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The need for and a proposed model for the regulation of the Social Work profession in Eswatini

Weston CHIDYAUSIKU

ABSTRACT

The social work profession in Eswatini plays a crucial role in addressing pressing socio-economic issues such as poverty, Human Immunodeficiency Virus/ Acquired Immunodeficiency Syndrome (HIV/AIDS), and gender-based violence. However, the absence of a regulatory framework undermines the profession's effectiveness, leading to inconsistent training, unqualified practitioners, and inadequate supervision. This article argues for the urgent need to regulate the social work profession in Eswatini to ensure quality service delivery, protect client rights, and enhance professional accountability. Although regulation can standardize education and practice, it may also introduce financial and bureaucratic challenges, potentially limiting access to services for marginalized communities. Drawing from best practices in countries such as Zimbabwe, South Africa, and the United Kingdom, this article proposes a structured model for establishing a regulatory framework in Eswatini. The suggested model emphasizes a phased approach, beginning with the formation of a social work association and culminating in a fully operational regulatory board. By adopting this model, Eswatini can align its social work profession with international standards, ensuring ethical and competent service delivery while addressing potential challenges associated with regulation.

KEY TERMS: accountability, client protection, Eswatini, social work regulation, professionalization, quality service delivery.

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INTRODUCTION

Social work is a critical profession dedicated to promoting social justice, well-being, and human rights. According to the International Federation of Social Workers (2022), social work is a practice-based profession that fosters social change, development, and empowerment. In Eswatini, however, the absence of a regulatory framework for social work presents significant challenges, including the proliferation of unqualified practitioners, inconsistent training programs, and a lack of accountability mechanisms (Mohapi, Tabi & Masuku 2022). These systemic gaps not only compromise the quality of services but also endanger the well-being of clients or service users, particularly children and marginalized communities. Mohapi, Tabi & Masuku's (2022) comparative study between South Africa and Eswatini underscores the transformative impact of professionalization. South Africa's regulated social work system governed by the South African Council for Social Service Professions (SACSSP) ensures standardized training, ethical practice, and accountability, while Eswatini's unregulated landscape perpetuates fragmentation and inequitable service delivery. Their findings highlight that professionalization is not merely bureaucratic but a prerequisite for safeguarding client rights and enhancing the profession's credibility. Learning from regional models such as Zimbabwe's Council of Social Workers and Namibia's Social Work and Psychology Council this article argues that Eswatini must urgently implement a phased regulatory framework. The author proposes a structured model or pathway including: formation of a national social work association to unify practitioners; legislation mandating licensure and continuous professional development, and establishment of an independent regulatory board modeled on regional models such as South African Council for Social Service Professions (SACSSP), Zimbabwe's Council of Social Workers (CSW) and Namibia's Social Work and Psychology Council but adapted to Swazi context.

The current state of social work in Eswatini

Social work in Eswatini has evolved significantly, shaped by colonial legacies, post-independence challenges, and contemporary socio-political dynamics (Fakudze, 2024). The profession's origins trace back to the colonial era, when missionaries and British administrators introduced rudimentary welfare services focused on immediate relief rather than systemic intervention (Mugumbate & Nyanguru, 2013; Patel, 2005). These early efforts were fragmented and charity-driven, with minimal government involvement, leaving rural populations underserved (Midgley, 1981). Following independence in 1968, Eswatini struggled to develop a structured social work system due to financial constraints, limited trained professionals, and the compounding effects of apartheid in neighboring South Africa (Midgley, 1981).

The HIV/AIDS epidemic of the 1990s marked a turning point, exposing critical gaps in psychosocial support and prompting an urgent expansion of social work services (Whiteside & Whalley, 2007). International aid bolstered community-based interventions, positioning social workers as key actors in mitigating the crisis (Ndlovu, 2007). Today, social work in Eswatini is undergoing professionalization, yet systemic challenges persist due to the absence of regulatory oversight. Formal social work education, introduced in 2014, is offered by the University of Eswatini (UNESWA) and Eswatini Medical Christian University (EMCU) with accreditation from the Eswatini Higher Education Council (ESHEC). Both universities offer a four-year undergraduate bachelor's degree programme, but neither offers postgraduate programmes.

