

## Child Protection Systems in the UK and Zimbabwe: Exporting Valuable Lessons to Zimbabwe

Irvin Kudzanai Shangwa<sup>1\*</sup>, Takudzwa Leonard Mathende<sup>2</sup>

<sup>1</sup>Social worker, London, United Kingdom

<sup>2</sup>Social worker and researcher, Berkshire, United Kingdom

**\*Corresponding Author:** Irvin Kudzanai Shangwa, Social worker, London, United Kingdom, Email: shangwa.irvinkudzanai@gmail.com

### ABSTRACT

The United Kingdom (UK) and Zimbabwe have shared political history, with ties emanating from colonization in 1890. Social work as a profession in Zimbabwe traces its history from colonisation, Kaseke (1991), where the profession was imported into Zimbabwe in 1964, but later on went through an indigenisation process. In theory, the legislation governing child protection in Zimbabwe borrows much from the UK system, however in practice, notwithstanding that the Zimbabwean system is not fraught with flaws entirely, there are still valuable lessons that can be derived from the UK child protection system to strengthen and make child protection in Zimbabwe more effective.

Since the inception of social work in Zimbabwe, political ideologies have always had an influence on social policy and social work practice. With the new political dispensation in Zimbabwe, which appears very progressive and open to new ideas through its free market economy, this study aims to influence the child welfare system in Zimbabwe. The President of Zimbabwe, Emerson Mnangagwa, has indicated that in the new political dispensation those who will find it difficult to make ends meet will be cushioned by appropriate social safety nets.

Given the above, the purpose of this article is to explore and make a comparison of the two countries' child protection systems, drawing valuable lessons from the British system, which is ideologically influenced by the free market economy, and also to look at what the Zimbabwean system could adopt to make its child protection system more effective, and to dovetail with the new political dispensation. Part of the comparison will look at how the two countries' systems are influenced by the universally accepted models of social policy: the Residual, Industrial Achievement-Performance and the Institutional Redistributive models. Spicker (2018), and the effectiveness of these models in relation to the obtaining child protection situation in the respective countries.

This article shall base its findings on literature review and the professional experiences of the authors deriving from practice observations in both countries.

Having been exposed to the child protection systems of both countries, the authors are of the view that the legal and policy framework for a functional child protection and welfare system in Zimbabwe is in place, however, taking into consideration the realities of practice and the dynamics obtaining within the two systems, there are adjustments that the Zimbabwean system can make to its statutory framework to incorporate best practices that could be derived from the UK system to enhance its statutory and policy framework and make child protection in Zimbabwe more effective.

Such lessons identified include the decentralization of statutory social work services to local authorities with central government taking a supervisory role, digitalization of children's individual case files as well as placing authorities retaining the care planning and case management role for children in care placed outside their boundaries, deliberate emphasis on maintaining contact for children in care with their families, support for children leaving care.

**Keywords:** social work, social policy models, child protection, local authority, central government

### INTRODUCTION

Having been exposed to social work practice in Zimbabwe and the UK, the authors have observed that even though the underpinning legal framework for child welfare practice in

Zimbabwe largely borrows from the UK, there are lessons that Zimbabwe could learn from the UK child protection system. Among other factors, the UK child protection system revolves around devolution of power whereby the local authorities have statutory powers to administer

child welfare and protection policies and legislation with the central government taking a supervisory role. There are clearly defined safeguarding procedures and thresholds in social work practice which ensure child protection and welfare concerns are fully attended to. It has to be noted that devolution of power is one of the major policy shifts that the ruling and opposition parties in Zimbabwe are currently proposing. As a result of this, social work practitioners should ensure that this devolution process extends to the social services sector in general and child welfare in particular. The Constitution of Zimbabwe provides for devolution, Chapter 14 of the new Constitution of Zimbabwe introduces a 'devolved system' of governance for the first time in the country's history. This system, at least conceptually, is different from the 'centralized system' of governance that existed previously. Under a devolved system, it is expected that certain aspects of political, administrative, and fiscal management powers will be transferred and shared between the central government and the newly constitutionally-established Provincial/Metropolitan and local authority tiers of government.

