

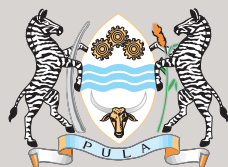


BOTSWANA

MILLENNIUM DEVELOPMENT GOALS STATUS REPORT 2004



ACHIEVEMENTS, FUTURE CHALLENGES AND CHOICES



Republic of Botswana



UNITED NATIONS

Key Socio-Economic Indicators

Indicator	Value	Year	Source
Population size [million]	1.7	2001	Population Census
Annual population growth rate	2.3%	2001	Population Census
Total Life expectancy at birth [years]	56	2001	Population Census
Male Life expectancy at birth [years]	53	2001	Population Census
Female Life expectancy at birth [years]	59	2001	Population Census
Real GDP per capita [USPPP\$]	7,820	2001	UNDP HDR 2003
Real GDP per capita [Pula]	9,788	2002	CSO – National Accounts
Human Development Index [rank]	125	2003	UNDP HDR 2003
Percentage of population below national poverty line *	37.4%	2001	Poverty Reduction Strategy
Prevalence of HIV/AIDS [15-49 years]	35.4%	2002	Sentinel Survey 2003
Percentage of underweight children (under 5 years)	6%	2003	Ministry of Health
Infant mortality [per 1,000]	56	2001	Population Census
Under five mortality [1,000]	74	2001	Population Census
Maternal mortality [per 100,000]	326	1991	Estimated from Census
Total Adult literacy [%]	68.9%	1994	Literacy Survey
Male Adult literacy [%]	66.9%	1994	Literacy Survey
Female Adult literacy [%]	70.3%	1994	Literacy Survey
Net enrolment in primary education 7-13 years [%]	95.3%	2001	CSO-Education Statistics
Population without access to safe drinking water [%]	12.1%	2001	Population Census
Households relying on traditional fuels for cooking	46.0%	2001	Population Census

* Estimate [See MFD, 2002: A Review of Anti Poverty Initiatives in Botswana: Lessons for A National Poverty reduction Strategy].

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ACKNOWLEDGEMENTS

The process of developing the maiden Millennium Development Goals Report (MDGR) for Botswana started in September 2003. A broad range of stakeholders participated to ensure national ownership and relevance of The Report to Botswana.

The individuals who participated in this process, and to whom due credit should be given, are too many to enumerate by name. They are the men and women from government departments, civil society organisations and development partner institutions, who worked in the two theme groups – poverty and health – that did the basic drafting work; the staff of the Development Cooperation Division in the Ministry of Finance and Development Planning; the men and women who served in the Steering Committee; and the members of the United Nations Task Force on the MDG Report.

Due recognition also goes to the facilitating team from Development Management Associates (DMA) and Tiger Design and Graphics. DMA guided theme group and steering committee deliberations, coordinated the basic research towards the preparation of the document and pooled the various inputs into a coherent whole whilst Tiger Design ably handled the design and layout work.

The MDGR effort was as successful as it ultimately was because of able leadership from the Secretary for Economic Affairs in the Ministry of Finance and Development Planning and the UN Resident Coordinator and financial support from the Government of Botswana and the European Union, The UNDP's MDG Trust Fund, The UNFPA's MDG Fund, and the British High Commission.

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ABBREVIATIONS

ACP	-	African, Caribbean and Pacific
AGOA	-	African Growth and Opportunity Act
AIDS	-	Acquired Immuno Deficiency Syndrome
ANC	-	Ante Natal Clinic
ARV	-	Antiretroviral Therapy
ASRH	-	Adolescent Sexual and Reproductive Health
BCG	-	Bacillus Calmette Guerin
CBOs	-	Community Based Organisation
CEDA	-	Citizen Entrepreneurial Development Agency
CHBC	-	Community Home Based Care
CSO	-	Central Statistics Office
DOTS	-	Directly Observed treatments-short course
DPT	-	Diphtheria Pertussis Tetanus
EPI	-	Expanded Programme on Immunisation
FDI	-	Foreign Direct Investment
GDP	-	Gross Domestic Product
HAART	-	Highly Active Antiretroviral therapy
HIV	-	Human Immuno Virus
IMF	-	International Monetary Fund
ICT	-	Information Communication Technology
IMR	-	Infant Mortality Rate
IPT	-	Isoniazid Preventive Therapy
MDGs	-	Millennium Development Goals
MDGR	-	Millennium Development Goals Report
MFDP	-	Ministry of Finance and Development Planning
NCSA	-	National Conservation Strategy Agency
NDP	-	National Development Plan
NGO	-	Non-Governmental Organisation
OECD	-	Organisation for Economic Cooperation and Development
OPV	-	Oral Polio Vaccine
PDL	-	Poverty Datum Line
PEM	-	Protein Energy Malnutrition
PMTCT	-	Prevention of Mother to Child Transmission
RAD	-	Remote Area Dwellers
RADP	-	Remote Area Development Programme
RNPE	-	Revised National Policy on Education
SADC	-	Southern African Development Community
STI	-	Sexually Transmitted Infection
U5MR	-	Under 5 Mortality Rate
UNDP	-	United Nations Development Programme
VCT	-	Voluntary Counselling and Testing
WAD	-	Women's Affairs Department

