Social Work Practice in Zimbabwe

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ABSTRACT
The development of social work in Zimbabwe is closely tied to the country’s colonial history, its orientation reflecting a wholesale transfer from the British experience. Social work in Zimbabwe developed as a response to urban social ills such as crime, prostitution and destitution. The philosophy of the colonial policy makers was that such social ills, if unattended, would undermine order and stability. Social work was, therefore, seen primarily as an instrument of social control, and never seriously addressed itself to the root causes of social problems.

Since Zimbabwean Independence there has been a gradual shift towards developmental social work aimed at promoting social change. The Ministry of Community and Cooperative Development and a cross section of Non Government Organisations (NGOs) are involved in empowering rural communities and building their capacity for self reliance. However, the Department of Social Welfare, a major setting for social work practice in Zimbabwe, continues to be basically curative in orientation.

Introduction
Social work is a relatively new profession, and its beginning can be attributed to charitable and religious ideas. In the words of Leiby (1978:21)

“The Christian tradition was most important in the development of our institution for charity and correction because it furnished a cosmic drama, the story of creation, sin, judgment and salvation - in which suffering had a meaning and so did efforts to relieve and correct it. Helper and the helped could believe that their personal action counted for something in the very structure of the universe”.

Charity and religion were seen as inseparable though with emphasis on the salvation of the helper and little concern with the circumstances of the person.

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helped. Over the years there has been a gradual shift towards helping individuals to help themselves. Helping a needy individual is no longer seen as an end in itself, but rather a means towards a desired end, that of self reliance and the realisation of potential. However, social work pays special attention to disadvantaged members of society, including the poor, the mentally and physically handicapped, the aged, orphaned or deserted children, etc.

Another beginning for social work can be traced to Western Europe where social work developed in response to serious problems created by the Industrial Revolution. These social problems included alienation, marital conflict, homelessness, overcrowding, crime and poverty. In England, the Elizabethan Poor Laws were enacted to deal with the problem of urban destitution. These Poor Laws were enacted on the assumption that the poor were entirely responsible for their situation. Poverty was seen as a direct “consequence of idleness” (Midgley, 1984). In 1834 the Poor Laws were amended through the introduction of the principle of less eligibility which sought to limit the number of people on poor relief by making poor relief unattractive. This led to the establishment of workhouses where destitute people were housed. Those in these workhouses lived under terrible conditions, and some people, recognising this and motivated by religious and philanthropic considerations, began to render personal social services to the less fortunate. This marked the beginning of voluntary organisations geared towards providing social services to the poor and disadvantaged members of society. The proliferation of voluntary organisations led to the establishment of the Charity Organisation Society, to coordinate the activities of voluntary organisations involved in providing personal social services.

The Charity Organisation Society employed family visitors who visited the destitute to investigate their home circumstances and determine their eligibility for assistance. It was later realised that it was not enough to give relief without taking concrete action to deal with the causes of poverty. A deeper understanding of human behaviour and the relationship between people and their environment was called for. This was a move towards the professionalisation of the activities of the friendly visitors and led in the USA to the launching of the first training course for social workers at the New York Summer School in 1900.

Social work is defined differently according to differences in ideological orientation and because the nature of social work intervention tends to be problem specific. Despite these differences there is general agreement on the aims and objectives of social work. Goldstein (1974:4) defines social work as

“a form of intervention which enhances, conserves and augments the means by which persons individually and or collectively can resolve disruptions in their social existence”.

Goldstein further explains that social work (:5)
“provides the means and opportunity for dealing with conditions which interfere with productive social living”.

Baer and Federico (1978:61) define social work as a profession “concerned and involved with interactions between people and the institutions of society that affect the ability of people to emphasise life tasks, realise aspirations and values and alleviate distress”.

In these definitions social work is seen as a profession which seeks to enhance the adequate social functioning of individuals. Adequate social functioning is reflected in the ability to fulfil role requirements. Society is what it is because of the different roles that people play, and the performance of these roles contributes towards harmony, stability and order in society. A person may occupy several roles, eg that of father, husband, prison officer, preacher or party chair. Society defines the behaviour appropriate to each role. However, people may be unable to perform their roles adequately for a number of reasons, including role strain, role conflict, lack of capacity to fulfil role requirements, and lack awareness of society’s expectations. Social work concerns itself with the interaction between individuals and their environment, an interaction that may create social problems. Social workers are called upon to restore harmony between individuals and their environment.