Although the social work programme is accredited by the Eswatini Higher Education Council (ESHEC), Mohapi et. al (2022) observe inconsistencies in training and accreditation which undermine social work standards. Unlike regulated systems in neighboring countries such as Zimbabwe, where the Council for Social Workers collaborates with higher education bodies to standardize curricula (Chidyausiku & Bohwasi, 2021; Kurevakwesu, Chikwaiwa & Mundau, 2023), Eswatini lacks a regulatory framework to ensure quality and accountability. This vacuum fosters a professional identity crisis, compromises service quality, and exposes service users to risks from unqualified practitioners (Mohapi et. al, 2022). The absence of mandatory continuing professional development (CPD) further impedes practitioners' ability to address emerging challenges, such as trauma-informed care (Midgley, 2020). Without licensure or ethical oversight, social work's legitimacy remains precarious, jeopardizing both client safety and the profession's standing (Chidyausiku & Bohwasi, 2021). Urgent reforms are needed to align education and practice with national priorities and international best practices, ensuring social work can effectively serve Eswatini's most marginalized populations.

Challenges posed by the absence of social work regulation

Many issues, such as the abuse of social work identity, exploitation of service users, lack of professional recognition, inconsistent training standards, insufficient supervisory structures, incompetent practice, and unethical behavior, are expected to arise in Eswatini because of the lack of social work regulation. In-depth analysis of these issues and their implications for the social work profession in Eswatini will be provided in this section.

Abuse of social work identity

The absence of social work regulation in Eswatini not only permits the misuse of the social work title but also facilitates a broader erosion of professional identity. Social work is a distinct discipline requiring specialized training, ethical grounding, and accountability mechanisms to uphold public trust and service efficacy (Banks, 2012; Mohapi et. al, 2022). When unqualified individuals adopt the title, they jeopardize the profession's credibility, mislead service users, and risk delivering harmful or ineffective interventions (Kurevakwesu et al., 2023). The fluid interpretation of the title "social worker" exacerbates this issue. While some argue that the term can be applied loosely akin to untrained individuals calling themselves "teachers", this view neglects the unique competencies required for ethical social work practice (Midgley, 2020). Unlike teaching, where informal roles may exist, social work directly impacts marginalized groups, necessitating rigorous training in psychosocial support, legal frameworks, and trauma-informed care (Healy, 2021).

In Eswatini, the regulatory vacuum enables untrained practitioners to operate unchecked, undermining the profession's integrity and exposing clients to potential harm (Mohapi et. al, 2022). Empirical evidence from neighboring countries underscores the severity of this issue. Kurevakwesu et al. (2023) document how Zimbabwe's unregulated pre-2001 environment allowed non-professionals to exploit the social work title, leading to malpractice and public distrust. Their study highlights that statutory regulation such as the Social Workers Act (Chapter 27:21), which criminalizes unauthorized use of the title is critical to safeguarding professional identity. Similarly, the South African Council for Social Service Professions (SACSSP) enforces strict registration criteria, ensuring only qualified individuals practice (SACSSP, 2023).

These models demonstrate how regulation mitigates identity abuse, a contrast to Eswatini's current system, where no legal recourse exists to penalize impostors (Mohapi et al., 2022). The consequences of unregulated practice extend beyond title misuse. Without standardized training by a professional board, social workers in Eswatini lack a unified professional identity (Mohapi et. al, 2022), complicating interdisciplinary collaboration and public recognition (Gray & Webb, 2013). This ambiguity perpetuates a cycle of distrust, as service users struggle to distinguish legitimate practitioners from opportunists (Parrott, 2014). As Kurevakwesu et al. (2023) assert, the absence of title protection not only devalues the profession but also violates clients' rights to competent care, a failure mirrored in other unregulated contexts.

Abuse of service users

The lack of a regulatory framework for social work in Eswatini creates systemic vulnerabilities that expose service users to various forms of abuse and professional malpractice. This unregulated environment allows untrained individuals to perform critical social work functions, often with harmful consequences for vulnerable populations. The situation mirrors documented cases in neighboring countries like Zimbabwe and Botswana, where similar regulatory gaps have led to egregious violations of client rights and professional standards.

Evidence from Zimbabwe demonstrates how the absence of proper regulation can lead to devastating outcomes in child protection cases. Kurevakwesu et al. (2023) documented instances where unqualified individuals posing as social workers made improper child removal decisions, causing family trauma due to inadequate assessments and poor understanding of child welfare principles. Similarly, concerning cases emerge from Botswana, where Jongman and Tshupeng (2020) found that untrained personnel handling statutory social work roles often lacked essential competencies, resulting in the revictimization of gender-based violence survivors during court-mandated processes. These regional examples highlight the very real risks facing Eswatini's service users, where no legal mechanisms exist to prevent unqualified individuals from undertaking similar sensitive work.