FOREWORD

Signing on to the Millennium Declaration in 2000 and subsequently embracing the eight goals that are now referred to as the Millennium Development Goals (MDGs) was a sovereign act for Botswana. We willingly associated ourselves with the logic of the MDGs because we see poverty as an emergency all countries should do all they can to overcome so that human beings will, wherever they are, have opportunities for healthy and sustainable livelihoods.

We committed ourselves to the MDGs because we accept that to make significant and lasting progress against poverty, quantum gains are required in health, education, sustainable use of environmental resources, and equitable North-South cooperation to promote flows of trade, investment, technology, and aid resources.

It should also be noted that the MDGs resonate well with the development ideals we espouse in Vision 2016. Even the most cursory review of our development philosophy and practice will show that our commitment to inclusive development predates the MDGs.

Commentators across the world frequently single out Botswana for good performance in policy making and effective delivery of services to the people. For instance, in its 2003 Report, the United Nations Economic Commission for Africa ranks Botswana number one in Africa on its Expanded Policy Support Index, which captures performance in three broad areas - macroeconomic policies, poverty reduction policies and institution building. We are especially proud that our poverty policies and programmes were judged Africa's best.

We accept this honour without any pretence that our policies and programmes are adequate. Still, post independence Botswana has made great progress against poverty. We are now, as individuals, households and communities, substantially richer than we were at independence. We are now also substantially more literate. Had it not been for HIV/AIDS, I would also be saying that we are now substantially healthier, for we have delivered meaningful access to health services to Botswana cross our expansive country.

Yes, too many Botswana, an estimated 47% of the population in 1994 and a projected 36.7% in 2000, live below the poverty line. But it is not for lack of effort, or even misdirection of effort, that we have a higher incidence of poverty than countries of comparable economic standing. On the contrary, it is because we face especially difficult structural bottlenecks – a small population, a narrow economic base, a poor natural resource endowment (apart from diamonds) - that the return on our development resources is relatively low.

Quite often, those who question the efficacy of our policies and programmes trivialise the structural challenges we face. We must rank among the countries with the highest per capita costs for service delivery because of the spatial distribution of our small population. Our villages do not provide adequate markets to sustain local enterprises. Neither does our natural resource base provide a natural platform for mass creation of low skill employment opportunities. Unlike other African countries, we cannot earn substantial per capita output and income yields from small per capita investments in agriculture for large sections of the population.

This report accords us an opportunity to get Botswana to dialogue on the development situation in our country and to take the world into our confidence, so that through our own ideas and those of our partners and friends, we may refine our strategies for the future.

HIV/AIDS remains the dominant development challenge of our time because of the damage it has caused and continues to inflict on everything that we have achieved as a nation in the last 37 years: good health and longevity, human capital, institutional capacity, and social capital. Already we are witnessing an upsurge in infant and child mortality, and the incidence of tuberculosis.

Other issues central to our success as a nation are discussed under Goal 8: Building a global partnership for development. These are issues of foreign trade, investment and aid; knowledge creation and dissemination; and technology transfer and diffusion. They require us to focus our energies on raising productivity and the international competitiveness of our goods, and to add our voice to the call for fair trade rules. These issues are central to our National Development Plan goal to achieve "...sustainable diversification through competitiveness in global markets".

Also central to this goal is our capacity to harness the opportunities created by regional and continental arrangements such as the Southern African Customs Union (SACU), the SADC Free Trade Protocol and the New Partnership for Africa's Development (NEPAD). They promise access to bigger markets, help mitigate the disadvantage we suffer on account of market size, and in the specific case of SADC and NEPAD, provide a basis for regional co-operation in the provision and management of regional public goods to support development.

Foreign aid and development co-operation served us well in the formative stages of our economic success. Now it is central to our war of survival against HIV/AIDS. We need the goodwill, expertise, technologies and financial resources of others to find preventive and curative solutions to our health problems, including HIV/AIDS.

Finally, two observations in this report warrant emphasis. The first relates to the urgent need for us to strengthen our statistical capacity so that we may more effectively measure our performance and better inform our policies and programmes. Second, Botswana must, as individuals and as families, look less towards the state, and more towards themselves, for their own development. And the state should in turn seek to empower people rather than to do things for them.



