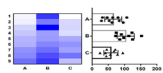


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# Social work and strengthening of NGOs in development cooperation to treat drug addiction

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### ABSTRACT

Social work is one of the youngest scientific disciplines, it has developed itself as a discipline to address individuals, families and communities in social crisis (poverty, low level of education, unemployment, diseases, social isolation). In the last decade also problems with alcohol and drug dependencies increasingly became the subject of social work support(systems). Due to coming globalisation, where living space has become wider than the community itself, social work was forced to operate within wider horizons and to go beyond communities boundaries. Social work nowadays has been becoming a more global scientific discipline seeking answers to global questions. Social work is therefore linked to all seventeen global goals of sustainable development (SDGs). As the prevention and treatment of drug addiction in Germany and Central Asia has reached a common urgency, a training and research project in the field of social work in addiction support was developed in Germany, Central Asian countries (Kazakhstan, Kyrgyzstan, Uzbekistan, Tajikistan) and China. The development of social work in these countries increasingly led to the development of common principles in the technology and ethics of social work, comparing standards and working out the socio-cultural peculiarities in the definition and practice of social work. These developments are examined and presented and their common solution ideas discussed in the context of achieving the UN Sustainable Development Goals.

**Keywords:** Social work; treat drug addiction

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## 1. Introduction

The Central Asian (CA) countries Kazakhstan, the Kyrgyz Republic, Tajikistan, Turkmenistan, and Uzbekistan - include more than 60 million ethnically, culturally, and religiously diverse people distributed over a geographical area twice the size of continental Europe, getting independent when the Soviet Union dissolved in 1991. <sup>[1]</sup> Since independence, they have faced huge challenges such as inappropriate and unaffordable health systems. <sup>[2]</sup> Many different groups have a role to play: national politicians and local governments, the health professions, the scientific community, the private sector and civil society organizations, as well as the global health community. Today, Central Asia (CA) has become a key region for the international activities tackling illegal drugs and related problems – specifically the problems with illicit opioids, and increasingly, also cannabinoids. Drugs and drug related problems, such as crimes, dependency or infectious diseases (such as HIV/AIDS, hepatitis, and TB) are key challenges for the international community and each state. <sup>[3]</sup> The European Union has

supported the CA countries for several years to support a balanced drug policy in line with the EU Drug Strategy 2013-2020, EU Drug Strategy 2021-2025 and the EU Central Asia Drug Action Plan 2014-2020 <sup>[4]</sup>. According to the annual reports of the drug situation in 2012 and 2013 and recently 2018 <sup>[5]</sup> there are first signs of a reduction of drug dependency and infectious diseases (at least of the officially registered persons with drug dependence or infectious diseases such as HIV/AIDS and Hepatitis C). It is difficult to analyse the reasons for this trend, but it can be stabilized by a common initiative of CA countries to tackle these drug related problems on a regional level. All countries in Central Asia are supporting the common view of the UN bodies (UN Drug Convention 1961, Art. 38; and Political Declaration 2009) to implement all practicable measures for “*prevention, early identification; treatment, education, after-care and rehabilitation and social reintegration*” of drug dependent people and the UNGASS outcome document from 2016. <sup>[6]</sup> The same is true for the PR China. The number of registered drug users increased from 70,000

<sup>1</sup> Central Asia Human Development Report: Bringing Down Barriers (<http://europeandcis.undp.org/governance/hrj/show/300BDC00-F203-1EE9-BE944F24EDFC09CE>)

<sup>2</sup> “End of the Soviet rule came with the collapse of the centralised economy and political transformations in all of the Central Asian states. Regime transition from centralised to market economy and democratisation of newly formed post-Soviet societies was greatly expected. Early post-Soviet times saw declining living standards, weakening public health infrastructure, and decline in life expectancy among others in most of the Central Asian region (...) The public health situation has been deteriorating in all of the Central Asian Republics and the system of health care built by Soviets has completely collapsed by now. Epidemic picture of the region worsened through increased migration, poverty, absence of quality health services and mismanagement in all levels of decision making systems.” [Turaeva M.: (2019): "HIV/AIDS and Drug Abuse in post-Soviet Central Asia: Soviet style of biopolitics and health regimes." PhD diss., University of Bielefeld]

<sup>3</sup> Michels II., Keizer B., Trautmann F., Stöver H., Robelló E. (2017) Improvement of Treatment of Drug use Disorders in Central Asia the contribution of the EU Central Asia Drug Action Programme (CADAP). *J Addict Med Ther* (5) : 1025

<sup>4</sup> EU Drugs Strategy (2013-20) (2012/C 402/01) Official Journal of the European Union, 29.12.2012; EU Drugs Strategy 2021-2025, Council of the European Union, CORDROGUE 80 SAN 483 COSI 255 RELEX 1026 UD 399, Brussels, 18 December 2020; EU-Central Asia Action Plan on Drugs (2014-2020), Council of the European Union, 18020/13 CORDROGUE 139 COEST 417, Brussels, 1 October 2013

<sup>5</sup>The Regional Report on the Drug Situation in Central Asia was prepared within the framework of the Central Asia Drug Action Programme; Prague 2019 (ISBN 978-80-907417-8-2) and Zabransky T, Mravcik V, Talu A, Jasaitis E. (2014): Post-Soviet Central Asia: a summary of the drug situation. *Int J Drug Policy*. 2014; 25: 1186-1194; see also: Jolley E, Rhodes T, Platt L, et al. HIV among people who inject drugs in Central and Eastern Europe and Central Asia: a systematic review with implications for policy. *BMJ Open* 2012;2: e001465. doi:10.1136/bmjopen-2012-001465 or Latypov, A., et al. (2014): Illicit drugs in Central Asia: What we know, what we don't know, and what we need to know. *International Journal of Drug Policy*. <http://dx.doi.org/10.1016/j.drugpo.2014.09.015>

<sup>6</sup> According to the UNGASS 2016 outcome document “Our joint commitment to effectively addressing and countering the world drug problem”: “*We recognize that the*

in 1990 to more than 2,148 Mio by the end of 2019. One major drug-related problem has been the spread of HIV. Figures from the Chinese Centre for Disease Control and Prevention (CDC), World Health Organization, and UNAIDS estimate that there were 1.25 million people living with HIV/AIDS in China at the end of 2018, with 135,000 new infections from 2017 [7]. The reported incidence of HIV/AIDS in China is relatively low. About 50% of them are injecting drug users, but sexual transmission gradually began to overtake the originally predominant routes of transmission. Since 2003, China has implemented harm-reduction measures such as needle-and-syringe programmes and methadone maintenance treatment for controlling the spread of HIV/AIDS. Although compulsory treatment options are still mostly used, community treatment for drug users are developing rapidly and psychotherapeutic treatment options are being implemented. [8] In China we still recognize „a large number of psychoactive substances (...) although the growth rate has slowed down. The major abused drugs are methamphetamine, heroin and ketamine. The abuse of synthetic drugs such as methamphetamine continues to

*increase, with 80% of newly discovered users abusing synthetic drugs. Among traditional drugs, heroin use reduced in 2019*“.[9]

In both, Central Asian countries as well as in the PR China modern methods of treatment of drug use disorders, according to the UNODC/WHO International Standards of treatment of Drug Use Disorders [10] have been implemented [11,12], including Opioid Substitution Treatment (OST), although the provision of treatment is limited and not affordable for all those in need and psychosocial assistance is still widely not available. [13] Especially social work is missing or still in a starting phase.

## 2. What is Social Work about?

*“Social work is a profession built on hope—hope for change, hope for a better life for abused and neglected children, the poor, the sick, the disabled, and the elderly. The sobering reality is that the values of freedom, justice, social responsibility, and human dignity drive a profession that often goes unrecognized and underappreciated, even pitied. Because of this, social workers worldwide face an uphill battle, striving to educate and retain a workforce that grapples with*

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*world drug problem remains a common and shared responsibility that should be addressed in a multilateral setting through effective and increased international cooperation and demands an integrated, multidisciplinary, mutually reinforcing, balanced, scientific evidence-based and comprehensive approach”.* United Nations, Vienna, June 2016, p.2

<sup>7</sup> National Health and Family Planning Commission of the People’s Republic of China. May 2015. Retrieved 18 February 2020

<sup>8</sup> Michels I.I., Zhao M., Lu L. (2007): Drug abuse and its treatment in China; Such, 53 (4), 228–237; DOI 10.1463/2007.04.04

<sup>9</sup> Zhao M., Drug Addiction treatment and rehabilitation in China; presentation at Solid-Exceed October School 2020 on 28 October 2020 at Solid-Exceed - Courses in a Track (solid-exceed.org)

<sup>10</sup> International standards for the treatment of drug use disorders: revised edition incorporating results of field-testing; Geneva: World Health Organization and United Nations Office on Drugs and Crime; 2020. License: CC BY-NC-SA 3.0 IGO; ISBN 978-92-4-000219-7 (electronic version) ISBN 978-92-4-000220-3 (print version)

<sup>11</sup> Michels, I.I: Zhao, M., Lu, L..(2007): Drug abuse and its treatment in China; SUCHT,53 (4), 228–237, and Michels, I. I., Fang, Y., Zhao, D., Zhao, L., Lu, L. (2007): Comparison of drug abuse in Germany and China; Acta Pharmacol Sin 2007 Oct; 28 (10): 1505–151

<sup>12</sup> Central Asia Drug Action Programme (CADAP), phase 6; Final Report; DCI-ASIE/2015/356-893; Bishkek/Brussels; March 2020

<sup>13</sup> WHO: Guidelines for the psychosocially assisted pharmacological treatment of opioid dependence; Geneva 2009 ISBN 978 92 4 154754 3; see also: Zhong, N., Yuan Y., Chen, H., Jiang, H., Du, J., Sun, H., Hao, W. and Zhao, M. (2015): Effects of a Randomized Comprehensive Psychosocial Intervention Based on Cognitive Behavioral Therapy Theory and Motivational Interviewing Techniques for Community Rehabilitation of Patients With Opioid Use Disorders in Shanghai, China; J Addict Med; 9: 322–330 ISSN: 1932-0620/15/0904-0322 DOI: 10.1097/ ADM.000000000000139; see also: Michels, I. I., Stöver, H.; Aizberg, O. and Boltaev, A. (2020): Opioid Agonist Treatment for Opioid Use Disorder patients in Central Asia; Heroin Addiction and Related Clinical Problems March 2020

