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semi - urban Tanzania

A Case Study of Alumni of the Institute of Social Work”

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## List of Abbreviations

<b>APPEAR</b>	Austrian Partnership Program in Higher Education and Research for Development
<b>BSW</b>	Bachelor in Social Work
<b>CSW</b>	Certificate in Social Work
<b>DSW</b>	Department of Social Welfare
<b>GBV</b>	Gender Based Violence
<b>IFSW</b>	International Federation of Social Workers
<b>ILO</b>	International Labor Organization
<b>ISW</b>	Institute of Social Work
<b>LAPF</b>	Local Authority Pension Fund
<b>MDGs</b>	Millennium Development Goals
<b>MOHSW</b>	Ministry of Health and Social Welfare
<b>MSW</b>	Master in Social Work
<b>MVC</b>	Most Vulnerable Children
<b>NHIF</b>	National Health Insurance or Community Health
<b>NSGRP II</b>	National Strategy for Growth and Reduction of Poverty II
<b>NHSWQISP</b>	National Health and Social Welfare Quality Assurance Strategic Plan
<b>NSPF</b>	National Social Protection Framework
<b>NSSF</b>	National Social Security Fund
<b>ODSW</b>	Ordinary Diploma in Social Work
<b>PGDSW</b>	Post Graduate Diploma in Social Work
<b>PROSOWO</b>	Promotion of Professional Social Work towards Social Development and Poverty Reduction in East Africa
<b>PPF</b>	Parastatal Pensions Fund

<b>PSPF</b>	Public Services Pensions Fund
<b>SSRA</b>	Social Security Regulatory Authority
<b>TASWO</b>	Tanzania Association of Social Workers
<b>UNDP</b>	United Nations Development Program
<b>URT</b>	The United Republic of Tanzania
<b>VAC</b>	Violence Against Children

## **Foreword**

Having graduated from the Bachelor Program in Social Work at the Carinthia University of Applied Sciences in 2011 and registered for the Master Program in Development Studies at the University of Vienna after another visit to East Africa in 2012, it was only a matter of time until I got to know about the research project of my former professor Dr. Helmut Spitzer and the Austrian Partnership Program in Higher Education and Research for Development (APPEAR) which under the title of “Promotion of Professional Social Work towards Social Development and Poverty Reduction in East Africa” or in short PROSOWO aimed at professionalizing social work in five East African partner countries. The fact that the results and outcome of the PROSOWO project had been presented in the final stage of my studies initiated my ambition to combine the current focus of my master program with my professional background as a social worker and the interest for East Africa. Due to an exchange semester in Tanzania at the Institute of Social Work in Dar es Salaam in 2010 I had already come to know the educational structures for social work in the country, which alleviated the organization of my research stay. As I had already visited Tanzania several times before, the concrete research planning merely took place on site. Additionally to my acquaintance regarding the country, I had applied for educational leave which enabled me to stay in Tanzania for at least 10 months. Due to organizational and infrastructural reasons, I made Dar es Salaam to my headquarter for the following months.

# 1 Introduction

Relating to the history of social work development in Africa which is dating back to colonial times, the thesis is based on the assumption that both current social work practice and social work education in East Africa are still to a great extent influenced by the replication of Western human service policies as well as Western concepts which have been criticized as being largely remedial, urban centered, limited in coverage and focused on individual casework and therefore being inappropriate to a non-western environment. (Midgley 1990, p. 279) In this context the objective of the master thesis is linked to the international discourse on the so called “indigenization or appropriation of social work” that is, especially in developing countries<sup>1</sup> facing colonial history, striving to promote the application of local strategies that are believed to be much more appropriate to address society’s needs (Twikirize 2014, p. 78).

As a joint initiative which aimed at promoting social work in East Africa towards social development and poverty reduction the PROSOWO I project, which has been conducted under auspices of the Austrian Partnership Program in Higher Education and Research for Development (APPEAR), among other East African countries also provided relevant data regarding social work practice in Tanzania. As far as the relation between skills acquired by Tanzanian social workers during academic training and their application in the field is concerned an obvious gap has been detected:

„Seventy five per cent...” of the 100 practitioners who were questioned “...had acquired skills in empowering, educating and linking their clients to relevant resources. Besides, 52 % indicated that they had sufficient skills on policy development. On the contrary, actual practice suggests that the majority of social work practitioners (55 % and 40 %, respectively) are involved in empowering target population and policy development to a „very slight extent” (Mabeyo et al. 2014, p. 71).

Taking into account the history of social work practice in East Africa and the gap between social work education and practice in Tanzania, it is the objective of the master thesis to continue research activities of the PROSOWO project and elaborate possible causes for the diverging realities of social work training and practice by investigating daily work approaches of social workers which they perceive as relevant in addressing social work clients’ needs. In

<sup>1</sup> The term developing country refers to a classification which together with its counterpart developed country has been used by the World Bank to cluster countries according to their economic prosperity and standards of living. Due to the growing inhomogeneity of country - specific economies, in 2016 the World Bank decided to replace these earlier nomenclatures with the description of four income groupings per region such as low, lower-middle, upper-middle, and high. Income is thereby measured using gross national income. (The World Bank 2016, n. p.) Due to the fact that scientific relevance sources of the present master thesis have still made use of the earlier terminology, the term developing country will also be used throughout the master thesis.

this context qualitative interviews with alumni and social work educators of the oldest institutionalized training institution in Tanzania, that is the Institute of Social Work (ISW) in Dar es Salaam, have been conducted. The research has been based on the following question:

**Which approaches are relevant for the daily work routine of alumni of the Institute of Social Work when working in semi – urban Tanzania?**

By illustrating social workers' experiences with approaches which they are using on a daily base, the thesis aims at investigating relevant social work approaches based on the perspective of social work practice.

The first part of the Master thesis gives an overview of the master thesis' contextual embedding. Beginning with an outline of the social and economic context in Tanzania, the development of social work in Tanzania, its historic roots as well as the current situation for social work training and practice have been traced. Closely connected to the history of social work practice in Africa is the discourse on “professional imperialism” (Midgley 1981) and the demand for an “appropriation of social work”, which are presented afterwards.

The second part deals with the research methodology and describes the research preparation, the methods which have been used during the procedure as well as the process of data validation. After giving a basic insight into the methodology of Grounded Theory and its implications for research practice, the research design, including the composition of the research sample, shall be elaborated. A personal reflection about the research process forms the closure of part two.

The third part of the thesis serves the elaboration of research results. It thereby starts with a portrayal of social problems which social work practitioners face when working in semi-urban Tanzania, before seeking to outline daily work approaches which professionals rate as relevant in order to address the problems mentioned. Whereas the relevance of social work approaches will be analyzed within the context of Tanzania and its socio – economic conditions, the request for appropriate social work interventions and knowledge in developing countries will be discussed on the basis of the gap between social work theory and practice.

The thesis ends with a Conclusion that compiles most relevant results of the research. A subsequent Outlook seeks to present questions that have remained unanswered throughout the research and can be matter of further research activities.

# **I. Research Context**

## **2 Tanzania – a socio - economic profile**

The following chapter seeks to present selected data in order to describe the social and economic situation in Tanzania.

Tanzania, one of the largest countries in Africa, is a union (formed in 1964) between the mainland (Tanganyika), and the Zanzibar Isles consisting of Unguja (also known as Zanzibar) and Pemba. Tanzania is predominantly rural and ranked among the world's poorest countries. (UNDP 2015a, n. p.) Tanzania is thereby characterized by both, low levels with regard to national income (GDP per capita income) and a low ranking in the Global Human Development Index (HDI) which has been published by the United Nations Development Program (UNDP) on a yearly basis (id. 2015b, p. xi). The HDI<sup>2</sup> measures the level of human development in a country, ranging from 0 for low human development to 1 for high human development and thereby focusses on life expectancy, education, as well as income indices. According to the UNDP's Global Human Development Report of 2015 Tanzania with an HDI score of 0.488 ranks at 159 out of 187 countries, which is why it has been classified as a low human development country. (id. 2015b) The correlation between regional per capita income and human development has become apparent when comparing human development between Tanzania's rural and urban / semi – urban regions such as Dar es Salaam, Arusha and Kilimanjaro which displayed slightly better results than other regions in the country (id. 2015a, p. xii). Although the United Nations Development Program (2015a, p. xii) has observed Tanzania to have made achievements with regard to sustained economic growth (6 % within the last decade) as well as democracy, improvements in the overall status of human development in Tanzania have been described as marginal.

### **Population**

In 2012 Tanzania had a population of 44.9 million whereby its population has been growing at a rate of 2.7 per cent annually, which is said to be high even by African standards. Relating to results of the 2012 Census the population of Tanzania will double in the next 26 years. With regard to the composition of Tanzania's population the census revealed that 44 per cent of the total population are below 15 years of age and only four per cent of the population are aged 65 years and above. This phenomenon can be seen as a result of high fertility and mortality rates. (URT 2014, p. 27)

<sup>2</sup> In the context of Tanzania mainland which is divided into 25 administrative regions the HDI resorts to official poverty estimates that come from periodic Household Budget Surveys of which the latest has been conducted in 2012 (UNDP 2015b, p. xi).

## **Economic activity**

As investigated by the 2012 Census 66 per cent of all private households in Tanzania were engaged in agricultural activities during the 2011 / 12 agricultural season, which leads to the conclusion that agriculture continues to be the main economic activity for the majority of Tanzanians. Even in urban areas, that are according to the National Socio - Economic Profile areas which are legally recognized as urban, agriculture was mentioned as an important source of income by 15 per cent of households visited. Whereas 42 per cent of all private households were keeping at least one type of livestock on a Census night it turned out that activities in fish farming were only done by less than one per cent (0.5 per cent). When comparing commercial agriculture and food crops with other fields of employment, it becomes clearly visible that the agricultural sector engages more persons (62 per cent), than any other industry in Tanzania. With respectively six per cent trade and commerce as well as domestic services (six per cent) are located dead level, followed by fishing, hunting, livestock and other related employments with four per cent. Electricity, gas and stem likewise Information and Communication were figured out the industries that employed the least number of persons, which was 0.4 per cent. (URT 2014, p.118)

## **Education**

According to the 2012 Census 23 per cent of 36.9 million people in Tanzania had never been to school with a significant difference between the sexes. While it was 26 per cent of females having never been to school the number is smaller on the side of males with 21 per cent. At the time of the census 39 per cent of the population aged five years and above had completed school at different levels of the education system, 30 per cent were attending and 7 per cent had dropped out. (URT 2014, p. 88)

With regard to educational attainment results suggest that gender imbalances are similar as to school enrolment or literacy: Out of 14,451,607 persons who attained any level of education, 7,167,013 (49.6 per cent) were males and 7,284,594 (50.4 per cent) were females. While primary education was the most dominant level with about 82 per cent, secondary education has been attained with 14 per cent and university or others with 2 per cent. While more females had attained primary education (84 per cent) compared to males (80 per cent), at secondary level and above, the number of males was larger than that of females. (id. 2014, p. 88)

## **Adult literacy**

In 2012 adult literacy stood at 78 per cent while a significant difference could be detected between urban areas (92 per cent) and rural ones (71 per cent). In both areas males were more literate than females. (URT 2014, p.79)

## **2.1 Social protection in the context of Tanzania**

The extent to which citizens are able to demand on social protection in a country does not only give information about the country's socio economic status but also provides information about the conditions which social work profession is facing.

In order to clarify the usage of the term social protection with regard to the Tanzanian context its terminology as well as the concept itself shall first be elaborated. In reference to James Midgley (2012, p. 9) social protection is still lacking a standardized definition but is closely verged on the term social security. Whereas social security has been usually linked to wage employment and the payment of cash transfers in times of contingencies such as sickness, maternity, work injury or unemployment social protection refers to a much broader understanding. Its scope ranges from conditional cash transfers, disaster and famine relief, to agricultural commodity subsidies, medical services and HIV prevention programs. (id. 2012, p. 10) Due to the variety of existing and emerging programs social protection is not only popular within the developmental context but also regarded as "...a major component of the poverty eradication efforts of governments in the developing world and an important thrust of development policy" (id. 2012, p. 10).

As far as the sponsorship of social protection initiatives is concerned historically both social security and social protection have been perceived as publicly administered. Nowadays they also refer to programs which are run by local community groups, commercial companies as well as non-governmental organizations and are therefore linked to international donors. (id. 2012, p. 10)

### **Means and goals of social protection**

As far as the means and goals of social protection are concerned there is even less agreement than it is the case with the meaning and scope of social protection.

### ***Maintaining income***

As highlighted by Midgley (id. 2012, p. 13) formative literature as well as official documents published by the ILO (cf. ILO Minimum Standards Convention from 1952) have identified social protection as being mainly concerned with the protection of income. In this context the

establishment of state-managed common funds which are financed by its members' regularly contributions and serve to maintain their incomes when contingencies arise is seen as major procedure (id. 2012, p. 13).

### ***Preventing poverty***

The prevention of poverty is mentioned as another, wider goal of social protection. Due to the fact that established social insurance schemes in developing countries do only include a minority of its population such as people who are working in the formal sector, they have in most cases been supported by social assistance programs which "...either subsidize the incomes of low wage workers or provide for those who are not covered by social insurance" (id. 2012, p. 13).

Other than in western countries where social assistance programs are built up on tax credits and minimum wage mandates, they are lacking funding in the Global South (id. 2012, p. 13). Due to the fact that national social assistance programs are often relating only to the most vulnerable groups in urban areas, Midgley (id. 2012, p. 13) describes their function with regard to the alleviation of poverty.

The following section will give an insight into formalized social protection schemes as well as social protection efforts in Tanzania.

### **Formal social protection in Tanzania**

In Tanzania early social welfare initiatives such as the Master and Native Servants Ordinance of 1924 and the Pension Ordinance of 1954 had been developed by British colonialists. In 1964 independent Tanzania released its own National Provident Fund Act and with the National Social Security Fund Act in 1997 it began to extend its aims in the provision of social security. (Blanchet et al. 2015, p. 5)

According to the Tanzanian National Social Security Policy which has been released in 2003 the government's conceptual understanding of social security strongly relates to the definition that is used by the International Labor Organization (ILO):

"The protection measures which society provides for its members, through a series of public measures against economic and social distress that would otherwise be caused by the stoppages or substantial reduction of earnings resulting from sickness, maternity, employment injury, unemployment, disability, old age, death, the provision of medical care subsidies for families with children." (URT 2003, p. 2)

The Tanzanian National Social Security Policy (2003, pp. 4–5) states the following elements as being essential for its social security services:

- Social assistance schemes, being income-tested and non-contributory, are offered by the state exclusively to people with disabilities, elderly people, orphans as well as unsupported parents. In order to support people during a certain period of crisis the Tanzanian government provides limited social relief.
- Mandatory schemes refer to people working who are contributing to pension or provident funds through their employment.
- Private savings which are meant to insure payers against events such as disability and loss of income and meet other social needs such as retirement.

Consequently social protection services in Tanzania can be divided into two major areas: First, services which are provided by mandatory or supplementary social security schemes for its contributing members. Policy wise these schemes follow the Ministry of Labor and Employment. Secondly social welfare interventions on macro-, community- and micro – level, largely focusing on poverty reduction and which have emerged due to the dominance of the informal sector within Tanzania’s economy and are provided by the government or private organizations. (Blanchet et al. 2015, p. 5)

### *Formal Schemes in the field of Social Security*

As far as the working population who is registered in the formal sector is concerned, different government ran schemes have been established to provide social protection services in Tanzania. Apart from differences in their orientation - there are Pension, Supplementary as well as Health Insurance Schemes - they are all supervised by the Tanzanian Social Security Regulatory Authority. (URT 2015a, n. p.) The Social Security Authority was established in 2010 and serves the regulation as well as supervision of social security schemes in Tanzania. In this context it does not only promote social security on a national level by developing and releasing guidelines but is also responsible for the evaluation and monitoring of the social security sector in Tanzania. (id. 2015a) The following section overviews selected non supplementary insurance schemes which are operating in Tanzania:

- **National Social Security Fund (NSSF)**

The National Social Security Fund offers social security coverage to employees of private sector and non-pensionable parastatal and government employees (id. 2003, p. 7).

- **National Health Insurance or Community Health (NHIF or CHF)**

The National Health Insurance Fund (NHIF) offers health insurance coverage to pensionable employees of central government (id. 2003, p. 7).

- **Parastatal Provident Fund (PPF)**

The Parastatal Pension Fund (PPF) offers social security coverage to employees of both private and parastatal organizations (id. 2003, p. 7).

- **Public Service Pension Fund (PSPF)**

The Public Service Pension Fund was established by the Public Service Retirement Benefits Act No. 2 of 1999. Having previously offered social security protection to employees of central government only, legal amendments have extended membership of the scheme to include employees of the formal and informal sector who are not registered under any other scheme. (PSPF 2015, n. p.)

- **Local Authority Pension Fund (LAPF)**

The Local Authorities Provident Fund (LAPF) offers social security coverage to employees of the local government (URT 2003, p. 7).

According to the 2012 Census 13 per cent of all households in Tanzania mentioned at least one member to have been involved in a social security scheme. With 6 per cent of households reporting to have at least one member of their household registered in one of these schemes, the National Health Insurance Fund (NHIF) and the Community Health Fund (CHF) were the most popular social security schemes. (URT 2014, p. 165)

As recognized by the National Social Security Policy in 2003 the effectiveness of these formal insurance schemes is limited due to the fact that they only cover persons who are employed in the formal sector which in Tanzania is the clear minority (id. 2003, p. 7f.).

### ***Formal social welfare services***

As stated in Tanzania's National Strategy for Growth and Reduction of Poverty II (NSGRP II) which was released in 2010 the government has made use of a so called National Social Protection Framework (NSPF) in order to identify vulnerable groups of society. This framework focuses on orphans and vulnerable children, widows, people living with HIV, youths, young mothers, and people with disabilities as well as elders over the age of 60. (id. 2010, p. 17)

In Tanzania social welfare and social protection services are under the duty of the Ministry of Health and Social Welfare (MOHSW) and its Department of Social Welfare (DSW). Responsibilities with regard to service provision are divided by sections such as (1) Family, Child Welfare and Early Childhood Development; (2) Services for People with Disabilities and the Elderly; and (3) Juvenile Justice and Correctional Services. (id. 2015b)

Next to social welfare institutions which are guided by the Tanzanian Government other private stakeholders seek to provide social protection. (id. 2010, p. 17)

In the context of private owned social welfare providers such as small scale non – governmental organizations Midgley (2012, p. 17) questions their sustainability due to the fact that they are not only dependent on external donors in terms of funding but also with regard to temporally limited assignments.

The figure below which originates from a Mapping Study Report for Social Welfare Services and Providers in Tanzania that has been released by the Tanzanian Government in August 2015 gives a first overview of social welfare providers in Tanzania.

**Table 1: Mapping of social welfare providers by region in Tanzania mainland**

	REGIONS	Children home		Homes for the elderly		Retention homes	VTC for PWDs		Day care Training Institutions		Approved school	Social welfare officers	Day Care Centre	Juvenile court
		Govt.	Private	Govt.	Private	Govt.	Govt.	Private	Govt.	Private	Govt.	Govt.	Govt.	
1	Arusha		24			1						35		
2	Coast		16		01							64	99	
3	DSM	01	50	01	02		01			02		66	285	01
4	Dodoma		25		02	1						29	72	
5	Geita		04									11	21	
6	Iringa		19									19	261	
7	Kagera		15	01	02							22	158	
8	Katavi		-									09	04	
9	Kigoma		09	01								12	08	
10	Kilimanjaro		13	01		1			01			38	148	
11	Lindi		02		01							10	25	
12	Manyara		08	01								09		
13	Mara		06	01	01			01				11	04	
14	Mbeya		08			1					01	36		
15	Morogoro		15	02	03							33	90	
16	Mtwara		06			1*	01					20	90	
17	Mwanza		23	01			01					49	51	
18	Njombe		04									28		
19	Rukwa		06									08	06	
20	Ruvuma		07	01								14	45	
21	Shinyanga		07	01	01					03		18	26	
22	Simiyu		04									09		
23	Singida		08	01			01					24	32	
24	Tabora		27	01	03		01					28	11	
25	Tanga		08	01	01	1	01					37	73	
	<b>Total</b>	<b>01</b>	<b>313</b>	<b>16</b>	<b>17</b>	<b>6</b>	<b>06</b>	<b>06</b>	<b>01</b>	<b>05</b>	<b>01</b>	<b>633</b>	<b>1509</b>	<b>01</b>

Source: Field survey (2014)

Key: Govt - Government

\*It is estimated that there are 2150 day care centres in Tanzania mainland. This survey only sampled 194 day care centres.

\*\*Gender and children desks have been established in every district of Tanzania mainland. This survey only visited 48 GCDs.

**Figure 1: Mapping of social welfare providers by region in Tanzania Mainland (URT 2015b, p. 2)**

As pointed out by the Mapping Study Report (id. 2015b, p. 9) its target population comprised of identified social welfare service providers in Tanzania mainland which are Local Government Authorities, Civil Society Organizations, Health Facilities, Prisons, Juvenile Courts, Children's Homes, Disabled Persons Organizations, Older Persons Organizations, Day Care Centers, Child Care Training Institutions, Homes for the Elderly, Retention Homes, Approved Schools, Rehabilitation / Vocational Training Institutions for Persons with

Disabilities and the Gender and Children's Desk, that is a specialist unit formed by trained police officers to create a secure environment for victims of violence and abuse (id. 2015b, p. 9).

According to the Mapping Study Report for Social Welfare Services and Providers the government currently employs 635 social welfare officers<sup>3</sup> all over the country (id. 2015b, p. 73). With 66 Dar es Salaam has the highest number of social welfare officers and is as Mwanza even employing some professionals up to ward level. The report illustrates that government institutions which are located in urban regions have more social welfare officers than the ones in rural areas. As it has been set by the Ministry of Health and Social Welfare the task of social welfare officers within local government authorities is the provision of individual case management in the context of family integration as well as networking among stakeholders or social partner institutions in the context of referral systems. (id. 2015b, p. 73f.)

The Report also points out that the legislative and conceptual framework for social welfare service delivery in Tanzania is formed by several policies, legislations and guidelines such as the National Aging Policy (2003), the National Policy on Disability (2004), the Child Development Policy (2008), the National Costed Plan of Action: 2013-2017, the National Guidelines for Improving Quality of Care, Support and Protection for Most Vulnerable Children (2009), the Law of the Child Act Na. 21 of 2009, the Persons with Disabilities Act Na. 9 of 2010, the Anti - Trafficking in Person Act Na. 6 of 2008, the Law of Marriage Act Chapter 29, the Sexual Offences Special Provisions Act Na.4 /19, the Law of Inheritance and Succession of 1963 as well as the National Health and Social Welfare Quality Assurance Strategic Plan (NHSWQISP – I, 2013). (id. 2015b, p. 11)

The Mapping Study Report describes the Tanzanian social welfare system as conventional in terms of service delivery and being mainly focused on casework and rather reactive than proactive when responding to existing social needs (id. 2015b, p. 11).

### **Non - formal social protection in Tanzania**

Maghimbi et al. (2002, p. 13) argue that a solely conventional definition of social security which includes measures against contingencies such as sickness, death, invalidity, maternity or occupational disease that do result in a loss of income does not effectively relate to the situation of developing countries such as Tanzania. Finally there the majority of the population due to its engagement in the informal sector is neglected an admission to formal social security

<sup>3</sup> The term refers to social workers who are working for social welfare offices which are run by the government.

schemes and heavily affected by chronic and structural poverty which again promotes the reliance upon informal social security arrangements formed by the family, the neighborhood or community groups (eid. 2002, p. 12).

This argument is supported by Luise Steinwachs ( 2006, p. 160f.), who researched on the topic of establishing social security in Tanzania. According to Steinwachs (ead. 2006, p. 160f.), solidarity in communities takes a major role in providing social security for members of a society where there is no or just inadequate social security provided by governmental organizations.

While as described by Maghimbi et al. (2002, p. 21) informal social security arrangements within the context of a family or kin had been common in pre-colonial Tanzania, these practices changed during colonialism and after independence. Growing urbanization has had its effects on Tanzanian families who have become more dispersed, which again makes it difficult for extended families to function as social safety nets (URT 2003, p. 10). Studies which were conducted in the 1980s and 1990s (Bossert 1987, Tungaraza 1988 and 1993, in: Maghimbi et al. 2002, p. 21) do describe the trend of limiting means of protection to close family members only as well as incidents where the family is not anymore able to provide sufficient support to its members. They see the upcoming of alternative forms of informal social security arrangements as being closely related to this trend (eid. 2002, p. 21). These include initiatives in the field of rotating savings and credit associations which in Tanzania are popularly called Upatu (eid. 2002, p. 21). As pointed out by Steinwachs (2006, p. 160f.), cooperatives in the agrarian sector as well as religious communities or solidary acts in the context of weddings or funerals do supplement informal social security arrangements which had been provided by the family, the neighborhood or community groups.

Likewise connected to the decay of traditional arrangements of social protection due to urbanization and industrialization, is the increasing recognition of social work and its potential in contributing to the wellbeing of vulnerable and needy people. Not for nothing the provision of an adequate number of social workers has been mentioned as one strategy in providing social protection and rights to vulnerable groups of society by Tanzania's most recent strategic plan in the context of social protection measures in Tanzania, that is the National Strategy on Growth and Poverty Reduction II (NSGPR II) which has been implemented between 2010/11 and 2014/15. The following chapter will therefore give an insight on the development of social work in Tanzania.

### 3 Social work in Tanzania

Before outlining the roots and the current situation of social work in Tanzania some general remarks on the historical development of social work in Africa shall be given. As pointed out by Spitzer (2014a, p. 17) local systems of social support which had been operating in African communities even before the extension of colonialism were repressed by colonial power and overran by social welfare services developed in Europe and the United States. Whilst social work in these contexts evolved as an indigenous response to the negative side effects of industrialization such as mass deprivation and severe working conditions the development of social work in Africa took place under completely different preconditions (id. 2014a, p. 17). The introduction of social work to African countries had not been triggered by inner societal developments but mainly served to benefit the colonial state as means of colonial planning. At the same time missionary workers tried to spread religious values as well as to introduce the local population to western systems of health care, social services and education. (id. 2014a, p. 18) After colonial independence social work in Africa had been experiencing a new dimension with the implementation of training institutions by the United Nations who bothered to spread the profession after the Second World War and did so under assistance of western social work stakeholders and development agencies. (Kreitzer 2012, p. 77) Having assumed that social work knowledge was universal and transferable the United Nations did not only conduct five surveys on social welfare trainings worldwide between the 1950s and 1970s but also sent consultants to countries of the Global South in order to assist with the creation of social work curricula. (ead. 2004, p. 39) Since then social welfare services in Africa have begun to be modelled after western ideas and concepts (ead. 2012, p. 77). In 1981 James Midgley was first to describe the trends within academia but also social work promoting the dominance of Western world-views over diverse local and indigenous cultural as “professional imperialism” (Spitzer 2014a, p. 18). Finally the development of social work in the Global South has been characterized by “the unidirectional flow of ideas and practice approaches from industrial to developing countries and by the widespread replication of Western human service policies and programs” (Midgley 1990, p. 296) . This practice was closely related to dominating development ideas embedded in the so-called *modernization paradigm* (id. 1990, p. 296). Likewise the term “adopted child” by Tanzanian researchers Njimba and Ng’ondi (2006, in: Mabeyo 2014, p. 127) refers to the ambivalence which social work profession has been facing in Tanzania.

