



---

**A NATIONAL COMMITMENT FOR ADOLESCENT WELL-BEING  
IN BOTSWANA**

---

**FINAL VERSION**

**AUGUST 2023**

## Table of Contents

ABBREVIATIONS .....	3
DEFINITION OF TERMS .....	5
THE GOVERNMENT OF BOTSWANA COMMITMENT FORM.....	7
1. BOTSWANA’S SDG VISION STATEMENT ON ADOLESCENT WELL-BEING.....	10
2. COMMITMENT OBJECTIVES .....	10
POLICY/ PROGRAMME COMMITMENT THEME 1: ACCELERATE EDUCATION AND SKILLS DEVELOPMENT.....	10
POLICY/ PROGRAMME COMMITMENT THEME 2: PROMOTION OF HEALTH AND NUTRITION .....	12
POLICY/ PROGRAMME COMMITMENT THEME 3: ELIMINATE GENDER-BASED VIOLENCE 14	
POLICY/ PROGRAMME COMMITMENT THEME 4: PROMOTE ROAD SAFETY .....	16
POLICY/ PROGRAMME COMMITMENT THEME 5: STRENGTHEN SKILLS DEVELOPMENT, EMPLOYABILITY, AND JOB CREATION.....	17
POLICY/ PROGRAMME COMMITMENT THEME 6: DATA, MONITORING AND EVALUATION 19	
FINANCIAL OBJECTIVE .....	20
3. COMMITMENT CONSULTATION PROCESS .....	21
4. COMMITMENT ACCOUNTABILITY APPROACH .....	22
5. COMMITMENT LAUNCH TIMELINE .....	24

**ABBREVIATIONS**

AA-HA!	Accelerated Action for the Health of Adolescents
ABR	Adolescent Birth Rate
AIDS	Acquired Immunodeficiency Syndrome
AGYW	Adolescent Girls and Young Women
ART	Antiretroviral Therapy
ASRH	Adolescent Sexual and Reproductive Health
AU	African Union
AWB	Adolescents Well-Being
AYP	Adolescents and Young People
AFIDEP	African Institute for Development Policy
BCRSC	Boitekanelo College Representative Students Council
BCWIS	Botswana Core Welfare Indicator Survey
BAIS	Botswana AIDS Impact Survey
BIDPA	Botswana Institute for Development Policy Analysis
BNYC	Botswana National Youth Council
BOSASNET	Botswana Substance Abuse Support Network
BOTA	Botswana Training Authority
BOU	Botswana Open University
OBE	Outcome Based Education
CD	Communicable Disease
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CLSE	Comprehensive Life Skills Education
CSE	Comprehensive Sexuality Education
COVID-19	Corona Virus Disease of 2019
CPD	Continuous Professional Development
CPR	Cardio Pulmonary Resuscitation
CSOs	Civil Society Organisations
DD	Demographic Dividend
DPRU	Development Policy Research Unit
DRSC	District Road Safety Committee
DTVET	Department of Technical and Vocational Education and Training
Edu+	Education Plus Initiative
ESA	Eastern and Southern Africa
ETSSP	Education and Training Sector Strategic Plan
EUP	Early Unintended Pregnancy
FP	Family Planning
GBV	Gender-Based Violence
GDP	Gross Domestic Product
GGI	Gender Gap Index
GECAF	General Education Curriculum and Assessment Framework
GenU	Generation Unlimited
HAART	Highly Active Antiretroviral Therapy

HDI	Human Development Index
HIC	High Income Country
HIV	Human Immunodeficiency Virus
HRDC	Human Resource Development Council
HPV	Human Papillomavirus
HFSS	High in Saturated Fat, Salt and Sugar
ICT	Information and Communication Technology
ILO	International Labour Organisation
JSSs	Junior Secondary Schools
ISPAAD	Integrated Support Programme for Arable Agriculture Development
LEGABIBO	Lesbians, Gays, and Bisexuals of Botswana
LRCs	Learning Resource Centers
LIC	Low Income Country
LMIC	Lower-Middle Income Country
MCH	Maternal and Child Health
MDAs	Ministries, Departments and Agencies
MESD	Ministry of Education and Skills Development
M&E	Monitoring and Evaluation
MoA	Ministry of Agriculture
MoH	Ministry of Health
MCKT	Ministry of Communications, Knowledge and Technology
MET	Ministry of Environment and Tourism
MoJ	Ministry of Justice
MLHA	Ministry of Labour and Home Affairs
MLGRD	Ministry of Local Government and Rural Development
MLWA	Ministry of Lands and Water Affairs
MTPW	Ministry of Transport and Public Works
MYSC	Ministry of Youth, Gender, Sport and Culture
MSP	Ministry of State President
NAHPA	National AIDS and Health Promotion Agency
NCDs	Non-Communicable Diseases
NDPs	National Development Plans
NGO	Non-Governmental Organisation
NPC	National Planning Commission
NRSC	National Road Safety Committee
NSPF	National Social Protection Framework
NTS	National Transformation Strategy
OSCs	One Stop Centers
PHC	Primary Health Care
PLWHA	People Living with HIV and AIDS
PLWHIV	People Living with HIV
PEP	Post-exposure Prophylaxis
PrEP	Pre-exposure Prophylaxis
PMTCT	Prevention of Mother to Child Transmission
RNPE	Revised National Policy on Education
RTI	Road Traffic Injury
SADC	Southern Africa Development Community