Compton and Galaway (1984) identify three purposes for social work, namely:

- to resolve problems emanating from lack of harmony between individuals and their environment
- to prevent disequilibrium between individuals and their environment
- to identify and strengthen the potentialities inherent in individuals, groups and communities.

Baer and Federico (1978) also identify three purposes of social work, namely:

- activating and consolidating the problem solving and coping capacities of individuals
- enhancing the effectiveness of resource and service systems
- linking people with appropriate resource and service systems.

To realise these purposes social work tries to activate or revitalise the dormant capabilities for growth and change that exist in individuals. The ultimate aim is to enable individuals to effectively manage their own lives by making use of their inner and environmental resources.

As noted earlier, social work has part of its roots in religion, but is also a product of the philosophy of utilitarianism and humanism. These philosophical foundations emphasise the dignity and sanctity of human life. The central assumption is that every individual has the capacity for positive and meaningful self chosen change. Social work recognises that there are common human needs, but also that individuals are as unique as their thumbprints and therefore have unique needs.
The generic principles of social work give expression to this recognition, i.e., social work intervention must begin where the client is. This means understanding the problem from the client’s perspective and gaining an appreciation of what the problem means to them. In addition, clients have the right to self-determination, and must be involved in finding solutions to their problems. Emphasis is on doing things with clients, rather than for them. Social workers believe that self-chosen changes are more likely to be permanent than imposed changes, because they relate to feelings of accomplishment, satisfaction and personal fulfilment.

However, there are other ways to look at social work. If a social worker’s diagnosis of a problem reveals that the individual is to blame, the social worker must help their clients adjust to the reality of their environment, and accept and conform to the social norms of that environment. In these circumstances social work becomes an instrument of control, maintaining order and stability in society. Social work can also be used as an instrument of social change, when the individual’s problem is a reflection of a structural problem within the environment. Social workers then focus on the environment, to bring about structural change which would help to improve the social functioning of the individual.

Social work practice in Zimbabwe

The development of social work in Zimbabwe was greatly influenced by practices in Britain, partly because of the colonial ties. It takes place in a number of different settings, both in government departments and in non-government organisations.

1. Government Agencies

The Department of Social Welfare

The single largest employer of social workers in Zimbabwe is the Department of Social Welfare, Ministry of Labour, Manpower Planning and Social Welfare, which had, as at 1st January 1990, 143 professional social workers. The Department was established in 1948, initially to deal with the problem of juvenile delinquency within the white settler community. Because of the absence of trained personnel in the country, the colonial government secured the services of a probation officer from the United Kingdom. The first black probation officer was appointed in 1949, and appropriate institutions were established in Harare, Bulawayo, Gweru and Mutare to provide the controlled environment necessary for the behavioral modification process. The services of the Department of Social Welfare were expanded in 1965 to include public assistance, which had previously been a responsibility of the Department of Native Affairs. There has been a gradual expansion of the functions of the Department, which now include child welfare,
public assistance, drought relief, family counselling, etc. Since Zimbabwean Independence (in 1980) the Department has been decentralised with the creation of social welfare offices in almost every district in the country.

Areas of responsibility for social workers in the Department now include the following:

**Child Welfare:** Social workers employed by the Department of Social Welfare have a special concern with the promotion of child welfare, particularly the prevention of neglect and abuse of children. This social welfare function is defined by the provisions of the Children’s Protection and Adoption Act (CPA ACT) (Chapter 33), which defines a child in need of care. In administering the CPA Act social workers operate as Probation Officers, appointed in terms of Section 47 of the Act. Probation Officers with reason to suspect that a child is in need of care are empowered (Section 15) to remove the child to a place of safety, but on condition that the child is brought before the Juvenile Court at the earliest convenience. If the inquiry confirms that the child is in need of care the Juvenile Court, on the recommendation of the Probation Officer, can order that the child be placed in a certified training institute, with a suitable person, or remain in the custody of parents or guardian. Section 58 of the CPA Act also appoints Probation Officers as guardians *ad litem* of children for hearings of applications for adoption. This is to protect the interests of the children, and the Officer is expected to investigate the suitability of the applicants as adoptive parents and make appropriate recommendations to the Juvenile Court.