The ethical breach in unregulated systems extend beyond professional incompetence to include violations of fundamental social work principles. Unlike in the United Kingdom (UK) where the Health and Care Professions Council (HCPC) enforces strict ethical protocols (Banks, 2012), or Ireland where CORU provides clear ethical guidelines (Parrott, 2014), Eswatini's system offers no protection against unethical practices. Jongman and Tshupeng's (2020) research in Botswana revealed how unregulated practitioners can compromise and tarnish the image of the social work profession. In their study they revealed mishandling of adoption cases, unfriendly social workers who are reluctant to help the neediest clients, poor service delivery by unregulated social workers, corruption leading to defrauding of the government through the creation of fictitious social grants beneficiaries in different councils. In the absence of a regulatory framework, it is plausible that similar malpractices may be occurring in Eswatini, mirroring the experiences of neighboring countries.

Financial exploitation represents another serious consequence of unregulated practice. Kurevakwesu et al. (2023) documented cases in Zimbabwe where individuals posing as social workers charged exorbitant fees for fraudulent services, including fake adoption facilitation. This troubling phenomenon could easily replicate in Eswatini, where the lack of title protection, unlike South Africa's system under SACSSP creates opportunities for similar scams targeting vulnerable families. The potential for such exploitation is particularly alarming given that many service users in Eswatini come from economically disadvantaged backgrounds and may be especially susceptible to financial predation.

The problem extends beyond individual practitioners to systemic issues in social work education. Professional conduct stems not only from regulation but also from proper training. In regulated contexts like the United Kingdom, social work curricula must meet standardized requirements including rigorous ethics training and supervised fieldwork (Horner, 2018). However, research from Botswana shows how unaccredited programs can graduate students unprepared for practice; Jongman & Tshupeng (2020) found that poorly trained social workers produced flawed court reports that negatively impacted client outcomes. Even in Zimbabwe, where registration exists, Kurevakwesu et al. (2023) found that outdated curricula left practitioners unequipped to handle contemporary challenges like migration crises. These findings raise serious concerns about whether Eswatini's training programs adequately prepare graduates for the complex realities of social work practice.

The accountability vacuum in Eswatini's system creates particularly dire consequences for service users. In countries with robust regulatory frameworks like the United Kingdom, professional bodies investigate complaints and can remove practitioners who violate ethical standards (Parrott, 2014). In Zimbabwe, the Council for Social Workers similarly has authority to suspend licenses for malpractice (Kurevakwesu et al., 2023). By contrast, Mohapi et al. (2022) describe how Eswatini's abused clients have attempted to report misconduct to NGOs, only to find that no authoritative body exists to address their grievances. This lack of recourse not only fails to protect individual service users but also undermines public trust in the social work profession as a whole.

The cumulative impact of these regulatory failures creates a system where service users bear the brunt of professional malpractice without protection. From improper statutory interventions to ethical breach and financial exploitation, the risks to service users are both diverse and severe. The examples from Zimbabwe and Botswana demonstrate that these are not hypothetical concerns but documented realities in similar regulatory environments. Without urgent reforms to establish proper oversight, standardized training, and accountability mechanisms, Eswatini's service users will continue to face unacceptable risks when seeking social work assistance. The establishment of a regulatory body, coupled with curriculum reforms to align with international standards, represents an essential step toward protecting both service users and the integrity of the social work profession in Eswatini.

Non-recognition of the social work profession

The professional status of social work in Eswatini remains precarious due to its lack of formal recognition by key institutional actors. This non-recognition manifests most critically from three primary sources: government entities, professional bodies, and the general public, each contributing to the marginalization of social work as a legitimate profession. At the governmental level, social work lacks statutory recognition as a distinct profession. Unlike neighboring Zimbabwe where the Council of Social Workers is enshrined in national legislation through the Social Workers Act (Chapter 27:21), Eswatini's social workers operate without legal standing. This institutional invisibility becomes evident in policy-making spaces where social workers are frequently excluded from critical discussions about social welfare reforms (Mohapi et. al, 2022), whereas in South Africa, the SACSSP's statutory mandate ensures social workers' participation in developing legislation like the Children's Act (SACSSP, 2023).

Similarly, Namibia's Social Work and Psychology Council legally requires government consultation with registered social workers on all social welfare policies (Bohwasi & Chidyausiku, 2021), contrasting sharply with Eswatini where unregulated status renders social workers' input non-binding. The United Kingdom's Health and Care Professions Council (HCPC) regulation grants social workers formal representation in parliamentary committees (Horner, 2018), demonstrating how statutory recognition creates policy influence that Eswatini's unregulated profession cannot exercise.