SARSAI	School Area Road Safety Assessments and Improvements
SAT	SRHR Africa Trust
SDG	Sustainable Development Goals
SRHR	Sexual and Reproductive Health Rights
SRH(S)	Sexual and Reproductive Health (Services)
SOPs	Standard Operating Procedures
SORSA	Society of Road Safety Ambassadors
SSSs	Senior Secondary Schools
STI	Sexually Transmitted Infection
TEIs	Tertiary Education Institutions
TVET	Technical Vocational Education and Training
TNDP	Transitional National Development Plan
TWG	Technical Working Group
UMIC	Upper-Middle-Income Country
UNAIDS	Joint United Nations Programme on HIV and AIDS
UNFPA	United Nations Population Fund
UNESCO	United Nations Education, Scientific and Cultural Organization
UNICEF	United Nations International Children's Fund
WHO	World Health Organisation
YAM	Youth Action Movement
YFS	Youth-friendly Services

## DEFINITION OF TERMS

The following provides a brief descriptions of terms/concepts used throughout the document:

<b>Term/Concept</b>	<b>Definition</b>
Adolescents and Young People	Adolescence is a transitional phase of growth and development between childhood and adulthood, that is, any person between ages 10-19. The age range falls within the definition of young people, which refers to individuals between ages 10-24.
Adolescent Well-Being	Adolescent well-being is the experience of health, happiness, and prosperity. It includes having good mental health, high life satisfaction, a sense of meaning or purpose, and the ability to manage stress. The five domains of adolescent well-being are: 1. Good health and optimum nutrition; 2). Connectedness, positive values, and contribution to society; 3. Safety and a supportive environment; 4. Learning, competence, education, skills, and employability; 5. Agency and resilience. Adolescent well-being is relevant to adolescents everywhere irrespective of gender, social class, ethnicity, disability, or any other inequity.
Education Plus initiative	Botswana became the 13 <sup>th</sup> African country to join the Education Plus initiative in June 2023. Education Plus advocates for Adolescent Girls and Young Women (AGYW) to complete secondary education against all odds. Additionally, it ensures that AGYW learn life skills and access Sexual Reproductive Health

	(SRH) services in and around their environment. It also ensures that every girl who completes secondary education has a pathway to an economic opportunity for them to avoid risky relationships,
First Demographic Dividend	The Demographic Dividend is the economic benefit that results directly from the initial increase in the proportion of working population relative to dependent children
Digital skills/ competencies	These are skills/ competencies revolve round the ability to search for information. The ability to express oneself in different programming languages and the capacity for social interaction and integrating new technologies. The concept refers to diverse knowledge, skills and attitudes needed in a digital environment.
The Reset-Agenda	The Reset Agenda was launched in 2021 to enable the country to recover from COVID-19 stronger and fulfil the national development goals as per Vision 2036, NDP11, the African Union continental Agenda 2063 and the SDGs. The Reset Agenda prioritizes reforms in health, education, skills development, digital transformation, young people empowerment and mind-set change for citizens to embrace national development goals and the SDGs in both action and attitude.
Working Age Population	The working age population is between the ages of 15-64 years, that is, approximately two-thirds of the Botswana population.

## SDG Summit & Global Forum

for

## Adolescent Well-Being

### THE GOVERNMENT OF BOTSWANA COMMITMENT FORM

The UN Secretary-General, in his letter dated 3 April 2023, has called upon world leaders to support the delivery of a **'Rescue Plan for People and Planet'** at the SDG Summit. This includes announcing national and global commitments that will drive SDG (Sustainable Development Goals) acceleration, promoting inclusion and sustainability in the years to come. Unfortunately, adolescents are a group that is often left behind in development efforts, experiencing various challenges and disparities.

Adolescents face unique obstacles that hinder their development, including limited access to quality education, healthcare, and nutrition. They also encounter barriers to their safety and well-being, such as violence, discrimination, and a lack of supportive environments. Furthermore, issues related to employment, skills, and empowerment often affect their transition into adulthood and hinder their participation in shaping their future.

Recognizing the significance of addressing these challenges, the 1.8 Billion Young People for Change Campaign was launched in October 2022. The campaign aims to prioritize the well-being of adolescents as a crucial element in achieving the Sustainable Development Goals (SDGs). It seeks to amplify their voices and empower them to contribute actively to sustainable development.

A major milestone of the 1.8 Billion Young People for Change Campaign is the Global Forum for Adolescents, scheduled to take place virtually on 11- 12 October 2023. During this event, governments will have the opportunity to engage with young people and share the commitments made for their benefit at the SDG Summit to be held in 18-19 September 2023. The Government of Botswana recognizes that adolescent well-being is critical to achieving sustainable development because of its youthful population. Out of a population of 2.3 million, 30.3 percent of the population is aged 10-24 years.<sup>1</sup> It is therefore essential to accelerate investments in Adolescents and Young People (AYP) so as to harness the human capital and achieve a demographic dividend, whilst at the same time contributing to sustainable development.