**Juvenile Delinquency:** The law in Zimbabwe requires Probation Officers to write reports for the criminal courts in respect of juveniles brought before them accused of criminal acts. The Probation Officer is expected to investigate the socioeconomic circumstances of the child with particular reference to upbringing, family background, relationships within the family, discipline, financial position, peers, performance and relationships at school, the nature of the community in which the child lives, and possible reasons why the child committed the offence.

The Probation Officer can, under the Criminal Procedure and Evidence Act (CPE Act) (Chapter 59), recommend to the court that children be transferred to the Juvenile Court where they would be dealt with as children in need of care, rather than as criminals, or recommend that children be committed to a training institute for rehabilitation purposes. Other options open to the Probation Officer include postponement of sentence for a period of not more than 3 years, a suspended sentence, or a discharge with caution. A number of juvenile delinquency cases are dealt with outside the court particularly minor offences. Probation Officers have an obligation to protect 14 year olds and below from prosecution. The procedure when a child commits an offence is for the police to request a Probation Officer’s report, which inevitably recommends to the Attorney General’s office that charges
are withdrawn and the child dealt with outside the criminal court. By implication, therefore, the special provision for dealing with juveniles contained in the CPA Act (Chapter 59) applies to the 15 to 18 year age group. In the case of juveniles committed to institutions, Probation Officers work with the families of the juveniles concerned to prepare for the eventual release of the juvenile.

Social workers employed in certified institutions and training institutes are required to develop treatment plans to facilitate the rehabilitation of juveniles placed in their care. They must also monitor the progress of the juveniles through the use of a grading system, as determined by their response to the rehabilitation process.

Welfare assistance and public assistance: Social workers employed by the Department of Social Welfare administer the Social Welfare Assistance Act of 1988 which provides for financial and other forms of assistance to destitute persons, i.e., those categorised as disabled, chronically ill or over 60 years of age. Assistance provided in terms of this Act includes pauper burials, occupational training, food, orthopaedic or orthotic appliances, counselling and institutional care.

The circumstances of a person applying for assistance must be fully investigated. Such investigations usually necessitate a visit to the home of the applicant to determine the degree of destitution. When the social worker is satisfied that the applicant is destitute and eligible for assistance, appropriate assistance is recommended. Because of pressure of work, many of these investigations are carried out by paraprofessionals, releasing social workers to deal with cases that require professional social work skills. There is an assumption that investigating and determining eligibility for welfare assistance is a process that does not require social work expertise, yet the problem of destitution often creates other social problems that block the individual from taking action that may lead to self-reliance. Thus social work skills are necessary if the intervention is to be meaningful. There is a growing awareness within the Department of Social Welfare that welfare and public assistance is not an end in itself, but rather a means towards self-reliance and the realisation of potential. It is therefore difficult to get welfare assistance while young and able-bodied, except as the dependent of a destitute person.

Counselling: Counselling is a major task for social workers employed by the Department of Social Welfare. Such counselling is designed to restore adequate social functioning and enable individuals to function as fully integrated human beings. In counselling, social workers assist clients to define and understand their problems and identify possible solutions. Problems that require counselling include marital conflict, adjustment problems, deviance, destitution, drug addiction and alcoholism. The ultimate responsibility for finding solutions to problems rests with the clients. Social work interventions remain ineffective unless they have the
cooperation of clients. Such cooperation is often forthcoming as clients feel the discomfort and pain arising from a social problem and become highly motivated to do something about it.