*compassion fatigue while barely squeaking out a livable wage.” (Tappan 2012)*

*“Social work is one of the youngest scientific disciplines, from which it was not automatically expected to offer broader thinking about society. Regardless such positioning, social work has developed itself as a discipline according to addressing of individuals and wider environment at the same time. Social work was initially placed to address individuals and families, and accordingly communities. Due to coming globalisation, where living space has become wider than the community itself, social work was forced to operate within wider horizons and to go beyond communities boundaries. Therefore we can claim that social work nowadays has been becoming more and more global scientific discipline since, just like other more established sciences, seeks answers to global questions. Social work is therefore linked to all seventeen global goals of sustainable development.” (Hrovatic, 2020)*

*“Primitive forms of social work appeared in tribal society in the form of an institution of mutual assistance to each other. In the process of historical development, its structure and content were enriched, forms and directions, goals and functional significance expanded, the theoretical, methodological and legal foundations developed, etc. To date, social work has acquired a broad semantic meaning that does not have an unambiguous interpretation. It is seen as social phenomenon, social institution, area of scientific knowledge, social policy implementation mechanism, professional and volunteer activities, the art of overcoming life's difficulties, educational discipline, etc. There are also various approaches and models, orienting specialists in social work versatile approach to solving social problems. This provision requires systematizing theoretical provisions and creating a unified concept understanding the essence of social work. Social work is a unified system of activity structural elements, public relations, institutions with its internal logic of development and a certain integrity. All structural components of social work: object, subject, goals, types, directions, levels, methods, functions, values, principles, etc.*

*complement each other and ensure well-coordinated work on the achievement of the common goal of alleviating and preventing social tensions and establishing social harmony and ensuring stable social development of society”. (Musaeva, 2012)*

### **3. Baseline of Social Work development in Germany**

The subject of social work seems to be vague in its demarcation from other areas of social assistance, e.g. medical help, psychotherapy, penitentiary services, youth welfare, self-help. The history of social work in **Germany** is linked to industrialization and its social consequences. Initially, mass poverty was not answered socio-politically, but rather repressively. From 1850 the communal welfare for the poor was reformed, but still charity activities of the churches and private individuals constitute the social support in the 19th century. (Hering/Münchmeier, 2013)

During this time, the women's movement, which is involved in the field of social work, grew stronger. They are linked to the names *Alice Salomon, Hedwig Heyl and Marie Baum*. One of the endpoints of the activities of the women's movements is the establishment of women's social schools (the first one in Berlin in 1908). It is characteristic of these training centres that these "did not come from educational or scientific circles, ... not from universities or other institutions with social science educational goals, ... but from men and women from social practice." (Ibid., p. 60)

The introduction of the social security systems by the end of the 19<sup>th</sup> century did not solve all social problems. At the same time, new forms of communal "poor relief" emerged, albeit with legal entitlement and not free from discrimination, mainly with children and young people being the target group for "welfare". On the one hand, the background is to maintain the health of young men (suitability for military service) and the care situation of the children of working mothers. The crisis situation after World War I led to the "modernization" of welfare and its professionalization. Overdue reforms were carried out. The increase in the number of problem cases caused by the war since the beginning of the war

ensures a differentiation in aid (ibid., p.92). The War Welfare Offices provided a legal right to assistance that reduced discrimination.

During this time, the fight against mass misery and the founding of welfare organizations, as well as the development of the fields of action (youth and health care, housing and business welfare and family welfare) fall. In **Germany**, the historical epoch of the overthrow of the monarchist regime and the founding of the republic led to the establishment of new political rights. The trade unions gain strength, the heyday of the early 1920s is followed by the economic crisis and inflation. This has had an impact on social work. The development of the profession is shaped by the break-in of men into what were previously women dominated field of work. As a result, in addition to the social schools for women, schools for men are now also being established. Women are increasingly being pushed back from responsible positions. The association of social workers fought for ethical standards.

The charities succeeded in limiting the increasing state influence by establishing the principle of subsidiarity. The state influence was evident in the legalization of social work. The takeover of power by the *National Socialists/Nazis* in 1933 changed social and political life throughout Germany massively. Especially the so-called *racial hygiene* with the systematic persecution and killing of Jews, political opponents and of "anti-social forces" changed also the social work. It has been functionalized for the state in the sense of "people care". Social work became superfluous because the "people's body" was strengthened and what is degenerate and so-called "*not worth living*" has been weeded out. The education was reformed, schools partly closed and recruited lecturers who are not trained in social work. This threw the quality of training back below the level of 1920. There had been occasional resistance to this and the Jewish teachers had to emigrate abroad.

Social work was regulated in the *National Socialist Welfare*, a mass organization in which 12 Mio people had been organized. Both youth care and

health care were adapted to the needs of *National Socialist/Nazi* propaganda. Social work was increasingly *controlling* (housing care) and had been part of the *selection* (euthanasia) program. The selection also permeated youth welfare, in which the genetically healthy young people had been brought up "*in educational homes ... to become useful members of the national community, the inferior, hereditary and anti-social people who are not capable of community and are to be housed and detained in "preservation institutions"*". (P. 201)

Social work after the end of the World War II crisis - initiated by the Nazis - developed with the rebuilding of the structures of social aid for 11 Mio refugees. This is followed by the academization of training in West Germany.

Social assistance was also developing in the German Democratic Republic (GDR). Social work in the GDR had to do with almost identical challenges and problems, but took different paths, followed different concepts and was organized differently than in West Germany. Local self-government, federalism and the regional structure were replaced by a centralized structure. Welfare care and education in public institutions were under the direction of the state and the *Socialist Unity Party* (SED) was responsible. The tasks of youth work were mainly taken over by the *Free German Youth* (FDJ) founded in 1946. (Koch, 2017) Work with the elderly and people with disabilities was largely taken over by the churches (especially "Inner Mission", as the Protestant church was mainly represented in the GDR). They were also supported with funds from the partner communities in West Germany. For a long time, work with addicts was also in the hands of the churches, and it was only in the last few years of the GDR that state agencies began to take care of it. There was care for the elderly both by the state (through popular organization *people's solidarity*) and by the church. But there was no social work as professionally exercised support for various problem situations in the system of the GDR. In the "socialist society", rather the problems that led to the emergence and development of social work and social education

should be solved. Deviations from “the norm” were considered “anti-social” and were punished with strict educational measures or tougher punishments. There were also a few areas in which carers or educators were active (e.g. raising children). Only in the context of church welfare work existed forms of social work as they were also practiced in Western countries. (Nöthling 2009)

In West Germany 1961 the Federal Social Protection Act (BSHG) was passed, the 1970s were marked by the strengthening of the citizens' movements and the debate about the 'new poverty'. Especially when it comes to the amendment of the Youth Welfare Act (JWG), the costs that are to be made available to youth welfare had been heatedly disputed.

Social work in **Germany** cannot be understood exclusively as a success story. The contradictions with which social work has to deal have been identified: between help and control, state aid or private practice organization, between professional requirements and the financial framework.

What social work as a profession, not in the form of individuals, has contributed to the solution of social questions remains open.

### 3.1 Social work with people with substance use disorder in Germany

The field of addiction help (Klein, 1999; Laging, 2018) - consisting primarily of the sub-areas of addiction prevention, counselling and therapy - has gained significantly importance for social pedagogues and social workers in recent decades. This is primarily the result of a sharp increase in substance-use-related disorders in the general population, such as problematic consumption and dependence on alcohol, psychotropic medication and illicit drugs, as well as a considerable expansion of the addiction support system since the 1970s. In **Germany** the number of people with alcohol disorder is now estimated at 2.5 Mio (risky and dangerous consumption of alcohol 8-9 Mio, alcohol

dependency 1,2 Mio; 1-2 Mio with consumption of illicit substances [mainly with Cannabis and to a certain degree cocaine consumption; 160.000 heroin dependents]. <sup>[14]</sup> In addition, there are around 17 Mio addicted smokers and an unknown number of addicts in the field of non-substance-use-related addictions (e.g. gambling, problematic use of internet).

Due to the strong expansion of the addiction support system since the seventies, more and more client groups have been reached for support measures. In addition, aid measures have developed within the framework of low-threshold services, opioid substitution treatment, and after-care measures. Addictions have been a dominant social problem for a long time. *Alcoholism* as a "social disease" was already discussed in the 1890s. *Alcoholism* gained its great socio-pathological importance through the high proportion of social factors that were involved in the aetiology (Hauschildt, 1995), such as poverty, unemployment, social degradation, debt, homelessness, gender conflicts, and systematic unequal treatment of addicts. The negative effects of alcohol addiction on families, especially children, were discussed very early on.

The overall situation described above led to a state-organized *drinkers' welfare* scheme with outpatient and inpatient services even before the World War I, which was then expanded and socially legitimized during the Weimar Republic. After a catastrophic slump during the Nazi regime, it took until the end of the 1960s for addiction support to regain its clear shape in Germany. This renewed development was favoured on the one hand by the ground breaking judgment of the Federal Social Court of June 21, 1968, which recognized alcohol dependency (*alcoholism*) as a disease, on the other hand it was accelerated by the rising “*drug wave*” in the course of the 1968 student movement. It is generally recognized that the social professions have made and continue to make a strong contribution to practical addiction support/help. In

<sup>14</sup> Epidemiologischer Suchtsurvey 2018, Institut für Suchttherapie (IFT) München (epidemiological addiction

survey, Institute for Therapy Research Munich)

addition to doctors and pastors, social workers were already well represented at the beginning of professional addiction help at the beginning of the 20th century as welfare workers and are still there today as *social educators*.

Social work in outpatient addiction support has been part of the support system since the beginning of providing care for addicts/dependents. Although it is often accepted, it still seems unclear in the professional discourse what exactly social work in outpatient addiction support is and how it performs its tasks, especially when dealing with users of legal addictive substances. These activities were reconstructed as part of a qualitative work field analysis. It became clear that social work in outpatient addiction support performs complex activities both on the level of individual contact (micro level) and on the level of networking institutions (meso level) that go well beyond simple addiction history and formal mediation activities. It also became clear, however, that the formal framework does not depict these activities and provides little orientation and security here. Social work professionals need a clearer awareness of their own expertise, and social work concepts must be included more explicitly in organizational structures and quality manuals in order to secure the long-term help potential of social work for clients. (Hansjürgens, 2015)

Drug services with its areas of addiction prevention, addiction counselling, addiction therapy, and aftercare has become a classic and complex field of social work due to the increase in substance-related disorders such as abuse of alcohol, medication or illicit drugs (e.g. ecstasy, cannabis, methamphetamine), but also other addictive human behaviours (e.g. gambling, eating disorders, shopping addiction) have become significantly more important.

Social work makes a significant contribution to professional addiction support because addiction and dependencies are not only to be treated as illnesses from the perspective of the health system, but must also be accompanied by social offers such as the provision of material help,

family work, help for the homeless or community work.