Like in most countries, Botswana's AYP face several challenges:-

- In the education and skills development sector, Botswana's public spending is high relative to peers such as Brazil and South Africa. For instance, in 2009, Botswana spent

---

<sup>1</sup> Statistics Botswana 2022 Population and Housing Census: Preliminary Results, V2, P.2. At the time of the last population census in 2022, Botswana's estimated population was 2.346,179 million and it is projected to rise to 3.4 million by 2050. Government of Botswana and UNFPA (2018) Opportunities and Policy Actions to Maximise the Demographic Dividend in Botswana: Demographic Divided Study Report. African Institute for Development Policy

9.5 percent of its Gross Domestic Product (GDP) on education against the upper middle income countries' average of 5.5 percent.<sup>2</sup> However, allocative inefficiencies exist within the sector because the largest proportion of the budget is allocated to tertiary-level education yet transition rates from secondary to tertiary remain low at 30.3 percent. This large tertiary education allocation therefore benefits a small segment of the population. Retention and completion of secondary education is a challenge particularly for adolescent girls. Early and unintended pregnancies are a contributory factor on school dropouts and grade repetition especially for girls from poor and rural backgrounds. AYP with disabilities are also confronted with exclusion from school and their integration into mainstream schools is progressing slowly.

- 
- From a health perspective, AYP with disabilities, males and females who are in juvenile detention centres, orphans and those living with HIV and AIDS continue to face serious challenges. The root causes range from social, cultural, economic, and environmental risk factors. Adolescent girls and young women (AGYW) continue to be negatively impacted by early sexual experiences. There is a high number of AYP in the sexually active age-group who are exposed to sexually transmitted infections (STIs), including Human Immunodeficiency Virus (HIV). Vulnerabilities to Sexual and Reproductive Health (SRH) challenges were heightened during the April-May 2020 national COVID-19 lockdown by restricting access to contraceptives. Mental health, chronic pain syndrome, drug and alcohol abuse as well as overweight and obesity are some of the challenges confronting AYP. Finally, there is an excessive consumption of foods and drinks that are high in saturated fats, salt, and sugar (HFSS).<sup>3</sup>
- 
- Most road traffic deaths are among vulnerable road users, including pedestrians, and motor cyclists. Adolescents are at high risk of health hazards due to road traffic injuries and vehicle crashes with road traffic injuries being the leading cause of death for children and young adults aged 5-19 years. Most of road traffic deaths occur among young males under the age of 25 years.<sup>4</sup>
- Gender Based Violence (GBV) persists across the country and the rights of AYP continue to be violated. Throughout the country, AYP face physical, sexual, and psychological forms of GBV within families, schools, communities, and society at large. Populations subjected to GBV experience unequal power relations, endure stigma and discrimination, and their rights to dignity continue to be violated.
- Unemployment is the main cause of anxiety among adolescents. This is one of the contributors to their poor mental health and leads to increased risk of drug use, risky sexual behaviour, violence, HIV infection and unintended pregnancies. The most recent economic growth projections indicate that the current path does not adequately meet the policy targets of the SDGs and Vision 2036. Economic diversification is occurring at a slow pace and is not able to absorb the approximately 35,000 annual labour market entrants<sup>5</sup>.

The Government of Botswana acknowledges that it is essential to adopt a holistic approach that entails working together in a coordinated and collaborative manner to address the above multiple and intersecting factors that impact on AYP. This Commitment acknowledges the

---

<sup>2</sup> Government of Botswana and UNFPA, Botswana Demographic Dividend Study Report, 2018.

<sup>3</sup> UNICEF (2023) Childhood and Adolescent Overweight and Obesity Landscape Analysis. Gaborone, Botswana.P.1

<sup>4</sup> Statistics Botswana (2022) Transport & Infrastructure Statistics Report

<sup>5</sup> UNICEF (2022) Country Office Annual Report: Update on the Context and Situation of Children. P.1

need to prioritize the needs of adolescents, promote their rights and provide them with opportunities for education, healthcare and participation so as to ensure a sustainable future for them. The thematic commitments are intended to guide these efforts and create meaningful change to adolescent well-being.

<b>Country Name</b>	<b>Botswana</b>
<b>Email of Point of Contact</b>	bmolomo@gov.bw
<b>Date Submitted</b>	

## 1. BOTSWANA’S SDG VISION STATEMENT ON ADOLESCENT

### WELL-BEING

The Adolescent Well-being vision is anchored on Botswana Vision 2036 of “**Achieving Prosperity for All**”. This is a transformative Agenda where the aspiration of the people is for Botswana to be a high-income country, its people prosperous and living in full enjoyment of their potential.

**As part of the Agenda for Sustainable Development, by 2030, Botswana’s Adolescent Well-Being vision is for all adolescents and young people, including the most marginalized, regardless of age, gender, disability, geography, language, and socio-economic status, to be educated, healthy, thriving, prosperous, and their potential fulfilled. This vision will be attained through an accountable, collaborative, and an effectively coordinated and participatory process.**

## 2. COMMITMENT OBJECTIVES

<b>Policy/ Programme Commitment Theme 1: Accelerate Education and Skills Development</b>
<b>Timeline: 2024 - 2030</b>
<p><b>Objective Statement</b></p> <p>To accelerate equitable and inclusive quality education and skills development for both in and out of school adolescents and young people. This should include fast-tracking the implementation and monitoring of Comprehensive Sexuality Education.</p>
<p><b>Rationale</b></p> <p>The Botswana education sector is based on a strong legal and policy environment. This includes the Education Act, the Children’s Act, Revised Education Policy and the General Education Curriculum and Assessment Framework approved in 2021. There is a School Health Policy with the goal of improving the health and nutrition status of the school community. The education sector has developed a domestication plan for SDG 4, its targets and indicators to ensure inclusive and equitable quality education for all. As a signatory to the Eastern and Southern Africa (ESA) Ministerial Commitment, the government has introduced comprehensive sexuality education (CSE) in schools and out of school to facilitate the scaling up of the implementation of SRHR and CSE. Moreover, Botswana became the 13<sup>th</sup> county in Africa to launch the Education Plus initiative in June 2023. This notwithstanding;</p>