Refugees: Working with refugees has become an important function of social workers in both the Department of Social Welfare and in Non Government Organisations (NGOs). Zimbabwe continues to receive refugees from South Africa and Mozambique. Social workers, in accordance with the Refugees Act, have the responsibility to receive refugees, identify their needs, and provide appropriate assistance. The assistance granted to refugees may include finance, education, counselling, vocational training, job placement, or assistance to form cooperatives. Social workers assist refugees to adjust to their new environment and make use of their inner and external resource systems. As refugees are considered temporary residents in Zimbabwe, and expected to return to their own countries, emphasis is not only on meeting their immediate subsistence needs but on preparing them for life after their return home.

The disabled and the elderly: The disabled and the elderly are marginalised groups requiring the intervention of social workers to enhance social functioning. Elderly people with no family may turn to the Department of Social Welfare for support. This support is usually institutionalisation (Old People's Homes). The Government pays per capita grants to these institutions. Where relatives are available social workers prefer that the elderly remain within their families. If necessary, financial assistance may be extended to the family to assist it to provide adequate care to its elderly.

Although African culture makes it obligatory for children to support their parents, this tradition may be changing as people become more exposed to Western values. There are indications that institutionalisation will become the answer to the problems of the elderly, particularly in urban areas. At present, however, most people in Old People's Homes are foreigners from neighbouring countries. They came to Zimbabwe to work while they were economically active, but in old age are destitute and without families to fall back on. In this case social workers will look to the welfare of the elderly, and possibly arrange for repatriation to their countries of origin.

Disabled persons in Zimbabwe are often disadvantaged and are not given the chance to realise their potential. Social workers need to facilitate the rehabilitation of the disabled to see them become fully integrated in society. Apart from assisting the disabled to acquire skills, social workers seek to influence the attitudes of family members, employers and the community so that they all become active participants in the rehabilitation process. In addition, social workers may seek to influence government policy on the disabled, an advocacy function.
Registration of welfare organisations: Social workers employed by the Department of Social Welfare have the responsibility of registering welfare organisations in terms of the Welfare Organisations Act (Chapter 93). This registration monitors and sanctions the activities of welfare organisations and avoids abuse. Social workers investigate applications for registration to determine the genuineness of the application, after advertisements in the local press give time for objections to the organisations to be lodged. The intention is to provide a check on the duplication of services and promote complimentarity in the provision of social services. The Department of Social Welfare also supervises welfare organisations after registration, to ensure that they operate for the purposes for which they were established.

Ministry of Health (Hospitals)

The employment of social workers in hospitals and psychiatric institutions is presently confined to Government Central Hospitals. However, social work has not been able to carve its own role in this setting, but has had its role defined for it by the medical profession. Social workers in medical settings therefore spend a considerable part of their time doing clerical work which does not require social work skills.

Social workers are also involved in counselling patients with psychosocial problems, this counselling may extend to families of patients. They are expected to draw the attention of doctors to elements within a patient's history which may have a bearing on their medical problem or affect treatment. In the case of patients hospitalised for lengthy periods, social workers work with medical personnel to plan for, and prepare them psychologically for, discharge.

Social workers may provide a link between patients and various resource systems, including workers compensation, welfare assistance, child welfare, orthopaedic appliances, and institutional care for the elderly and the disabled. They also issue clothing and travel warrants and organise pauper burials.

Ministry of Community and Cooperative Development (and Women's Affairs)

The Ministry of Community and Cooperative Development and Women's Affairs (now the Ministry of Community and Cooperative Development) was established soon after independence to spearhead the mobilisation of rural communities (with special emphasis on women) for development purposes. Rural communities had been neglected in the past, and, consequently, experienced problems associated with poverty such as high levels of illiteracy, high birth rates, malnutrition, underemployment, high infant mortality rates, etc.

The tasks of social workers in this ministry include mobilising communities for popular participation in development programmes through such structures as
village and ward development committees. They also coordinate the activities of government and non-government organisations involved in development programmes and linking communities to appropriate resource systems.

Some of the development programmes which social workers promote include income generating projects, skills training, building of community infrastructure and conscientisation of the general public and women in particular on their rights and obligations, both legal and social.

