

Social Work Ethical Principles in Tanzania: A Broad Historical Review

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Abstract

This article made a historical review of ethical principles in Tanzanian social work practice. The global evolution of social work ethical principles in Great Britain, United States of America and sub Saharan African counties with local content similar with Tanzania's is also examined. The main purpose for writing this article comes from the need to determine the core social work ethical principles in the country of which the social work practitioners have a duty to adhere to in order to ensure quality and ethical provision of social welfare services by properly trained service providers. This article employed qualitative approach involving Historical/ Comparative research design in order to understand the evolution of social work profession and the ethical principles in the global context and in Tanzanian context. The evolution of social work profession globally, was attributed to the societal needs to improve welfare of the poor and other vulnerable populations following the industrial revolution. This review has revealed that there are strong social work ethical regulatory bodies in several countries globally including those few found in sub-Saharan Africa such as Zimbabwe. This has resulted into well-organized provision of social welfare services in the sense of significantly solving social problems, and ethically protecting the clients, service providers and the communities. In the absence of statutory regulated code of social work ethics in Tanzania, the country is facing a number of ethical challenges and thus leading to less effective social welfare interventions. This article recommends that the responsible government ministry in collaboration with other development partners should expedite enactment of social work professionals' regulatory legislation.

Keywords: Social Work, Tanzania, Ethical Principles, Social Work Regulation.

Introduction

This article made a historical review of ethical principles in Tanzanian social work practice. In the course of undertaking this assignment, the article also takes a historical analysis of the global evolution of social work ethical principles that span from Great Britain, United States of America (Wells & Masch, 1986) and sub Saharan African counties with local content similar with Tanzania's. Ethics are particularly useful (Wells & Masch, 1986) in helping social workers identify relevant considerations at times of conflict in professional obligations or in situations that could involve ethical dilemma. Social workers should strive to enhance their ethically informed decision making ability by consulting other policy and knowledge base frameworks including relevant country services laws and regulations, theories for social work practice, practice informed research, and agency policies (Reamer, 2014). Considering other sources of information to guide ethical decision making is of paramount importance especially in Tanzania which so far does not have professionally and legally binding code of social work principles

The global definition of what constitute to social work was coined in 2014 by the International Federation of Social Workers and The International Association of Schools of Social Work of which the two bodies called for regional and national contextualization. Tanzania being part of the global social work community, this article adopts this definition as presented below:

Social work is a practice-based profession and an academic discipline that facilitates 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.

(<http://ifsw.org/get-involved/global-definition-of-social-work/> retrieved on July, 2021.)

For lack of national statutory instruments, Tanzania's ethical practice standards are largely defined by the global definition of social work and various national policies, guidelines, and standard operating procedures. This article makes an assertion at this point that lack of social work professional code of ethical principles contributes to less effective social welfare services delivery outcomes in Tanzania.

Purpose of this Article

The main purpose of the manuscript is critically examine the social work ethical principles that have been applied in the field in this country. Ethical values give directions and professional judgment in order to ensure professional and adequate provision of social welfare services by trained and regulated social work cadre under appropriate legal framework (Ministry of Health Community Development Gender Elderly and Children, 2021). The social work ethical principles when appropriately applied under adequate resource helping environment can potentially contribute towards binging about improved social, economic, and emotional livelihood of the vulnerable clients' population. It is expected that the practice and policy recommendations that emerge from this critical examination and discussion of the global Social work ethical principles, could inform both government and development partners in Tanzania with the core ethical issues.

Methodology

This article employed qualitative approach involving Historical/ Comparative research design (Rubbin & Babbie, 1997; Grinnell, 1997). It attempted to critically detail our understanding on the evolution of

social work as profession and the development, application and improvement of the profession's ethical principles in the global context, in Africa and in Tanzanian context. Based on Rubbin and Babbie's conception of sources of data for observation and analysis, this article studied historical records such as historical writings found in literature, biographies of social work pioneers, studies on development of social welfare activities and institutional frameworks and comparative studies; reviews and official government documents/guidelines/policies/ and legislations; and organizations documents such as their policy statements, code of ethics.

