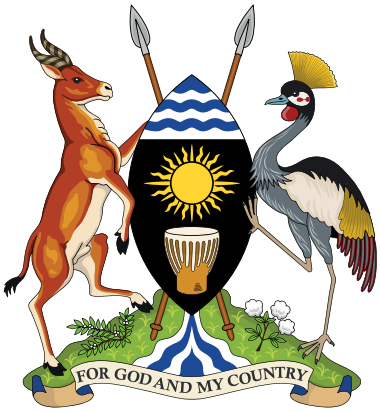
THE REPUBLIC OF UGANDA

MINISTRY OF GENDER, LABOUR AND SOCIAL DEVELOPMENT

NATIONAL STRATEGY FOR STRENGTHENING THE SOCIAL SERVICE WORKFORCE IN UGANDA

JULY, 2024



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Foreword

Historically, the majority of vulnerable individuals in Uganda have received emotional, material and financial support from traditional social care and support systems, including among others family, kinship and the clan system. Specifically, both nuclear and extended families have served as the first line of social care and support for orphans, widows, persons with disabilities (PWDs), Older persons and the chronically ill. The traditional system was established around respecting individuals' rights to dignity and well-being in compliance with norms, beliefs, and practices governing the family and kinship ties. While society still upholds the moral value of caring for vulnerable members, the traditional support system has greatly weakened, resulting in increased demand for formal social care and support services (SCSS).

"Historically, the majority of vulnerable individuals in Uganda have received emotional, material and financial support from traditional social care and support systems, including among others family, kinship and the clan system".

Currently, the delivery of SCSS in Uganda is fragmented and characterised by an assortment of non-state actors delivering a diversity of uncoordinated programmes. Consequently, the country's available lean Social Service Workforce (SSW) is unevenly distributed across social service delivery points of different implementing partners. Moreover, due to the limited workforce capacity for effective delivery of SCSS at all levels, there is a heavy reliance on community-based cadres identified and facilitated by Civil Society Organisations (CSOs) to deliver SCSS within their local communities. However, to date, irrespective of their experience and contribution to informal SCSS, community-based cadres are neither formally recognised, nor regulated through a national policy strategy. These and other challenges led to SCSS stakeholders' prioritisation of a national strategy for planning, developing, and supporting the SSW as an enabler to operationalisation of the 2019 conceptual model for social care and support (SCS) in the country.

The adapted conceptual model as reflected in the Operational Strategy for SCSS provides a systemic approach to the provision of services to vulnerable individuals in a socio-culturally sensitive manner. The system adopts Case Management as the main approach and takes cognisance of the reality that in Uganda, the family is the first line of care and support for individuals in need of SCSS. Emphasis is on the need for strengthening the capacity of families in the provision of SCSS within the context of the traditional support mechanism to individuals at risk of social exclusion, neglect and abuse.

Strengthening the SSW is, therefore, critical in scaling the provision of SCSS building on family-level capacities towards progressive SCSS indicators for all categories of the population, particularly most vulnerable individuals unable to care for themselves.

Amongi Betty Ongom (MP)

MINISTER OF GENDER, LABOUR AND SOCIAL DEVELOPMENT

Acknowledgements

> **"This strategy is a product of concerted eff orts by the Off icers from various Government Ministries, Departments and Agencies (MDAs) and other key stakeholders who were involved in the strategy development process".**

The Ministry of Gender, Labour and Social Development (MGLSD) acknowledges the contribution of diff erent stakeholders who participated in developing the SSW strengthening Strategy. Ultimately, this strategy is a product of concerted eff orts by the Off icers from various Government Ministries, Departments and Agencies (MDAs) and other key stakeholders who were involved in the strategy development process.

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Dr. A. D. Kibenge

PERMANENT SECRETARY

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Abbreviations & Acronyms

ASWO	Assistant Social Welfare Officer
CAO	Chief Administrative Officer
CBO	Community-Based Organisation
CBSD	Community-Based Services Department
CDO	Community Development Officer
CFPU	Child and Family Protection Unit
CID	Criminal Investigation Department
CPD	Continuous Professional Development
DCDO	District Community Development Officer
DPP	Directorate of Public Prosecution
ESP	Expanding Social Protection (programme)
FBO	Faith-Based Organisation
FCC	Family and Children Court
GBV	Gender-Based Violence
GoU	Government of Uganda
GSSWA	Global Social Service Workforce Alliance
IFSW	International Federation of Social Workers
JCU	Justice Centres Uganda
JLOS	Justice, Law and Order Sector
LAPSNET	Legal Aid Practitioners Network
LO	Labour Officer
MDAs	Ministries, Departments and Agencies
MGLSD	Ministry of Gender, Labour and Social Development
MIA	Ministry of Internal Affairs
MES	Ministry of Education and Sports
MoLG	Ministry of Local Government
MoPS	Ministry of Public Service
MSW	Medical Social Worker/Master of Social Work
NASWU	National Association of Social Workers of Uganda
NDP	National Development Plan
NGO	Non-Governmental Organisation
NSPP	National Social Protection Policy

OPM	Office of the Prime Minister
OVC	Orphans and Vulnerable Children
PCAU	Palliative Care Association of Uganda
PCDO	Principal Community Development Officer
PLWHA	People Living with HIV and AIDS
PPI	Programme Plan of Interventions
PSWO	Probation and Social Welfare Officer
PWD	Persons with Disabilities
SAGE	Social Assistance Grants for Empowerment
SCG	Senior Citizens Grant
SCS	Social Care and Support
SDSP	Social Development Sector Plan
SOCY	Sustainable Outcomes for Children and Youth
SPSWO	Senior Probation and Social Welfare Officer
SSW	Social Service Workforce
SWO	Social Welfare Officer
UNICEF	United Nations Children's Fund
USAID	United States Agency for International Development

Glossary[1]

Allied Social Worker	Professional or paraprofessional social worker who supports and coordinates the delivery of services to vulnerable individuals in other sectors such as education, health or justice, law and order.
Case management	an approach of providing care and support to vulnerable individuals whereby a professional social worker plans for, identifies, arranges, advocates for, coordinates, monitors and evaluates a package of multiple services after conducting a proper assessment of the needs of the client.
Child protection	Measures that are taken to prevent and respond to child abuse, neglect, abandonment and exploitation.
Coordination	The process of bringing together and organising diverse stakeholders in order to facilitate optimal utilisation of available resources and strengthen synergies for the achievement of better outcomes.
Paralegal:	A person with basic training in law who offers legal aid to some people under the supervision of a professional lawyer.
Paraprofessional:	A person with basic training to perform certain functions, but not legally certified or licensed to practice as a full professional, which in some fields requires a university degree or specialised training.
Parasocial worker:	A supervised paraprofessional staff or volunteer – often community-based – who provides social care and support services to vulnerable individuals, in areas where the social care and support system is underdeveloped or severely stretched.
Professional:	A person who is a member of a well-recognised profession, that often requires possession of a specific degree or level of education, a particular ethical or moral code of conduct, and licensing or certification.
Psychosocial support:	All actions and processes that enable individuals, households or communities to cope with stress in their environment, develop resilience, and reach their full potential.
Social Care and Support:	A wide range of public and private services designed to alleviate the socio-cultural vulnerability of individuals who suffer or are likely to face neglect, abuse, exploitation and social exclusion.
Social protection:	Refers to public and private interventions to address risks and vulnerabilities that expose individuals to income insecurity and social deprivation, leading to undignified lives.

[1] *Unless otherwise stated, these definitions are derived from 'Para Professionals in The Social Service Workforce: Guiding Principles, Functions and Competencies', Global Social Service Workforce Alliance, 2nd edition 2017*
https://ovcsupport.org/wp-content/uploads/2017/02/Para-Professionals-in-the-Social-Service-Workforce-2ndedition.pdf

Social Service Workforce[2]:	These are resources persons employed by the Government or CSOs to provide services aimed at enhancing the capacity of individuals, households and communities to manage life cycle risks and cope with socio-economic shocks.
Social Services[3]:	Services provided by public or private organisations aimed at addressing the needs of individuals, households and communities.
Social work[4]:	A practice-based profession that promotes social change and development, social cohesion, and the empowerment of people.
Social worker[5]:	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, organisations, or society in general).
Supervision[6]:	This is a supportive activity carried out through regular meetings with a focus on mentoring, accountability, skills development and experiential learning.
Vulnerability:	The state of having limited ability to manage risks or cope with shocks that may lead to undignified lives.

[2]Global Social Service Workforce Alliance www.socialserviceworkforce.org/social-service-workforce
[3]www.bettercarenetwork.org/bcn/toolkit
[4]The International Federation of Social Workers. http://ifsw.org/get-involved/global-definition-of-social-work
[5] Barker (2003). cited in http://www.naswdc.org/practice/intl/definitions.asp
[6]GSSWA (2020) Guidance Manual on Strengthening Supervision for the Social Service Workforce http://socialserviceworkforce.org/resources/guidance-manual-strengthening-supervision-social-service-workforce

Executive Summary

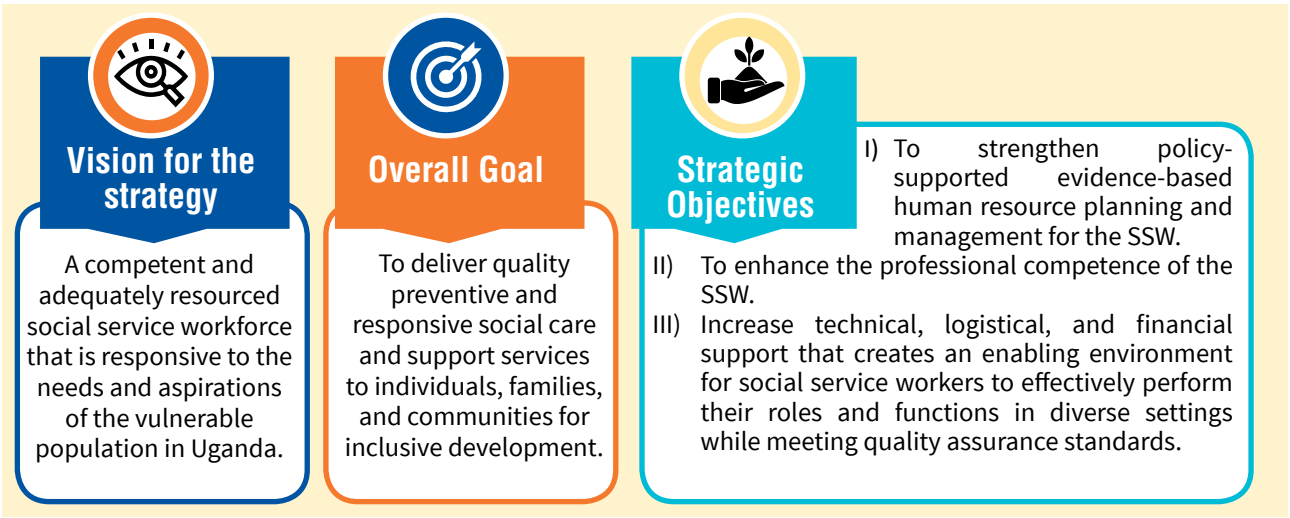
This strategy for Strengthening the Social Service Workforce (SSW) has been developed to complement and align with the wider Operational Strategy for the Social Care and Support System (SCSS). The strategy was developed based on a series of national and regional consultation workshops and interviews with experts, stakeholders, development partners and from different sectors; as well as extensive desk and literature review. The scope of literature review covered research, reports, laws and policies on the SSW; and SCSS, in the wider context of the national social protection system in Uganda. The main findings from the literature review and consultations indicated that the Government of Uganda has in recent years made progress on strengthening the national social protection system in the following areas:

a. Reviews and assessments of specific aspects of the social protection system.
b. Capacity strengthening of the SSW to deliver social care and support services.
c. Development of standards for social work education; a national child protection curriculum; a competency strategy for para social workers standard operating procedures and tools for case management in child protection, and care for children in alternative care.
d. Multi-sectoral Coordination has been strengthened to leverage synergies and resources.

Despite the gains so far, significant gaps still exist impeding SSW's effective delivery of their SCSS roles.

a. The SSW is insufficient in number and lacks the required competences, capacity and resources to meet the extent and range of social care needs in the country. The SSW gaps are particularly evident at the community level where there is a reliance on staff with generic training and responsibilities, the Community Development Officer (CDO), who attempts to respond to social welfare needs but are not specialists in social care and support.
b. The majority of social care and support services, especially at the community level in rural areas, are delivered by Civil Society Organisations (CSOs) and other community initiatives, which are largely volunteer-driven and or donor funded. While these services have potential for effective response care, currently they lack a clear legal and operational strategy, are delinked from government services and statutory bodies, and are inconsistent and unsustainable, owing to the reliance on different donor initiatives aimed at addressing different needs over different timescales.

This strategy aims to provide overarching guidance and direction for planning, developing and supporting the SSW in Uganda towards more effective delivery of social care and support services, in fulfilment of the national social protection mandate. The strategy is accompanied by a detailed action plan, with specifics such as overall goal, strategic objectives, priority actions, recommended timelines, organisations responsible and resources required.



1 Introduction

The capacity of the social service workforce (SSW) is one of the enabling factors for an effective social care and support system; alongside laws, policies and regulations, services, coordination, quality assurance, monitoring and evaluation, management information systems, and financing. As the critical link between vulnerable populations and the resources they need, the SSW plays a crucial role in the overall efficacy of the system. Strengthening the workforce forms a core element of enhancing the capacity for delivery of social care and support services as well as promoting social development.

Over the past decade, the Government of Uganda (GoU) has taken key steps in strengthening the overall social protection system, with an emphasis on the SSW as a core element of strengthening the delivery of social care and support services. These efforts have included evidence-building through reviews and assessments, streamlining standards for social work education, development of a national child protection curriculum, and a competency strategy for para-social workers as well as the development of standard operating procedures and tools for case management especially in the children's programming. There has also been ongoing effort to strengthen multi-sectoral coordination, enhance synergies and leverage resources. Despite these ongoing efforts, significant gaps still impede the capacity of the SSW to effectively deliver services. This strategy aims to provide an overarching guide for planning, developing and supporting the SSW in Uganda as a core element of the social services system strengthening.

1.2 Justification for Developing the SSW Strengthening Strategy

A well planned, developed, and supported workforce is critical for effective functioning of the social care and support system. Therefore, developing the capacity of this workforce is a priority for enhancing access to holistic social care and support services as well as promoting social development.

"Despite these ongoing efforts, significant gaps still impede the capacity of the SSW to effectively deliver services."

Whilst the primary mandate for the provision of social care and support services lies with the state, the delivery of these services in Uganda is rather fragmented, with multiplicity of non-state actors implementing programmes in diverse areas. Consequently, the SSW is scattered across different implementing partners; besides the lean workforce employed within the government structures. This in turn has posed challenges with defining the overall structure and composition of the SSW. According to the Social Protection Review Report (2019)[7], due to insufficient resources and workforce to deliver services in the Local Governments, there is a heavy reliance on community-based cadres supported by Civil Society Organisations (CSOs) and yet these cadres are neither formally recognised, standardised nor regulated through a national policy strategy. These and other challenges have led to calls by key stakeholders for a more systematic approach to strengthening the SSW through designing a national strategy for planning, developing, and supporting the workforce as a priority.[8]

1.3 SSW Strategy Development Process

The process of developing this strategy was highly participatory and involved consultations with a wide range of stakeholders. It was spearheaded by the MGLSD through a Technical Reference Committee. National consultations were conducted with multiple stakeholders involving Government, Development Partners, CSOs,

[7] MGLSD (2019). Social Protection Review. Final report. Government of Uganda, Kampala, Uganda.
[8] See for example the recommendations of the National Social Work symposium held in October 2018 and the IFSW-Africa Conference communique (2019).

Tertiary education institutions, and Professional associations.

Multi-stakeholder consultations (online meetings) were also carried out in four regions, one each; for the north, east, west and central regions. The participants included local government and civil society staff involved in managing or delivering social care and support services from selected districts in each region. The planning of the stakeholder consultations considered the different sectors; notably Education, Health, Justice, Law and Order (JLO) sector and public sector management

Most national-level meetings were also conducted online due to the COVID-19-related restrictions in 2021. The consultations were augmented by a critical review of existing reports and other literature on the SSW and the general context for the delivery of SCSS in Uganda. At every stage, the reports were reviewed by the Technical Reference Committee to ensure quality and consistency.

1.4 Structure of the Strategy

The strategy is presented in sections, with the first section providing a brief introduction and background information. Section Two provides a comprehensive discussion of the status of the workforce elaborating on the strengths, challenges and gaps in strengthening the SSW drawing from literature as well as stakeholder perspectives from national and regional consultations. Section Three presents the overall strategic direction in strengthening the SSW including the vision, goal, guiding principles and assumptions. Section Four elaborates the elements of the proposed strategy focusing on planning, developing, and supporting the workforce. Section Five presents the action plan, highlighting the priority areas and actions in strengthening the SSW. Section Six elucidates the coordination and implementation arrangements while the final section highlights the cost implications.

"Section Two provides a comprehensive discussion of the status of the workforce elaborating on the strengths, challenges and gaps in strengthening the SSW drawing from literature as well as stakeholder perspectives from national and regional consultations."

2 Analysis of current social service workforce strengths, gaps and challenges

2.1 Uganda's Context for the Social Services

Uganda's economy has doubled in size in the past 10 years, from UGX 64 trillion in FY 2010/11 to UGX 128 trillion in GDP in FY2018/19 in nominal terms.[9] The government attributes this growth to relative peace in the country, a stable domestic macro-economic environment and continued investment in infrastructure, particularly in roads and energy.[10] Despite this growth, poverty remains a major challenge and is on the increase, from 19.7% in 2016 to 21.4% of the population (more than 8 million people) in 2020 living in income poverty,[11] while an estimated 47% of households live in multi-dimensional poverty[12]. National statistics further indicate that in 2020, more people slipped into poverty (10.2%) compared to those who moved out (8.4%)[13], indicating insecure livelihoods for a significant proportion of the population.

A high population growth rate and a young population pose challenges for the country's growth and development and demand significant investments in human capital development. The annual population growth rate of 3.2% is one of the highest in the world[14]; and with over 56% of its 42 million people under the age of 18[15], the country suffers persistently high youth unemployment and lack of access to basic services such as education, health, nutrition, and housing. 12.4% of Uganda's population live with a disability and they constitute some of the most vulnerable and excluded population in the country.[16] Furthermore, although Older persons constitute a low percentage of the population, they lack adequate systems of care and support.[17] High disease burden, such as HIV and AIDS increase people's vulnerability. By 2020, HIV prevalence in Uganda was estimated at 6.8% for women and 4.2% for men.[18] These challenges were further exacerbated by the COVID-19 pandemic that hit the country at the beginning of 2020.

Vulnerability manifests in other different forms across different populations and age groups, including violence. Estimates indicate that up to 96% of Ugandan children experience some level of vulnerability. Of this number, 51 per cent (more than 8 million children) are considered moderately or critically [19]. The UDHS (2016) shows that 51% of women and 52% of men have ever experienced physical violence since age 15; while 22% of women and 8% of men have ever experienced sexual violence since age 15. Of Ugandans aged (18-24) years, Six in Ten females (60%) and Seven in Ten males (70%) reported experiencing physical violence during their childhood. [20] Furthermore, children suffer all forms of violence despite various legislation and interventions. For example, the National Violence Against Children (VAC) survey [21]indicated that among 18–24-year-olds, One in Three girls (33%) and One in Six boys (17%) reported experiencing sexual violence during their childhoods. This included 11% of girls experiencing pressured or forced sex. Only One in Four children (girls, 25%) and boys (29%) knew of a place to seek services, while just over One in Twenty girls (5%) and fewer than One in Twenty boys (3%) sought and received help. This indicates a lack of adequate protection services for children.