- **The quality of public education is not satisfactory. Thousands of AYP who complete junior secondary education do not transition to senior secondary education.** For instance, in 2019, only 59 percent of them transitioned to senior secondary education (Statistics Botswana, 2019). About a quarter of the senior secondary education learners transitioned to higher education institutions in 2021 (HRDC and Statistics Botswana, 2021). The majority of these out of school AYP live in rural locations and their situation is worsened by the fact that they are from marginalised poor communities.
- **Throughout the country, AYP in school and out of school require special support for their emotional, mental, and physical well-being.** Access to counselling and health services to support the academic, peer and social pressures they face in their lives is therefore critical.

### Strategies

#### We commit to:

- Accelerate the strategic shift to the competency-based curriculum and e-assessment in schools. This will include the digitalisation of teaching, learning and e-assessment, which are an integral part of curriculum development in the digital era. The competency-based curriculum focuses on developing practical technical and soft skills critical for success in the globally competitive labour market.
- Accelerate the implementation of the Revised National School Health Policy, ensuring that adolescent nutrition is adequately covered.
- Accelerate implementation of the ESA Commitment and its nine elements on comprehensive sexuality education (CSE), as well as SRHR interventions, as high-impact initiatives. In this regard, pay particular attention to AYP in marginalised communities and sustain ongoing digital initiatives and virtual outreach led by young women and men at district level.
- Establish and scale up learning resource centers (LRCs) in schools and one stop centers (OSCs) in communities. The LRCs and OSCs would provide AYP, including those with disabilities, the special support they require for their emotional, mental, and physical well-being. Specialist teachers in the fields of special education, guidance and counselling would provide holistic and comprehensive support to enable AYP to attain the set learning and developmental outcomes.
- Develop digital monitoring tools to capture data on learners with special needs and of all dropouts including due to pregnancy.

- Facilitate access to digital learning to assist out of school young people to access Botswana Open University (BOU), Junior Secondary Schools (JSS) and Senior Secondary Schools (SSS) programmes.
- Strengthen and scale up the holistic approach to skills development of AYP that includes mind-set change; CSE and life skills; social-emotional intelligence and resilience; entrepreneurship; digital literacy and use stand-alone, infusion, integration, and mainstreaming interventions across co-curricular as well as parent-child communication to elevate and strengthen the voices of AYP.
- Scale up capacity building and continuous professional development (CPD) of schoolteachers and supporting personnel on CSE. Incorporate CSE in tertiary education and health training institutions in alignment with standards developed for the CPD to protect AYP learners from institutions offering non accredited courses.

**Policy/ Programme Commitment Theme 2: Promotion of Health and Nutrition**

**Objective Statement**

To ensure effective and efficient prevention and management of Sexual and Reproductive (SRH); nutrition; non-communicable diseases; psychosocial and mental health disorders; sexually transmitted diseases (STDs); HIV infections and co-morbidities; as well as alcohol and substance use.

**Timeline: 2024-2030**

**Rationale**

The Constitution of the Republic of Botswana provides its citizens the right to life and health, and these are provided through various legal instruments and mechanisms under various Ministries. Supportive laws and policies include the: Revised Public Health Act, the National Multi-Sectoral Strategy on Non-Communicable Diseases (NCDs). and the Eastern and Southern African (ESA) Ministerial Commitment. Botswana is also a signatory to the African Charter on Peoples’ Rights that ensures the right of all persons to enjoy the best attainable state of physical and mental health. However,

- **Adolescents and young people continue to be negatively impacted by early sexual experiences.** Sexual debut of adolescents is before the age of 13. Additionally, 22 per cent of adolescents have a forced first sexual experience before the age of 15. Adolescent Birth Rate (ABR) is 43.7/1000 girls.<sup>6</sup> Maternal

<sup>6</sup> UN Population Division, the World Bank, 2021

mortality in the country remains a serious challenge and about one in 12 maternal deaths (8 percent) occurs among adolescent girls aged 15-19 years.<sup>7</sup>

**There is a high number of adolescents and young people in the sexually active age-group who are exposed to sexually transmitted infections (STIs), including HIV.** HIV prevalence is at 14.1 percent nationwide. Adolescence prevalence is at 2.7 per cent for females and 1.6 percent for males<sup>8</sup>. One quarter of the new HIV infections are among AGYW. Preliminary results also show low suppression rates among 15-24, indicating challenges related to adherence to ARVs.<sup>9</sup>

- **There is a moderate to high rate of the use of alcohol, tobacco and drugs among adolescents and young people, which make them vulnerable to coerced risky behaviors and activities.** Mental health services are not widely available for AYP who often lack youth-friendly comprehensive services yet mental health, depression, chronic pain syndrome and drug and alcohol abuse are challenges are high among AYP. Botswana has one of the highest suicide rates in the world at 19/100,000 people<sup>10</sup>. There is also need for adequate investment in the training of health care workers in the provision of psychosocial support services.
- **Adolescent overweight and obesity are not adequately covered and targeted in national policies and strategies.** Therefore there is an excessive consumption of foods and drinks that are high in saturated fats, salt, and sugar (HFSS) <sup>11</sup>.