Evolution of Social Work Ethical Practice

Social work ethical principles have progressed from the client moral responsibility to the professional ethical responsibilities. Voluntary, charitable and the state interventions to improve welfare of the poor and other vulnerable populations in the world has got a long history (Compton & Galaway, 1989). This section examines the global and Sub Saharan Africa historical evolution of social work ethical responsibilities in social work helping interventions and determine the level of quality professional practice to serve the clients.

The Global perspective

Church activities, Charity Organization Societies, as major forms of public philanthropy and a call to respond to helping the poor were witnessed in the medieval social work initiatives in Britain (Wilensky & Lebeaux, 1958) Britain state interventions such as the Elizabethan Poor Law of 1601 represented the first broad national response to alleviate the conditions of poor people. The law categorised the poor onto three categories; that is the able bodied poor; impotent poor, and dependent children. An inherent feature of the Elizabethan Poor Law of 1601 welfare services (The Old Poor Law, 1601) was an ethical moral value that most poor people should be held responsible for their laziness and immoral behaviors. Therefore it was only the dependent poor and the impotent poor who were assisted by the state, but the able bodied poor people were punished. Despite the state heavily loaded moralistic interventions, vast problems of urban poverty, family disintegration, homelessness, and crimes persisted (O'Hagan, 2001). This paper critical observes that, massive failure of the above state poor programs could have been avoided if undertaken in interventions that respected the dignity and worthy for living the poor people themselves (Compton & Galaway, 1989; Davies, 1994). Fears of the rich middle class and mainly urban residents (Esping-Andersen, 1990; Dominelli, 2002) that the demands of the poor working and unemployed masses were a threat to their civilized life and that the state must put under control the "dangerous classes", helped the state and local government authorities recognize that different ethical and objectively informed welfare approaches undertaken by ethically respectful social work practitioners to the clients and the profession were needed (Midwinter, 1994; Wells & Masch, 1986). As a result, most of the social welfare activities that emerged in the 19th century such as counseling and behavior mentoring, juvenile welfare and correctional services, community rehabilitation and housing settlements programs started employing social work principles and values including commitment to client services with the clients themselves (Lishman, 2002; Wells & Masch, 1986).

The evolution process to consolidate social work activities into a system of well-rounded and ethically informed practice in the United States of America was similar to the Britain's in the sense that it started with domination of voluntary and charitable organization before and following the American Industrial Revolution. Literature (Addams, 1902; Esping-Andersen, 1990; Morales & Sheafor, 1995) informs that North America had established well organized social welfare activities in support of the poor families and their children mental health services especially to poor individuals

whose personal impoverishment were perceived as matters of personal misconduct. These activities were largely governed by popular beliefs by then that is compassion and protection. Compassion was a religious based belief (Reamer, 2014) that well to do members of the communities were fulfilling their commitment to help the underprivileged. The major ethical problem in social work with such welfare activities was stigmatization of the clients. That is it was creating to the beneficiaries a sense of guilty and deepening dependence to welfare handouts (Robinson, 2002; Esping-Andersen, 1990; Hepworth & Larsen, 1993).

Before the American Revolution, (Wilson, et al. 2008) formal systems of poor relief, child welfare and even mental health services had been established in North America. The response vacuum created by most of the states welfare interventions was filled up with charitable and private benevolent societies. Social Work activities in that period largely involved organized helping resources by middle and upper class volunteers, faith-based and modern charitable organizations to address, not the root causes social problems among the poor people, but rather the consequences of poverty, urbanization and immigration (Hepworth and Larsen (1993). The unethical moral preoccupation for protection of the affluent communities was evidenced by establishment and management of public health facilities such as quarantine facilities for the poor sick people during times of epidemics in order to prevent contamination spreading to affluent communities.

