengthen the common foundation of social work, even though they are all social workers.

Currently, the establishment of a qualification in child and family welfare has been discussed in order to strengthen the capacity of personnel in the field of child welfare in response to the increasing number of consultations on child abuse in Japan. Although there are opinions that a national qualification would have advantages such as making it easier to establish an identity as a professional and to set up incentives, the Japanese Federation of Social Workers (JFSW) is calling for not establishing a new national qualification but improving the expertise in the field of child welfare through strengthening in-service training for certified social workers and mental health social workers, based on their practical skills as social workers. In order to respond to the issues in the child welfare, the JFSW also states that it is important not only to have expertise specialized in the field of child welfare, but also to have a foundation of generic social work that comprehensively addresses the diverse issues of the individuals, families and local communities, coordinating with the various stakeholders.

In addition to the issues of child abuse, the individuals and their families often face various issues together, such as being a single parent, having a disability, having financial difficulties, or being a foreign national. In such a situation, social workers are required to have a flexibility to cope with complex issues as well as a high level of expertise. Similarly, in the ASEAN region, the issues of poverty, disability, child labor, education, gender, etc. are interconnected in complex ways. Therefore, it is recommended to have a system that could strengthen generic social work skills as the foundation of social service workforce, enabling them to respond to various issues in the community.

(3) Increasing the social status of social workers by expanding the standards for their deployment and appointment

The qualifications of certified social worker and mental health social worker are title exclusive, which allows people to engage in social work without these qualifications. Therefore, the value of social workers having these qualifications is less apparent and the profession is not as socially recognized as it could be. The professional associations are working to expand the standards for deployment and appointment of social workers. By increasing the number of jobs and services that require holding these national qualifications as a requirement for appointment, a substantial monopoly of work could be achieved, making the expertise of social workers more visible.

In particular, since 2003, medical social workers in national hospitals have been required to hold a qualification of either certified social worker or mental health social worker. For school social workers, it is also suggested that they should be qualified as either certified social workers or mental health social workers, and those with these qualifications are increasingly being appointed. Appointments in the field of judicial welfare have also expanded in recent years, with the establishment of a new position for mental health social workers and certified social workers.

Thus, in Japan, the professional associations are leading efforts to expand the standards for the deployment and appointment of certified social workers and mental health social workers, which is expected to improve their social status and recognition and strengthen their social voices.

(4) Experience and knowledge as a country with advanced issues

Japan has the highest rate of ageing among the major industrialized countries and the number of years required to transition from an ageing society to an aged society has been short, therefore, the measures taken and the lessons learned would be useful for ASEAN countries which are about to experience population ageing. The establishment of a national qualification for social workers was originally aimed to meet the increasing needs of welfare and long-term care for the elderly, establishing certified care workers as manpower for long-term care, and certified social workers as supervisors for these care workers. Currently, the largest proportion of social workers are employed in the field of welfare for the elderly in Japan. Also, in the medical field, it is necessary to strengthen the cooperation with long-term care services, and thus, as a country with advanced issues, there is much knowledge to be shared about social work in the field of welfare for the elderly.

Japan has also experienced a number of large-scale natural disasters, including the Great Hanshin-Awaji Earthquake, the Great East Japan Earthquake, the Kumamoto Earthquake and typhoons. In the case of a disaster, municipal councils of social welfare establish the disaster volunteer centers, which play an important coordinating role in identifying support needs in the affected areas and coordinating volunteers of individuals and groups, and mental health social workers are required to take a professional approach to mental health during and after a disaster. As such, welfare plays a significant role in times of disaster, and various organizations have developed guidelines and manuals on disaster management. Thus, it would be worthwhile to share the knowledge together with the actual experience of Japan to ASEAN countries.

It should be noted that, in all areas, the role of social workers is to identify the needs of the individuals, families, and local communities, and to provide comprehensive support in collaboration with a wide range of local stakeholders in order to address the issues, therefore the generic skills of social work still remain the critical foundation for social service workforce.

11.2 Recommendations for JICA's Future Cooperation

(1) Directions for cooperation

As mentioned in 11.1.2, ASEAN is trying to build on the efforts of the past decade in strengthening social service workforce and further accelerate such efforts in the future. The Road Map setting out priority areas and activities to be undertaken by 2030 was adopted in October 2021, and the momentum for strengthening social work and its workforce is growing in ASEAN as the starting point for the next 10 years. On the other hand, the implementation of the Road Map depends largely on the support (financial and technical) from development partners, and the mobilization and coordination of such support is an urgent issue. In this context, JICA's cooperation in this area will lead to the enhancement of the effectiveness of the Road Map and may contribute greatly to strengthening social work and social service workforce in the region as a whole.

ASEAN, led by ASWC and ATCSW, is trying to strengthen social service workforce throughout the region. As revealed in the country surveys, some ASEAN member states, such as the Philippines, Thailand and Indonesia, have already developed professional regulation systems and accumulated various experience. Furthermore, each country has its own unique initiatives and good practices. With ASWC and ATCSW

serving as a hub, these abundant resources within the ASEAN region can be effectively utilized to fill the gap and promote professionalization of social service workforce in the region.

In addition, it is essential for JICA's cooperation to make use of Japanese experience and strengths as mentioned above. Some Japanese experience in developing a professional regulation system for social workers and its current efforts can be useful to ASEAN countries as well as lessons to be learned. Moreover, the experience and knowledge accumulated through addressing diverse and complex social welfare issues in the community in Japan would be useful for ASEAN countries that are expected to face similar challenges in the future. In particular, Japanese contribution is expected to strengthen social work in the areas of welfare for the elderly and disaster management. Also, it should be noted that Japan is still searching for ways to address issues related to social welfare, and the functions and roles of social service workforce are expected to change in a progressive manner. By working together with ASEAN countries to strengthen social work and social service workforce, Japan can learn from them and, in turn, can expect to contribute to the development of social work in Japan.