### **3.1 The history of social work practice in Tanzania**

Social Work in Tanzania dates back as soon as to the introduction of “probation services” on October 6th 1950 which followed the British Probation of Offenders Ordinance declared in 1947 (Mabeyo 2014, p. 127). As described by Njimba (2011, in: ead. 2014, p. 127) one British officer and one assistant probation officer were responsible for implementing the ordinance in the districts of Dar es Salaam and Kisarawe. By 1955 Tanzania had probation officers in two primary courts of Dar es Salaam and Kisarawe and five township courts in Tanga, Morogoro, Arusha, Moshi and Mwanza (ead. 2014, p. 127). According to Mabeyo (ead. 2014, p. 127) social welfare programs that had been developed during colonialism did not focus on a professional code of ethics but mainly served as control mechanisms for colonialists.

After colonial independence in 1961 Tanzanian social work practice began to extend to the field of youth welfare. In 1964 first the so called Affiliation Ordinance (1949) was amended although still excluding children who had been born out of wedlock in the case of indigenous people. Secondly the National Council of Social Services was established in order to coordinate the initiatives of government and voluntary agencies with regard to the delivery of social welfare services in the country. (Njimba 2011, in: ead. 2014, p. 127)

As far as current social work practice is concerned, the Department of Social Welfare is responsible for the provision and overall strategic coordination of social welfare service delivery in the country (ead. 2014, p. 128). According to Mabeyo (2014, p. 128) social welfare offices have been established in all regions of Tanzania. Nevertheless they miss to extensively stretch out to district level.

### **3.2 Social work education in Tanzania**

Social Work training itself has a relatively short history in Tanzania. It directly relates to the establishment of the Institute of Social Work (ISW) in Dar es Salaam, which was promoted by the Tanzanian parliament in 1973 in order to respond to prevailing problems at that time (Mabeyo 2014, p. 125). As Mabeyo (ead.) points out the Institute can, therefore, be considered the mother and the founder school of social work education and training in the country”.

- **The Institute of Social Work (ISW)**

The Institute of Social Work or Taasisi ya Ustawi wa Jamii as it is called in Kiswahili is one of the higher learning institutions in Tanzania and currently offers programs in the field of Social Work, Human Resources Management as well as Labor Studies. Its establishment was based on the National Social Welfare Training Institute Act No. 26 of 1973 which again was amended by the Miscellaneous Act No. 13 of 2002.

The Institute began its operation in 1974 when it had lodged with the Tanzania Episcopal Council (TEC) at Kurasini. Since 1978 the Institute of Social Work has been located at Kijitonyama, Dar es Salaam. Whereas the first program offered at the ISW, the Ordinary Diploma in Social Work, mainly related to the Department of Social Welfare's manpower problem, the Institute developed its course program in 1977 by offering the Advanced Diploma in Social Work as a response to professionalizing social work standards. Next to the Postgraduate Diploma in Social Work which was introduced in 2002 the ISW adopted Bachelor Degrees (National Technical Award Level 8) in 2006/07 as well as Ordinary Diploma (National Technical Award Level 6) in all fields of study in 2007/08. (ISW 2016, n. p.)

Having been the only academic training institution for social workers in Tanzania for more than two decades, the Institute of Social Work has meanwhile received enhancement by various academic training institutions that are offering accredited Social Work Programs in the country:

- **Kampala International University**

The Kampala International University is a private university and has its headquarters in Uganda. At its branch office in Dar es Salaam it offers a Bachelor of Arts in Social Work and Social Administration under the Department of Development Studies, a Diploma in Social Work as well as a Master in Social Work. (Kampala International University 2015, n. p.)

- **Zanzibar University (ZU)**

Its faculty of Arts and Social Sciences offers a Certificate in Social Work as well as a Bachelor Program in Social Work (Zanzibar University 2015, n. p.).

- **Tanzania International University**

The Tanzania International University is based in Dar es Salaam. Under the faculty of Arts in Social Sciences it offers a Diploma in Social Work and Social Administration as well as a Certificate in Social Work and Social Administration. (Tanzania International University 2015, n. p.)

- **Agape College**

Agape College offers a Certificate in Social Work as well as a Diploma in Social Work (Laideson et al. 2015, n. p.).

- **University of Dodoma**

Dodoma University offers a Certificate and a Bachelor Degree in Social Work (eaid. 2015, n. p.).

- **Newman Institute of Social Work**

The Newman Institute of Social Work in Kigoma offers a Certificate as well as a Bachelor Degree in Social Work (eaed. 2015, n. p.).

- **Open University of Tanzania**

Under the department of Sociology and Social Work the publicly accredited Open University of Tanzania, which is located in Dar es Salaam, offers the following programs (The Open University of Tanzania 2015, n. p.):

- BSW
- MSW

- **Hubert Kairuki Memorial University (HKMU)**

The Hubert Kairuki Memorial University is a private University and part of a Non – Governmental Organization which is known as the Mission Mikochei Health and Education Network (MMHEN). Based in Dar es Salaam it offers a Master Program (MSW) in Social Work. (Hubert Kairuki Memorial University 2015, n. p.)

- **State University of Zanzibar (SUZA)**

As a public university the State University of Zanzibar offers an Ordinary Diploma in Social Work (The State University of Zanzibar 2015, n. p.).

- **University of Dar es Salaam**

The University of Dar es Salaam currently offers a Bachelor Degree in Social Work (Laideson et al. 2015, n. p.).

### **3.3 The development of social work in Tanzania**

The following section deals with the development of social work in Tanzania. By elaborating activities in the field of professionalization which have happened in the last decade and include research initiatives as well as the establishment of networks and associations, current trends within the Tanzanian social work profession shall be illustrated.

#### **Tanzania Association of Social Workers (TASWO)**

The Tanzania Association of Social Workers was first registered in May 1982 but failed to remain active until financial support from USAID led to its revival in 2010. Under assistance by the American International Health Alliance (AIHA) TASWO aims to unite social workers all over the country and work as a lobbying body for social work related issues in Tanzania. TASWO has also formed a partnership with the National Association of Social Workers (NASW) in Washington DC in order to improve its capacity. Apart from organizing its annual General Assembly TASWO is concerned with various tasks such as in 2012 when TASWO in cooperation with the Tanzanian Department of Social Welfare led the process of formulating and promoting the establishment of a Social Work Council and Bill for Tanzania. The Social Work Council is envisioned to regulate the implementation of ethical standards in social work practice. Although no concrete decisions have yet been made, the Ministry for Health and Social Welfare has assured its support in the development process in 2012. (Mabeyo 2014, p. 129)

#### **Tanzania Emerging Social Workers Education Program (TESWEP) / Association of Schools of Social Work in Tanzania (ASSWOT)**

As far as the development of social work education is concerned, the program “Tanzania Emerging Social Work Education Program (TESWEP)”, which was established in 2007 with support from the American initiative “President’s Emergency Plan For AIDS Relief (PEPFAR)”, the American International Health Alliance (AIHA) and in collaboration with the Jane Adams College of Social Work as well as the Midwest AIDS Training and Education Center at the University of Illinois, laid the foundation for further activities in the field of professionalizing social work education in Tanzania. Until its advancement to the autonomous association ASSWOT (Association of Schools of Social Work in Tanzania) in 2012 TESWEP had been operating under the umbrella of the “Tanzania Association of Social Workers (TASWO)”. (Laideson et al. 2015, n. p.)

ASSWOT started to standardize social work training in Tanzania on a national but also international level by bringing together twelve schools which are intending or already have been offering social work training programs in Tanzania (Mabeyo 2014, p. 126).

## **The PROSOWO Project**

The Abbreviation PROSOWO refers to the project named “Promotion of Professional Social Work towards Social Development and Poverty Reduction in East Africa” which as a joint initiative between four higher learning institutions from Austria and East Africa has been implemented from 2011 until 2014. Officially launched by the Austrian Development Agency (ADA) and its Austrian Partnership Program in Higher Education and Research for Development (APPEAR), which aims at supporting academic partnerships between higher learning institutions in Austria and partner countries in the Global South, the project included participants from the University of Nairobi (Kenya), the University of Rwanda, the Institute of Social Work (Tanzania), the Makerere University (Uganda) and the Carinthia University of Applied Sciences (Austria), that also served as coordinating institution. (Spitzer / Twikirize 2014, p. 1f.) In March 2016 a continuation of the project has been launched during a social work conference in Arusha, Tanzania. Under the title of “PROSOWO II Professional Social Work in East Africa – Towards Sustainable Impact” concrete mechanisms to strengthen social work education and practice in partner countries shall be developed (APPEAR 2016, n. p.).

Based on the assumption that social work which in the partner countries mentioned above still mostly is an under – represented and under recognized profession is a relevant stakeholder in addressing poverty that could enhance its capacities in order to not only contribute to the achievement of social development but also to the Millennium Development Goals (MDGs), the project aimed at professionalizing social work education and practice in East Africa. In order to achieve the goal of strengthening social work in the partner countries activities have been undertaken in the following areas (Spitzer / Twikirize 2014, p. 3f.):

- In the first year of the project its participants conducted a comprehensive field research in order to investigate the role of social work in poverty reduction and the achievement of the MDGs. In this context data was collected on different social work levels. Whereas social work practitioners, social work educators, students as well as employers were questioned, interviews were conducted with key policy decision makers, social work educators and employers. Additionally social work clients were participating in focus group discussions. (eid. 2014, p. 3f.)
- Research findings were used to review the curricula for the Bachelor Program in Social Work at the higher learning institutions which took part in the PROSOWO project in order to offer an adequate preparation for future social work practitioners for addressing social problems in the region (eid. 2014, p. 3f.).

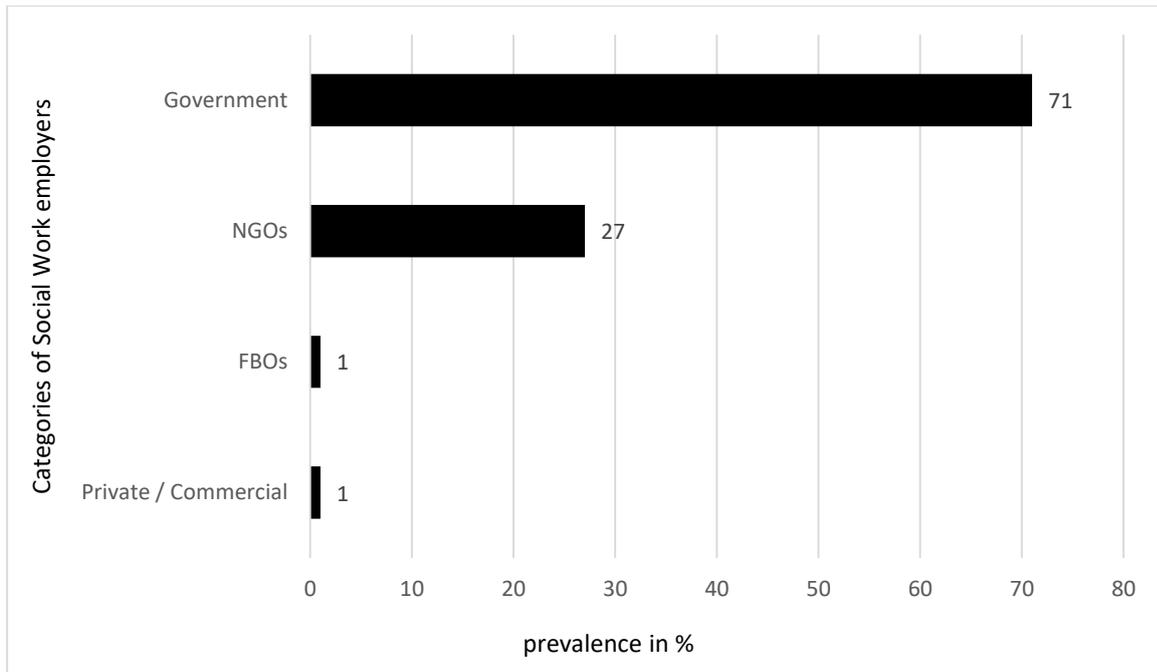
- In order to strengthen social work profession at policy level workshops with policy makers and government officials were organized to inform them about the relevance of social work profession in conceptualizing poverty reduction measures. In the case of Tanzania the establishment of a social work Council and Bill has get going. (eid. 2014, p. 3f.)
- Close to the end of the project an international Social Work Conference was held in Kampala (Uganda) in March 2014 in order to enable space for regional and international networking. The conference was attended by more than 400 delegates from Africa. (eid. 2014, p. 6)

Next to the enhancement of regional exchange and cooperation between partner universities the PROSOWO project did also for the first time enable the realization of regional research on the topic of social work and made it transparent by amongst other things publishing country specific national reports (eid. 2014, p. 5).

In the context of Tanzania extracts of the PROSOWO related national report which has been edited by Zena Mnasi Mabeyo, Elijah Macharia Ndung'u and Sabrina Riedl in 2014 give a first insight to the current situation of social work in the country and do therefore also serve as reference points for the research project which forms the basis of the present master thesis. The Tanzania national report is based on a study which made use of quantitative as well as qualitative methods. Whereas questionnaires were used in the case of 100 social workers, 99 third year Bachelor Degree's students from two selected social work training institutes (the Institute of Social Work and the Open University of Tanzania), 9 educators and 35 employers, 8 policy makers, 8 educators and 20 employers were interviewed. Additionally four focus group discussions and 2 individual interviews with clients were conducted. (Mabeyo et al. 2014, p. xv)

### **Employing organizations and job assignments of social workers**

As demonstrated in the figure below the government (71 %) forms the main employer for social workers in Tanzania. In order not to overestimate the low prevalence of faith based organizations (FBOs) as employing organizations for social workers (eid. 2014, p. 50) point out that during data collection some NGOs were also referred to as being faith based in nature.

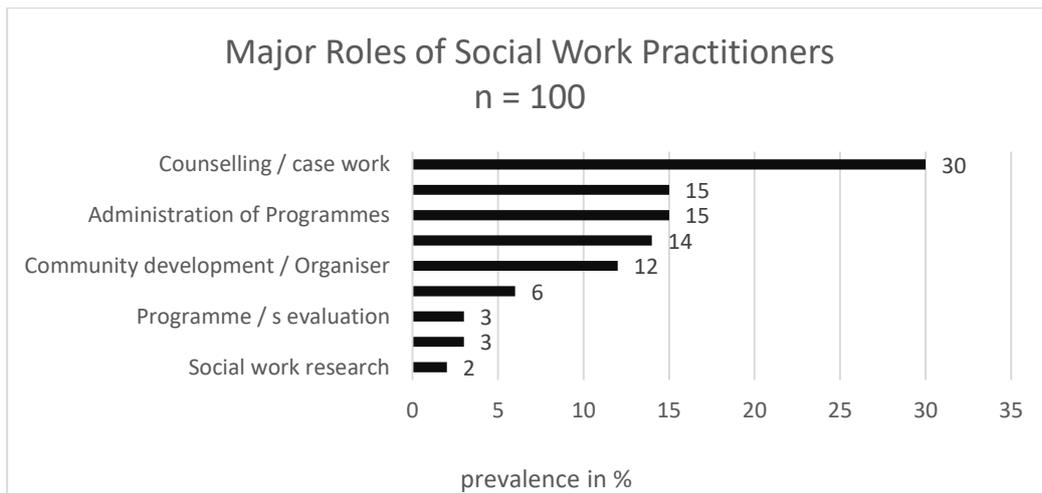


**Figure 2:** Author's illustration based on (eid. 2014, p. 49)

As far as the occupation of work positions is concerned social workers do not only work on an operational but also on an administrative or leadership level. They work as executive directors, project coordinators, monitoring and evaluation officers, counsellors, educators, medical social workers, child protection officers as well as probation and prison officers. Social workers hold positions at the Department of Social Welfare, the Ministry of Health and Social Welfare, Local Government Authorities (LGAs), government hospitals, the Prisons Department of the Ministry of Home Affairs and government agencies belonging to the Tanzanian Human Rights Commission. The majority of social workers who were questioned during the study are employed as social welfare officers through the Department of Social Welfare or Local Government Authorities.(eid. 2014, p. 50f.)

### **Main responsibilities of social workers**

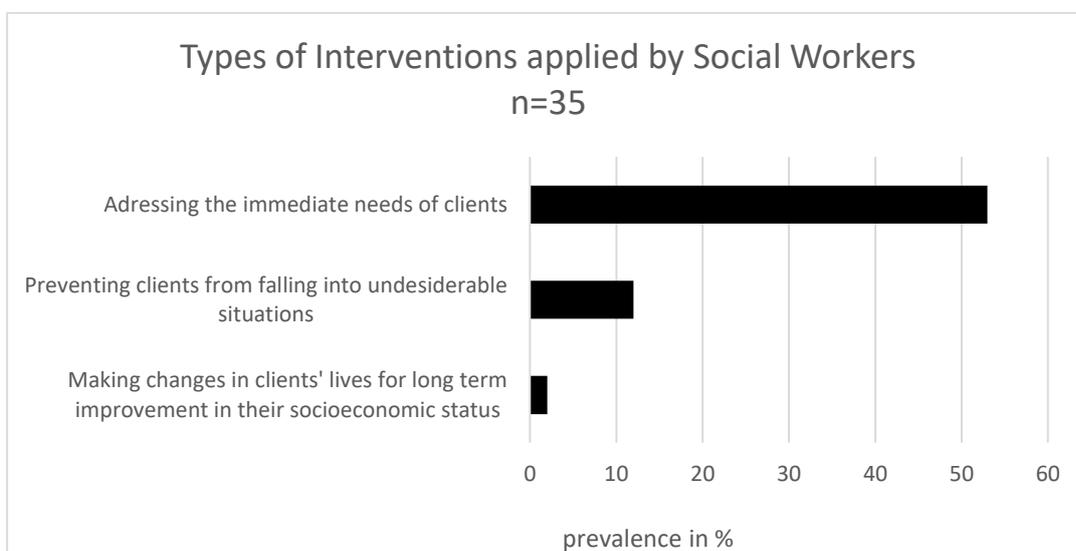
As far as Tanzanian social workers' main responsibilities are concerned social workers themselves indicated that from the various roles which they perform counselling plays a central part. Next to it the administration of programs, brokering, the education of clients as well as activities related to community development were mentioned as main responsibilities in social work practice. (eid. 2014, p. 48) Exact prevalence of the responsibilities mentioned is demonstrated by the figure below.



**Figure 3:** Author’s illustration based on (eid. 2014, p. 48)

### Methods and main interventions applied by social work practitioners

As far as the methods and interventions applied by social work practitioners are concerned Mabeyo et al. (2014, p. 60) listed individual casework to be the most applied social work practice method in Tanzania. As the editors of the national report stress out social workers tend to be mainly focused on the provision of individualized services whereas social work research, social action, group work, social welfare administration, social development and community organization are methods which are applied clearly less (eid. 2014, p. 60). With regard to the type of interventions that are applied by social work practitioners, Mabeyo et al. (2014, p. 65) found out that social workers do mostly address the immediate needs of their clients without sustainably affecting their socio – economic status (see figure 4). They therefore do indeed deal with the “symptoms” of poverty but not with its “root cause”. (eid. 2014, p. 65)



**Figure 4:** Author’s illustration based on (eid. 2014, p. 65)

Apart from elaborating concrete social work skills of Tanzanian, social workers Mabeyo et al. (2014, p. 69f.) also investigated the contribution of social work interventions to poverty reduction and social development in Tanzania. In this context social workers were asked to state their abilities with regard to client empowerment, client education, change facilitation, brokering as well as policy development which had been set as relevant interventions in reducing poverty and enhancing social development by the team of researchers (eid. 2014, p. 70). The respondents' answers subsequently had been compared with information regarding the actual application of the same interventions in social work practice (eid. 2014). As the table on the following page shows there is an obvious gap between social workers' rating with regard to their skill level and the application of these skills in the social work field. According to Mabeyo et al. (2014, p. 71) no concrete explication has yet been found to describe this result, which according to their recommendation requires further research.

Social workers abilities in:	Skill level				Practice level			
	Not at all	To a slight extent	To a great extent	Not sure	Not at all	To a slight extent	To a great extent	Not sure
	%	%	%	%	%	%	%	%
<b>Empowering target population</b>	1.0	23.0	75.0	1.0	4.0	55.0	39.0	2.0
<b>Educating / training target population</b>	3.0	19.0	78.0	-	4.0	35.0	60.0	1.0
<b>Facilitating change (change agent)</b>	4.0	23.0	72.0	1.0	3.0	42.0	54.0	1.0
<b>Brokering (linking to relevant resources)</b>	1.0	25.0	73.0	1.0	1.0	41.0	57.0	1.0
<b>Policy development</b>	14.0	34.0	52.0	-	35.0	40.0	24.0	1.0

**Figure 5:** Author's illustration based on Mabeyo et al. (2014, p. 70f.)

The research team around Mabeyo et al. (2014, p. 62) also gathered data in order to investigate the origin of social work models which are used in social work practice. Through asking employers (n = 35) to give their view on the topic, they found out that 34, 3 % of the models used are mainly western oriented whereas 11, 4 % are mainly locally based models. According to social work employers questioned, the majority of the models used, that is 54, 3 %, follows a mixture of both. (eid. 2014, p. 62)

A tendency to rely upon Western based models is also visible for social work theory, especially in terms of references for educational materials and methods which are used during social work training as highlighted by Mabeyo et al. (2014, p. 114). Study results show that both the majority of 9 social work educators (88.9 %) as well as the majority of 99 social work students (85.7 %) who were questioned indicated that educational materials from outside Africa are the ones which are used the most (eid. 2014, p. 140).

These findings support the thesis of Spitzer (2014b, n. p.), who assumed that although local concepts do exist in social work practice, they are neither a content of research nor part of the academic training. He sees missing resources for research as well as a lack of locally generated materials as hindering factors thereby.

On Meta - level this phenomenon as well as attempts to adapt social work approaches to the local context or finding local solutions are comprised by the international discourse on an “appropriation” of social work, which shall be elaborated in the following.

#### **4 The discourse on an “appropriation” of social work**

When it comes to the issue of appropriate social work interventions in countries with a colonial past different terms have evolved to describe the efforts in examining the orientation of social work theory and practice. The discourse thereby moves from internationalizing trends and ideas of social work as being a universal profession to notions that social work must be contextually oriented and develop culturally relevant practice. (Gray 2005, p. 231)

Whereas the term “authentication” offers a rather drastic solution to the issue of “professional imperialism” (see Midgley 1981) by focusing on the development of independent social work theory and the promotion of its practice, the concept of “indigenizing” social work has been one of the most prevalent in the discourse on an “appropriation” of social work (Twikirize 2014, p. 78).

##### **Indigenization / Localization of social work**

According to James Midgley (1983 p.170, in: Balgopal and Nimmagadda 2000, p. 4) the term “indigenization” first appeared in social work literature in 1971 when the United Nations conducted its fifth international survey on social work training and described the inappropriateness of American social work theories to other societies. Midgley himself (ead. 2000, p. 4) associated indigenization with “appropriateness, which refers to how professional social work roles must be appropriate to the needs of different countries and social work education must be appropriate to the demands of social work practice”.

In this context “indigenization” and “localization” originally meant the integration of local approaches of social assistance into westernized social work concepts and argued its need on the assumption that country specific differences regarding political, economic as well as social structures require specific solutions. Based on to this idea were efforts in the Middle East between the 1960s and 1980 which aimed at adjusting an American based model of social work to prevailing Islamic culture. (Twikirize 2014, p. 78f.)

As far as the conceptualization of “indigenization” is concerned the concept has not been only criticized on account of its overall approach of trying to make imported knowledge fit in an existing local context but also because of its nominal similarity to the concept of *indigenous social work* whose solely focus on indigenous minorities actually requires culturally sensitive practice and knowledge other than that is needed for the conceptualization of country specific social work as requested for an “indigenization” of social work. (id. 2014, p. 79)

## **International social work**

According to Australian scholar Gray (2005, p. 231) the discourse on “indigenization” nowadays is not anymore limited to national contexts in the Global South but has gained relevance as a challenging concept with regard to the activities of international bodies such as the International Association of Schools of Social Work (IASSW) and the International Federation of Social Workers (IFSW). Their work has amongst other things been largely focused on identifying commonalities in social work which are shared across diverse contexts and finding a global definition of social work as well as global standards for social work education (id. 2005, p. 231). Since its establishment in 1956 (the first global social work definition was released in 1957) the ISFW has been continuously working on its replacing definitions of the social work profession (Twikirize 2014, p. 78). Whereas former definitions largely focused on social work’s universal elements latest efforts to review the definition illustrated a clear promotion of culturally sensitive social work practice and finally lead to the current global definition of social work, which has been released in July 2014 (Twikirize 2014, p. 78):

“Social work is a practice-based profession and an academic discipline that promotes social change and development, social cohesion, and the empowerment and liberation of people. Principles of social justice, human rights, collective responsibility and respect for diversities are central to social work. Underpinned by theories of social work, social sciences, humanities and indigenous knowledge, social work engages people and structures to address life challenges and enhance wellbeing” (International Federation of Social Workers 2014, n. p.).

According to Gray and Fook (2004, p. 637) theoretical attempts to figure out universal values for the social work profession such as human rights and social justice do not only offer the possibility of strengthening social work internationally but can effect positively on social work’s reputation, especially in countries where social services are unattended on a political level. Nevertheless in terms of relevant implications for social work education and practice they pledge for an alignment of international activities and an exchange between social workers to fight social problems instead of promoting a unified definition of social work (eid. 2004, p. 640).

Next to attempts of harmonizing efforts regarding an “internationalization” and “indigenization” of social work, the concept of developmental social work, which has been developed by South African scholars around James Midgley in the early 1990s to describe the inappropriateness of the South African Welfare system to its population, has become

increasingly popular as alternative approach concerning appropriate social work interventions in developing countries (Allegriti / Gray 2002, p. 3).

### **Developmental social work**

Developmental social work means a paradigm in social work which seeks to understand global processes of resource allocation and distribution and its influence on poverty and social injustice in a global as well as local context (Gray 2010, p. 468). Thereby it relies on the theory and practice of social development which shall be elaborated in the following.