Social workers in Germany - with or without addiction therapy qualifications - find a broad field of activities in addiction and drug help, work on different levels according to different concepts and address the different needs and individual problems of clients. In addition to specific specialist knowledge and methodological skills, the development of a clear personal attitude and the discussion of ethical principles in dealing with people with addictions are indispensable and therefore a basic requirement. (Manual, 2016) (DGSAS Competency profile, 2016))

In addition to the work "with the client", the network and cooperative work with social services and other professional groups involved, such as medical doctors, psychologists, pedagogues, psychotherapists, nursing staff or social scientists, is a special component of addiction support. Fixed and sustainable work alliances for the implementation of (early) prevention offers as well as further training or cooperation with job placement institutions are among the core social work areas.

Since addiction is also caused by cultural and social factors, providers and social workers, in addition to their professional role, observe the social situation in our society critically and, as far as they can, influence socio-political decisions. In addition, raising public awareness and educating the public on the subject of addiction and drugs, as well as showing possible help, is a suitable means of actively promoting support for addiction prevention and attracting additional (voluntary) multipliers.

#### **4. Baseline of Social Work development in Central Asia and China**

Western models may provide a framework for understanding social work, but different cultural assumptions and social needs may require different models. Healy denotes the difference between global and international social work as '*global . . . pertaining to or involving the whole world, whereas international can mean . . . between or among two or more nations . . .*'. (Healy, 2008: 7)

#### 4.1 Social Work Development in China

The introduction of addiction/drug treatment social work has been possible in Central Asia and China mainly through international funding and collaboration with Western professionals (see Klein, 2008; Michels & Stöver, 2012; Stöver, 2009 for reviews). However, a professional implementation of addiction/drug treatment social work remains very scarce due to a lack of funding in both training of social workers as well as development of local harm reduction initiatives. One of the barriers standing in the way of this improvement is stigma. Stigmatization of people who use drugs and their treatment as ‘undeserving citizens’ is a major issue standing in the way of funding better healthcare and low threshold services for people struggling with addiction (Bernays et al., 2010).

Although organized social work in **China** began more than 30 years ago, social work as profession did not play an explicit role in the grand scheme of “socialist society” until the end of the 20th century (Xiong & Wang, 2007) (Dominelli, 2020). Social work was not considered a necessary profession because as it is in most collectivistic societies and cultures, the neighbourhood committees in the residential districts of the factories took care of all social problems of the population including relationship and family issues, educational and school questions (see also Glazer, 2006). This is also referred to as ‘state socialism’. Needless to say, this often acted as form of ‘social control’ against ‘deviant’ and so-called ‘anti-social behavior’ as a metaphor for any individualistic positioning against the collective idea which most Asian societies are built on. In addition, there is very little record of charities and non-governmental organizations to have had ever functioned in China and that have had attempted to regulate social conflicts in an informal manner. This picture has changed

drastically in the last 30 years as the country began to implement professional accreditation of social workers through training, social work degree programs at universities and professional assessment standards (Xiong & Wang, 2007) (Sherraden et al., 2020). The history of social work education in **China** is short and started with economic reforms and modernization policy, Chinese social work education revived in the 1980s when four universities were initially approved by the Ministry of Education to establish programs on ‘Social Work and Management’—designed to train social work students. <sup>[15,16,17]</sup> With the expansion of social work schools, the China Association for Social Work Education (CASWE) has played a significant role in leading and promoting professional social work training and has had a profound influence both on formalizing the curriculum and improving the quality of social work teaching. This development is evident in China’s new commitment goal to Middle-to-long Term Development Plan for Social Work Professionals 2011–2020 (Ministry of Civil Affairs PRC, 2012). Governmental action is highly regarded as a legitimate intervening role of the state in resolving social and personal conflicts. Social work is subordinate to it by definition: *Angelina Yuen-Tsang* – one of the leading theorists of social work in **China** – defines this as a specific character of social work in **China** in that the profession is often funded inside the state agencies (Yuen-Tsang et al., 2016). This means that workers are mostly state employees who work within government-compliant bureaucracy. The voluntary sector of social work, she adds, is yet in its budding stages (Yuen-Tsang et al., 2016: 177). The curriculum of the China Association of Social Work provides an “[e]ducation model which emphasizes theory-practice integration, critical reflection, action learning, culturally sensitive practice and commitment to social

<sup>15</sup> Tong T, Keung D & Mei A (2009) Social work professionalization in China: the case of Shenzhen, China Journal of Social Work, 2:2, 85-94, DOI: 10.1080/17525090902992222

<sup>16</sup> Chan K.L., Chan C. (2005): Chinese culture, social

work education and research; Journal of International Social Work; July 1

<sup>17</sup> Bin, X. (2009) The Future For Rural Social Work In China, Rural Society, 19:4, 280-282, DOI: 10.5172/rsj.351.19.4.280



*change and development*" (Tsang et al., 2016: 178). There are new challenges for global social work standards present for mainland China. China is caught between the Scylla of universal standards and Charybdis of indigenisation seeking to adapt social work to its unique sociocultural contexts (Meng, 2021); challenges such as balancing of personal social services and social development, negotiating global standards and local realities, responding to poverty and other national social development issues and pressures towards indigenisation of social work practice. **China** continues the adaptation of imported (Western) knowledge and practice interventions within local and national sociocultural, economic and political realities. *"In perspective, it is important to observe how the interaction process between administrative social work and social work in the western sense works. Scientists and practitioners of social work, both from Germany and China, can actively participate in this process by e.g. train staff and conduct research. It is precisely at this point that I see the potential intersection between China and Germany in the context of the cooperation. When it comes to staff training for university teachers, practitioners or volunteers, the focus may be on the transfer of knowledge about methods and work techniques."* (Zhang, W., 2009; 112)

## 4.2 Social Work Development in Central Asia

### 4.2.1 Social Work Development in Kazakhstan

In the post-soviet region and specifically Central Asia, social work has even a more recent history as the professionalization of this discipline is only beginning now. Unlike China, in Central Asia reliance of social work services on a centralized government system has not been the dominant model of social work. In fact, the available few research studies show that post-Soviet legacy of denial of 'social diseases' such as addiction, HIV/AIDS has been a dominant approach in denying professional services to people of such marginalized cohorts (Tulchinsky & Varavikova, 1996). "In response to the social problems in **Kazakhstan**, various governmental and non-governmental institutions rendered

services to vulnerable people. However, before the development of nongovernmental organizations (NGOs) in the 1990s, many social issues, such as alcohol and drug dependence, were mainly responded to with a medical intervention (Fleming et al., n.d.), and little attention was given to working with people at individual and interpersonal levels." (Grebneva, 2006; p819) In Kazakhstan, the official education of social work began in early 2000s and almost simultaneously in 20 universities across the country, including three in the capital city Astana (now Nur Sultan) (Zinovieva & Naumova, 2017). Treated as a form of social communication skill and defined as a social policy strategy, the current social work curricula in **Kazakhstan** serves two main aims: 1) to teach students methods of communicating between state institutions and clientele in medical institutions, kindergartens, schools, and care for disabled people and 2) to work closely with the local offices of Labour, Employment and Social Protection of Astana city on the employment of social work course graduates (Zinovieva & Naumova, 2017). In the InBeAIDS report (InBeAids 2020, 58 ff) it was mentioned that in **Kazakhstan** when it comes to the needs of the client, more medical worker than specialists in social work are involved, the medical model of care is dominant. The role of a social worker is not stable and is often dependent on factors that are directly independent of him, such as the degree of participation in a project, the presence of a social worker's position in a project, etc., available information about social support methods. People living with HIV/AIDS (PLHIV) are generally more accessible for psychological support, since the psychologist's vacancies in medical organizations had been reduced and psychosocial support is provided. But the psychologists do not have the opportunity to engage in broader issues, such as social assistance of the client, linking with other sectors, organizing cross-sectoral work (such as with the families involved). Stigma is still existing in the society towards people living with HIV, also by the attitude of medical staff, so that PLHIV feel not confident, so it is uncomfortable speaking about their illness, diagnosis

during medical consultations. In **Kazakhstan** social work on drug addiction and HIV is emerging, but quite slowly. It is mostly done by local NGOs, organized through outreach workers, trained by these NGOs. They know about the problem from an *inside perspective*. They also provide information for NGOs, decision- and policy makers feel the situation and have knowledge in terms of regulation and further implication to policy with an enhanced understanding of the current situation. Today in **Kazakhstan** there is a difficult situation with the professionalization of social work. More than 20 universities have licenses to provide bachelor degrees in Social work. <sup>[18]</sup>

There are several factors that inhibit its development: - Even if a position of a social work specialist is present in a medical institution, the functions of this specialist are not transparent and are often performed by specialists with medical education, that's why the medical aspect of the work prevails. Another factor is the vulnerability of the profession itself due to its young history in the country. The first branches of social work were opened about 20 years ago, but have not yet received their sustainability in the country. The first doctoral program in social work, PhD, was opened in 2006 at Al-Farabi Kazakh National University in collaboration with the D. Brown School of Social Work, Missouri, USA (Grebneva, 2006). This barrier exacerbates the advocacy of social work as an academic discipline and profession. So far there are no faculties and departments of social work, it is always a related discipline with other disciplines in the department (such as pedagogic or psychology). This makes it difficult to develop separate,

specialized education tools for maintenance, for example, for working with PLHIV. The third factor, one of the most serious barriers, is the low salary of social work professionals working in governmental institutions for social support. This factor impedes the awareness of families, children, clients about the possibilities of social support from the state. In a survey conducted within the InBeAIDS study in 2018 on the experiences of both clients as well as experts working in the field, it was reflected in the respondents' answers that they did not know where their social protection centres are located in the city or they did not be aware of the civil rights of the clients and what kind of help they can receive, or the clients had been cautious to public their HIV status because they are afraid of prejudices or stigmatization. Thus, there is low confidence in specialists due to stigma (InBeAIDS, p 58).