[9] UBOS (2020). Statistical Abstract. Government of Uganda. Kampala, Uganda.
[10] Ibid
[11] UBOS (2020). Statistical abstract. Government of Uganda. Kampala, Uganda.
[12] UNICEF (2020). Going beyond monetary poverty: Uganda's multidimensional poverty profile. Available at: https://www.unicef.org/esa/media/6146/file/UNICEF-Uganda-Multi-dimensional-child-poverty-2020.pdf
[13] National Planning Authority (2020). Third National Development Plan. Government of Uganda. Kampala, Uganda.
[14] https://www.macrotrends.net/countries/UGA/uganda/population-growth-rate/ https://www.indexmundi.com/g/r.aspx?v=24.
[15] UBOS (2016). Statistical Abstract. Government of Uganda. Kampala, Uganda.
[16] UBOS (2016). National Housing and Population Census, 2014. Main report. Government of Uganda. Kampala, Uganda.
[17] MGLSD (2020). Social Protection Review. Final Report. Government of Uganda. Kampala, Uganda.
[18] UAC (2020). National HIV/AIDS Strategic Plan. Government of Uganda. Kampala, Uganda.
[19] MGLSD (2020). National Child Policy. Government of Uganda. Kampala, Uganda.
[20] MGLSD (2017). National Violence Against Children Survey. Government of Uganda. Kampala, Uganda.
[21] Ibid.

Youth are defined as persons aged 18 - 30 years[22] and currently, they are estimated to constitute 19.1% of the total population of Uganda. Due to their transitional nature between childhood and adulthood, they are both considered the most productive age group, while at the same time, their multiple vulnerabilities are likely to receive limited attention due to the very transitional and fluid nature of youthfulness. Youth suffer high unemployment rates, are the most likely to get involved in crime, and therefore, be imprisoned, and are at high risk of drug and substance abuse, human trafficking, sexual violence, unwanted pregnancies, and mental illness. Although there have been efforts by the government to focus on youth programming, most programmes focus on livelihood development and are to some extent disjointed resulting in limited success.

The MGLSD rightly notes that programmes and services for youth are largely uncoordinated and duplicated[23]. The Department of Youth and Children Affairs at the MGLSD takes the overall responsibility for planning and oversight of youth programming. However, implementation of services is hampered by lack of competent and specific youth workforce at the local government level. District Youth Officers whose function is to coordinate the youth at the district, city and municipality levels are not provided for in the current staffing structures provided by the Ministry of Public Service. This leaves the role of implementation of youth services to the PPWO/ PCDO/SPSWO/ SCDO and the CDO at the district/ city/municipality and sub-county/Town Council/ Division levels respectively.[24]

"The MGLSD rightly notes that programmes and services for youth are largely uncoordinated and duplicated. The Department of Youth and Children Affairs at the MGLSD takes the overall responsibility for planning and oversight of youth programming."

[22] MGLSD (2016). National Youth Policy. Government of Uganda. Kampala, Uganda
[23] MGLSD (2021). National Coordination Mechanism for Youth Programmes. Government of Uganda. Kampala, Uganda.
[24] ibid

As noted in the National coordination mechanism for youth programmes (2021),[25] PPWO/PCDO/ SPSWO/SCDO and the CDO have other designated roles and responsibilities, thus making youth issues added duties with minimal resources to support their implementation.

Uganda currently hosts nearly 1.5 million refugees, the highest number of refugees hosted in a single country in Africa and the third highest in the world.[26] The refugee population is vulnerable and in need of support, as are host communities. Periodically environmental disasters such as landslides and floods displace people out of their homes and lead to loss of lives and livelihoods for an already vulnerable population. Poverty and vulnerability as illustrated in the above examples require decisive social protection measures that increase a person's ability to cope and enhance their social and economic well-being.

2.2 Developments in the Social Protection System

The right to social protection is embedded in Uganda's constitution, which provides for the rights of all people, including the poor and vulnerable, to access social services and have equal opportunities in the development process.[27] The National Development Plan (NDP) (2020/21-2024/25), whose goal is 'increased household incomes and improved quality of life of Ugandans,' lists increased access to social protection as one of the core development strategies and a key result area for human capital development.[28] The NDP acknowledges that low investment in social protection systems has impacted poverty and vulnerability levels across the entire population.

In 2015, the Government of Uganda launched a National Social Protection Policy (NSPP) and its attendant Programme Plan of Interventions (PPI). The policy aims to establish comprehensive social protection services to address risks and vulnerabilities. It specifies two broad categories of

[25] ibid
[26] UNHCR (2021). Available at: https://data2.unhcr.org/en/country/uga.
[27] MGLSD (2019). Social Protection Review Report. Government of Uganda. Kampala, Uganda.
[28] National Planning Authority (2020). Third National Development Plan. Government of Uganda. Kampala, Uganda.

services, namely; social security and social care and support. Social security consists of contributory schemes targeting the working population in both formal and informal sectors (Social insurance), and non-contributory transfers targeting vulnerable children, youth, women, PWDs and Older persons (Direct income transfers). The most prominent direct income support programme is the Senior Citizens Grant (SCG) under the Social Assistance Grant for Empowerment (SAGE) programme, which targets Older persons (80 years and above); as well as the recently concluded third Northern Uganda Social Action Fund (NUSAF3) whose grants for Livelihood Investment Support (LIS) targeted poor households with labour capacity including a direct income provision for labour constrained/ vulnerable groups in the war affected region of the greater north. As of 2019, an estimated 13% of Older persons (65 years and above) were being reached by the SCG, while NUSAF had 173,535 registered beneficiaries[29].

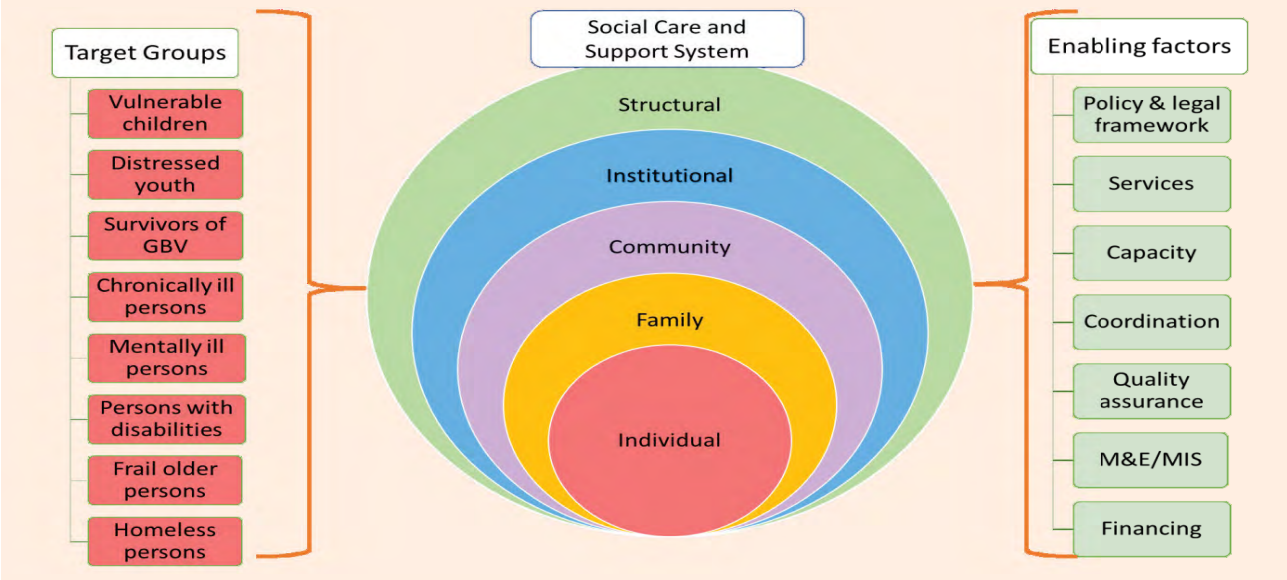
The social care and support services pillar of the social protection system covers care, support, protection, and empowerment of the most vulnerable individuals who are unable to fully care for and protect themselves.[30] Child protection, care of vulnerable groups and protection against violence are the broadly defined elements of the social care and support pillar.[31] Universal social services (in education, health, housing, employment, water and sanitation, livelihood support, emergency response and infrastructure development) are presented in the social protection strategy as complementary programmes that support the overall well-being of individuals.[32]

A review of the social protection sector undertaken in 2019,[33] pointed out lack of clarity and attention to the social care and support pillar of the social protection system, noting that while the Programme Plan of Intervention (PPI) identified this pillar, it lacked both clarity and an integrated system of delivery. Following the recommendation from the review, a conceptual model (Figure 1) for social care and support was developed as a precursor to developing an operational strategy for social care and support services. The conceptual model proposes a systems approach with interrelated elements including individuals, families, communities, institutions, and structures. Several enabling factors were identified for this system to function. One of these is the capacity of different actors and institutions, which is further elaborated in the conceptual model in terms of improved institutional capacity of the Government of Uganda, infrastructure, resources, workforce and improved capacity of families and communities to protect, care and support vulnerable individuals and groups.[34]

[29] MGLSD (2019). Social Protection Review Report. Government of Uganda. Kampala, Uganda.
[30] ibid
[31] ibid

[32] Ibid
[33] MGLSD (2020). Uganda Social Protection Review. Retrieved 24 May 2021 from: Social-Protection-Review-2019_PRINT-small.pdf (includeplatform.net)
[34] Nyeko, Nyirinkindi and Sammon (2018).

Figure 1: ***Conceptual model for social care and support in Uganda***



Source: MGLSD, 2019. Social protection review. Final report

The Social Care and Support Conceptual Model (2018) lists different categories of target groups including vulnerable children, distressed youth, survivors of Gender-Based Violence (GBV), chronically ill persons, mentally ill persons, PWDs, frail Older persons, and homeless persons. Within and beyond these categories are others that require social care and support including refugees and internally displaced persons, victims of human trafficking, prisoners, and their families, among others.

Uganda's social service system is neither welfarist nor purely market-oriented. Rather, it tends towards a social development orientation,[35] where the major focus is community empowerment. The government holds the mandate for meeting the needs of vulnerable individuals and groups, but in practice it is NGOs, FBOs, communities and families that shoulder a significant burden of provision of social care and support services. Service provision is multi-sectoral, spanning different MDAs including, health, education, justice, law and order sector (JLOS), internal affairs, and OPM, though the bulk of these services are coordinated by MGLSD. The social care and support sector is heavily dependent on international support, specifically on donors and international NGOs for programme design and implementation.[36] As a result, the interventions currently provided are not only donor and NGO-dependent but project-based. The result is a small geographical coverage and short-term interventions some of which are provided in piecemeal and lack community and government ownership for success and sustainability. As for the government's role in service provision, its lack of capacity at district/city and lower local levels means it cannot provide services that complement those offered by NGOs, as intended.[37] Coordination mechanisms do exist at the national, district/city and lower local government levels, but there are no strong mechanisms for government monitoring and quality control of the services provided by Civil Society Organisations (i.e. NGOs, FBOs and CBOs).

2.3 Defining the Social Service Workforce

2.3.1 General definitions

The term social service workforce (SSW) is relatively new in Uganda. The first policy document in which the term is used is the Uganda National Child Policy (2020), where the SSW is defined as, 'paid and unpaid, governmental and non-

[35] Oxford Policy Management (2013)

[36] MGLSD (2019). Functional Review of the Government Social Service Workforce in Relation to Child Protection. Government of Uganda. Kampala, Uganda.

[37] ibid

governmental professionals and paraprofessionals working to ensure the healthy development and well-being of children and families. The SSW focuses on 'preventive, responsive and promotive programmes that support families and children in our communities by alleviating poverty, reducing discrimination, facilitating access to needed services, promoting social justice, and preventing and responding to violence, abuse, exploitation, neglect and family separation. [38] The same policy document defines the social service system as a set of interventions, programmes and benefits that are provided by government, civil society and community actors to address both the social welfare and protection of vulnerable populations.[39]

From stakeholder consultations, it was clear that, in practice, the SSW is pragmatically defined based on the primary roles and functions it performs in serving vulnerable populations. In doing so, the current SSW in Uganda is made up of different cadres that work across different sectors at the micro, meso and macro (individual/family, community and national) levels to plan and deliver services to vulnerable populations. These populations cut across the life course and include, children and adolescents, youth, PWDs, and Older persons in all their diversities.

There is a general recognition of the critical role of the family, kinship, and other non-formal social networks in the provision of care and support to vulnerable groups and, therefore, the need to strengthen these systems to provide needed care to vulnerable individuals, groups of people and communities. The major misconception, according to some key informants, lies in the thinking that anybody can perform these roles which makes it difficult to set boundaries regarding the SSW. Hence, the perceived challenge does not necessarily lie in the normative definition but rather in qualifying and professionalising the social service worker by setting boundaries for practice. Due to the lack of a legal and regulatory strategy for social service workers, little attention has been paid to who is currently playing the role

"The current SSW in Uganda is made up of different cadres that work across different sectors at the micro, meso and macro (individual/family, community and national) levels to plan and deliver services to vulnerable populations."

of the social service worker and if they qualify to play these roles. Consequently, the boundaries on who constitutes the workforce and who qualifies to serve as a social service worker have remained fluid, with likely negative consequences on the quality of services. Furthermore, there is a tendency to narrow the SSW to those employed in the traditional government social development sector, yet this lack of clear conceptualisation makes the planning of interventions to strengthen the broader workforce particularly challenging.

2.3.2 Government social service workforce

Frontline social service workers in government mostly work within the decentralised system and they are more easily identified due to delineated titles and positions such as Probation and Social Welfare officers (PSWOs), Community Development Officers (CDOs), Rehabilitation Officers, Labour Officers, workers in remand homes, reception centres, rehabilitation and youth skilling centres. In other sectors such as health, there are delineated titles for social service workers, specifically medical social workers. Others are employed in the OPM especially in the refugee and emergency services, in internal affairs including the police child and family protection unit, in prisons as social workers, in other MDAs as Gender Officers and several other sectors including SCS for military personnel and their families.

2.3.3 Non-governmental social service workforce

Conversely, the SSW in the non-governmental sector have very diverse titles and descriptions due to the multiplicity of organisations that self-regulate their human resources. Some of the titles

[38] MGLSD (2020, pp xi). National Child Policy. Government of Uganda. Kampala, Uganda.
[39] Ibid

for example include, child protection officers, case managers, social workers, as well as other generic titles such as programme managers or programme officers. It is estimated that the NGO sector employs the highest number of practitioners in social service roles (70.5 per cent), which is the primary professional cadre in social care and support.[40] There is no generic SSW structure that covers all NGOs, FBOs and CBOs in the country, neither is there a system of capturing and reporting on SSW in the Civil Society (i.e. NGOs, FBOs and CBOs) sector. Hence, literature on the overall status and composition of the SSW is not available.

2.3.4 Paraprofessionals and community volunteers

Community-based paraprofessionals are recognised as critical SSW cadres especially in health and child care and protection focusing on orphans and other vulnerable children (OVC) programming, as well as in mental health and psychosocial support, palliative care, GBV and VAC programming. Parasocial workers (PSWs) are volunteers, who tend to be recruited from among religious and traditional leaders, facilitators of community-based support groups (e.g. mothers' clubs), community animators, other community leaders and peer champions. They can also include community health workers who have received issue-based training in case management and other topics if these relate to social care and support tasks.[41]

PSWs mostly work with implementing partners and are most visible in OVC programming, with roles ranging from identification, assessment, home visiting, provision of psychosocial support to referral and follow-up. The MGLSD estimates that over 11,000 trained PSW are working with different implementing partners across the country.[42] They work under the supervision of the CDO with the support of Parish Chiefs/Town Agents who under the new Parish Development Model (PDM) are expected to coordinate this community-level volunteer cadre across different sectors. While the social development sector has not formalised this community-level cadre, they do represent an essential link in fulfilling the government's mandate to ensure social protection at the community level. For this reason, a set of minimum competencies has now been established and awaits formal adoption by the government.[43]

In JLOS, most legal aid providers use paralegals (or community legal volunteers) to provide legal assistance to the poor, vulnerable and marginalised persons at the community level, even though their roles have not been formalised.[44]

2.4 Planning the SSW: Strengths, Challenges, and Gaps

2.4.1 Legal and policy strategy for the social service workforce

A normative strategy consists of laws, policies, regulations, and guidelines that aim to set standards for the SSW which determine their required qualifications and roles in the delivery of services. In addition, having laws and policies that clearly define and specify the mandate for the cadres of the SSW is crucial in assuring the development and sustainability of services.[45] It provides formal sanctions and mandates for the roles of the workforce. It also facilitates better clarification of roles, functions and competencies, and better planning, deployment, development, and appropriate support for the workforce. All this, in turn, contributes to more effective and higher-quality service delivery. International literature outlines specific elements that should be captured in laws and policies that are essential for strengthening the workforce (Figure 2).

[40] Twikirize et al, (2013).
[41] MGLSD (2017). Capacity Building of Community-Based Childcare Workers: A national training manual for para social workers (2nd Edition). Government of Uganda. Kampala, Uganda
[42] ibid
[43] MGLSD (2019). Uganda Para Social Workers (PSW) Competency Strategy—unpublished.
[44] LASPNET (2018). Paralegal Manual: Training manual for trainers of community-based Paralegals. Available at: http://www.laspnet.org/joomla-pages/i-e-c-materials/487-training-manual-of-trainers-for-community-based-paralegals-2018/file.
[45] GSSWA (2016b)

Figure 2: ***Effective elements included in laws and policies to strengthen the social service workforce***

a Definitions of the various categories of social service workers.
b Establishment of a governing, regulatory body.
c Clarity regarding registration and licensing requirements for social service workers.
d Standardised qualifications certified through national exams.
e Development and enforcement of a code of ethics and professional standards of practice.
f Professional development and continuing education opportunities.
g Clarity regarding working conditions, including rates of pay.
h Equal employment opportunity.

Source: GSSWA (2016) Review of the legislation and policies that support the social service workforce in low- and middle-income countries

While in some countries, the definitions, and roles of specific cadres of the SSW are contained in distinct SSW-specific legislation (such as the Social Service Professionals Act, (1978, amended 2019) in South Africa[46]), in Uganda, descriptions of the roles of social care and support workers (including social workers, counsellors, and psychologists) are embedded within various social protection-related laws, policies, regulations and guidelines. In most of these documents, however, there is no specific mention or full explanation of the role of the SSW. In Uganda, responsibilities for drafting the technical content of legislation, and for development and implementing regulations of social care and support are spread across MGLSD, the Ministry of Health (MoH), the Ministry of Education and Sports (MES) and the Ministry of Justice and Constitutional Affairs (MJCA).[47] The Ministry of Public Service (MoPS) provides human resources policies, systems, and guidelines for the government SSW.[48]

A scrutiny of the legal and policy strategy does, however, reveal a recent trend of attempting to start to embed the SSW within key government documents. The Ugandan Constitution (1995) as amended provides an overall legal strategy for the provision of quality services to vulnerable and marginalised populations, with specific mention made of services for 'the aged' (objective vii), child protection (Article17 (2) b; Schedule 5), persons with disabilities (Article 18 (2), and remedial social welfare programmes aimed at the alleviation of social distress (Schedule 6). These specific groups constitute a major target of the social development sector and the SCSS.

