Update on the context and situation of children

**Socio-economic outlook**

Economic growth in Botswana slowed in 2022 but remained strong. After achieving 11.4 percent growth in 2021, the economy expanded by 4.3 percent in 2022 (IMF Article IV consultation, 2022). However, the latest economic growth projections indicate that the current path is insufficient to meet the policy targets of Vision 2036. Furthermore, the economy has not been able to create sufficient jobs for young people and remains undiversified, thus unable to absorb the approximately 35,000 annual labour market entrants.

Despite Botswana’s economic and political stability, in 2022, inflation breached the medium-term policy range of 3-6 per cent, driving spikes in cost of living and increasing vulnerabilities, especially in rural areas. Supply chain disruptions and rising global fuel, food and fertilizer prices due to the Russia-Ukraine conflict exacerbated vulnerabilities and it is expected that households will need to cut down on essential spending on food and basic services which in turn may increase malnutrition.

**Key Issues and Challenges**

Despite the economic success, poverty remains a challenge, with national monetary poverty at 16.3 per cent in 2015/16[1]. Poverty in Botswana has strong geographical and gender disparities with rural areas experiencing high poverty levels at 24.2 per cent in 2015/16 with urban villages at 13.4 per cent while cities/towns were at 9.4 per cent. Female headed households at 55 per cent poverty incidence, were on average 10 percentage point higher that male headed households. Multidimensional poverty affects around half of Batswana children and up to 68 per cent in rural areas. These inequities result in disparities in child survival, malnutrition and vaccination rates in the first decade. Neonatal, infant, under-five and maternal mortality rates have stagnated over the last thirty years, with neonatal deaths accounting for 70 per cent of under-five mortality. While 2022 saw health sector priorities being rebalanced following the pandemic and the successful vaccine roll-out, full routine immunization coverage rates for children aged 0-12 months continue to lag behind and stand at 40.8 per cent in 2022. In October 2022, a polio outbreak was declared in Botswana following detection of vaccine-derived polio virus in a wastewater plant.

Considering its upper middle-income status, Botswana continues to be challenged by high malnutrition rates with a secondary analysis of data from 2016 indicating rates of 5.1 per cent, 19.8 per cent and 3.5 per cent, respectively, for wasting, stunting and overweight in children under five.

The achievement of silver tier status on the path to elimination of mother to child transmission was a significant milestone achieved in 2021, yet significant reductions in staffing levels in the corresponding programme within the Ministry of Health as well as upcoming reductions in support by the Global Fund and the President's Emergency Plan for AIDS Relief (PEPFAR) as Botswana is poised to graduate from their support, pose critical risks to sustaining the status and progressing to gold status.

While Botswana has achieved high levels of enrolment at primary level (96.9 per cent in 2017), enrolment in pre-school remains low at 30 per cent and is primarily an urban phenomenon dominated by private sector provision.

Adolescents aged 10 to 19 constitute around 19 per cent of Botswana’s population. Data indicates that adolescent girls and young women are vulnerable to overlapping deprivations, including early sexual
initiation, risk of HIV infection, early unintended pregnancy, lack of access to sexual and reproductive health services, gender-based violence, school drop-out and poor mental health. The Botswana Police Service released data in November 2022 indicating that just over 5,000 cases of child rape were recorded between 2019 and 2021. While Botswana’s Police Services have made significant strides in increasing the number of child-friendly police stations from two in 2021 to 5 in 2022, bottlenecks in prosecution remain due to the lack of child-friendly courts and the low number of social workers (at a ratio of around 1:5,000 inhabitants), leading to significant delays in documenting and processing cases and limiting referrals and psychosocial support to survivors.

Botswana has one of the highest suicide rates in the world (19 per every 100,000). Mental health services are not widely available, less so for adolescents who often lack youth-friendly services. Approximately 22 per cent of adolescents have thought of suicide and 19 per cent attempted it in the last 12 months[2]. UNICEF is working with CSOs to train healthcare workers in the provision of psychosocial support services, but more investments are required.