There is a need for a law on the status of a social worker and awareness of social work. A revision and analysis of the need for specialists in social work is now on the political agenda; a *Social Code* law is in preparation which could help to enrich and revise the current main Law in Special Social Services from 2009, which is not responding to the current situation of social work mentioned above. Social work shall be adapted to the international definition (IFSW, 2000) and with the inclusion of the concepts of *case management*», « *work with people on high risk, supervision, in-depth assessment-intervention, individual family development plan* etc.; also to define a professional approach in the areas of health care the penitentiary system, probation, educational institutes. It is necessary to

<sup>18</sup> Yessimova, D. (Eurasian National University, Nur-Sultan, Kazakhstan), Abdykalykova, Zh. (National Alliance of Professional Social Workers, Almaty, Kazakhstan) (2020): Social Work in Kazakhstan. Educational work for «Improvement of social work curriculum social work at the national level»

Year: April 2017- May 2018. One of the tasks – elaboration of manuals for in-service level workers

1) The main stages of Case-management in work with families; 2) Plan to work with family; 3) Supervision in Social Work among package of 8 modules. Elaboration of

self-assessment tool to manage the content in SW education- Organization Winter School by Social Work specialty among 10 KZ universities. «Improvement of Social work curriculum at the national level» project by UNICEF and Eurasian National University. Developing and conducting trainings of home visiting for Kyzylorda region (trainings by UNICEF package modules for Home visiting. Supervision of the policlinic teams in pilot policlinics of Kyzylorda region. Developed and conducted ToT training for high medical colleagues from 8 regions of Kazakhstan (October 2017, Burabay).

consolidate a revealing approach to client needs rather than a declarative one. It is also needed to prepare programs at the level of professional development for practical social workers in the direction of assessment of psycho-social interventions for each individual case to develop an effective client support system. It is also needed to develop programs educating social workers in the field of narcology and HIV/AIDS, for (outreach) social workers of NGOs, as well as for volunteers and also for the penitentiary system. There are also needs for trainings in case management technology based on the empowerment approach. Developing of skills in assessing one`s own work is also needed and programs with focus on employment. The Ministry of Labour and Social Protection of population of the Republic of **Kazakhstan** held a virtually an *International Social Workers Online Forum* on August 12, 2020. The event was attended by about 500 people, including social workers of **Kazakhstan**, representatives of international organizations, non-governmental sector and government agencies. Experts from Russia, the USA, Israel, Bulgaria, Georgia and Kyrgyzstan made presentations. <sup>[19]</sup> There had been very interesting presentations such as “Conceptual approaches for the development of social work in Kazakhstan” by the Kazakh Vice-Minister Aukenov Muratovich; a “Presentation of the program of testing and training of social workers in 2020” by Raisova Fazylovna, the Director of the National Resource Center for Social Work); an “Overview of the main directions of development and practice of social work in Kyrgyzstan” by Orozova Rakhat (Kyrgyzstan) of the Master of Social Work and Social Management of the University of Manchester; with a Speech of Ongarbaev Anuarovich, the Vice-rector for educational and methodological work of ENU named after

L.N.Gumilyov, on the topic: “Education in the field of social work in higher education: challenges and next steps» or a speech of Dr. Timothy Hunt, Researcher at Columbia University on the topic: “Assessment of educational and training needs of social workers employees: results of Columbia University’s initial report”. Also Aysel Sultan, from the Institute of Addiction Research at the Frankfurt University of Applied Sciences in Germany, could present the international project “SOLID” (Germany, China, Kazakhstan, Kyrgyzstan, Uzbekistan) on the topic: “Strengthening the social work of NGOs. Work with HIV and drug addicts, convicts”. This indicates the fast growing development of Social Work education and the commitment of the Kazakh government on this issue. <sup>[20]</sup> The Director of the National Resource Center for Social Work, Lira Raisova, presented the testing system for social workers to improve the quality of the provision of special social services. She noted that a social worker who does not score a threshold score will receive additional training, and a low score will not be a reason for dismissal. Testing will consist of questions on the legislation of the Republic of Kazakhstan and ethics of social work, as well as practical tasks.

#### 4.2.2 Social Work Development in Kyrgyzstan

In the **Kyrgyz Republic** the establishment of a Social Work Department at the Bishkek Humanitarian University started in 1994, in 1998 on an initiative of the Association of Social Workers social work was registered as a profession by the Ministry of Labour and Social Development. (Sheripkanova, 2020). At the beginning, the history of social work in Kyrgyzstan is describing precisely the cultural and historical features of the formation of ideas of social work in Kyrgyz society. <sup>[21]</sup> *Nurgul Musaeva* describes this in her

<sup>19</sup> III online forum of social workers (III онлайн-форум соцработников); Department for the coordination of employment and social programs of the Kyzylorda region August 13, 2020

III онлайн-форум соцработников (www.gov.kz)

<sup>20</sup> Program of the *International Social Workers Online Forum*, Nur Sultan, August 2020

<sup>21</sup> See: *Umetalieva C., Topchubekova (2017): Cultural Approach to the problem – study of ethnogenesis of Kyrgyz (УМЕТАЛИЕВА-БАЯЛИЕВА ЧЫНАР ТОПЧУБЕКОВНА: КУЛЬТУРОЛОГИЧЕСКИЙ ПОДХОД К ПРОБЛЕМЕ ИЗУЧЕНИЯ ЭТНОГЕНЕЗА КЫРГЫЗОВ)*. It must be assumed that intonational-figurative thinking in humans appeared earlier than rational-logical thinking.

survey "Social work as an object of philosophical analysis", where all these issues had been reflected, the cultural and traditional features of the system of mutual assistance in the Kyrgyz society. (Musaeva, 2012) <sup>[22]</sup> *"Familiarity with the rich world experience is significant for our social work and borrowing some of his positive achievements. But, the national model of social work, which is being formed in Kyrgyzstan, can be effective only while maintaining its distinctive features, national and cultural traditions. Subjects of social works should be based on historical and spiritual heritage and use national and cultural levers in overcoming social difficulties. At the same time, the ideological guidelines of Kyrgyz thinkers can be a kind of spiritual basis for the formation of the Kyrgyz social work models."* (Musaeva, 2012)

What caused the need for the training of professional social workers, the development of social work as a type of social activity and academic discipline in **Kyrgyzstan**? It was facilitated by several factors: the intensive ideological and socio-political transformations affecting all spheres of public life, social difficulties that developed during the transition period, political and economic instability, growing social differentiation, poverty, exacerbation of migration problems caused by mass unemployment, and much more. <sup>[23]</sup> Therefore, in order to stabilize the standard of living in the

Republic of **Kyrgyzstan**, it became necessary to move from public administration to professional social work and begin to build a fundamentally new social policy, which should be based on social protection and support for people in difficult life situations. In addition to state social institutions, innovative methods and approaches of social work had been implemented NGOs. Musaeva mentioned, that on June 5, 2008 at Issyk-Kul a scientific-practical conference "Intensification of cooperation of the CIS member states in solving social problems" of mutual interest was held. The conference was attended by representatives of the CIS countries: Azerbaijan, Armenia, Belarus, Kazakhstan, Russian Federation, Tajikistan, Uzbekistan. During the conference, the geography of mutual interests of all CIS countries in solving social problems had been presented, the existing problems of all CIS countries had been reflected and international-level measures had been identified in enhancing cooperation for their solution. Much attention had also been paid to the formation of the foundations of a scientific approach to the problem of overcoming poverty. A close relationship had been established between the Bishkek State University (BSU) and foreign universities from Sweden, USA and Russia. Representatives of these universities conducted lectures, practical classes, round tables,

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*Thus, musical thinking occupies an intermediate position between the two main signaling systems, being a manifestation of the subconscious. How this is influencing the conceptualization of societal behaviour including social work might be discussed.*

<sup>22</sup> In another article Nurgul Musaeva reveals the influence of national traditions on the formation of the psychology of the Kyrgyz people. It also highlights the psychological significance of such traditions. See: Musaeva, N. (2017): National traditions as a factor of formation of the social character of the Kyrgyz people (Н.К. Мысаева, Национальные традиции как фактор формирования социального характера кыргызского народа); In: Interactive Science, 3(13) 2017,101-103 (Интерактивная наука | 3 (13) • 2017) DOI 10.21661/r-118248

<sup>23</sup> „Social work in Kyrgyz society has a rich history development. Its genesis and developmental evolution are

*closely related to the nomadic way life, social norms and principles, national and cultural values, worldview and philosophy of the people. Nomadic community and generic relations were peculiar subjects, which provided social and physical security, ethnic identification and socialization of the individual in society. Fundamentals of Social Ideas works were laid in oral folk art, socially oriented ethno-national traditions, customs and beliefs of the Kyrgyz people, which embody the principles of humanism, unity and helping each other in difficult situations. We believe that reliance on centuries-old life experience of generations, respect for cultural traditions, preservation of the system of values developed over the centuries greatly enriched the content of modern social work, would help create Kyrgyz national model of social work."* (Musaeva, 2012, Conclusion)

seminars, trainings for students and teachers of Bishkek university. [ 24 ] The organizational-practical, theoretical-methodological and legislative-legal bases of social work had been fixed, the process of training and retraining of personnel is being improved, taking into account innovative forms and methods of teaching. It is also important to mention the Bishkek-2018 International Conference "The Role of Civil Society /NGO/Self-Help and Social Work in Drug Addiction and Infectious Disease Prevention among Injecting Drug Users". [25] The results had been taken into account. By such international cooperation, the mechanism and system of social protection and social services for the population are being improved. Institutions of social protection have been established at all levels, from district to republican, in order to reduce poverty, develop social protection, and rendering assistance to vulnerable parts of the population. Social workers in **Kyrgyzstan** were first brought into statutory professional regulation in 2012, and standards of conduct and practice for the profession had been implemented. A register of professionals exists who meet the standards. It shall ensure high standards of education for social workers, including a code of ethics of social workers. There are several accredited institutions for training of social work specialists, such as the Kyrgyz National University (Bachelor's degree, 4 years); the Bishkek State (former Humanitarian) University (Bachelor's and Master's degree); the Osh State University

(Bachelor's degree, 4 years); the Zhalalabad University (Bachelor's degree, 4 years); the Pedagogical University named after I. Arabaev (Bachelor's and Master's degree); the Institute of Social Development and Entrepreneurship (Bachelor's degree, 4 years) and the International University of Kyrgyzstan (Bachelor's and Master's degree).

This has been implemented with the support of foreign partners on the development of both practical social work and the development of professionalization of social work. This influence was enormous. Various assistance had been provided. Local civil society organizations had been and are acting as implementers of professional development trainings for social workers (quality and impact of these trainings, qualifications of the trainers are questionable) and international organizations mainly act as donors and fund various social work-related trainings, but there is established also a good cooperation between Kyrgyz universities and the Ministry of Social Development in terms of the development of social work in general. [26] But there are still several challenges of social work education in **Kyrgyzstan**, such as a gap between education, training and practice application; a high turnover (low wages, low status of social work in the country); lack of professional support and guidance of social work specialists in state and municipal organizations/supervision; a lack of the third cycle of education in social work in **Kyrgyzstan**; the professional community is not commissioned to

<sup>24</sup> It is mentioned on the website of the Association of Social workers of the Kyrgyz Republic ( ASWKR) organized project such as "Training/development of social work with families and children at risk in Kyrgyzstan" from 2002 - 2009 with the support of the Swedish Agency for International Cooperation or a joint partnership with the Association of Social Workers of Denmark already in 1998 as well as the project "Development of Occupational Therapy in Kyrgyzstan" in 1999 with the support of the Russian-European-Union. Since 2009, the Kyrgyz NGO have been collaborating with the Danish NGO "European House" (Det Europiske Hus or TEH). The two NGOs are working closely together to continue integrating disadvantaged members of society and to create greater opportunities for people living in various Kyrgyz government institutions.