In South Africa, social workers hold legally protected roles in healthcare and judicial sectors, where their assessments directly influence court decisions on child protection, domestic violence, and rehabilitation cases. The South African Council for Social Service Professions (SACSSP) ensures that social workers' reports particularly on trauma assessments, family dynamics, and risk evaluations are treated as expert testimony in court (SACSSP, 2023). For example, in rape and child abuse cases, social workers collaborate with prosecutors to assess victims' psychosocial needs, ensuring that sentencing considers rehabilitation over punitive measures (Lombard & Wairire, 2020). Similarly, in the criminal justice system, probation officers rely on social workers' recommendations for parole and reintegration programs (Dybicz, 2021). In the United Kingdom, the Health and Care Professions Council (HCPC) mandates that social workers' statutory reports in child protection cases carry legal weight, often determining custody arrangements and child removal decisions (Horner, 2018).

Social workers assess family environments, substance abuse risks, and domestic violence patterns, with their findings heavily influencing judicial rulings (Parrott, 2014). Additionally, UK social workers in probation services provide pre-sentencing reports that guide judges on rehabilitation versus incarceration, ensuring offender management aligns with psychosocial needs (Banks, 2012). Conversely, in Eswatini, where social work lacks regulatory recognition, judicial and healthcare sectors frequently disregard social workers' assessments. Without a social work council to enforce professional credibility, magistrates and judges often rely on police or medical

reports, excluding psychosocial perspectives (Mohapi et. al, 2022). In child protection cases, unregistered social workers may make decisions without proper risk assessments, leading to misguided rulings (Jongman & Tshupeng, 2020). Furthermore, in countries where social work is unregulated, in cases of domestic violence and rape, social workers' recommendations are seldom incorporated into court processes, resulting in inadequate victim support and offender rehabilitation (Mohapi et. al, 2022: Jongman & Tshupeng, 2020).

In Eswatini, where social work lacks regulatory recognition, public understanding remains severely limited, with many community members unable to distinguish qualified social workers from Non-Governmental Organisations (NGOs) volunteers or community caregivers (Mohapi et. al, 2022). This professional ambiguity is reinforced in the employment sector, where job advertisements frequently conflate social work positions with general community roles, applying identical qualification requirements and remuneration scales. Without a regulatory body to enforce professional distinctions, social workers struggle to establish their unique expertise, resulting in diminished public trust and professional valuation (Mohapi et. al, 2022). By contrast, in South Africa, the South African Council for Social Service Professions (SACSSP) legally protects the title of "social worker," ensuring only registered practitioners can use it (SACSSP, 2023).

Public awareness campaigns and media engagement by the SACSSP have strengthened societal recognition, making social workers a respected group in healthcare, education, and justice systems (Lombard & Wairire, 2020). Similarly, in Ireland, CORU the national regulatory body mandates public registers of accredited social workers, allowing service users to verify qualifications (Share & Lalor, 2017). This transparency fosters trust, ensuring that social workers are distinguished from unqualified volunteers in public perception. In the United Kingdom (UK), the Health and Care Professions Council (HCPC) enforces strict professional standards, with media portrayals (e.g., documentaries, news features) reinforcing the specialized skills of social workers (Horner, 2018). Public surveys indicate that a significant number of UK citizens can accurately describe a social worker's role, compared to few in unregulated contexts like Eswatini (Banks, 2012).

The regulatory vacuum in Eswatini diminishes social workers' authority, whereas in South Africa, Namibia, Zimbabwe, Ireland and the UK, statutory recognition ensures their expertise shapes legal and healthcare interventions. Without a regulatory framework, Eswatini's social workers remain peripheral in policy and judicial processes, undermining effective family welfare and criminal justice outcomes.

Inconsistent social work training

The social work profession in Eswatini suffers from significant inconsistencies in training quality and standards, primarily due to the absence of a regulatory framework to oversee education programs. While both the University of Eswatini (UNESWA) and Eswatini Medical Christian University (EMCU) offer four-year bachelor's degrees classified as Level 8 under the Eswatini National Qualifications Framework, discrepancies emerge when these qualifications are evaluated regionally. Graduates report that the South African Qualifications Authority (SAQA) assesses their degrees as Level 7, unlike Zimbabwe's four-year programs which consistently achieve Level 8 recognition. This suggests critical gaps in Eswatini's social work education, likely stemming from the lack of a dedicated social work council to ensure alignment with regional competency standards (Mohapi et. al, 2022). Although social work programs at UNESWA and EMCU are accredited by Eswatini Higher Education Council (ESHEC), the absence of oversight from a social work council result in substantial variability in training quality between institutions and even among graduates from the same program.