The UK system also adopts a digitalised case recording and tracking system as well as a clearly defined working together protocol especially between Police, Health and Education professionals which ensures that child protection and welfare concerns are fully investigated. While it has to be noted that in Zimbabwe this working together of interconnected services is more apparent in Child Protection Committees (CPCs), it is largely ineffectual in the sense that there is no defined working together protocol in actual cases involving the protection and welfare of children. It is the authors' observation that the Zimbabwean child protection practice could draw valuable lessons from the UK system and ensure better outcomes for children. This paper intends to explore the differences between the two systems, especially highlighting the best practices the Zimbabwean system could adopt from the UK system to improve the child protection systems that currently obtain in Zimbabwe.

### CONCEPTUAL/THEORETICAL FRAMEWORK

There are universally accepted theories informing social work practice such as the systems theory (Niklas Luhmann), social learning theory (Albert Bandura (1977)), psychoanalysis theory (Sigmund Freud written

between the 1890s and the 1930s), psychosocial development theory (Erik Erikson (1902–1994)). For the purposes of this paper, our analysis shall be mainly based on the systems theory, mainly its contribution and influence to the understanding of social work practice in the UK and Zimbabwe as well as the differences within these two systems. The systems theory provides a holistic understanding of individuals within the environment they function in i.e groups, organizations etc focusing on how these systems connect and influence behaviour, which understanding would then inform appropriate social work interventions. Looking at this theory at a macro level, Fodder (1976) asserts that the importance of the systems theory in its contribution to social work practice is in providing a model of the structure of systems as a guide to appraisal and intervention. In the course of this paper, it shall be noted how a systems approach to social work practice is important not only in providing accountability in child welfare practice but also clarity of responsibilities and expectations for social work practitioners as well as well defined performance indicators and thresholds for child welfare and protection interventions.

Ideologies informing social policy in Zimbabwe have to be looked at in two parts; before and after independence. We also have to introspect on factors such as politics and the prevailing economic conditions and how they influence (d) the ideologies and ultimately the models of practice in child protection and practice.

There are three universally accepted models in social service provision i.e Residual, Industrial Achievement-Performance and the Institutional Redistributive models. Spicker (2018) says the Residual model of welfare is informed by the liberal ideology and sees welfare as being for the poor whereby welfare is seen as a safety net for those who are unable to manage otherwise. Spicker (2018) further says this model traces its roots to the English Poor Laws of the 17th century. The residual model deals with needs as they come, addresses the presenting problem, not the root cause and is provided only when all other expected means of support for the individual have been exhausted (means-tested), it is short-term and usually withdrawn once the apparent need is no longer evident. It is reactive in nature and does not concern itself with anticipation and preventing social problems before they occur. All in all residual social service provision is reactive or relief and this is

the model that largely exists within the social service landscape in Zimbabwe.

An Institutional redistributive system is one in which need is accepted as a normal part of social life. Welfare is provided for the population as a whole, in the same way as public services like roads or schools might be. In an institutional system, welfare is not just for the poor: it is for everyone. Institutional social work focuses on giving each person equal opportunity to be supported, whatever their circumstance. Government-funded social services are some of the best examples of this type, as it is offered to everyone without the need for application or justification. This is what largely obtains in the UK where there is universal free primary and secondary education, universal health care funded by government through the taxation system.

Promulgated by Titmus (1974), the Industrial-Achievement performance model provides welfare services on the basis of merit, work performance and productivity, it incentivizes work and may neglect those outside the labour market.