2. Non Government Organisations (NGOs)

Non Government Organisations in Zimbabwe have a long history dating back to colonial Rhodesia. These organisations were established within the context of a liberal ideology which saw the priority of government as that of facilitating economic growth, and not the provision of social services, which may be seen as commodities that could be purchased on the open market. The colonial government encouraged the establishment of voluntary organisations on the understanding that they could mobilise surplus capital in the interest of less fortunate members of society. NGOs were therefore established to fill in the gaps in the state provision of social services.

The majority of social workers employed by NGOs are involved in developmental social work, with a specific bias to rural areas and the problems of poverty. Social workers have, therefore, the responsibility to mobilise communities to take an active interest in the problems affecting them, to facilitate the development of critical consciousness, and to utilise the government structures for popular participation, namely the Village, Ward and District Development Committees. Communities are assisted to define their problems, understand the causal factors involved, and take collective action to find solutions to the problems. Social workers may also play an advocacy role for marginalised groups or communities before the policy makers.

Communities are also encouraged to become more receptive to projects, even though they may have been initiated from outside the community, if they are aimed at the socioeconomic transformation of that community. Communities are also encouraged to embark on income generating projects, including uniform making, carpentry, poultry, gardening, fruit canning and bakeries. As such projects are dependent on capital, social workers may spend considerable time trying to secure funding for these projects, and assist groups to submit meaningful project proposals to ensure the viability of the projects. Social workers must ensure that skills training is provided for project participants, including specific production skills, basic accounts, budgeting, project planning, management and marketing.

While many NGOs are involved in developmental social work, some provide remedial and curative services, for example rehabilitation of the disabled, relief
of distress, and institutional care for children in need of care and the elderly. Coordination among the many NGOs involved in social service delivery is essential, and it is the task of another NGO, VOICE (Voluntary Organisation in Community Enterprise), formally the National Council of Social Service. VOICE’s functions include the coordination of activities, giving direction in respect of service delivery, research in areas of concern to member organisations, and providing a channel of communication between government and member organisations.

Social workers in Zimbabwe are increasingly becoming involved in the protection of consumers. The Consumer Council of Zimbabwe provides such a service with social workers carrying out research on issues affecting consumers, and disseminating information using electronic and print media. Social workers also campaign for consumer rights and may handle complaints arising from disputes between consumers and the providers of goods and services, although not all those handling consumer grievances are social workers. A related advisory service is also provided by the Citizens Advice Bureau. Social workers employed by this organisation provide an advisory, information and referral service, linking clients to appropriate resource systems.

3. Urban Local Authorities

Social work in urban centres began as a response to social problems resulting from the interplay of politics, economics and culture (Gargett, 1977). As politics promoted the supremacy of the white population, blacks were pushed to the periphery and became marginalised. Gargett observed

“economic considerations centre on the sub-economic position of most urban African families, and on the dual economy with a two tier wage structure in town and the vast majority under subsistence conditions in the country”.

Urbanisation is closely associated with the problems of poverty, unemployment, adjustment, divorce and deviance.

Social work in urban local authorities is geared to promoting qualitative human welfare by creating harmony between urban structures and the needs of the people, enabling urban residents to lead satisfying lives. Urban structures need to become more responsive to the needs of residents, which is more easily realised where there is community participation. Community involvement facilitates the development of a sense of belonging, a vital factor in positive urban development.

Social workers in urban local authorities perform a variety of tasks, including family and individual counselling, an advisory and information service, the formation of youth and women’s clubs, and cooperatives and income generating projects, and preschool work. Intervention is necessary given the magnitude of the
problems associated with urbanisation and industrialisation, and in the face of a gradual weakening of the kinship system. The advisory and information service is particularly important as many residents are not aware of the network of social services that are available. This service may also entail explaining relevant legislation and procedures, and referring residents to appropriate agencies.

The focus on youth clubs is designed to direct youth away from criminal activity through the provision of recreational facilities. Recreation is not an end in itself, but a means of moulding the character of youth to enable them to develop leadership skills and become responsible citizens. In addition, the youth are given the opportunity to acquire skills that are needed in the job market or for starting income generating projects - an increasingly important area as employment problems increase. Attention is also given to women’s groups, to enable them to acquire home management and leadership skills. Emphasis is put on acquiring skills that enable women to participate effectively in both the formal and informal sector, and thus facilitate their full integration into the development mainstream. These activities may be combined with literacy classes to promote basic literacy and numeracy. Historically women have been a marginalised group, and acquiring literacy and numeracy skills would enhance their participation at the local and national level.