The training inconsistencies in Eswatini contrast sharply with regulated systems like the United Kingdom and South Africa. In the United Kingdom, all social work programs must meet strict Health and Care Professions Council (HCPC) standards, including 200 days of supervised placements and standardized competencies in law, ethics, and intervention strategies (HCPC, 2023; BASW, 2021). Similarly, South Africa's four-year bachelor's programs require 1,000 hours of fieldwork and comprehensive exams in statutory social work, with mandatory continuing professional development for license renewal (SACSSP, 2022; Lombard, 2021). These regulated systems ensure all graduates meet consistent competency benchmarks before entering practice.

In Eswatini, the training gaps have serious practical consequences. The lack of standardized curricula means some graduates may be inadequately prepared in critical areas like trauma-informed care or child protection (Dlamini, 2022). This variability leads to uneven service quality, with some social workers struggling to effectively address complex issues like domestic violence or mental health challenges (Simelane, 2023). Furthermore, the absence of mandated fieldwork hours and proper supervision during training leaves many graduates unprepared for real-world practice (Khumalo, 2023). These deficiencies not only compromise service quality but also erode public trust in the profession, as community members encounter practitioners with widely varying skill levels (Gray & Webb, 2013).

The impacts extend beyond national borders, as the SAQA's assessment of Eswatini's qualifications as Level 7 limits graduates' opportunities for postgraduate study or employment in neighboring countries. This professional isolation exacerbates the challenges of an already under-resourced system. Establishing a Social Work Council to oversee curriculum development and align training with regional standards would be a crucial first step in

addressing these issues. Such a body could implement mandatory fieldwork requirements, standardized competency assessments, and continuing education programs to elevate professional standards (Mohapi et. al, 2022). Without these reforms, Eswatini's social work education will continue to produce unevenly prepared practitioners, ultimately failing both the profession and the clients it serves.

Inadequate supervision

The lack of standardized supervision and mentorship in Eswatini's social work practice poses significant challenges for practitioners, students and clients. Without a structured framework for supervision, social workers may struggle with professional development, leading to inadequate service delivery and potentially harmful outcomes for clients. In countries like South Africa, the South African Council for Social Service Professions (SACSSP) mandates supervised practice for newly qualified social workers and students, underscoring the importance of adherence to minimum standards set by the regulatory board (Vetfuti, Goliath & Perumal, 2019). As Vetfuti, Goliath, and Perumal (2019) assert, social work supervision is not only mandatory but also guided by these standards, highlighting the critical role of regulatory frameworks in ensuring professional competence. This requirement ensures that newly qualified social workers receive guidance from experienced practitioners, fostering skill development and confidence in a supportive environment. Conversely, Eswatini's absence of a regulatory framework leaves social workers bereft of essential supervision and mentorship, rendering them illequipped to navigate complex cases effectively. This lacuna is reminiscent of the pre-regulatory era in Zimbabwe, where unregulated social work practice led to suboptimal outcomes, as poignantly documented by Kurevakwesu et al. (2023). The lack of supervision by registered and experienced practitioners in Eswatini's social work sector compromises professional socialization and skill development, deviating from international standards. Unsupervised social workers may provide inconsistent services, leading to poor decision-making and inadequate client support, as observed in Botswana (Jongman & Tshupeng, 2020). Furthermore, inadequate supervision can exacerbate stress and burnout among social workers (Nkosi & Ncube, 2025). In contrast, regulated environments like the United Kingdom, Ireland and South Africa prioritize regular supervision as a crucial aspect of continuous professional development, providing emotional support and reflective practice opportunities (Vetfuti et. al, 2019). In Eswatini, the absence of a supervisory structure exposes social workers to ethical and legal risks, potentially harming clients and undermining the profession's credibility. Unlike United Kingdom and South Africa, where established supervision frameworks hold social workers accountable for their actions (Mohapi et al., 2022; Fakudze, 2024), Eswatini's lack of oversight can lead to unprofessional behavior, erosion of community trust, and diminished reputation of the social work profession. This void in accountability mechanisms is likely to have a negative impact on service delivery.

Incompetency and unethical practices

The absence of regulations in Eswatini's social work sector creates a significant risk for service users, as it allows incompetent and unethical practitioners to operate without oversight. This situation can lead to serious consequences for individuals and communities that rely on social work services for support and intervention. Without regulatory oversight, individuals who lack the necessary training and ethical grounding can present themselves as social workers. For example, an unqualified individual may provide counseling or intervention services to victims of domestic violence without understanding the complexities of trauma-informed care. This can lead to further victimization or inadequate support, exacerbating the trauma experienced by these individuals. The presence of incompetent and unethical practitioners can erode public trust in the social work profession as a whole. When service users have negative experiences with unqualified individuals, they may become reluctant to seek help from legitimate social workers.