## Strategies

### We commit to:

- Leverage on the existing Family Planning (FP2030)<sup>12</sup> commitment to address unintended and unwanted pregnancies among AYP in and out of school. This should be complementary to efforts towards strengthening the implementation of the National HIV and AIDS Strategic Framework whose aim is to facilitate HIV prevention among AGYW; condom use among adolescent boys and young men; and voluntary male circumcision.
- Revitalize Primary Health Care (PHC) especially at community level by intentionally providing community members with opportunities to be drivers of health. This includes the meaningful capacity development of young people to be

<sup>7</sup> UNFPA, CCA 2022-2026)

<sup>88</sup> Fifth Botswana AIDS Impact Survey (BAIS V, 2022

<sup>9</sup> National Health and AIDS Promotion Agency, 2020; UN Botswana Common Country Analysis, 2020

<sup>10</sup> UNICEF (2022) Country Office Annual Report: Update on the Context and Situation of Children.P.2

<sup>11</sup> UNICEF (2023) Childhood and Adolescent Overweight and Obesity Landscape Analysis. Gaborone, Botswana

<sup>12</sup> FP2030 is the Family Planning 2030 Commitment that strives to create a future where women and girls everywhere have the freedom and ability to lead healthy lives, make their own informed decisions about using contraception and having children, and participate as equals in society and its development.

voluntary health workers in the communities where they live and to also engage them as peer educators.

- Strengthen the health system to be fully responsive to the health needs of AYP by implementing the integrated health services curriculum to capacitate health care providers and to develop their competencies to ensure a continuous flow of reproductive health commodities.
- Provide frequent screening for AYP on commonly occurring NCDs like hypertension and diabetes and integrate these into the national treatment guidelines for AYP. Also provide frequent screening for mental health disorders at primary health centers and refer to the appropriate services promptly.
- Integrate mental health education and literacy within the existing CSE and life skills programmes to effectively mitigate the adversities confronting AYP. Leverage on the already existing health interventions to include mental health awareness and prevention strategies for AYP.
- Promote the provision of a holistic sustainable alcohol and substance use, prevention and treatment services to improve the quality of life of AYP. The approach should include enforcing interventions that reduce the availability of alcohol and drugs, build stronger support networks for AYP as well as strengthen partnerships between the justice system and treatment providers.
- Accelerate referrals to support agencies such as local health facilities, social workers and other relevant agencies involved in supporting adolescents whose well-being is at risk.

**Policy/ Programme Commitment Theme 3: Eliminate Gender-Based Violence**

**Objective Statement**

To strengthen the protective and supportive legal, social, and cultural environments for adolescents and young people in order to eliminate gender-based violence and achieve gender equality.

**Timeline: 2024-2030**

**Rationale**

Botswana is a signatory to international conventions that promote the rights and well-being of women and the elimination of gender-based violence (GBV), including the Convention

on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the Southern Africa Development Community (SADC) protocol on Gender and Development. Domestically, these include the Domestic Violence Act; The Child Sexual Abuse Communication Strategy 2010-2014; and the Botswana National Plan of Action for Orphans and Vulnerable Children, 2010-2018. Botswana Police Service Standard Operating Procedures (SOPs) launched in March 2023, underscore the collaborative resolve of diverse stakeholders to eradicate violence against children. Government has also committed to SDG 5 which calls for gender equality, empowerment, and the elimination of all forms of discrimination and violence against women and girls. Despite these;

- **Throughout the country, AYP face physical, sexual, and psychological forms of GBV within families, schools, communities, and society at large.**

- Populations subjected to GBV experience unequal power relations, endure stigma and discrimination, and their rights to dignity continue to be violated. On average, 28.4 percent and 43.0 percent of female and male children and adolescents respectively experience physical violence before the age of 18.<sup>13</sup>

- Prevalence of sexual violence before the age of 18 is higher for females at 9.8 percent as compared to that of males at 5.5 percent. AGYW are exposed to some social and cultural norms which place them at greater health risk and sexual exploitation, limiting their access to education and learning. In some communities, these social and cultural norms include the practice of early marriages that impact access and retention to education and training.

- Empirical data shows AYP experiencing high levels of sexual violence. Evidence shows that there are high rates of rape among adolescents aged 15 years and below and 25 percent of them reported as forced sex.<sup>14</sup>

## **Strategies**

### **We commit to:**

- Fast-track implementation of the National Strategy to end GBV and to review penal code provisions identified as barriers to eliminating GBV.
- Scale-up and expand child friendly policing Standard Operating Procedures (SOPs) to include young people so as to enable them get effective referrals for medical and psychological support and to build on the progress made to create a national momentum for strengthening the child and youth justice system.
- Accelerate the expansion of shelters throughout the country for children, young people and women; develop partnerships and support the work of Civil Society

---

<sup>13</sup> Botswana Violence Against Children Survey, 2019

<sup>14</sup> Ibid.

Organisations (CSOs) who provide services such as shelters, mental healthcare for the most excluded adolescents, especially those in rural areas and with disabilities.

- Support partnerships to end GBV in the family, community, and public and private institutions. At district and local levels, Children’s Consultative Forums and village child protection committees will be involved. Equally important is empowering marginalized adolescents to live violence-free lives.
- Strengthen advocacy and community mobilization for the prevention of GBV against AYP through public education, mass media and social media.