The 2022 Botswana AIDS Impact Survey (BAIS) estimated overall HIV prevalence at 14.1 per cent and adolescent prevalence at 2.7 per cent and 1.6 per cent, respectively, in girls and boys aged 15 to 19. In terms of the 95-95-95 targets (95 per cent of people living with HIV know HIV status; 95 per cent of all people diagnosed with HIV on ARVs; 95 per cent of all people receiving antiretroviral therapy to have viral suppression by 2025), adolescent girls and young women aged 15 to 24 lag behind their male peers (and the adult population) particularly on viral suppression (75 per cent compared to 82 per cent in males). Treatment fatigue, lack of youth-friendly services, stigma and discrimination and other determinants continue to pose barriers for HIV treatment adherence among adolescents.

Botswana’s participation in the Transforming Education Summit (TES) highlighted the continuing challenges around the quality of education. While transition rates from primary to junior secondary stand at 98 per cent, pass rates are as low as 35 per cent at junior secondary and 13 per cent at senior secondary. The youth unemployment rate is 41 per cent (39 per cent for males and 46 per cent for females)[3] and 37 per cent of youth are not in education, employment, or training[4]. Botswana’s youth-led organizations require considerable capacity-building to effectively inform decision-making and youth-focused platforms tend to be youth-serving, and rarely include young people in positions of leadership.


Major contributions and drivers of results

First Decade: 0 – 9 years

Every child survives and strivs

In 2022, as Botswana gradually emerged from the COVID-19 pandemic, UNICEF continued to provide technical, financial and logistical support to the MoH and NGOs, to strengthen health systems towards more equitable, integrated, quality essential health and nutrition services, including during emergencies.
In collaboration with WHO, UNICEF supported the MoH to establish a cadre of master trainers on critical areas of child health and nutrition, thus strengthening the capacity of frontline healthcare professionals to deliver essential services to children. This included training 30 trainers on Maternal and Perinatal Death Surveillance and Response and a total of 259 trainers on early detection and treatment of malnutrition and acute malnutrition case management guidelines, especially to empower family members on screening for malnutrition. To address elevated neonatal mortality, UNICEF supported the development of clinical management guidelines for neonatal care and a kangaroo mother care gap analysis survey tool which will be implemented in quarter one of 2023. Further, a maternal nutrition landscape analysis was conducted to understand enablers and barriers to maternal nutrition as underlying causes of maternal and neonatal morbidity and mortality.

During the reporting period, UNICEF continued to play a leading role in strengthening MoH and NGOs’ capacity in community engagement, social and behaviour change (SBC), using the COVID-19 response and vaccination roll-out as entry points. Technical assistance through a consultant based in the MoH contributed to the MoH creating coordination platforms around risk communication and community engagement and SBC as well as strengthening capacity to use near real-time evidence through social listening reports to continuously inform and adapt SBC messaging and strategies. In a partnership with the Botswana Red Cross, UNICEF contributed to reaching hard-to-serve communities, including vaccine hesitant ones, with COVID-19 and routine vaccines through SBC interventions using community volunteers and thus contributing to the strategy on zero dose communities.

As in previous years, UNICEF provided procurement services to the Government of Botswana which is largely self-financing. Through UNICEF procurement services a total of $7,240,299.23 supplies and services were procured, including freight costs of $156,942. To close cold chain gaps, UNICEF procured cold chain equipment which included 210 vaccine fridges, one walk-in-freezer, 5 walk-in-cold rooms, 400 vaccine carriers and 150 cold boxes. Additionally, Effective Vaccine Management (EVM) was strengthened through training of 40 cold chain officers and 10 field assessors. UNICEF continued to coordinate procurement of routine EPI and COVID-19 vaccines. These contributed to Botswana achieving the milestone of 69 per cent of the population fully vaccinated against COVID-19 by end of 2022. Among these, a total of 166,549 children aged 5 – 11 years (46 per cent of target population) received the first dose of the COVID-19 vaccine and 35,649 (10 per cent) received the second dose.

In 2021 Botswana became the first HIV high-burden country to be certified by the WHO Global Validation Advisory Committee, as having achieved the Silver Tier on the path to elimination of mother to child transmission of HIV. In order to sustain the momentum and efforts to achieve Golden Tier, UNICEF supported the Government of Botswana by conducting a Comprehensive Points of Care Landscape Assessment to inform roll out of innovative approaches to strengthen and improve early infant diagnosis (EID) and maternal viral load.