A few relevant legal and policy documents related to SCS refer to SSW elements, though in a somewhat cursory manner. Although the Social Protection Policy 2015 does not refer to specific SSW issues, its Programme Plan of Interventions lists SSW strengthening as a key priority, specifically mentioning social workers, PSWO, CDOs and Para Social Workers. Several other social protection laws and policies provide for SCSS but do not go into detail on how the workforce should be structured or deployed to deliver those services.

"In Uganda, descriptions of the roles of social care and support workers (including social workers, counsellors, and psychologists) are embedded within various social protection-related laws, policies, regulations and guidelines."

[46] https://www.sacssp.co.za/documents/AMENDED%20REGULATIONS%20FOR%20CHILD%20AND%20YOUTH%20CARE%20WORKERS%2013%20September%202019.pdf
[47] MGLSD (2019). Social Protection Sector Review. Government of Uganda. Kampala, Uganda.
[48] MGLSD (2019). Functional Review of the Government Social Service Workforce in Relation to Child Protection. Government of Uganda. Kampala, Uganda.

Table 1: *Legal and Policy Framework*

Laws and policies that refer to SSW	Other relevant laws and policies on SCS
• The Children (Amendment) Act 2016 • The National Child Policy 2020 • The Probation Act 1963 • Community Service Act 2000 • Children (Approved Home Rules) 2013 Statutory Instrument supplement no.30, S.I 52 • National Child Labour Policy 2006 • National Alternative Care Strategy 2012 • National HIV and AIDS Strategic Plan 2020/21–2024/25. • Social Protection Policy Programme Plan of Interventions • Local Government Act 1997 as amended • NGO Act 2016 • The National Policy on Elimination of GBV 2016	• Social Protection Policy 2015 • Prevention of Trafficking in Persons Act 2009 • Domestic Violence Act 2010 • Persons with Disability Act (Amended) 2020 • Pensions Act, Cap. 286 • Workers Compensation Act, Cap. 225 • Employment Act (No. 6) 2006 • Poor Persons Defence Act (Chapter 20) 1998 • Local Governments Act 1997 as amended. • National Policy for Older Persons 2009 • National Policy on Disability 2006 • Uganda Gender Policy 2007 • National Youth Policy 2016 • National Community Development Policy 2015

The Children (Amendment) Act 2016, the National Social Protection Policy PPI 2015 and the National Child Policy 2020 and its attendant PPI (2020/2021-2024/2025) make extensive reference to the SSW. The National Child Policy 2020 identifies SSW strengthening as a core strategy under systems strengthening and lists several interventions in line with this strategy including appropriate recruitment and deployment, pre-and in-service training, adequate remuneration, as well as strengthening the professional associations for mutual support and certification of the workforce.

2.4.2 Regulatory framework, including mechanisms for certification, licensing and registration of the SSW

Social service workforce regulation is motivated by the need for public safety, especially among the users of services provided by the SSW. It also serves as a mechanism for strengthening the workforce's effectiveness, contribution, and mandate through affirming that members of the SSW need to be trained and certified to meet the minimum requirements for ethical and professional practice. Besides, in many countries, social workers, and sometimes other specific professions within the social service workforce, are expected to obtain a license to practise, which needs to be periodically renewed, conditional on certain continuing professional development requirements having been met. Certified or licensed practitioners may also be expected to submit their details to a national register of practitioners in that role.

Complaints of professional misconduct or malpractice can be submitted to a regulatory council, which has the power to cancel a practitioner's license and registration temporarily or permanently. Such a system not only protects the public from malpractice or breaches of the profession's ethical code, but it also provides a clear public accountability system for the delivery of services and the conduct of the workers. All the above can substantially contribute to improvements in service delivery for the various population groups served by social workers.[49]

Despite the longstanding discourse in Uganda on the need for such a regulatory strategy, no concrete achievements have been realised so far. During consultations in developing this strategy, most stakeholders at the national and regional levels pointed out the lack of professional

[49] UNICEF (2021). Supporting Quality Assurance Systems and Case Management for the Social Service Workforce for Child Protection in Eastern and Southern Africa (draft): Global social service workforce alliance for UNICEF Regional Office for Eastern and Southern Africa.

regulation as a critical gap in strengthening the SSW. While several key sectors have service commissions (e.g., Health Service Commission, Education Service Commission) that provide leadership on workforce issues, the social development sector lacks such a mechanism. The current workforce, in its multiplicity of professional disciplines has limited guidance on appropriate practice, conduct and ethical parameters.

The National Child Policy 2020 also lists the accreditation and licensing of SSW professionals through the National Association of Social Workers (NASWU) as part of SSW strengthening strategies. Since 2010, several efforts have been made towards providing a regulatory strategy for the SSW, including the development of an Issues Paper by NASWU in 2015, and several discussions between NASWU and the MGLSD on the way forward. The 2018 National Symposium on Social Work hosted by the MGLSD in partnership with the Global Social Service Workforce Alliance and NASWU, as well as the International Federation of Social Workers Africa Region Conference (2019), further emphasised the need to fast-track the establishment of a council to regulate the SSW in the country and enforce the professional code of ethics/conduct.[50] Other professional bodies such as the Uganda Counselling Association also lack legally binding regulatory mechanisms, although, through their associations, they try to improvise mechanisms for regulating their cadres through promoting registration with the association and development of ethical codes.

The SSW lacks standards and mechanisms for regulation, especially in terms of who can be recruited as a social service worker and the specific standards and guidelines for practice. There exist Public Service Standing Orders and codes of conduct generic to all civil servants but there have not been specific guidelines developed for those working in the SCS sub-sector despite the sensitivities involved in working with vulnerable populations.

[50] NASWU (2018). A Report of the First National Symposium of Social Work in Uganda. Kampala, Uganda.

> *Under refugee response, for example, the government standing orders is what guides the ethics of government workers. There are no other written ethical guidelines from the government …Partner staff are guided by other guidelines given by UNHCR e.g., code of conduct (Government official).*

This lack of a regulatory mechanism or specific legislation to regulate social service professional practice undermines and limits the level of competence and consistency that the workforce can obtain. The establishment of a Professional SSW council was one of the envisaged key result areas for the Social Development Sector Plan (SDSP) (2015-2020), but one which has not been achieved nor reported upon.

2.4.3 Data on the social service workforce

Good quality data is important for planning and developing the workforce and projecting workforce support needs over the medium and long term. In Uganda, government bodies (i.e. MDAs) often have human resource information systems (HRIS) where major data are collected and updated regularly. The Ministry of Public Service (MoPS) hosts the overall human resource information system for public servants. However, there is currently no consolidated system for data collection on the SSW across the different sectors where the social service workers are employed. The lack of a consolidated SSW information system challenges human resource planning, monitoring and supervision as well as capacity development initiatives for the SSW. The government SSW is mostly deployed in local governments, but stakeholders consulted in the development of this strategy stated that the MGLSD, even though it is the line ministry with primary responsibility for social protection and thus the SSW, generally does not collect and use data on the workforce for strategic decision making. Furthermore, the SSW within the NGO

sector are not monitored by the government and there is little coordinated planning for the workforce, which compromises standards in social service delivery.

> *Planning of the Social Service Workforce is haphazard …we don't have control over who comes and works for a Civil Society and becomes part of the Social Service workforce… you find some people who did Business Administration for example, they are working as social workers directly involved in managing support to the vulnerable groups, their caregivers, their children and all that and that becomes a very big challenge. (Government official, national consultation workshop on SSW Strategy 2021)*

There has not yet been a comprehensive assessment of the appropriate ratios of different roles, functions and levels of social service workers to the number of populations served. It is, therefore, difficult to provide, with any confidence, exact numbers of additional staff establishment needed both at the centre and in local government. However, work to develop recommended ratios would be helpful. This would need to be not one ratio for the whole SSW, but different ratios for different roles and different types of districts, with different population sizes and level of needs. Even for districts with a similar population, the number of a certain type of staff required, and the amount of time needed to assess and manage a typical case, would vary depending on geography (more travel time and resources are needed to make home visits to a dispersed, rural population), availability of transport for SSW, the strength of existing community assets and other resources to support people in need (strength of extended family and community networks, education, justice and health services, NGOs, other community resources and assets), and the strength of the local economy and level of poverty and other forms of adversity (e.g. conflict, vulnerability to drought). There is hence, a need for an assessment of the level of unmet need among vulnerable and at-risk groups, which can then inform a review of job descriptions, specifications and schedules of work, and analysis of current workloads, to determine how many workers are needed by the relevant units to meet the assessed needs through effective delivery of SCSS.

2.4.4 Human resource planning gaps

The third National Development Plan (NDPIII) lists Human Capital Development as a priority. However, there are no attendant systematic plans and strategies for human resources at the national level. This extends to the social service workers and affects both the government and the non-governmental sectors. The different sectors conduct functional analyses based on their sectoral strategic plans and the staffing positions are approved by the Ministry of Public Service. Subsequently, staffing needs are indicated in the annual budget strategy papers but usually the recruitment is hindered by budget limitations. The Social Development Sector Plan SDSP (2015-2020) provided strategic direction on priority actions under the sector and identified the lack of adequate staffing and a competent workforce as an outstanding challenge but does not provide any clear projections on the SSW in terms of human resources. Most key informants pointed out a lack of systematic comprehensive planning for human resources as part of the national development planning machinery.

> *Apparently, we don't have the projections but with this strategy which we are coming up with, it will give us a clear direction, for example, the new emerging thing is how do we deal with vulnerability attributed to COVID, it's a new area, completely new, so that is a gap, and we need to make thorough projections (Government official, national consultations 2021)*

Due to weak governance structures in the local governments, there is limited evidence-based decision-making regarding human resource planning and management, and planning for how services must be delivered right from the grassroots. Consultations with stakeholders from different sectors revealed that focus within sectors tends to be on HR management rather than on overall strategic planning for human resources which should involve critical analysis of current gaps, forecasting future needs in terms of numbers and skill and engaging in succession planning for both the governmental and non-governmental sectors based on evidence of present and future service delivery requirements.

2.4.5 The SSW functional structure

The SSW is situated within different sectors in Uganda and works at the micro, meso, and macro levels to deliver preventative, promotive, and responsive services to individuals, families, and communities. Within the government sector, the MoPS is constitutionally mandated to oversee the appointment, promotion, and disciplinary control over all persons employed in a public office. It also sets standards and terms and conditions of service and guides other service commissions. In practice, operationalisation of the MoPS staffing mandate is undertaken in liaison with relevant government MDAs across different sectors and levels, including the district service commissions within each local government. The MGLSD, which has the primary mandate for SCSS, has the challenge of ensuring that the workforce spread across these different sectors is well coordinated.[51] It is worth noting that except for social development, other key sectors that deploy and regulate professionals allied to SCS have service commissions. These bodies, which recruit, deploy, and manage workforce efficiency from a professional perspective in partnership with the MoPS, include the Judicial Service Commission, Education Service Commission, and the Health Service Commission. In addition to the lack of a national workforce strategy, the absence of such a structure within the social development sector (as led by MGLSD) may constitute a limitation in terms of planning, developing, and supporting the SSW.

The SSW frontline workers operate within a decentralised structure. The Local Governments (LGs) recruit, appoint and oversee the performance of the workforce in their jurisdiction. Line Ministries such as the MGLSD have the role of supervision (understood as 'technical support supervision') and capacity building for the SSW within local governments.[52] The Community-Based Services Department (CBSD) at the district level hosts the key government SSW within the LGs. The department is headed by the District Community Development Officer (DCDO), who in turn reports to the Chief Administrative Officer (CAO) as the overall accounting officer in the district. The DCDO oversees the following functions:

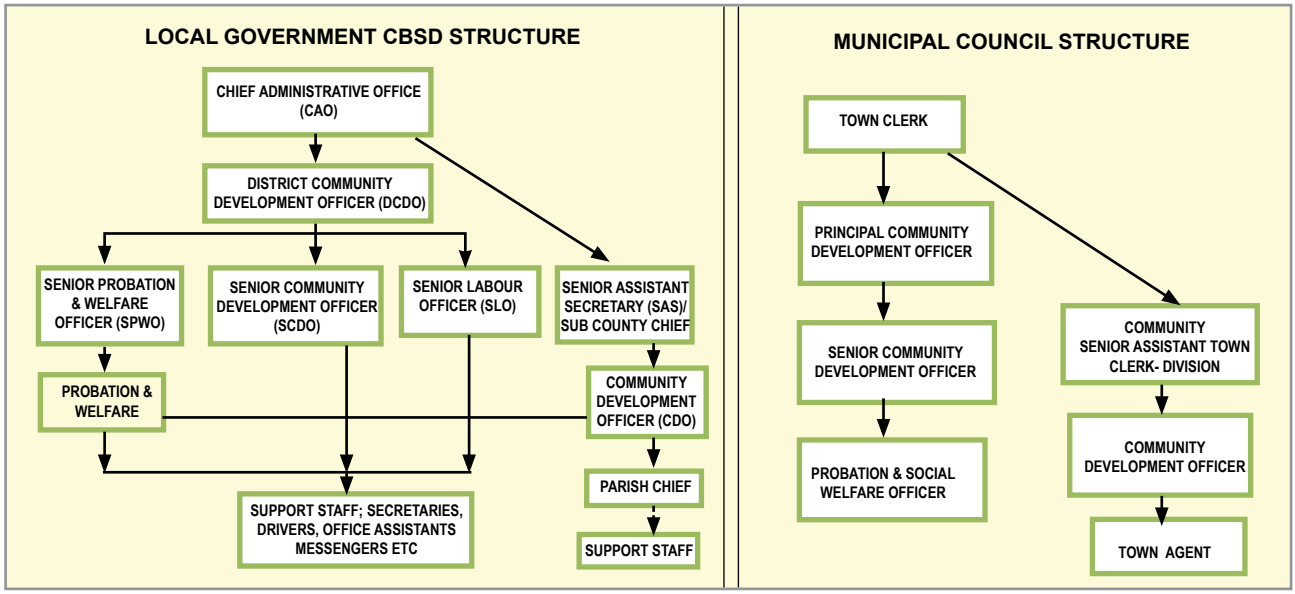
- Planning and Budgeting;
- Human resource (SSW) management;
- Advocacy and resource mobilisation;
- Supervision of children, youth, PWDs and older persons institutions (Government & Non-Government owned);
- Gender, family affairs, and culture issues;
- Community development;
- Youth and children affairs (including Probation & Social Welfare Services);
- Disability and the elderly;
- Labour, employment, and industrial relations;
- Coordination of partners.

The key functions in the CBSD are infused into one position of the Community Development Officer (CDO) at the Sub-county/Town council/Division level, and currently this is where the formal government structure for the SSW ends. Although there is the Parish Chief/Town Agent, the function here is more administrative and has little to do with social care and support or social protection in general. The only SSW at the community level are informal structures through a network of volunteers such as the para social workers. Figure 3 shows the current structure of the government SSW within the social development sector, from the district downwards.

[51] MGLSD (2015). Programme Plan of Interventions for Implementation of the Uganda National Social Protection Policy Fiscal Years. Government of Uganda. Kampala, Uganda.

[52] MGLSD (2015)

Figure 3 Functional structure of the local government SSW



The district local government and the municipal council are two distinct administrative structures within the decentralisation structure and, therefore, each has its own functional structure. Neither is subordinate to the other and although the SSW in these two structures collaborate, there are no direct lines of reporting and supervision linking the two administrative units.

The MGLSD through the Department of Literacy and Community development with support from the Department of Youth and Children Affairs provides stewardship/oversight support to CBSD staff to execute functional mandates guided by legal and policy framework. The scrapping of the Sub-county Assistant CDO that left only a CDO to execute the core functions of a CDO (Planning, Social mobilisation, Social protection, Gender mainstreaming, coordinating partners) created a greater workload for one officer. There is a need for MGSLD, MoPS and MoLG to jointly review the CBSD staff at District/City/Municipality, Sub-county/Town council/Division levels to clarify roles, relationships and reporting lines regarding executing functional mandates that cut across MDAs.

The child justice system, coordinated within the JLOS, is a key structure for the SSW. The child justice system encompasses multiple institutions and structures including the Local Councils and Local Council Courts, the Police Child and Family Protection Unit (CFPU) within the Uganda Police Force, the Directorate of Public Prosecution (DPP), the Criminal Investigations Directorate (CID), Courts of Judicature (Family and Children Court FCC) and the High Court, the MGLSD (Department of Youth and Children Affairs that oversees Remand Homes, Naguru Reception Centre and Kampiringisa National Rehabilitation Centre) and Ministry of Local Government that oversees Districts/Cities with a Probation & Welfare Office). Other JLOS-affiliated structures and institutions include, the Ministry of Internal Affairs (Prisons), Children (Approved Homes and Rehabilitation Centres owned by NGOs and FBOs), Fit Persons,[53] and the health system, NGOs and legal aid agencies working with children in contact with the law.[54] A major contention has been the dual accountability of the probation function, as fulfilled by PSWOs, to the MGLSD (and the district CBSD) on the one hand and to the judiciary on the other, with significant implications on caseloads and effective performance of the mandated roles of the PSWO.

[53] Fit Persons are persons of good standing in the community who are sometimes used in the child justice system to perform offer services to children in contact with the law. Their role is provided for in the Children Act 2016 (as amended.
See also. UNICEF (undated). Prosecuting Child-Related Cases in Uganda. A Handbook for Uganda Directorate of Public Prosecutions. Available at: https://www.unicef.org/uganda/media/1776/file/Prosecuting_child_related_cases_in_Uganda.pdf
[54] Directorate of Public Prosecution (undated) – Handbook on Prosecuting Children.

A recent government policy on the Parish Development Model[55] enhances the community-level SSW structure by institutionalising the position of the Parish Chief and the Parish Executive Committee whose functions include social services, as one of seven community development pillars. This new structure potentially increases responsibilities for the cadre of volunteers engaged in SCS delivery systems at the community level, including PSWs.

Gaps and challenges related to the SSW functional structure

The 2017 'Final Report of the Comprehensive Review and Restructuring of Government Ministries, Departments and Agencies'[56] and the 2019 Functional Review of the Government Social Service Workforce about child protection[57] outline several challenges regarding the SSW functional structure which were also reiterated in the regional and national consultations. For example:

a). Lack of clarity on the technical reporting and supervisory relationship between the local government and the MGLSD regarding the probation and social welfare function.

b). Challenges in the practical application of the probation function in both the JLOS and the MGLSD and in local government which has resulted in lack of adequate attention to the probation function within the local governments.

c). The fusion of community development and SCS functions at the district/city and sub-county /TC/Division levels which leads to marginalisation of the latter.

d). Limited opportunities for career progression within the SSW functional structure both in the social development sector as well as in other sectors such as health (medical and psychiatric social workers). This can demoralise the workforce, affect performance, and lead to high attrition levels.

Beyond the social development sector, SSW operating in other sectors also faces structural challenges. For example, the medical social work function is not well embedded in the Ministry of Health and only reflects as one of many functions under the Department of Finance and Administration in some hospitals including Mulago National Referral Hospital.