Kaseke et al (1998) say the colonial government adopted the liberal and laissez-faire models in their social policy with the latter largely targeted towards the black population and the former towards the white populace. Liberal ideology upholds the ideals of capitalism and the free market but argues that the state should intervene when necessary on behalf of disadvantaged groups to preserve minimum standards of living in terms of income, nutrition, health, housing and education i.e universal services. Laissez-faire ideology stresses minimal governmental interference in the economic affairs of individuals and society, it basically is a non-interventionist policy. Upon independence, the black government adopted socialism which focussed on equality and equitable redistribution of resources and this was more evident in education where there was universal free primary education. It however has to be noted that economics of the day had a final say by the late eighties to late nineties with the economy deteriorating the government dumped its socialist policies and adopted a capitalist approach as a pre-condition to receiving financial aid from the Briton-wood institutions as encapsulated in the Economic Structural Adjustment Programme (ESAP), this left the post-colonial government approach to social welfare firmly entrenched in the liberal ideology

and a residual model of welfare. For the purposes of this paper we shall thus focus on the residual model of welfare and how it has affected child protection and welfare in Zimbabwe.

### LITERATURE REVIEW

In developing this paper we have looked into the statutory and policy documents governing child welfare and protection in UK and Zimbabwe and these include; Zimbabwe Children's Act Chapter 5:06, The Constitution of Zimbabwe, The Zimbabwe National Orphan Care Policy (1999), Zimbabwe National Action Plan For Orphaned and Vulnerable Children, The Zimbabwe National Residential Care Standards policy document as well as the United Kingdom's Local Authority Safeguarding Children's Board (LSCB) Procedures, The Children's Act 1989 (UK) and The Munro Review of Child Protection (2011), The Department of Education's Working Together to Safeguard Children (2018). We have also relied on own practice observations and experiences of having of having been exposed to and practiced within the context of these two systems.

Child protection in Zimbabwe is governed by a number of national, regional and international statutory and policy framework documents. We shall explore in depth the Children's Act Chapter 5:06 (2001), United Nations Convention on the Rights of the Child (UNCRC), African Charter on the Rights and Welfare of the Child (ACRWC) of 1989 and the Zimbabwe National Orphan Care Policy promulgated in 1999.

The major document underpinning child protection in Zimbabwe is the Children's Act Chapter 5:06. This legislation informs statutory social work and defines a child as well as the scope of children in need of care. In essence it thus defines the threshold determining whether a child needs statutory social work intervention or not. The act also defines the functions of a probation officer (statutory social worker). The Act also provides for the structures that govern child welfare in Zimbabwe which consist of;

- The Child Welfare Council, a body established by the Minister consisting of one representative each from ministries of education, health, local government, justice, the registrar general's department, the police force and 6 representatives from private voluntary organizations which the minister considers deals with issues concerning the

welfare and upbringing of children, council of chiefs, a representative from an organization that the minister considers represents local authorities and the director of child welfare. The functions of the Council are (a) to advise the Minister and any other person that the Council thinks appropriate on any matter relating to the welfare of children; (b) to monitor the overall situation of children in need of care and to try to ensure that their welfare and rights are advanced; (c) to promote and encourage the co-ordination of the activities of organizations which have as their object the promotion and protection of the rights of children; and (d) to administer the Child Welfare Fund; and (e) to perform any other function that may be assigned to it by the Minister. Due to devolution in the UK, each county has a Local Safeguarding Children Board (LSCB) that makes sure that key agencies work together to keep local children and young people safe. Its job is to safeguard and promote the welfare of children, and ensure the effectiveness of what is done by each agency that works with children.

- The Children's Courts

The Zimbabwe National Orphan Care policy is one of the significant policy documents defining child protection and welfare in Zimbabwe. This policy was developed in 1999 as a response to the crisis created by HIV and AIDS which was leaving many children vulnerable and orphaned. The major pronouncement of this policy is the six-tier system in child care which defines the safety nets for the care of children as; the nuclear family, extended family, community, foster care, adoption and institutional care in that order of priority. What this necessarily means is that this policy document stresses that the primary social work function in child welfare and protection is to keep children well protected within the context of their families and communities and children are only to be removed into care as the very last option. As such the underlying principle within this policy that guides child welfare and protection actors in the country is that of family strengthening, enhancing the capacity of families to look after children within the context of their family and community environment, which in itself is a fundamental right enshrined within the UNCRC.