Based on the above, as a future direction of JICA's cooperation, it is proposed to work on building a foundation to strengthen social service workforce in the entire ASEAN region through support for ATCSW. Specifically, it can be aimed to enhance capacity of ATCSW to function as an ASEAN training center and fulfill its role as indicated in the Road Map by supporting to strengthen its organizational capacity and to develop training programs that meets the needs of each country. Through the organizational capacity development, ATCSW can sustainably play a pivotal role to lead the social service workforce development and strengthening at the national and regional level.

(2) Proposed technical cooperation project

Technical cooperation with ATCSW may include the following activities. Given ATCSW's limited human resources, it is important to involve professional organizations and universities in ASEAN countries, including Thailand, as well as development partners such as UNICEF and Save the Children in the implementation of the project. Through the project, the ATCSW is to strengthen its capacity and develop its infrastructure to expand their activities in cooperation with various organizations, which will enable the Centre to continue its activities in a sustainable and effective manner even after the cooperation ends.

1) Strengthening the operational and administrative capacity of ATCSW as a training center for ASEAN

In order to sequentially address the activities outlined in the Road Map and fulfill its role as a leading training center for ASEAN, the Centre needs a long-term growth strategy. By supporting the development of this growth strategy (or business case), it is expected that Centre will be able to feasibly address its role in the Road Map and measures to realize its goals. In the process of developing the strategy, it is necessary to foster a common understanding with UNICEF and other related organizations. Moreover, it is important to utilize resources in Thailand and within the ASEAN region in the growth strategy in order to achieve sustainable and maximum impact with limited human resources of the Centre. Also, efforts could be made to strengthen the capacity of the supporting staff with regard to the development and delivery of training programs.

2) Development of a regional competency framework for social service workforce

This is one of the major activities of ATCSW in the Road Map. The background to the competency framework and the development of competency-based training is the recognition of the need to equalize and strengthen the quality of para professionals who play an important role in the social welfare service delivery in the field. UNICEF and NGOs have been providing training for para professionals; however, the quality and quantity of the training has not kept pace. Therefore, it is essential to identify the functions and required competencies of para professionals, and incorporate them into the government system so that integrated training would be delivered. Moreover, there is a need to develop competency-based training not only for para professionals, but also as in-service training for professional social workers working in the field.

The competency framework provides a framework for common competency standards within the ASEAN region for different roles and functions of social service workforce including para professionals as well as professionals. In the development process, in-depth discussions are required with experts and development partners from ASEAN member states.

3) Development and implementation of competency-based training programs

The Road Map requires ASEAN member states to build competency-based training programs for social service workforce including professional social workers and para professionals based on the regional competency framework. Since the situation in each country varies, including the classification of the workforce, laws and regulations, and priority issues, it may not be realistic for the Centre to develop and provide a uniform training program for the countries in the region. Therefore, it is proposed that ATCSW supports each country to develop the competency-based training programs and to establish a mechanism of the provision of the training. It should be noted that in developing and introducing training programs in each country, it is important to build on the existing training programs and the knowledge and experience of NGOs and other related organizations. Also, it would be useful to utilize experts from Thailand, the Philippines, and other countries in the development of the training programs.

Since it is not possible to cover all countries and sectors at once, the priority countries and sectors should be identified according to the needs within the ASEAN region. Lao PDR, Cambodia, and Myanmar may be the priority countries in terms of the progress of human resource development on social work and it is assumed that para professionals working at the community level are high priority as a target of the competency-based training in these countries. For these training programs, based on the lessons learned in Japan, it is firstly important to strengthen generic social work, which is the common foundation of social service workforce.

In addition to the above, it is proposed to include in the cooperation to develop competency-based training programs in areas where Japan has strengths, such as welfare for the elderly and disaster management. For these sectoral trainings, it may be more effective and efficient for ATCSW to offer a uniform training to ASEAN countries.

4) Knowledge management and sharing in the region

It is proposed to support the organization of regional workshops where policy makers, practitioners, educators, and other stakeholders in the region gather and share knowledge. Regional workshops could provide opportunities for ASEAN member states to discuss common issues and efforts such as supervision and human resource information system that would contribute to considering next actions to take for each country.

It can be effective to hold the regional workshops in countries where ASWC annual meeting has not been held before, such as Cambodia and Lao PDR, which would lead to an increased motivation and ownership to initiate actions for social service workforce development in these countries.

(3) Outline of the proposed technical cooperation project

Based on the above, the outline of the proposed technical cooperation project for ATCSW is shown in Table 11-1. As for the implementation structure, experts from ASEAN member states can be considered for deployment in the project team, which is expected to promote human resource development and exchange within the region, as well as to enhance the significance of ATCSW as a training center for ASEAN.

Table 11-1 Outline of the proposed technical cooperation project

Overall Goal	Social service workforce is developed and strengthened in ASEAN member states through the established competency-based training programs.
Project Purpose	Capacity of ATCSW is enhanced to provide quality training programs that meet the needs of each country and to serve as a hub to strengthen social work and social service workforce in the region.
Project Duration	Three years
Outcomes	<ol style="list-style-type: none"> 1. The operational and administrative capacity of ATCSW is strengthened. 2. Regional competency framework for social service workforce is developed. 3. Competency-based training programs are developed in priority countries and sectors. 4. Knowledge and experience on social work and social service workforce are shared in the region.
Activities	<ol style="list-style-type: none"> 1-1. Conduct an assessment on organizational capacity of ATCSW 1-2. Develop a growth strategy (business case) of ATCSW 1-3. Conduct training and on-the-job training to strengthen the capacity of ATCSW staff in developing and delivering training programs <hr/> <ol style="list-style-type: none"> 2-1. Establish a working group to develop regional competency framework 2-2. Hold the working group meetings to draft the framework (5 times in total) 2-3. Draft the framework 2-4. Get approval on the draft framework from ATCSW Governing Board and SOMSWD <hr/> <ol style="list-style-type: none"> 3-1. Identify priority countries and sectors to develop competency-based training programs based on the activities of Output 2 3-2. Establish a working group to develop the training programs and formulate draft programs 3-3. Hold workshops in the target countries for trial and introduction of the training programs 3-4. Conduct pilot training in the target countries 3-5. Improve the training programs based on the activity 3-4