2.4.6 Staffing levels and gaps

According to the Social Development Sector Plan (2015-2020), filled positions at the MGLSD headquarters stood at 44 per cent of the 300 established positions and only 22.98 per cent out of 322 staff establishments in MGLSD institutions. This has been the status in the past 10 years, with the highest ever attained staffing level standing at 47 per cent in 2011/2012. The MoPS report on the restructuring of the government MDAs (2017) notes this serious gap in staffing, observing that the MGLSD lacks adequate staffing capacity to fulfil its broad mandates, as explained in some detail below.

At the local government level, the most universally identified gap in terms of structure and staff establishment for SSW was the CDO position at the sub-county/Town council/Division level. The whole mandate of the social development sector at the district/city/municipality is subsumed into a single position at the sub-county/division and Town council level, a point where services are supposed to be delivered. The CDO holds a wide range of roles and responsibilities across the different functions of local government, including as planner, gender specialist, elderly and disability specialist, birth and death registrar (more recently), child protection officer and NGO liaison officer, in addition to the primary role of 'uplifting the social and economic welfare of local communities.[58] Similar challenges exist at the district level where the single position of PSWO creates significant challenges for post holders in trying to fulfil the two distinct and demanding roles of Probation Officer and Social Welfare Officer.

[55] Ministry of Finance, Planning and Economic Development (undated).
[56] MoPS (2017).
[57] MGLSD (2019).
[58] MoPS (2011). Local Government Job Descriptions. Government of Uganda. Kampala, Uganda.

The Functional Review of the Government SSW about child protection (2019) reported that, within the CBSD, the lack of established positions sufficient to handle the workload is exacerbated by the fact that not all these positions are filled. It is also common for SSW staff at the district/city/municipality and sub-county/Town council and Division levels to serve in an acting capacity, taking on additional roles to those for which they were recruited, to cover for unfilled positions.[59] Some of the factors associated with such gaps in substantive appointment of the district SSW include inadequate qualifications and experience among applicants, lack of established posts including, for example, that of principal CDO at the district, delays in district service commission recruitment processes, and wage bill ceilings.[60]

Staffing gaps specific to SCS in other sectors have not been well documented. Medical social work staff are only provided at national and regional referral hospitals, which limits their deployment to only 18 government health facilities across the country, where the establishment provides for no more than 3 social workers per facility.

Different stakeholders participating in regional and national consultations observed that although no assessments have been done to establish actual ratios, the current expected workload at different service centres is untenable. The PSWOs and CDOs are especially affected but this challenge extends to other sectors where SSWs are deployed. For example, medical and psychiatric social work departments are often understaffed or sometimes not staffed at all especially in district hospitals. Butabika National Referral Mental Health Hospital has only four social workers who serve as clinical staff despite the standard guideline that each patient must be assessed and attached to a social worker. In refugee settings, low staffing levels were pointed out in consultations for this report, with case management roles and responsibilities largely falling to CSO actors who are the predominant workforce in the sector.

2.4.7 Recruitment and deployment practices

Mismatch between roles, recruitment and deployment practices: This relates to the issue of how jobs are described and what specifications are stated for qualifications and requirements to perform effectively in the respective roles. The current lack of clarity on qualifications requirements results in unsuitable applicants, while poor pay and conditions, or lack of job security, fail to attract a sufficiently high level of applicants for the level of responsibility of the post. Information from consultative meetings suggested that there has been a lack of a clear match between positions and specific professional qualifications and skill sets defined. Hence, one could be recruited into a PSWO position without any training in a relevant field such as social work. This not only affects government but also the CSOs due to lack of standard guidelines.

> *We are recruiting people who are not trained in that field, rehabilitation workers without training, CDOs without training in community development. There is distorted recruitment in terms of skills base required to do the work – they are not professionally tooled to do the work (CSO Key informant, national consultations 2021)*

The recruitment and deployment challenges are exacerbated by compromised transparency and accountability, which was a factor cited by many stakeholders consulted at both regional and national levels. Nepotism and other forms of corruption compromise standards for recruitment and lead to the deployment of persons who may not necessarily fit the roles against which they were recruited. This was most especially linked to the local governments' workforce.

[59] MGLSD (2019). Function Review of the Government Social Service Workforce in Relation to Child Protection. Government of Uganda. Kampala, Uganda

[60] 4Children (2018). Analysis of Staffing Levels for Districts/Local Governments of Uganda. Kampala, Uganda.

2.4.8 Job descriptions of the SSW in the local government

The current job descriptions of the SSW within the local government were last updated by the MoPS in 2016.[61] The job descriptions broadly provide the purpose, duties, and responsibilities of different positions. The Functional Review report (Functional Review of the Government SSW),[62] indicates that the roles and responsibilities outlined in the job descriptions reveal some strengths as well as some gaps. One of the strengths lies in clearly defined mandates and reporting relationships within the local governments.

Key gaps identified in the functional review about the CBSD cadres' job descriptions include the generic nature of qualifications and lack of specific knowledge and skills; and gaps in the specification of roles and functions for positions. For example, the low emphasis on social care and support functions in the DCDO job description and the lack of specification of child protection functions for CDOs. There is also lack of adequate attention to or misrepresentation of the probation function within the Senior PSWO job description. The only mentioned role is: "Attending court sessions to present investigation reports on matters regarding family social welfare, juvenile crime and child abuse," at the exclusion of other responsibilities associated with providing support to children in conflict and in contact with the law, including counselling, rehabilitation, resettlement, mediation, and follow-up supervision, that Senior PSWOs or PSWOs are expected to perform.

The PSWO Handbook (2018) developed by the MGLSD elaborates on the roles of PSWO, with more attention given to the non-statutory roles than to statutory probation roles and functions. The non-statutory roles mentioned include awareness raising and sensitisation of stakeholders on the rights and responsibilities of children; proposal writing and resource mobilisation; and training, mentoring, coaching, technical support supervision and monitoring other actors. These non-statutory roles are not reflected in the MoPS job descriptions for Local Government Officers.

There are inconsistencies in responsibilities regarding statutory and non-statutory roles, with virtually all SSW cadres in the CBSD taking on additional roles that go far beyond those provided for in the statutory instruments, and yet are not delineated in the public service job descriptions. These roles consulted stakeholders mentioned, are considered by management as falling under 'any other duties assigned…'

The gaps in job descriptions were shown to have an impact on job performance. For example, in 2018, an assessment of current job descriptions and qualifications, performance standards and supervision responsibilities of the different cadres of the SSW in the Department of Community-Based Services, undertaken by the Coordinating Comprehensive Care for Children (4Children) project revealed that only an estimated 40 per cent of PSWOs, in their actual job performance, were shown to comply with their main statutory roles. These are the roles that are delineated by current laws, as opposed to other non-specified duties which tend to be assigned on an ad-hoc basis, or which they do in response to requests and funding from NGOs. The Functional Review report (2019) recommended a thorough review and revision of the job descriptions.

"In 2018, an assessment of current job descriptions and qualifications, performance standards and supervision responsibilities of the different cadres of the SSW in the Department of Community-Based Services… revealed that only an estimated 40 per cent of PSWOs, in their actual job performance, were shown to comply with their main statutory roles."

2.4.9 Coordination

Coordination mechanisms do exist at the National, City/District, Municipality and Sub-county/ Town council and Division levels. National-level coordination is provided through Thematic Steering Committee structures that are inter-ministerial and multi-sectoral. A recent example

[61] MoPS (2017). Job descriptions and Specifications for Jobs in local governments. Government of Uganda. Kampala, Uganda.
[62] MGLSD (2019).

is the National Child Policy Steering Committee that draws membership from different sectors including higher education institutions. However, there are challenges in terms of logical information flow and meaningful participation of stakeholders. For example, SCSS programmed within the MoH may be provided without involving the MGLSD at the national or sub-national levels. Consultations conducted for this SSW strategy also revealed a challenge of infrequent coordination meetings partly due to inadequate logistics but also limited commitment and leadership.

At the district and lower local government level, similar multi-sectoral committees do exist including for example the District Chain-Linked Committee, to coordinate work on justice for children. At the district level, participants in consultations reported that the coordination challenges mostly relate to coordination between the government departments and the CSOs rather than intra-governmental coordination. It was indicated that the work of CSOs, which forms the bulk of SCSS, is partially or not integrated into most District Local Government plans and budgets. Conversely, government stakeholders argue that NGOs do not submit reports on their activities to the local governments but focus more on compliance with the information requirements of their donors. The CSOs register with the districts but there is little or no requirement for them to report on their workforce and they also do not always submit comprehensive reports on their activities. Although districts and sub-counties have existing structures for coordination including the district and sub-county Child Well-being Committees (formerly OVC committees) and GBV committees and other sub-structures, the challenge lies in the functionality of these structures since their funding is often tagged to project funding from development partners.

2.5 Developing the Social Service Workforce

Developing the workforce is primarily about training, professional education, continuing professional development and overall capacity building to ensure that the SSW has the requisite qualifications and competencies. Training and capacity building both involve pre-service training, including that offered through formal education institutions, and in-service training, including both specific task-related training and other capacity development initiatives offered to the SSW already on the job without formal training.

2.5.1 Pre-service training and education – programmes, institutions, standards

Since 1952 when the first social work training programme was launched at Nsamizi to offer social work training to the government SSW, the sector has grown exponentially, with currently 22 Universities offering a Bachelor of Social Work programme. A few offer a more specialised Bachelor's degree, such as Community-based rehabilitation (Kyambogo University), Social development (Nsamizi) or Child development (Uganda Christian University). There are five other tertiary-level education institutions (according to the National Council for Higher Education [NCHE] categorisation that offer diploma and certificate programmes in social work. Several public and private universities have Bachelor's and Master's level training in Counselling and Psychology. All these programmes are accredited by the NCHE.

Palliative care is another area of work for the SSW, and it has been integrated in the medical and nursing curricula of some schools in Uganda. There are courses at Certificate, Diploma, Degree and Master's level, offered at the Institute of Hospice and Palliative Care in Africa (IHPCA), Palliative Care Association of Uganda (PCAU), Mulago School of Nursing and Midwifery, Mildmay Uganda, and at Makerere University. The courses include those that extend beyond Medicine and Nursing, such as postgraduate Diplomas in palliative care for social workers, religious leaders and others in community roles.

Hence, Uganda has no shortage of training programmes in common SCS disciplines, especially generic social work degrees at the Bachelor's level. The main challenge, however, has been the diminishing quality of the training programmes, especially with the advent of privatisation of higher education, since high levels of enrollment tend to exceed the capacity of faculty and facilities

to offer quality education.[63] In 2019, the first-ever National Minimum Standards and Competency Strategy for Social Work Education and Training in Uganda were gazetted by the government.[64] These currently apply to all social work curriculum accreditations and renewals.

Outstanding gaps in pre-service training as reiterated in consultations include:

- Limited linkage between higher education institutions and practice agencies particularly in curriculum design and review which often leads to a mismatch between training programmes and practice needs.
- Field practice education for SSW programmes remains weak especially in terms of supervision and learning.
- Whilst the generic curriculum at the undergraduate level is beneficial to provide a basic level of competence for work in a range of settings, the sector is deprived of skilled workers in specialised fields including medical and psychiatric social work, palliative care, gerontological social work, and social work with PWDs, among others.
- There are very limited training opportunities at postgraduate level in social care professions. A Master of Social Work has only just been launched at Makerere University, in 2020, with the first cohort of students enrolled in 2021. Two other private universities have run such programmes at a limited scale. This leads to a low number of SCS professionals with advanced skills and knowledge, capable of providing strong, expert leadership in policy and programming as well as professional supervision and management of social service workers.

[63] 4Children (2019). Report on the Peer Review Workshop for Social Work Programmes in Uganda held on September 27th -28 2018, at Silver Springs Hotel, Kampala, Uganda.
[64] NCHE (2019). National Minimum Standards and a Competency Strategy for Training and Education of Social Workers in Uganda. Kampala, Uganda.

"The policy emphasises a demand-driven approach, where identified training needs of both the individual government officials and the government MDA determine the training agenda."

2.5.2 In-Service training and continuous professional development

The Ministry of Public Service has a public service training policy that guides capacity-building actions for all cadres in the public services. The policy emphasises a demand-driven approach, where identified training needs of both the individual government officials and the government MDA determine the training agenda.[65] The MGLSD developed a human resource development planning guide for Orphans and Other Vulnerable Children (OVC) in 2008 to guide the identification of capacity needs and appropriate training strategies. Furthermore, the Ministry of Local Government (MoLG) has a Capacity Building Policy (2013) for cadres working in local government. The expectation/requirement is for districts, cities, and municipalities, to develop integrated five-year capacity-building plans informed by human resource gaps (including for SSW).

Despite these plans and strategies, there remains a huge gap in in-service training especially of government SSW. A survey conducted by a USAID-funded Integrated Child and Youth Development Project (ICYD) (2021) among 250 PSWOs and CDOs indicated that only 29 per cent of these staff had received any form of in-service training in the past five years and most had not received formal orientation into their roles.[66] Originally, this induction was mandatory and was systematically arranged through government training institutes such as Nsamizi Training Institute of Social Development. Consultations with stakeholders revealed that capacity building now tends to be low priority and not funded, and even the meagre

[65] MOPS (2006).
[66] Twikirize J, Walakira EJ, and Nnyombi A (2021). Training Needs Assessment for Probation and Social Welfare Officers and Community Development Officers: Integrated child and youth development activity. Kampala, Uganda.

funds allocated for this purpose are often diverted to other activities. The mandatory pre-service orientation course for newly recruited staff notably CDOs that used to be offered at Nsamizi Training Institute of Social Development was dropped about 15 years ago due to lack of funding and has not been replaced. However, MDAs like MGLSD and LGs with support from partners supporting programmes/projects organise tailor-made short courses for selected SSW depending on knowledge and skill gaps to be addressed and availability of resources.

Professional associations and other CSOs sometimes organise Continuing Professional Development (CPD) initiatives on an issue of their interest. For example, there have been a lot of in-service training activities in the field of HIV and AIDS organised in partnership between government and development partners.[67] However, as with other NGO-led initiatives, these initiatives may not always align with, or cover, all government plans, and priorities, or ensure that CPD is provided in the areas of the workforce where it is most needed.

2.5.3 Social service workforce qualifications and competences

Several studies have identified competency gaps among the SSW, even among those with the relevant academic qualifications.[68] Critical gaps highlighted in these studies include, for example, lack of critical knowledge of social work theory and practice, and the skills, and professional ethos necessary for practice in the SCSS sector.

Specific skills gaps include basic areas of case management; psychosocial counselling and guidance; assessment and report writing; communication and relationship building; advocacy, and resource mobilisation skills. Most SSW have not received adequate training in leadership and management which results in gaps in provision of professional supervision at different levels of the workforce (also known as 'technical supervision', or 'support supervision', to distinguish it from simple management oversight).

These capacity gaps have been shown to impair the quality of services and the performance of the SSW. For example, a systematic review of child protection case management data revealed gaps in case plan development, with only 30.2 per cent of the 995 children cases reviewed having a case plan on file as per the protocols set out in the Harmonised Case Management Standard Operating Procedures.[69]

2.6 Supporting the Social Service Workforce

2.6.1 Operational support systems: financial and logistical support, and provision of an adequate working environment

Operational support systems are required to translate mandates, obligations and commitments into concrete services. They include several elements such as adequate and timely release of funds, adequate and usable physical infrastructure, other logistics such as transport and office supplies, as well as appropriate remuneration and mechanisms for motivation. The entrenched bureaucratic work culture that consultations revealed permeates many areas of the SSW that also contribute to the level of SSW performance, inhibiting social service workers from (or failing to recognise and reward them for) community outreach, and from proactively assessing and addressing the needs of the most vulnerable, and often hard to reach, members of society.

Financing: Financing and logistical facilitation for SSW functions and roles in Uganda is provided through both public funding and development partners' budget support but is persistently inadequate to enable the SSW effectively fulfil their mandates in provision of SCS. Indeed, the overall social development sector is among the least funded of all sectors, receiving less than 1 per cent of the national budget in the FY2018/19, which was then further reduced to 0.6 per cent in 2019/20. This compares unfavourably to other

[67] UAC (2018). Uganda AIDS Country Progress report. Government of Uganda. Kampala, Uganda.
[68] See for example, the 2019 Functional review of the government social service workforce; ICYD/MGLSD (2021) Training Needs Assessment of CDOs and PSWOs, Twikirize et al (2013) and MGLSD/SOCY (2018).

[69] 4 Children (2020, p.12). Systematic Review of Child Protection Case Management Data in Selected Districts of Uganda.

budget allocations in the FY2019/2020: education 10.5%, health 8.9% and justice, law and order 5.5%.[70] This actual budget allocation for social development was also short (30%) of the 2 per cent of national budget which had been projected by MGLSD as needed in the Social Development Sector Plan (SDSP) (2015/2016 - 2019/2020). This inadequate budget allocation to the SDSP, which includes SCSS, manifests in service deficiencies at the district/city and lower local government levels and most SCS institutions. Consultations during the process of developing the SSW Operational Strategy found that the funding shortages extend to other government sectors employing the SSW, including the Ministries of Health, Education and Sports, and the Office of the Prime Minister responsible for services for refugees, although no thorough systematic assessments have been done to demonstrate the funding requirements and gaps specific to SCS and the SSW in the respective sectors.

A further consequence of inadequate public funding of social development, including SCS, is the over-reliance on donor funding to complement government budgets for provision of essential services. This affects how services are designed and delivered, as it is done in response to donor rather than government requirements. This in turn affects both the quality and nature of workforce performance. In local governments, for example, the Community-Based Services Department Staff (SSW) will often spend more time engaged in donor or CSO-supported projects than in their primary statutory roles because these externally supported projects are better funded.[71]

Work environment and limited logistical support: One of the key challenges for the SSW is the inadequate working environment and resources to provide services, including a lack of suitable offices and meeting space, office equipment, finance and vehicle/motorcycles for travel to local communities. These shortages are especially acute within local government and local service provider institutions. Most of the infrastructure, at districts, sub-counties and local institutions, is not only inadequate, in terms of office and meeting space, sometimes this is shared between different officers, with no dedicated space for meetings with clients, even though most of the cases handled do require private, comfortable, and child-friendly spaces. The MGLSD in its SDSP (2015-2020) noted the level of dilapidation and non-functional nature of buildings where SCSS are offered.[72] The Functional Review (2019), as well as a study conducted on case management practices by the 4Children project,[73] noted that most offices are not adequately equipped with basic infrastructure, to the extent that documents and files are sometimes piled up in open and easily accessible spaces such as under window seals. The USAID-ICYD (2021) study revealed that 37.6 per cent of CDOs have no private offices while 60 per cent lack access to computers. Consultations revealed that SSW rely heavily on personal resources such as their transport, computer or phone, to be able to assess, report on and follow up on cases.

> *How do I reach the point where I am going to provide a service? Many of them (my colleagues) end up hiring boda bodas especially at Sub-county level where we don't have motorcycles and even a bicycle. A CDO riding a bicycle is actually demoralising and demotivating. Transport is a very big issue (Government official, Eastern regional consultation workshop)*

The poor work environment coupled with low salaries accounts for high staff turnover because staff are attracted to other sectors where there are resources to facilitate their work but also, crucially, better remuneration. Low salaries, and a low level of remuneration in general (re-imbursement of expenses, holiday and ill-health treatment costs, pensions), present a challenge in retaining qualified SSW committed to performing their duties and responsibilities.