The practical need to effectively address current social work caseloads in America and the rest of the world requires social work education programs to empower Social work students to have full knowledge of the historical value base of the profession and its ethical standards, as well as relevant country laws, regulations and national guidelines that determine the outcomes of what social workers are expected to perform at the micro, mezzo, and macro levels (National Association of Social Workers, 2017; British Association of Social Workers, 2012; Evans, 2011). The ethical knowledge base is potentially empowering the Social workers to comprehend varied perspectives for ethical decision-making and resolving practice ethical dilemma in more predictable and reliable manners that enhance clients' confidence to seek help (Beresford, Croft, & Adshead, L. (2008). The quest for better social work outcomes also recognize the need for practitioners being able to apply principles of critical thinking in the processes of ethical decision making with regard to practical, research, and policy implications (Banks, 2001; Banks, 2010).

The African Experience

The recent research report on review of the current status of social welfare services in Tanzania Mainland (Tanzania Law Reform Commission & Ministry of Health Community Development Gender Elderly and Children, 2017) has argued for the importance and advantages of putting in place social work ethical principles legislation that would enforce ably regulate social work professional conduct in their day-to-day activities. Experiences from other sub-Saharan African countries also demonstrated that having a system of regulatory ethical standards for social workers has contributed to the strengthening behavioral conduct by services providers and improved professional knowledge among the professionals in the field.

Zimbabwe had enacted the Social Workers Act No.27:21 of 2001 in order to supervise registration of social work professionals and oversee their responsibilities and ethical conduct. The act established the Council for social work professionals in Zimbabwe with the major task of controlling quality standards in services provision. Before the Council came into place, there were irregular and unethical practices which resulted to occasions of clients being abused while receiving services (Chidyausiku & Bohwasi, 2021). The Council made it mandatory to register qualified social workers; administer council professional examinations for the professionals; identify and demand compliance to

the code of ethical social work principles. The Zimbabwe Social Work act also made it a criminal offense for any unregistered individual, civil societies or non-government organizations to practice social work. Following the act and its effective implementation of the council's duties, Zimbabwe for more than a decade has earned a reputation for excellent ethical social work practice in Africa and the world where welfare services are provided strictly on approved standards and ethical principles.

In 1978, South Africa enacted the Social Service Professions Act No. 110 (South African Council for Social Services Professions, 1978). The Act fundamentally established Social Service Profession Council (SSPC) with mandate to register social work professionals, students undertaking social work studies, auxiliary social workers, and other social welfare practitioners and promote collaborations with education institutions to raise quality standards of the education programs, (South African Council of Social Service Professions, 2017). The SSPC recognized that there were various categories of social work professionals including the students, auxiliary social workers, specialized professional social workers. From the Social Service Professions Act No. 110, Regulations for Social Work Professionals were put in place. The regulations established procedures for registration, license issuance, and behavior control of the professionals.

In 2004 Namibia also established the Social Work and Psychology Council through the Namibia Social Work and Psychology Act 6 2004. The act defines mandate, duties and responsibilities of the council and that it offers the council powers to register social work professionals and other stakeholders. The council has put in place standards and quality control on social work training and professionals qualifications and disciplinary measures to be taken for break of ethical principles including unregistered practice of social work and psychology. For one to be registered and licensed to practice social work and psychology in Namibia, one must be a holder of a certificate, diploma, or bachelor degree in relevant areas of study and later required to pass the council's examinations in the study area the person had graduated.

Seychelles also in 2007, passed the Social Workers' Council Act which established the Council for Social Workers which among other things was responsible for supervision and ethical conduct compliance of social workers for the purpose of ensuring high quality provision of social welfare services to the clients (Republic of Seychelles, 2011). The council is also mandated to enhance and promote high standards for the social work profession in the country, and register social work professionals, investigate complaints against breach of ethical standards in social services provision and disciplinary misconduct among the social workers before taking appropriate actions. The social work law in Seychelles aimed at ensuring that the clients are provided with more beneficial services from their encounters with social workers. Most notably the law sought to change and improve the quality of social work profession through investment, support and respecting the profession.