Every child learns

During the reporting year, UNICEF in partnership with the Ministry of Education and Skills Development (MESD) contributed to equitable access to quality early learning and primary education
services by deploying change strategies ranging from systems strengthening and advocacy to digital transformation and innovation.

The development of an ECD public-private-partnership model and framework (PPPF) with UNICEF support was a critical milestone in moving towards equitable, inclusive access to quality ECD and pre-primary education. The PPPF will guide the MESD on the design, implementation and management of ECD and pre-primary services by leveraging private sector knowledge, expertise, innovations and resources to enhance coverage and quality of services.

Furthermore, UNICEF supported the Ministry of Education and Skills Development (MESD) to pretest the Remediation and Enrichment Programme in 50 schools across Botswana to address low learning outcomes in primary and secondary schools. Once scaled up, the programme will benefit at least 600,000 learners enrolled in public schools and capacitate over 10,000 teachers with the necessary skills to support learning.

To boost inclusive education and building on UNICEF’s previous support to the development of the National Language Policy (approved by Parliament in February 2022), UNICEF supported the development of teaching and learning materials in 13 local languages. These will ensure the use of mother tongue as a medium of instruction in lower grades of primary school, thereby promoting inclusivity by removing a significant barrier to education for children whose mother tongue is not Setswana. The materials will be rolled out in January 2023 and will initially benefit 12,000 learners. Furthermore, in view of enhancing the implementation of the inclusive education policy, UNICEF supported the capacity building of ten special education officers on foundations of disability-inclusive education sector planning.

In collaboration with the Resident Coordinator’s Office (RCO) and UNESCO, UNICEF supported the government to participate in the Transforming Education Summit in September 2021 which provided a critical opportunity for advocacy on refocusing efforts towards recovering from C-19 pandemic-related learning losses. Through national consultations supported by the UN, government consulted a wide range of stakeholders, including learners themselves, on critical challenges facing the education system in Botswana. Key priorities for improvement included ECD, balanced distribution of financing in education with increases in allocations for ECE and Basic Education, support for learners with special educational needs, curriculum review and conceptualization of alternative pathways to formal education. Furthermore, the handover of 75 letters written by learners across Botswana to His Excellency the President of Botswana resulted in elevating education to the top of Botswana’s development agenda and ensuring high-level commitment to addressing some of the current challenges.

Second Decade: 10 – 24 years

Every child survives and strives

UNICEF supported the Ministry of Health to conduct an adolescent health and nutrition landscape analysis focusing on analysis of adolescent health, overweight and obesity indicators and mapping existing policies and initiatives to identify needs and gaps in addressing adolescent wellbeing in Botswana. The final report with key recommendations will inform evidence-based interventions for this age group and policies and regulations to guide on comprehensive health and nutrition services across the life course.

Furthermore, to close the HIV treatment gap among adolescents, and address emerging public health priorities for adolescents, especially mental health, UNICEF supported the implementation of in-
person and virtual models of care for adolescents living with HIV, in partnership with CDC, Botswana-Baylor (a health sector NGO), and the Ministry of Health. This collaboration included training of 934 healthcare workers (HCW) and 200 young people through teen clubs. The training of HCWs included topics such as counselling and disclosure, HIV treatment regimens, mental health, sexual reproductive health, common clinical conditions, transition to adulthood, and ethical and legal matters. The next phase of this collaboration aims to equip parents and guardians with practical knowledge on how to support adolescents living with HIV who are under their care.

In a drive to engage adolescents and young people, especially in marginalised communities, on adolescent health, life skills and adolescent empowerment, UNICEF continued to support the implementation of the MTV Shuga programme in Botswana, which mostly led by young women. Through a combination of digital interventions and virtual outreach, up to 16,000 young people, 54 per cent being female in 10 districts across Botswana were reached with information and services through radio programmes, peer education programmes and interactive games. UNICEF also supported adolescent and young people’s participation through the establishment of a youth-led coordination space for young people working on HIV and SRHR-related advocacy. The Forum will inform efforts led by a multi-sectoral Steering Committee on adolescents and young people’s sexual and reproductive health, hosted by the National AIDS and Health Promotion Agency (NAHPA).