They did so, working both in disciplines and sectors. This included not only workshops for social workers, but also cross-sectoral workshops in which parent associations, small NGOs, local municipalities, businesses, students and, above all, social assistance recipients would participate in discussions and give their own results and share their experiences. All theoretical work has led to three social enterprises, primarily in the country, which will be based in public institutions. <http://aswkr.tilda.ws/>

<sup>25</sup> See at the website of the Association of Social workers of the Kyrgyz Republic

<sup>26</sup> See the website of the Bishkek State University about International Cooperation: *Международные связи - Бишкекский Государственный Университет им. К. Карасаева* (bhu.kg)

establish the standards <sup>[27]</sup>; absence of one centralized educational institution and an which could examine the knowledge and skills of social workers and provide licensing and further professional career development or in-service training for state and municipal social workers without specific social work education. Universities, non-profit organizations and state social institutions closely cooperate to fill the gap in social work education, training and practice application; the Social Work Alumni Association of the **Kyrgyz Republic** shall develop structured professional development courses for social workers on relevant topics <sup>[28]</sup>, as a research centre/think tank). Social work education should adapt a business model and develop a leadership for management. <sup>[29]</sup> But there also several achievements of Social Worker education in **Kyrgyzstan**, such as Guidelines on status of a social worker developed by Ministry of Labour and Social Development of the Kyrgyz Republic in December 2017 (under consideration); outsourcing of state social services (crisis shelters, training of foster families, care for children with disability etc.); an increased understanding of social work as a profession among the general public and stable wages for social workers working in state and municipal institutions (local self-governance, schools).

#### 4.2.3 Social Work Development in Tajikistan

In **Tajikistan**, the commencement of social work education also coincided to early 2000s. A social work educator from UK – *Alison McInnes* – was among the first Western academics who kicked off the development agenda for social work education in **Tajikistan** in 2008. (McInnes, A., 2012)

<sup>27</sup> There is really no professional standard for social work. This should be developed by practitioners. The state standard of higher professional education is of course available, but updates are necessary

<sup>28</sup> But this organization exists only formally, only a few events had been held, but neither the practicing social workers in the regions nor universities know anything about them.

<sup>29</sup> It is important to emphasize the role of the Association of Social Workers of the Kyrgyz Republic. Its role is enormous in the development of social work and in the opening

The sociality of the state of Tajikistan is enshrined in its Constitution. The National Development Strategy of the country for the period up to 2030 lists among the main challenges the insufficient effectiveness of social services provided to vulnerable social groups, such as persons with disabilities and senior citizens, children from poor families, mothers caring for children with disabilities, pensioners and low-income families. <sup>[30]</sup>

The process of developing social work as one of the main directions of state social policy in **Tajikistan** is taking place in the context of the formation of a market economy and the formation of a national concept of social protection. Practice shows that the staffing of this process, being a key component of it, is becoming a top priority in the sphere of science, education and training. In other words, social work as a professional activity as well as the current state policy of the country in the field of social protection of the population requires a level of qualification and competence of social workers that is appropriate to the rather difficult state and public tasks.

In this context, social work as a new profession in **Tajikistan** began to develop relatively recently - in the early 2000s, due to the need to overcome the negative effects of the civil war and the cataclysmic transformation of socio-economic relations. At the same time, in some post-Soviet countries the professionalization of social work began about 10 years earlier.

In 2002 there were more than 3,000 specialists working in social protection, many of whom had no professional training in social work (doctors, educators, psychologists, sociologists, etc.). The

of the specialty "Social work". Thanks to the initiative of this Association, in 1994 the first enrollment of students for this new profession was carried out. Keeping in touch with foreign universities, the association helped to obtain books, programs, manuals, magazines and articles on social work.

<sup>30</sup> National Development Strategy of the Republic of Tajikistan until 2030// Resolution of the Majlisi Oli of the Republic of Tajikistan, December 1, 2016, No. 636. p. 30-31.

developing social work, first and foremost, needed qualified specialists. The formation and development of social work as a profession was largely due to the work of international NGOs.

From September 2002 to February 2004, ORA International <sup>[31]</sup> organized the first six-month course in Dushanbe to train social workers. <sup>[32,33]</sup>

The courses were taught by experienced professors from universities in New Zealand, Germany and Scotland. The course consisted of theoretical (three months) and practical (three months) parts.

In 2004-2006, the project "Development of Academic Capacity in Social Work" was implemented under the Ministry of Labour and Social Protection of the Republic of **Tajikistan**. With the support of UNICEF, social work professors from Stockholm University conducted a master's course for social work teachers. <sup>[34]</sup>

From 2002-2006, within the framework of the Asian Development Bank project, more than 2,000 social workers were trained under programs: "Computerization of the Social Sector", "Personification of Social Assistance and Services", and "Banking Services for Retirees". The

implementation of this project contributed to the reform of the social sector in our country <sup>[35]</sup>.

As part of a European Union project in 2007, the organization *Hilfswerk (Austria)* created the first day-care rehabilitation centres for children with disabilities and a day-centres for the elderly. <sup>[36]</sup>

From 2008-2010, the *Area Social Service Centres for the Elderly* were opened in three districts with funding from the EU and Caritas Germany. Social workers for the social centres were trained in the framework of the projects, as there was still a shortage of social work specialists.

In 2008, the Government of the Republic of **Tajikistan** instructed the Ministries of Education and Economy to begin training social work specialists at the Tajik National University (TNU) and other educational institutions. In September 2008, the TNU Faculty of Economics began training social workers with higher education at full-time and part-time departments. <sup>[37]</sup>

In 2008, the State Institution "*Centre for Adult Education of Tajikistan*" was established under the Ministry of Labour and Social Protection of the Republic of Tajikistan. Today it has branches in more than 30 towns and districts of the republic. In 2009, the list of professions included the

<sup>31</sup> is a Christian aid organization that has been committed to children and families in need since 1981 and is active in ten countries and ensures that children are adequately fed, adequately clothed, have medical care and can go to school regularly; financially supported by the German Federal Ministry of Economic Development and International Cooperation (BMZ)

<sup>32</sup> The course program included theoretical foundations of social work practice: introduction to the specialty, general and family psychology, personality development, basics of communication, sociology, professional ethics of a social worker, record keeping in social work, human rights, children's rights, current national legislation on social work, social work with family, social work with community, social work with the disabled, social work in school, etc.

<sup>33</sup> Zevarov H., Rasulov O. (2019): Development of social work in pro-Soviet states/ Tutorial. Dushanbe

<sup>34</sup> The course consisted of 8 modules of 14 days each: "Comparative Social Policy", "Contemporary Theories of Social Work", "Methods of Research and Evaluation in Social Work", "Social Work with Family and Couples", "Social Work with People with Disabilities", "Social Work with Children in Difficult Life Situation", "Social Work with

Teenagers". Of the 35 students who attended the courses, 14 graduated with a degree from Stockholm University and laid the foundation for the development of academic education in social work

<sup>35</sup> see Zevarov H., Rasulov; *ibidem*

<sup>36</sup> Raimdodov U. (2016): Training of social workers in Tajikistan // Labour relations and social protection of the population: Mater of the republican scientific and practical conference, Dushanbe, 2006; Raimdodova, M. U. Problems and prospects of staff resources of social work in Tajikistan / M. U. Raimdodova M.U., Nevarov A.A. Text: immediate // Aktual. - Text: Immediate // Actual issues of modern pedagogy: Proceedings of the VIII International Scientific Conference. (Samara, March 2016). -Samara: LLC "Publishing house ASGARD", p. 303-306.:

<https://moluch.ru/conf/ped/archive/188/9947/> (access date: 23.06.2020)

<sup>37</sup> Currently, in the frame of Caritas Germany the project is financed by the Federal Ministry of Economic Development and International Cooperation (BMZ), professionals in the field of social work are also being trained in Khorog and Kulyab State Universities

working profession of "social worker assistant" and short-term training courses were organized. [38]

The branch of Caritas Germany Association in **Tajikistan**, within the framework of the project "Strengthening vocational training in rehabilitation at community level and structures established earlier in Tajikistan" (2018-2020) has implemented a number of activities to further professionalize social work. For example, in 2019, professional standards and curricula for social work professions for all three levels of professional education in the country were developed and approved by the relevant state authorities. [39]

In 2012, graduates of the fellowship programs of these institutions, together with TNU professors, organized the Association of Professional Social Workers of **Tajikistan**, which is a member of the International Association of Social Workers. Members of the Association developed the "Code of Ethics of a Social Worker" as well as textbooks in the national language: "Introduction to Social Work", "Social Work with the Family", and "Manual for Social Workers" [1]. The process of professionalization of social work in **Tajikistan** continues.

#### 4.2.4 Social Work Development in Uzbekistan

In **Uzbekistan**, giving help to neighbours, mercy and charity have always been intrinsic values since ancient times, as a "core of ancient national values, traditions and customs" (Ganieva/Kim, 2010). According to practical necessity for support of various groups of the population in need are described as matters of new global and regional economic challenges which apply "the methods of social assistance accumulated over centuries of social history". Ganieva describes the historical system as follows: "*Social-tribal and household help, mutual aid and protection within the kinship systems (the concept of 'kin' here standing for a variety of*

*immediate and wider family systems), the family, and the community were its basic organic forms in the historical context. The solidarity and mutual ties of the members of the family and wider family structures were naturally expressed in the kin-based organization of the population.*" The Islamic period in the history of people of Central Asia continued and diversified the participation by the clergy in social life, even in Soviet times. (Fariev, 2007). The policy of help to vulnerable groups has been carried on since gaining sovereignty, and this applies above all to low-income families, orphans and children without parental care, people with disabilities, and some others who receive certain financial subsidies and other benefits, labour migrants and their families and now also for drug dependent people. This type of social welfare is distributed by the district-based social security departments ("sobès") and institutions of local government, the "*mahalla's*". Social work as an academic discipline is a systematized approach based on scientific foundations, taught in accordance with the specialization of the institution. Social work students get to master various theoretical knowledge and techniques enabling the interaction between social worker and client, between people in need and the community. The system of education in this area must be a combination of theoretical and practical elements. The main goal of education is acquisition of knowledge, practical skills and techniques corresponding to basic requirements of training of the specialist in social work. Within a short period of time after beginning the process of institutionalization of social work in **Uzbekistan**, within the system of higher education one can see the trend of expansion of the network of universities, colleges, and specialized re-training courses engaged in training of personnel for the social sphere.