The main document governing child protection in the UK is the Children Act 1989. The sections of note in this Act are sections 17, 20,

47 and 31. Section 17 gives the duty to local authorities to provide services to children in need and their families, Section 20 gives local authorities the duty to accommodate /take children into care under voluntary arrangements by the persons with parental responsibility for whatever reason warrants a child to be temporarily in care, Section 47 gives local authorities the power and duty to intervene where there are child protection concerns while Section 31 gives local authorities parental responsibility over children who are deemed to be at risk of harm should the local authority not have power to exercise parental responsibility, section 31 care order usually lasts until the child/young person attains the age of 18. The Children (Leaving Care) Act 2000 Chapter 35 ensures continuity of care for care leavers with support extending up to the age of 21 if not in education, training or employment and up to the age of 25 if in education or training which ensures a smooth transition to adulthood and ability to live independently for children and young persons who have passed through the care system.

While the Children Act 1989 gives local authorities statutory powers in child protection practice, The Children Act 2004 requires every local authority to establish a safeguarding board which is a statutory mechanism for agreeing how the relevant agencies will cooperate to promote and safeguard the welfare of children. standards of practice for every local authority are encapsulated within the Local Safeguarding Children's Board (LSCB) Procedures documents. Regulation 5 of the Local Safeguarding Children's Boards Regulations 2006 define the functions of the LSCB as that of; Developing policies and procedures for safeguarding and promoting the welfare of children in relation to actions to be taken where there are concerns of a child's safety and thresholds for intervention. The LSCB procedures thus give clarity of expectations for children's social work practitioners in terms of thresholds for intervention, procedures to follow in determining threshold and after threshold has been determined, timelines for specific tasks among other things.

The UK and Zimbabwe are committed to upholding the rights of children as evidenced by both countries being signatories to the UNCRC which Zimbabwe ratified in 1989, pledging to promote and protect the rights of children. It however has to be noted that the UNCRC stresses not so much on the responsibilities of children as such, Zimbabwe is also a signatory

to the ACRWC which not only recognises that children have rights but also responsibilities and this is espoused in article 31 of the ACRWC. Zimbabwe's subscription to the ACRWC is in line with the need to cultivate responsible citizenry from a young age according to societal norms and values.

### METHODOLOGY

This paper seeks to explore the child protection and welfare systems in the UK and Zimbabwe with the purposes of identifying best practices that Zimbabwe could adopt to strengthen its child protection and welfare system. This paper shall base its findings on literature review of existing policy and legal documents. In addition to this, professional experiences of the authors deriving from practice observations and experiences in both countries will also be used to gather information.

### RESULTS

As highlighted in the introductory part of this paper, the statutory and policy framework for a strong child protection system in Zimbabwe is in place, there is no need to reinvent the wheel, however, there are adjustments that the Zimbabwean system can make in borrowing from the UK system.

While child protection law in the UK is largely based on the Children Act 1989, Zimbabwe has an equally strong Children's Act Chapter 5:06. However, the major difference noted is that while the Zimbabwe's Children's Act Chapter 5:06 gives statutory powers in child protection to the central government's Ministry of Labour and Social Services (MoLSS), the UK Children Act 1989 emphasises more on devolution and decentralisation, delegating such powers to local authorities while the central government takes a supervisory role through the Department of Education.