This can lead to a cycle of disengagement from essential services, further isolating vulnerable populations who need support. In countries like Zimbabwe and South Africa, regulatory councils enforce ethical standards and competency requirements, ensuring that only qualified professionals are allowed to practice (Chidyausiku & Bohwasi, 2021; Kurevakwesu et al. 2023). For example, the Council of Social Workers in Zimbabwe requires practitioners to adhere to a code of ethics and undergo regular evaluations to maintain their licenses (Bohwasi & Chidyausiku, 2021). This system of accountability helps to ensure that social workers are competent and act in the best interests of their clients. In contrast, Eswatini's lack of such mechanisms means that there is no formal process for addressing complaints against practitioners, allowing unethical behavior to go unchecked. The absence of regulation not only affects service delivery but also hampers the professional development of social workers. In regulated environments, ongoing training and adherence to ethical standards are mandatory, which helps to cultivate a culture of professionalism and accountability. In Eswatini, without these requirements, there is little incentive for practitioners to pursue further education or adhere to ethical guidelines, leading to a stagnation in professional growth and a decline in service quality.

In Zimbabwe and South Africa, regulatory bodies play a crucial role in maintaining the integrity of the social work profession. For instance, the South African Council for Social Service Professions (SACSSP) enforces strict

guidelines regarding the qualifications required to practice and conducts regular audits of social work practices (SACSSP, 2023). This ensures that practitioners are not only qualified but also adhere to ethical standards that protect the well-being of clients. Similarly, the Health and Care Professions Council (HCPC) in the United Kingdom requires social workers to demonstrate their competence through continuous professional development and ethical practice, thereby safeguarding the interests of service users (HCPC, 2022).

Negative and neutral implications of regulating social work

While the regulation of social work can bring about numerous benefits, it is essential to consider the potential drawbacks that may arise from implementing such frameworks. Below are some of the key negative and neutral implications associated with regulating social work:

Financial implications

Implementing a regulatory framework often incurs significant financial costs. Practitioners may face higher fees for registration and renewal of practicing certificates. For example, in the UK, social workers must pay registration fees to the Health and Care Professions Council (HCPC). According to the HCPC (2025) the fee for the full two-year registration cycle is £232.72, which is £116.36 per year. Additionally, social workers pay the scrutiny fee which is a one-off non-refundable payment of £81.45, which is the fee to process their applications. Similarly, in Zimbabwe newly qualified social workers pay USD\$125 as initial registration fee and USD\$50 for annual renewal of practicing certificates (Council of Social Workers, 2025). In South Africa, the registration fee with the South African Council for Social Service Professions (SACSSP) is as follows; registration (once-off) is R262 and annual fee of R500, amounting to R762 (USD\$41.47) (SACSSP, 2024). These costs can lead to higher service fees for clients, potentially restricting access to essential services, particularly for marginalized communities.

Bureaucratic challenges

- Barriers to entry: Regulatory frameworks can create bureaucratic hurdles that may limit the entry of new practitioners into the field. For instance, the lengthy and complex registration processes for foreign-trained social workers can deter potential candidates. In the United Kingdom, foreign-trained social workers must undergo a process that includes verifying their qualifications, passing an English language proficiency test, and completing an assessment of their competence, which can take several months and incur additional costs (Social Work England, 2023; Jones & Patel, 2022). This can limit workforce diversity and hinder innovation within the field.
- Stifling creativity: Regulation can lead to a rigid adherence to established protocols and standards, which may stifle creativity and flexibility in addressing complex social issues (Adams, Dominelli & Payne, 2009). Social workers may feel constrained by regulatory requirements, limiting their ability to tailor interventions to the unique needs of their clients (Harris & White, 2018).

Neutral or context-dependent implications

- Quality of services vs. access: While regulation can enhance the quality of social work services by ensuring that practitioners meet competency and ethical standards (Healy, 2014), it may also unintentionally restrict access for marginalized communities. Weiss-Gal (2017) argues that stringent professional requirements, such as mandatory licensing and costly continuing education, can disproportionately exclude practitioners from underrepresented backgrounds, reducing workforce diversity. Additionally, if regulatory compliance leads to higher service costs such as through increased administrative fees or certification expenses these financial burdens may be passed on to clients, further limiting access for low-income populations (Lipsky, 2010). McLaughlin (2020) notes that in regions with strict regulatory frameworks, vulnerable groups such as undocumented migrants or rural communities often face reduced availability of affordable social services. Thus, while regulation aims to protect service quality, policymakers must balance standardization with equitable access to avoid exacerbating existing disparities.
- Public perception: The establishment of a social work regulatory body can significantly influence public perceptions of the profession. Research suggests that professional regulation enhances legitimacy, fostering greater public trust by signaling standardized competency and ethical accountability (McDonald, 2021; Weiss-Gal & Welbourne, 2008). For example, in countries like the UK and Canada, the presence of robust regulatory bodies (e.g., Social Work England and the Canadian Association of Social Workers) has been linked to increased recognition of social work as a distinct and respected profession (Banks, 2021). However, regulation can also intensify scrutiny, with practitioners facing heightened public and institutional expectations (Beddoe, 2018). Studies note that such pressures may

contribute to stress and burnout among social workers, particularly when regulatory demands conflict with frontline realities (Ferguson et al., 2022). Thus, while regulation can elevate the profession's status, it must be carefully implemented to avoid overburdening practitioners.