[70] UNICEF (2019). EPRC-UNICEF Budget (Policy brief no.2019/3P). The National Budget Strategy.
[71] MGLSD (2019).
[72] MGLSD (2015). Social Development Sector Plan. Government of Uganda. Kampala, Uganda
[73] 4Children (2019).

Most of the people in the social services are considered as volunteers and yet they are offering professional services. Even when they are highly qualified, social service workers are poorly paid based on public perception that anybody can do the social care and support roles (CSO key informant, national consultations for the SSW Strategy, 2021).

Since even the qualified professional SSW cadres are among the least well paid when compared with other professional occupations, it is not uncommon for them to divide their time between official and personal business engagements to 'make ends meet'.

Career mobility: The limited upward mobility for most SSW positions is a serious gap in the current structure with potential limitations on worker motivation and performance as well as retention. A Senior PSWO for example has limited opportunities to progress to the DCDO position since this requires that they should have served at a Principal level for three years in addition to having served for 8 years. The latter is only available in a few districts and municipalities which are also very few across the country. During consultations with regional stakeholders, it was revealed that before MoPS intervened to stop service transfer practice, CDOs opted to transfer their services on promotion to administrative positions such as Senior Assistant Secretary or Town Clerks while others up till now moved out of the government system into NGOs, due to lack of career mobility in the system.

Work culture: Positive aspects revolve around social service workers' motivation derived from social recognition, a passion for helping and engaging with children and families, positive work relationships, and positive feedback.[74] However, recent reviews have reiterated the laissez-faire work culture in most government institutions as negatively affecting service delivery, including SCSS. About the government bureaucracy in which the SSW operates, the MGLSD Functional Review (2019) described the work culture as 'one of mediocrity, with poor time management (as evidenced during the workshops), low levels of individual responsibility and accountability (for example, only 11 out of 23 districts submitted district information sheets that were requested beforehand), low levels of innovation and creativity, and rigid and complex rules that inform decision-making and action' (p. 46). Other characteristics noted from the literature review include; limited performance management, low accountability for results, limited sense of urgency and absenteeism. Such negative aspects of work culture become entrenched, lacking strong leadership and investment in the workforce at multiple levels.

2.6.2 Professional supervision

Professional supervision, also known as technical and/or support supervision is expected to occur at different levels between the officer and the immediate supervisor and is also expected to include specifically technical supervision from line ministry (as part of its core mandate) to the local government SSW who in turn should provide technical supervision to lower level local government staff.

There is confusion and a lack of optimisation in the structure of supervision, with line ministries such as MGLSD being mandated to provide technical support supervision to frontline SSW within local governments, even though administratively the workforce reports to the Chief Administrative Officers (CAOs). There is evidence of technical support supervision being provided by the MGLSD to the CBSD cadres, though this is not without challenges. The SDSP (2015) noted that limited financial and human resources at the centre make it difficult to carry out the mandated quarterly supervision visits to the district SSW. The MGLSD Functional Review[75] as well as consultations with stakeholders during the process of developing this strategy, revealed that as a result, the common

[74] MGLSD (2019). Functional Review of the Government Social Service Workforce in Relation to Child Protection. Government of Uganda. Kampala, Uganda.

[75] Ibid.

practice is for the MGLSD staff to visit districts with development partner-supported projects, as they receive logistical support from those partners to do so. This results in major gaps in ongoing mentoring and coaching, especially for SSW cadres such as PSWOs, who lack such direct technical supervision within the district structure.[76] The system also makes it difficult to account for the outcomes of the supervision that is provided, due to technicalities in reporting relationships between the line Ministries and the SSW within the local governments, as argued by several key informants from both government and CSOs during consultations on the SSW strategy. The line ministries, specifically MGLSD has not yet developed robust professional supervision guidelines to support this function.

> *A line Ministry like MGLSD has no power to demand anything from the local governments. While a CAO has the power to demand accountability and reporting from the district SSW, the MGLSD does not have such rights. So why would they (local SSW) report or share information (with MGLSD) if there are no consequences for not doing so? They are not employees of the Ministry so whatever requests for information or anything about the SSW, it is more of a gentleman's agreement (Government official).*
>
> *Decentralisation is another Catch-22 situation especially on the reporting channels, supervision, and technical support. For instance, the Probation and Welfare staff report to the districts and not to the line ministry (MGLSD). "How do you supervise, train, support or reprimand someone you do not manage or control? (CSO key informant)*

This 'gentleman's agreement', referred to above, has sometimes been translated into a mere formal understanding, through project-based MoUs where districts with running projects commit to certain conditions and expectations from the line Ministry. Other avenues to receive supervision rely on social service workers taking personal initiative to seek technical guidance through telephone calls and unstructured meetings.

The SSW in other sectors, outside social development, face similar challenges. For example, the SSW within medical settings have no definite structure for technical support supervision, beyond the managerial oversight provided by their immediate supervisor, due to the lack of a corresponding structure for technical support supervision at the MoH. Hence, although the MoH has an elaborate technical support supervision strategy and guidelines, with MoH Area Teams expected to offer supervision up to the lowest levels, these refer to medical rather than social care and support services within medical settings.[77]

Within the local government structure, there has been limited technical support supervision from the districts to the sub-county level, due to limited funds and human resources. This is the result of district-level SSW having heavy caseloads, lacking means of transport and receiving no specific budget allocations for the cost of supervision visits to the sub-county level.[78] Online supervision was said to occur, but it has not been adequately exploited and its merits and limits have not been analysed and mitigated.

Limited technical supervision is coupled with the challenge of an ineffectively managed performance management system that relies on periodic appraisals that do not necessarily feed into performance improvements. Some key informants attributed the negative experience of performance appraisal that workers report to limited application of rewards and sanctions, limited promotion or opportunities for transfer or personal development. Furthermore, districts/cities and lower levels of local government have a challenge of limited capacity to professionally appraise SSW as they are mostly not experts in the professional discipline and work practices of their supervisees.

[76] Ibid.

[77] MoH (2020). National Support Supervision Guidelines for Health Services. Government of Uganda. Kampala, Uganda.

[78] Ibid

2.6.3 Professional associations

A small number of professional bodies do exist for the core SSW in the country, most notably the National Association of Social Workers of Uganda (NASWU), Uganda Counselling Association (UCA) and the Palliative Care Association of Uganda (PCAU). NASWU is a registered entity that brings together qualified social workers with a minimum Bachelor's degree in Social Work. It has a current registered membership of over 7000 professionals across the country and 20 registered institutions, including both academic bodies and service providers.[79] The Association through its secretariat has several programmes including continuing professional development, development and orientation in ethical codes of conduct, student learning events, and provision of consultancy services. NASWU has been actively working with the MGLSD, MoH and development partners on several interventions in the SCSS as well as in direct policy advocacy at the national level. UCA operates as an NGO registered with the NGO board in 2004. UCA is not established by law as a regulatory body, but registers professional counsellors on a voluntary basis and its website branding presents it as the 'premier licensing body for professional counsellors in Uganda.' The PCAU similarly operates as an NGO and has been instrumental in steering palliative care programming in the country, with funding from development partners.

Gaps and challenges faced by professional associations include limited institutional and technical capacity for effective operations; limited engagement in advocacy activities for the SSW; lack of legal mandates to enforce ethical codes of conduct; lack of financial and logistical resources to undertake meaningful programming as well as lack of adequate numbers of full-time staff.

2.6.4 Paraprofessionals and community volunteers

The main challenges and gaps regarding the community-based SSW revolve around the lack of formal recognition and standardisation of these paraprofessionals. This leads to challenges in the management, coordination, remuneration, capacity building and retention of this workforce. Paraprofessionals within the social development sector often lack adequate supervision from the Sub-county/Town council and Division administration due to their limited human and financial capacity. The lack of a standard remuneration and professional development structure for PSWs tends to lead to fatigue, loss of motivation and high turnover, with PSWs showing allegiance to the 'highest bidder' in terms of the level of stipend, other work benefits and support offered by implementing partners.[80] This level of 'churn', as PSWs and other community-level volunteers move from one project or partner to the other, or drop out soon after being trained, compromises the overall quality and consistency of SCSS at the community level. There is also limited coordination among the SCS sectors regarding the deployment and involvement of community-level paraprofessionals. This increases the risk of role duplication and work overload for those community workers consistent in their roles.

"The lack of a standard remuneration and professional development structure for PSWs tends to lead to fatigue, loss of motivation and high turnover, with PSWs showing allegiance to the 'highest bidder' in terms of the level of stipend, other work benefits and support offered by implementing partners."

[79] NASWU (2020). Annual Report. Kampala, Uganda

[80] National Association of Social Workers (2017). Strengthening the Role of Para Social Workers in Uganda: A complementary rapid assessment. Draft report. Coordinating comprehensive care for children. Kampala, Uganda.

3 Overall strategic direction

3.1 Vision for the Strategy

A competent and adequately resourced social service workforce that is responsive to the needs and aspirations of the vulnerable population.

3.2 Overall Goal of the Strategy

To deliver quality preventive and responsive social care and support services to individuals, families, and communities for inclusive development.

3.3 Strategic Objectives

1 To strengthen policy-supported evidence-based human resource planning and management for the SSW.

2 To enhance the professional competence of the SSW.

3 Increase technical, logistical, and financial support that creates an enabling environment for social service workers to effectively perform their roles and functions in diverse settings while meeting quality assurance standards.

3.4 Guiding Principles of the Strategy

1. **Professionalism of the SSW:** Social service workers must be deployed in, and equipped for, recognised occupations and disciplines, with the required competencies (knowledge, skills and values) for the different roles and levels. Key attributes of professionalism include defined boundaries for who can practice as a social service worker, community recognition and sanction, performance management, accountability, ethical guidelines and codes of conduct, and a goal-oriented professional culture. Professionalism is expected of all social service workers in the conduct of their duties, characterised by competency-based practice, commitment to excellence, transparency and accountability.

2. **Competence:** Competence refers to a mix of knowledge, skills and values or professional attitudes that result in the demonstrable ability of a social service worker to perform their roles efficiently and effectively. Competency-based practice is an ethical obligation for all social service workers and therefore deliberate effort must be placed in developing specific competencies for practice in SCSS more generally.

3. **Needs-based:** Services should not be designed, funded and delivered purely based on resources currently available, top-down perspectives, bureaucratic convenience, the status quo or conventional practice. Instead, effective SCSS are designed, funded and delivered in a bottom-up way, driven by the needs identified at the local level, based on reliable evidence of assessed needs of all the relevant vulnerable individuals and groups across all types of community, ethnic groups and regions of the country.

4. **Rights-based:** A rights-based perspective is founded on the premise that every individual has inherent entitlements or rights by their being human. Social service workers must therefore seek to provide services in a manner that recognises and respects service users as rights holders rather than passive recipients of charity. A rights-based perspective places human dignity, social justice, equality, non-discrimination and inclusion at the fore of service provision.

5. **Gender equality:** Strengthening the workforce requires that all genders, including men and women, have equal access to resources, rights and opportunities, including access to employment and leadership. The SSW needs to ensure that the ideals of gender equality and equity are upheld and promoted and the exercise of their duties addresses the root causes and manifestations of gender inequality as a key element of vulnerability.

6. **Equity and inclusion:** Inclusion means that the social service system, including the planning, education and training, recruitment, and deployment, as well as the work environment and other aspects of supporting the SSW are accessible to individuals and groups that might otherwise be marginalised and left out, such as PWDs, ethnic, religious or political minorities.

7. **Evidence-based:** This means that the decisions on the SSW and the provision of services are based on reliable proof in the form of data and information. In most cases, this requires ongoing collection, analysis and use of relevant data.

8. **Contextually suitable:** Contextualisation of plans and interventions takes into account the local economic, social, cultural and political realities in order to promote relevancy and appropriateness of the decisions and actions taken at every stage of planning and delivering social services as well as strengthening the SSW.

9. **Sustainability:** The strategies and actions adopted for SSW strengthening need to be those that can stand the test of time in a changing environment considering the current and future needs of the sector as well as the resources available.

10. **Multi-sector and non-state sector partnership and coordination:** Effective provision of SCSS requires joint assessment, and coordinated systems for planning, referral, and case management, involving all relevant stakeholders - government MDAs, local governments and NGOs, engaging individuals and community groups to strengthen synergies and to maximise efficiency in planning and delivery of services.

11. **Participation:** This principle calls for the recognition of service users as partners rather than passive recipients. It therefore demands meaningful engagement and participation of service users and community members, including children and individuals of all ages and backgrounds, in all stages of problem-solving and decision-making.

"Key attributes of professionalism include defined boundaries for who can practice as a social service worker, community recognition and sanction, performance management, accountability, ethical guidelines and codes of conduct, and a goal-oriented professional culture."

4 Strategic interventions and actions

The SSW strategy recognises that social care and support services are delivered within a decentralised system of governance in which local governments oversee the implementation, coordination and monitoring of services – while different formal and informal actors from civil society, the community and extended family networks are relied upon for actual service delivery. **The social service workforce is therefore composed of formal and informal, governmental and non-governmental, professional, paraprofessional and volunteer cadres.** It is situated within different sectors and works at the micro, mezzo and macro levels to deliver preventative, promotive and response services to individuals, families and communities.

This strategy highlights planning, developing, and supporting or resourcing as the key pillars for strengthening the workforce. These elements are adapted from the Global Social Service Workforce Alliance's Social Service Workforce Strengthening Strategy,[81] which highlights that a well-planned, developed and supported workforce is essential in effective delivery of social services (including social care and support services).

a) ***Planning the workforce***

Social service workforce planning is an essential foundation for enabling the workforce to fulfil its legal mandate to meet the identified social care and support needs of different vulnerable groups. Planning also includes budgeting for the provision of necessary resources required for the development and management of the workforce.

b) ***Developing the social service workforce***

The developing component focuses on key areas of training and capacity building and must be well considered in the context of the identified needs, terms of availability, quantity, relevance and quality of the professional programmes, pre-and in-service training and ongoing capacity building programmes.

c) ***Supporting the social service workforce***

Irrespective of how well planned or developed the workforce is, it is important to continue facilitating and resourcing the workforce in terms of its work environment, effective supervision mechanisms and performance management, resources and logistics, and other strategies that ensure a highly motivated and productive workforce. Professional associations, in this respect, play an essential role in advancing the interests of the workforce, promoting professional identity and peer monitoring and support, and in enabling or advocating for provision of continuing professional development.

d) ***Defining the Workforce***

The National Child Policy (2020) provides the most comprehensive definition of the SSW in Uganda. The SSW focuses on preventative, responsive, and promotive programmes and interventions. These initiatives aim to support families and children by tackling poverty, reducing discrimination, ensuring access to essential services, promoting social justice, and addressing issues such as violence, abuse, exploitation, neglect, and family separation. Furthermore, the policy characterises the SSW as a collective effort involving governmental, civil society, and community actors, offering a range of interventions, programmes, and benefits to safeguard and support vulnerable populations.

"The social service workforce is therefore composed of formal and informal, governmental and non-governmental, professional, paraprofessional and volunteer cadres."

[81] https://www.socialserviceworkforce.org/sites/default/files/uploads/SSWS%20Strategy%20-%20Planning,%20Developing,%20Supporting%20-%20ENGLISH.pdf

In this strategy, the social service workforce is defined as an inclusive concept referring to a broad range of governmental and non-governmental, paid or unpaid, professionals and paraprofessionals who work with vulnerable children, youth, adults, Older persons, families and communities to ensure healthy development, protection and well-being and to promote positive social change and social stability.

Professional social service workers refer to those workers with at least a Bachelor's degree in a field directly related to social services, such as Social Work. Paraprofessionals, on the contrary, typically work next to or support the work of professional social service workers. In Uganda, the most common paraprofessionals in the field of social care and support are PSWs, who are trained to perform certain functions, especially at the community level, but are not always legally certified or licensed to practice as full professionals.

Social service workers in Uganda currently operate across the lifespan, addressing a wide range of needs and vulnerabilities at the micro (individuals and families), Mezzo (groups and communities) and Macro Levels (national/societal). These levels also influence the type of functions the SSW performs. They are engaged in direct service delivery through case management and institutional services but also perform macro-level functions in policy development, advocacy, programme design, research, education and training, and management and supervision of social services. Whilst the social development sector has the primary mandate for SCSS and therefore employs the highest majority of SSW, this workforce is spread across several other sectors spanning Health, Education, Justice, Law and Order, Security, Industry, and other development sectors.

This definition should be integrated in official government policy and legal documents and guide the training, recruitment, and deployment of social service workers across different sectors and levels.

Further to the definition, a competency strategy is required, to outline what it takes to be a social service worker in terms of qualifications and competencies, to fulfil the roles and functions at each level of the social service system.

The subsequent sections highlight the key strategic actions to strengthen the SSW in Uganda.

1. Planning the Social Service Workforce

Strategic Objective One: *To strengthen policy-supported, evidence-based human resource planning and management for the SSW.*

Planning the workforce begins with a clear conceptualisation of who constitutes the SSW in Uganda. The normative framework including laws, policies and regulations that define and frame the roles, functions and qualifications of the workforce need to be in place and appropriate to serve as an anchor for quality service delivery. Planning also needs to be informed by evidence, and this calls for a system for ongoing data collection on different aspects of the SSW including assessment of needs of the different target populations, monitoring and evaluation of services currently provided, current ratios of worker to population, and average caseloads, the current match between workforce capacity (both in numbers deployed and competences) and the assessed service needs, and future projections for ratios and human resource capacity required.

Evidence-based planning needs a strong Human Resource Information System that is harmonised to collect data across different sectors, levels, and functions of the structure of service delivery. Uganda's decentralised system of service delivery makes it particularly important to assess SSW performance at the community level where frontline service delivery, in particular, preventive services and first-line response services are concentrated.

The priority actions in planning the SSW is the assessment of service needs, and the human

resource capacity required to provide those services, will be priority starting points for planning. This will be followed by detailed planning of the SSW functions, including relevant job descriptions for those functions, and the recruitment, training and support necessary to perform the functions. All the above then needs to be pulled together and deployed under a well-functioning, inter-agency coordination system.

The Parish Development Model[82] recognises the need to fully integrate grassroots actors in the overall government system to improve service delivery. It also recognises the role of the MGLSD to ensure a well-planned, competent, and adequately supported workforce that effectively delivers essential services to all vulnerable individuals, as well as being inclusive of the various institutions and structures through which services are designed and delivered.

Strategic Interventions

1.1 Fast Tracking that the Definition, Mandates, Roles, and Qualifications of the SSW are Adequately Embedded and Supported through Enabling Laws, Policies, Regulations, and Guidelines

Strategic Actions

1.1.1 Draft and propose national legislation which defines the SSW and its constituent roles and functions in Uganda.

1.1.2 Review relevant laws, policies, and other legal instruments about SCS services to ensure that they stipulate the definition, mandates, and functions of the SSW.

1.2 Establishing a System for Ongoing Data Collection and Management for Decision Making

Strategic Actions

1.2.1 Conduct a comprehensive population-based assessment of social care and support needs to inform the distribution of appropriate services, deployment of the SSW, SSW to population ratios and setting an optimal caseload per worker.