Instead of solely focusing on the importance of contextual elements for the design of social welfare services social development seeks to overcome social work's remedial orientation by addressing the root causes of society's needs (Mabeyo et al. 2014, p. 12). Although as Midgley (2010, p. 13f.) points out a standard definition of social development does not exist the concept does include some central elements such as the promotion of change in terms of a collective improvement, empowerment, capacity enhancement as well as client participation.

Whereas the belief that social development has the potential to antagonize social deprivation and social injustice has been highly prevalent, Australian scholar Mel Gray (2010) seeks to highlight its ambiguous development in the context of neo – liberalism. As argued by Gray (id. 2010, p. 464) social development, though its aversion to institutionalization, is in the risk of becoming increasingly formalized. Although social development through its orientation towards the community used to have a broader focus than social work and understood itself as being an alternative to social welfare services which have been seeking to provide material benefits on an individual level, the fact that the concept has been supported by an educational system and scholarly literature however makes it appear more and more similar to the framework of social work. (id. 2010, p. 464) As far as the formalization of social development is concerned Gray (2010, p. 464) holds the contemporary neoliberal environment responsible for its economic cooptation and its exposure to professionalization efforts.

Whereas social development in its starting time has been developed as an approach that held national governments responsible for the provision of individual welfare, neo – liberalism has not only influenced the way how social welfare is perceived and structured but also the usage of social development as a concept in the context of social investment (id. 2010, p. 463f.):

- As described by Gray (id. 2010, p. 466) social development was strongly linked to the issue of rural development and promoted subsistence farming as relevant means to prevent food insecurity. Currently and due to neo – liberal forces social development has shifted its focus to interventions which invest in the economic performance of individuals and the community in order to enhance their participation in the economy. Social investment therefore creates human capital formation. (id. 2010, p. 466)
- By perceiving the community as the locus for socio – economic engagement and promoting its independent way of living, social development in line with neo – liberal welfare concepts has been in danger of shifting the responsibility for the wellbeing of individuals to families or the community and neglecting any responsibility on the part of the state (id. 2010, p. 467).
- Due to the encouragement of client participation and self – determination social development tends to resign the use of trained professionals such as social workers, which can lead to a decrease in the education of social services workforce. This element of social development does not align to the trend towards a professionalization of the concept itself. (id. 2010, p. 467)
- Social development is increasingly clinging onto the field of social enterprises which due its independence from governmental funds boasts itself on being directly responsive to a community's needs (id. 2010, p. 467).

In order to perceive social development as an alternative approach to welfare Gray (id. 2010, p. 468) does not only pledge for the disengagement of social development with social investment in order to rethink its theoretical underpinnings but also for the acknowledgement of the fact that community work as means of poverty alleviation will not be fruitful without implementing strategies of economic redistribution. The extent to which social welfare services that include the involvement of social workers can supplement measures of economic redistribution in the field of poverty reduction has not been elaborated yet on a scientific base.

## 5 Summary

The first chapter of the current thesis has demonstrated that Tanzania, which is ranked among the world's poorest countries, despite its precarious socio – economic status has managed to preserve a stable societal situation. As far as social protection is concerned Tanzania orients itself towards international concepts such as the definition of the ILO (see p. 15). Tanzania has released several papers to outline its activities in the field of social protection such as the National Social Security Strategy in 2003 or its second National Strategy for Growth and Reduction of Poverty (NSGRP II) in 2010. In terms of formal social protection Tanzania offers contributory social assistance schemes for people working in the formal sector as well as social assistance to people which have been categorized as vulnerable by the government (e.g. orphans, people affected with HIV / AIDS). Social welfare interventions largely focus on poverty reduction and are mainly provided by the government or private organizations. Due to the high prevalence of Tanzanians engaging in the informal sector and the preselecting of potential beneficiaries for non - contributory assistance through the country's National Social Protection Framework these schemes only cover a minority of people in need. As a result informal social security arrangements between families, neighborhoods or other communities tend to compensate gaps in the field of formal social protection, although their prevalence has been reducing due to industrialization, urbanization and globalization. Likewise connected to the decay of traditional arrangements of social protection is the increasing recognition of social work and its potential in contributing to the wellbeing of vulnerable and needy people. Social work as one means in the reduction of poverty has yet been officially acknowledged as one strategy in providing social protection and rights to vulnerable groups of society by Tanzania's NSGPR II. Although social work in Tanzania which has developed out of social welfare programs during colonial rule has had a relatively short history it has expanded its effectiveness in terms of social work education, organization and practice since colonial independence in 1961, not least under the influence of the United Nations and other institutions in the global North. Efforts to professionalize social work education and practice have not only been undertaken through the establishment of a Tanzanian Social Worker's Association (TASWO) in 2010 but also through the development of the Tanzania Emerging Social Workers' Education Program (TESWEP), which has been dealing with the standardization of social work training in Tanzania and has been defected to the Association of Schools of Social Work in Tanzania (ASSWOT) in 2012. As far as the refurbishment of its colonial roots and the influence of western social work paradigms regarding social work theory and practice are concerned, Tanzanian social work profession has not tapped its full potential yet. As has been found out

by the research project PROSOWO the prevalence of models used in social work practice in Tanzania is much higher for western oriented ones than for models which are locally based. According to results of PROSOWO a tendency to rely upon Western based models is also visible for social work theory, which causes the assumption that although local concepts do exist in social work practice, they are neither a content of research nor part of the academic training. This phenomenon does not only refer to Tanzanian social work but has generally been investigated for developing countries under the aspect of elaborating appropriate social work interventions. In this context the discourse moves from internationalizing trends and ideas of social work as being a universal profession to notions that social work must be contextually oriented and develop culturally relevant practice or integrate the principles of social development in order to be able to sustainably address the needs of people in developing countries.

With regard to the present master thesis, the term “appropriation of social work” will be used as it does in fact acknowledge the influence of western social work knowledge but does not forestall any preference in the discourse whether social work in Tanzania should follow the call for “indigenization”, “internationalization” or take up a developmental perspective in social work. It is rather the objective of the thesis and its underlying research activities to look at the issue from a different point of view by portraying the attitudes of Tanzanian social workers in terms of approaches which are considered as relevant in addressing their clients’ needs. By focusing on social work professionals and their views towards the appropriateness of social work approaches which they apply on a regular basis the master thesis aims at complementing results of the PROSWO project which has yet roughly investigated the kind and origin of social work methods through methods of quantitative research but did not analyze them in terms of relevance for social work professionals by using methods of qualitative research. In relation to current standardization and internationalization efforts which have been promoted by Tanzanian based organizations ASSWOT and TASWO the issue of investigating appropriate social work concepts in social work education demands additional relevance. The following section will provide details regarding the research methodology and the research procedure itself.

## **II. Research Methodology**

## **6 Description of research interest and research process**

Chapter six serves the elaboration of the research methodology which has been applied in the context of the present master thesis as well as the research process itself. The outline of the research question and its appending sub questions shall serve as introduction for the research methodology and its overall approach.

### **6.1 Research question**

The research interest of the current master thesis is based on the results of the PROSOWO project which identified social work profession in Tanzania both finding itself in overreliance on western based teaching materials regarding social work education (see p. 29) as well as being affected with a gap between social works skills in addressing poverty and social development that social workers indicated to have acquired during training and their lacking application in social work practice (see p. 30). Based on the international definition of social work (see p. 31) that it is a profession who seeks to enhance human wellbeing as well as social change and development the thesis does not only aim at investigating the nature of approaches which are actually applied by Tanzanian social workers<sup>2</sup> on a regular basis but also seeks to find out how these approaches are rated by social work professionals and social work educators in terms of relevance for addressing social work clients' needs. The research questions therefore is:

#### **Which approaches are relevant for the daily work routine of alumni of the Institute of Social Work when working in semi – urban Tanzania?**

Out of this research questions the following sub questions do arise:

- Which approaches do alumni of the ISW in semi - urban Tanzania use on a daily basis and why?
- What kind of relevance do ISW - alumni ascribe to the approaches they are using when it comes to addressing society's needs?
- What influences / characterizes the daily work routine of social workers in semi-urban Tanzania and how do they deal with it?

<sup>2</sup> Social workers thereby means professionals who have undergone the Bachelor Program in Social Work at the country's oldest training institution that is the Institute of Social Work in Dar es Salaam.

## **6.2 Research methodology**

The following section goes into the research methodology of Grounded Theory, which has provided the theoretical base for the Master thesis' underlying research activities. At the beginning of the research was a general interest for the work routine of social workers in Tanzania. The investigation thereby focused on a field which had except for basic research activities that had taken place in the course of the PROSOWO project neither been extensively studied nor offered the possibility of having a wide range of relevant literature to embed the theoretical concept of the research. In this context Grounded Theory with its focus on data offered the possibility to analyze the sense of what occurred in the research setting. (Charmaz 2014, p. 3) By referring to its principle of "reflexive openness" as far as the development of the research focus is concerned, Grounded Theory gives the use of scientific literature a rather collateral significance (Breuer 2009, p. 57). Furthermore it enables to keep the research design and research question relatively open for changes that might occur during the research process. Due to the fact that the research was conducted abroad, this flexibility did appear important to me in order to be able to figure out relevant things in the field.

### **Grounded Theory**

Grounded Theory as a scientific methodology has first been postulated by American sociologists Barney G. Glaser and Anselm L. Strauss in the late 1960s who promoted the "development of theories from research grounded in qualitative data rather deducing testable hypotheses from existing theories" (Charmaz 2014, p. 6). As a result Grounded Theory seeks to legitimize qualitative research as a methodological approach in its own right (ead. 2014, p. 8).

In the recent past the concept itself has experienced some extensions with regard to content. Constructivist Grounded Theory as it has been titled by Kathy Charmaz in 2000 insofar offers new aspects to the original model of Glaser and Strauss as it strives the constructivist element of research, meaning that research due to the involvement of researchers in the construction and interpretation of data must be seen as a construction of reality which takes place under specific conditions that researchers themselves may not even be aware of. As a result the reflection of the researcher's position, privileges and interactions does not only form an essential part in the course of the research process but also with regard to the elaboration of research results. (ead. 2014, p. 13)

As far as concrete methods in the context of Grounded Theory are concerned, they all underlie an inductive logic that seeks to use data for the construction of analytic categories. In this context Grounded Theory differs from general approaches in qualitative research which focus on the bare sorting of topics:

“Grounded Theory methods consist of systematic, yet flexible guidelines for collecting and analyzing qualitative data to construct theories from the data themselves... Grounded Theory begins with inductive data, invokes iterative strategies of going back and forth between data and analysis, uses comparative methods, and keeps you interacting and involved with your data and analysis” (ead. 2014, p. 1).

### ***Data collection and Theoretical Sampling***

In the context of data collection, the consistent exchange between data collection and analysis remains the characteristic element. Theoretical Sampling further describes the process of seeking pertinent data for emerging categories in order to refine its properties until no new elements emerge and categories are saturated (ead. 2014, p. 193). In the context of Grounded Theory this also includes the search for variation in order to refine existing categories (ead. 2014, p. 193). Although according to Charmaz (2014, p. 55) grounded theorists may use a range of methods to collect data, interviewing probably is one of the most popular ones. Intensive qualitative interviewing which focusses on the experience of research participants suits the concept of grounded theory as through its interactive character it offers the possibility for interviewees’ insights to emerge in the course of the interview (ead. 2014, p. 57).

### ***Data validation***

Similar to other approaches of qualitative research data validation within Grounded Theory also includes coding, which as link between data collection and the development of an emergent theory by explaining what is happening in the data (ead. 2014, p. 113). In order to analyze early codes in the course of the research process Grounded Theory suggests the writing of memos as an intermediate step between data collection and the composition of papers. Characteristic for the process of data validation within Grounded Theory is the analyzing of actions and processes rather than structures or themes. (ead. 2014, p. 162) As in the case of the current master thesis data validation has been applied using the scientific software ATLAS.ti. In order to avoid misunderstanding with regard to the numbering of interview transcripts, it is important to note that the eleven interview transcripts do not follow any specific order but run under the following numbers: 2, 5, 7, 15, 16, 17, 18, 19, 21, 23 and 25.

## **Coding**

Coding in Constructivist Grounded Theory as it has been formulated by Charmaz (2014, p. 113) consists of two phases: An initial phase which requires the nomination of words, lines or segments and a focused phase that seeks to sort and organize the most significant of frequent codes which according to the researcher can be explored as tentative categories.

## **Memo-writing**

Memo – writing means the composition of analytic notes about focused codes in order to construct and fill out categories. By offering the possibility of making comparisons between data and defining links between codes, memo writing puts the existing data in a more abstract context. (ead. 2014, p. 163f.) As far as the structure of memos is concerned, Charmaz (2014, p. 171) outlined a variety of possibilities such as focusing on the definition of analytic properties of a category, using empirical data to undermine an analytic category, sorting codes and categories as well as asking questions about categories which have evolved. Furthermore the writing of memos will also assist researchers in identifying gaps within the analyzed data and benefit the progress of the research (ead. 2014, p. 171).

Similar to Grounded Theory's approach of emphasizing a consistent exchange between data validation and data collection, it does also stand for an interpretative definition of theory which puts understanding in front of explanation (ead. 2014, p. 230). As far as theory construction is concerned this means that its focus especially lies on the meanings of actions of research participants. Due to its claim of seeking to understand what has been collected and analyzed, the recognition of a researcher's subjectivity forms an essential element in theory construction within Grounded Theory. (ead. 2014, p. 230)

## **Theory construction**

Grounded Theory offers different approaches to construct theory: From developing a category for substantive theorizing, challenging extant theory or extending extant theory with a new concept (ead. 2014, p. 248ff.). As far as theory construction is concerned, these three approaches share the perspective of symbolic interactionism, which as a sociological theory emphasizes on interpretation for the construction of meaning (ead. 2014, p. 273). Under reference to Herbert Blumer (1969 in ead. 2014, p. 273), Charmaz outlines that according to symbolic interactionism meaning is something which is not rooted within a certain object, but is attributed to an object by people, depending on what they do with it. As a result meanings within the understanding of symbolic interactionism are tied to practice (ead. 2014, p. 273.)

Due to the fact that much social life is characterized by routine, people act in social words and adopt societal values and act according to collective identities. Accordingly, people will not feel the necessity to change or modify their actions or meanings, unless they are confronted with challenges that cannot be tackled by their existing responses. (ead. 2014, p. 271) Charmaz (2014, p. 284) outlines the impact which symbolic interactionism has for Grounded Theory by stating that through its provision of a theoretic perspective “symbolic interactionism fosters the reflexivity grounded theorists aspire”.

In the context of the current master thesis, symbolic interactionism thus offered the possibility to analyze the relevance of social work approaches that professionals apply on a regular basis by focusing on the purpose and meaning which social workers ascribe to their daily work approaches in terms of addressing social problems.

### **6.3 Research planning**

Due to the fact that the research interest which lead to the present master thesis originated in research activities of the PROSOWO project, the exchange with Dr. Zena Mabeyo, the Tanzanian lead investigator in the PROSOWO project as well as ISW alumni who provided a first insight to the current social work landscape in the country constituted relevant aspects with regard to the planning of the research. The following section thus gives more detailed information about the composition of the research sample.

#### **Research sample**

As it has been outlined above, the research sample for the present master thesis has as far as its composition is concerned largely been influenced by the principles of *Theoretical Sampling*. Based on the general interest of investigating the daily work routine of social work professionals in the country, the research sample consistently defined itself in the course of the research.

#### ***Alumni of the Institute of Social Work***

The focus on social workers who had graduated at the Institute of Social Work in Dar es Salaam with its history of being the oldest social work training institution in Tanzania offered the possibility of analyzing an institution which had not only undergone major developments as far as the provision of social work education is concerned but also hosted a big number of students from all over the country. In order to curtail the target group of possible interview partners and gather comparable data, the focus was laid on alumni of the institute’s Bachelor program which has first been offered in 2006 / 2007 and therefore is one of the institute’s most recent programs. Although it was planned to focus on alumni of the Bachelor Program at ISW, circumstances

such as a lacking presence of ISW alumni during the field visit in Iringa Region as well as correspondents' lacking differentiation between the origin of academic degrees lead to the inclusion of social welfare officers who in one case had undergone a Bachelor Program in Sociology at the University of Dar es Salaam and in another case did not hold a Bachelor Degree, but an Advanced Diploma from ISW.

### ***Social welfare officers***

The term “social welfare officer” refers to the job profile which social workers perform when being employed by government institutions such as regional administrative secretaries, local government authorities and health facilities in Tanzania mainland. The fact that the research sample focused on the group of social welfare officers was based on the aim to minimize the influence of foreign knowledge which could have been set for NGO based social workers by foreign organizations or donors and might have had effects on social workers' daily work approaches. In order to be able to better carve out the characteristics of social workers who are working in semi-urban regions data from interviews with social work professionals in semi-urban Tanzania has been complemented and compared with empirical data from interviews with social workers in Dar es Salaam. As a result three interviews with social welfare officers from Dar es Salaam (two medical social workers, one social welfare office) and six interviews with social welfare officers from semi-urban Iringa region have been conducted, whereby one was employed in a hospital setting and the rest was working in the region's social welfare offices, holding positions from those of regional social welfare officers to regular social work practitioners.

### ***Social work educators***

The decision to interview social work educators did emerge in the course of the research, as a product of *Theoretical Sampling*. During data collection and data validation, it appeared that social workers felt that there was a gap between social work theory and practice which according to the interest of the research and its focus on the daily work routine of social work professionals needed to be investigated by obtaining the view of social work educators, not only as representatives of social work theory but also as key figures in the education of social workers. Hence interviews with two social work educators from ISW who both are involved in lecturing and the Institute's management have been conducted.

## Geographical region

According to the title of the present master thesis it was intended to investigate daily work approaches of social workers who are working in semi – urban Tanzania. The term “semi – urban” refers to the fact that in Tanzania out of its thirty administrative regions every region except for Dar es Salaam shows rural as well as urban characteristics (URT 2014, p. 19). According to Mabeyo et al. (2014, p. 19f.), there are no social workers who are employed up to the local level (e.g. village or ward) which is why they described social work in Tanzania as an urban or semi – urban practice. Research activities that took place in the context of the master thesis focused on social work on district level.

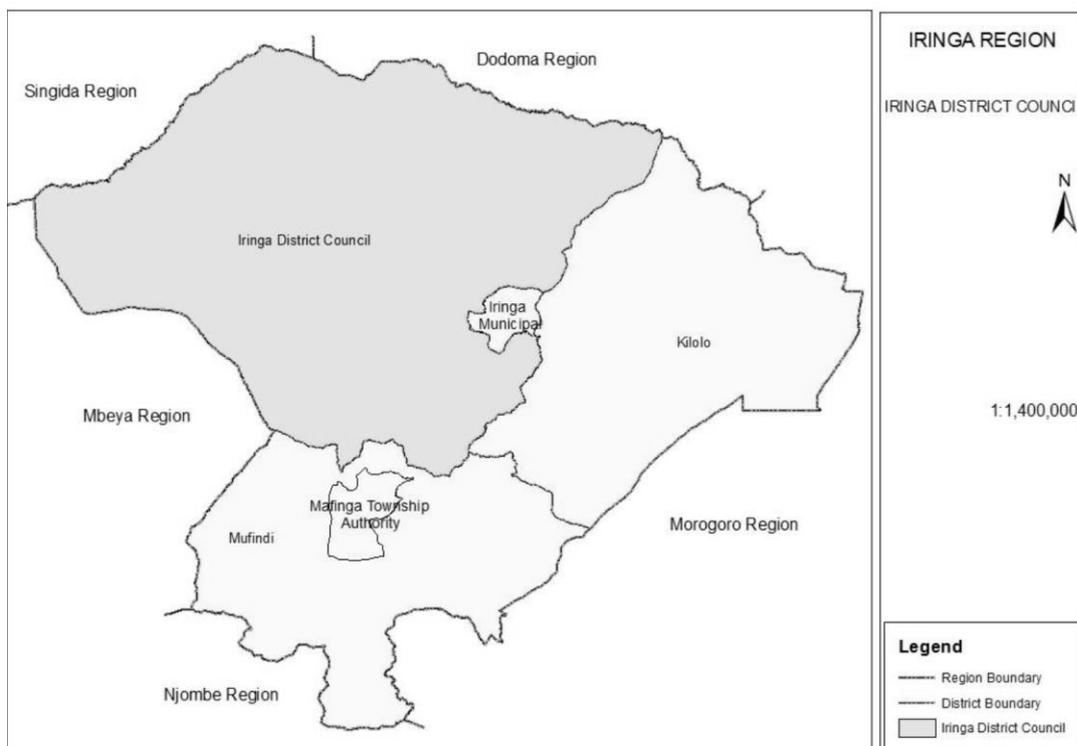


**Figure 6:** United Republic of Tanzania - Administrative Boundaries (URT 2014, n. p.)

### *Iringa Region*

In the course of the search for possible semi – urban research regions Iringa Region did not only seem appealing because of its comparatively small size and the clearly arranged number of 20 social welfare officers (see figure on p. 17) but also because of the fact that due to its severe history with HIV / AIDS it had been a focus region of international organizations, which again meant development in terms of regional structures and accessible written information. As it was planned to give a solid overview regarding the work approaches of social welfare officers of a certain district, a number of 20 social workers seemed to be manageable with methods of

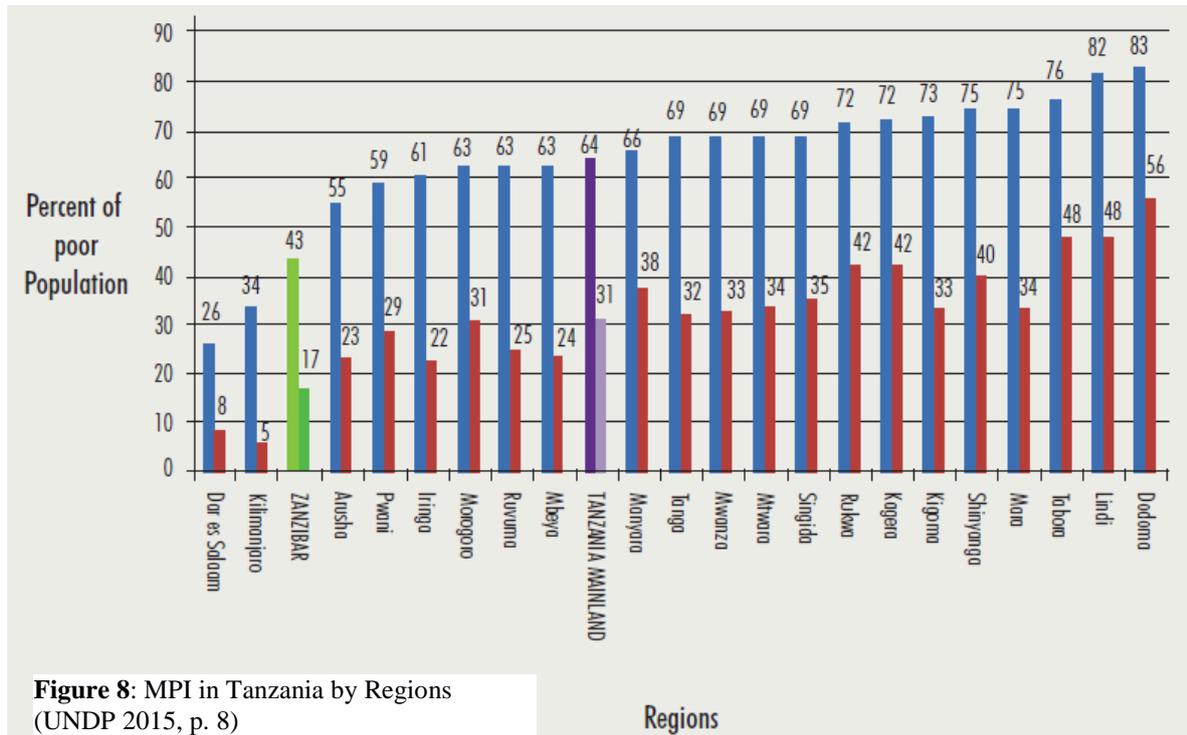
qualitative research, based on the assumption that this number would most probably reduce due to in acceptance with regard to the determined sample characteristics of the research. Iringa Region was established in 1964 when it replaced colonial Southern Highland Province. Back then Iringa Region consisted of Njombe District and Iringa District. Iringa Region reduced its size through the creation of Njombe as an independent region in 2012. As far as administrative districts are concerned Iringa Region is currently divided into Iringa District, Mufindi District, which was established in the 1970s and Kilolo District which was founded in 2006. The region's capital is Iringa Town. (id. 2013, p. 1) In the course of the research interviews with social welfare officers from Iringa Municipal as well as Iringa Rural District have been conducted.



**Figure 7:** Geographical Location of Iringa Rural District  
(URT 2013, p. 1)

According to the regional socio - economic profile which has been released by the regional secretariat in 2013 Iringa region with an annual population growth rate of 1.1 % between 2002 and 2012 is among the least growing regions in Tanzania mainland. In 2012 the region's population size was 941,238 (id. 2013, p. 14). In 2008 Iringa had a HIV / AIDS prevalence of 16 % and thus the highest prevalence in whole Tanzania. As by date 2012 the prevalence of HIV/AIDS in Iringa had decreased to 9.1 %. (id. 2013, p. 145) The dependency ratio between the economically active population and children as well as elderly people in the region has increased from 406,413 in 2002 to 440,616 in 2012 (id. 2013, p. 23).

As far as the ethnicity of Iringa region' inhabitants is concerned, the "Hehe" are the predominant ethnic group within the region (id. 2013, p. 12).



According to the 2014 Human Development Report for Tanzania Iringa was one of the seven regions which in terms of human development and regional variation performed slightly higher compared to other regions in the country (the other six regions were Arusha, Kilimanjaro, Dar es Salaam, Ruvuma, Mbeya and Tanga) (UNDP 2015b, p. 5). In terms of analysis the Multidimensional Poverty Index (MPI) was used which seeks to capture the overlapping deprivations that individuals face in standard of living, education and health (id. 2015b, p. 82). It thereby focuses on both, the incidence of non - income multidimensional poverty (the headcount of people affected by multidimensional poverty) and the associated intensity (the relative number of deprivations that people experience simultaneously ) (id. 2015b, p. 82). Figure 9 shows a countrywide comparison between regional poverty levels. The blue column shows the incidence of poverty in a certain region whereas the red column illustrates the prevalence of population in severe poverty. In this context MPI values have been calculated by using Tanzania Demographic and Health Survey data (NBS 2011) (id. 2015b, p. 6).