Hon B. Gaolathe

Minister of Finance and Development Planning

PREFACE

It has been a great pleasure for the entire UN family in Botswana to participate in the 'birth' of this maiden Millennium Development Goals Report for Botswana, which has come to life as the result of extensive cooperation between the Government of Botswana, civil society stakeholders and the UN system.

At the Millennium Summit in September in 2000, the member states of the United Nations reaffirmed their commitment to the MDGs. It is important to note that this report reflects Botswana's own development priorities as articulated in Vision 2016, priorities agreed upon by the citizens of Botswana long before the MDGs were born.

The question is not whether a country like Botswana or a community within the country is on track vis-à-vis the global targets. What we must ask is whether the greatest and fastest possible progress is being made, given the specific constraints faced by the country or community and given the level of external support in the form of trade, aid and technology.

So what the MDGs can hopefully help us do is to think 'global' while we do our utmost to act 'local'!

Overall analysis of the goals leaves a generally positive picture of Botswana, not only due to its rapid economic growth and development since independence, but also because of the manner in which the government and people of Botswana have utilized the growth.

Botswana used to be one of the poorest countries in Africa. The prudent use of the diamond wealth, combined with good governance, has resulted in the country enjoying economic growth and increasing prosperity during several decades, and this has propelled Botswana towards the middle-income country status, in ways that have inspired other nations on the continent.

We all realize that Botswana is presently facing great challenges which may wipe out many of the development efforts and results produced since independence. Achieving all of the MDGs, or ensuring that progress in vital areas is not eroded, will be difficult unless we act with resolution to overcome these challenges now.

The most critical challenges include a high prevalence of HIV/AIDS, poverty, and environmental degradation. In addition there is globalisation, with flows of trade and finance among nations playing an increasingly critical role, presenting Botswana and her people with exciting opportunities, but certainly also some difficult choices and even some serious threats.

To tackle these challenges and achieve the MDGs, I would like to assure the government and people of Botswana that the entire family of UN agencies, programmes and funds will be here to strengthen our support and advise. Not only support and advise to government, but also to civil society and the private sector.

Mobilisation of and coordination among all stakeholders will be an important precondition for bringing the MDGs all the way to the MDG 2015 or Vision 2016 goalpost. We need to ensure that the targets set reach the kitchen table where

families meet, the kgotla where communities meet, the conference rooms where different decision-makers meet, and the parliamentary chambers where legislation is decided upon.

We also need to ensure that the necessary financial resources are provided to the areas given priority. But in doing that, we need to understand that while *'money changing hands'* is an important element in the process of development, the real impetus for change most often comes from *'ideas changing minds'*.

The present war being waged on HIV/AIDS in this country is proof of this. Ultimately, real change is an act of freedom, not an act of compliance with rules and conditionalities associated with *'money changing hands'*.



Mr. Bjørn Førde

UN Resident Coordinator

INTRODUCTION

The UN global conferences of the 1990s drew up a number of key global development goals and targets. They became known as the *International Development Targets*.

In September 2000, 146 Heads of State and Government – and 189 nations in total – adopted the *Millennium Declaration*, outlining peace, security and development concerns broadly speaking – including the environment, human rights, and governance.

MILLENNIUM GOALS AND TARGETS

The Declaration mainstreams a set of inter-connected and mutually reinforcing development goals into a global agenda – the *Millennium Development Goals* [MDGs]. The MDGs are a synthesis of the goals and targets needed to be achieved to effectively combat poverty, namely:

- *Goal 1: Eradicate extreme poverty and hunger*
- *Goal 2: Achieve universal primary education*
- *Goal 3: Promote gender equality and empowerment*
- *Goal 4: Reduce child mortality*
- *Goal 5: Improve maternal health*
- *Goal 6: Combat HIV/AIDS, malaria and other diseases*
- *Goal 7: Ensure environmental sustainability*
- *Goal 8: Develop a global partnership for development*

Numerical targets and appropriate indicators have been set for each goal, to be achieved between 1990 and 2015. A common list of 18 targets and more than 40 indicators corresponding to these goals has been prepared collaboratively by the UN, the World Bank, IMF and OECD to ensure a common assessment and understanding of the status of the MDGs at the Global, Regional and National level.

GLOBAL AND NATIONAL MONITORING

Monitoring and reporting on the MDGs will take place at global and country levels to help keep poverty issues at the top of national and global development agendas.



By the end of 2004, according to decisions taken by the UN General Assembly, all developing countries should have produced their first report on the status regarding progress in achieving the goals.

It has also been decided that the UN Secretary General should report annually to the General Assembly on a *subset* of the MDGs and provide a *comprehensive report every five years*. Such a comprehensive report will be presented to the General Assembly in 2005.

NATIONAL OWNERSHIP

It should be emphasized that the MDG reporting should be a fully nationally owned process. It is equally important to note that the MDG process is not just about reporting on progress towards the MDGs. Its more fundamental worth emanates from its function as an agreed framework of action that individual countries can use, each identifying and pursuing its priorities according to its own development imperatives, but working towards the same universal set of ideals.