<b>Policy/ Programme Commitment Theme 4: Promote Road Safety</b>
<b>Objective Statement</b>
To prioritize road safety in the national adolescent and young people’s agenda and accelerate Botswana’s shift to safe, green, and sustainable public transport systems.
<b>Timeline: 2024 - 2030</b>
<b>Rationale</b>
<p>The government is in the process of developing a National Road Safety Strategy, a National Integrated Transport Policy and a Transport Masterplan. Currently road safety issues are coordinated through the National Road Safety Committee (NRSC) established in accordance with the Road Traffic Act and the UN Decade of Action for Road Safety (2011-2020). The functions of the NRSC, working together with District Road Safety Committees, include coordination of legislation implementation, monitoring and evaluation of road safety initiatives. This notwithstanding;</p> <ul style="list-style-type: none"> <li>▪ <b>Road traffic crashes are a leading cause of death for children, adolescents and young people aged 5-29 years.</b> There is therefore an urgent need for linking child and adolescent health agenda with road safety initiatives. <ul style="list-style-type: none"> <li>- In Botswana, 72 percent of road crash fatalities and injuries are amongst 15-64 years; the economically productive age group. The ratio of male to female fatalities is 2:1 with the 15 - 49 age group being most vulnerable to fatalities. On average road accidents went down by 1.9 percent annually from 2012 to 2021<sup>15</sup>.</li> <li>- Road casualties in 2021 totaled 5,219, of which 7.9 percent were fatalities. A total of 17, 277 road accidents occurred in 2021. This is an increase of 14.6 percent from the 15,075 accidents which occurred in 2020.<sup>16</sup> Pedestrian</li> </ul> </li> </ul>

<sup>16</sup> Ibid.

casualties went up in most of the age groups in 2021. The pedestrian age group that was prone to accidents was the 6-10 group, with 14.7 percent of total pedestrian casualties. The 21-25 and 31-35 age groups followed with 12.5 and 11.6 percent respectively<sup>17</sup>.

### Strategies

#### We commit to:

- Promote transport policies and road designs that enable safe walking, cycling and public transport, including standardized road-worthy transport. This includes enacting and enforcing legislation to build and protect public spaces including areas around schools. Also strengthen road safety governance arrangements to ensure that civil society organizations, the academic, business and AYP themselves are engaged in developing and implementing road safety strategy and can better align their own safety needs and activities to the directions being pursued at a national level.
- Strengthen and scale up the partnership between the Ministry of Transport and Public Works (MTPW), local authorities, MESD, Amend, and the Society of Road Safety Ambassadors (SORSA) on School Area Road Safety Assessments and Improvements (SARSAI) to develop localized infrastructure to increase pedestrian safety, road safety lessons in schools, and the development of road safety media campaigns.
- Strengthen government investment in activity mobility initiatives such as cycling and pedestrian walkways modeled on saving lives and reducing road traffic injury.
- Strengthen advocacy and social mobilization by all stakeholders for the government and partners to prioritize safe movement of all in villages, towns, and cities, and to engage AYP as key stakeholders that help drive responsive policies through meaningful participation in road safety decision making.

### **Policy/ Programme Commitment Theme 5: Strengthen Skills development, employability and job creation.**

#### **Objective Statement**

To strengthen skills development so as to promote employability and accelerate economic diversification for job creation and poverty reduction amongst adolescent and young people.

**Timeline: 2024-2030**

<sup>17</sup> Statistics Botswana (2021) Transport and Infrastructure

## Rationale

The government has in place the necessary legal and policy instruments to guide economic diversification and youth employment. These include the National Youth Policy and Action Plan, National Employment Policy, National Social Protection Framework (NSPF) and Roadmap. The Botswana National Youth Council (BNYC) was established as the policymaking and coordinating body of all youth-related institutions, programmes, projects and activities. Accelerated implementation of the Reset Agenda should assist to diversify the economy. The National Arts Council of Botswana was also established to develop, promote, and protect the creative and cultural sector whose job creation potential is not yet fully exploited. Finally, the Generation Unlimited (GenU) partnership championed by His Excellency, the President, Dr Mokgweetsi Eric Masisi aims to mobilise public and private sector actors, UN Agencies, and civil society organizations around the goal of ensuring every young person is in education, training, or age-appropriate employment by 2030. However;

- **High levels of unemployment remain the main cause of poverty and many other social ills among AYP in the country.** There is higher unemployment among young women compared to young men. The COVID-19 pandemic worsened the situation, as it resulted in significant disruptions to productive capacity and loss of incomes in key sectors of the economy. This increases young women's greater vulnerability to HIV, threatening the maintenance of a healthy workforce.<sup>18</sup>
- **There is also the challenge of low productivity and observed negative attitudes of young people regarding employment in some fields** such as agriculture, manufacturing, and within technical and vocational sectors such as plumbing and carpentry.
- **The pace of economic diversification is slow** and is unable to absorb the approximately 35,000 annual labour market entrants<sup>19</sup>.

## Strategies

### We commit to:

- Diversify the economy and expand sectors with high job multiplier effects to increase employment opportunities for young people.
- Accelerate the rebranding of Technical, Vocational Education and Training (TVET) as an attractive pathway for re-skilling the thousands of out-of-school- adolescents and youth who did not make it to Tertiary Education Institutions (TEIs).
- Reform the agricultural sector to make it more attractive to adolescents and youth through digital transformation and integration of technology into the agricultural sector.