Although Iringa as well as Dar es Salaam come under the seven regions in Tanzania with the lowest percentage of poor people, the figure above clearly illustrates that compared to Dar es Salaam the population of Iringa Region still is much more affected by poverty (id. 2015b, p. 7). Dar es Salaam belongs to the country's most prosperous regions and is with eight % the fastest

growing city in the country. Although the rapid growth in urban population has challenged the supply of adequate housing and social services, according to the UNDP's Human Development Report of 2014 (2015b, p. 37), in Tanzania rates of urban poverty are considerably lower than rural poverty rates. This trend can be related to the fact that Tanzania's economic growth mostly is concentrated on urban areas and dynamic links between the urban and rural economy are lacking (id. 2015b, p. 37).

#### **6.4 Research methods**

As it has already been indicated above, the research oriented itself on the principles of Grounded Theory, which also influenced the choice of research methods. Due to the fact that the methods needed to offer the possibility to explore the experiences of social work professionals, the decision regarding research methods has come in favor of guideline interviews.

##### **Intensive interviewing**

Intensive Interviewing as it has been titled by Kathy Charmaz (2014, p. 55f.) refers to an approach which relates to the methodology of Grounded Theory and in contrast to other interviewing strategies such as informative and investigative interviewing does neither merely promote the gathering of accurate information nor the investigation of interviewees' hidden actions. It rather focuses on the experiences of research participants and on their thoughts and feelings about those experiences (ead. 2014, p. 57). In this context intensive interviewing due to its aim of understanding interviewee's language can be seen as a tool of interpretative inquiry (ead. 2014, p. 58). Although the interviewer is the one who with his / her questions affects the focus of the interview, it is the interviewee with his / her experience who first sheds light on the research interest. As a result intensive interviews will provide space for interaction between interviewer and interviewee as well as offer the possibility of adjusting questions or reacting to upcoming ideas during the interview. (ead. 2014, p. 59)

The interviews which have been conducted in the course of the research took between 40 minutes up to one and a half hours and were all recorded. The interview guideline for social work professionals had been developed out of the Master thesis' research interest, which was to investigate daily work approaches of social work professionals in Tanzania. In the course of the research the guideline has been modified and extended due to new insights that had been gained throughout interviews. The fact that access to the guideline which had been used to question social work practitioners in the PROSOWO project had been granted, was helpful insofar as it provided an insight into what kind of data had already been collected. As far as the

guideline for interviews with social work educators is concerned, it was based upon results of interviews with social work professionals.

## **6.5 Reflections on the research process**

As it has been mentioned above Grounded Theory strives the issue of subjectivity in qualitative research and thus requires a researcher to reflect about his / her role in the research, the research process itself and the data which has been gathered. In the following personal thoughts about the research shall be presented.

The research process itself was characterized by a series of stages: I lived through feelings of excitement and uncertainty with regard to the focus of the research at the beginning of the process as well as through feelings of frustration due to interviews which had not been rich in content or questioned the focus of my research in general. As by now I do perceive the process which I have gone through as a necessary development in the course of academic research.

### **Research methods**

Interviewing adequately enabled me to get an insight into the views of social work professionals. Yet the infrastructure of local social work practice challenged the principles of conducting interviews in qualitative research. Due to the fact that social workers' offices were relatively small and had to be shared among several colleagues, I was not always able to conduct the interviews without having a colleague listening to the conversation. In some cases I even had to conduct the interview outdoors which due to surrounding noises such as traffic did not only affect my concentration but also the concentration of interviewees in a negative way. Although all interview partners knew how to speak English, language barriers were present insofar as that especially in semi-urban Iringa Region I had to repeat or ease the formulation of questions during the interview.

As far as the application of research methods is concerned it was my intention to complement the data which had been gathered through interviews with information of participatory observations. The implementation of participatory observations turned out to be a rather difficult undertaking as again infrastructural reasons made it hard for me to sit and observe social work interventions. Social work activities in the context of outreach which would have offered me the possibility to accompany and observe social work professionals while they were relating to members of the local community did not take place during my week - long field visit. To my view now an adequate implementation of participatory observation as research method requires sufficient time to accompany the employees of one office for at least one week. This

again would have provided me with a relatively high amount of data which would have gone beyond the scope of a master thesis.

### **Research methodology and data validation**

The applicability of Grounded Theory as a methodology in qualitative research became feasible yet after I had conducted and validated a series of interviews, where the outlined role of social work educators for practically relevant social work training became apparent. This data did not only trigger the need for theoretical sampling but also slightly shifted the focus of the research. As far as data validation is concerned the process of coding and sorting data felt to me as an intense task because according to Grounded Theory every piece of data first had to be validated on its own before it could be used to complement the data which had already been gathered. In practical terms this would have meant to transcribe every interview right after it had been conducted. Whereas I strictly followed this guidelines in my first two interviews which took place in the city of Dar es Salaam I had difficulties to repeat the procedure during my one week field visit to Iringa due to a busy schedule and the fact that either I conducted two interviews per day or the meeting with interviewees itself took longer than planned. In that case I resorted to the method of listening to recordings in order to filter relevant topics for the following interviews. Nevertheless, reflecting on the research process retrospectively, the approach of going forth and back between data collection and data validation offered me the opportunity to develop theoretical categories which are purely based upon empirical data and my systematic analysis about it, which is why to my view Grounded Theory has proven itself as adequate methodology for my research.

### **Role of researcher**

As far as my role as a researcher is concerned I find it important to note that my past experiences within the country and my professional background as a social worker were helpful in relating to the living environment of social work professionals in Tanzania. Although my interview partners and I had a different background and were working in a different setting, I felt as if I was talking to colleagues in the broader sense. Furthermore I was able to identify myself with issues such as setting boundaries regarding clients' problems or clients' claim for assistance that were brought up by them during the interviews and from what I see social workers all over the world face in their daily work practice. Although I did not plan to compare social work practice in Tanzania to Austrian one, I found myself thinking about the relevance of relationship building in social work practice and the way how social workers relate to their clients in Tanzania and how that was different from what I had experienced in Austria so far. I believe

that my insider knowledge regarding social work practice did not only assist me in capturing the professional context where the interviewees were working but also fertilized the analysis of the data collected.

### **Research results**

Before taking a closer look at the outcome of the research, it shall in dependence to Grounded Theory be indicated that the research results in the following chapter are the product of my subjective interpretation and also need to be seen in connection with the given context of the research. The fact that I as a foreigner came to investigate daily work approaches of social workers in semi-urban Tanzania, surely influenced the answers of my interview partners in a different way than the presence of a local researcher would have done. When asking social work practitioners about their experiences as far as social work training at ISW is concerned, the majority showed themselves reluctant, finding it hard to reflect about what they had learned during training or even mention suggestions about what could be done to improve social work training. It seemed that irrespective of three interview partners who besides their professional background of being a social worker were also involved in the planning of social work activities which applied for social work educators and one practitioner, I had the impression that interviewees had not shown much personal interest for the topics such as the one of my research. My assumption concerning this issue is that due to the general hardship that social workers face in their daily work, they do not have enough time and motivation to deal with initiatives which take place on an academic level. Nevertheless throughout the interview my questions seemed to trigger reflection on their part, so that in the end interviewees became engaged into the topic and as far as social work practitioners are concerned they all asked me to share their suggestions towards an improvement of social work training with academic training institutions in the country. An intense search for possible reasons concerning this reservation would have gone beyond the scope of my thesis. Still the question which factors influence a person's willingness to critically examine societal institutions such as schools or academic institutes could in this connection generate revealing results.

Generally the experience of field research illustrated that in order for social work training in Tanzania to improve its effectiveness in addressing social work clients' needs, academic developments must primarily be accelerated by social work educators as they in their assignment of academic teaching indeed do not have ideal, but compared to practitioners the better requirements to deal with the future of social work profession.

## **III. Research Results**

## **7 Characteristics of Iringa Region and problems of social work clients**

Before focusing on the social work approaches which have been applied by practitioners to address social work clients' problems in Iringa Region, a discourse on how the region and its inhabitants' problems are characterized by social workers themselves shall lay the foundation for discussing the relevance of social work approaches applied. In this context empirical data of the research has been complemented by data from the Iringa Socio-Economic Profile, which was compiled by the Regional Secretariat in 2013.

As what has appeared through the research, social welfare officers apart from conducting activities that are focusing on the whole community mainly deal with four different target groups that is families and couples, vulnerable children, elderly people as well as people with disabilities. The following sections introduce the major problem situations that affect social work clients.

### **Prevalence of HIV/AIDS**

Although the prevalence of HIV / AIDS has decreased from 16.1 % in 2008 to 9.1 % in 2012 social workers who participated in the research indicated that the unofficial number was much higher (Quote 16:52). As far as HIV/AIDS is concerned social workers pointed out that as far as they have observed the disease mostly spreads within married couples whereby it is the men who tend to infect their partners through their promiscuous behavior. In this context social workers in Dar es Salaam traced the problem to the practice of polygamy which is still common in Tanzania (Quote 21:10). Social workers in Iringa amongst other things relate the spread of HIV/AIDS to an extensive consumption of alcohol and the subsequent engagement in risky sexual activities as well as to levirate marriages as they have been practiced within customary law among the Hehe community (Quote 7:51; 7:61):

"In Hehe culture, a widow can be married to her brother in law without knowing about it....I see it there in some wards...many people do like that...a husband dies and another relative is going to marry that woman without knowing the status of each other... (ibid.)".

According to the Iringa Socio - economic Profile of 2013 another possible reason for the rapid spread of HIV/AIDS within the region could be connected to the fact that economically, the people of Iringa Region are migrant laborers and industrialists who do business in various parts of the country, which would make it easy for them to engage in romantic relationships. (URT 2013, p. 150)

Social workers in Iringa Region believe that a lot has been done in the past to increase awareness regarding HIV / AIDS and although it is still a big problem in the region, they feel that the problem is being tackled. This is in contrast to problems such as GBV which also interconnects with the spread of HIV/AIDS but has not received as much attention as HIV/ AIDS, whether in social work training nor in the development of social work strategies. (Quote 19:36)

## **Community structures and practices**

### ***Social Solidarity***

As far as characteristics of Iringa Region are concerned social workers also reported of community structures as being characteristic for the residents within the region. In this context a lack of social solidarity within the population of Iringa Region was mentioned as a crucial factor for the emerging and handling of social problems. By comparing ways of problem solving between residents of Iringa Region and communities of other regions social workers detected that in Iringa there was no tradition of addressing problems as a group but rather leaving it up to individuals or families to deal with problems on their own. (Quote 16:34) Social workers give the high rate of orphans and most vulnerable children in the region as an example for their observations that the extended family is not working in the region. Although according to social workers' accounts most of the children still have relatives who could take care of them they are left alone due to the lacking social solidarity within the community.(Quote 16:35; 16:37)

Closely connected to the problem of lacking social solidarity is the habit of not discussing social problems openly, which has also been listed as characteristic of Iringa residents by social welfare officers in Iringa. Due to societal stigma families would refuse to discuss openly about problems and remained suffering with problems on their own. As a consequence social workers would try to educate the community about the importance of social solidarity within a group. (Quote 16:46)

### ***Societal stigma***

Societal stigma due to intolerance of dissenting ways of life has been mentioned as another factor influencing social work clients to seek for assistance in a stage where their problem has become serious, even in big cities such as Dar es Salaam. According to social workers stigmatization happens in the context of homosexuality, HIV/AIDS or mental diseases.

Especially in the case of diseases such as HIV/ AIDS social workers have to deal with people who are affected by the disease but refuse to make testing and continue to spread the disease in order to avoid societal stigma. (Quote 21:30)

The issue of societal stigma can also be found in the case of social work clients who are affected by mental illnesses (Quote 5:13). A social worker working in a hospital in Dar es Salaam reports of clients who are being rejected due to a lacking understanding towards mental illnesses in the community:

"the community they call them names...ok like insanity, that this is an insane...those bad names...so in Swahili we have names like kichaa, pungwani, chizi...so those words are abusive ones...so it happens now when someone got the problems of mental illness because in the community those sickness is something which is totally bad, that if you're sick from such a disease you're not a normal human being" (Quote 5:35; 5:36).

The social worker perceives the lacking understanding in the community as a challenge because patients who are being affected by societal stigma tend to deny their disease in order to calm down harassment against them (ibid.).

### ***Ignorance***

Ignorance refers to the behavior of social work clients seeking for assistance relatively late, often with a problem dramatically advanced. Due to the fact that clients do not know where and how to get help, social workers need to deal with serious problems. (Quote 21:30)

### ***Female Genital Mutilation (FGM)***

In the context of clients' problems and difficulties faced by social workers due to a community's local practices social workers also mentioned the issue of female genital mutilation. Although social workers believe its prevalence to be quite low<sup>4</sup>, they assume that women affected do not seek assistance in order to avoid societal stigma. (Quote 7:54)

4 According to UNICEF (2016, n. p.) in Tanzania 15 % of girls and women aged between 15 and 49 have undergone FGM between 2004 and 2015. See [https://www.unicef.org/media/files/FGMC\\_2016\\_brochure\\_final\\_UNICEF\\_SPREAD.pdf](https://www.unicef.org/media/files/FGMC_2016_brochure_final_UNICEF_SPREAD.pdf) for more information.

## **Consumption of local brews**

In Iringa Region people are used to consume a periodic brew called "Ulanse" which social workers see as cause and cumulative factor for several social problems (Quote 16:49; 19:40):

“Most of the time, they drink Ulanse...they go to local clubs, they drink Ulanse, they don't want to work...you know it's easy to make Ulanse, because there is a tree, some tree...everywhere, so Ulanse...you cannot get anything from Ulanse as a business...so they end up drinking Ulanse, having many children...how can you take care? Most of them who are taking care, are mothers...men they are so difficult...what I know for the short time I live here in Iringa...(Quote 17:59)”.

Social workers see an interrelation between the consumption of local brews and the neglect of children as well as the low economic status of the region itself (Quote 16:50; 18:6). In addition to this they also relate it to the spread of HIV/AIDS in the region as the enormous consumption of the strong alcoholic drink would let people to engaging in promiscuous behavior and unprotected sexual activities (Quote 7:47).

## **Vulnerable children**

The group of so called vulnerable children forms one of the major groups of social work clients. Vulnerable children comprise orphans, children living in poverty, children who are victims of violence, children denied education, and children denied food or support by their family or relatives. (Quote 7:9)

The issue of vulnerable children is closely related to the high number of HIV / AIDS infections within the region. Widowed single mothers who lack maintenance for their children (Quote 7:43) as well as a large number of orphans, would according to social workers pose children in risk of easily becoming neglected, getting involved with child labor or end up as victims of human trafficking (Quote 7:21, 7:22). The seriousness of this problem is illustrated by the following quote of a social worker who is working in Iringa Region:

“...also there is a case of abuse...so many children are abused...like rape because the time the children being at home, their mother or father is not there...maybe they are at Ulanse club...so many children in this region are at risk...so some people who have bad behavior can pass there and rape a child...because there is not enough protection for that child...according to the role of the child act all children are in need of protection but without doing so all children are at risk...(Quote 18:11)”.

**Street children** form a special group within the group of vulnerable children, because as highlighted by social workers in many cases they are either orphaned or if still connected to a family, affected by poverty due to a divorce of their parents or disabled parents. Street children are according to the experience of social workers in danger of getting harmed, abused, affected by HIV/AIDS or pregnant. (Quote 21:7; 21:15; 21:18) According to the 2002 Census the orphanage rate in Iringa has been 2,58 % (id. 2013, p. 36).

Social workers reported of difficulties when trying to assist them for example by providing with a shelter and the possibility of going to school again, as a majority of the children would repeatedly reject this kind of support and prefer to stay on the street. Social workers assume that the children are used to living a migrant life and know the possibilities of making money. (Quote 21:16; 21: 17)

With regard to the group of vulnerable children, social workers also mentioned **children who have gotten in conflict with the law** as according to their experience those children tend to be stigmatized by the community (Quote 18:24; 18:26).

### **Family conflicts**

According to one social welfare officers interviewed family conflicts are the point of origin for a series of other social problems: "...so we have many issues but lots of them family conflicts...it is the root cause of all this ...."(Quote 21:10) Family conflicts include parenting issues, marital conflicts as well as the administration of affiliation cases (Quote 21:3). As far as conflicts between parents and children or child neglect are concerned, social workers reported that according to their experience child neglect often goes along with conflicts between couples. According to social workers' experience husbands are found to be the conflicting figure within a family, either not willing to take care of their paternal duties or having more than one wife / family and therefore neglecting the other.(Quote 21:8; 21:9)

### ***Maintenance related issues***

As it has been reported by social workers, maintenance related issues often result in child neglect as single parents, mostly mothers, due to a lack of income cannot afford to take care for their children properly (Quote 7:16; 7:43).

### ***Gender Based Violence (GBV) / Couple conflicts***

Couple conflicts generally underlie issues of maintenance, affiliation or matrimony. In some cases social workers also need to deal with marital conflicts (Quote 18:34). Apart from that, social workers also reported of a high prevalence of GBV whereby the forms of violence would differ from psychic violence to sexual violence (Quote 15:18).

### **Elderly people**

Elderly people<sup>3</sup> in many cases due to their physical inability of acquiring an independent income form a group who is living in precarious circumstances, which is reinforced through an increasing fragility of family systems in developing countries (Quote 18:14). As a result of poverty and physical degradation they are in risk of being excluded from the community and not being able to pay for their medical treatments (Quote 18:16).

### **People with disabilities**

Similar to elders, people with disabilities are not only confronted with societal stigmatization but also destitution. This makes it difficult for them to acquire equipment such as canes and wheelchairs for transport and daily routines (Quote 18:18; 21:44).

A special case within the group of disabled people is formed by people who are affected by albinism. Cultural beliefs attributing spirits to the body parts of persons concerned, set them in danger of violent attacks and murders. (Quote 7:12)

### **Diseases**

Common diseases such as cholera pose a recurrent problem to residents of Iringa Region (Quote 7:53).

<sup>3</sup> For further information regarding the living conditions of elderly people in Tanzania see Spitzer, Helmut / Rwegoshora, Hossea / Mabeyo, Zena Mnasi (2009): The (Missing) Social Protection for Older People in Tanzania. A Comparative Study in Rural and Urban Areas. Final Report.

## **7.1 Summary**

The first section served the elaboration of social work clients' problems and needs. According to social welfare officers interviewed Iringa region is characterized by low economic capital which shows itself in a lacking infrastructure and the importance of subsistence farming as source of income for inhabitants.

With 9.1 % (2012), Iringa's prevalence of HIV / AIDS is one of the highest in Tanzania. Although efforts from international donors in line with the local government have been able to slightly reduce the spread of the virus, the disease has not only created a big number of orphaned children but seriously afflicted family cohesion within the region. Generally social solidarity within the communities in Iringa region has been illustrated by interviewees as merely existent and rather fragile in nature, which in a context where there was no comprehensive social welfare system would have severe effects on the handling of social problems.

Habits such as inhabitants' periodic tendency to extensively consume the local brew called "Ulanse" have not only been related to promiscuous behavior among the local community but also to unsafe sexual practices and the spread of sexually transmissible diseases.

As far as social work clients are concerned, social workers mainly work with four groups, that are families and couples, children, elderly people and people who are living with a disability. In terms of problems social welfare officers reported of poverty that is believed to be affecting all groups of clients but becomes especially apparent in a medical setting, when clients cannot afford to pay for their treatment or medication. Next to non-communicable diseases bacterial diseases such as Cholera would consistently pose challenges to the inhabitants of Iringa region.

In the context of family conflicts social workers deal with maintenance related issues, domestic violence as well as vulnerable and neglected children whereby they highlighted the connection between child neglect and the consumption of local brews. As far as gender based violence is concerned, social workers rated its prevalence to be rather low.

Societal stigma within the local community would pose a big problem to clients which was why disabled people or clients who were infected with HIV / AIDS would hesitate to seek for social support.

## **8 Daily work approaches of social workers and their relevance in terms of addressing social work clients' problems**

The following section gives insight into the daily work approaches of social workers in Tanzania and its relevance in terms of addressing the problems of social work clients. During data validation three main clusters with regard to approaches applied have emerged: Approaches in the context of resource mobilization, approaches in the context of psychosocial support and approaches in the context of administration.

### **8.1 Social work approaches in the context of resource mobilization**

"...so resource mobilization for a social worker in this kind of country it should be a number one priority because most of the things we do are not regulated by a public policy, that's one, but even those which are regulated are not budgeted, there is no money for those kind of staff" (Quote 2:83).

Social work approaches which practitioners use in order to acquire financial or material resources for their clients can be counted among the most prevalent approaches that are used on a daily basis. As it has been pointed out by social work practitioners, resource mobilization is necessary due to social work clients' socio - economic problems and the lacking social welfare system in the country. As it has been put by one social worker: "...you can find that 95 % of presented cases are resource related problems (Quote 2:107)".

With regard to the reasons for the low economic capital that is available in Iringa region, the dependence on subsistence farming with simplistic tools as well as the relatively high consumption of local brews such as "Ulanse" were listed by professionals. This assessment corresponds to data of the Region's Socio - economic Profile where it says that almost 98 % of the economically active population in the region is engaged in agriculture (id. 2013, p. 30). As far as the perception of social work professionals with regard to poverty among their clients is concerned, views of professionals from the city of Dar es Salaam and professionals of semi-urban Iringa Region do differentiate. While professionals in both urban and semi - urban areas observe precarious financial situations, social workers in Iringa witness a more extreme disadvantage towards their clients due to reduced availability of sources of income.

Due to lacking funds resource mobilization in many cases seems to be the only perspective for social workers to improve their clients' situation. As far as concrete approaches within the context of resource mobilization are concerned, social workers highlighted the importance of being creative in order to compensate the lacking social welfare system. They therefore use a range of interventions to mobilize resources for their clients which can include dealing with social welfare economics in order to plan certain strategies as well as extensive lobbying to local government authorities. (Quote 19:47) Interventions thereby differ depending on a social worker's sphere of activity. Whereas medical social workers who work in hospitals mainly deal with acquiring financial assistance for patients to afford medical treatment, social workers in social welfare offices seek to address a broader scope of resource related problems, which amongst other things includes interpersonal conflicts. (Quote 2:14; 2:42; 2:87). Although in the context of Iringa Region social workers highlighted poverty as one problem which is affecting all social work clients, it has been observed to cause problems in other areas of life such as relationships between couples or the raising of children. (Quote 21:28)

### **Involving family and community members**

The "involvement of a client's family and community" is applied by social workers in order to compensate lacking benefits from public authorities and enables them to assist their clients without having to resort to external stakeholders such as religious institutions or wealthy private donors (Quote 2:20; 2:56). As the statement below shows, the involvement of family and community members as an attainable possibility for resource acquisition has an enormous relevance for practitioners in terms of addressing their clients' social problems:

"Most of the problems we face or the clients face in the hospital, can be solved if the community or the family is like tight together... I will repeat... 'This is Africa-people depend on family or whatever support than on system support'...so if the community, family relatives are being informed, educated, reunited, together from the beginning, most of the problems or challenges to the patients can be solved " (Quote 2:116).

The success of social work interventions however, depends on the relationship between a client and his relatives. If the relationship is stable the client is more likely to receive some kind of support, either by taking care for ill clients or if the family has economic resources also financially when assisting to pay for their medical treatment. (Quote 2:54). In cases of fragile relationships among relatives, the **strengthening of family networks** or **reuniting of family members** thereby forms a major part of social work activities.

Accordingly the assessment of a client's living situation and family network belongs to the first steps social workers will undertake before seeking to acquire resources from other stakeholders (Quote 2:85). Although social workers of Iringa did not provide exact numbers with regard to the prevalence of fragile family networks, which according to corresponding literature has been said to have increased within the last decades (see p. 20), they have experienced the high poverty rate and the hence resulting dependence of social work clients' upon family members as far as the provision of essential features for homemaking is concerned as severe challenge within the community (Quote 17:60):

“Most of them are dependent...maybe a family has one child who is at least well off, or has income, they don't want to work...they sit and wait for that person to provide them everything...it's a big family and they depend on that person...that's not easy for that person to take care of those family...because someone is working, they depend on that someone...they are so dependent...” (Quote 17:60).

According to social workers interviewed involving a client's family through the organization and leading of family conferences or couple counselling, puts social workers in the position of an intermediary (Quote 5:16; 5:17; 5:23; 5:28). In the context of maintenance issues for example social work practitioners offer a neutral base for financial transactions and the only opportunity for single parents to receive regular maintenance from their ex - partner in order to take care for their children (Quote 7:35).

## **Outreach**

Assumed that the client agrees, social workers will make use of various interventions to strengthen a client's family or community network. In the context of **outreach** social work activities range from personally communicating with family members as well as conducting home visits or institutional visits such as to schools (Quote 2:136; 2:131). Apart from strengthening family cohesion, the aim of home visits can also be to engage relatives in health education in the case of a mentally ill clients or following up on former clients (Quote 2:128; 2:129; 5:19; 2:137). As far as social workers who work in a medical setting are concerned, outreach also includes initiatives of conveying a client in the case of repatriation when he / she is from far away and there are no family members available to pick him / her after the hospital stay (Quote 5:19). According to one practitioner the decision who is going to convoy a patient will rather depend on the patients' disease and health status. In the case of young children or people affected by mental illnesses convoys will most probably be done by specially trained nurses whereas social workers are the ones who organize the convoy. (Quote 17:27; 17:28; 17:29)

In the context of street children who have been abandoned from their families or community outreach rather forms a method on its own, assisting social workers to get in contact with their young clients. Although street children primarily are a phenomenon of urban regions such as Dar es Salam, they can also be found in Iringa Region, where infrastructural modernizations such as the construction of a road between the cities of Iringa and Dodoma has been observed to have led to an increased number of beggars and street children alongside the municipal (Quote 16:41; 18:3; 18:6; 19:10). Due to rural - urban migration social workers in urban parts of Tanzania such as Dar es Salaam but also Iringa Municipal are confronted with cases where clients show up who originate from semi-urban or rural parts of the country.

### **Networking**

In Dar es Salaam a cooperation between social welfare offices and the police enables social workers to officially register street children and gather information regarding their situation. (Quote 21:14) According to the experience of social workers in Dar es Salaam a big number of street children have their origins in rural areas of the country. In the course of investigating the children's origin and family situation social workers therefore resort to means of **networking** with local government authorities and colleagues from the social welfare offices (Quote 21:22). In this context networking, as it has been describes by social workers interviewed, does not only serve the exchange of information but also aims at handing over responsibilities in dealing with certain cases, which mostly involves reuniting abandoned children with relatives in their home region. (Quote 17:27; 17:31; 21:22) Although cooperation between professionals in different regions take place, interviewees acknowledged the fact that there is a need of establishing a refined communication system between social workers who are working in urban regions and social workers who are reaching out to the ward or village level. When asked how to improve existing mechanism of cooperation, social workers did not list suggestions regarding the duties of social work professionals, but outlined the necessity of creating additional job opportunities for social workers in more rural regions. (Quote 2:119)

### ***International organizations impacting on social work practice***

Before making an intervention such as reuniting children with their relatives, social workers make an assessment regarding the family's current living situation. In the case of a family not being able to care for a child due to economic hardship, social workers in Dar es Salaam can, in contrast to practitioners in Iringa which lacks a comparable social infrastructure, refer

abandoned children to a children's center. (Quote 21:27) Iringa's social workers as a result do resort to international organizations such as UNICEF instead (Quote 7:39).