During the reporting year, in collaboration with the Office of the President UNICEF commissioned the Generation Unlimited (GenU) Landscape Analysis, a diagnostic assessment of skilling, entrepreneurship and social impact opportunities currently available to adolescents and young people aged 15 to 24 in Botswana. The analysis further highlighted solutions that can be taken to scale to ensure that all young people, including those in rural areas, can access such opportunities. The completed analysis will be used to provide strategic guidance to the stakeholders represented on the GenU national steering committee regarding the roll-out of Generation Unlimited in Botswana.

**Every child learns**

Furthermore, UNICEF continued to leverage the national digital transformation project, to support the Ministry of Education and Skills Development to create opportunities for learning through technology. With UNICEF support the MESD developed a National Strategy for Integration of ICT in Teaching and Learning, which will guide future efforts on developing digital content, rolling out digital devices to learners and teachers as well as monitoring efforts to digitize the education sector. Following Botswana’s participation in the Transforming Education Summit, UNICEF Botswana was able to achieve buy-in from the MOESD for the introduction of the Learning Passport in 2023, ensuring that learners across the country can tap into the resources available in the Digital Learning Toolkit.

Building on the recommendations from the Education Public Expenditure Review (2019), UNICEF is supporting the MESD in data, research and knowledge management, including through Botswana’s participation in the Africa Research on Teachers for All – improved teacher allocation in Africa. Results will become available in early 2023 and will inform governments’ efforts in effective allocation of teachers across the country and the link to learning outcomes. Building on the Data Must Speak work, UNICEF supported the generation of user-friendly education data in the form of school profiles for improved decision-making at school and community level in two identified regions.
Every child is protected from violence and exploitation

In 2022, UNICEF contributed to efforts to strengthening child protection systems to strengthen government response to prevent and respond to violence against children. A critical milestone was the establishment with UNICEF support of three child-friendly police centres in Shakawe, Lethakane and Ghanzi, ensuring that children who are in contact with the law as victims, witnesses or perpetrators of a crime can provide evidence in safe and child-friendly spaces with trained interviewers. The Botswana Police Services also established 4 further police stations with its own resources between late 2020 and 2022, a clear indication of the national commitment to child-friendly policing and the strength of the partnership with UNICEF. With support from the British National Crime Agency and the British High Commission, twenty-five police officers (60 per cent female officers) from all 18 policing districts, have been trained on child friendly policing including child development, collecting evidence from children and roles of different stakeholders in ensuring access to justice. Female police officers were deliberately targeted to address high numbers of sexual violence cases among girls. Furthermore, UNICEF leveraged support from the British National Crime agency, to provide equipment to the Botswana Police Services to record interviews with children. In addition, Standard Operating Procedures for the Botswana Police were finalised, to standardize services offered to children and their families.

Additional support focused on strengthening the social workforce, including through the code of conduct for Social Workers and the draft bill to establish a Social Work Council to regulate the social work profession through registration and accreditation of social workers in Botswana. The bill will be tabled in parliament for endorsement in 2023. A further achievement was the completion of the Social Worker Toolkit which was used to train 30 social workers and 20 police officers from across the country as ToT. In 2023, the trained officers will be engaged to train a further 400 officers on interviewing children and report-writing to improve the prosecution rate for children’s cases in courts.

In August 2022, with support from the Government of Japan, UNICEF supported the relaunch of the “E seng Mo ngwaneng“ national campaign to end violence against children (VAC). Through communication and advocacy as well as community engagement, the campaign has reached over 250,000 people including caregivers, parents, and children. Campaign platforms included community dialogues, radio and social media platforms including Facebook and Twitter. The campaign was coupled with interventions to strengthen the capacity of village child protection committees (VCPC) and District Children’s Consultative Forum to prevent and respond to cases of violence against children - to date, 20 VCPCs and 2 District Children’s Consultative Fora have been reached in two of the targeted four districts.

Every child has an equitable chance in life

To ensure that every child, including adolescents, has access to inclusive social protection and lives free of poverty, UNICEF contributed to strengthening and transforming social protection systems, aiming to enhance efficiency, reach and streamlining of programmes. In 2022, in collaboration with UNDP, UNICEF technically supported the development of Implementation Plan for the National Social Protection Framework (NSPF) and Roadmap. The NSPF was adopted by the Government in 2020 and is premised on a life cycle approach which incorporates a Universal Child Grant. Implementation of the NSPF is expected to transform the social protection system in Botswana, making it shock-responsive and scalable to reduce child poverty. However, the process has been very slow owing to weak coordination and limited institutional capacities. Technical assistance by UNDP
and UNICEF contributed to the enhancement of capacities for 20 social protection practitioners who were trained in designing and implementing Adaptive Social Protection Systems. UNICEF contributed policy advice during the panel discussion on Shock Responsive Social Protection during the Ministry of Local Government and Rural Development Transformation Symposium.