Tanzania Perspective

We understand that Tanzania still does not have in place a social work professional's Act. Alternatively it relies on other social welfare services laws to guide practice and procedures for provision of social services. This article is intended to contribute to the ongoing discussions and efforts in the country to propagate the call for putting in place enforceable social work ethical principles.

From Colonial to State social welfare

The evolution of the social work ethical principles and social welfare practice in Tanzania started during the period of colonialism in the 1930s (Wangwe & Rweyemamu, 2001). The colonial administration decision to establish social welfare services was tied with their economic motive to

ensure steady supply of cheap labour for continual production of cheap raw materials, markets and, markets and areas of investment to support the colonial economy sector. To achieve the economic motives, the colonial administration introduced social and welfare services through construction of hospitals, schools, putting in place social welfare laws including the Children and Young Persons Act, Cap 13, of 1937, Affiliation Ordinance of 1949, Probation of Offenders, Cap 247 of 1947 and Foster care and Adoption Ordinance of 1955.

Records indicate the Social Welfare Department was first established 1949, as a Probation Division in the year 1949 to first deal with provision of behavioral correction of offenders. The Probation division became a full Social Welfare Department after independence in 1961 responsible for provision and supervision of welfare services for rehabilitation of offenders and child welfare support for the children born outside formal marriage. Following the Arusha Declaration, the department of social welfare was added with social welfare support roles to the elderly and persons with disability. Formal training of social workers on the core functions of social welfare sector and on the core sets of ethical principles that they were obliged to adhere to, started with the establishment in 1973 of the first school of social work in Tanzania, by then called the National Social Welfare training Institute.

To date, there are several legislations, policies and guidelines that provide for delivery of social welfare services in the country including The Law of the Child Act, Cap 13 of the year 2009 with amendments in the year 2019, The Persons with Disabilities Act, (2010), The Mental Health Act, (2008), The Drugs Control and Enforcement Act, Cap 95, The Community Services Act, Cap 291 The Anti-Trafficking of Persons Act, Cap 432. The provision of social welfare services has also been based on various national policies and development programs (The Law Reform Commission of Tanzania, 2018) including the Child Development Policy of 2008, National Policy for People with Disability of 2004, National Policy for Older Persons of 2003, National Policy for Health of 2007, the 2001 National Policy on HIV/AIDS, the 2000 National Policy Gender Development and Women. The development programs include the National Strategic Program for Eradication of Poverty and the Five Year National Development Program of 2016/17-2020/21 and the National Plan of Action on Violence Against Women and Children of 2017/18-2021.

In spite of the existence of the above legislations, policies and programs that provide for practical guide for social workers and other welfare providers, the review report revealed there has been a number of challenges against effective provision of social welfare services in the country such as: (i) the public minimal understanding regarding the importance of social work profession in our communities as a tool for various social problem solving including the incidences of violence and maltreatment especially to women and children; (ii) lack of recognition and inadequate number of social work professionals and poor working environments; (iii) non availability of continual education to update the social work professionals as one of the requirement for best results in adhering to good ethical practice; (iv) lack of national guidelines for development of well-informed education curriculum in institutions of higher learning education in social work; (v) shortage of educated professional social workers and facilities for provision of critical social welfare services such as approved schools and remand homes for juvenile justice interventions, and safe homes for the survivors of gender and domestic violence; (vi) lack of priority in the government over years that resulted into very insufficient Budget planning and allocations for sustaining and development of positive outcomes in social welfare services in our communities and; (vii) non involvement and/or complete lack of involvement of social work professionals and service providers in the processes of developing national programs related to social welfare functions.