1.2.2 Develop and institutionalise a central Information Management System for collecting and continuously updating data on the SSW across different service areas including the non-governmental SSW.

1.2.3 Conduct a comprehensive mapping of the status of the SSW including their roles and functions, qualifications, capacity, numbers per category, and caseloads to inform planning and projections on future needs.

1.2.4 Integrate SSW data as a substantive module in national surveys conducted by the Uganda Bureau of Statistics.

1.2.5 Develop and implement a strategy for coordinating and supporting the non-state SSW.

1.3 Streamlining the Structure of the SSW to Enhance Roles, Relationships, and Technical Supervision

Strategic Actions

1.3.1 Establish a robust mechanism to provide continuous systematic technical support and supportive supervision to local governments, supported by clear guidelines, regulations, and sufficient funding.

1.3.2 Based on the findings of the SSW mapping, revise the SSW structure at the district level to ensure adequate resourcing for both probation and social welfare functions, while also segregating the two roles.

1.3.3 Review the functions of the DCDO to ensure social care and support services have equal priority as community development.

1.3.4 Work towards having a distinctive position for social care and support at the district level, preferably with a head at the position of a Principal Officer to allow for more specialised supervision and support, and increase the visibility of social care and support in plans, budgets, and resource allocations.

[82] MFPED (undated). Ministerial Statement on the Parish Development Model.

1.3.5 Review the SSW structure at the lower local government level to increase the staffing levels for CDOs to at least two positions, to allow for segregation of roles between overall community development, and social care and support services.

1.3.6 Embed the social care and support function at the community level, in a clear government role, such as para social workers and Parish Chief, by including some social work tasks, ensuring these tasks and skills are reflected in their recruitment and training.

1.3.7 Consider domiciling all the SSW (including those falling outside Social Development sector) as common cadre under the Ministry responsible for social development, to ensure effective technical support, supportive supervision, professional development and career growth.

1.4 Revising Job Descriptions and Work Schedules to Align to the Social Care and Support Strategy

Strategic Actions

1.4.1 Review and revise job descriptions of the SSW in social care and support functions to align with statutory provisions and current assessed needs in the country.

1.4.2 Develop guidance and support on comprehensive schedules of work for SSW roles based on revised job descriptions.

1.5 Formalising the Role, Functions, and Engagement of Parasocial Workers

Strategic Actions

i. Update and formally adopt the draft 'Guidelines for the Engagement of Parasocial Workers[83] to expand their scope of work into broad-based SCS.

ii. Institutionalise the role of PSWs as a clear government position.

[83] MGLSD (2019). Guidelines for the Engagement of Para Social Workers. Draft. Government of Uganda. Kampala, Uganda.

1.6 Strengthening Recruitment and Deployment Standards

Strategic Actions

1.6.1 Assess the current labour market for social care and support jobs in the public, private and CSOs, to identify opportunities for increased recruitment.

1.6.2 Assess and document best practices in Uganda and the region in increasing recruitment to a similar profession on a national scale.

1.6.3 Launch a campaign to raise awareness of developments in the field of social care and support to spotlight key career opportunities.

1.6.4 Develop attractive recruitment packages including links to university courses, scholarships, internships, mentorships, and other support during the first two years of practice.

1.7 Strengthening and Standardise ongoing Coordination both Horizontal and Vertical

Strategic Actions

1.7.1 Revitalise the existing government joint planning and coordination mechanisms for stakeholders of social care and support to improve information flow between the key service areas at national and local government levels.

1.7.2 Integrate SSW in refugee services and humanitarian action into the mainstream social care and support planning and coordination strategies.

1.7.3 Enhance the capacities of the NGO monitoring committee to effectively oversee the activities of the NGO sector, to align the NGO sector and SSW to government priorities.

1.7.4 Standardise NGO reporting requirements within the social care and support system strategy.

1.7.5 Harmonise and operationalise the various planning and coordination mechanisms at the national and local government level to avoid duplication and increase effective participation and implementation.

2. Developing the Workforce

Strategic Objective Two: *To enhance the professional competence of the social service workforce.*

To develop the workforce, appropriate education and training is essential. Therefore, there must be a deliberate plan to work with training institutions to collaboratively develop appropriate curricula that meet the needs and demands of the social care sector, ensuring that effective pedagogy is adopted. Both pre-service and in-service training, along with ongoing professional development, are essential components of this intervention.

Strategic Interventions

2.1 Strengthening the Relevance and Quality of Professional Education Programmes

Strategic Actions

2.1.1 Support tertiary institutions to apply minimum standards in competency-based social work education and other training programmes for social service workers.

2.1.2 Support collaborative curriculum review processes that bring together different stakeholders including academics, policymakers, practitioners, and service users.

2.1.3 Enhance field practice education through a collaborative arrangement between higher education institutions and practice agencies to ensure appropriate and relevant student placements and quality supervised fieldwork.

2.1.4 Institute a platform through which training institutions, practice agencies and policymakers meet regularly to exchange information, experiences, and ideas on the social service workforce strengthening.

2.2 Strengthening Induction and Pre-service Training

Strategic Actions

2.2.1 Develop and implement a comprehensive capacity development plan based on a needs assessment of the social care and support environment.

2.2.2 Implement mandatory induction and orientation programmes and periodic tailor-made refresher training for all SSW in different sectors and levels.

2.2.3 Scale up mentorship programmes for fresh graduates in social care and support-related programmes.

2.3 Strengthening In-service Training and Continuing Professional Development

Strategic Actions

2.3.1 Develop and implement a strategy for continuing professional development for the SSW.

2.3.2 Specify national minimum standards and guidelines for SSW continuing professional development as well as mechanisms for accreditation of CPD programmes.

2.3.3 Develop and institute national competency strategies for different cadres of the SSW per sector.

2.3.4 Conduct periodic participatory assessments of the capacity and training needs of the workforce in specific sectors.

3. Resourcing and Regulating the Social Service Workforce

Strategic Objective Three: *To Increase technical, logistical, and financial support that creates an enabling environment for social service workers to effectively perform their roles*

Ensuring that the workforce is adequately supported to perform its functions will require maximum attention and commitment to improving the work environment in general. This includes

ensuring that there is adequate infrastructure such as office space, equipment (i.e. computers, communication equipment and access to internet) as well as adequate logistical support especially means of transport and support aid where necessary. Strengthening Support Supervision and Performance management at all levels of the social service system will be a key intervention. To ensure retention of qualified and skilled staff, it's crucial to address the underlying causes of the current high attrition rates including career progression, remuneration and other sources of motivation. Professional associations for social service workers need to be supported, strengthened, and leveraged to promote peer support mentorship and continuous professional development.

Strategic Intervention

3.1 Developing and Implementing a National System for Regulation of the SSW, to Ensure Quality Standards Including Registration and Licensing of its Members.

Strategic Actions

3.1.1 Develop legislation to provide for a regulatory strategy for the social service workforce; including licensing, registration and certification of social service workers, as well as accreditation of training institutions and professional education courses.

3.1.2 Develop and strengthen an ongoing system for professional quality assurance via certification, licensing, registration, and accreditation.

3.1.3 Develop minimum quality standards for SSW practice.

3.1.4 In the short term, constitute an interim national social service workforce steering committee hosted by the MGLSD to serve as a mechanism for licensing social service workers while the law on regulation is under formulation.

3.1.5 Support the National Association of Social Workers of Uganda (NASWU) to widen its mandate to cover other social service workers.

3.2 Strengthening Supervision and Mentorship

Strategic Actions

3.2.1 Develop supervision guidelines containing principles, standards, procedures, roles, and tools.

3.2.2 Develop and implement a leadership development programme to build the capacity of supervisors in leadership and support supervision, and to create a robust pipeline of future supervisors.

3.2.3 Allocate adequate resources in the budget to enable technical support supervision at all levels in addition to regular supervision from line managers.

3.2.4 Scale up the MGLSD mentorship programme for the SSW and linkages with professional associations such as NASWU.

3.3 Establishing a Performance Management Mechanism

Strategic Actions

3.3.1 Adapt a performance management system that builds on the MoPS Staff Performance Appraisal Guidelines for Managers and Staff (2007) and is aligned to revised job descriptions, including objectives and key performance indicators (KPIs), for the main SSW roles.

3.3.2 Provide training on performance management and supervision to all members of the SSW in managerial roles, emphasising the difference between these functions and why both are essential.

3.3.3 In orientation for social service workers, as well as training of their managers, emphasise the importance of the whole performance management cycle, from setting objectives and KPIs to monitoring and analysing performance, to use of performance monitoring data to inform both staff appraisal and driving overall improvement of the performance of the overall SSW.

3.4 Setting Up and Implementing a National M&ESystem for Measuring Performance of the Entire Workforce

Strategic Actions

1.1.1 Develop a monitoring and evaluation system and plan at the national to track performance, and evaluate impact, to generate management information for policy, strategic, and operational decision-making.

1.1.2 Provide for a strong reporting and feedback mechanism in the M&E System for all stakeholders in the social care and support system.

3.5 Promoting and Facilitating Career Progression

Strategic Actions

3.5.1 Review the functional structure of the local government SSW to create a progressive pathway with career steps and achievement markers.

3.5.2 Define a career pathway for PSWs – through a system of recognising their growth through CPD points and opening opportunities for further training and incorporation into the professional workforce.

3.6 Strengthening Retention of the Government SSW

Strategic Actions

3.6.1 Develop clear job descriptions for each position.

3.6.2 Set and implement caseload sizes and work volume expectations.

3.6.4 Develop a reliable and predictable system of support for work-related travel and communication needs.

3.6.5 Develop a policy and interventions to address work-life balance and include stress management skills as part of the induction and ongoing training.

3.6.6 Develop a participatory process whereby workers can safely discuss work-related challenges.

3.7 Improving Funding for the Workforce

Strategic Actions

3.7.1 Develop and implement a resource mobilisation strategy targeting multiple funding streams, to tap into non-state financing and attract non-financial resources.

3.7.2 Lobby for increased funding to the social development sector to at least 2 per cent of the national budget and commit specific funding to SSW strengthening for social care and support.

3.8 Strengthening Professional Associations

Strategic Actions

3.8.1 Support professional associations to build their membership and institutional capacity.

3.8.2 Support legislation that identifies various professions and minimum qualifications to serve as SSW and mandates and authorises professional associations to jointly develop and enforce a code of ethical principles and conduct for the SSW.

3.9 Strengthening Advocacy to Improve Public Recognition, Regulation of the SSW and to Attract Resources

Strategic Actions

3.9.1 Develop and implement a national advocacy and communication strategy for SCS and the SSW.

3.9.2 Regularly collect and analyse vulnerability data indicating the need for SCSS with potential data sources as VAC studies, DHS surveys, social protection, and disability databases.

3.9.3 Implement a public campaign that dignifies and puts a 'human face' on both SCSS workers and service users.

4Children and SOCY (2018). Strengthening Human Resources and Financing for Child Care and Protection Services. Issues Paper.

4Children (2018a). Analysis of Staffing Levels for Districts/Local Governments of Uganda. Kampala, Uganda.

4Children (2018b). Revised Report on Assessment of the Current Job Descriptions, Performance Standards and Supervision Responsibilities as well as a Desk Review of the PSWO Manual/Handbook in Relation to Child Protection. Kampala, Uganda

4Children (2019). Systematic Review of Child Protection Case Management Data in Selected Districts of Uganda, September-November 2019. Coordinating Comprehensive Care for Children. Catholic Relief Services. Kampala, Uganda.

4Children (2020). Systematic Review of Child Protection Case Management Data in Selected Districts of Uganda, April-June 2020. Coordinating Comprehensive Care for Children. Catholic Relief Services. Kampala, Uganda.

Bilson, A, Nyeko, J, Baskott, J and Raymen, C (2013). Developing Social Care and Support Services in Uganda: A Literature Review of International Experience in Implementing Social Care and Support Services: Considerations for the Ugandan Context. Oxford Policy Management.

Directorate of Public Prosecution (undated) – Handbook on prosecuting children.

Global Social Service Workforce Alliance (GSSWA) (2016a). The State of the Social Service Workforce. A Review of Five Years of Workforce Strengthening. Washington DC.

References

GSSWA (2016b). Review of the Legislation and Policies that Support the Social Service Workforce in Low - and Middle-Income Countries. http://www.socialserviceworkforce.org/resources/review-legislation-and-policies-support-social-service-workforce-low-and-middle-income

GSSWA (2017) 'Para Professionals in the Social Service Workforce: Guiding Principles, Functions and Competencies', Global Social Service Workforce Alliance, (2nd Edition). https://www.socialserviceworkforce.org/resources/para-professionals-social-service-workforce-guiding-principles-functions-and-0

GSSWA (2019). Global Social Service Workforce Alliance www.socialserviceworkforce.org/social-service-workforce.

GSSWA (2020) Guidance Manual on Strengthening Supervision for the Social Service Workforce http://socialserviceworkforce.org/resources/guidance-manual-strengthening-supervision-social-service-workforce.

GSSWA (2021). Supporting Quality Assurance Systems and Case Management for the Social Service Workforce for Child Protection in Eastern and Southern Africa (draft). UNICEF Regional Office for Eastern and Southern Africa.

IFSW (2014). The International Federation of Social Workers. http://ifsw.org/get-involved/global-definition-of-social-work

Kigozi, et al. (2008). Situation Analysis of the Mental Health System in Uganda Phase 1, Country Report. Available at: https://www.who.int/mental_health/policy/development/Uganda%20Country%20Report.pdf. Accessed 21.05.2021.

LASPNET (2018). Paralegal Manual: Training Manual for Trainers of Community-Based Paralegals. Available at: http://www.laspnet.org/joomla-pages/i-e-c-materials/487-training-manual-of-trainers-for-community-based-paralegals-2018/file.

MGLSD (2015a). Social Development Sector Plan. Government of Uganda. Kampala, Uganda.

MGLSD (2015b). Programme Plan of Interventions for Implementation of the Uganda National Social Protection Policy. Government of Uganda. Kampala, Uganda.

MGLSD (2017). Capacity Building of Community-Based Childcare Workers: A National Training Manual for Para Social Workers (2nd Edition). Government of Uganda. Kampala, Uganda.

MGLSD/UBOS (2017). National Violence Against Children Survey. Government of Uganda/Uganda Bureau of Statistics. Kampala, Uganda.

MGLSD (2019a). Functional Review of the Government Social Service Workforce in Relation to Child Protection. Government of Uganda. Kampala, Uganda.

MGLSD (2019b). Guidelines for the Engagement of Para Social Workers. Draft. Government of Uganda. Kampala, Uganda.

MGLSD (2019c). Social Protection Review. Final report. Government of Uganda. Kampala, Uganda.

MGLSD (2019d). Uganda Para Social Workers (PSW) Competency Strategy—unpublished.

MGLSD (2020). Uganda National Child Policy. Government of Uganda. Kampala, Uganda.

MFPED (undated). Ministerial Statement on the Parish Development Model. Government of Uganda. Kampala, Uganda.

MoH (2020). National Support Supervision Guidelines for Health Services. Government of Uganda. Kampala, Uganda.

MoLG (2013). National Local Government Capacity Building Policy (NLGCBP). Government of Uganda. Kampala, Uganda. https://www.undp.org/content/dam/uganda/img/Research%20and%20Publications/Revised%20NLGCBP%20Policy%202012.pdf (accessed April 1, 2019).

MoLG (2014). Comprehensive Review of Local Governments. Synthesis Report on The Review and Restructuring of Local Government. Government of Uganda. Kampala, Uganda.

MoPS (2006). The Public Service Training Policy. Government of Uganda. Kampala, Uganda. http://workspace.unpan.org/sites/internet/Documents/Uganda%20Training%20policy.pdf (accessed May 1, 2021).

MoPS (2017a). Job Descriptions and Specifications for Jobs in Local Governments, 2016. Government of Uganda. Kampala, Uganda.

MoPS (2017b). A Final Report on Comprehensive Review and Restructuring of Government Ministries, Departments and Agencies (MDAS). Directorate of Management Services. Government of Uganda. Kampala, Uganda. Available at: https://www.publicservice.go.ug/media/resources/REPORT%20ON%20COMPREHENSIVE%20REVIEW%20AND%20RESTRUCTURING%20OF%20GOVERNMENT%20MINISTRIES%202016.pdf (accessed April 1, 2019).

NASWU (2018). A Report of the First National Symposium of Social Work in Uganda. Kampala, Uganda.

NASWU (2020). Annual report. Kampala, Uganda.

NASWU (2017). Strengthening the Role of Para Social Workers in Uganda. Kampala, Uganda.

National Planning Authority (2020). Third National Development Plan. Government of Uganda. Kampala, Uganda.

Nyeko, J., Nyirinkindi, L., and Sammon, C. (2018). Development of a Conceptual Model for Uganda's Social Care and Support System. Draft Final Report. Submitted to Ministry of Gender, Labour and Social Development. Kampala, Uganda.

Palliative Care Association of Uganda (undated). Joint Civil Society Report on Palliative Care in Uganda. Submission to the United Nations Universal Periodic Review (UPR) of Uganda second cycle, (twenty sixth session) of the UPR human rights council.

Twikirize, J. M., Asingwire, N., Lubanga, R., Omona, J. and Kafuko, A. (2013). *The Role of Social Work in Poverty Reduction and the Realisation of Millennium Development Goals in Uganda.* Fountain Publishers. Kampala, Uganda

Twikirize J, Walakira E.J., and Nnyombi, A. (2021). Training Needs Assessment for Probation and Social Welfare Officers and Community Development Officers. Integrated Child and Youth Development Activity. Kampala, Uganda.

UAC (2020). National HIV/AIDS Strategic Plan. Government of Uganda. Kampala, Uganda.

UAC (2018). Uganda AIDS Country Progress report. Government of Uganda. Kampala, Uganda

UBOS (2016). National Housing and Population Census, 2014. Main Report. Government of Uganda. Kampala, Uganda.

UBOS (2016). Statistical Abstract 2019. Government of Uganda. Kampala, Uganda.

UBOS (2020). Statistical Abstract. Government of Uganda.Kampala, Uganda.

NCHE (2019). National Minimum Standards and a Competency Strategy for Training and Education of Social Workers in Uganda. Kampala, Uganda.