The Government of Botswana continues to be receptive to technical support, policy advice, joint evidence generation to improve allocative efficiency, effectiveness, reach and transparency for public budgets for social sectors with meaningful participation of children and adolescents. In 2022, with UNICEF support, Guidelines for Zero Based Budgeting (ZBB) were developed, 73 finance and administration officers were trained on ZBB, draft Public Participation Guidelines in national budget process are in place. UNICEF also supported the development of analytical products in the form of a national budget brief and the policy brief on the 2023/24 Budget Strategy Paper. There has been increased interest by Senior Management in the Ministry of Finance in implementing Budget Transparency Reforms, including implementation of measures to enhance public participation in the budget processes. With UNICEF support, the Government developed and adopted a Budget Transparency Reform Action Plan and draft Public Participation Guidelines in national budget process are undergoing stakeholder consultation. The Budget Pitso ensured broader inclusion in National Budget Consultation for the 2023/24 Budget (thought the Budget Pitso), including the Children’s Forum, Civil Society Organisations and the general citizenry. UNICEF collaborated with the Botswana Center for Integrity on Budget Transparency to train children’s representatives from across the country, including the UNICEF Youth Advocate on the role of youth in national budget processes and the importance of budget transparency.
UN Collaboration and Other Partnerships

UNICEF’s leadership of the UN communication group enhanced collaboration with other UN agencies and expanded the reach of UNICEF’s advocacy efforts. UNICEF, UNESCO and RCO collaborated in providing technical and financial support to Botswana’s national consultations in preparation for the Transformation Education Summit, the development of the national statement and government participation in the Summit. Also in the education space, UNICEF worked closely with UNRCO, UNESCO and UNFPA to coordinate the UN family’s contribution to the ongoing review of the Education Act in the form of a position paper which informed the government’s review of the act. UNICEF continued the implementation of the joint SDG Fund programme on SDG financing, together with UNDP, UNFPA and UN WOMEN. On social protection, UNICEF and UNDP continued to work closely together in supporting the government to streamline its reform of the national social protection framework. Finally, UNAIDS and WHO have continued to be critical partners on HIV, as well as the COVID-19 vaccination roll-out and polio outbreak response.

UNICEF also built alliances with development partners to amplify advocacy messages and advance child rights, especially during the first Development Partners Forum where UNICEF led sessions on education and the prevention of violence against children. Through a unique partnership with FCDO, the British High Commission in Botswana and the UK National Crime Agency (NCA), UNICEF not only mobilised financial resources to strengthen child-friendly police services but was also able to leverage the expertise of the NCA for capacity-building of police officers, complemented by a donation of recording equipment.

During 2022, UNICEF also continued to partner with civil society organisations to extend the reach of its programmes in the field and fill critical gaps in service delivery for children at risk of being left behind. The Botswana Red Cross Society (BRCS) continued to be a trusted partner on community engagement to increase demand for COVID-19 and routine vaccination. Furthermore, UNICEF continued to work with Botswana-Baylor and Makgabaneng to extend prevention and treatment services to adolescents and young people affected by HIV. Strategic partnerships on budget transparency include those with the International Budget Partnership, Botswana Watch and the Botswana Center for Public Integrity.

The CEO Council provided UNICEF with a platform for engagement with the private sector and in 2022 there was an agreement to update the response and focus of the Council. In 2022 the Council members successfully agreed upon the elimination of violence against children as a joint priority for future years. The office also developed a private sector engagement strategy and a series of concept notes which will facilitate more structured and strategic partnership and resource mobilization with the private sector. Furthermore, due to its longstanding engagement with Debswana (the national diamond mining company), UNICEF influenced and leveraged the company’s social impact investments and provided technical assistance on the design of CSI programmes on education and child protection.