The Children's Act Chapter 5:06 legislation defines the functions of a probation officer. It is important to note that the definition of a probation officer in the Zimbabwe's Child Protection and Adoption Act contradicts the definition of a probation officer in the UK. In Zimbabwe a probation officer is a statutory social worker discharging child protection duties, while in the UK it's a person appointed to supervise offenders who are on probation. This is problematic, and when legislative reforms are done in Zimbabwe, it is paramount that changes be effected to ensure clarity.

Through the Local Safeguarding Children's Boards (LSCBS) that have clearly laid down procedures of practice to guide child protection interventions, there is clarity of expectations both for frontline social workers and their managers. These procedures define thresholds for level of intervention needed i.e early intervention, child in need, child protection as well as the step by step procedure in handling respective cases according to defined thresholds which include expected timescales for each step and even frequency of visits to the child/family. While in the Zimbabwean system, the Children's Act Chapter 5:06 gives clarity on the categories of children in need of care i.e children needing statutory social work intervention, we have not come across a separate document that gives direction to social work practitioners in terms of clearly laid down procedures for intervention as well as thresholds that determine the level of intervention needed. For example, in Zimbabwe there are National Residential Care Standards (2015) which at least outline expectations for professionals involved with children in care, however there is no document which speaks in relation to children outside of the care system. The paradox to this is that the primary social work role is that of keeping children within their families, which entails early intervention to eventually prevent separation, but what we have is a document that speaks to practice expectations for children in the care system but no document that speaks to practice expectations for children outside the care system.

In the UK, the Local Safeguarding Children's Board procedure documents as well as the Department of Education's Working Together to Safeguard Children (2018), spell out how professionals within health, education, social care, police etc should work together in safeguarding children, such synergies in the Zimbabwean system are not well defined. The nearest that Zimbabwe has to reflect the LSCB role is the Child Protection Committees, however, unlike the LSCBs, the CPCs do not have the legal power to influence scope of practice within the central government which holds the statutory social work role for children but it is rather an extension of the MoLSS to get an appreciation of the child welfare situation. Our observation has been that these CPCs are largely sponsored by Non Governmental Organizations (NGO's) which means in the absence of funding, they would not meet as regularly as they should. The health and

education professionals are critical in creating a strong safeguarding system for children but there isn't a clearly laid down procedure in Zimbabwe that these professionals should follow should they have concerns about a child.

Case recording is quite critical in individual case management as it informs the case management and care planning for children in need of care. It has been the authors' observation that the UK has digitalized case recording systems, which allows for easier tracking of a case's progression. Popular social care systems used include Framework I, Mosaic, Liquidlogic and Care first. This also allows for tasks due to be done in a timely manner as case holders and case managers are prompted for specific tasks. In Zimbabwe there is still a manual recording system which is not effective in the sense that there is a drift in cases with the possibility of case holders easily losing track of the children whose care plans they should supposedly manage. For example, it is not uncommon for children in care to have expired court orders, let alone for them to be regularly meeting with their committing social worker. Not only does this lead to the central government failing in their obligations to children but also the principle of child participation is not entirely met as social workers do not get to meet with the children to establish their wishes and feelings. Electronic social care systems are also used to generate genograms and chronologies.

One of the most interesting observations in the UK is the popular use of tools to assess children's views, wishes and feelings and child protection concerns. Tools that are used to assess children's world view include the three houses model and the use of emoticons. Tools to assess child protection concerns include The Signs of Safety approach, genograms, ecomaps, and the use of chronologies. Our observation has been that child participation tools are utilised mostly by non statutory children's social workers in NGO's; e.g memory books, journey of life, but they are not entrenched as tools for ascertaining wishes and feelings for children within the central government.

It appears there is democratic practice and multi professional practice in the UK. The use of Child Protection Conferences is an example of democratic ideology in the implementation of the Children's Act 1989. Decisions are not imposed on service users but are negotiated and also as a result of interdisciplinary consultations. Standard thresholds and approaches are used. In

most UK local authorities the Signs of Safety model is used to assess and decide on thresholds during Child Protection Conferences.