This article has underscored the reality and echoes the social work profession's call that goes back more than ten years ago, that this country need for social work ethical principles regulation is currently extremely urgent should we try to be committed in addressing most of the ever increasing social ills in the country now. Almost every day, there is media reporting through various print and online outlets about maltreatment, violent and immoral acts committed to members of our most vulnerable members in the societies (though some of the incidences occurring these days are committed by the typically perceived weaker partners; such as the recent case whereby a Young women burnt to death (after setting the room on fuel fire). Couple conflict and violence including murder, relationship problems, and lack of perseverance in matrimonial relationships whether based on local traditions, religious or state laws are also on substantive widespread. Anecdotal data from the Ministry of Home Affairs in the country and as often reported in the media reveal most partner murders which at other times involve killings of their children as well occurred most in the regions Kigoma, Kagera, Tabora, Mwanza and Katavi.

Current Status of Tanzania Ethical Principles Practice

This section reiterates that Tanzania social work profession ethical practice and the state of social welfare services provision is anchored on several laws, policies, and regulations related to social welfare (Ministry of Health and Social Welfare, 2013; Wangwe & Rweyemamu, 2001). According to various ministerial assessment reports, it is established that the social welfare services sector has been undergoing significant ethical challenges. Such assessments have included Ministry of Health and Social Welfare, 2013, Report for a Mapping Study of Social Welfare Services and Providers in Tanzania, Dar es Salaam, MoHSW, A Report on the Assessment of the Situation of Children in Institutional Care in Tanzania, 2013, and The Law and Reform Commission of Tanzania, 2018 : Review on the Legal Framework on Social welfare Service in Tanzania Mainland.

The above assessments have collectively demonstrated that there have been below standard provision of social welfare services in Tanzania including violation of ethical principles, and involvement of less competent practitioners in the field. The reports attributed the unethical practices to lack of recognition and employment of enough qualified competent professionals. The reports suppose that social problems such as poverty in households, family conflicts, violence against vulnerable groups were exacerbated by weaknesses on ethical principles and adequacy of qualified social welfare cadre practitioners.

The reports further revealed that there were inadequate working tools especially in rural areas as it was noted in the case of social welfare services to children cared for in Children Homes. Additional ethical problems reported in these facilities included poor child safeguarding and maltreatment of children under care and that some owners mismanaging funds and resources for the children for own personal benefits. Furthermore, the ongoing socio economic changes have resulted into mushrooming of day care centers to care for the children (2–4 years) at day time that are intended to create a space for the children parents to get involved in productive activities. Most of these facilities were found to be operating without formal license and with shortage of qualified child care workers trained on Early Childhood and Development.

The reports also established that there is increasing need for quality juvenile justice and behavioral rehabilitations services for the children in conflict or in contact with the law. To date, there are only 5 remand homes found in Mbeya, Moshi, Tanga, Arusha na Dar es Salaam regions run by the government that provide the children with basic needs including food, shelter, clothing, medical services, education and legal assistance. The reports further observed that quality juvenile justice and

correctional services has been challenging given shortage of competent workers required to master on ethical principles, knowledge in social work and legal support, counselling and child care.

In general, the above challenges on ethical principles involving malpractice and shortage of qualified social workers have been also observed over vast array of service areas largely because so far there exist no formal system at national level going down to village levels for identification, training and registration and supervision of social welfare services providers. For instance, social welfare workforce actual manpower needs is 23,694 so that there is at least one practitioner in each village for both public and non-government service settings. However, the Law Reform Commission report (2018) informed that there were only 9,140 graduate social welfare providers, out of which 740 were employed in the government. Other practice service areas that experience ethical challenges included police gender desks, Health facilities, public and private homes for the elderly, facilities for people with disabilities, vocational rehabilitation centers for people with disabilities, probation and community services, and marriage reconciliation services.