UNICEF continued to forge partnerships with organisations in the digital transformation space, including with Smartbots, the government’s national digital transformation project and the Botswana Digital Innovation Hub.

Lessons Learned and Innovations

Despite the economic recovery in 2022, it is clear that the COVID-19 pandemic has exacerbated inequities in Botswana and inflation is hitting households, especially in rural areas hard. Social protection systems are as important as ever, yet challenges persist with limited political commitment towards the transformation of the existing weak and inefficient systems towards the adoption of the National Social Protection Framework which is based on the life cycle approach. UNICEF will need to
work closely with UNDP, ILO and the World Bank, aligning messaging and support, in order to ensure that the transition to the framework is accelerated and development partners’ support maximized.

Following the comparatively successful COVID-19 vaccination roll-out, the campaign is now faced with diminishing returns and uptake of the vaccine has stagnated. As it is becoming apparent that COVID-19 is not yet history, innovative strategies will be required to continue the vaccination drive for vaccine-hesitant and hard to reach populations, focusing on the use of insights from social listening and previous community engagement work. Furthermore, as the pandemic exposed weaknesses and gaps in the national health system, it will be critical for UNICEF to support integration of lessons learnt from the COVID-19 experience into the national health system in order to address challenges around data systems, accountability systems and systematic supportive supervision.

The lack of recent data through nationally representative household surveys that includes indicators of child wellbeing and the time lags for processing, analysis and publication of data emerging from administrative data systems continue to pose challenges in monitoring progress towards national plans and the SDGs as they relate to children. UNICEF, together with other development partners will advocate with the newly established National Planning Commission and other relevant stakeholders for the inclusion of a Multiple Indicator Cluster Survey (MICS) or Demographic and Health Survey (DHS) in data generation plans. Additionally, UNICEF will seek to identify opportunities for and where possible directly support granular analysis of existing data from the recently completed census and Botswana AIDS Impact Survey to generate updates on child-related indicators.

In 2022, the country office transitioned to a new CPD and a life cycle-based approach to programming. The small staff complement means that all members of the programme team are expected to work across both stages of the child’s life cycle and only the second decade is clearly reflected in the staffing structure. With the recruitment of critical positions in late 2022, a key priority at the beginning of 2023 will be to clearly determine individual and collective accountabilities around the life cycle. Furthermore, entry points will need to be identified for more integrated programming for the first decade and ensure that they are feasible given current capacities.

In terms of adolescent and youth participation, current structures in Botswana are weak and rarely involve young people as leaders. Building on the appointment of a youth advocate in late 2022 and the drafting of the first rolling work plan with the Ministry for Youth, Ministry of Youth, Gender, Sport and Culture, a key focus in 2023 will be to continue the reflection on UNICEF’s role, capacity and strategic positioning in strengthening such structures. The country office also has plans to establish a Children and Youth Advisory Panel to UNICEF to better structure the country office’s own engagement with youth as beneficiaries, partners, and leaders, through the creation of a Children and Youth Advisory Panel to UNICEF. Furthermore, Botswana does not have a network of young people living with HIV, which is a lost opportunity given the challenges related to HIV treatment adherence among adolescents, and the role that a youth-led network could play in providing peer-support services. UNICEF is undergoing discussions with youth advocates living with HIV, and from communities most affected by HIV, to explore the feasibility of establishing a national network.

Ending violence against children will remain a key priority in 2023, given the high rates of violence especially sexual violence among young girls and physical violence on boys. While progress was made in 2022 in activating the Eseng mo ngwaneng campaign to end violence against children in selected districts, strengthening government ownership of and commitment to the campaign as well as shifting
to a multisectoral approach involving the education and health sectors as service delivery systems and critical stakeholders will be essential in order to achieve the goal of elevating the campaign to a national movement which is actively borne by a broad coalition of stakeholders. Furthermore, building on the President’s mention of the campaign in his November State of the Nation address for the opening of Parliament, advocacy for stronger involvement of the Executive in actually planning and implementing interventions to end violence must be prioritized.

As two longstanding UNICEF-supported interventions supporting adolescents and HIV undergo evaluations in 2023, it will be important for the country office to reflect on the sustainability of such support. The office will need to be deliberate about engaging with government and donors to ensure that interventions delivered by NGOs are linked to and embedded within government service delivery systems to ensure sustainability and scalability.