<sup>18</sup> Government of Botswana and UNFPA, the Demographic Dividend Study Report, 2018.

<sup>19</sup> UNICEF Country Office Annual Report, 2022

- Accelerate the implementation and the roll-out of the Generation Unlimited (GenU) initiative focused on the skilling, entrepreneurship and fostering of social impact opportunities for AYP country-wide, including those in rural areas.
- Foster an enabling environment for the Botswana National Youth Council (BNYC) to empower AYP as young leaders to participate meaningfully in national development at school, local, district and national levels.
- Accelerate and scale up the provision of ongoing broad-based up-to-date capacity building and continuous professional development (CPD) to foster entrepreneurship through partnerships with the business sector and tertiary education institutions. This includes the designing and managing of entrepreneurship programmes that are powerful tools in fighting adolescents and youth unemployment.

<b>Policy/ Programme Commitment Theme 6: Data, Monitoring and Evaluation</b>
<p><b>Objective Statement</b></p> <p>To strengthen the government monitoring and evaluation system used to plan, report and monitor the SDGs for adolescent well-being.</p>
<p><b>Timeline: 2024 -2030</b></p>
<p><b>Rationale</b></p> <p>Government adopted the National Monitoring and Evaluation Policy in September 2017 to define processes for a well-functioning performance monitoring and evaluation system in the country. The policy advocates for an indicator framework to report on performance on the goals of the Vision and the National Development Plans (NDPs). However,</p> <ul style="list-style-type: none"> <li>▪ There is limited government capacity to manage and analyse data from across sectors to inform progress in the priority initiatives that yield the greatest multiplier effects for adolescent well-being.</li> <li>▪ The monitoring and evaluation (M&amp;E) system is not adequately institutionalised in the respective ministries.</li> <li>▪ There is inadequate collection of disaggregated data. Hence performance of key indicators on adolescent well-being cannot be adequately measured.</li> </ul>
<p><b>Strategies</b></p> <p><b>We commit to:</b></p>

- Develop comprehensive, timely, reliable, and disaggregated digital data on adolescent well-being to inform the M&E system.
- Use available monitoring and evaluation tools to feed and track impact through systematic data collection that enable reporting on all adolescent well-being targets and commitments. These tools need to be reviewed to ensure that they are user friendly.
- Strengthen regular reporting on progress on adolescent well-being at local, district and national levels.
- Strengthen capacity building and innovation of Ministries, Departments and Agencies (MDAs) for effective delivery of results for Adolescents Well-Being (AWB) by partnering with tertiary education institutions and relevant private sector companies.

<b>Financial Objective</b>
<b>Objective Statement</b> Mobilize domestic resources towards commodities, infrastructure, digital devices, capacity building and professional development, as well as advocacy for AWB, including engagement with the private sector and development partners.
<b>Timeline: 2024-2030</b>
<b>Rationale</b> <ul style="list-style-type: none"> <li>▪ Government currently provides financial resources for implementation of AYP related initiatives mainly from domestic sources, through annual budgets allocated to Ministries, Departments and Agencies engaged in adolescents and youth development initiatives.</li> <li>▪ Adolescent well-being-based budgeting approach has so far not been adopted by Government.</li> </ul>
<b>Strategies</b> <b>We commit to:</b> <ul style="list-style-type: none"> <li>▪ Mobilise internal and external resources to sustain adolescent well-being initiatives.</li> </ul>

- Fastrack the development of the Health Financing Strategy to effectively mobilise domestic resources and to advise on appropriate resource allocation in the sector, based on the priorities identified.
- Source sufficient and flexible funding for comprehensive sexuality education through national and sub-national inter-ministerial budgets, contingency or emergency funds, the private sector, and external development partners. Part of the funding will give priority to learning-teaching aids for learners with disabilities.
- Introduce reforms in the budgeting process that would ensure adequate resources are allocated to policies and programmes that benefit AYP and involve them in the decision-making process.

### 3. COMMITMENT CONSULTATION PROCESS

The development of the National Commitment for Adolescent Well-Being was a consultative process with all key stakeholders in the country. The first step was the meeting with the UN Country Team to brief them on the development of the Commitment. The NPC under the Office of the President took the responsibility for project oversight and facilitated the establishment of a Technical Working Group to guide the process. A mapping exercise and a review of related literature and document analysis on Adolescent Well-Being in Botswana were undertaken.

Consultations were conducted with the following:

- **UN Agencies: specifically** UNAIDS, UNFPA, WHO, UNICEF and UNESCO.
- **Government Ministries, Departments, and Agencies:** NPC, Office of the President; National AIDS and Health Promotion Agency (NAHPA), Ministry for State President; Ministry of Education and Skills Development; Ministry of Finance; Ministry of Health; Ministry of Local Government and Rural Development (MLGRD); Ministry of Youth, Gender, Sport and Culture (MYSC); Ministry of Transport and Public Works (MTPW).
- **Civil Society Organizations:** Boys and Men for Gender Equality, Lesbians, Gays, and Bisexuals of Botswana (LEGABIBO), Makgabaneng, Botswana Substance Abuse Support Network (BOSASNET), Sentebale, Women Against Rape (WAR), Steppingstones International, Society of Road Safety Ambassadors (SORSA) and SRHR Africa Trust.
- **Other organizations:** Emergency Assist 991, Baylour Botswana, First-Aid Counselling.
- **Adolescents and Young People;** an online AYP WhatsApp Group was established with 100 participants from Ghantsi, Gumare, Maun, Gaborone, Mochudi, Seronga, Shakawe and Tlokweng. These AYP were males and females from secondary schools, out of school and tertiary education institutions. Consultations were done with 60 Boitekanelo College students in Tlokweng as part of the 1.8 Billion campaign. An AYP forum with 53 participants from SRHR Africa Trust (SAT), NAHPA AYP Forum, Sentebale, Mosepele Found, Youth Action Movement (YAM), Boitekanelo College Representative Students Council (BCRSC), BW Jobs