Conclusion

For lack of social work professionals' regulatory instruments, Tanzania has been going through a number of challenges (Ministry of Health and Social Welfare, 2013) that among other problems, they compromise the quest for sound social work professionals' ethical conduct. Most of the challenges have got to do with inadequate qualified social welfare workforce providers. As a result, there is large proportion of unqualified service delivery practitioners largely attributed to poor supervision, monitoring and evaluation of social welfare services provision. However, even, in the absence of statutory ethical principles, social workers and other social welfare services providers, need to maintain professional integrity and good practice based on the standards from the global social work communities, and various national laws and guidelines. The social work professionals' pursuit for having the statutory regulatory organ need to be realized soon not merely for the benefits of practitioners, but also for improved service provision and protection of the clients.

Recommendations for Tanzania Policy and Ethical Practice

Based on the previous analysis of other countries' experiences, and the ethical practice situation in Tanzania, we can draw a number of important policy and ethical practical lessons with regard to what Tanzania can consider implementing should we decide to improve quality of services and contribute in the national efforts to alleviate the current serious social problems.

Ethical Practice Recommendations

Although we understand that currently we have no enforceable code of ethics for social work professionals, we at least have relevant benchmark ethical principles that Tanzania social work practitioners have applied in their day-to-day work since the time of probation services in the 1930s. Therefore, in the absence of the specific legislation, social work professionals and other related social welfare services practitioners, should get conversant with the professional ethical principles as defined and guided by global social work communities, other social welfare legislations (such as the Law of the Child Act of 2009, national policies and services regulations and guidelines), and diligently apply them.

From the global statements, social work knowledge and research base, various country experiences, national social welfare policies and guidelines, this article identifies and recommend for practice six core ethical principles for social workers and services providers to guide their practice decision making in their day-to-day activities in Tanzania. First, social workers should respect the

inherent worth, dignity of all clients and treat them as unique individuals and recognizing that there are differences in cultural, physiological, emotional and intellectual characteristics of people. According to the National Guidelines for Provision of Psychosocial Care and Support (2021), social workers and social welfare services providers have an ethical responsibility to adhere to the principle of respect to the clients' when they enter into helping relationship and even on follow up sessions. Though it's crafted in the context of psychosocial services, practitioners are advised to apply it in other similar problem situations and settings.

Second, Social workers have a responsibility to ensure good governance in the provision of social welfare services to all needy populations, especially the poor and vulnerable. This ethical responsibility calls for fairness and honesty in resource distribution; promotion and protection of human rights for all, particularly for poor women, men and children, the vulnerable groups. The National Guidelines for Supportive Supervision of Most Vulnerable Children Programs (Ministry of Health, Community Development, Gender, Elderly and Children, 2021) strongly posits that all children deserve quality care, support, and protection. However, the Most and Vulnerable Children (MVC) and their families are known to have limited health, educational and economic opportunities for their social wellbeing. The National Costed Plan of Action (United Republic of Tanzania, 2013) underscored the reality that most MVC and general child welfare programs and services were unfairly found in urban areas. Those found in rural areas were characteristic of constrained financial and human resources. In this case, the practitioners should bear the responsibility to undertake consistent and effective supportive supervision of all public and non-public social welfare programs in order to social justice to all vulnerable populations.

Third, Social workers are called to challenge discrimination and oppression of vulnerable population especially related social and individual stigma in their work with various clients such as abused children, older people, people with disability, people living with HIV/AIDS, Victims of drug abuse. Social workers would need to understand that taking positive regards to stigmatized clients is instrumental in determining the effectiveness of services that they offer to the clients. For instance, condemning discrimination of all forms and in all services delivery settings is positively correlated with increased adherence and retention of HIV/AIDS clients on Ant Retroviral Treatment (ART) and overall improvement in the quality of life to the clients (Ministry of Health and Social Welfare, 2015). Social workers therefore, have a duty to create conducive agency environment that facilitates the clients reliable and simple access to HIV Counseling and ART medications from national to grass root levels.