	4-1. Hold regional workshops
Target Area	ASEAN region
Counterparts	ATCSW
Partner organizations	Ministry of Social Development and Human Security, ASWC, ASEAN Secretariate, UNICEF and other development partners
Inputs	<ul style="list-style-type: none"> • Long-term experts (one expert per output) • Short-term experts (Approximately three experts in sectors such as social welfare for the elderly and disaster management to develop training programs and provide technical support for regional workshops) • Training in Japan • Project operation expenses

Source: The Survey Team

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Annexes

Annex 1 A List of Interviewees of the Interview Survey

Annex 2 Workshop Program

Annex 3 Summary Table of Survey Results

Annex 1: A List of Interviewees of the Interview Survey

■ Chapter 2 (International Trends)

Agency/Organization	Department	Interviewee	Date
ASEAN Training Center for Social Work and Social Welfare (ATCSW)	—	Wanna Suksriboonamphai, Executive Director	field survey
Save the Children Japan	—	Mana Miyawaki	2021-11-25
Save the Children Japan	—	Maiko Fujii	2021-11-25
ASEAN Secretariate	The Poverty Eradication & Gender Division	Jacel Javier Paguio	2021-12-21
UNICEF East Asia and Pacific Regional Office	—	Rachel Harvey, Regional Adviser, Child Protection	2021-12-23 2022-01-25
UNICEF East Asia and Pacific Regional Office	—	Laura Fragiacomio, Child Protection Chief and Specialist	2022-01-25
Department of Social Welfare and Development (DSWD)	Policy and External Affairs Division, Policy Development and Planning Bureau (PDPB)	Ma. Carmella H. Dongga, OIC Division Chief	2022-01-25
Executive Board Member, Love and Grace Welfare Aid Foundation IFSW Regional President, Asia and Pacific Region Professor Emeritus, Faculty of Integrated Arts and Social Sciences, Japan Women's University	—	Mariko Kimura	2022-01-25

■ Chapter 3 (Thailand)

Agency/Organization	Department	Interviewee	Date
Ministry of Public Health	Department of Mental Health (DMH)	Khajitrat Chunprasert	2022-01-11
Social Work Professions Council (SWPC)	—	Nattawadee Na Manorum	2022-01-11
Ministry of Interior	Community Development Department (CDD)	Pallop Tanjariyaporn	2022-01-12
Ministry of Social Development and Human Security (MSDHS)	Department of Social Development and Welfare (DSDW)	Umaporn Phongjit	2022-01-12
Thammasat University	Faculty of Social Administration	Sorasich Swangsilp	2022-01-13
Ministry of Interior	Department of Local Administration (DLA)	Benjawan Waiutinan Piranat Pratumchatipakdee	2022-01-14
Thailand Association of Social Workers (TASW)	—	Wilaiporn Kotbungkair	2022-01-14
Office of the Civil Service Commission (OCSC)	—	Dusadee Rachamuangfang	2022-01-17
Japan International Cooperation Agency (JICA)	Project on seamless health and social services provision for elderly persons (S-TOP)	Hiroka Yoneda (former expert)	2022-01-17
Office of the National Economic and Social Development Board (NESDC)	—	Montip Sumpunthawong Pataraporn Laowong	2022-01-17
Ministry of Justice	Department of Probation	Puangthip Nualkhao	2022-01-19
Ministry of Social Development and Human Security (MSDHS)	Department of Older Persons (DOP)	(Written response / via JICA Thailand Office)	2022-01
Ministry of Information and Communication Technology	National Statistics Office (NSO)	(Telephone inquiries and answers)	2022-01
Ministry of Labour	Department of Employment	(Inquiries and answers by phone and e-mail)	2022-01

■ Chapter 4 (Cambodia)

Agency/Organization	Department	Interviewee	Date
Royal University of Phnom Penh (RUPP)	Department of Social Work	Ung Kimkanika, Head of Department of Social Work	2021-12-20
Association of Professional Social Workers of Cambodia (APSWC)	—	Sambath Soeurng, President	2021-12-23
UNICEF Cambodia Country Office	Child Protection Section	Sophea Phok, Child Protection Officer	2021-12-23
		Lucia Soleti, Child Protection Chief	2021-12-23
National Institute of Social Affairs (NISA)	Department of Social Work	Heak Morina, Director, Department of Social Work	2021-12-24
	—	Vong Phearak, Deputy Director	2021-12-24
Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)	Department of Social Welfare	Chhour Sopannha, Director	2021-12-24
Saint Paul Institute (SPI)	Department of Social Work	Channarith Gnim, Full-time lecturer	2021-12-27
Social Services Cambodia (SSC)	—	Oung Virakponhavatthey, Trainer/Social Worker	2021-12-27

■ Chapter 5 (Indonesia)

Agency/Organization	Department	Interviewee	Date
Bandung School of Social Welfare	Department of academic affairs	Admiral Nelson Aritonang, Deputy director of academic affairs	2021-12-14
Indonesian Association of Social Workers (IPSPI)/ Social Work Certification Institute (LSPS)	—	Dwi Yuliani, Secretary general of IPSPI/ Certification manager of LSPS	2021-12-16
Indonesian Association of Social Workers (IPSPI)	—	Nurul Eka Hidayati, Deputy Chairman of IPSPI	2021-12-16
Social worker working in NGO	—	Social worker	2021-12-23
Social worker working in Orphanage	—	Social worker	2021-12-23
Individual Social worker	—	Social worker	2021-12-23
UNICEF Indonesia Country Office	Child Protection	Astrid, child protection specialist	2021-12-23
Ministry of Social Affairs (KEMENSOS)	Agency for Education, Research and Social Education, Center for Social Worker Professional Development	Wildan Pusbang, Coordinator of accreditation of social work institution and social worker	2021-12-24
Social agency of Central Java province	Social agency	Ache Adji, Social worker, Coordinator of functional social worker and social extension worker	2021-12-24
Social agency of West Java province	Social agency	Adun Abdullah, Head of social rehabilitation	2021-01-17
Social Agency of Bondowoso district, East Java province	Social agency	Kusuma Nofiandry	2021-01-19
Indonesian Association of Social Workers (IPSPI)	—	Nurul Eka Hidayati, Deputy Chairman of IPSPI	2021-02-10