In all Central countries, social work and training for social work are relatively new phenomena of

<sup>38</sup> Nationwide Classifier of Occupations, Dushanbe, 2013

<sup>39</sup> With the support of the Open Society Institute – Assistance Foundation Branch in Tajikistan, grants were implemented under the fellowship program to train social

workers at Washington University and Columbia University (USA), Oxford University, the Graduate School of Social and Economic Sciences (UK) and a large pool of social work professionals (over 50 people) was trained



social development, which require a new way of dealing with social problems of a community in the new development. This is all the more true when dealing with problems related to the consumption of psychoactive substances, because two behavioural mechanisms still dominate these developments: on the one hand, the users are stigmatized insofar as they are using illicit substances - even if their use in Central Asia has a long history. On the other hand there are applications, especially for opiates, and medical treatment systems and, at most, psychotherapeutic interventions dominate. Social work is largely not yet established in this field and there are no specific application standards, fields of work or training curricula. That will be the exciting future task in the development of social work.

### **5. Conclusion: The key issues for Social Work with drugs users and people living with HIV and AIDS in Central Asia and China**

Today in Central Asian countries, such as Kazakhstan, the Kyrgyz Republic, Uzbekistan and Tajikistan<sup>[40]</sup>, but also in PR China there is a difficult situation regarding the professionalization of social work as a profession with the focus on working with dependent people. There are several factors that inhibit its development:

- 1) even if the vacancy of a social work specialist is present in a medical institution, the functions of a specialist is not transparent, it is often performed by specialists with medical education. Therefore, the medical aspect of the work with drug users and people living with HIV/AIDS and drug addiction prevails.
- 2) the vulnerability of the profession itself due to its young history in these regions. The first

branches of social work were opened about 20 - 30 years ago, but have not yet received their sustainability in the countries. No doctoral programs in social work are existing.<sup>[41]</sup> This barrier exacerbates the advocacy of social work as an academic discipline and profession<sup>[42]</sup>. So far there are no or few faculties and departments of social work in Central Asia and none for social work with drug users, it is always a related discipline with other disciplines in the pedagogical or psychological departments. This makes it difficult to develop separate, specialized technologies for maintenance, for example, for working with drug users and PLHIV.

3) One of the most serious barriers, is the low salary of social work professionals working in governmental institutions for social support. This factor impedes the awareness of families, children, clients about the possibilities of social support from the state. These people are shy of their status with drug use and HIV and don't apply because they are afraid of prejudices or stigmatization. Thus, there is low confidence in specialists due to stigma.

What can social work do? A social worker can provide the following services to people from key populations:

1. Implementation of case management. The activities of social workers are carried out on the basis of case management. Depending on the needs of key groups and their specific needs, a social support program should be developed. The result of social support is to improve the quality of life of clients. Social support involves compliance with such principles of work as: an individual approach, comprehensiveness,

<sup>40</sup> Prevention of infectious diseases and treatment of HIV / AIDS and hepatitis among injecting drug users in Central Asia and the contribution of social work to the services for drug using people (InBeAIDS) Frankfurt am Main/Germany, Bishkek/Kyrgyz Republic March 2020

<sup>41</sup> With regard to doctoral studies, there is an initiative for developing these opportunities to defend PhD theses. 3 universities of the Kyrgyz Republic have begun to work on the opening of dissertation councils for doctoral studies. The Government approved regulations for awarding PhD qualifications

More details

<https://bilim.akipress.org/ru/news:1668827/?f=cp;>

<https://bilim.akipress.org/ru/news:1668827?place=share-fab>

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Об одобрении Национальной рамки квалификаций <https://www.gov.kg/ru/npa/s/2709>

<sup>42</sup> That's why the SOLID exceed program wants to change this situation.

confidentiality, voluntariness, tolerance and inter-disciplinarity.

2. An interdisciplinary approach and teamwork helps to increase the efficiency and quality of the services provided. This approach defines emergency intervention, diagnostics and discussion of the case, the coordination of the actions of experts, responsibility and activity aimed at solving problems and the effectiveness of work algorithms. Much attention is paid to establishing contact between specialists and clients.

3. According to social and outreach workers, the technology of social work with key population groups should be focused on personality change and reducing the degree of behavioural risks.

4. The fight against stigma. Social workers can play an important role in changing public opinion, creating tolerance for HIV-positive people in society, as well as mobilizing and activating people involved in the problem. This can be carried out with the help of high quality information campaigns targeted at different target groups, involving the media, demonstrating good practices in integrating people living with HIV, individual and group social work to develop people's potential, etc.

5. The protection of the rights and interests of citizens is an important area, which can be manifested in different ways: developing policies, lobbying, raising public awareness, public education, conducting campaigns, creating alliances, etc. Social workers provide advisory assistance to clients in case of loss of documents, restoration and paperwork, playing an important connecting and intermediary function between the client and the relevant authorities.

<sup>43</sup> with Bishkek State University, Department of Social Work and Practical Psychology (Bishkek, Kyrgyzstan); Eurasian National University Gumilyov, Department of Sociology (Astana / Nur-Sultan, Kazakhstan); the Bukhara State Medical Institute in cooperation with the Human Research and Development Center (Inson Tadqiqoti va Taraqqiyoti Markazi) (Bukhara, Uzbekistan) and the Mental Health Centre in cooperation with Jiao Tong University School of Medicine (Shanghai, PR China

<sup>44</sup> At the Shanghai East China University of Science and Technology (ECUST), Faculty of Social Work at the Sociological Institute, it was held an international conference

6. The provision of social services and humanitarian assistance (providing material assistance, providing services of crisis centres, shelters for victims of violence), assistance in finding employment (vocational training, retraining and advanced training of unemployed citizens, providing information about employment opportunities, employment).

## **6. The new programme: Social work and strengthening of NGOs in development cooperation to treat drug addiction**

In the course of CADAP VI, contacts were made to 3 Central Asian universities that train social workers (as being done at the Frankfurt University). Existing contacts have been expanded into an university partnership with several universities in Central Asia and China, <sup>[43]</sup> with a jointly developed research program on the influence of social work on the prevention and treatment of drug / opioid addiction as well as the development of study programs / training curricula for social work with drug-consuming and addicted people (who also live with HIV/AIDS, and/or hepatitis) and the exchange of German and Central Asian scientists and students for research stays in Frankfurt / M. and Central Asia. The English skills of the local scientists are also to be promoted, since communication so far has been carried out almost exclusively in Russian and European and international research literature in English is only communicated incompletely. It is also being considered to implement the program in cooperation with the Shanghai Mental Health Center and The Shanghai Jiaotong University. <sup>[44]</sup>

on social work in 2007 with representatives of the Frankfurt University of Applied Sciences.[Michels I.I. (2007): International Conference on " Knowledge, Policy and Service: A Dialogue Between East and West on Social Work" organized by the East China University of Science & Technology und der Shanghai Normal University on 28th and 29th of October in Shanghai. Internal Report]. Dr. Michels (at that time as visiting professor, on leave by the Federal Ministry of Health, Berlin) conducted as well a series of lectures in 2007 as a visiting professor on social work with drug users. "I discussed the role of psycho-social support in treatment of (drug) addiction and gave a brief

The program is also part of the “EU - Central Asia Strategy” (the European Union has released an update, moving from a “strategy for a new partnership” to “new opportunities for a stronger partnership.” published in July 2019 and supported by the German Federal Government.

The objectives of the Sustainable Development Goals (SDG 2030) should serve as a benchmark in the planned program, in particular

*Goal: 3 Health and Wellbeing*

*“Health is the goal, prerequisite and result of sustainable development, its promotion is a requirement of humanity and part of responsible government policy (...). The challenges in the health sector are still huge.”*

In Central Asia, the prevalence of opioid use is twice as high as in Europe, in China there are almost up to 3-5 million opioid users, still a small number in relation to the total population, but an enormous problem for the healthcare system. There are too few offers for help. The staff is qualified and highly motivated, but consists almost entirely of medical doctors - social work as a central component of the services (in Germany) is neither offered at university education nor in practice. The well-being of those affected also depends on the offers of help and the reduction of stigmatization and marginalization.

*Goal 4: quality education*

*“Education is a human right - it empowers people to improve their political, social, cultural, and economic situation.”* In post-Soviet Central Asia, as well as in China, high-quality education is an important socio-political concern. However, there are too few specific training opportunities for the prevention and treatment of addictions.

*Goal 5: Gender equality*

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*overview on the counseling process, the range of social support systems and methods. I underlined the importance of vocational training for the process of recovery and the necessary involvement of the society. The students had been very much interested in learning about these experiences and to adapt them to the specific cultural and social conditions of the Chinese Society. We discussed all these issues and the students asked a lot of questions about the European experiences and how to*

Gender equality and self-determination for all women and girls are a principle of German development policy. In Central Asia and China, women have equal rights under the constitutions, but still not in social reality, they earn less, they mostly have a double burden on family and work and only play a “minority role” at the political level. Medical professions and social work (except in Tajikistan) have a “female” dominance, but the management structures are male.

*Goal: 10 Reduce inequality within and between countries*

Social and economic inequality is a major challenge for the development of stability and well-being. Addiction is (also) a phenomenon of social inequalities and poverty, i.e. the proportion of people with social and economic problems among addicted people is disproportionately high.

*Goal 16: Promote peaceful and inclusive societies for sustainable development, give everyone access to justice and build effective, accountable and inclusive institutions at all levels.*

Drug addiction had been and is still seen in both Central Asia and the People's Republic of China more as a “social deviation” problem than as a treatable disease; existing drug laws mean that many of those affected have to face (often long) prison terms and that the police and judiciary are still in the *learning phase* of a better cooperation with health and social services. This and the registration system promote the social exclusion of those affected.

The program is compatible with the “*Central Asian Drug Action Program*” (CADAP), which the EU will implement also in a planned 7th phase from 2020 to 2024. It is about “the establishment of functional and effective treatment

*implement these experiences into the Chinese setting. The lectures broadend the intercultural exchange of experiences and models of the role and work of social workers in modern societies.”* Michels I.I. (2007): “*Models of social work with drug users in Europe*”. Lectures at the East China University of Science & Technology (ECUST) Department of Social Work Institute of Applied Sociology in cooperation with Fan Zhihai Fan and Dr. Xuesong He; Internal Report, Shanghai June 1st

and harm reduction programs based on EU and international standards (which) are essential to provide the best and cutting-edge health responses, programs and models to CA countries' populations. This output will focus on strengthening demand reduction models on the basis of best EU and international practices for harm reduction, rehabilitation and social reintegration, and therapeutic communities." (Annual Action Document 2019 for the program in favour of the Central Asia region; July 2019). It is of central importance to support the training of social work in the Central Asian countries, which plays a central role in Europe and especially in Germany in the prevention and treatment of drug addiction and its health and social consequences. But social work as a means of reducing these problems is still in its infancy both in Central Asia and in China. Adequate job descriptions and job offers are still scarce, although the positive role of social work is now increasingly recognized at socio-political level.<sup>[45]</sup>

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### **Conflict of interest**

The author(s) declare that they have no competing interests.