### DISCUSSION/SYNTHESIS

It has to be reiterated that the legal framework for a strong child protection system in Zimbabwe is in place, and that the British system is not entirely perfect, however, for the purposes of this paper we are not focusing on what the weaknesses of the British system are but rather look at those aspects that Zimbabwe could borrow to further strengthen its system.

It also has to be acknowledged that there is a vast difference in resources available between the two countries, however, there are some changes that do not necessarily need much resources but if implemented could actually lead to the maximum utilisation of resources currently available. One prime example of how we could maximise use of the little resources is boosting the human capital that could practice statutory social work for children through the granting of statutory powers to the local authorities social services departments social workers. For example, when looking at Harare province, the central government has offices in Highfield, Chitungwiza and Harare Central districts which are meant to cover the whole of Harare, on estimate these three offices have an average of 10-15 probation officers in total, this in itself means a greater number of children in need of care fall through the gaps as there are on average 15 statutory social workers at most covering the whole province. However, when looking at the Harare City Council Social Services department, they have offices in Highfield District, Highglen District, Kuwadzana/ Dzivarasekwa district etc, by ceding statutory powers to the local authority (Harare City Council), it means the number of children's social workers in a province ordinarily covered by 10 (taking into consideration the Highfield and Harare Central district offices only) statutory social workers would be multiplied. This also does not have any extra financial implications on the central government as the local authority already has salaried social service officers. In the same vein the central government could retain statutory powers for frontline social work but with a clear demarcation of catchment areas, for example in the central government's Highfield District Social Welfare Office of Harare which ordinarily covers Highfield, Waterfalls, Mbare, Hopley, Glen View and Glen Norah, the central

government could retain three locations as areas of operation, for example Highfield, Waterfalls and Mbare and cede Hopley, Glen View and Glen Norah to the City of Harare Social Services Department Highfield District Office. This same approach could be replicated throughout the country and maybe start with the main urban centres such as Harare, Bulawayo and Mutare as pilot. The existing central government provincial offices could then extend their supervisory role to the local authorities. This approach would greatly improve the existing child to social worker ratio.

In the same vein, to improve the focus on children, both the central government and local authorities with delegated statutory powers would need to have stand alone children's services departments and not the currently existing system within central government where children's and adults services are merged and have the same personnel, this automatically means the social services officer commitments and time available to their focus on child protection and welfare is reduced. It has to be acknowledged that the Ministry of Labor and Social Services (MoLSS) once created a stand alone Department of Child Welfare and Protection Services (DCWPS) and the rationale behind the reversal of such an idea has to be revisited and come up with solutions to whatever challenges that may have been identified within such a system.

Before decentralization of statutory child protection to local authorities can be done, a statutory social worker's manual should be developed which gives clarity as to procedures regarding specific welfare and protection cases. The manual should also speak to expected timescales for specific tasks which currently lacks within the Zimbabwean system on a broader spectrum, for example there is no document which speaks to how often social workers should be visiting children committed into care, the National Residential care Standards allude to regular visits but no specific timescale. This is problematic in ensuring accountability on statutory social workers in as far as the duty of care is concerned and it is not uncommon for children in care to go for more than a year without meeting their allocated probation officer, this effectively means that these children are let down by the system because the probation officer who should be the custodian of the individual child's care plan may not know what is happening in that child's life. This manual should most importantly define

thresholds of intervention to further unpack broad definitions of children in need of care as highlighted in the Children's Act Chapter 5:06, such thresholds would give a general idea of the levels of intervention needed. Having such a manual in place would also help local authorities to exercise their delegated statutory powers as expected and for the central government to have a shared point of reference for supervision and quality control of the local authorities statutory work.