With Iringa being a focus region for UNICEF's child protection activities, the organization has contributed to the establishment of a network which is concerned with child protection activities in the region. As for now social workers are cooperating with stakeholders such as the police, juridical institutions. NGOs and private institutions which are providing care for children (Quote 7:10; 7:14; 7:23; 7:29). Social workers of Iringa Region pointed out that to their experience networking with NGOs or other stakeholders was necessary due to the fact that government did not have enough resources to address vulnerable groups on its own (Quote 18:19; 18:20; 18:32; 18:47).

As far as the impact of UNICEF is concerned, social workers mentioned an improvement of the collaboration between different stakeholders in the region whose bureaucratic infrastructure is characterized by a legally fixed task sharing among different authorities (Quote 17:50). The founding of so called *child protection teams*, whereby representatives from different professions (social welfare, teachers, police, medical staff and so on) work together for the protection of children has had a positive impact on their daily work of social workers: It did improve the exchange between the stakeholders who are dealing with issues of violence against children but also brought together representatives from different professions outside of social welfare, which resulted in making them feel more responsible for VAC and not just leaving their problems to social welfare officers. (Quote 18:43; 18:44) Due to the provision of funding from UNICEF social workers have not only been able to participate in trainings on violence against children (VAC) and increase their awareness on this issue but were able to pass their knowledge on to community members. (Quote 18:7; 18:41) The fact that UNICEF also provided financial support for social work activities enabled social workers to assist vulnerable children and their care takers with food and clothes. Social workers experienced the availability of material resources as an improvement towards the effectiveness of their interventions by having been able to reach out to a larger group of people (Quote 7:66). When asked about the collaboration with UNICEF, social workers experienced activities of UNICEF as a revaluation of social work profession within the region. Apart from the increased resource management, the fact that UNICEF prefers to collaborate with trained social workers, has led to an improvement of social workers' status not only among local government authorities but also within the community. (Quote 16:103; 16:104; 16:105)

Social workers have also realized the benefits of networking as far as the establishment of sustainable connections between social welfare officers and decision makers at regional level in terms of lobbying is concerned (Quote 16:60; 16:61 16:63). Apart from assisting in the mobilization of resources for social work clients, networking with policy makers and local government authorities also impacts on the way how social problems are tackled in the region:

"...as you can see with HIV/AIDS a lot of organizations are engaged to ensure HIV is reduced or removed but the nature of some problems cannot be removed by a single individual and that's also a value of the importance of human relationships ...the collaborative system in addressing human problems..." (Quote 16:21).

In the context of challenging unidirectional flows of knowledge from western countries to countries in the global south, the positive experience of social workers in Iringa Region regarding the collaboration with international organizations illustrates the needs of social work practitioners as far as social work practice is concerned. Within the framework of collaborating with international organizations, social workers seem to put the accessibility of resources for social work practice in front of the examination of imported social work knowledge or social work approaches. The fact that social workers feel independent as far as the planning of concrete social work interventions and approaches is concerned has additionally contributed to their positive experience with UNICEF. (Quote 16:107)

### **Lobbying / Advocacy**

In the context of resource mobilization lobbying is closely linked to the approach of networking as in most cases networking lays the foundation for activities which focus on achieving financial or moral support for social work clients. The relevance which lobbying has in social work practice has been highlighted by a social welfare officer: "...mostly...it's all about lobbying...if you can't lobby, then you sit on the table and do nothing...." (Quote 2:103).

As far as lobbying is concerned it includes direct as well as indirect social work interventions. While direct interventions focus on clients and their environment, indirect interventions include measures in order to establish stable public or private partnerships with companies, influential individuals and faith based organizations, (Quote 2:56; 2:112; 2:175) In this context lobbying must not obligatory be done according to a current case but can also occur as **a preventive measure** through the writing of proposals that are sent to influential individuals and organizations under the guise of corporate social responsibility (Quote 2:109). In order to do lobbying properly social workers thereby highlighted the importance of a comprehensive

assessment: "...before that social workers must be connected...to see where this person belongs, relatives and whatever and then you can write a letter..." (Quote 2:57). The cooperation with media representatives as measure to lobby for the needs of social work clients and gain funds from the community is another tool which social workers make use of in the context of resource mobilization. In this context dilemma can arise due to a conflict of interest on the part of social workers who on the one hand need to find ways of acquiring financial assistance for their clients but sought to protect their privacy on the other hand:

"...there is a conflict of interest like the profession itself, issues of confidentiality, dignity of the patient and also the issue of the media house itself...I want to sell my newspaper, so I just cannot do it whatever so they choose, I need this patient, - maybe it's because he is seriously ill, his bad history or whatever..." (Quote 2:114; 2:115).

Nevertheless, social workers outlined that they prefer to acquire resources from private donors who can offer diverse means of support without requesting formal applications. Accordingly, one social worker told about her experiences with a private donor whom she frequently asks for support as far as her social work activities are concerned:

"Myself, I find my friends from Switzerland and I do communicate with them and as tomorrow, we can go together and we can provide them [children with albinism] facilities like sun burn lotion, glasses...caps....so I am trying to fight as me...this is depending on how you are feeling on helping people because the government they don't have money, so you can find other links of helping them...some of them helping me as a told you, I have a friend from Switzerland and she is good hearted...she wants to initiate a center and the aim of that center is to help people who are disabled"(Quote 21:45; 46; 47).

The tendency of making use of private connections in order to acquire financial assistance for clients instead of resorting to local government authorities or representatives of NGOs, illustrates the behavior of **avoiding system challenges** among social work professionals:

"Most of the NGOs have bureaucracy...when you need something and at last maybe you can get or not...so promise a person that maybe I can help you and at last you fail, you better keep quiet...because you can give all hopes and at last you don't help her/him...maybe you embarrass him..." (Quote 21:62).

If social workers decide to resort to public assistance, they make their claims according to social welfare regulations which have been released by the government. The way how legal regulations are used and referred to in social work practice differs according to a social worker's work place. Whereas social workers who are working in social welfare offices use laws in order to educate community members and inform clients about their rights, medical social workers working in the regional hospital mostly use it for regulating payment issues.

### ***Exemption policy and its regulation of payment issues in the medical setting***

In the context of social workers who are employed in a hospital lobbying primarily serves **as means to receive a cost allowance** in cases when clients are not able to pay for their medical treatment, which according to social workers interviewed concerns the majority of patients (Quote 2:17; 2:18; 2:28). After having gathered relevant information about a client's situation and his / her inability to pay for medical bills, social workers have the possibility to pose an exemption request to the hospital management: "you write like to the hospital management...this person is supposed to pay this much but through the assessment and the report I just documented here, I think she cannot even afford..." (Quote 2:50). As far as legal instruments are concerned, social workers refer to the country's policy for health care fee waivers and exemptions, which they informally call *exemption policy*. The policy as its name indicates, ensure access of health services to the poor and vulnerable members of the society and was introduced by the Tanzania Ministry of Health in 1994. Exemptions are statutory entitlements that are automatically granted for all maternity services, children under five years and particular diseases such as TB/Leprosy, HIV/ AIDS and some chronic diseases that would drain substantial income from the patients if such patients were asked to pay. (Maluka 2013)

The national exemption policy does indeed enable social workers to address financial issues of their clients but poses a challenge in their daily work as far as its implementation is concerned. Due to the big number of patients who meet the criteria of exemption, hospitals run under loss and aim at installing services which need to be paid by patients. (Quote 5:34) Medical social workers accordingly experience their daily work routine as being characterized by a lacking implementation of laws and a lacking mandate to provide for patients in need of medical support on the part of the hospital. In this context they take the hospital's denial to treat HIV positive patients who seek medical assistance due to conditions that are independent from their chronic disease and are virtually obliged to exemption as proof for a congestion of medical institutions with regard to implementing legal regulations. The fact that these patients were forwarded to an NGO - run institution which is specialized on treating people who are affected by

HIV / AIDS in the region, again illustrates the lacking serviceability of the governmental social welfare system. (Quote 17:44) Apart from that also real life conditions such as the unavailability of prescribed medicine in semi-urban regions of the country challenge the feasibility of the policy and its implementation (Quote 17:10; 17:11)

### ***Lacking exhaustion of social workers' competences***

Although exemption policy offers medical social workers the possibility to assist clients without having to overcome bureaucratic barriers, they feel limited by its overrepresentation in their daily routine and prevailing regulations in the hospital setting which determine their job profile. Social work practice in Iringa region is defined by the region's schedule of responsibilities with regard to the provision of social welfare services. In the case of clients who as patients of the hospital primarily face social issues, practitioners are obliged to refer clients to the regional social welfare department. As a result medical social workers end up, not being able to apply their knowledge which actually exceeds the mere addressing of financial shortages and the application of exemptions concerning clients' medical bills:

"Somehow it's different; It makes us to stand on that only according to management what they want us to do as social welfare officers here in the hospital...there are barriers which makes us not to move forward...we can because we have knowledge, but the settings and the environment they don't allow us to do that...so we have to make referrals, a lot of referrals to other social welfare officers out there..." (Quote 17:52).

### ***Success in social work practice and the investment of personal resources***

The aspect of division of tasks within social welfare officers in Iringa also appears as far as the social workers' engagement in resource mobilization is concerned. In contrast to colleagues from the social welfare office who due to their broad area of responsibility experience a strong commitment as far as resource mobilization is concerned, medical social workers tend to not engage themselves in mobilizing resources for clients who do not fall under the criteria stated in the country's exemption policy:

"For those who are eligible for exemption we do that, for those who they are not eligible, we left them...we ask them to go and find other ways so they can find money, so they come here...then they get medical treatment..." (Quote 17:9).

Apart from institutional regulations, the investment of personal resources in order to achieve success in the daily work routine, is seen as a matter of course by social workers. In this context the lacking social welfare system does not only serve as determining factor with regard to the

perceived role social workers have of themselves but also impacts on their willingness to engage in resource mobilization. Social workers are torn between feelings of responsibility as well as resignation with regard to their clients' problems and the lacking resources for their work. On the one hand they feel left alone by the Tanzanian government and assigned of fixing the lacking social welfare system in the country, which is illustrated by the quote of a social worker interviewed: "...so they know that, there is someone, those social worker....they think that we can solve all kinds of problems and they forget to budget for us..."(Quote 2:89). In the case of social workers of Iringa, the frustration regarding the lacking social welfare system in the country also manifests itself in contact with social work clients and in answer to their demands:

"According to me I think the problem here in Iringa is that Iringa people are so...they are not understandable people ...they think that because this is a referral hospital they can get everything, what is here; Especially in medical terms, but it's not...because we have these municipal hospitals, we have two which when they fail to treat the patient they refer them to here...so it's difficult for them to understand that they are supposed to be here when they have referral letters from where they are coming from ...the people are so difficult" (Quote 17:7).

On the other hand feelings of guilt and the inability to properly assist their clients, dispose professionals to address smaller financial problems of clients by spending their own money or using personal resources in order to overcome structural challenges in their daily routine such as with regard to transportation:

"Sometimes we are going to our pocket in order to solve that case...we are proud when we help or provide our service to somebody and that somebody he/she is happy...so when you get an information that children there are at risk and you as a social welfare officer are required to stay there because there is no car to make an opportunity...so you have to find another chance to go there..." (Quote 18:40).

The feelings of responsibility which social workers have with regard to assisting their clients is influenced by the particular sphere of activity and the tasks they are assigned to perform. In a context, where there is an unbalanced ratio of social work clients per social work professional, the majority of social work clients do not have any insurance which covers the costs for their medical treatment and the hospital's resources for enabling treatment according to the country's exemption policy are limited, medical social workers have problems to demarcate themselves from the responsibility for seriously ill clients (Quote 2:47):

"...like you go in a medical ward where people are admitted, you may find like out of maybe 50 patients there are 15 patients who came from peripherals and they are being admitted there and they don't have relatives to support them and some of them have been discharged, they want to go back home, you have to struggle for their bus fare or whatever...those should not be your priority...your priority are those still in bed but if you count, you will see that you can manage to support maybe one or two...so the rest you can't...so you end up counselling yourself: '... it's not your fault, it's a system fault'..."(Quote 2:105; 2:106).

In cases where social workers are also being affected by economic hardship the pressure becomes even worse:

"... you know like you have to struggle to make sure that this persons gets some kind of medication which can cost maybe 200 000- at the same time you have electricity bill at home which you didn't pay yet because the salary is not proportional for what you are doing... so you will find that some people are quitting from social work or maybe some people do social work at school but they don't practice it when they finish, they just use it as a stepping stone" (Quote 2:90).

Accordingly initiatives that aim at promoting the responsibility of clients do not only serve as measure to address the conditions in a lacking social welfare system but aim at relieving the daily routine social workers.

### **Empowerment / Rehabilitation**

Empowerment and Rehabilitation as an approach of social work practice refers to activities of empowering social work clients and especially vulnerable groups such as people with disabilities, in social work practice. It thereby operates two aspects, the compensation of lacking resources by outsourcing the acquisition of resources to group members on the one hand and initiating the facilitation of moral support among group members on the other hand. The membership of elders and people with disabilities in income generating groups is seen as an empowering factor in gaining financial independence in the context of a lacking social welfare system (Quote 19:31):

"If I think about the resources that we have in comparison with clients' needs-they are not relating-we have many problems, but scarce resources...so the strategy is to assist as groups, not as individuals...as I said before, it is important to convince them to join groups, income generating groups and we assist them through groups..." (Quote 19:32).

Apart from promoting clients independence, empowerment and the focus on group activities also assists social workers in addressing the issue of a lacking number of social workers within the country which contrasts the comparatively high number of clients in need. The lack of professionals has thereby been related to lacking job opportunities which impacts on the opportunities of social work graduates to practice their skills. According to social workers interviewed, thus graduates either were lacking relevant practical experiences or were in favor of turning towards a different occupation. (Quote 2:122)

In order for empowerment to be sustainable, social workers pointed out that it needs to go hand in hand with activities which focus on the education of community members and help to decrease societal stigma for vulnerable groups such as children who have gotten in conflict with the law or disabled people. It is a goal to raise awareness for their needs and highlight the importance of not denying them access to relevant opportunities such as school visits. (Quote 7:11; 15:6; 18:25)

Although social work activities in the field of empowerment that are applied by social workers interviewed, show similarities regarding the conceptual idea of social development and its focus on client participation as well as capacity enhancement of people in need, the effectiveness and sustainability of these interventions remains questionable insofar, as they do not seek to achieve collective improvements in terms of social welfare, but rather serve to address the immediate needs of vulnerable groups within society.

### **Awareness creation**

Awareness creation as an approach in social work practice has two dimensions: First it works as a preventive measure to address issues of health and social solidarity on community level in order to provide awareness training and inform community members about their own rights and the rights of their fellow men (Quote 7:13; 16:9). Secondly, awareness creation is closely connected to the issue of resource mobilization in family or community networks. In this context social work practitioners focus on educating family and community members on their responsibility for taking care of people who are affected by diverse problems. (Quote 7:8) The content of activities which aim at creating awareness varies according to the particular problem. In cases where social work clients due to mental health problems show self - care deficits, relatives are the ones who need to be informed on how to take care of them. According to social workers interviewed a client's family or community also plays a big role in the process of a disease as far as their handling with the people affected is concerned.

The necessity of raising awareness for vulnerable groups especially manifests itself in the context of mental illnesses or disabilities such as albinism, whereby local communities in Tanzania would lack a serious understanding regarding the formation and symptoms and tended to stigmatize clients:

"...to educate the community members, to educate the citizens about the mental illnesses, how they are being developed, the types of mental illnesses, the symptoms of relapses... to help the community to remove the stigma...from the community, from the family members... because now among the other challenges is many they think they are being witched so instead of coming to the hospital...you find them coming to the witch doctors there to find out who has bewitched them or to help them to get rid of it which...but it's not working and the time when they bring the patient here, you find that they are very serious, so even the treatment is also very high..." (Quote 5:38).

### ***Referring to the legal framework***

When advocating for vulnerable groups, the referral to the legal framework which has been set by the Tanzanian government, does not only assist social workers in order to be taken seriously by clients, but also when it comes to ensuring that social welfare services are provided to community members along with what is stated in the country's social welfare related legislations (Quote 16:7). In this context legislations are used to clarify claims as well as responsibilities of clients and their relatives (Quote 18:30). In the case of neglected children and maintenance issues for example, social workers inform parents about the rights of children and their duties as care takers by demonstrating that according to Tanzania's Law of the Child Act (2009) it can be prosecuted to not care for one's own children. (Quote 7:17; 7:19).

### ***Involving community representatives***

Next to making use of the legal framework available the involvement of local community authorities represents yet another basic tools in the provision of education to clients and the community. In order to make the community understand laws and regulations that are used to ensure rights of the people who are most vulnerable, social welfare officers also work with representatives of the community such as village or religious leaders in order to get access to a community's living environment and be able to build up sustainable structures for protecting the rights of vulnerable people, which in the case of children serves the early detection of child abuse or neglect at grassroots level. (Quote 7:13; 16:9; 18:41) The following quote illustrates the efforts of a social worker as far as the organization of educational activities among community members in a village is concerned:

“...in this situation we go to the religious centers, that is churches and mosques using their religious leaders to mobilize people and then social workers ask for 40 minutes and educate this community maybe on cultural perspectives affecting their lives, or this solidarity or the role of parents, the role of the community in caring their children, the role of the community in ensuring economic activities - so it's based on the topic social workers are interested to do” (Quote 16:69).

In the recent past the involvement of community representatives also had a more formal character when social workers working in the field of social welfare administration collaborated with so called "para social workers"<sup>4</sup> as far as child protection issues are concerned. Due to the fact that social workers cannot regularly be present in scattered regions such as Iringa, para - social workers served as their representatives who can make referrals to the responsible social welfare office when needed and offer contact for the local community on the other hand. (Quote 15:16)

According to social workers interviewed the involvement of para social workers has not been sustainable as by now there were only few ones left who have officially been trained by an accredited social work training institution. At the moment para social workers would receive trainings by social workers themselves. (Quote 15:17)

### ***Creativity / Using multimedia tools<sup>5</sup>***

As far as awareness creation in social work practice is concerned, Iringa social workers reported of applying dances and poetry to educate community members about social solidarity and its effects on people (Quote 16:68). In a similar vein practitioners highlighted the benefits of using multimedia technologies in the field of community education:

"First of all to provide knowledge to the people, we can use television, magazines...you know most of Tanzanians they don't want to read...so maybe we can make a comedian or something in the TV...they can see, they can learn...even if you provide brochures, they don't want to read...they can throw it out...but you can use magazines...you can use TV programs to provide knowledge to all people...through people they can transfer that knowledge to others..."(Quote 21:19).

<sup>4</sup> Refers to voluntary community – based workers who have undergone a year-long training program on basic social work and child development skills at the ISW in Dar es Salaam in order to address leakages regarding social work personnel and address communities who are affected by HIV / AIDS. The project has been coordinated by the American International Health Alliance. For more information see <http://www.aiha.com/tanzania-para-social-work-training-program-curriculum/> (02.10.2016)

<sup>5</sup> For more information see [http://www.unicef.org/esaro/children\\_youth\\_tanzania2014\\_shuga-radio.html](http://www.unicef.org/esaro/children_youth_tanzania2014_shuga-radio.html)

In order to raise awareness on the issues of vulnerable children, social welfare officers in Iringa also started a campaign using radio airtime to convey the relevance of social solidarity for vulnerable children to local residents. (Quote 16:44) By taking into account the geographic scatter of community members within the region, the initiative offered social workers an opportunity to educate a big number of people without having to visit each one in person (Quote 16:48). In this context the willingness and competences of social work practitioners to make use of creative methods in order to convey messages which are rich in content, can be taken as an example of social workers orientating on their clients' living environment and the adaption of approaches to prevailing conditions in semi-urban parts of the country. Accordingly, the impact of providing information which is easily accessible for community members has been recognized by social workers. Concerning this matter social workers make use of examples which are easy to understand and demonstrate the complexity of a certain topic by resorting to members of the community who have already experienced a similar problem in order to trigger reflective skills on the part of their clients:

"What I used to do is through examples...you find some person who in a certain community was known as a drunker of Ulanse and has already changed...and let him or her address to the community the difference of life system what he had at previous and what he has at the moment...and let them to know the difference which is positive...maybe he was using much time in the local pub [vilabo] - but now because he is not drinking much, he is much working...so there are even some changes that can be tangible and the community can see it" (Quote 19:42).

### ***Necessary competences and skills***

When asked about the necessary skills for providing education to clients and community members, social workers listed knowledge regarding prevailing diseases and legal regulations as well as public speaking skills to be of importance (Quote 2:31; 2:33; 2:34; 2:36; 2:38; 2:39). Additionally they mentioned competences which would help them in organizing the community and social skills which were important to relate to community members such as the ability to showing feelings regarding the possible impact of diseases (Quote 7:52; 7:59). The knowledge about as well as the patience to accept different mindsets and ways of living fall under the category of cultural competences which have strongly been emphasized by social work practitioners:

"...they [social workers] need to understand what are the communities where they are going to work, what are the cultural perspectives they will meet, because social workers working at the coast regions, has not the same problems as social workers who are working in Iringa because the problems at the coast regions are not the same as the problems in Iringa..." (Quote 16:97).

Competences that assist social workers in making contact with their clients and members of the local community are especially relevant in the context of imported social work knowledge which according to results of the PROSOWO project has been used to develop the skills of social workers' during social work training. Social workers due to their practical experiences highlighted the importance of adapting social work approaches to local conditions in order not to impose unknown behavior which they cannot relate to on community members:

".....so taking those models which were originally modified to suit the environment of developed countries-taking them as they are to such a community which does not know that lifestyle it could be something which is dangerous to you, to you as a social worker and also to the community members, because it can bring a conflict between yourself, the patient and the community you are serving..." (Quote 5:52).

As far as the relationship between the term culture and social work knowledge is concerned, culture does not only refer to the cultural competences which social workers consider necessary in order to relate to members of the local community but also refers to the impact which a certain lifestyle or practices of a community can have on social work practice and the development of a social workers' knowledge. In this context social workers need to be able to estimate both the applicability of social work models within certain communities as well as which elements of a certain culture can be used to make social work interventions more effective or even are responsible for their failure. (Quote 16:64; 16:71; 16:72) Social workers believe that specific knowledge and competences in relating to the local community are needed in order to properly address their needs:

"...it's very important for social workers to study and understand the culture of people...because we are serving many people with a different background, with a different behavior...so you need to understand these diversities of cultural norms, the do's and don'ts...and it's very helpful to make sure that you don't go away from your point in helping the patients... without knowing, without understanding the cultural differences..." (Quote 5:54).

The knowledge about socio- economic backgrounds and social agencies within the community such as institutions or organizations thereby provides a helpful tool to social work practitioners which is especially made use of by social workers who work in the city of Dar es Salaam and are confronted with a variety of cultural backgrounds (Quote 2:146):

"I can tell like a person coming from Ngogoranboto - it's close to airport somewhere - who is coming for the service at the hospital, he is not the same like a person who is coming from Ilala, Kariakoo or whatever; it's very different - first there is an issue of level of resources he or she is using to come to your place, the socio-economic activities this person is doing, the social network this person is having in relation to the other-they are not the same-and they are having serious differences in intervention-so if you don't know that you will not be in a good position to help" (Quote 2:148).

Closely connected to the issue of socio - economic status, is the origin and educational background of community members (Quote 2:159). In this context medical social workers of Dar es Salaam shared their experiences with regard to the connection between clients' origin (urban or rural area) and their open – mindedness towards medical treatment or social work interventions (ibid.). In this context one social worker gave the example of Masai people who according to his experience are very proud of their blood and have difficulties to engage themselves in medical procedures such as blood transfusions. (Quote 2:164) Closely related to a client's geographic background therefore is his / her educational background which according to social workers plays a major role in the process of social work interventions. According to social workers interviewed the extent to which a client was able to understand the reason behind and the range of a social worker's intervention would strongly depend on his / her educational level. (Quote 2:161; 2:162).

Social work practitioners pointed out that in general regional affiliation in terms of tribal cultures still plays a big role in daily life of people as well as social workers themselves who although they might share the same citizenship and language, identify themselves by their cultural understanding:

"...like in general you can say we are Tanzanian but we are originating different ethnic groups or whatever so a good social worker...to know that this family let's say is from Musoma-how do these people behave and how can I involve to them? This family is maybe from Kagera or whatever -how do these people behave? These people are different, they are all Tanzanian, they speak Swahili and maybe they are all educated but their belief, practice and attitude towards some stuff are not the same" Quote 2:144.

The benefits of acquiring specific knowledge with regard to structures and habits of communities such as the interaction between men and women in the context of GBV as well as the background of excessive alcohol consumption within some ethnic groups, have also been outlined by social workers as far as the effectiveness of social work interventions is concerned (Quote 16:24; 16:26, 16:38):

"if you fail to assess the nature of the family, the nature of the things which are happening to the patients, it's very difficult... some of the tribes are very abusive in taking alcohol...alcohol taking for them it's very normal and it's prestigious...if you are a man and you're not taking alcohol and they see you're not taking alcohol, they don't see you as a normal person, they think something is missing...so when you receive a patient coming from that tribe, you need to know the nature...because treating them there, educating them that taking alcohol causes the mental illness, to them they cannot understand...so you have to take them from the sludge, see their nature and try to educate from there..."(Quote 5:48).

The standards social workers set themselves as far as their knowledge on relevant ethnic groups within the country is concerned, become accomplishable for practitioners due to the fact that they are locals themselves and can relate to the different regions of the country (Quote 2:153; 2:154). The bias of societal involvement especially manifests itself as far as moral values are concerned which appear in the course of justifying social work interventions such as the reunion of abandoned children with their relatives. Although experience of social workers suggests that abandoned children such as street children would prefer staying in social institutions instead of returning to their relatives who in many cases lack means for covering their children's basic needs, moral values such as the importance of living a family cohesion and the supply of relevant cultural elements prevail as far as the arrangement of social work interventions is concerned (ibid):

"...but when they are staying in the center, they lack some of the cultural, some of the behavioral, tribes...so on that face, I can say, most of them they don't like to go back to their families....because in the center, they can be treated like a kid, but they are grown up but when they are in the house, they can be 10, their family can be strict, so it depends...but I know to stay in the family, is better than to stay in the center...and our laws guide us to make sure that all children who stay in the center, when the family is getting closer, we have to turn them back to their family and not staying in the center but most of them they don't want to do that...so we are trying to force them, to counsel them...but at last you can see they are crying..."(Quote 21:25)

Due to the high number of ethnic groups within Tanzania social workers do not expect themselves to have detailed knowledge about communities in different regions of the country but rather seek to understand the sociological element of people being part of a tribe and make use of cultural features such as language or clothing in order to relate to members of a community (Quote 5:48; 7:56; 7:60):

“First of all it's to know their [Hehe] culture, the tribe...for instance how to greet them ...we are saying "Kamweni", so if you say "Kamweni" they can know that we are together with them...and how you wear your clothes...if you are half naked they can't listen to you, instead of listening to you, they can be discussing you; It is like to be calm, when greeting them and also to know the time when can you deliver the message...it is things like that...” (Quote 15:37, 15:38).