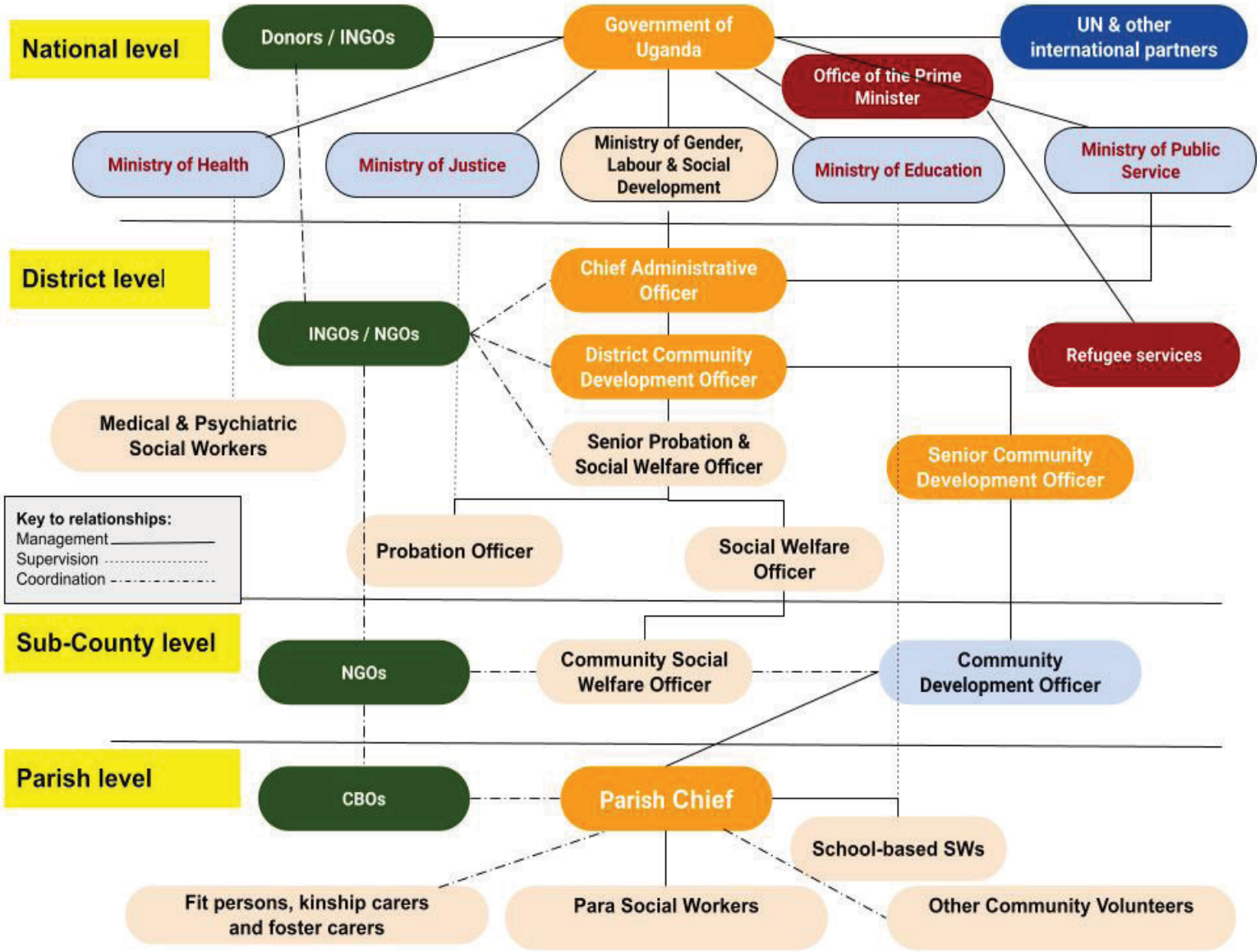
UNICEF (undated). Prosecuting Child-Related Cases in Uganda. A Handbook for Uganda Directorate of Public Prosecutions. Available at: https://www.unicef.org/uganda/media/1776/file/Prosecuting_child_related_cases_in_Uganda.pdf

UNICEF (2019). EPRC-UNICEF Budget Brief no.2019/3P. The National Budget Strategy.

UNICEF (2020). Going Beyond Monetary Poverty. Uganda's multidimensional poverty profile. Available at: https://www.unicef.org/esa/media/6146/file/UNICEF-Uganda-Multi-dimensional-child-poverty-2020.pdf

UNHCR (2021). Available at: https://data2.unhcr.org/en/country/uga.

Annex 1: Indicative Functional Structure of the Social Service Workforce



Annex 2: Social Service Workforce Strengthening Strategy: Detailed Action Plan

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
1. Planning and Managing the SSW						
Strategic Objective 1	**To strengthen evidence-based human resource planning and management for the social service workforce**					
Strategic Intervention 1.1	**Ensure that the SSW's Definition, Mandates, Roles and Qualifications are Adequately Embedded and Supported through Enabling Laws, Policies, Regulations, and guidelines.**					
1.1.1	Draft and propose national legislation which clearly defines the social service workforce and its constituent roles and functions in Uganda	High	MGLSD	Cabinet, Parliament, MoJCA MoH. and Academia	Drafting, Consultation, and Approval	2024/25-2029/30
1.1.2	Review relevant laws, policies, and other legal instruments about social care and support services to ensure that they clearly stipulate the definition, mandates, and functions of the SSW.	High	MGLSD	Cabinet, Parliament, MoJCA, MoH, and Academia	Drafting, Consultation, and Approval	2024/25-2029/30
1.2	**Establish a System for Ongoing Data Collection and Information Management for Decision-Making**					
1.2.1	Conduct a comprehensive population-based assessment of social care and support needs to inform the appropriate services, deployment of the SSW, SSW to population ratios, and set optimal caseloads per worker.	High	MGLSD	UBOS, and Development partners	Review of existing literature	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
1.2.2	Develop and institute a central Information Management System for collecting and continuously updating data on the SSW across different service areas, including the non-governmental SSW (including those from civil society and private sector organisations).	High	MGLSD	OPM, UBOS, Relevant MDAs, CSOs, and Private sector	Consultancy, Consultations, Drafting, and Approval	2024/25-2029/30
1.2.3	Conduct a comprehensive mapping of the status of the SSW including their roles and functions, qualifications, capacity, numbers per category, and caseloads to inform planning and projections based on future needs.	High	MoPS (This is a precursor to review of structures and JDs and Persons specification undertaken by the MoPS in accordance with Section 7 of the Public Service Act, however, in consultation with the Line Ministry and other sector players).	MGLSD, UBOS, NASWU, MoLG, and CSOs	Literatura review, Consultations, and Drafting	2024/25-2029/30
1.2.4	Integrate data collection on the SSW as a substantive module in national surveys conducted by the Uganda Bureau of Statistics.	Medium	MGLSD	UBOS	Drafting Issues, Lobbying, Consultations, and Integration	2024/25-2029/30
1.2.5	Develop a strategy to coordinate and support the non-state SSW and actors.	High	MGLSD	MoLG, and CSOs	Literature review, Drafting, Consultations, and Approval	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
1.3	**Streamline the Functional Structure of the SSW to Enhance Roles, Relationships and Technical Supervision**					
1.3.1	Institute a strong mechanism to ensure ongoing systematic technical support and supportive supervision of local government (guidelines, regulations, and funding).	High	MGLSD	MoPS, and MoLG	Drafting, Consultations, and Approval	2024/25-2029/30
1.3.2	Based on the results of the SSW mapping, review the SSW structure at the district level in such a way that both probation and social welfare functions are adequately resourced, and with the two roles segregated.	High	MoPS (Structures are developed and issued by the MoPS	MGLSD, and MoLG	Lobbying, Consultations, Drafting, and Approval	2024/25-2029/30
1.3.3	Review the mandate of the DCDO to ensure that social care and support services have equal priority to community development.	Medium	MoPS	MoLG, and MGLSD	Lobbying, Consultations, Drafting, and Approval	2024/25-2029/30
1.3.4	Work towards having a separate department for social care and support at the district level, with a substantive head to allow for more specialised supervision and support, increase the visibility of social care and support in plans, budgets, and resource allocations.	Medium	MoPS	MoLG, and MGLSD	Advocacy and Lobbying, Consultations, and Approval	2024/25-2029/30
1.3.5	Based on the results of the SSW mapping, review the SSW structure at the sub-county level to allow for the segregation of roles between overall community development, and social care and support services for vulnerable populations.	High	MoPS	MoLG, and MGLSD	Advocacy and Lobbying, Consultations, and Approval	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
1.3.6	Embed the social care and support function at the community level, in a clear government role, preferably that of Parish Chief, by including some social work tasks (identification of needs and making referrals) into their job description, and make sure these tasks and skills are reflected in their recruitment and training.	High	MoPS	MoLG, and MGLSD	Advocacy and Lobbying, Consultations, and Approval	2024/25-2029/30
1.3.7	Based on the results of the SSW mapping, consider whether all SSWs, including those falling outside social development (including medical social workers, school social workers etc) should be domiciled as a common cadre under the ministry responsible for social development, to ensure effective technical support, supportive supervision, professional development and career growth.	Medium	MoPS (this is done during functional/ structural review culminating in a review of JDs/PSs	MoPS, MoLG, MoH, MES, OPM, MIA, and LGs	Advocacy and Lobbying, Consultations, and Approval	2024/25-2029/30
1.4	**Revise Job Descriptions and Work Schedules to Align to the Social Care and Support Strategy**					
1.4.1	Review and issue Job Descriptions and Persons Specifications of the SSW in social care and support functions to align with statutory provisions and current assessed needs in the country.	High	MoPS	MGLSD, MoLG, MoJ-CAs, MIA, and LGs	Advocacy and Lobbying, Consultations, and Approval	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
1.4.2	Develop guidance and support for line managers to develop comprehensive schedules of work for SSW roles based on revised job descriptions that are well aligned with the operational strategy for the social care and support system.	High	CAOs/TCs (Schedules of duties are developed and issued by persons who asign duties/ supervisors. HRM is a decentralized function. Line Ministries may give policy guidance).	MGLSD, MoPS, MoLG, MoJCAs, MIA, and LGs	Drafting, Consultations, and Approval	2024/25-2029/30
1.5	**Formalise the Role, Functions and Engagement of Parasocial Workers**					
1.5.1	Update and formally adopt the parasocial workers engagement strategy to expand their scope of work into broad-based Social Care and Support and have them recognised and institutionalised in government like their health and legal equivalents (CHEWs and paralegals).	High	MoPS (The responsibility of evaluatiing if a function should be maintreamed or not lies with the MoPS. This will be done during review of the structures.	MoLG, MGLSD, MoJCAs, CSOs, LGs, and Development partners	Advocacy and Lobbying, Consultations, and Approval	2024/25-029/30
1.6	**Strengthen Recruitment and Deployment Standards**					
1.6.1	Assess the current labour market for social care and support jobs (public, private and NGO), to identify opportunities for increased recruitment.	Medium	MoPS	MGLSD, MoLG, MoH, MES, and Other MDAs.	Consultancy, Consultations, and Drafting	2024/25-2029/30
1.6.2	Assess and document best practices in Uganda and the region on increasing recruitment to a similar profession on a national scale.	Medium	MoPS	MGLSD, MoLG, MoH, MES, and Other MDAs.	Consultancy, and Consultations	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
1.6.3	Launch a campaign on social media and other media outlets to raise awareness of developments in the field of social care and support, and to spotlight key career opportunities, and the key importance of such roles.	High	MGLSD	MoPS, MoLG, MoH, MES, Other MDAs, LGs, and Media Houses	Information profiling, and Media Campaigns	2024/25-2029/30
1.6.4	Promote the development of attractive recruitment packages including links to university courses, scholarships, internships, mentorships, and other support during the first two years of practice.	High	MGLSD	MoPS, MoLG, MoH, MES, Other MDAs, Academia, and Private sector	Literature review, Consultations, Drafting, and Dissemination	2024/25-2029/30
1.7	**Ongoing Coordination (including between Government MDA, and between Government and Civil Society)**					
1.7.1	Revitalise the whole of government joint planning and coordination mechanisms for social care and support and improve information flow between the key service areas at national and sub-national levels.	High	MGLSD	MoPS, MoLG, MoH, MES, and Other MDAs.	Literature review, Advocacy and Lobbying, Consultations, Drafting, and Dissemination	2024/25-2029/30
1.7.2	Integrate refugee services and the SSW in humanitarian action into mainstream social care and support services as far as planning and coordination are concerned.	High	MGLSD	MoPS, MoLG, MoH, MES, Other MDAs, and LGs	Consultations, Drafting, and Dissemination	2024/25-2029/30
1.7.3	Strengthen the capacity of the NGO monitoring committee to do their work in monitoring the work of NGOs so that services can be better harmonised and coordinated with government social development priorities and the NGO SSW can be meaningfully linked with government counterparts.	High	MoLG	MoPS, MGLSD, MoH, MES, Other MDAs, and LGs	Profiling, Drafting, Consultations, Monitoring, and Linking	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
1.7.4	Standardise NGO reporting requirements within social care and support services to improve the transparency and accountability of their work, and to further facilitate coordination with government counterparts.	High	MGLSD	MoPS, MoLG, MoH, MES, Other MDAs, LGs, and NGOs	Consultations, Drafting, Dissemination, and Monitoring	2024/25-2029/30
1.7.5	Harmonise and operationalise the various planning and coordination mechanisms at the national and local government level to avoid duplication and increase effective participation and implementation.	High	MoLG	MoPS, MGLSD MoH, MES, MoJCAs, Other MDAs, and LGs	Consultations, Drafting, and Dissemination	2024/25-2029/30
2. Developing the Workforce						
Strategic Objective 2	**To enhance the professional competence of the social service workforce**					
Strategic Intervention 2.1	**Strengthen the Relevance and Quality of Professional Education Programmes**					
2.1.1	Support Tertiary Institutions to apply minimum standards in competency-based social work education and other training programmes for social service workers.	High	UNCHE	MGLSD, MES, Other MDAs, LGs, CDC, NASWU, Other Professional Associations, and Development partners	Profiling, Consultations, Curriculum Development, and Competence building	2024/25-2029/30
2.1.2	Strengthen collaborative curriculum review processes that bring together different stakeholders including academics, policymakers, practitioners, and service users.	High	UNCHE	MGLSD, MES, Other MDAs, NASWU, Other Professional Associations, and Development partners	Profiling, Consultations, and Coordination	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
2.1.3	Strengthen field practice education through a collaborative arrangement between Higher Education Institutions and practice agencies to ensure appropriate and relevant student placements and quality supervised fieldwork.	High	UNCHE	MGLSD, MES, Other MDAs, LGs, NASWU, Other Professional Associations, and Development partners	Profiling, Placement, and Field supervision	2024/25-2029/30
2.1.4	Institute a platform through which Training Institutions, practice agencies and policymakers meet regularly to exchange information, experiences, and ideas to strengthen social work education.	High	UNCHE	MGLSD, MES, Other MDAs, NASWU, Other Professional Associations, and Development partners	Profiling, Platform development, and Platform administration	2024/25-2029/30
2.2	**Strengthen Induction and Pre-service Training**					
2.2.1	Develop and implement a comprehensive capacity development plan based on the needs assessment of the social care and support environment.	High	MGLSD	MoPS, MoLG, MIA, JLOS, CSOs, NASWU, and Other professional associations	Capacity needs assessment, Capacity Development Plan, Consultations, and Capacity building	2024/25-2029/30
2.2.2	Implement mandatory induction and orientation programmes and periodic tailor-made refresher training for all SSWs in different sectors and levels.	High	MoPS (induction and inservice training is conducted by the MoPS in line with the Training Policy. This is done by the Civil Service College-Uganda.	MGLSD, MoPS, MoLG, Other MDAs, and Academic Institutions	Mobilisation, and Refresher training	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
2.2.3	Scale up mentorship programmes for fresh graduates in social care and support-related programmes.	High	MGLSD	MoPS, MoLG, Other MDAs, and Academia	Mobilisation, and Mentoring	2024/25-2029/30
2.3	**In-service Training and Continuous Professional Development**					
2.3.1	Develop and implement a strategy for continuing professional development for the social service workforce.	High	MGLSD	MoPS, MoLG, MIA, JLOS, CSOs, NASWU, Other professional associations, and Academia	Mobilisation, and Training	2024/25-2029/30
2.3.2	Specify national minimum standards and guidelines for SSW continuing professional development as well as mechanisms for accreditation of CPD programmes.	High	MGLSD	MoPS, MoLG, MIA, JLOS, CSOs, NASWU, and Other professional associations	Literature review, Mobilisation, Consultations, Drafting, and Dissemination	2024/25-2029/30
2.3.3	Develop and institute national competency strategys for different cadres of the SSW per sector.	High	MGLSD	MoPS, MoLG, MIA, JLOS, CSOs, NASWU, Other professional associations, and Academia	Cabinet, Parliament,and Local Government Councils	2024/25-2029/30
2.3.4	Conduct periodic participatory assessments of the capacity and training needs of the workforce in specific sectors.	High	MGLSD	MoPS, MoLG, MIA, JLOS, CSOs, NASWU, and Other professional associations	Needs assessment, Capacity building, Plan, Mobilisation, and Training	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
3. Resourcing and Regulating the Social Service Workforce						
Strategic Objective 3	**To increase technical, logistical, and financial support that creates an enabling environment for social service workers to effectively perform their roles and functions in diverse settings while meeting quality assurance standards**					
Strategic Intervention 3.1	**Develop and Implement a National System for Regulation of the SSW, to Ensure Quality Standards Including Registration and Licensing of its Members**					
3.1.1	Develop minimum quality standards for social service workforce practice.	High	MGLSD	MoPS, MoLG, MIA, JLOS, CSOs, NASWU, Other professional associations, and UNBS	Literature review, Consultations, Drafting, and Dissemination	2024/25-2029/30
3.1.2	Support the National Association of Social Workers of Uganda to raise awareness of the code of ethics and conduct for social workers, and to widen or add to its scope, in consultation with other stakeholders, to cover the wider social service workforce.	High	MGLSD	NASWU, Other professional associations, and Development partners	Consultations, Drafting, Awareness raising, and Dissemination	2024/25-2029/30
3.1.3	Develop legislation to provide for a regulatory strategy and mechanisms for social service professionals; for example, a national council for social service workers, mandated to license and register social service workers and accredit training and professional education courses to issue certified qualifications for the social service workforce.	High	MGLSD	MJCA, NASWU, Other professional associations, and Development partners	Consultations, Drafting, and Approval	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
3.1.4	Constitute an interim national social service workforce steering committee hosted by the MGLSD to serve as a mechanism for licensing social service workers including adding them to a temporary online register of social service workers in different roles and functions, to be transferred to the National Council for Social Service Workers when it is established.	High	MGLSD	MJCA, NASWU, Other professional associations, Development partners	Mobilization Drafting of TORs Meetings	2024/25-2029/30
3.1.5	Develop and strengthen an ongoing system for professional quality assurance via certification, licensing, registration, and accreditation.	High	MGLSD	NASWU, Other professional associations, Development partners, and Enforcement agencies	Mobilisations, Certification, and Enforcement	2024/25-2029/30
3.2	**Supervision and Mentorship**					
3.2.1	Develop supervision guidelines containing policy, procedures, roles, and tools.	High	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Drafting, Consultations, Dissemination, and Support Supervision	2024/25-2029/30
3.2.2	Develop and implement a leadership development programme to build the capacity of supervisors in leadership and support supervision, and to create a robust pipeline of future supervisors.	High	MoPS (MoPS has developed leadership development and capacity building strategy as required by the Training Police	MGLSD, , MoLG, Other MDAs, Development partners, and Academia	Drafting of modules, Consultations, Mobilisation, and Training	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
3.2.3	Allocate resources in the budget to enable technical support supervision visits from the line ministries to the districts.	High	MGLSD	MFPED, MoPS, MoLG, Other MDAs, Development partners, and Parliament	Advocacy and Lobbying, and Consultations	2024/25-2029/30
3.2.4	Scale up and target the MGLSD mentorship programme for the SSW with well-outlined expected outcomes in collaboration with professional associations such as NASWU.	High	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Mobilisation, Development of MoUs, and Training	2024/25-2029/30
3.3	**Performance Management**					
3.3.1	Adapt a performance management system that builds on the MoPS Staff Performance Appraisal Guidelines for Managers and Staff (2007) and is aligned to revised job descriptions, including objectives and KPIs, for the main SSW roles.	High	MpPS (Government implements a one PM system for the entire Public Service developed by the MoPS, the current one being the Balance Score Card)	MGLSD, MoLG, and Other MDAs	Consultations, Mobilisation, and Performance measurement	2024/25-2029/30
3.3.2	Provide training on performance management and supervision to all members of the SSW in managerial roles, emphasising the difference between these functions and why both are essential.	High	MoPS (Refer to 3.31) guidance, training etc to implement the PMS is done by the issuing authority while implementation is by the Vote)	MGLSD, MoLG, Other MDAs, and Development partners	Mobilisation, Training, and Performance management	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
3.3.3	In orientation for social service workers, as well as training of their managers, emphasise the importance of the whole performance management cycle, from setting objectives and KPIs to monitoring and analysing performance, the use of performance monitoring data to inform both staff appraisal and to drive overall improvement of the performance of the overall social service workforce.	High	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Mobilisation, Training, Orientation, and Performance measurement	2024/25-2029/30
3.4	**Set Up and Implement a Monitoring and Evaluation System at the Macro Level (Measuring Overall Workforce Performance)**					
3.4.1	Develop a monitoring and evaluation system and plan at the macro-level to track performance, and evaluate impact, to generate management information for policy, strategic, and operational decision-making.	High	MGLSD	MoPS, MoLG, Other MDAs, Development partners, and UBOS	Consultations, Drafting, Approval, and Monitoring & Evaluation	2024/25-2029/30
3.4.2	Ensure that the M&E system provides for strong reporting and feedback processes between the different levels of the social care and support system.	High	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Data collection & Analysis, and Feedback	2024/25-2029/30
3.5	**Promoting and Facilitating Career Progression**					
3.5.1	Review the functional structure of the local government SSW to create a progressive pathway with career steps and achievement markers.	High	MoPS (Explained above) Refer to Section 7 of the Public Service Act, 2008)	MGLSD, MoLG, Other MDAs, and Development partners	Consultations, Review, and Approval	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
3.5.2	Define a career pathway for PSWs – through a system of recognising their growth through CPD points and opening opportunities for further training and incorporation into the professional workforce.	High	-MoPS (Schemes of service are developed and issued by MoPS inconsultation with the Sector Ministry and other stakeholders)	MGLSD, MoLG, Other MDAs, and Development partners	Mobilisation, Consultations, and Mutual recognition	2024/25-2029/30
3.6	**Strengthen Retention of the Government SSW**					
3.6.1	Develop clear job descriptions for each position.	High	CAOs/ TCs (explained above)	MGLSD, MoLG, Other MDAs, and Development partners	Consultations, and Development of job descriptions	2024/25-2029/30
3.6.2	Set and implement caseload sizes and work volume expectations.	High	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Consultations, and Meetings	2024/25-2029/30
3.6.3	Develop a reliable and predictable system of support for work-related travel and communication needs.	High	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Consultations, Drafting, and Approval	2024/25-2029/30
3.6.4	Develop a policy to address work/ life balance and include stress management skills as part of the induction and ongoing training.	Medium	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Consultations, Drafting, Approval, and Training	2024/25-2029/30
3.6.6	Develop a participatory process whereby workers can safely discuss work-related challenges.	Medium	MGLSD	MoPS, MoLG, Other MDAs, and Development partners	Consultations, Drafting, and Meetings	2024/25-2029/30
3.7	**Improve Funding for the Workforce**					
3.7.1	Develop and implement a resource mobilisation strategy to tap into non-state financing and attract non-financial resources.	High	MGLSD	MFPED, MoPS, MoLG, Other MDAs, and Development partners	Consultations, Drafting, Approval, and Dissemination	2024/25-2029/30
3.7.2	Lobby for increased funding to the social development sector to at least 2% of the national budget and commit specific funding to SSW strengthening social care and support.	High	MGLSD	MFPED, MoPS, MoLG, Other MDAs, and Development partners	Advocacy and mobilisation, Awareness creation, and Mainstreaming	2024/25-2029/30