Graduates, SORSA, LEGABIBO, Maikano Junior Secondary School, Boitekanelo College, University of Botswana, Steppingstones International, UNFPA, NPC, MoH, MESD, MYGSC, the Africa Youth Ambassador and FIA Foundation.

#### 4. COMMITMENT ACCOUNTABILITY APPROACH

##### 4.1 Botswana's Accountability Approach for the SDG Commitments

The National Planning Commission, with its responsibility for planning, implementation coordination, monitoring and evaluation, oversees, amongst others, implementation of the SDGs, and people issues through the National Population Policy. **A Joint National Steering Committee (JNSC) for SDGs was established in 2016 following adoption of the 2030 Agenda for sustainable development in the country to provide policy guidance in the the implementation of the SDGs.** It is co-chaired by the NPC Commissioner General, and the UN Resident Coordinator, and draws membership from key implementing agencies from Government, Private Sector, Civil Society, Development Partners, Youth Organizations, academia, trade unions, the Media, and other non-state actors, in the spirit of leaving no one behind.

The JNSC on SDGs is supported by a **Technical Task Force on SDGs whose purpose is to provide technical support to NPC and JNSC, operationalizes the decisions taken by the JNSC, and facilitates its normal business.** As such, membership of the Task Force is drawn from the main sectors that drive the seventeen SDGs. These structures remain responsible for the SDGs and will have specific responsibility to oversee the implementation of the SDG agenda related to adolescent well-being.

The thematic areas established under the National Commitment require that specific Ministries, Departments and Agencies lead in the implementation of the specific thematic areas for the successful delivery of the Commitment. As such, ministries will take responsibility as follows:

- Accelerate Education and Skills Development - Ministry of Education and Skills Development
- Promotion of Health and Nutrition - Ministry of Health
- Elimination of Gender-Based Violence - Ministry of Youth Sports and Culture
- Promote Road Safety- Ministry of Transport and Public Works
- Employability and skills development - Ministry of Labour and Home Affairs
- Resource mobilisation -Ministry of Finance

Data, Monitoring and Evaluation – NPC, Statistics Botswana, iEach participating MDA will share with the Technical Task Force an annual operational plan and report quarterly on the progress and challenges related to the set indicators. AYP would be represented in the Technical Task Force.

The NPC will serve as the full-time Secretariat responsible for the day-to-day management and administration of the programme. This includes tracking of SDG indicators on adolescent well-being across sectors.

#### **4.2 Country Process for Reviewing Data on Progress and Sharing of Data with Partners**

The responsible MDAs and Partners will track progress on the adolescent well-being commitments using a set of agreed core indicators. This will enable the Technical Task Force to review, validate and generate consensus on adolescent well-being data to be reported on the indicators.

Each quarter the Technical Task Force conduct performance review meetings to check progress on the delivery of results for adolescents-wellbeing. Performance reports will then be relayed to the JNSC for policy oversight.

#### **4.3 Remedial Actions to be taken if there is lack of progress or Outright Violations of Legal Rights**

In providing technical advice, the Technical Task Force on SDGs will ensure that there is progress on the commitments and provide reports on implementation through the NPC as the Secretariat on SDGs. Where there is lack of progress, or violation of the well-being of adolescents, the challenges will be addressed using existing platforms/channels and the Government through the NPC to communicate with the respective stakeholders and districts.

#### **4.4 Accountability Approach Financing**

The accountability approach will be funded from domestic resources from government as well as support from development partners.

#### **4.5 Technical Assistance Needed to Fully Implement the Accountability Approach**

The Government will require technical and financial support from international and regional organizations and development partners such as UNFPA, UNESCO, UNICEF, WHO, UNDP, the Office of the UN Resident Coordinator, and the World Bank to achieve the SDGs for Adolescent Well-Being by 2030.

The technical assistance required is to support the continuous professional development of MDAs officials and partners, funding baseline studies, strengthening monitoring and evaluation and providing technical personnel to accelerate results on data, monitoring and evaluation.

**4.6. Any additional information:**

None
------

**5. COMMITMENT LAUNCH TIMELINE**

<p>We take note of the recommendation to launch the Commitment at the national level either before or after its presentation at the SDG Summit in September 2023 and that this milestone offers an opportunity to showcase our commitment as a country to invest in and promote the well-being of our adolescents and youth. We will use various media platforms to amplify our Commitment, in collaboration with the SDG partnership.</p> <p>The validation of the National Commitment was done by the Adolescent Well-Being Technical Working Group and was endorsed by the NPC Executive Management.</p> <p>We commit to launch the Commitment in the country after the UN High level Summit in New York which takes place on 18-19 September 2023 and before the Global Forum on Adolescents in October 2023.</p>
---