According to social workers interviewed knowledge regarding the lifestyle of communities in Tanzania can meaningfully be complemented by acquiring knowledge on environmental processes such as climate change that impact on communities and their lives. In this context social workers outlined the connection between climate change and agricultural food production as well as food availability in rural regions of the country:

“...social workers have to be also competent in environmental perspectives to see how the environment can affect the people's living standard, how the environment affects the daily production of the people's area” (Quote 16:27).

### ***Challenges in relating to members of a local community***

Although social workers steadily aim at strengthening their cultural competences, they reported of challenges which arise when they relate to members of the local community. Phenomena such as albino killings which are commonly related to beliefs in superstition or witchcraft as well as practices bearing a misogynic character do not only challenge practitioners on a personal level but also as far as the arrangement of social work interventions in their daily routine is concerned (Quote 7:12). In this context the polygamous behavior of men and the responsibility resulting out of it to care for more than one family has been taken as an example for the precarious living conditions of deserted women and their children as well as one cause for the spread of HIV / AIDS (Quote 21:9; 10, 29). Although social workers acknowledge the impact of cultural aspects as far as the recording addressing of problem situations is concerned, they warned of solely tracing social problems to a person's cultural background and not holding individuals to account for their actions.

"... if you accept that that this is a culture, I think the problem will be continuing...so if the client is drinking too much, you better take it as a problem...when you consider it as a problem, it is time to advise them in order to leave this habit or to minimize the problem...when you come to Iringa and you say that those people are drinking too much because it is a culture and it is ok in our community...I think it will be a big problem...(Quote 18:49)"

Apart from challenges that arise due to differences with regard to cultural beliefs, the lacking social infrastructure and its impact on social workers' daily routine causes conflicts within the relationship between social work professionals and their clients. Empirical research results suggest that social workers in semi-urban Iringa region experience a big dependence upon social welfare services on the part of their clients, which practitioners themselves rate in a critical way. As it has been reported by social workers their clients tended to request things from the social welfare office which according to them could be solved by clients on their own:

"...they [clients] are not knowledgeable, about small, small issues...they are people who need everything for free...they don't want to work so that they can have something for their living...what they think is because this is a regional hospital...when they come, everything they want for free...when you put regulations so that you have to pay even 5000 TSH, they don't want...when you explain, why we did that, they run away to our regional officer...they don't want to ask the management here, they go the RAS [Regional Administrative Secretary]..." (Quote 17:58).

In contrast to Iringa social workers who feel challenged by their clients' dependency social workers in the city of Dar es Salaam are hard pushed to deal with their clients' unwillingness to accept knowledge other than their own:

"... most of the clients here in Dar es Salaam, they think they know much, even if they don't...like with the example of cigarettes...'Do you know that cigarettes are killing you? No, no, no...I finish my cigarette, then I take a glass of milk and then everything is ok...they think they know each and everything but it is not that much...so when a person has that kind of being dynamic, they are not changing their minds....they are static which is leading them to get into trouble..." (Quote 21:31).

## 8.2 Social work approaches in the context of psychosocial support

Psychosocial support as it is provided by social workers interviewed refers to approaches which primarily aim at offering interpersonal assistance in order to alleviate clients' emotional stress. Approaches in the context of psychosocial support can in so far be complemented by consultative activities as the provision of problem – oriented information helps clients to focus on the factual dimension of their problems.

As far as the provision psychosocial support is concerned, the **codes of ethics**<sup>5</sup> provides a relevant framework for practitioners by explaining "the do's and don'ts in social work profession". It thereby does not only serve as an ethical guideline with regard to social work interventions but also gives information about what to keep in mind when social workers approach their clients. Amongst other things this can include the order not to engage oneself in multiple relationships with a client or the importance of telling a client the truth about his / her problem. (Quote 16:19; 16:20)

Although psychosocial support that focuses on interpersonal assistance does not require specific resources and therefore is easily applicable, it causes social workers to doubt its efficiency in terms of addressing the root causes of clients' problems (Quote 2:171):

"Like ok, this is a drug addict-in books it tells me like I have to give counselling, I have to connect him with resources or whatever then it's done-but here [in developing countries] it's not the same-what kind of resources am I going to connect with this guy? Maybe he is neglected by his family or relatives and the government or the institution itself does not support him; So he is homeless -so what kind of counselling will I be doing-you see this kind of challenge" (Quote 2:173).

### Counselling

Counselling as an approach in social work practice is applied by social workers in order to support social work clients in overcoming personal stress (Quote 5:15). In this context counselling does exceed the common provision of information to clients but also serves to provide clients with intense psychosocial support (Quote 17:39). In all cases counselling goes along with attempts of relationship building (Quote 17:67). Depending on the context where a social worker deals with his / her clients, either in a hospital or a social welfare office,

<sup>5</sup> The Code of ethics refers to principles that seek to ensure ethically correct interventions on the part of social work professionals. Whereas singular countries have released a national code of ethics for social work profession, the International Federation of Social Workers published a set of general principles in 2012. For more information see [www.ifsw.org/policies/statement-of-ethical-principles/](http://www.ifsw.org/policies/statement-of-ethical-principles/)

counselling can range from providing psychosocial assistance in the case of non-curable diseases such as HIV or cancer to demonstrating future perspectives to juvenile truants as well as reconciling a couple in the context of marital conflict (Quote 2:23; 2:11; 15:22).

In a medical setting educating counselling mainly serves the purpose of providing health education and awareness training to clients, their relatives and surrounding community members (Quote 2:29). As far as the topic of health education is concerned elucidation towards so called non communicable diseases, diseases that can be influenced by a person's individual life style, as well as regarding epidemics is done. (Quote 2:30) According to medical social welfare officers who are working in Dar es Salaam, the provision of health education has proven itself relevant due to an increase in opportunities of having internet access. In the case of serious illness, the internet would endanger clients of receiving false information (Quote 5:53). Social workers therefore see a connection between an increased access to internet and the approach of elucidating patients about the disease which they are suffering from. Medical social workers believe elucidation as it has been applied by them and their colleagues to have been adapted from foreign concepts. Nevertheless, they thoroughly see the usefulness of informing patients about the disease which they are suffering from instead of treating them without giving them any relevant information like it has been done in the past. (Quote 5:53).

According to social workers interviewed there are certain techniques which have a big influence on the outcome of a counselling session and shall therefore be elaborated in the following.

Also rooted within the code of ethics is the concept of **individualizing** social work clients, meaning to encounter each client as an individual and addressing his / her problem according to his / her needs (Quote 18:48). The individualization of social work clients has been described as especially important in the context of couple counselling, where the separate questioning of both partners enables to receive an insight to the problem as it is portrayed by all the individuals involved (Quote 21:11). The following quote by a social worker does not only illustrate the role allocation in the counselling setting but also reveals the view of professionals with regard to the conceptual understanding of counselling and the role of social workers as source of advice:

“Couples who are still in marriage they come here, they talk to us...and we are advising that from now you are going to live as normal couple; You are required to be together and discuss together”(Quote 18:28).

In order to investigate how a client is feeling about a certain issue, social workers mentioned the importance of **face to face interaction** during the process of counselling. Face to face interaction would not only help them in relating to a client and his / her problem but also in estimating whether a client is telling the truth or not. Due to high usage of counselling in their daily work, social workers perceive face to face interaction as helpful tool for their activities (Quote 21:52).

### **Relationship building**

Social workers highlighted the significance of relationship building as one central element in social work practice. Accordingly a trustworthy and stable relationship between social workers and their clients is a premise for any social work intervention that demands effectiveness. As far as concrete interventions within the approach of relationship building are concerned, social workers apply a variety of tools.

The gaining of a client's pre - question assurance as well as promising to anonymize their case is seen as essential element in building his / her trust towards a social work practitioner, especially when a social worker needs to require personal information (Quote 2:67). Communication skills play a relevant part in relationship building and include knowledge about the positive and negative effects of certain questions on the relationship to a client (Quote 2:64). As the quote below illustrates social workers consciously make use of **communication skills** in order to enhance their relationship to a client:

"...to give a patient enough time to talk before interrupting...first I have like to maintain eye contact to make sure you know I'm listening...sometimes without saying something you'll be nodding and paraphrasing, when you're saying a lot of words, then I have to paraphrase, that's another kind of technique and also we are like concluding, just before you finish, ...but lately it's like to use some motivating words like "gap fillers" like "Mhm, mhm, mhm" , it makes them more to talk..." (Quote 2:70).

**The engagement in a client's living environment** enables social workers to get access to a client's mindset and constitutes the basis for further actions. A simple aspect such as the adaption of one's language to the language of the client can thereby commence further options. In case of clients where there is a difference in age, social workers resort to adapting themselves to the age of their clients. This can either require to appear in an informal way or show adequate respect to older clients (Quote 2:62).

Another aspect which can be relevant as far as relationship building with clients is concerned refers to the issue of **personal presentation**. According to the experience of social workers in Iringa, a credible appearance becomes especially relevant in the context of providing health education to members of the local community (Quote 7:57; 7:58). The view that medical issues require a special level of trustworthiness is shared among medical social workers in Dar es Salaam who have observed that clients tend to be more trustful towards doctors which is why medical clothing also enhances clients' trust towards social workers. (Quote 2:68; 2:69)

According to social workers interviewed **empathy** enables them to ease situations where clients are confused and show mistrust regarding their skills (Quote 2:63). Empathy can be expressed through the voice, the style of sitting arrangement or standing arrangement, but also through gestures and postures (Quote 2:65).

### **Group work**

Group work as one approach in social work practice deals with the organization and implementation of group activities in order to address clients' problems and needs. According to social workers interviewed group work can either be the form of organizing people in the context of community education but also one independent approach when addressing a group of people who share a similar problem such as the abuse of a specific substance, socio-economic hardship or vulnerability due to a disability. (Quote 5:22)

In the context of psycho – social support group work is used to empower vulnerable people through the psychological benefit of sharing same experiences (Quote 19:16). Social workers thereby perform the role of leading discussions between group members such as motivating them to pay attention in order not to drift off the topic, looking after a pleasant culture of discussion and listening to members' views. (Quote 5:22)

Next to offering opportunities for group members to examine their experiences, the promotion of clients' self - organization is another goal of group work, as it has been illustrated by one social worker: "...they pick the topic they want to discuss...so they have to find a chairman, a secretary who is taking notes and other members to contribute..."(Quote 5:22).

### **8.3 Social work approaches in the context of administration**

In order to plan and structure social work interventions which practitioners apply in the context of resource mobilization or psycho – social support, they make use of approaches which are administrative in character. Administration in social work practice does not have a specific purpose with regard to clients, but rather contributes to the fulfillment of social work approaches which have been mentioned before. In this context it also includes activities which aim at evaluating implemented social work interventions.

#### **Assessment**

Assessment mainly serves the collection of relevant information that can be used in order to structure social work interventions. In this context social workers highlighted the importance of making comprehensive assessments in order to define a client’s problem and plan of social work interventions accordingly (Quote 7:24; 7:30):

"... you cannot treat the patient in the same...they might have the same problem but you can use different approaches in helping them...so for instance you may find...the nature of the problem is the one which determines which approach should be taken to this nature...for instance: we have our patients who are being rejected in the wards - the relatives do not want to take care of them; When you call them, they are denying that they know the patient...so the approach you are going to take to intervene in such a problem is different from the patient who is having a social support from the family members...it's a different situation..."(Quote 5:47).

In order for social workers to choose an adequate intervention for addressing a client's problem they will seek to inform themselves about the client's history, which also includes asking questions about the client’s social situation and ethnic background. (Quote 5:50). Due to the lacking social welfare system in the country and the fact that social workers switch to informal mechanisms of support as far as the acquisition of social support for their clients is concerned, assessment in social work practice exceeds the content of a mere anamnesis. Apart from figuring out the nature of clients’ problems and their family history, assessment also includes an analysis of resources with regard to their surrounding in order to clarify options of resource acquisition and lobbying (Quote 2:49; 2:48; 2:53; 2:57;5:12).

In the case of medical social welfare officers who are confronted with mentally ill clients, the process of assessing clients has been illustrated as assisting them with regard to estimating features of clients’ mental status and ,if necessary, elaborating factors that potentially cause or caused them to relapse (Quote 17:13; 17:16; 17:18).

## ***Interviewing***

In the context of assessment social workers make use of interviewing as one tool to gather information. A practitioner who works in a hospital outlined that to his view the information he gathers as a social worker differs from what his medical colleagues get to know from a patient, which again makes his competences relevant for the whole case. (Quote 2:156) The social worker described the technique of interviewing a client as an "...art to lead someone to an answer, an answer of the problem he or she is facing without even telling that person ...it's a means in getting some information which can help in assisting the client..."(Quote 2:61). Due to the high relevance of family and community members as sources of support for social work clients, social work practitioners do not only conduct interviews with clients themselves but also with their relatives and friends. Also in conflict – fraught cases such as child neglect social workers in order to find a solution to the problem depend on obtaining the view of all people involved, parents and the child affected (Quote 15:21).

Apart from interviewing a client's family or relatives, social workers in semi-urban Iringa Region, in order to get trustworthy and relevant information, also request introduction letters from village leaders to introduce a certain person has also been mentioned as a common practice in order to gain relevant information:

"...when a client comes, we are just asking them to bring a letter from their leaders...the letter can introduce her or him..."I know that man, he is living in my area, he has this problem..." when we want to make a follow up...so there is no one who can cheat...because there are other people who know the person better than us...if you are just dealing as you only, it is difficult to get the connection and finish the case properly ..."(Quote 18:37).

As far as the necessary skills for doing assessment are concerned social workers mentioned **questioning and listening skills** to be of high relevance. As it has been illustrated by a social welfare officer interviewed, social workers need to know about the meaningfulness of certain questions: "So, sometimes when you are conducting interviews, you know like, if I ask this question it will drive this question to a certain issue - I have to appoint myself to ask this question (Quote 2:150) ".

## **Planning social work activities**

The following section outlines the planning of social work activities as one approach of social work practitioners. When social workers decide to use a mix of interventions in order to address a client's problem in a holistic way, they use planning in order to structure their interventions.

In this context a medical social worker who participated in the study reported of the utilization of models which he has been taught during social work training at ISW:

“Those are, we call 5 stages of social work interventions which we use almost now and then...One is the issue of assessing, after assessing you plan, after planning you come to the implementation, after implementing you make an evaluation and then you end up with determination...so I do it now and then...every patient I meet, there must be an assessment, a plan, an intervention...though the nature of our clients' problems determines the intervention...then they can stay after four, two months they got relapses...then they come back...” (Quote 5:56; 5:57).

Social workers also use planning in order to adapt their interventions to the current budget allowance (Quote 19:8). In this context they will structure future social work interventions which shall benefit a large number of people within the community or focus on certain target groups (Quote 16:62; 19:14).

### **Follow up**

Follow up refers to an approach which social workers use in order to check on its outcome and the condition of social work clients, after having set an intervention. Due to the demand of financial and time resources social work practitioners do not see follow up as a central task within their daily work routine but rather as an additional task which can either be done when a client's situation requires close meshed assistance or there is enough time available (Quote 2:26) In this context the decision whether follow up is applied or not also strongly depends on a social worker's personal motivation. Finally follow up does not only bear satisfying results but can also lead to the insight that in order to properly address a client's problem another social work intervention is needed.

As far as the implementation of follow up is concerned, social workers listed making calls to clients and their relatives as well as home visits (Quote 2:25). As the following quote by a social workers who dealt with a case of child neglect shows, follow up must not necessarily be done personally but can also happen through networking with representatives of the community: “.....now she [the child] stays with her mother...but we are writing a letter to the village leader which says ‘Make sure that this child goes to school’ ... but we are planning to come and make follow up” (Quote 7:28).

## 8.4 Summary

Chapter 8 served the elaboration of social work approaches which are used by social work practitioners and alumni at the Institute of Social Work on a daily basis in order to address their clients' needs. For the purpose of categorization social work approaches have been thematically clustered into four groups: Approaches in the context of resource mobilization, approaches in the context of psychosocial support and approaches in the context of administration.

Approaches which social workers apply in the context of **resource mobilization** do result out of the fact that the majority of social work clients is affected by poverty and the country lacks a comprehensive social welfare system. In this context social work activities which aim at acquiring financial or material resources for social work clients take up a major part of social workers' daily routine. Depending on a social worker's working environment (social welfare office or hospital) will social work activities either focus on exempting clients from payment for medical treatment or making arrangements to ensure clients' current or future social security. As far as resource mobilization of social workers in semi-urban Tanzania is concerned, the involvement of different stakeholders such as family or community members or government representatives as well as if available private or religious organizations is one of the major tools of social work professionals to lobby for clients' needs. In the case of targeting community members as direct beneficiaries of social work activities social workers will most likely be assigned to create awareness for controversial issues concerning health or human rights. In order to be able to adequately relate to local communities social workers need to utilize their cultural competences which can include resorting to tools such as involving religious leaders or local representatives of a community to reach out to members of the community themselves.

Due to the lacking social welfare system and lacking resources for social work practice in the country, social workers feel, depending on their sense of self, torn between a feeling of resignation and a feeling of responsibility for social work clients' problems. Whereas social workers interviewed criticized lacking commitment on the part of their colleagues, they admitted the practice of investing personal resources such as money in order to assist clients and experience success in their daily work. Next to the use of personal resources, the avoidance of system challenges such as procedures set by NGOs or governmental institutions in the acquisition of financial support and the resorting to private donors is as common practice by social work practitioners. Social workers' lacking ability to set boundaries with regard to their clients' problems also impacts on the relationship between professionals and their clients.

Social workers feel challenged by their clients' consistent ask for support and expect more responsibility and independence on the part of clients.

Whereas approaches in the context of resource mobilization form the goals of social work interventions, approaches concerning **psychosocial support** can be rather seen as complementary interventions or means of target achievement with regard to resource mobilization. In this context psychosocial support refers to basic interventions in the field of social work which aim at alleviating social work clients' sorrows. Depending on a client's problem psychosocial support can in certain cases be sufficient in terms of addressing a client's need whereas in other cases the provision of psychosocial serves as addition to other social work approaches. As far as concrete approaches in the field of psychosocial support are concerned, counselling as well as relationship building and group work form major parts of a social worker's activities. Whereas tools of relationship building are applied all over in the field of psychosocial support, counselling enables social work practitioners to deal with social problems on an individual base or in a couple setting. Group work however forms a special case in the context of psychosocial support, as it is not the social worker himself / herself who occurs to address a client's need but the examination of individual problems in the group that will positively effect on clients' salvation.

**Administration** forms the third category of social work approaches described and includes approaches which focus on the planning and evaluation of social work interventions. In this context administration does not only include activities that assist social work practitioners in assessing information regarding social work cases, planning interventions accordingly and doing follow up in order to proof the effectiveness of specific interventions but also refers to procedures that are applied in order to plan according to the budget that has been provided by the local government. The extent to which a social worker is engaged in the field of administration depends on his / her role in the particular work environment.

As far as the surrounding conditions of social workers' daily routine are concerned it must be differentiated between social workers in a medical setting, colloquially called medical social workers, and social workers or social welfare officers who work in regional social welfare offices. Both groups do face lacking resources for social work practice which manifests itself in lacking premises for conducting interviews or counselling sessions as well as lacking facilities to document their interventions. Apart from the issue of resources, are social workers influenced by the unbalanced ratio of clients per social worker and the overall low status of social work profession in the country.

Whereby both groups do work as intermediaries between clients and other stakeholders, medical social workers directly work with members of the medical profession which strongly affects their role as financial case managers and informants for the medical personnel. As medical social workers are mainly confronted with regulating payment issues of their clients with regard to medical treatment, they are strongly influenced by government regulations in the field of health care such as Tanzania's exemption policy and its lacking implementation due to financial and structural scarcity. Social workers who work in social welfare offices find themselves also restrained due to the country's lacking social welfare system but as they are not dealing with seriously ill patients they do experience a different kind of pressure as far as their daily routine is concerned. Their daily routine is characterized by a lack of resources for social work practice and a resultant inflexibility to address clients' problems. As far as the application of social work approaches is concerned, social welfare officers in contrast to medical social workers who mainly focus on resource mobilization for regulating payment issues are able to apply a broader series of approaches including tools of offering psychosocial support and planning community involvement activities.

International organizations play a relevant part in the daily routine of social workers in Iringa region, especially as far as funding is concerned. Through financial support by UNICEF social workers have not only been able to gather professional experiences and increase their respective knowledge in the course of newly created projects but did engage themselves in networking with other stakeholders of the region. The feeling of being able to offer concrete resources such as food or school materials to social work clients in need, has been mentioned as another relevant impact of international organizations on social workers' daily routine.

## **9 The gap between social work theory and practice and its impact on the daily routine of social workers**

“...and when consulting your classroom lecturers what to do, of course you were told, but you were told thinking that there is a system outside there; It can be a government, local government, community itself which will help you in reaching your goals...but when you get outside, there is not that kind of system...it may be written, but not practical, if you're getting me...” (Quote 2:96).

In the course of examining daily work approaches of social workers in semi-urban Tanzania and characteristics with regard to their daily work routine, it has become apparent that social workers who participated in the study experience a gap between what they learned during social work training and what they face in social work practice. In this context empirical results do concur with research results of the PROSOWO project (see p. 9) which indicate that there is a gap between the skills which social work practitioners have acquired during training and its application in their daily work routine. In order to investigate possible causes for the diverging realities between social work education and social work practice and its impact on social work practice, the experiences of ISW alumni with regard to the social work training as well as views of educators shall be elaborated.

### **9.1 Inadequacy of social work training**

For social workers the gap between social work theory and practice has become apparent when they entered social work practice and found themselves confronted with the country's lacking resources for social work profession that made it hard for them to implement the things they had learnt during social work training:

"Our office accommodates six social welfare officers and as you know social work has its ethics...one ethics is confidentiality and how can you manage confidentiality if you have six in a single room, so it is a professional challenge..." (Quote 19:27).

With regard to social work training, practitioners did not feel prepared to address all issues which they had to meet in their daily work. Although they knew about the importance of resource mobilization to address social work clients' needs in the context of a lacking social welfare system, they missed the knowledge on how to plan and implement concrete interventions in order to acquire resources (Quote 2:93):

“You see it is very new...because what you study in the class, is not what you are practicing in the real life...you can see there a subjects which you studied in class in order to fulfill the curriculum...but every day there are new issues happening...and that issues you did not even learn in the class room, so sometimes it will be difficult to compare those studies and what is happening in the real life...so there is a mind in conflict, sometimes you get a dilemma..” (Quote 21:50)

According to social workers interviewed the use of foreign social work knowledge in social work training plays a crucial part concerning the inadequacy of social work training. Social workers who participated in the study described that during their time as a Bachelor students at the ISW most case studies as well as the literature used had been coming from the global north (Quote 2:168). Even though social work educators confirmed the experience of alumni, they were keen to highlight that they also use teaching manuals which have been prepared by lecturers of the ISW. (Quote 23:27; 25:27) Educators furthermore mentioned lacking financial resources and the lack of skilled personnel with regard to the composition and publication of scientific literature as hindering factors for academicians in researching about locally relevant social work models (Quote 25:29; 25: 30). Apart from resource related reasons, the evolutionary history of social work profession and its roots in Europe has been mentioned as justification for the application of imported social work knowledge: "When I was studying at the institution, we were told that it [social work profession] was originally from outside, so that is why they are using it from there... "(Quote 7:67). This statement illustrates the rashness in justifying the application of foreign social work knowledge. As far as the appropriateness of foreign social work knowledge is concerned, social workers' attitude is especially critical due to their understanding of social work being a profession that seeks to address the problems of local society that are according to their experience different from the problems of people in developed countries:

"...we are just learning from different materials from outside...but also we are just working according to our area...we are just working to our society...so you cannot work directly to the European culture because the situation or environment differs from one country to another ...” (Quote 18:51; 18:52).

## **Differences in the nature of problems between developing and developed countries**

Social workers interviewed represent the view that there are structural, cultural and socio-economic differences between developing and developed countries which do not only determine the nature of problems in the country but also social work interventions which aim at addressing these problems (Quote 2:82). Poverty and its forms of appearance have thereby been mentioned as the major factor determining the difference between problems of inhabitants in developing and developed countries. As it has been outlined by one social worker interviewed, next to the material poverty which the majority of Tanzanians is confronted with, poverty in developing countries due to the existence of customary structures concerning wealth and status could not accurately be measured according to international standards:

"...the poverty [in developed countries] we were talking is not the same poverty this country is experiencing. It's very difficult to define poverty, especially when you are in Africa but because if you define it in terms of material you may find a Masai is having a hundred cows but cannot afford to pay for his medical bills, you see-but you may find someone who is a carpenter with like small amount of capital, but can afford to pay whatever..."(Quote 2:171)

Apart from holding the weakness of the country's social welfare system responsible for the complexity of social problems in developing countries, practitioners also referred to differences which they believe to be rooted in the culture of people in order to explain differences between problems in developed and developing countries (Quote 19:50). In this context they reported of their observations regarding the lack of social solidarity within community members. In this context they did not connect the lack of social solidarity within a society to the effects of capitalist development but due to their understanding of the importance of family rather perceived it as a regional characteristic of the community concerned:

"I'm not interested to relate it to economic development because I think in African context people normally live together...the capitalist mode of life is not yet introduced in Africa...very few people have capital to run their lives...most of the people are dealing with this primitive farming, using the local methods...so you cannot talk about capitalist mode of life in the local areas where people have lot of problems ..." (Quote 16:41).

The following quote illustrates that in this context a tendency of using ascriptions to simplify structural differences regarding economic hardship is also common among social workers: "...we are different in many issues...infrastructure, resources...knowledge...a bit of thinking, we are different. As I told you, in Africa, most people are ignorant, they don't want to read...they don't want to work, fight for themselves, they always want to be fed..." (Quote 21:53).