Fourth, social workers need to understand and act in ways that promote the clients' right to self-determination in order to consciously empower the clients to mobilize their own emotional, social and financial resources so that they can participate in solving their own problems. This principle if properly employed is potentially capable of enhancing the clients' right to the respect, dignity and worthy for living and a sense of independence and self-esteem (United Republic of Tanzania, 2001). Application and adherence to this principle is actually required in all service delivery interventions, but particularly very useful when dealing with underrated clients including most vulnerable populations such as people with disability, and victims of all forms of violence.

Fifth, respect for the clients' right to confidentiality and privacy is the cornerstone of the entire helping process (Hepworth & Larsen, 1993). Social workers need to understand that the degree to which they are known and trusted to keep the clients' information secured determines the likelihood of the potential clients and the communities to seek help from them. It is evident in this country that a good proportion of potential clients of highly social stigmatized conditions such as HIV/AIDS, mental

illness, and sexual abuse find it difficult to approach services delivery centers for fear of unauthorized/unconsented disclosure of their conditions (Ng'ondi, 2018). In order to ensure trust and confidence of the clients in seeking help, social workers should explicitly demonstrate their adherence to maintaining the principle of confidentiality. However, the clients should be continuously educated that their right to non-disclosure is limited to occasions of possible harm to significant others.

Sixth, social workers need to be cognizant of the fact that most of their clients' caseloads come from a web of complex factors rooted in mass poverty and unemployment (Midgley, 1999). This recognition therefore calls for social work practitioners to possess a solid fund of generic knowledge and skills that can enable them to competently assess, develop and implement robust interventions unique to varied complexities of the clients' needs and problems. For social work practitioners to be upbeat with the core and current competency required for effective interventions, they must be committed to continual learning and research.

Policy Recommendations

While Tanzania could be credited for having several social welfare legislations, policies and guidelines that guide the provision of services, there is a dire need to enhance compliance to the social work ethical principles and ultimately improve social well-being of individual, families and communities in need. In order to ensure that we have excellent quality and ethical social welfare services, as we have seen happening in other African countries, Tanzania would need to legally recognize social work professionals and provide legal powers to have the regulatory body that will sanction practice registration and ethical conduct, licensure, and quality of social work education. At the time this article is written, Tanzania still does not have in place a legislation that specifically regulates identification, registration and licensing of social work professionals. As a result, the country does not have a legal instrument that among other things would specifically provide for a social work code of ethics and enforce application of the ethics. Therefore, in the first place, Tanzania under the coordination and supervision of the responsible ministry, that is the Ministry of Health Community Development Gender Elderly and Children should steer the efforts to finalize putting in place the Social Work Professionals Act. When the act is in place, and effectively implemented, we would begin to observe disappearance of unqualified practitioners in the field, and violation of professional ethical principles.

Second, this article established that in addition to the absence of social work professionals' legislation, the country's social welfare workforce size does not fulfill the need for qualified social work professionals especially in rural remote areas. With this understanding, the current article strongly suggests that the anticipated social work professionals' legislation should incorporate the following;

1. Establishment of the legislative body to regulate social work professionals and other social welfare practitioners who do not have social work education background.
2. Development of Code of Ethics for Professional social workers in order to contain and prevent admission into practice of unqualified people and regulate those qualified from breach of ethical and moral conduct.
3. Development of Work standards, roles and responsibilities of other social welfare services practitioners in order to enable them, development partners and the public at large recognize and engage them in social welfare interventions.
4. Put in place procedures for identification and engagement of auxillary social professions such as Community Case Workers, Community Health Workers and Para Social Workers. This will help in addressing the shortage of social work professionals in the country.

5. Identification and recognition of social work private practitioners. This is particularly important first, to give organized career opportunities to the so far unemployed graduate students of social work professions, and second contribute to filling the country's gap of the qualified experts.

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