■ Chapter 6 (Lao PDR)

Agency/Organization	Department	Interviewee	Date
Ministry of Labour and Social Welfare (MOLSW)	Department of Social Welfare	Mixay SENGCHANTHAVONG, Deputy Director General	2021-01-11
Ministry of Labour and Social Welfare (MOLSW)	Department of Planning and International Cooperation	Chitdavanh CHANTHARIDETH, Director of ASEAN Cooperation Division	2021-01-11
National University of Laos (NUOL)	Department of Social Work and Development	Saychai Syladeth, Deputy Head	2021-01-17
Lao Women's Union (LWU)	Counseling and Protection Center for Women and Children	Soudalack PHOUNSAVATH, Deputy Director General	2021-01-19
UNICEF Lao PDR Country Office	Child Protection Section	Young Joo Lee, Child Protection Specialist	By questionnaire

■ Chapter 7 (Malaysia)

Agency/Organization	Department	Interviewee	Date
Malaysian Association of Social Workers (MASW)	—	Bala Amy TK Jones, Vice president	2022-01-06
UNICEF Malaysia Country Office	Social Service Workforce Strengthening portfolio	Lyn-Ni Lee	2022-01-12
Ministry of Women, Family and Community Development (MWFCD)	Policy & International Relations Division, Department of Social Welfare	Patmanathan A/L R. Nalasamy	2022-01-13
University of Science Malaysia (USM)	School of Social Sciences	Azlinda Azman/ Dean	2022-01-21
University of Malaysia, Sarawak (UNIMAS)	Faculty of Social Sciences and Humanities	Athirah Azhar, Programme Coordinator for Social Work Course	2022-01-27

■ Chapter 8 (Philippines)

Agency/Organization	Department	Interviewee	Date
Philippine Association of Social Workers, Inc. (PASWI)	—	Eva P. Ponce de Leon, Executive Director	2021-12-16
University of the Philippines (UP)	Department of Social Work, College of Social Work and Community Development (CSWCD)	Yolanda G. Ealdama, Associate Professor	2021-12-17
Professional Regulation Commission (PRC)	Professional Regulatory Board for Social Workers (PRB for Social Workers)	Lorna C. Gabad, Chair	2021-12-18
Professional Regulation Commission (PRC)	Professional Regulatory Board for Social Workers (PRB for Social Workers)	Rosetta G. Palma, Board Member	2021-12-20
Professional Regulation Commission (PRC)	Professional Regulatory Board for Social Workers (PRB for Social Workers)	Ely B. Acosta, Board Member	2021-12-20
Professional Regulation Commission (PRC)	Professional Regulatory Board for Social Workers (PRB for Social Workers)	Fe J. Sinsona, Board Member	2021-12-28
National Association for Social Work Education, Inc. (NASWEI)	—	Melba L. Manapol, Ex Officio Member of the Board	2022-01-11

Agency/Organization	Department	Interviewee	Date
SOS Children's Villages Philippines	—	Jedd M. Niño-franco, Child Safeguarding National Coordinator	2022-01-18
SOS Children's Villages Philippines	—	Soldevilla M. Geordia, HR Manager	2022-01-19
Department of Social Welfare and Development (DSWD)	Capability Building Division, Social Welfare Institutional Development Bureau (SWIDB)	Efleda Joyce S. Consulta, OIC-Division Chief	2022-01-24
Department of Social Welfare and Development (DSWD)	Knowledge Management Division, Social Welfare Institutional Development Bureau (SWIDB)	Precilia A Docuyan, OIC-Division Chief	2022-01-25
Philippine Women's University (PWU)	Philippine School of Social Work	Evelyn B. Valencia, Professor	2022-01-29

■ Chapter 9 (Vietnam)

Agency/Organization	Department	Interviewee	Date
UNICEF Vietnam Country Office	Child Protection Section	Le Hong Loan, Chief of Child Protection	2021-12-24
UNICEF Vietnam Country Office	Child Protection Section	Pham Thi Hai Yen, Child Labour Officer	2021-12-24
Ministry of Education and Training (MOET)	Higher Education Department	Nguyen Thao Huong, Principal Official	2021-12-30
Hanoi National University of Education (HNUE)	Faculty of Social Work	Nguyen Hiep Thuong, Dean	2021-12-30
Hanoi National University of Education (HNUE)	Faculty of Social Work	Nguyen Thu Ha	2021-12-30
Hanoi National University of Education (HNUE)	Faculty of Social Work	Nguyen Thanh Binh	2021-12-30
Ministry of Labour, Invalids and Social Affairs (MOLISA)	Department of Social Protection	Tran Canh Tung, Head	2022-01-04

■ Chapter 10 (Japan)

Agency/Organization	Department	Interviewee	Date
The Institute of Study on Social Welfare Philosophy	—	Tomohisa Akiyama, Director	2021-12-6

Annex 2: Workshop Program

Workshop Program

Date:	December 27 (Mon), 2021
Time:	9:00-15:10 (Bangkok) / 11:00-17:10 (Japan)
Place:	Grande Centre Point Terminal 21

■ Objective:

To share experiences and ideas on social service workforce strengthening between Thailand and Japan, and to provide an opportunity for networking among those involved in social work.

■ Participants (TBC): 2-3 participants from each institution.

ASEAN Training Centre for Social Work and Social Welfare (ATCSW)
 Ministry of Social Development and Human Security
 Ministry of Public Health
 Thailand Association of Social Workers
 National Council of Social Welfare of Thailand
 Social Work Professions Council
 Thammasat University
 Huachiew University
 Asia-Pacific Development Center on Disability
 Local NGOs etc.