## **Imported social work knowledge and its impact on social work practice**

Differences with regard to the socio - economic status and the comprehensiveness of the social welfare system available, make it according to the experiences of social workers difficult for developing countries to adopt approaches that originate from the context of a developed country. Difficulties arise when social workers realize that foreign social work interventions which they have been learning about during social work training, cannot be implemented in social work practice due to structural reasons and a lack of resources (Quote 17:64). Accordingly alumni hold case studies that have been discussed during social work training as not being suitable to prepare social work students for local living conditions:

“You can find yourself, maybe in Oslo I'm dealing with a drug addict patient, there the issue will be methadone and maybe finding a home, those kind of sober stuff, but when you are here, it will start with the home-where does this guy belong - to see the social network-most of them it's like breakdown, you have to first strengthen it-then you have to get that person to accept what your guys are in supporting, you know? then it comes to involving the family and relatives in that person's treatment-then you can go beyond that and see what kind of group is he or she associating -and then after that he can tell you, though you are doing all that, I'm unemployed, I can't afford the medication you guys are giving, I can't even afford a bus fare from my home to the hospital every day, then you have to do something..” (Quote 2:84).

For social workers interviewed the need to adapt foreign social work knowledge is inevitable, though according to their experience it is themselves who have to integrate foreign social work knowledge into a methodological pool which applies to the local context and therefore puts them in the danger of "actually remain hanging somewhere in between, like it's not complete..." (Quote 2:169). Social workers are aware of the fact that if they fail to adapt social work models to the particular context where they are working, they might not only fail to adequately address their clients' problems but by applying approaches that are out of context they could even irritate client or members of the local community (Quote 5:51):

“Most of the models being used in social work profession today is being developed by these developed countries...so taking those models which were originally been modified to suit their environment-taking them as they are to such a community which does not know that lifestyle it could be something which is dangerous to you, to you as a social worker and also to the community members, because it can bring a conflict between yourself, the patient and the community you are serving...so we need to understand the human diversities and being able to pin point what are the things that I can use from this model in approaching these problems... I think that is the most important aspect...” (Quote 5:52).

Despite the acknowledgement of differences regarding the nature of problems between developing and developed countries as outlined above, social workers believe certain social work approaches to be applicable in both, foreign and local contexts:

"...when you talk about counselling it does not differ between Europe and our country...when you give him [the client] a position for decision making or when we talk about client centered ...all decisions need to come from your client...so this is always like here...and also when we say that about social work as a field always when you are dealing with people you are required to recognize them and be non - judgmental...and every client needs privacy...and when you compare people from Tanzania and America, no person likes to expose his / her problem to the public...so this is the same, but the problem is how the environment is, how to tackle the problem according to the environment...(Quote 18:53)".

Apart from advocating for the cross - cultural applicability of certain social work approaches, social workers also emphasized benefits of learning about foreign social work models with regard to getting the opportunity of comparing social work models as regards to content and becoming motivated to look at the gaps and challenges of local social work profession:

"... if we take an example of a certain country, then you relate with your country and you know where you are...and as you know that we as a Tanzanian we can't learn only about our country but if you compare with other countries, you can know where you are, you can know the gaps, the challenges and others...so it assisted us much"(Quote 15:43).

### **Imported social work knowledge and its impact on social work training**

According to educators interviewed, records concerning the effectiveness of social work approaches that are taught at ISW have not been processed, nor are they a major part in the Institute's curriculum review. Despite the lack of empirical evidence they suppose that the impact of foreign teaching materials on training is severe because students would have difficulties to internalize concepts which were contextually out of place (Quote 23:31; 33). In order to address the lack of contextually relevant materials educators reported of the institute's plans of publishing two books by the end of the years 2016. (Quote 25:31) When asked how they currently try to address the dilemma of contextually irrelevant social work knowledge in social work training, educators reported of the importance of clarifying and adapting foreign social work models already in class room in order to avoid future dilemmas for students when they enter practice:

"When I am writing in Austria, this is it, this is what we do, this is the problem, these are the solutions...so students will read that, if she or he does not have that practical context, they will actually be receiving inappropriate training, so they will repeat it when it comes to examination but when they get out they will find themselves in a wonderland..." (Quote 25:35).

One social work educator interviewed highlighted the importance of differentiating social work approaches depending on the context given, by reporting of his experiences with a training course on gender based violence which according to his understanding promoted euro centrism. Social workers were recommended to advise victims of GBV to always keep a small bag hidden so that they could leave any time if needed, to have a neighbor or friend who could provide shelter in emergency and to keep sharp items away from the violent partner. According to the experience of the social work educator these recommendations could hardly be implemented in Tanzania where most families would have to share one room and in rural or remote areas women could not simply visit neighbors at night. In order for the educator to teach students about addressing GBV, these recommendations first needed to be related to the local context. (Quote 25:33; 34)

### **Generalist social work education**

Apart from the reliance on foreign social work knowledge, social work training at ISW has also been perceived as being generalist by not offering possibilities for its students to specialize on issues that do concern vulnerable groups of society or selected spheres of activity such as street children, social work and law or disaster management. As far as social work practitioners' request for offering more opportunities for students to specialize during training is concerned, educators outlined that due to the fact that government resources for employing an increased number of social workers are limited, it should be the aim of social work education to train a big number of generalist social workers who are prepared to address a variety of problems which they will face due to the high ratio of clients social worker in the country. (Quote 23:57) According to their view specialization makes more sense at master level than during bachelor program. (Quote 23:5)

Nevertheless, social work practitioners feel that the Bachelor program which they have undergone did not provide enough opportunities to prepare them for the characteristics of future employments in social welfare offices or the field of medical social work by primarily focusing on cross cut issues such as poverty and preparing them to address a variety of problems, which justifies itself due to unbalanced ratio of clients per social worker the low distribution of social workers across semi-urban areas. (Quote 16:29)

Another effect of the generalist focus of social work training at ISW and its hindrance for dealing with new aspects in social work could according to alumni be seen on the basis of students' bachelor degree thesis which would not aim at investigating social problems that have not yet been discussed but would repeat recurrent topics instead:

"You can see, if you get some time to pass through students' dissertations, bachelor degree students' dissertations-at any kind of institution you will choose-if it's ISW, Open University-you will find mostly it's about street children, poverty, drug abuse whatever....and those guys are repeating the same kind of study and then the question is who reads the researches-academics don't-students themselves don't and they keep researching the same stuff" (Quote 2:183).

Social workers outlined that there was a difference between the things they learnt during social work training and the requirements which would be needed to address clients' needs in social work practice. According to medical social workers who participated in the study, the contents which they learned at school were mainly focused on general poverty alleviation whereas in reality they do merely focus on resource mobilization in order for patients to afford medical treatment. As a result interviewees see social workers in the need of expanding themselves and their knowledge in order to be able to cope with social work practice: (Quote 2:191)

"...but the difference between what you learn in school and what you are going to do in field, they are not the same...like when I was studying at university I thought like resource mobilization is all about solving economic problems of the client but when it comes to medical setting it's not about solving economic problems...we are not solving hunger there...we are like really in need and the solution is required under some sort of pressure...so you have to some kind advance yourself...so what I can say like, of course, what you get in school, you get a concept theoretically but when you are in practical you need more than that so you have to expand yourself" (Quotation 2:80; 2:81).

In the context of alumni knowledge acquisition accordingly takes place in form of **on-job-professional development** which enables them to gain skills through being actively involved in social work practice but also through participating in advanced trainings that have been offered by employers (Quote 5:43). The exchange between social work colleagues has been mentioned as one relevant means of acquiring knowledge and filling eventual gaps between social work training and practice: "even copying my sister how she is dealing with clients...the ways she uses to talk, the way she provides counselling, it helps me..."(Quote 7:71, 7:72).

Especially practitioners who have taken up a new job assignment right after graduation find it helpful to be in direct exchange with experienced colleagues:

“When you get issues which you don’t have been studying, you have to ask people, other fellow workers...they say maybe google and see, sometimes you can use their experiences; You know, last time I had a problem similar like this, but I was solving it this way...” (Quote 21:51).

Trainings which are attended during employment also have been mentioned as relevant source for acquiring additional knowledge on the part of social workers. Although social workers reported of having participated in sporadic trainings on issues such as GBV and VAC or in the case of medical social workers on how to initiate detailed examinations in order to provide proof for the occurrence of violence to the court. (Quote 17:54; 17:55), they feel neglected as far as the provision of possibilities to freshen up their professional knowledge is concerned:

“...sometimes you can say due to lack of resources some social welfare they don't get enough money to brush up our minds...we don't have enough money for trainings, every day new issues are at our office, so we need to be brushing...after some months, if there is a disaster, we need training to know what is up to date now, what are other countries doing, how about our issues here compared to other countries...” (Quote 21:39).

Due to a lacking support with regard to the attendance of trainings on the part of their employer, the acquirement of knowledge largely depends on the intrinsic motivation of social work practitioners themselves. In this context the absence of knowledge which they perceive as relevant for their daily work routine works as an impetus for their motivation to educate themselves: “...you know this is my job and I didn't get this at school, so I have to make sure, I'm good at it...” (Quote 2:74). In this context it has become apparent that the motivation of working alumni towards knowledge acquisition has increased compared to while still having been involved in social work training: "...of course at university we are doing this what you call classroom - presentation in front of the class; It's for the purpose of passing, but in the field it's about the purpose of helping people" (Quote 2:75). The quote by a social work professional who talks about her motivation towards passing an academic training illustrates the relevance of academic training as far as knowledge acquirement is concerned and the trust which social workers show to academic training institutions as far as the preparation for social work practice:

"The social work profession needs much to be updated because social work deals with problems but the problem changes...although for what I get in real life in class room about 10 years before is relating with real life situations...but what I see and what I believe, they are much using intellectuals to update the profession and the curriculum...so I also believe that I must go and add my education in order to go still with the real life situation ..." (Quote 19:35).

As far as concrete topics of social work practice are concerned which ask for an updated social work training, social workers mentioned **homosexuality** to be of high importance. As what has been pointed out by them homosexuality has neither been adequately addressed in their training nor have they been able to specialize in issues such as vulnerable groups who are stigmatized due to their sexual orientation. As a result practitioners would not feel well equipped to deal with it in social work practice. (Quote 2:18) One social welfare officer exemplified the changing needs and problems of Tanzanian society by talking about the prevalence of **HIV/AIDS** and its relation to **gender based violence**:

"For example when we were in school, the problems those were said as social problems, some are still social problems but others are not much problems...but also those who were not problems at this particular time, are now big problems...and other problems interrelate and interconnect...for example when we were in college time, HIV/AIDS was a big problem, even now it's a big problem but due to some interventions at the step we are, at this moment it is not like previous times but there are other problems we see, by that particular time, were not so much problems...for example violence, VAC and GBV...and this GBV is also related to HIV/AIDS...for example so in Tanzania GBV it was not in our curriculum but when we come here, we meet with it...and you know that GBV interrelates with HIV/AIDS..." (Quote 19:36).

When asked about mechanisms which enable the ISW to update its curriculum according to the changing needs of society, social work educators outlined that the training institution regularly reviews its existing curricula on a big base after every five years (mini review every year). The process starts with the composition of a situation analysis on the side of the Institute's management which is then followed by data collection where ideas from governmental as well as non-governmental stakeholders who are asked about the performance of ISW alumni and social work practitioners themselves are collected in order to find out how the training prepared them to address social problems. (Quote 23:52; 53; 58; 25:6) Afterwards another report is written and presented to all stakeholders involved in order for them to comment before the report is submitted to the accreditation body called NACTE, National Council for Technical Education who in order to grant changes or proposals needs to come and verify the facilities as well as the number of adequate staff (Quote 25:6; 25:49).

According to the educators the accreditation body also requires the abidance by guidelines to ensure the quality of the training offered at ISW. This includes guidelines regarding the staff students ratio, the level of training of staff, the handling of examinations as well as the observation of the curriculum on the side of educators.(Quote 25:3)

Currently the examination includes up to 100 representatives from across the country whose views are collected through the distribution of a questionnaire where respondents can propose the installment of new courses or the modification of existing course titles (Quote 23:55; 56).

### **Lacking practical experience on the side of social work educators**

Apart from the necessity of updating social work training with regard to the changing needs of Tanzanian society, the effectiveness of social work training has also been related to social work educators and their knowledge with regard to the challenges of social work profession. Concerning this matter, alumni outlined social work educators' lacking practical experience in the field of social work. In this context social work educators are perceived to obtain their knowledge mostly from foreign literature or even students' experience rather than from local social work practice: (Quote 2:92; 2:100; 2:176; 2:181)

"... most of academicians do not practice-so if they don't practice, of course they are doing some research or whatever but they will keep in one way or another doing some foreign social work in classroom and expecting people to do some local social work after this-so this is also a challenge" (Quote 2:174).

Alumni suggested in order to improve the adequacy of social work training at ISW to demand social work educators before taking up an academic career to collect at least several years of practical experience in the field of social work to see what problems are actually affecting people and which kind of challenges social workers face when seeking to address clients' problems. (Quote 16:91). Only then, according to one practitioner interviewed, will social work educators be able to "...train social workers in an actual perspective, actually what is happening in the field instead of basing on theories, models and values that are written in books which actually has no translation to what is happening in the field" (ibid.). Social work educators confirmed that in most cases educators who are employed at social work training institutions in the country directly after having graduated and lack practical experience in the field of social work. Although they welcomed the idea of offering opportunities for educators to collect, the scarcity among personnel would hinder them in implementing the suggestions of social work practitioners interviewed. (Quote 25:46) In order to illustrate the issue of scarce resources for academic training institution educators exemplified that in fact according to ISW regulations

each educator should have the possibility to once get at least one semester off in order to do research and publish results, due to shortage of staff and lacking financial resources, the training institution in fact was still using part timers who were even not on the institute's pay list but were paid according to their assignments. (Quote 25:47)

## **9.2 Suggestions on how to improve social work practice**

"Look at this country, there a lot of people who are living an inhuman life, so social workers cannot say 'Oh, the government does not give ...us personal...', that is actually it's really a fight and as I said earlier on-social workers pick the date-the things you are dealing with, are things that are being ejected from a system...so even if you have a very well established social welfare system, you will be fighting against the establishment...of course not combative but you really have to be challenging all the time because when you see a destitute person like a street child, he or she comes from the policy that is operative and that has been formulated by the current system and that is the current government...(Quote 25:41)".

### **Engaging in the formulation and development of policies**

Social work educators stated that in order for social work practice to be more effective the concept of social work needed to experience a conceptual expansion. Traditionally social work in Tanzania is understood to be dealing with individuals and groups of clients. Nevertheless social workers would find themselves quite weak in the field, being confronted with lacking resources and lacking recognition on the side of government authorities, which leads practitioners to avoid system challenges instead of addressing them. To the view of educators this dilemma can be handled by an increased political engagement including lobbying and advocacy. As far as the understanding of social work in a developing country such as Tanzania is concerned social work educators interviewed promoted the mindset of social development whose concept would enable social workers to address social problems as products of a societal and economic system which again is surrounded by a legal and political climate (Quote 25:15):

"...you see you cannot afford in social work to do what they do in agriculture in drip irrigation...you know a plant is here and you irrigate this plant...I mean you can get a good crop...but the surrounding is dry...in agriculture it can work when there is a water shortage but in social work it is really difficult...case work, group, community but finally if you we are talking about empowerment, how can you achieve empowerment if you don't achieve the social environment...so finally you really have to have the wider and broader perspective.....so if you are a social worker, you don't deal with this basic infrastructure that produces this...you are going to deal with the individuals, victims, groups but it will only work insofar as you are there but it is not sustainable....it is a reformist kind of because they'll keep on being produced.....(Quote 25:13; 25:14)"

While social work practitioners indicated that although the concrete implementation and claiming of social welfare regulations might be difficult they seek to refer to the country's legal framework in their daily work practice, social work educators criticized the inconsiderate formulation of policies on the side of government representatives and the fact that an umbrella policy for social welfare in the country is still missing. They recommended for the government to formulate realistic and implementable policies to apply cost applications in advance instead of following directives from international bodies. (Quote 23:48)

### **Defining “social worker” as a role model**

The understanding towards the role which a social worker is expected to perform lays the foundation for social work activities as they are taught in social work training and performed in social work practice. To the view of educators social workers are **activists** for the sake of their clients' wellbeing which is necessary even in countries with a well-established social welfare system but even more important in the context of a developing country such as Tanzania where resources for social welfare are generally low and government representatives need to be reminded and informed about what is needed in social work practice. (Quote 23: 40; 23:42; 25:41) This activism also relates to engaging and participating in political discussions (Quote 23:47). According to educators, social work practitioners need not facilitate the government's routine but work as change agents in order to improve the social welfare system in the country. Instead of lamenting and complaining about the challenges in their daily work, social workers should challenge the current system. (Quote 25:40)

As far as the preparation of social work students for their future role as change agents is concerned, educators do confirm that social work training at ISW seeks to teach and recommend ways on how to perform this role in the administration of social welfare services. (Quote 23:41) With regard to competences that social workers need to incorporate in order to become activists, educators mentioned knowledge on the socio - economic situation and the social welfare system in the country as well as knowledge on the problems he or she is going to be an activist for. Apart from this specific knowledge which according to educators is conveyed at the ISW, social workers needed to be able to communicate their requests to those in power, which requires good communication skills and the ability to acquire evidence based information (Quote 23:43; 23:49). Apart from requesting financial funding from the government this kind of networking also aims at improving the societal status of social work by making government representatives see what social work does and which impacts it has on the country's society (Quote 25:43).

This view is also shared among social work practitioners who highlighted the importance of demonstrating the impact of social work profession in terms of addressing issues that affect the community. In concrete terms increased documentation and gathering of data were mentioned as possible activities to enhance social work's status:

"...it is a very minor profession, it is not very well recognized so we have to think high and think beyond to develop other approaches and other ideas that can help to bring our profession to be recognized and be known that these people are doing something; coming up with data, information showing these people are suffering from these problems, we can use this approaches and this models to address these problems instead of remaining in the offices and waiting for salaries ...we have to think more beyond than what has been trained ...(Quote 16:101)".

In order to avoid that social work students become passive recipients of policies and support the development of social work students' political awareness, social work educators see it as their task to teach them about relevant policies in the country, the effects policies have on peoples' lives as well as the process of policy formulation and implementation. (Quote 23:45; 46; 47) According to social work educators' views, one might suggest that social welfare officers are expected to perform a double mandate:

"...so well students-when you get to the district-yes, you're a government employee, but a very different government employee-you're a person who is not there to facilitate what is the routine of government practice-you're a person who is there to kind of actually be walking backwards...(Quote 25:40)".

Social work educators do acknowledge the fact that social work profession in Tanzania due to different reasons is fragmented as far as its representation in the country is concerned. One reason mentioned, is the lacking welfare system and the absence of a social work counsel which could give clear guidelines regarding a conceptual outline of the social work education and practice in the country. According to educators social workers tend to describe their job position depending on the place where they are working or the tasks they have to fulfill. Educators perceive the variety of descriptions for social workers such as medical social workers, social welfare officers and so on, as a clear result out of this situation.

Additionally social work educators feel that even when they are facing challenges in terms of funding or government assistance social workers themselves are responsible for their actions and the profession to be visible. In this context one social work educator reported of a case where he was visiting one of his students during her internship in a hospital in a rural region in Tanzania where inhabitants as well as the hospital management had never really had contact

with social workers before. By engaging herself in case work and providing guidance and counselling to the hospital's patients, at the end of her internship the student had not only managed that her services were regularly utilized by patients but that the benefits of having a social worker in the hospital were visible for the management. (Quote 25:50; 25:51)

### **Engagement in social work associations**

The political dimension of social work can according to both, educators and practitioners, be complemented in a meaningful way by addressing the lacking societal recognition for social work profession in Tanzania and promoting the activities of social work associations. Educators hold the lack of knowledge about social work on the part of community members and government representatives responsible for the low number of social work students. Due to the fact that Tanzanian society would not acknowledge the role of social work in the process of national development, social work could not promote its position as a profession:

“You must be able to convince the administration to categorize social work profession as a very important profession...after convincing them, they will pay attention to our activities...I think the community will see...for example in case of inadequate resources, if I'm able to convince the administration and manage to plan a lot of resources in our unit, this will enable me to do much of activities which will be concrete because everybody can see what I'm doing...and the community will see that it is social work who did this” (Quote 19:37).

In a context where social work professionals cannot rely on governmental support and find themselves scattered across the country, social work associations serve as means of representing social workers' concerns to a bigger audience and also offer a platform for basic exchange between representatives of social work education and practice. Social workers who participated in the research spotted the benefits of having a strong social work association in the country with regard to lobbying and being able to argue for the importance of increasing job opportunities for social workers. (Quote 2:124; 2:125) Apart from the representation of interests, social workers also highlighted the role of TASWO in the organization of trainings for social work practitioners is concerned. Trainings could serve as complement to elements which had been left out in social work training but were discovered by social workers as being relevant for social work practice. (Quote 2:185)

### **9.3 Summary**

Section 9 elaborated possible causes for the gap between social work practice and social work training as it is experienced by social work practitioners who participated in the research. As social work training and its inadequacy in terms of preparing students for social work practice in Tanzania has emerged as relevant issue in this context, it was relevant to obtain views from representatives of both social work practice and social work training.

Practitioners exemplified the inadequacy of social work training at ISW by the use of foreign teaching materials on the one hand as well as missing techniques on how to adapt foreign concepts to local conditions on the other hand. Although social workers welcomed the input of foreign experiences in the field of social work, they pointed out the necessity of adapting it to local conditions. Differences between developing and developed countries with regard to the nature of problems as well as the fact that Tanzania as a developing country neither has a comprehensive social infrastructure nor sufficient employment opportunities for social workers have thereby been mentioned as major hindering factors for the implementation of foreign social work approaches.

Next to the big impact of foreign social work knowledge on social work training in Tanzania, the inadequacy of social work training at ISW has also been related to the generalist focus of social work education itself. ISW alumni felt that their indeed broad but superficial knowledge did not only deny them an intensive preparation of working in different settings of social work practice but also hindered them in the creation of approaches to specifically address clients' diverse problems. At the same time social work practitioners found it important for social work training to regularly update its curriculum in order to react to the changing needs of the society and prepare students to address culturally controversial topics such as homosexuality.

Social workers mentioned the acquisition of additional knowledge as an active strategy to address the inadequacy of social work training. In this context "On-Job-Professional Development" which includes exchange with colleagues or participating in trainings that are offered by the employer enables practitioners to expand their set of skills.

The lacking experience on the side of social work educators has been mentioned as another crucial point held responsible for the gap between social work education and practice. ISW alumni criticized social work educators' lack of work experience which was crucial in order to adequately prepare students for social work practice in the context of a lacking social welfare system and teach them about relevant practical approaches in the field of resource mobilization.

The gap between social work theory and practice as it is experienced by social work practitioners has not yet advanced as an urgent affair to representatives of social work training. Social work educators indeed admitted that there was a strong reliance on western literature and teaching materials in training but also highlighted their efforts as far as the contextualization of social work approaches is concerned. However, due to a lack of local research activities and written documents, social work educator's efforts to contextualize social work knowledge do not seem to follow any concept, but can be rather perceived as situational in character. Although social work practitioners and social work educators share the same views and values regarding the assessment of social work clients' problems and relevant social work approaches, they differ as far as the perceived role of social work professionals is concerned. In contrast to social work professionals who focus on their role as contact persons for clients rather than change agents for society, social work educators outlined the relevance of social work training in assisting students to develop skills in advocacy and lobbying. As far as suggestions on how to improve social work practice is concerned, educators do not offer solutions or coping strategies for practitioners to address challenges in their daily routine such as the lacking social welfare system or the ambiguity of not being able to adequately assist clients, but pledge for them to engage themselves in social work associations and demand responsibility from the government instead of avoiding challenges which are caused by the system.

## **10 Conclusion**

The current state of research in developing studies with regard to social work in developing countries and especially sub-Saharan Africa indicates that due to its colonially influenced history of social work practice and its given socio-economic characteristics, developing countries need to detach themselves from western oriented social work concepts and engage themselves in the exploration of contextually relevant social work knowledge. In this context the master thesis concerned the appropriateness of social work interventions with regard to the conditions of developing countries such as Tanzania. By investigating existing daily work approaches of social workers in one semi-urban region of the country the research did not prioritize the view or recommendations of international academia, but rather aimed at taking the experiences of social work practitioners as starting point to elaborate the appropriateness of social work approaches. The master thesis thereby took up the research context of a project called PROSOWO – “Promotion of Professional Social Work Towards Social Development and Poverty Reduction in East Africa”. PROSOWO, a four years joint initiative between academic training institutions in Austria and four East African countries, which ran under the auspices of Austrian Development Cooperation and combined qualitative with quantitative research methods in order to address the lack of locally produced, specialist literature by getting a general idea regarding the country specific situation of the respective social work profession. Within the meaning of a contextual extension, the current master thesis focused on the assessment of social work professionals of Iringa Region who as alumni of the Institute of Social Work were asked about the relevance of social work approaches for addressing social work clients’ needs in their daily work routine.

The examination of the master thesis’ overall research question (“Which approaches are relevant for the daily work routine of alumni of the Institute of Social Work when working in semi – urban Tanzania?”) and its sub questions that guided the investigation has led to the following conclusions.

### ***Poverty and lacking social solidarity among community members in semi – urban Tanzania***

In the case of semi - urban Iringa region social workers are confronted with an environment that is characterized by low economic capital, a lacking infrastructure and subsistence farming as major source of income for inhabitants. Apart from addressing the community as a whole, social workers mainly work with four groups, that are families and couples, children, elderly people and people who are living with a disability. Poverty thereby has been mentioned as cross cutting issue that is affecting all groups of clients, but has a special relevance in the medical

setting, when clients cannot afford to pay for their treatment or medication. Apart from problems of vulnerable children, gender based violence and societal stigma, social work practitioners also deal with the consequences of HIV / AIDS that has affected the region enduringly. Inhabitants' periodic tendency to extensively consume the local brew called "Ulanse" and the promiscuous behavior resulting out of it have thereby been related to the high rate of people affected by the virus in Iringa. The fact that according to social work professionals, social solidarity among community members is merely existent and rather fragile in nature, in a context where there is no comprehensive social welfare system has severe effects on the handling of social problems.

### ***Dealing with lacking resources for social work practice and social work clients***

The daily routine of social workers interviewed is characterized by the lacking social welfare system within the country and a lack of resources for social work practice itself, which results in an inflexibility for social workers to address clients' problems. Apart from the issue of resources, are social workers influenced by the unbalanced ratio of clients per social worker and the overall low status of social work profession in the country. Although social workers share the same working conditions, depending on a social worker's sphere of activity there are slight differences with regard to the tasks practitioners are expected to perform. In contrast to social workers who work in social welfare offices and are in the position to perform a variety of interventions, medical social workers due to the financial and structural scarcity within the country and their assignment of regulating payment issues on behalf of patients do not only feel restricted as far as the application of social work knowledge is concerned but also experience pressure in their daily routine. In this context international organizations such as UNICEF do impact on social work practice insofar as through financial support they do not only enable practitioners to increase their knowledge in the course of newly created projects but provide resources for social workers that again can be made make accessible to clients.