Lessons from best practices

Using a comparative study of social work regulatory frameworks in a few nations in the region (South Africa, Zimbabwe, and Namibia) and abroad (United Kingdom, Ireland, and Canada), this section seeks to highlight important lessons that can be applied to the Eswatini context. The significance of thorough training and education, the creation of a statutory regulatory board, and the encouragement of continuous professional development are among the lessons learned from this analysis. This section offers a basis for the creation of a customized social work regulation model suited to the unique requirements and environment of Eswatini by critically analyzing case studies of regional regulatory frameworks.

Comprehensive training and education

Countries such as South Africa, Namibia, and Zimbabwe highlight the significance of comprehensive education and training for social workers. For instance, South Africa's training framework emphasizes a robust curriculum that prepares social workers to address diverse community needs effectively. Similarly, Zimbabwe's educational institutions focus on equipping social workers with the necessary skills to navigate complex social issues, as outlined in the Zimbabwe Minimum Body for social work Training (2014) and Zimbabwe Minimum Body of Knowledge (MBKs) (2020). The Council of Social Workers oversees the training of social workers in collaboration with Zimbabwe Council for Higher Education (ZIMCHE) (Chidyausiku & Bohwasi, 2021). The Zimbabwe Council for Social Workers draws its mandate from the Social Workers Act 27:21, number 9/2001, which establishes standards for training and practice. Eswatini could benefit from adopting these models to ensure that future social workers are adequately prepared to meet the evolving demands of their communities.

Establishing a regulatory board

The establishment of a dedicated Social Work Regulatory Board in Eswatini represents a critical advancement for the professionalization of social work practice in the country. Drawing upon successful regulatory models from the Southern African region and beyond, such a board would serve as the central governing body to standardize and elevate the profession. The South African Council for Social Service Professions (SACSSP), established under the Social Service Professions Act 110 of 1978, provides an exemplary framework with its comprehensive approach to registration, disciplinary procedures, and title protection (SACSSP, 2020). Similarly, Council of Social Workers (CSW) in Zimbabwe, operating under the Social Workers Act (Chapter 27:21), demonstrates the effectiveness of mandatory licensing and title safeguarding in maintaining professional standards (Bohwasi & Chidyausiku).

Namibia's Social Work and Psychology Council offers additional regional insights into maintaining practitioner registries and upholding ethical practice. Beyond Africa, the United Kingdom's Health and Care Professions Council (HCPC) illustrates how rigorous oversight can align national standards with international best practices (HCPC, 2022). For Eswatini, adopting a similarly structured regulatory body would require careful consideration of local contextual factors, including existing social service infrastructure, educational capacity, and workforce development needs. The proposed board should be established through specific legislation- a Social Work Profession Act for example, that clearly defines its mandate, governance structure, and operational procedures. Implementation would benefit from a phased approach, beginning with voluntary registration while building institutional capacity, before transitioning to mandatory licensing (Bohwasi & Chidyausiku, 2021). This gradual process would allow for stakeholder consultation with universities, NGOs, and government agencies to ensure the framework meets local service delivery requirements while maintaining international standards of professional practice (Midgley, 2014). Such a regulatory mechanism would not only enhance the credibility and recognition of social work in Eswatini but also ensure greater accountability and quality in service provision to clients.

Promoting continuous professional development

Continuous professional development (CPD) is essential for maintaining high standards in social work practice. Countries like South Africa and Ireland have established mandatory CPD requirements for social workers to ensure they remain competent and informed about best practices and emerging trends in the field. In South Africa, the South African Council for Social Service Professions (SACSSP) mandates that social workers complete 30 CPD credits annually. Each credit corresponds to one hour of learning, meaning social workers must engage in 30 hours of CPD activities each year to maintain their registration and ensure their skills are up to date (SACSSP, 2025). Similarly, in Ireland, the Health and Social Care Professionals Council (CORU) requires social workers to

complete 30 CPD credits within a 12-month period. Like in South Africa, one hour of learning equates to one CPD credit, which means social workers in Ireland must also participate in 30 hours of CPD annually to uphold their professional competencies (CORU, 2025). In the United Kingdom, social workers are required to engage in CPD as part of their registration with Social Work England. While there is no specific number of hours mandated, social workers are encouraged to record at least one piece of CPD annually in their online account, with a recommendation to document CPD activities quarterly. This approach emphasizes the importance of ongoing learning and reflection in practice. By implementing similar CPD requirements in Eswatini, practitioners would be encouraged to stay informed about the latest developments in social work, ultimately benefiting the communities they serve.