■ Program:

Time	Program	Speaker
8:30-9:00	Registration	
9:00-9:10 (11:00-11:10)	Opening remarks	JICA Thailand Office
9:10-9:20 (11:10-11:20)	Outline of the Survey	Ms. Nishimagi, JICA Survey Team
9:20-10:50 (11:20-12:50)	Lessons learned from Japanese experience on strengthening social service workforce • 10 min. Q & A	Ms. Nishimagi, JICA Survey Team Dr. Akiyama
Tea Break		
11:05-12:15 (13:05-14:15)	Challenges in strengthening social service workforce in Thailand and the ASEAN region and the future direction of ATCSW • 10 min. Q & A	Ms. Wanna Suksriboonamphai Executive Director, ATCSW
Lunch Break		
13:15-14:30 (15:15-16:30)	Group Discussion • Case Study: Analyzing social issues and considering the role of social service workforce in your community	Participants are divided into four groups
14:30-15:00 (16:30-17:00)	Presentation by each group and summary	
15:00-15:10 (17:00-17:10)	Closing	Ms. Nishimagi, JICA Survey Team
Tea and snacks served		

Annex 3: Summary Table of Survey Results

■ Planning

	Law	Policies / Plans	Ministry in charge	Budget	Data on Human Resources
Thailand	Social Welfare Promotion Act (enacted in 2003, revised in 2007) Social Work Professions Act (2013)	There are no policies and plans formulated specifically on social service workforce or its development. The National 20-year Strategy and the National Economic and Social Development Plan (NESDP) nevertheless refer to social service workforce as a target of development.	Social service workforce is affiliated with various public and private organizations. There is no agency in charge of this entire social service workforce. Public sector workforce is classified into a range of classifications, which are under the responsibility of different organizations. The public sector workforce in the main agencies undertaking social welfare related work is under the responsibility of the Office of the Civil Service Commission (OCSC)	There is no specific budget for the development of social service workforce.	The organizations which are responsible for different classifications of public sector workforce, including OCSC, records the number of positions and persons occupying those positions. In relation to labour statistics, social service workforce in the public and private sectors is comprised in an industrial classification of “health and social work”.
Cambodia	None	- Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025 - National Strategic Plan on Social Service Workforce 2022-2031 (under development)	Ministry of Social Affairs, Veterans and Youth Rehabilitation (MoSVY)	Strategic Plan for Training Social Service Workforce Focus on Child Protection 2021-2025 states that US\$16,711,720 (of which about 60% is donor budget) is needed for the five years from 2021 to 2025.	A human resources database is planned to be established.
Indonesia	Law on Social Welfare (2009) Law on Social Worker (2019)	There were no policies or plans focusing on social service workforce or their development identified.	Directorate of Social Empowerment (KEMENSOS: Kementerian Sosial) Education Agency, Social training and Social Counselling	It accounts for no more than 1-2% of the total budget of the KEMENSOS.	It is difficult to accurately assess the number of social work human resources as different agencies are proceeding with separate registrations.
Lao PDR	None Law on Social Work to be developed in 2024	While no policies or plans have been developed that focus on the development of social service workforce, the Strategic Guidelines for the Social Service Workforce Development is under formulation (to be approved in 2022).	Ministry of Labour and Social Welfare (MOLSW)	Not available	Not available
Malaysia	In preparation of enactment of Social Worker Profession Act	Social Work Strategic Plan 2018-2020	Social Welfare Department (SWD) under Ministry of Women, Family, Community Development (MWFCDD)	Not available	Not available
Philippines	Social Work Law (enacted in 1965, amended in 1967 and 2016) Magna Carta for Public Social Workers (2007)	- As for policies, standards and guidelines for Bachelor of Science in Social Work (BSSW), Commission on Higher Education: Memorandum Order No. 39 (2017) - There is no comprehensive development plan, manpower plan, or plan for universities to produce human resources for social service workforce. Human resource development is basically based on the plans and policies of the employing organizations.	Professional Regulation Commission (PRC) Department of Social Welfare and Development (DSWD)	Not available	Since system for licensure examination, registration, and renewal is in place, a certain amount of human resource information on Registered Social Workers (RSWs) is expected to be stored in PRC.
Vietnam	None (Although less legally effective than laws, many legal documents are in force.)	- Social Work Development Project for the period 2010-2020 - Program on Social Work Development for the period 2021-2030	Ministry of Labour, Invalids and Social Affairs (MOLISA)	The total estimated investment for the implementation of the Social Work Development Scheme for the 2021-2030 period is 10.155 million VND (equivalent to about 51.5 billion yen). This is equivalent to about 2.9% of MOLISA's budget for 2019.	Information and data on human resources are being captured by MOLISA. In addition, information on cadres and staff of the entire political system, including the Vietnam Fatherland Front and its constituent organizations, as well as staff of other public institutions, is being integrated into the Officials Database (OBD).
Japan	Certified Social Worker and Certified Care Worker Act (1987) Psychiatric Social Workers Act (1997)	- Basic Guideline for Measures to Secure Human Resources in Social Welfare Services (2007)	Ministry of Health, Labour and Welfare	Of the social security expenditure allocated to the MHLW, 13.7% (FY2021) is for “welfare, etc.”, including the development of social service workforce.	Registrant data is managed by the Social Welfare Promotion and National Examination Center