In many local authorities, social workers also have the responsibility to interview applicants requiring housing, to assess eligibility. Within the local authority ambit, social workers are often called upon to do jobs that fall outside social work parameters.

4. Industry

Social work in industry is a new development in social work practice in Zimbabwe. This involvement arises from the profession’s realisation that workers in industry are likely to have needs which, if unmet, may interfere with worker productivity. Social workers in industry are generally employed in personnel, dealing with issues of recruitment and selection, remuneration, job evaluation, industrial relations, occupational safety, training and welfare. The aim is to promote worker productivity by intervening when workers experience problems, ensure that management and workers have an effective communication system, and ensure industrial harmony for sustained productivity.

Conclusion

Social workers practice in Zimbabwe perform a cross section of roles. The most common role is that of enabler or facilitator, enabling individuals and groups to achieve and sustain adequate social functioning and realise their potential. As
Zastrow (1981) puts it, a social worker helps individuals or groups
“to articulate their needs, to clarify and identify their problems, to explore resolution strategies, to select and apply a strategy and to develop their capacities to deal with their own problems more effectively”.

Another important role for social workers is social advocacy, which requires them to speak for, and work on behalf of, the poor and marginalised. Muzaale (1986:52) includes under social advocacy the
“identification of poverty generating structures, processes and practices, identification of people whose cooperation is essential in effecting change, designing strategies for working with these people and the target groups and working out a programme for increasing the social awareness of the problem”.

This advocacy role often focuses the attention of policy makers on the plight of marginalised groups in society, and inadequacies and inconsistencies in the delivery of social services.

However, social work practice in Zimbabwe tends to be curative and remedial in character. This is not only true of Zimbabwe but of many developing countries. It is not, therefore, surprising that a number of authors (Midgley, 1981; Clifford, 1966; Muzaale, 1986) have questioned the relevance of social work in developing countries, particularly the overemphasis on social casework as the method of intervention. Social work practice in Zimbabwe reflects the wholesale transfer of social work practice from developed countries, particularly Britain, and a response to the social problems associated with urbanisation and industrialisation. The focus, therefore, is on problems like destitution (arising from unemployment), marital conflict, disability and deviance. These problems are often conceived of as threatening order and stability in society, hence the need to provide remedial services. Emphasis is placed on the need for those experiencing social problems to adjust to their environment, and the norms and values of that society as defined by those in positions of authority. Used this way, social work becomes an instrument of social control, with a focus on collective well being but using the individual as the means towards that objective.

The use of social work as an instrument of social control, however, cannot be seen entirely in negative terms. When the cause of a social problem is attributed to an individual, then it is logical that the change efforts be directed at the individual. Unfortunately, social work has not been able to differentiate meaningfully between individual and social causation. Many of the social problems that social workers try to handle using the casework method are only symptoms of structural problems, for which casework is an inappropriate response, akin to providing first aid where major surgery is required (Midgley, 1981).
The challenge for social work is to transform itself so that it focuses on the root cause of social problems. Many of these problems can be attributed to poverty, resulting from the working of political, social and economic structures. The question is, should social workers develop intervention methods that seek to bring about structural change in society. This is a mammoth task requiring a multidisciplinary approach in which social workers would play their part.

In such a multidisciplinary approach, social workers could play an advocacy role, on behalf of those disadvantaged by societal structures, and work towards articulating the problems of the poor and powerless, and drawing the attention of policy makers to the impact of social structures on the wellbeing of people. This advocacy role must be accompanied by a process of conscientisation, enabling people to look at their own situation critically and building their capacity for positive action in relation to their problems. This could include projects to enable people to cope with the crippling effects of unemployment, the recession, drought, structural adjustment, etc. Such projects must, however, offer real opportunities for earning income. Social work intervention must not create dependency, but propel individuals towards self-reliance. Social workers must concern themselves with issues of social justice and the redistribution of wealth.

References