### ***Mobilizing resources in order to address the needs of social work clients***

The surrounding conditions as they have been outlined above do play a relevant part in how social workers seek to address their clients' needs. Based on the information of social work practitioners, social work approaches applied can be clustered in three groups: Approaches in the context of resource mobilization, psychosocial support and approaches in the context of administration. Although employers do set the framework for the assignment of social workers, their concrete tasks do largely depend on the tasks they ascribe to themselves.

In this context the so called “Code of Ethics” (see p. 79) serves as relevant base of reference for social workers, providing them with guidelines for a succeeding social work practice.

Approaches which social workers apply in the context of **resource mobilization** do result out of the fact that the majority of social work clients is affected by poverty and the country lacks a comprehensive social welfare system. In this context social work activities which aim at acquiring financial or material resources for social work clients take up a major part of social workers’ daily routine. As far as resource mobilization of social workers in semi-urban Tanzania is concerned, the involvement of different stakeholders such as family or community members or government representatives as well as, if available, private or religious organizations is one of the major tools of social work professionals to lobby for their clients’ needs. In the context of a lacking social solidarity among relatives and community members with regard to daily life issues as well as problems of addiction, mental illness or sexual orientation, social workers are busy lingering the burdens of inner familial support by creating awareness concerning human rights. Apart from outsourcing social welfare services to informal systems of support, resource mobilization enables social workers to address a big number of people at the same time and thereby respond to the unbalanced ratio of clients per social worker. When relating to community members, social workers utilize competences such as involving religious leaders or local representatives of a community. In the context of resource mobilization social workers are torn between a feeling of resignation due to the lacking social welfare system and lacking resources for social work practice and a feeling of responsibility for their clients’ problems. As far as the handling of this dilemma is concerned, social workers display both, criticism regarding the lacking commitment on the part of colleagues as well as an implicitness towards the investment of personal resources in order to assist clients in need. The avoidance of system challenges such as procedures set by NGOs or governmental institutions with regard to the acquisition of financial support and social workers’ resorting to private donors, are coping strategies which appear accordingly.

Whereas approaches in the context of resource mobilization by trend operate the goals of social work interventions, approaches concerning **psychosocial support**, through their focus on interpersonal relationships which form the foundation of any social work activity, rather serve as means of target achievement. Psychosocial support includes basic interventions in the field of social work which are widespread and aim at alleviating social work clients’ sorrows. Depending on a client’s problem psychosocial support can either be sufficient itself or serves as addition to other social work approaches. As far as concrete approaches in the field of

psychosocial support are concerned, counselling as well as relationship building and group work form major parts of a social worker's activities.

**Administration** describes an approach which focuses on the planning and evaluation of social work interventions. In this context administration does not only include activities that assist social work practitioners in assessing information regarding social work cases, planning interventions accordingly and doing follow up in order to proof the effectiveness of specific interventions but also refers to procedures that are applied in order to plan according to the budget that has been provided by the local government. The extent to which a social worker is engaged in the field of administration depends on his / her role in the particular work environment. The fact that administrative activities require the existence of a certain infrastructure make it a practice that is not very common among social workers in the field.

### ***Inadequacy of social work training impacting on social work practice***

In the course of encouraging social workers to report about their daily work approaches, results of the PROSOWO project have been confirmed insofar as practitioners also indicated a gap between what they had learned in social work training and what they face in their daily work practice. As a result of practitioners questioning social work training and its adequacy in terms of preparing students for social work practice in Tanzania, views from representatives of social work practice and social work training have been obtained concerning this matter. Social workers exemplified the inadequacy of social work training at ISW by the use of foreign teaching materials on the one hand as well as missing techniques on how to adapt foreign concepts to local conditions on the other hand. Although social workers welcomed the input of foreign experiences in the field of social work, they pointed out the necessity of adapting foreign social work knowledge to the local context which would unfold itself in the differences between developing and developed countries with regard to the nature of problems. The different nature of problems resulting out of the fact that Tanzania is a developing country which neither has a comprehensive social infrastructure nor enough employment opportunities for social workers has been mentioned in this context. Social work educators confirmed the reliance upon western literature and teaching materials in training but also highlighted their efforts as far as the contextualization of social work approaches in class room is concerned. However, due to a lack of local research activities and written documents, these efforts of contextualizing social work knowledge do not seem to follow any concept, but can be rather perceived as situational in character.

Next to the big impact of foreign social work knowledge on social work training in Tanzania the inadequacy of social work training at ISW has also been related to the generalist focus of social work education itself. ISW alumni felt that their indeed broad but superficial knowledge would not only deny them an intensive preparation of working in different settings of social work practice but also hinder them in intensively addressing clients' personal problems that do not mainly focus on poverty. At the same time social work practitioners found it important for social work training to regularly update its curriculum in order to react to the changing needs of the society and prepare students to address culturally controversial topics such as homosexuality.

The lacking experience on the side of social work educators has been mentioned as another crucial point held responsible for the gap between social work education and practice. ISW - alumni criticized social work educators' lack of work experience which was crucial in order to adequately prepare students for social work practice in the context of a lacking social welfare system and teach them about relevant practical approaches in the field of resource mobilization.

Due to the fact that educators do not offer concrete solutions or coping strategies for practitioners to address challenges in their daily routine such as the lacking social welfare system or the ambiguity of not being able to adequately assist clients, they seek to strengthen social workers in demanding responsibility from the government. Accordingly their suggestions with regard to an improvement of social work practice focus on the importance of social workers to perform their role as change agents and the relevance of social work training in assisting students to develop skills in advocacy and lobbying.

## 11 Outlook

It was the goal of the current master thesis to contribute to the discourse on an appropriate social work practice in the context of developing countries. Having used the example of Tanzania, it were social workers who as experts of their daily work were invited to report of their routine and thereby gave information about the relevance of approaches in terms of addressing local community's needs. In this context it became apparent that due to challenging conditions in social work practice such as the high personal commitment which social workers invest in resource mobilization, the examination whether current social work approaches efficiently assist in dealing with the needs of society within a developing country such as Tanzania, has so far not been of prime importance for social work professionals. Further research on factors which influence the reflexivity of social workers in critically examining existing social work approaches could give informative results thereby.

Social workers indeed demand an adaption of foreign social work knowledge to local conditions, yet they do not reject foreign concepts as such but question their applicability in the context of a lacking social welfare system and lacking opportunities to integrate specific aspects in local social work training and practice. The question whether an appropriation of social work profession in developing countries just is an invention of academia within the global north or also is a matter of concern to local social work professionals could not extensively be answered in the course of the research. Nevertheless, the gap between social work education and practice as it has been experienced by social work professionals could provide basic evidence for the dissatisfaction of social workers with regard to the appropriateness of current social work activities.

As far as the handling of foreign social work knowledge is concerned, the example of semi-urban Iringa Region and its collaboration with UNICEF on child protection issues has illustrated that a successful adaption of foreign social work concepts takes place, if social work activities are comprehensively aligned to the availability of resources. In order to sustainably improve conditions for social work practice and social work clients, professionals need to supplement their claims to government authorities regarding an increase of resources with an active search for solutions on how to create adequate strategies to address problems in the context given ("change agents"). Due to the fact that social work practitioners are fully engaged within the challenges of social work practice, it must be the task of social work training institutions and social work associations such as TASWO to promote an exchange between social work academia and practice as well as establish conditions which encourage social work

students as well as alumni to critically reflect about their profession and possibly redefine their role as social workers.

Last but not least, in order to improve social work practice it must not only be about developing structures of a comprehensive social welfare system, which understandably is a lengthy process, but also and especially about providing social workers with mechanisms to deal with challenges of social work practice such as the ambiguity of not being able to adequately assist social work clients due to a lack of resources.

## 12 References

- ALLEGRI, Inta and GRAY, Mel (2002), “Cross-cultural practice and the indigenisation of African social work”, *Social Work/Maatskaplike Werk*, Vol. 38 No. 4, pp. 324–336.
- Austrian Partnership Programme in Higher Education & Research for Development (APPEAR) (2016), “Professional Social Work in East Africa - Towards Sustainable Impact” (accessed 30 October 2016).
- BALGOPAL, Pallassana R. and NIMMAGADDA, Jayashree (2000), “Indigenisation of Social Work Knowledge. An Exploration of the Process”, *Asia Pacific Journal of Social Work and Development*, Vol. 10 No. 2, pp. 4–18.
- BLANCHET, K./ MESAHI, S./ MYAMBA, F. and WALSHAM, M. (2015), “Applied research concerning inclusion of persons with disabilities in systems of social protection. Social protection policy analysis - Tanzania”.
- BREUER, Franz (2009), *Reflexive Grounded Theory: Eine Einführung für die Forschungspraxis*, 1. Aufl., VS Verlag für Sozialwissenschaften / GWV Fachverlage GmbH Wiesbaden, Wiesbaden.
- CHARMAZ, Kathy (2014), *Constructing grounded theory, Introducing qualitative methods*, 2. ed., SAGE, Los Angeles.
- FOOK, Jan and GRAY, Mel (2004), “The quest for a universal social work. Some issues and implications”, *Social Work Education*, Vol. 23 No. 5, pp. 625–644.
- GRAY, Mel (2005), “Dilemmas of international social work: paradoxical processes in indigenisation universalism and imperialism”, *International Journal of Social Welfare*, Vol. 14, pp. 231–238.
- GRAY, Mel (2010), “Social development and the status quo. Professionalisation and Third Way co-optation”, *International Journal of Social Welfare*, Vol. 19 No. 4, pp. 463–470.
- Hubert Kairuki Memorial University (2015), “Launching of the Master of Social Work Programme at HKMU on 13th June 2014”, available at:  
[http://www.hkmu.ac.tz/index.php/media/gallery/launching\\_of\\_the\\_master\\_of\\_social\\_work\\_programme\\_at\\_hkmu\\_on\\_13th\\_june\\_2014](http://www.hkmu.ac.tz/index.php/media/gallery/launching_of_the_master_of_social_work_programme_at_hkmu_on_13th_june_2014) (accessed 26 November 2015).
- Institute of Social Work (ISW) (2016), “About Us”, available at:  
<http://www.isw.ac.tz/index.php/about-us> (accessed 20 November 2016).
- International Federation of Social Workers (IFSW) (2014), “Global Definition of Social Work”, available at: <http://ifsw.org/policies/definition-of-social-work/>.

- Kampala International University (2015), “School of Development Studies and Management”, available at: [http://www.kiu.ac.tz/?page\\_id=5563](http://www.kiu.ac.tz/?page_id=5563) (accessed 26 November 2015).
- KREITZER, Linda (2004), “Indigenization of Social Work Education and Practice: A Participatory Action Research Project in Ghana”, Phd, Faculty of Social Work, University of Calgary, Calgary, Alberta, August 2004.
- KREITZER, Linda (2012), *Social work in Africa: Exploring culturally relevant education and practice in Ghana*, Africa: missing voices series, Vol. 10, Univ. of Calgary Press, Calgary.
- LAIDSON, Neema/ MASON, Sally/ MNGODO, Stella and MWANZI, Asiya (2015-2015), *Standardizing Social Work Education to Strengthen Tanzania's Psychosocial Response to HIV / AIDS*, Harare, Zimbabwe.
- MABEYO, Zena M. (2014), “The Development of Social Work Education and Practice in Tanzania”, in Spitzer, H., Twikirize, J.M. and Wairire, G.G. (Eds.), *Professional Social Work in East Africa: Towards Social Development, Poverty Reduction and Gender Equality*, 1. publ, Fountain Publishers, Kampala, pp. 121–135.
- MABEYO, Zena M./ NDUNG’U, Elijah M. and RIEDL, Sabrina (2014), *The Role of Social Work in Poverty Reduction and the Realisation of Millennium Development Goals in Tanzania*, 1. publ, Fountain Publishers, Kampala.
- MAGHIMBI, Sam, MCHOMVU, A. S. and TUNGARAZA, Felician S. (2002), “Social security systems in Tanzania”, *Journal of Social Development in Africa*, Vol. 17 No. 2, pp. 11–28.
- MALUKA, Stephen O. (2013), “Why are pro-poor exemption policies in Tanzania better implemented in some districts than in others?”, *International Journal for Equity in Health*, Vol. 12 No. 1, p. 80.
- MIDGLEY, James (1981), *Professional imperialism: Social work in the Third World*, Studies in social policy and welfare, Vol. 16, Heinemann, London.
- MIDGLEY, James (1990), “International Social Work. Learning from the Third World”, *Social Work*, Vol. 35 No. 4, pp. 295–301.
- MIDGLEY, James (2010), “The Theory and Practice of Developmental Social Work”, in Conley, A. and Midgley, J. (Eds.), *Social Work and Social Development: Theories and Skills for Developmental Social Work*, Oxford University Press, New York, N.Y, pp. 3–30.
- MIDGLEY, James (2012), “Social Protection and Social Policy. Key Issues and Debates”, *Journal of Policy Practice*, Vol. 11 No. 1-2, pp. 8–24.

- Public Service Pensions Fund (PSPF) (2015), “About us”, available at: <http://www.pspf-tz.org/about> (accessed 13 July 2015).
- SPITZER, Helmut and TWIKIRIZE, Janestic M. (2014), “PROSOWO: A Project to Professionalise Social Work in East Africa”, in Spitzer, H., Twikirize, J.M. and Wairire, G.G. (Eds.), *Professional Social Work in East Africa: Towards Social Development, Poverty Reduction and Gender Equality*, 1. publ, Fountain Publishers, Kampala, pp. 1–11.
- SPITZER, Helmut (2014a), “Social Work in African Contexts: A Cross - cultural Reflection on Theory and Practice”, in Spitzer, H., Twikirize, J.M. and Wairire, G.G. (Eds.), *Professional Social Work in East Africa: Towards Social Development, Poverty Reduction and Gender Equality*, 1. publ, Fountain Publishers, Kampala, pp. 15–28.
- SPITZER, Helmut (2014b), “Ubuntu statt Psychoanalyse”, *Südwind Magazin für Internationale Politik, Kultur und Entwicklung*, No. 7-8, pp. 28–29.
- STEINWACHS, Luise (2006), *Die Herstellung sozialer Sicherheit in Tanzania: Prozesse sozialer Transformation und die Entstehung neuer Handlungsräume*, Univ., Diss.-- Bielefeld, 2004, *Market, Culture and Society*, Vol. 15, LIT, Berlin.
- Tanzania International University (2015), “Our Courses”, available at: [http://www.tiutz.com/index.php?option=com\\_content&view=article&id=63](http://www.tiutz.com/index.php?option=com_content&view=article&id=63) (accessed 26 November 2015).
- The Open University of Tanzania (2015), “Department for Sociology and Social Work”, available at: [http://www.out.ac.tz/unit\\_department.php?u=4&d=13](http://www.out.ac.tz/unit_department.php?u=4&d=13) (accessed 26 November 2015).
- The State University of Zanzibar (2015), “Our Programs”, available at: <http://www.suza.ac.tz/#> (accessed 26 November 2015).
- The United Nations Children's Fund (UNICEF) (2016): "Female Genital Mutilation/Cutting: A Global Concern" (Accessed 13 November 2016).
- The United Nations Development Program (UNDP) (2015a), “About Tanzania”, available at: <http://www.tz.undp.org/content/tanzania/en/home/countryinfo/> (accessed 12 July 2015).
- The United Nations Development Program (UNDP) (2015b), “Tanzania Human Development Report 2014. Economic Transformation for Human Development”, available at: <http://www.thdr.or.tz/docs/THDR2014-Main.pdf>.
- The United Republic of Tanzania (URT) (2003), “The National Social Security Policy”, available at: <http://www.tccia.com/tccia/wp-content/uploads/legal/policy/socialsecuritypolicy.pdf> (accessed 13 September 2015).

- The United Republic of Tanzania (URT) (2010), “National Strategy for Growth and Reduction of Poverty II”.
- The United Republic of Tanzania (URT) (2013), “Iringa Region. Socio Economic Profile 2013”.
- The United Republic of Tanzania (URT) (2014), “Basic Demographic and Socio-Economic Profile”, available at: [http://nbs.go.tz/nbs/takwimu/census2012/NATIONAL-SOCIO-ECONOMIC%20PROFILE\\_CENCUS-2012.zip](http://nbs.go.tz/nbs/takwimu/census2012/NATIONAL-SOCIO-ECONOMIC%20PROFILE_CENCUS-2012.zip) (accessed 30 September 2015).
- The United Republic of Tanzania (URT) (2015a), “About SSRA”, available at: <https://www.ssra.go.tz/en/node/42> (accessed 22 October 2015).
- The United Republic of Tanzania (URT) (2015b), Mapping Study Report for Social Welfare Services and Providers in Tanzania.
- The World Bank (2016), “Data. How does the World Bank classifies countries?”, available at: <https://datahelpdesk.worldbank.org/knowledgebase/articles/378834-how-does-the-world-bank-classify-countries> (accessed 22 October 2016).
- TWIKIRIZE, Janestic M. (2014), “Indigenisation of Social Work in Africa; Debates, Prospects and Challenges”, in Spitzer, H., Twikirize, J.M. and Wairire, G.G. (Eds.), *Professional Social Work in East Africa: Towards Social Development, Poverty Reduction and Gender Equality*, 1. publ, Fountain Publishers, Kampala, pp. 75–90.
- Zanzibar University (2015), “Undergraduate Study Programme”, available at: <http://www.zanvarsity.ac.tz/index.php?zu=undergraduate> (accessed 26 November 2015).

## **13 Appendix**

### **13.1 Abstract (English)**

Based on the assumption that current social work training and practice in East Africa are to a great extent influenced by the replication of western social work knowledge and lack effective strategies to address society's problems in the context of developing countries, the present Master Thesis examines the views of educators and alumni of the Institute of Social Work (ISW) regarding the relevance of social work approaches which practitioners regularly apply in their daily work routine, by means of qualitative interviews. The investigation illustrates that in the context of semi-urban Tanzania social workers seek to address both, cross cut issues related to poverty and lacking education among community members as well as problems of vulnerable groups such as children and people who are stigmatized due to living with a disability or disease. The lacking social welfare system in the country makes practitioners busy with mobilizing resources from various stakeholders in order to be able to assist clients while they apply approaches of community involvement, psychosocial support as well as administration accordingly. Although social work training at ISW managed to equip social workers with tools to work on social problems, the lacking contextualization of foreign social work knowledge did not only convey a contorted conception of social work practice but also impacted on alumni's ability to adapt foreign social work knowledge to local conditions. Hence efforts to improve the effectiveness of social work interventions in Tanzania cannot go without endeavors to minimize the gap between social work training and practice.

### **13.2 Abstract (German)**

Die Masterarbeit geht von der Annahme aus, dass die derzeitige Sozialarbeitsprofession in Ostafrika weitgehend von der Replikation westlich geprägten Sozialarbeitswissens beeinflusst wird und es an geeigneten Strategien zur Bewältigung gesellschaftlicher Probleme im Kontext von Entwicklungsländern mangelt. Mittels qualitativer Interviews wird deshalb die Sichtweise von ProfessorInnnen, vor allem aber AbsolventInnen des Institute of Social Work (ISW) im semi - urbanen Tansania hinsichtlich der Relevanz von Handlungsansätzen, die im Arbeitsalltag von PraktikerInnen regelmäßig zur Anwendung kommen, untersucht. Die Auseinandersetzung verdeutlicht, dass sich SozialarbeiterInnen im semi – urbanen Kontext vor allem mit armutsbedingten Problemen bildungsferner Gesellschaftsschichten sowie den Problemen gefährdeter und ausgegrenzter Gesellschaftsgruppen beschäftigen. Das lückenhafte und unausgereifte Wohlfahrtssystem des Landes führt dazu, dass die Ressourcenmobilisierung für KlientInnen einen großen Teil der sozialarbeiterischen Praxis einnimmt, wobei Ansätze der Gemeinwesenarbeit, psychosoziale Unterstützung sowie administrative Tätigkeiten ergänzend zum Einsatz kommen. Obwohl es der Ausbildung am Institute of Social Work gelingt, AbsolventInnen mit dem Handwerkszeug zur Bearbeitung sozialer Problemstellungen auszustatten, führt die fehlende Kontextualisierung ausländischen Wissens nicht nur zu einer verzerrten Wahrnehmung der AbsolventInnen in Bezug auf die sozialarbeiterische Praxis, sondern beeinflusst auch deren Fähigkeit diese Bezugsquellen für die lokalen Gegebenheiten zu adaptieren. Aktivitäten zur Verbesserung der Effektivität von sozialarbeiterischen Interventionen in Tansania können daher nicht ohne Bemühungen auskommen, die Kluft zwischen Theorie und Praxis der Sozialen Arbeit zu minimieren.

### **13.3 Interview guideline for social work practitioners**

I am conducting this research for my master thesis in the field of development studies at the University of Vienna, Austria. As you might already know I came to Tanzania in order to conduct interviews with social workers who have undergone the Bachelor Program at the ISW to investigate approaches which are relevant for their daily work routine.

Before starting with the Interview I would like to give you some basic information on how I will proceed. The interview will be held in English. It will last about 45 to 60 minutes and will be recorded. If you prefer that your name is not mentioned, I can anonymise the interview. Do you have any questions?

#### **Daily work approaches**

- What are your tasks as a social welfare officer?
- Can you tell me a little bit of your daily work routine?
- Can you please describe the area where you are working?
- What do you think are the main challenges of Dar es Salaam compared to more rural areas?

#### **Relevance for society**

- What do you think are the main problems your clients are confronted with?
- Which kind of methods do you use to address their problems?
  - Can you give me a concrete example of what you do when a client is approaching you with a problem?
- Talking again about strategies you mentioned before, where did you learn about them?
- What other social work interventions could be helpful to improve your clients' situation?
- Can you tell me of a recent case where you felt successful in your work with a client?
- What are the challenges in your daily work with clients?
- What would you need to overcome those challenges?

### **Role of local knowledge**

- What influenced your social work knowledge?
- What kinds of competences are important when you are relating to the local community and their problems?
- What problems do you face in your practice which are related to the culture and traditions of your clients?
- In your view do the current models of social work practice go along with the cultural values and traditions in which you work? Why?
- In your view, what kind of cultural knowledge can inform social work practice and make it more relevant for society's needs?

### **Training institution**

- How useful are the things you learnt at the college for you daily work?
- Of the strategies you learned during your study which ones do you use?
  - How do you implement them in your daily work?
  - What are your experiences with these kinds of strategies?
- According to results from PROSOWO project most educational literature that is used during social work training is foreign. How do you see the impact of foreign social work knowledge on your practice?
- If you could influence the design of the Bachelor curriculum, what kind of suggestions do you have for the ISW?

**Is there anything left that you would like to add?**

**Thank you for taking time!**

## **13.4 Interview guideline for social work educators**

### **Personal Introduction**

- Can you please introduce yourself?
- What are your tasks as social work educator as ISW?

### **General preparation of social work students**

- What is the overall goal of social work training offered at ISW?
- What kind of target groups / problems are ISW alumni prepared to address?
- What do you think are the main approaches used by social work practitioners in Tanzania?
- Which social work approaches are according to your experiences relevant in addressing Tanzanian society's needs? (differentiate between rural and urban)
- To your mind, which competences do social workers need in order to be able to relate to the local society?
- How does social work training at ISW convey these competences?
- To which extent does social work training include strategies to deal with challenging clients and situations?

### **Teaching materials**

- What has influenced your knowledge as a social work educator?
- What kind of materials do you use for teaching students?
- Where does it come from?
- How do you see the adequacy of social work models which you teach at ISW as far as cultural values and traditions that social workers face in their practical work are concerned?

### **Use of foreign knowledge**

- What are the key concepts in social work that are taught at ISW?
  - Why are they important?
- ISW alumni reported of having difficulties when trying to adapt foreign social work approaches to the local context. How do you think ISW as a social work training institution could address issues of adapting foreign social work knowledge in order to avoid later difficulties for alumni?

### **Lacking social welfare system**

- During my interviews with ISW alumni they all reported of challenges in their daily work due to the lacking social welfare system in the country. Social workers reported of personal ambiguity resulting out of the fact that they are not being able to address resource related problems. How is this aspect addressed in social work training?
- As what I have been told by interviewees it is common for social workers to use personal resources (money) to assist clients. What do you as social work educator think about that practice?
- Involving a client's family or community has been indicated to be one of the main approaches used in social work practice. Considering that there are lacking alternatives for accommodating children, how do you rate the practice of reuniting abandoned children with their families in terms of sustainability and child protection?
- Can you please share your opinion regarding the impact of social welfare policies on social work practice?

### **Gap between social work theory and practice**

- Alumni also pointed out that social work educators lack practical experience and suggested to install complementary practical trainings for them in order to get a better picture of social work practice. What do you think of this idea?

### **Curriculum**

- What kind of mechanisms does the ISW apply in the field of curriculum development?
- ISW alumni also highlighted that there is a need of offering specialized social work programs for example in the field of medical social work. In terms of effectiveness how do you rank generalist social programs and specialized programs?
- What do you think of alumni's suggestion to include developmental issues within social work such as the impact of climate change in the curriculum?

**Is there anything left that you would like to add?**

**Thank you for taking time!**

### 13.5 Personal Information of Interview Partners

Place of Work	Ininga Municipal Council		Ininga Rural District Council		Ininga Regional Hospital	Ininga Regional Council	Munimbi National Hospital		Kinondoni Municipal	ISW	
	Female	Male	Female	Male	Female	Male	Male	Male	Female	Female	Male
Sex											
Age	33	35	37	31	39	39		35	42		
Grew up in	Rural	Urban	Rural	Urban	Rural	rural	urban		Urban		
Problems addressed in daily work	Neglect, matrimonial and child abuse cases	Problems of vulnerable groups	Matrimonial, affiliation, maintenance, children, elderly and disability cases	Neglected children, orphans, disabled people	Exemption for patients	General social problems			marital conflict, maintenance, neglected children		
Social work qualification	Bachelor Degree	Bachelor Degree	Advanced Diploma	Bachelor Degree	Bachelor Degree	Bachelor Degree	Bachelor Degree	Bachelor Degree	Bachelor Degree		
Social Work studies completed in	2011	2007	2002	2015	2010	2012	2010	2010	2013		
Other qualifications	Community Development		Masters in Community Planning and Management	Community Development	Nurse	-			Teacher		
Years / Months working in current position	5	5	10	6 months	1	3			5		
People working in the office	5	5	4	4	2	2			27		
visits abroad							Internship in Norway		Studies in USA	PhD in Austria	PhD in Austria