	Definitions and Regulations		
	Definitions	Categories	The number
Thailand	<p>“Social service workforce” is described as the workforce engaged in social work as per the industrial classification (counselling, referral and social services in terms for instance of social welfare activities which target individuals and families). In addition, the definition of a social worker is provided in the Social Welfare Promotion Act, and the definition of a “social work profession practitioner” is provided in the Social Work Professions Act. There is also a definition of a social worker under the occupational classifications. These definitions are not identical, but similar.</p>	<p>Social worker position levels for ordinary civil servants (under the responsibility of OCSC):</p> <ul style="list-style-type: none"> - Social Worker, Practitioner Level - Social Worker, Professional Level - Social Worker, Senior Professional Level - Social Worker, Expert Level <p>Categories of social workers as per the Classification of Occupational Standards (Thailand)</p> <ul style="list-style-type: none"> - Healthcare social workers - Child social workers - Gerontological social workers - Social workers, person with disabilities - Women and family social workers - Social workers, mild mental patient - Social workers, the destitute - Social workers, distinct groups 	<p>The total number is not available. Some reference figures are as follows.</p> <p>Persons engaged in the industrial classification of “health and social work”: 689.7 thousand persons.</p> <p>Social worker positions for ordinary civil servants: 1,253 positions of which 1,077 positions are occupied.</p> <p>Ordinary members of the Social Work Professions Council (SWPC): 3,869 persons, of which licensed social work profession practitioner: 2,967 persons.</p>
Cambodia	<p>Social Service Workforce refers to those working to ensure improvement of victims’ and vulnerable people’s wellbeing, both government and non-governmental organizations, professional and non-professional, and working for profit and non-profit. Social service workforce focuses on prevention, response, and support for victims and vulnerable people in the community via elimination of poverty, reducing discrimination, coordination of services, promoting social justice, as well as prevention and response to violence, abuse, exploitation, neglect and family separation.</p>	<ul style="list-style-type: none"> - Professional Social Worker - Para-professional - Para Social Worker - Allied worker 	Not available
Indonesia	<p>The implementation of social welfare is defined as a social service provided by the government and the community to meet the basic needs of the people and refers to social rehabilitation, social security, social empowerment and social protection. The human resources involved in the implementation of social welfare are classified into the four types shown in the right column.</p>	<ul style="list-style-type: none"> - Social worker - Social welfare worker - Social extension worker - Social volunteer 	About 59,300 (3,000 certified social workers)
Lao PDR	<p>There is no law that uniformly defines social work service workforce and comprehensively regulate their roles and responsibilities. Thus, there is no classification of professional social workers or para-social workers.</p>	No provision for official categories.	Not available
Malaysia	<p>Human resources who provide “activities as profession based on social work principles, values, ethics, knowledge, techniques and methods that help individuals, families, groups and communities to improve and reconstruct social functions”</p>	<p>There are the following two social work professions in the SWD</p> <ul style="list-style-type: none"> - Social Welfare Officer - Assistant Social Welfare Officer 	3,814 Social Welfare officers and Assistant social welfare officers belonging to the SWD
Philippines	<p><Definition of Social Worker> a practitioner who by accepted academic training and social work professional experience possesses the skill to achieve the objectives as defined and set by the social work profession, through the use of the basic methods and techniques of social work (case work, group work, and community organization) which are designed to enable individuals, groups and communities to meet their needs and to solve the problems of adjustment to a hanging pattern of society and, through coordinated action, to improve economic and social conditions, and is connected with an organized social work agency which is supported partially or wholly from government or community solicited funds.</p>	<ul style="list-style-type: none"> - Social Worker/Registered Social Worker (RSW) - No clear classification of other personnel 	Approximately 32,000 RSQW
Vietnam	<p>Social work provides targeted support to marginalized individuals, families, population groups, and communities, including but not limited to the poor, people with disabilities, children in special circumstances, the elderly, and people affected by violence or social vices, so that they can develop their life skills and employ their own resources and community resources to address their own challenges. Social work also aims to address broader social problems such as employment, poverty, and domestic violence. The mandate of social work is to help human beings fulfill their potentials, enrich their life, prevent challenges from happening to them, and help them address their own challenges</p>	<ul style="list-style-type: none"> - Principal Social Worker - Social Worker - Assistant Social Worker - Social Work Collaborator 	Approximately 318,000
Japan	<p><Certified Social Worker> A person with expert knowledge and skills who has received the registration and uses the appellation “certified social worker” to provide advice, guidance, or welfare services in consultations about the welfare of persons with physical disabilities or mental disorder and intellectual disabilities or persons facing difficulty in leading a normal life due to environmental factors, and a person engaged in the business of communicating and coordinating with and providing other assistance to doctors, other health and medical service providers, and other related parties.</p> <p><Mental Health Social Worker> A person with expert knowledge and skills on health and welfare of people with mental disorder who has received the registration and uses the appellation “mental health social worker” to provide advice, guidance, necessary training for adaptation to daily life and other assistance to persons who receive medical treatment for mental disorder in psychiatric hospitals and other medical facilities or who use facilities intended to promote social rehabilitation of people with mental disorder, regarding the use of community consultation support and other consultation on social rehabilitation.</p>	<ul style="list-style-type: none"> - Professionals - Other welfare related qualifications holders - Volunteers 	<p>Certified Social Worker: 257,293</p> <p>Mental Health Social Worker: 93,544 (as of March 2021)</p>

	Certification / Licensing			
	Regulation	Title	Requirements	Certifying/ registration body
Thailand	Yes	A licensed person is called as a “licensed social work profession practitioner”.	To be a member of the Social Work Professions Council (SWPC) , for which requirements include graduation from a faculty of social work studies, or graduation from another faculty plus completion of relevant training by SWPC => To apply for and pass license examinations => To complete relevant procedures, depending on the degrees of social work experiences, to be approved by SWPC, in order to obtain license. There are requirements to be met for the renewal of the license (every 5 years) including continuing education as stipulated by SWPC.	Social Work Professions Council (SWPC)
Cambodia	None (to be established)	-	-	-
Indonesia	Yes	Certificate of Social worker	Upon completion of the professional education, the student must pass a competency test and submit a medical certificate and an agreement to comply with the Code of Ethics.	A professional certification organization will be established by 2024. In the meantime, the Social Work Certification Institute (LSPS: Lembaga Sertifikasi Pekerjaan Sosial) is acting as the certification body.
Lao PDR	None	-	-	-
Malaysia	None	-	-	-
Philippines	Yes	Registered Social Worker (RSW) “professional license” (i.e., a license without which one may not perform the practice (act))	After obtaining Bachelor of Science in Social Work (BSSW), applicants must pass the national licensure examination and register. The requirement for renewal (3 years) is to obtain Continuing Professional Development (CPD) credit units (45 credit units).	Professional Regulation Commission (PRC)
Vietnam	A draft Decree on social work, including provisions on licensing and qualification systems, is currently being prepared.	Social Work Practitioner (from the draft Decree)	<ul style="list-style-type: none"> - Possess a professional diploma related to social work granted or approved in Vietnam. - Have a document certifying the process of practicing social work. - Have a medical certificate that is sufficient to practice social work. - Pass the examination as prescribed by the Minister of MOLISA. - Not be prohibited by court judgment or decision from engaging in or practicing any work related to professional social work. - etc. (from the draft Decree)	MOLISA (from the draft Decree)
Japan	National qualification system	<ul style="list-style-type: none"> - Certified Social Worker - Mental Health Social Worker 	<ul style="list-style-type: none"> - After completing the training course, passing the national examination and registering for the qualification. 	Social Welfare Promotion and National Examination Center