Case examples of regional regulatory frameworks

- Zimbabwe: The Social Workers Act 27:21, number 9/2001, establishes a Council of Social Workers
 responsible for regulating the practice of social work, including the registration of social workers and
 oversight of their professional conduct.
- **South Africa:** The Social Service Professions Act 110 of 1978 provides for the establishment of the SACSSP, which oversees the registration of social workers, student social workers, and social auxiliary workers, ensuring adherence to professional standards.
- Namibia: The Social Work and Psychology Act 6 of 2004 establishes the Social Work and Psychology Council, which regulates the registration and practice of social workers, psychologists, and social auxiliary workers, thereby promoting professional accountability.

By learning from these best practices, Eswatini can initiate its social work framework, ensuring that practitioners are well-trained, regulated, and continuously developing their skills to meet community needs effectively.

Suggested social work regulation model for Eswatini

To establish an effective regulatory framework for social work in Eswatini, this paper proposes a phased, context-sensitive approach, integrating global best practices such as the United Kingdom and Ireland with local adaptations. The model draws on evidence-based regulatory strategies from Zimbabwe (Bohwasi & Chidyausiku, 2021), Namibia and South Africa (Sewpaul & Lombard, 2004), while incorporating insights from the author's professional experience in Southern African social work systems.

Key components of the model include:

- i. Legislative and institutional foundations Establishing a statutory body (e.g., *Eswatini Council for Social Work*) to oversee registration, ethical compliance, and continuing professional development.
- ii. Gradual implementation A multi-stage rollout to allow for stakeholder consultation, capacity building, and systemic adjustments (Gray & Allegritti, 2002).
- iii. Contextual adaptations Aligning regulatory standards with Eswatini's socio-cultural realities, resource constraints, and service delivery needs.

Building on this framework, a phased approach is proposed to regulate the social work profession in Eswatini, ensuring a sustainable transition towards professionalization that balances quality assurance with accessibility. By adopting a gradual and adaptive strategy, the risks of bureaucratic overreach can be mitigated, while fostering a robust and responsive social work sector (Hugman, 2009). The proposed phased approach is shown in the table.

Stage	Description
Initial Stage	Formation of a social work association or union to discuss critical issues, policies, and advocacy for regulation.
Second Stage	Drafting of a social work regulation policy and lobbying the government for its necessity.
Third Stage	Engaging stakeholders such as universities, employers, and policymakers to discuss and refine the proposed regulatory bill, followed by parliamentary debate.
Fourth Stage	Enactment of the social work regulatory law to formalize professional standards and accountability.
Fifth Stage	Establishment of the regulatory board with a clear mandate and functions.
Sixth Stage	Appointment of the first board members and a registrar, followed by the creation of committees to oversee different aspects of regulation.
Seventh Stage	Collaboration between the regulatory board and key stakeholders such as universities, the higher education council, the Deputy Prime Minister's Office, and civil society organizations.
Eighth Stage	Development of by-laws and organizational policies, including a board charter, strategic plan, registration requirements, training standards, code of ethics, and election procedures.
Final Stage	Full implementation of regulations, ensuring compliance with professional standards and continuous professional development for social workers.

Conclusion

The regulation of the social work profession in Eswatini is not only essential but long overdue. The absence of a regulatory framework has led to inconsistencies in training, unqualified practitioners, and a lack of accountability, all of which undermine the effectiveness of social work services. By adopting a structured regulatory model, Eswatini can ensure that social workers meet professional standards, enhancing the credibility and impact of the profession. While regulation offers numerous benefits, including improved service quality and professional recognition, it is crucial to acknowledge potential challenges such as increased costs and bureaucratic constraints. A phased approach, as outlined in this article, provides Eswatini with a sustainable pathway to regulation, minimizing disruptions while maximizing the positive impact of professionalization. By learning from regional and international best practices, Eswatini can establish a robust regulatory framework that safeguards vulnerable populations, promotes ethical practice, and ensures that social work remains a respected and impactful profession. The time for action is now, regulation is a critical step toward strengthening social work in Eswatini and fostering a more just and equitable society.

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