	Strategic Objectives, Interventions and Actions	Priority (High, Medium, Low)	Key MDA Responsible	Other Stakeholders Supporting Implementation	Resources Required	Timeline
3.8	**Strengthen Professional Associations**					
3.8.1	Support professional associations to build their membership and institutional capacity.	High	MGLSD	NASWU, Other professional associations, other MDAs, Development partners	Profiling Awareness creation Capacity building	2024/25-2029/30
3.8.2	Support legislation that identifies various professions and minimum qualifications to serve as SSW, mandates and authorizes professional associations to jointly develop and enforce a code of ethical principles and conduct for the social service workforce.	High	MGLSD	NASWU, Other professional associations, other MDAs, Development partners	Consultations Drafting Approval Enforcement	2024/25-2029/30
3.9	**Strengthen Advocacy to Improve Public Recognition and Sanction of the Role of SSW and to Attract Resources Strategic actions**					
3.9.1	Develop a national advocacy and communication strategy for social care and support and the role of the social service workforce.	High	MGLSD	NASWU, Other professional associations, Other MDAs, and Development partners	Consultations, Drafting, Approval, and Dissemination	2024/25-2029/30
3.9.2	Collect and analyse data indicating the need for social care and support, such as from VAC studies, DHS surveys, social protection, and disability databases.	High	MGLSD	UBOS, MoH, MES MIA, Other MDAs, Development, partners, NASWU, and Other professional associations	Data collection and analysis, and Data interpretation	2024/25-2029/30
3.9.3	Implement a public campaign that dignifies and puts a 'human face' on both SCSS workers and service users.	Medium	MGLSD	NASWU, and Other professional associations	Mobilisation, and Awareness creations	2024/25-2029/30

Annex 3: List of Individuals and Institutions Consulted

1. National Level Consultations

	NAME	JOB TITLE	Organisation/ Department
01	Beatrice Ayikoru	Principal Youth Officer	MGLSD, Y&CA
02	Barbra Aber	Technical Advisor - Protection & Care	CRS
03	Carolyn Maholo Sserunkuma	Department of Community and Disability Studies	Kyambogo University
04	Sophie Etzold	Child Protection Officer	UNHCR
05	Byekwaso Charles	Project Manager	UNAB
06	Agasha D. Birungi	Chief Executive Director	Hospice Africa Uganda
07	Samali T. Lutaaya	Head of Programmes	Impact and Innovations Development Centre (IIDC)
08	Olive Twikiriize	Restoring Family Links Officer	Disaster Risk Management and Response Directorate, Uganda Red Cross Society
09	C.S. Malaika Gabriella Ligami	Executive Director	JAFOA (Jehovah Alive for Old Age Organisation)
10	Emily Kemigisha	Country Representative	Help Age International
11	Priscilla Kisakye Mugume	Lobbying & Advocacy Officer	Uganda Society for Disabled Children (USDC)
12	Beatrice Okillan	Policy & Advocacy Coordinator	ESP, Ministry of Gender, Labour & Social Development
13	Muluwe Pius Emma	Braille Transcriber/Guide	UNAB
14	Damon Wamara	Programme Officer	Uganda Child Rights NGO Network
15	Owens Berunga	Safeguarding Manager	SOS Children's Villages Uganda
16	Doreen Birungi	IT Officer	
17	XXXX	Uganda National Association of the Blind	
18	Taban Edward	Country Director	TPO Uganda
20	John Orach	Member	National Council for Older Persons and National Network for Older Persons in Uganda (NNOPU)
21	Fred Ngabirano	Commissioner, Youth and Children Affairs	MGLSD
22	Joseph Mugisha Bitature	Social Protection and Advocacy Advisor	Help Age International
23	Samali Matovu	Executive Director	Katalemwa Cheshire Rehabilitation Centre
24	Kezia Mukasa	Programme Manager	Grandmother's Consortium

2. Refugee Child Protection Working Group Participants

	NAME	JOB TITLE	Organisation/ Department
25	Nikolaas Swyngedouw	Child Protection Officer	UNICEF
26	Lydia Bakumpe	Protection Advisor	Lutheran World Foundation
27	Lydia Murungi Tomusange	CP Focal person	AVSI Foundation
28	Atim Evelyn Lucy	Child Protection in Education Specialist	World Vision
29	Odipiyo Denis	Protection Associate (CP)	UNHCR
30	Michael Ojok Omara	Child Protection Coordinator	World Vision
31	Solomon Okech	Project Manager	Plan International
32	Charles Sevume	Child Protection Specialist	Save the Children

3. Institutional Level Participants

	Institution	
1	Ministry of Gender, Labour and Social Development 1. Director Social Protection 2. Commissioner, Youth and Children Affairs 3. Commissioner, Disability and Elderly 4. Commissioner, Community Development 5. Commissioner, Human Resources 6. Programme Manager, Alternative Care Unit	Individual Interviews
2	Ministry of Local Government - Commissioner LG Administration	Interview
3	Ministry of Public Service - Inspection	Interview
4	Office of the Prime Minister – Head of Refugee Department	Interview
5	Ministry of Internal Affairs - Community Service	Interview
6	Justice for Children Secretariat	Interview
7	Butabika National Mental Health Referral Hospital	Group discussion
8	Makerere University	Department of social work
9	Nsamizi Institute for Social Development	Programme Coordinator
10	National Association of Social Workers	Group discussion
11	Uganda Palliative Care Association	Group discussion
12	Uganda Counselling Association	Group discussion
13	USAID	Group discussion
14	Embassy of Ireland	Group discussion
15	UK AID	Group discussion
16	UNICEF	Group discussion
17	Uganda Youth Development Link (Director)	Interview

4. Regional Consultations

Central Region			
No.	**Name**	**Title**	**Districe**
01	Mugabi Fredrick	CDO	Lwamaggwa S/C (Rakai)
02	Namataka Florence	CD0	Kiziranfumbi SC (Kikuube)
03	Ssewayo Kiganda Sam	DCDO	Buikwe District Local Government
04	Clare Najjemba	Uganda Country Manager	Cotton on Foundation, Masaka
05	Dikweya Evarist Bahanga	Project Coordinator	REPSSI - Uganda
06	Mpuga Arthur	CDO	Kikuube District Local Government
07	Turinayo Erastus Alban	Ag. Programme Manager	World Vision, Buikwe Programme
08	Buyinza Simon	DCDO	Nakasongola District Local Government
09	Furaha		Kikuube District Local Government
10	Pascal Freeman	Programme Manager	World Vision, Buikwe
11	Sanyu Irene		Nakasongola District Local Government
12	Semaka Robert		Kikuube District Local Government
13	Hamfrey Robert		Kikuube District Local Government
14	Kisaka Constance	Magistrate	Kikuube District Local Government
15	Mutebi Mastullah	SCDO	Buikwe District Local Government
16	Bulega Milly	SCDO	Buikwe District Local Government
17	Nsamba Simon		
18	Kyejjusa John	DCDO	Wakiso District Local Government
19	Nakyazze Olivia Emilly	SCDO	Wakiso District Local Government
20	Lusiba Ivan		
21	Mukoza Henry	SCDO	Nakasongola District Local Government
22	Buyinza Julius	CDO	Nakasongola District Local Government
23	Migabe Mike	CDO	Nakasongola District Local Government
24	Semaganda Mathias	CDO	Nakasongola District Local Government
25	Sanyu Irene	SPSWO	Nakasongola District Local Government
26	Nabukeera Juliet	Senior LO	Nakasongola District Local Government
27	Paul Mayemba	Programme Manager	World Vision
28	Namuyomba Agnes	CDO	Nakasongola District Local Government
29	Kyagaba Rogers	CDO	Nakasongola District Local Government
30	Kasozi Fred	Senior Labour Officer	Rakai District Local Government
31	Lusiba Ivan	CS-PO	RACA - Rakai
32	Kalamagi Yakub Gowan		RACA - Rakai
33	Nsongeye Benon	CDO	Rakai District Local Government
34	Sendagi Joseph	SPSWO	Rakai District Local Government
35	Dikweya Evarist Bahanga	Project Coordinator	REPSSI - Rakai
Northern Region			
No.	**Name**	**Title**	**Districe**
1	Batanda Paul	CITY CLERK	Arua City
2	Drate Judith	PCDO	Arua City
3	Edema Geoffrey	SCDO	Arua City
4	Taliru Beatrice	CDO	Arua City
5	Anguyo Jimmy	CPFU	Arua City

6	Otim Moses	PHRO	
7	Okaka Geoffrey	CAO	Gulu District Local Government
8	Opiro Dickens Thomas	SPO	Gulu District Local Government
9	Onyango Richard	PCDO	Gulu District Local Government
10	Anena Jesica	SPSWO	Gulu District Local Government
11	Komakech Sam B. Ford	SCDO Sage	Gulu District Local Government
12	Ocen George	CDO	Gulu District Local Government
13	Hon. Luwar Teddy	PWDC - F	
14	Hon. Santa Oketta	OPC - F	
15	Musasizi Joseph	In-charge Remand Home	Gulu District Local Government
16	Ochira Thomas	CFPU	
17	Jane		NGO Forum
18	Olweny	Gender Desk	Gulu District Local Government
19	Charles	Programme Manager	World Vision, Gulu
20	Christine Turibamwe	Magistrate Grade 1	Gulu District Local Government
21	Evelyn Akello	Area Prog. Coordinator	World Vision, Omoro
22	Ocan Erick Stover		Gulu District Local Government
23	Awor Bernardette	Community Dev't Officer	Pakwach District Local Government
24	Olwor Patrick	Senior Community Dev't Officer	Pakwach District Local Government
25	Ocan Hellen Comfort	Community Dev't Officer	Pakwach District Local Government
26	Kimira Innocent	Community Dev't Officer	Pakwach District Local Government
27	Olangi Norbert	Community Dev't Officer	Pakwach District Local Government
28	Abyeto Stella	CAO	Pakwach District Local Government
29	Omito James	Human Resource Officer	Pakwach District Local Government
30	Opilo Christopher	Representative	District PWD Network
31	Akumu Christine	Chairperson	Pakwach Women Council
32	Abdulahi Wadriff	Youth Chairperson	Pakwach
33	Ongom Fredrick	Councillor	Older Persons Council, Pakwach
34	Howell Okello	Coordinator	Pakwach District NGO Forum
35	Olangi Nobert	Child Wellbeing Officer	
36	Acen Sarah	SPSWO	Dokolo District Local Government
37	Nam Emmanuel	CDO	Adok S/C Dokolo
38	Otim Moses	PHRO	Dokolo District Local Government
39	Odur Elvis	CDO	Adeknino S/C Dokolo
40	Palakak Bonny	HRO	Dokolo District Local Government
Western Region			
No.	**Name**	**Title**	**Districe**
1	Atusasiire	SPSWO	Isingiro District Local Government
2	Turibawe Silver	Senior Labour Officer	Isingiro District Local Government
3	Bamuhiiga Patrick	Chief Magistrate	Isingiro District Local Government
4	Zaina Namutebi	CDO	Isingiro District Local Government
5	Kajungu Clemmy	Medical S Worker	Isingiro District Local Government
6	Natukunda Enos	CDO	Isingiro District Local Government
7	Tukamushaba Christine	C/Person DWC	Isingiro District Local Government

8	Ndikumana Enock	Senior CDO	Kisoro District Local Government
9	Mahirwe Kellen	CDO	Kisoro District Local Government
10	Okworatuhe Alex	SPWO	Kisoro District Local Government
11	Mugisha Christopher	CDO	Kisoro District Local Government
12	Kampire Beatrice	CDO	Kisoro District Local Government
13	Nyiramugisha peace	CDO	Kisoro District Local Government
14	Kampire moirah	PWO	Kisoro District Local Government
15	Mbabazi Daina	CDO	Kisoro District Local Government
16	Ndikuyeze sawiya	CDO	Kisoro District Local Government
17	Gakuru Vision	Labour	Kisoro District Local Government
18	Uwamahoro Mollen	CDO	Kisoro District Local Government
19	Nkurikiye Paul	CDO	Kisoro District Local Government
20	Byaruhanga Arthur	DCDO	Mbarara District Local Government
21	Tumwine Steven	SCDO	Mbarara District Local Government
22	Mukankusi Annonciata	Labour Officer	Mbarara District Local Government
	Eastern Region	**Designation/Organisation**	
No.	**Name**	**Title**	**Districe**
1	Kigenyi Asif	SCDO	Luuka District Local Government
2	Janet Luwano	Labour Officer,	Luuka District Local Government
3	Juliet Kisakye	Community Development Officer,	Luuka District Local Government
4	Museene Michael	CDO	Luuka District Local Government
5	Mugimba Julius	CDO	Luuka District Local Government
6	Longok Michael	DCDO	Amudat District Local Government
7	Nyanga Ignatius	Community Development Officer	Amudat District Local Government
8	Kityo Obed	Social Welfare Officer	Amudat District Local Government
9	Chuwai Susan	Community Development Officer	Amudat District Local Government
10	Cheptoo Regina	Social Welfare Officer	Amudat District Local Government
11	Lotuw Pembee	SCDO	Amudat District Local Government
12	Ruto Emmanuel	CDO	Amudat District Local Government
13	Naisikwe Dorothy	CDO	Tororo District Local Government
14	Nekesa Harriet	Senior Labour Officer	Tororo District Local Government
15	Onyango Jerome	CDO	Tororo District Local Government
16	Edeke Godrey	CDO	Tororo District Local Government
17	Nyadoi Hellen Pegete	CDO	Tororo District Local Government
18	Naisikwe Dorothy	SCDO	Tororo District Local Government
19	Meresi Mutonyi	DCDO	Mbale District Local Government
20	Barbra Kibone	CDO Sub-county	Mbale District Local Government
	Social Care Consultants		
No.	**Name**	**Title**	**Districe**
1	Dr. Patrick Ilugot	Consultant	Socio-economic Data Centre
2	Ms. Laura Nyirikindi	Consultant	Socio-Economic Data Centre
3	Dr. Jolly Nyeko	Consultant	Socio-Economic Data Centre
4	Prof. Asingwire	Consultant	Socio-Economic Data Centre
5	Mr Ofungi	Consultant	Socio-Economic Data Centre

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04	Mr. Everest Tumwesigye	C/CD&L	MGLSD
05	Ms. Juliana Naumo	C/C&FA	MGLSD
06	Mr. Benard Mujuni	C/E&R	MGLSD
07	Ms. Annet Kabarungi	Coord GBV	MGLSD
08	Ms. Beatrice Ayikoru	PY/O	MGLSD
09	Mr. Stephen Kasaija	H/PMU	MGLSD
10	Ms. Lucy Otto	Principal Culture Officer	D/C&FA
11	Ms. Rose Aaca	SPSWO	D/Y&CA
12	Ms. Agnes Nampeera	Prin. Rehabilitation Officer	D/D&E
13	Mr. Franklin Maloba	Sen. Social Dev't Officer	E&R
14	Ms. Harriet Akello	Principal Literacy Officer	CD&L
15	Mr. Francis Katamba	A/C Planning	MGLSD
16	Mr Emmanuel Omene	Principal Economist	MGLSD
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20	Ms. Barbara Jane Abang	Senior State Attorney	MoJCA
21	Ms. Shifa Katutu Mpabaisi	Assistant Commissioner Social Re-integration	MoIA
22	Mr. Emmanuel Tugabire	A/C Inspection	MoLG
23	Mr Steven Bukulu	Sen. Human Resources Off	MoPS
24	Ms. Carolyne Maholo	Lecturer	Kyambogo University
24	H.W. Prossy Katushabe	Chief Magistrate	Judiciary
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