■ Development

	Education and Training		Curriculum		Continuing Education/ In-service training
	Educational Institutions	The number	Curriculum	Practice placement / Internship	
Thailand	The degree programs on social work are offered by 6 institutions, of which 2 offer also master level and doctor level degree programs.	6 institutions	Curriculum standards for higher education are devised. They also stipulate on the processes to follow for the introduction of new subjects and / or for the medication of subjects, along with the formats of the program descriptions. In the case of the Thammasat University <ul style="list-style-type: none"> - Bachelor’s program - [Thai language program] 138 units or more, of which 42 units for practical placement (internship) / [English language program] 132units, of which 3 units for internship - Master’s program (in the case of Master of Social Work and Administration): 42 units (of which, either 12 units for thesis for the program with thesis, or 6 units for independent research for the program without thesis), of which 6 units are for practical placement - Doctor’s program: 51 units, of which 36 units for thesis 	All of the 6 institutions include practical placement / internship in the respective programs. These institutions collaborate with various public and private organizations accepting students. There is a good number of organizations accepting interns.	Social Work Professions Council (SWPC) and Thailand Association of Social Workers (TASW) organize training targeting social workers, applying for license examinations and those interested in subjects related to social work. Government agencies undertaking tasks related to social work also organize training on relevant subjects. SWPC has also issued a manual on continuing education. Completing the required continuing education is a requirement for the renewal of license.
Cambodia	The first bachelor’s program was established in 2008, with the master’s program starting in 2009 and the PhD program in 2022.	3 institutions	The curriculum for higher education is not developed at the national level. Each institution develops its curriculum, which is approved by the Ministry of Education, Youth and Sport.	The three institutions provide field practicum at partner NGOs, etc. The field practicum is for 800 hours at the Royal University of Phnom Penh, 900 hours at the National Institute of Social Affairs (NISA), and 9 months at the Saint Paul Institute (all bachelor’s programs).	In-service vocational training will be strengthened based on the Cambodian Qualifications Framework. The standard training curriculum and modules are currently being developed.
Indonesia	Higher education institutions offer education in social work, social welfare, etc. By 2024, professional education institutions will be established along the social worker qualifications scheme.	31 institutions	A social work (undergraduate level) curriculum is in place at the national level, with 19 subjects (57 credits) compulsory in the basic curriculum and another 87 credits customized by each university, for a total of 144 credits.	The compulsory curriculum includes 36 credits of practical training.	In the absence of an efficient framework, individual social work human resources participate in seminars and workshops organized by professional associations and international organizations.

	Education and Training		Curriculum		Continuing Education/ In-service training
	Educational Institutions	The number	Curriculum	Practice placement / Internship	
Lao PDR	The National University of Laos (NUOL) is the only university in the Lao PDR that offers a bachelor's degree program in social work.	1 institution	The Bachelor of Arts in Social Work (BASW) requires 141 credits to obtain. With the support of UNICEF, the new curriculum is scheduled to be updated in 2022.	Of the 141 credits, 6 credits for practicum and 6 credits for internship.	With the support of development partners such as UNICEF, KOICA, and USAID, Para Social Worker Training, training on mental health and psychosocial support, and training on anti-trafficking in persons have been conducted.
Malaysia	Social work courses are offered at universities and junior colleges.	11 universities and 1 college	Each university uses a curriculum approved by the Ministry of Higher Education after customizing according to the local needs, so there is a need of standardization. The required number of units for graduation is 122.	Practical training accounts for 18 units of the 70 units of core curriculum focused on the social work. There is an internship system.	The Social Institute of Malaysia, which is responsible for the in-service training of the MWFC, and the professional association are conducting training, but the entire framework for career development has not been established.
Philippines	Social work education is offered at universities.	112 or more institutions	A national standard curriculum for Bachelor of Science in Social Work (BSSW) is in place. Of the 140 units required for a bachelor's degree, 90 units are in professional courses (including 30 units of field instructions).	1,000 hours of field instructions (30 units)	In accordance with the Continuing Professional Development (CPD) Act (2016), earning 45 CPD credit units by attending CPD programs offered by accredited CPD providers or through self-directed learning is required for renewal for Registered Social Worker (RSW).
Vietnam	58 universities offer bachelor's programs, seven universities offer master's programs, two universities offer doctoral programs, and 28 vocational training schools offer diploma programs.	86 institutions	Since the Ministry of Education and Training determines about 70% of the curriculum in higher education institutions, many subjects are common among universities. Marxist-Leninist Philosophy, History of the Communist Party of Vietnam, and National Defense Education, which are unique to socialist countries, are compulsory. The curriculum on social work, which was approved by the Ministry of Education and Training in 2004, was revised in 2010, reducing the number of subjects related to general education and increasing the number of practical subjects related to professional knowledge.	In the bachelor level curriculum, practical training is basically 8 credits.	It is administered by MOLISA. Annually or periodically, MOLISA collaborates with educational institutions to conduct training for social service workforce and teachers throughout the country.
Japan	<p><Certified Social Worker></p> <ul style="list-style-type: none"> - Universities and colleges in welfare studies offering core subjects or basic subjects - Short-term/general training institutions designated for certified social workers <p><Mental Health Social Worker></p> <ul style="list-style-type: none"> - Universities and colleges in health and welfare studies offering core subjects or basic subjects - Short-term/general training institutions designated for mental health social workers 	264 institutions (members of the Japanese Association for Social Work Education)	<p><Certified Social Worker></p> <p>A total of 23 subjects and 1,200 hours including practical training.</p> <p><Mental Health Social Worker></p> <p>A total of 22 subjects and 1,200 hours including practical training.</p>	<p><Certified Social Worker></p> <p>240 hours</p> <p><Mental Health Social Worker></p> <p>210 hours</p>	The professional associations (the Japanese Association of Certified Social Workers/the Japanese Association of Mental Health Social Workers) have their own continuing education systems, which are available to their members.