The working together between statutory social workers and especially the health and education professionals needs to be well defined and such synergies may be included within the statutory social workers manual or a separate document. It has to be acknowledged that schools and health service providers play a crucial role in the identification of children in need of care, but apart from them knowing to refer to the Department of Social Welfare, there is no clarity regards the further involvement of these professionals in case management beyond the point of referral. Zimbabwe has something to build on already considering that the ministry of education has been emphasising on the concept of child friendly schools so this would not be an entirely new phenomenon but improving on a concept that is already in place.

It has to be pointed out that in this digital age, Zimbabwe's recording system needs to be transformed from a manual to a digital system. The manual system has so many disadvantages that include general drift of cases as probation officers can lose track especially regards to care plan implementation of individual children and the carrying out of tasks in a timely manner, a case in point being the fact that court orders for children in care usually lapse and are not renewed timeously which has the net effect of depriving the child care institutions of statutory government grants which are paid to them for all children with valid court orders for the children's upkeep. Digitalization would allow for easy retrieval of case files and tracking of case progression. This is one area that the Ministry of Labor and Social Services should prioritize and ensure that the Local Authorities, when delegated statutory powers also have a digitalized case recording system which can be easily monitored.

On a broader spectrum, there should be a deliberate emphasis on contact with families for children in care. The author's general observation has been that children in care may

go for years without having contact with their families, in worst case scenarios it was also observed that some extended family members do not have an idea of where their relatives children in care are placed. The paradox to this is that upon leaving care, we expect separated children to be reintegrated with families and communities which becomes difficult as some of these children may not have an idea of who their family is, let alone their whereabouts to such an extent that some may stay in institutions beyond the age of 18. This is a policy breach and a safeguarding issue as these care leavers remaining in child care institutions due to lack of a clear transition plan would be technically adults living with vulnerable children and the risk of child abuse in such a scenario cannot be completely ruled out. It is in this regard that Zimbabwe should have a policy pronouncement, if not a legal provision, on how young persons leaving care at the age of 18 should be supported in the transition to adulthood and independence as this is a role that has been largely left to private and church run children's homes.

Ultimately what will be needed in the long run is a change in model regards social services because the residual approach largely adopted by government is a result of a view on social services as a drain on resources rather than a contribution to social and national development this ultimately leads to less resources being allocated to the MoLSS and the net effect down the system is poor outcomes for children.

### CONCLUSION AND POLICY OPTION

It can be noted that there are lessons that Zimbabwe can borrow from the United Kingdom's child protection system that would not have significant financial implications on the central government but very crucial in improving the effectiveness of child protection in Zimbabwe. From the discussion above, it is clear that devolution makes the UK system effective and efficient. The Zimbabwean government should implement the legislative provisions provided for devolution in the constitution of Zimbabwe. This will be followed by the realignment of the child protection legislation or policy. Devolution of statutory powers from central government to local governments with central government assuming a supervisory role for quality control through amendment of the Children's Act chapter 5:06 would boost the human capital available to children in statutory social work practice.

Research and experiences from other jurisdictions has shown that the success of a devolved system of governance is dependent on various factors, chief of which is the design of policy, legal and institutional instruments that are intended to achieve the set constitutional objectives. The new Constitution establishes the constitutional framework.

There needs to be a statutory provision on how children leaving care are supported in transitioning to adulthood and independence. There should also be a deliberate emphasis on maintaining contact for children outside the family environment with their families.

Child protection practice in Zimbabwe appears to be rudimentary. Developing a statutory social workers manual to give clarity of thresholds, procedures for specified thresholds and timescales is needed. Having a clear working together protocol between key stakeholders in child protection and welfare most importantly Education professionals, Health professionals and the Police is crucial. This should ensure continued involvement of these and other professionals in case management beyond the point of referral to ensure better outcomes for children

Clearly written, accurate and complete case records are an essential part of delivering effective social care services. Digitalization of case file recording is crucial in enhancing professional accountability and quality. Social entrepreneurs within the social work field should seek technological transfer. This can start by enhancing the use of the current donor funded case management system.

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