### **Ethics**

Not applicable

### **References**

- [1] Altice, F. L., Azbel, L., Stone, J., Brooks-Pollock, E., Smyrnov, P., Dvoriak, S., Taxman, F. S., El-Bassel, N., Martin, N. K., Booth, R., Stöver, H., Dolan, K., & Vickerman, P. (2016). The perfect storm: incarceration and the high-risk environment perpetuating transmission of HIV, hepatitis C virus, and tuberculosis in Eastern Europe and Central Asia. *The Lancet*, 388(10050), 1228–1248. [https://doi.org/10.1016/S0140-6736\(16\)30856-X](https://doi.org/10.1016/S0140-6736(16)30856-X)
- [2] Azbel, L., Rozanova, J., Michels, I., Altice, F. L., & Stöver, H. (2017). A qualitative assessment of an abstinence-oriented therapeutic community for prisoners with substance use disorders in Kyrgyzstan. *Harm Reduction Journal*, 14(1), 1–9. <https://doi.org/10.1186/s12954-017-0168-8>
- [3] Azizov, U. (2017). Regional integration in Central Asia: From knowing-that to knowing-how. *Journal of Eurasian Studies*, 8(2), 123–135. <https://doi.org/10.1016/j.euras.2017.02.002>
- Barnard, A. (2008). Values, Ethics and Professionalization: a Social Work History. In *The Value Base of Social Work and Social Care* (pp. 6–24). Bernays, S., Rhodes, T., & Jankovic Terzić, K. (2010). "You should be grateful to have medicines": Continued dependence, altering stigma and the HIV treatment experience in Serbia. *AIDS Care - Psychological and Socio-Medical Aspects of AIDS/HIV*, 22(1), 14–20. <https://doi.org/10.1080/09540120903499220>
- [4] Borrmann St., Michel-Schwartz, B., Pankofer, S., Sagebiel, J., Spatscheck, C. (ed) (2016): *Die Wissenschaft Soziale Arbeit im Diskurs Auseinandersetzungen mit den theoriebildenden Grundlagen Sozialer Arbeit; Theorie, Forschung und Praxis der Sozialen Arbeit* (The science of social work in discourse Discourse on the theoretical foundations of social work; Theory, research and practice of social work)

<sup>45</sup> The Frankfurt University of Applied Sciences has accumulated decades of competence in the training of social work in Department 4 "Social Work and Health" (Bachelor, also a course "Social Work: transnational" as well as the master's program "Addiction Therapy and Social Management in Addiction Help" and in practical research, in particular through numerous research projects by the project manager Prof. Dr. Stöver and the research stay of Dr. Ingo Ilja Michels from 2006 and 2008 in the PR China to

accompany and support the establishment of an opiate substitution program including social work (especially with a pilot character in Shanghai). See: Michels I.I. (2007): *"Models of social work with drug users in Europe"*. Lectures at the East China University of Science & Technology (ECUST) Department of Social Work Institute of Applied Sociology in cooperation with Fan Zhihai Fan and Dr. Xuesong He; Internal Report, Shanghai June 1st

- [5] Bobrova, N., Rughnikov, U., Neifeld, E., Rhodes, T., Alcorn, R., Kirichenko, S., & Power, R. (2008). Challenges in providing drug user treatment services in Russia: Providers' views. *Substance Use and Misuse*, 43(12–13), 1770–1784. <https://doi.org/10.1080/10826080802289291>
- Bobrova, N., Sarang, A., Stuikyte, R., & Lezhentsev, K. (2007). Obstacles in provision of anti-retroviral treatment to drug users in Central and Eastern Europe and Central Asia: A regional overview. *International Journal of Drug Policy*, 18(4), 313–318. <https://doi.org/10.1016/j.drugpo.2007.01.015>
- [6] Brocato, J., & Wagner, E. F. (2003). Harm Reduction: A social work practice model and social justice agenda. *Health and Social Work*, 28(2), 117–125.
- Burke, A. C., & Clapp, J. D. (1997). Ideology and Social Work Practice in Substance Abuse Settings. *Social Work*, 42(6), 552–562. <http://www.ncbi.nlm.nih.gov/pubmed/9414633>
- [7] Cisaltina, M., & Dinis, S. N. (2013). Social Work Approaches for Substance-Use Treatment. *The International Journal of Health, Wellness and Society*, 2(2), 23–35
- [8] Deutsche Gesellschaft für Soziale Arbeit in der Suchthilfe DGSAS (2016): Kompetenzprofil der Sozialen Arbeit in der Suchthilfe und Suchtprävention; Münster (German Society for Social Work in Addiction Help DGSAS (2016): Competence Profile of Social Work in Addiction Help and Addiction Prevention; Muenster)
- [9] Demerath, L., & Alasuutari, P. (1996). Researching culture: Qualitative method and cultural studies. In *Contemporary Sociology* (1st ed., Vol. 25). SAGE Publication Ltd. <https://doi.org/10.2307/2077614>
- Dickson-Swift, V., James, E. L., & Liamputtong, P. (2008). *Undertaking sensitive research in the health and social sciences: Managing boundaries, emotions, and risks*. Cambridge University Press. [www.cambridge.org](http://www.cambridge.org)
- [10] DiNitto, D. M., & McNeece, C. A. (2008). Addictions and social work practice. In *Social Work: Issues and 19 Opportunities in a Challenging Profession* (pp. 171–192). <http://ovidsp.ovid.com/ovidweb.cgi?T=JS&PAGE=reference&D=psyc6&NEWS=N&AN=2008-03930-008>
- [11] Dole, V. P., & Nyswander, M. (1965). A Medical Treatment for Diacetylmorphine (Heroin) Addiction: A Clinical Trial With Methadone Hydrochloride. *JAMA: The Journal of the American Medical Association*, 193(8), 646–650. <https://doi.org/10.1001/jama.1965.03090080008002>
- [12] Domes, M., Sagebiel, J. (2016): Theorien als Medium der Identitätsbildung; In: *Die Wissenschaft Soziale Arbeit im Diskurs Auseinandersetzungen mit den theoriebildenden Grundlagen Sozialer Arbeit; Theorie, Forschung und Praxis der Sozialen Arbeit* (Theories as a medium of identity formation; In: *The Science of Social Work in Discourse* Discourse on the theoretical foundations of social work; Theory, Research and Practice of Social Work)
- [13] Dominelli, L. (2020). Personal reflections on 30 years of social work development in China. *China Journal of Social Work*, 1–8. <https://doi.org/10.1080/17525098.2020.1756209>
- Glazer, S. (2006). Social support across cultures. *International Journal of Intercultural Relations*, 30(5), 605–622. <https://doi.org/10.1016/j.ijintrel.2005.01.013>
- Gray, M., & Coates, J. (2010). "Indigenization" and knowledge development: Extending the debate. *International Social Work*, 53(5), 613–627. <https://doi.org/10.1177/0020872810372160>
- Healy, L. M. (2008). Exploring the history of social work as a human rights profession. *International Social Work*, 51(6), 735–748. <https://doi.org/10.1177/0020872808095247>
- [14] Farfiyev, B. (2009). Historical roots of development of social help in the Central Asia. *Social Sciences In Uzbekistan*, 1, pp. 86-91
- [15] Grebneva, I. (2006): Social work development in Kazakhstan. A ladder to a healthier nation; *International Social Work* 49(6): 819–823
- [16] Hansjürgens, R. (2015): Soziale Arbeit in der ambulanten Suchthilfe. In: *Konturen: Schwerpunktthema Ambulante Suchthilfe (Social work in outpatient addiction support. In: Contours: Focus on outpatient addiction help)*
- [17] Hauschildt, E. (1995): "Auf den richtigen Weg zwingen..." *Trinkerfürsorge 1922 – 1945 ("Forcing them on the right path ..." Drinker Care 1922 – 1945)*
- [18] Healy, L.M. (2001) *International Social Work: Professional Action in an Interdependent World*. Oxford: Oxford University Press
- [19] Hering, S., Münchmeier R. (2013): *Geschichte der Sozialen Arbeit*. Weinheim und Basel. ISBN 978-3-7799-14 (2013)46-4 (History of Social Work. Weinheim and Basel. ISBN 978-3-7799-14 (2013) 46-4)
- [20] Holleran-Steiker, L. (2016). *Youth and substance use: Prevention, intervention, and recovery*. Lyceum Books, Inc.
- [21] Hrovatic, D. (2020): Social work between the social policy and practice. The Slovenian case of social work theory for practice; in: *Social Work in the XXI century: Domestic and International experience*; Bishkek State University publication (СОЦИАЛЬНАЯ РАБОТА В XXI ВЕКЕ: ОТЕЧЕСТВЕННЫЙ И
- [22] МЕЖДУНАРОДНЫЙ ОПЫТ СОЦИАЛЬНАЯ РАБОТА В XXI ВЕКЕ: ОТЕЧЕСТВЕННЫЙ И
- [23] МЕЖДУНАРОДНЫЙ ОПЫТ; Бишкек) (СОЦИАЛДЫК КЫЗМАТ XXI КЫЛЫМДА: АТА-МЕКЕНДИК ЖАНА ЭЛ АРАЛЫК ТАЖРЫЙБА; Бишкек)
- [24] InBeAIDS. (2020). Prevention of infectious diseases and treatment of HIV/AIDS and hepatitis among injecting drug users in Central Asia and the contribution of social work to the services for