■ Support

	Recruitment and Retention	Professional Associations	Code of Ethics	Career Development	Supervision
Thailand	The number of "social worker positions" are limited in the public and private sectors. There are no clear linkages between the acquisition of the license for a social work profession practitioner and the recruitment or professional promotion.	Social Work Professions Council (SWPC) and Thailand Association of Social Workers (TASW)	SWPC created the code of ethics, along with the service provision standards which describe how to translate the code of ethics into practice.	For the public sector workforce (ordinary civil servants), accumulating relevant experiences including education is encouraged. It is also taken into consideration at the time of professional promotion. A study leave program is also available.	It is undertaken in line basically with the supervision and reporting mechanism of the respective organizations. Concerning licensed social work profession practitioners, penalties for violation of the code of ethics are stipulated, and the deliberations are made at the Ethics Committee.
Cambodia	The majority of degree holders are employed by NGOs. Few are employed in government agencies. Efforts are currently underway to develop job descriptions and other measures to facilitate employment in local government agencies.	Association of Professional Social Workers of Cambodia (APSWC)	A sub-decree on the code of ethics for the social service workforce is being developed by MoSVY and will be approved in 2022.	No specific initiatives or actions have been identified.	There are no national standards for the implementation of supervision. A survey on supervision has identified challenges such as the shortage of social service workforce who can serve as supervisors.

	Recruitment and Retention	Professional Associations	Code of Ethics	Career Development	Supervision
Indonesia	No systematic framework was identified, but the professional associations deal with individual cases.	There are at least 13 professional associations (excluding government organizations such as the KEMENSOS). The Indonesian Association of Social Workers (IPSPI: Ikatan Pekerja Sosial Profesional Indonesia) is the largest independent association of social work human resources, and the Indonesian Social Work Consortium (KPSI: Konsorsium Pekerjaan Sosial Indonesia) is a consortium of social work related organizations including the KEMENSOS and IPSPI.	The Indonesian Association of Social Workers (IPSPI), the country's largest professional association, has established a code of ethics.	No systematic framework could be identified.	The services are carried out in accordance with the operational guidelines made for each social welfare service. Supervision is carried out to ensure that social work services are implemented efficiently, effectively and properly in accordance with the operational guidelines, and is the responsibility of KEMENSOS department in charge of each social work services and the local government governor. In the local government, which is the implementing agency of social work services, departments and sections are organized under the director general, and social work human resources work under the supervision of each department and section head.
Lao PDR	The situation where the professionalization of social service workforce has little progress, the number of vacancies and recruitment is unclear, and there are no professional associations for social worker is hindering university students who wish to be engaged in social work from finding employment.	Discussions are underway to establish a “professional association for social workers”, but no concrete plans have been made for its establishment.	A code of ethics related to social work has not been established. It will be addressed through the establishment of the professional association for social workers and through consultations with other concerned bodies.	None in particular	There is no formal system in place for the supervision of social service workforce.
Malaysia	University/college support job-search activities of students/graduates	Malaysian Association of Social Workers	SWD stated on the ethical behavior of social work human resources in the Social Work Strategic Plan (2018-2020)	An entire structure is not developed	SWD conducts supervision of social welfare officers/ assistant social welfare officers belonging to SWD
Philippines	The main sources of employment for Registered Social Workers (RSWs) are government agencies such as DSWD and Local Government Units (LGUs), and private institutions such as NGOs. DSWD is said to be the major RSW employing agency, with 6,267 RSWs employed as of December 31, 2021. As for LGUs, the actual number is not known, but it is assumed to be of a certain size as a place of employment due to the mandatory placement of RSWs.	There are many professional associations of social workers, with more than 9 member organizations of ASEAN Social Work Consortium (ASWC) alone. The leading organizations are the Philippine Association of Social Workers, Inc. (PASWI) , which has the longest history in the ASEAN region, and the National Association for Social Work Education, Inc. (NASWEI) for social work educational institutions.	The Code of Ethics for Social Workers is being revised by the PRC's Professional Regulatory Board for Social Workers with the participation of professional associations and others.	In general, career development, promotion, etc. are carried out in line with the human resource development policy of the employing organizations. The PRC's Professional Regulatory Board for Social Workers is reviewing social work-related laws and is considering adding provisions on career development.	There are no national systems or standards, and supervision is generally conducted through regulations and staff development within the employing organizations.
Vietnam	According to surveys by educational institutions on their own students, in some schools most of the graduates are employed in jobs related to social work. On the other hand, in the country as a whole, many graduates are not employed in social work related positions. This can be attributed to the fact that the expansion of the education system is being promoted ahead of the creation and establishment of the social work profession, and the government policy of reducing the number of civil servants.	The Vietnam Association for Vocational Education - Training and Social Work Profession (VAVETSOW) was established in 2013 when the Vietnam Association of Vocational Training absorbed the Vietnam Association of Social Workers.	Circular 01/2017/TT-BLDTBXH (Professional Ethical Standards for Social Workers) by MOLISA in 2017 establishes ethical standards for social service workforce.	The information about the status of the development of the framework and the details of specific initiatives are not available.	Although the information about the system and content of supervision is not available, many social service personnel have supervisors and supervision is provided.
Japan	The professional associations are working on advocacy for the expansion of the appointment of certified social workers and mental health social workers.	- Japanese Association of Certified Social Workers (JACSW) - Japanese Association of Mental Health Social Workers (JAMHSW) - Japanese Association of Social Workers in Health Services - Japanese Association of Social Workers *The organization affiliated to IFSW is the “Japanese Federation of Social Workers” consisting of the above four organizations	A Code of Ethics for Social Workers, common to all four organizations, has been developed.	<Certified Social Worker> - Approved Certified Social Worker System <Mental Health Social Worker> - Certified Mental Health Social Worker System under the lifelong training system of the JAMHSW	<Certified Social Worker> - Supervision is required as a condition for approval as an Approved Certified Social Worker or Approved Advanced Certified Social Worker. - A supervisor under the Approved Certified Social Worker System is an Approved Advanced Certified Social Worker, etc. who has registered as a supervisor. <Mental Health Social Worker> - Certified supervisors are trained in the lifelong training system of the JAMHSW