- drug using people (InBeAIDS). Report: Frankfurt am Main and Bishkek. International Network of People Who Use Drugs (INPUD) and Asian Network of People Who Use Drugs (ANPUD). (2019). Words matter! Language statement and reference guide. <https://doi.org/10.1016/j.drugalcdep.2006.10.014>.INPUD
- [25] International Federation of Social Workers (IFSW) (2000) 'Definition of Social Work'. Available online at: <http://www.ifsw.org>
- [26] Jolley, E., Rhodes, T., Platt, L., Hope, V., Latypov, A., Donoghoe, M., & Wilson, D. (2012). HIV among people who inject drugs in Central and Eastern Europe and Central Asia: A systematic review with implications for policy. *BMJ Open*, 2(5). <https://doi.org/10.1136/bmjopen-2012-001465>
- Klein, A. (2008). *Drugs and the World*. Reaktion Books
- [27] Klein, M. (1999). Praxisfeld Suchthilfe [The practice of addiction treatment]. In: Badry, E., Buchka, M. & Knapp, R. (ed). *Pädagogik. Grundlagen und Arbeitsfelder*. Neuwied: Luchterhand, 495 - 505.
- [28] Koch, M. (2017): Unterschiede zwischen der sozialen Arbeit in der BRD und der DDR; München <https://www.grin.com/documents/436094> (Differences between social work in the FRG and the GDR; Munich <https://www.grin.com/documents/436094>)
- [29] Laging, M. (2018): Soziale Arbeit in der Suchthilfe: Grundlagen - Konzepte - Methoden (Grundwissen Soziale Arbeit, Band 28) (Social work in addiction support: Basics - Concepts - Methods (Basic Knowledge of Social Work, Volume 28)
- [30] Manual of the postgraduate master's course Addiction therapy and social management in addiction support Master of Arts (M.A.)(2016): Frankfurt University of Applied Sciences
- [31] Meng, Q., Gray, M., Bradt, L. (2021): A critical review of Chinese and international social work: Walking a tightrope between local and global standards; In: *International Journal of Social Work*, 8 January [doi.org/10.1177/0020872820963424](https://doi.org/10.1177/0020872820963424)
- [32] McInnes, A. (2012). Why should they listen to me? Developing social work education and social work in Tajikistan. *International Social Work*, 56(5), 674–689. <https://doi.org/10.1177/0020872812440716>
- [33] Michels, I. I., Keizer, B., Trautmann, F., Stöver, H., & Robelló, E. (2017). Improvement of Treatment of Drug use Disorders in Central Asia the contribution of the EU Central Asia Drug Action Programme (CADAP). *Journal of Addiction Medicine and Therapy*, 5(1), 1–14.
- [34] Michels, I. I., & Stöver, H. (2012). Harm reduction - From a conceptual framework to practical experience: The example of Germany. *Substance Use and Misuse*, 47(8–9), 910–922. <https://doi.org/10.3109/10826084.2012.663281>
- [35] Michels, I. I., Stöver, H., Aizberg, O. and Bolt-aev, A. (2020): Opioid Agonist Treatment for Opioid Use Disorder patients in Central Asia; Heroin Addiction and Related Clinical Problems, March
- [36] Ministry of Labour and Social Protection of population of the Republic of Kazakhstan. (2020): virtually *International Social Workers Online Forum*, August 12, Nur Sultan
- [37] Ministry of Civil Affairs PRC. (2012). Shehuigongzuo zhuanye rencai duiwu jianshe zhongzhangqi guihua 20 (2011–2020nian) [The Middle-to-long Term Development Plan for Social Work Professionals 2011 – 2020]. <http://jnjd.mca.gov.cn/article/zyjd/zczx/201301/20130100406268.shtml>
- [38] Museva N. (2012): Influence of International experience on the development of Social work in Kyrgyzstan; Bishkek (Мусаева Н. (2012): ВЛИЯНИЕ МЕЖДУНАРОДНОГО ОПЫТА НА РАЗВИТИЕ СОЦИАЛЬНОЙ РАБОТЫ В КЫРГЫЗСТАНЕ; г. Бишкек)
- [39] Musaeva N. (2012): Social Work as an object of philosophical analysis (Социальная работа как объект философского анализа). Dissertation published on portal of the National Electronic Library of the National Academy of Sciences of the Kyrgyz Republic, Institute of Philosophy and political and legal studies; Bishkek
- [40] Nikku, B. R. (2015). *International Social Work*. In *International Encyclopedia of the Social & Behavioural Sciences: Second Edition (Second Edi, Vol. 12)*. Elsevier. <https://doi.org/10.1016/B978-0-08-097086-8.28048-3>
- [41] Nöthling C. (2009): Soziale Arbeit und Soziale Bewegungen in der DDR; in: Leonie Wagner: *Soziale Arbeit und Soziale Bewegungen*, 207-230 (Social work and social movements in the GDR; in: Leonie Wagner: *Social Work and Social Movements*)
- [42] Room, R. (2005). Stigma, social inequality and alcohol and drug use. *Drug and Alcohol Review*, 24(2), 143–155. <https://doi.org/10.1080/09595230500102434>
- Schwartz, S. H. (1994). Beyond individualism/collectivism: {New} cultural dimensions of values. In *Individualism and collectivism: {Theory}, method, and applications* (pp. 85–119). <https://doi.org/10.1017/CBO9781107415324.004>
- Shaw, I. (2008). Ethics and the practice of qualitative research. *Qualitative Social Work*, 7(4), 400–414. <https://doi.org/10.1177/1473325008097137>
- [43] Sagebiel, J. (2016): Soziale Arbeit als normative Handlungstheorie. Was ist Soziale Arbeit? Was sind soziale Probleme? In: *Konzepte der Sozialpädagogik; sozialpädagogische Impulse*; 4/2016; S.31-33 (Social work as a normative theory of action. What is social work? What are social problems? In: *Concepts of Social*

- Pedagogy; socio-educational impulses; 4/2016; P.31-33)
- [44] Sagebiel, J. (2017): Macht und Ohnmacht der Sozialen Arbeit. In: Domes, Michael/Eming, Knut (Hg.): Soziale Arbeit - Perspektiven einer selbstbewussten Disziplin und Profession; S. 63-82 (Power and impotence of social work. In: Domes, Michael / Eming, Knut (ed.): Social work - perspectives of a self-confident discipline and profession; Pp. 63-82)
- [45] Sherraden, M., Yuen-Tsang, A. W. K., Wang, S., Khinduka, S., Zou, L., Deng, S., Gao, J., Ku, B. H. B., Huang, J., Sherraden, M., & Morrow-Howell, N. (2020). Re-emergence of social work in modern China: A perspective by Chinese and U.S. partners. *China Journal of Social Work*, 13(1), 40–54. <https://doi.org/10.1080/17525098.2020.1732534>
- 4 Stöver, H. (2009). South Caucasus anti-drug (SCAD) programme (Phase V). <https://doi.org/10.2174/138920312803582960>
- [46] Sheripkanova, A. (Association of Social Work Alumni in the Kyrgyz Republic) (2020): Social work education in Kyrgyzstan: challenges and achievements
- [47] Stöver, H., Deimel, D., & Hösselbarth, S. (2017). Social work and support of people who use drugs in Germany. In *Getting to Zero: Global Social Work Responds to HIV* (pp. 101–126).
- [48] Stöver, H., Jamin, D., Michels, I. I., Knorr, B., Keppler, K., & Deimel, D. (2019). Opioid substitution therapy for people living in German prisons - inequality compared with civic sector. *Harm Reduction Journal*, 16(1), 1–9. <https://doi.org/10.1186/s12954-019-0340-4>
- [49] Stöver, H. (2012): Konzepte und Arbeitsmethoden der Sozialen Arbeit in der Suchthilfe. In: *Suchttherapie* 13 (04), S. 162–166 (Concepts and working methods of social work in addiction help. In: *Suchttherapie* 13 (04), pp. 162–166)
- [50] Sultan, A., & Mažeikienė, N. (2019). Living with HIV in post-Soviet states: Rejecting individual stigma through social activism. *International Social Work*. <https://doi.org/10.1177/0020872819858746>
- [51] Tappan C. (2012): Social Work on the Silk Road. *The New Social Worker*, Vol. 19, No. 2
- [52] Thombs, D. L., & Osborn, C. J. (2013). Introduction to addictive behaviors (4th ed.). In *Introduction to addictive behaviors* (4th ed.). Guilford Press.
- [53] Tulchinsky, T. H., & Varavikova, E. A. (1996). Addressing the epidemiologic transition in the former Soviet Union: Strategies for health system and public health reform in Russia. *American Journal of Public Health*, 86(3), 313–320. <https://doi.org/10.2105/AJPH.86.3.313>
- UN Joint Programme on HIV/AIDS (UNAIDS). (2014). The gap report. United Nations Human Rights Declaration, 2 (1948). [https://www.ohchr.org/EN/UDHR/Documents/UDHR\\_Translations/eng.pdf](https://www.ohchr.org/EN/UDHR/Documents/UDHR_Translations/eng.pdf)
- United Nations Department of Economic and Social Affairs. (2020). Achieving SDGs in the wake of COVID-19: Scenarios for policymakers. In *Sustainable Development Outlook*. <https://doi.org/10.18356/7a3ee84a-en>
- 21 UNODC. (2010). Accessibility of HIV Prevention, Treatment and Care Services for People who Use Drugs and Incarcerated People in Azerbaijan, Kazakhstan, Kyrgyzstan, Tajikistan, Turkmenistan and Uzbekistan: Legislative and policy analysis and recommendations for reform.
- [54] Xu, H., Zeng, Y., & Anderson, A. F. (2005). Chinese NGOs in action against HIV/AIDS. *Cell Research*, 15(11–12), 914–918. <https://doi.org/10.1038/sj.cr.7290368>
- Yuan, Y., He, X., & Duan, W. (2020). A reflection on the current China social work education in the combat with COVID-19. *Social Work Education*, 00(00), 1–8. <https://doi.org/10.1080/02615479.2020.1821637>
- [55] Xiong, Y. & Wang, S.(2007) : Development of Social Work Education in China in the Context of New Policy Initiatives: Issues and Challenges; *Social Work Education* Vol. 26, No. 6, September 2007, pp. 560–572
- [56] Yergaliyeva A. (2019): Kazakh social workers to start adaptation course for children returned from Iraq; in: *International*, 28 November; reprint in *Astana Times* from 16 January 2021
- [57] Yuen-Tsang, A., Ku, B., & Ku, B. (2016). A Journey of a Thousand Miles begins with One Step: The Development of Culturally Relevant Social Work Education and Fieldwork Practice in China. In *Indigenous Social Work around the World: Towards Culturally Relevant Education and Practice* (pp. 205–218). Routledge. <https://doi.org/10.4324/9781315588360-25>
- [58] Zinovieva, V. I., & Naumova, N. I. (2017). Development of the specialty “Social Work” in the educational system of Kazakhstan. *Vestnik Tomskogo Gosudarstvennogo Universiteta*, 425, 74–77. <https://doi.org/10.17223/15617793/425/9>
- [59] Zhang, W. (2009): Soziale Arbeit in China – Einführung in die Rahmenbedingungen, die Struktur und den Stand; *Forum für Erziehungshilfen* 109-112 (ISSN 0947-8957) (Social work in China - introduction to the framework, structure and status; *Forum für Educational Aids* 109-112 (ISSN 0947-8957)