The MDG framework is not intended to supplant and replace whatever frameworks countries are using to guide their work. Rather, it is intended to keep poverty issues, as well as other issues of sustainable development, at the forefront in public policy by providing focus on a core set of development goals to maximise human development.

To serve this purpose, an MDG Report should target policy makers; institutions of civil society - organisations and institutions that give voice to the people and facilitate their participation in national and community level decision-making processes; organisations that influence policy direction; and the people themselves.

The MDGs are in the first instance only an agreed framework for action. They do not provide a road map for achieving the development outcomes desired. Each country is required to set its own priorities and design and implement strategies for achieving them within the MDG framework. Targets must be adapted to local circumstances to create meaningful ownership.

THE PROCESS IN BOTSWANA

The process of developing this maiden Millennium Development Goals Report (MDGR) for Botswana started in September 2003. Two principles, national ownership and relevance for a wider national audience, guided the process of preparing the report. To this end, three strategic approaches were used:

- *The MDGR process was officially launched on 4 September 2003 at a national stakeholders' orientation seminar. Over 150 people from various sectors of society attended the seminar. The relevance and urgency of the MDGR were established, and consensus reached on the structure and orientation of the report.*
- *A high-powered Steering Committee composed of Chief Executive Officers from Government ministries/departments, civil society and development partners was established to oversee the process and assume final responsibility for producing the report.*
- *A 45-person Technical Working Group (TWG) drawn from the public, private, civil society, and development partner sectors was constituted for purposes of drafting the report. Two Theme Groups were constituted from within the TWG. Each assumed primary responsibility for four goals.*

The theme groups and the TWG carried out their work through a combination of working sessions and desk reviews. Primary data was not sought. A local consult-

ing firm facilitated these processes and provided technical backstopping services.

From key national vision, planning, policy and strategy documents, the TWG drew a set of national development goals and targets and harmonised them with the MDGs. These goals and targets were reviewed and endorsed by the Steering Committee. The critical concerns in the choice of goals, indicators and targets were data availability and consistency with MDGs and national development priorities.

Following TWG consensus on the goals, indicators and targets, a drafting team was appointed. The team held a working retreat from 27-28 October 2003 and prepared the first working draft. In addition to four TWG sessions, each theme group held six working sessions to review drafts. Further to these, consultations were with key ministries to clear up outstanding agency-specific issues. The result of these sessions and targeted consultations was a final draft report.

A one-day session of the Steering Committee held on 5 March 2004, reviewed the final draft and approved it for publication subject to the incorporation of its comments.

ORGANISATION OF THE REPORT

The report is organized according to the UN guidelines on MDG country reports. The first section outlines the overall development context in broad terms. The eight successive sections assess the country's progress towards the attainment of each of the MDGs.

Each section deals with the status and trends, challenges, supportive environment, priorities for development assistance, and monitoring environment.

Efforts have been made to present the findings in such a way that they will be accessible to the broad public. This will hopefully also make it possible to use the report as a background document for discussions on various occasions around the country, like in meetings of District Councils, Village Development Committees, meetings organised by the Vision 2016 Council, meetings of NGOs, etc.



ASSESSMENT OF MONITORING ENVIRONMENT

No claim is made here that the standard adopted in this report on assessing the monitoring environment is fully objective. It is however similar to standards adopted by similar reports in other countries. The following should be noted with regard to the assessments made at the end of each goal:

- *Data gathering capacity* is rated as 'strong' if there is capacity for periodic, regular and endogenous collection of nationally representative data with respect to a particular MDG.
- *Quality of recent survey information* is rated as 'strong' if the most recent data set is evaluated to be valid, reliable, replicable and consonant with other recent allied data sets and trends.

- *Statistical tracking capacity* is rated as 'strong' if there exists a fairly long-standing mechanism, already employed in at least two episodes, to analyse information and to engage in a multivariable analysis in a sustained manner.
- *Capacity to incorporate statistical analysis into policy* planning and resource allocation mechanism is rated 'strong' if new information and analysis is systematically fed into policy-making, planning and resource allocation.
- *Monitoring and evaluation mechanism* is rated as 'strong' if a tradition of systematic, information-based review and re-planning is a constituent component within a program/system.

STATUS AT A GLANCE

The chapters presenting the Millennium Development Goals 1 to 8 will in some detail establish the developments and achievements that have taken place since 1966, present the major challenges, and discuss what needs to be done to reach the future targets. The table on the next page presents a quick overview of the status on each of the 8 goals, indicating whether the targets are likely or unlikely to be met.

Status on MDG Progress

Goals	Targets	Will goal be met by 2015?	Supportive Environment for achieving goal
1. Eradicate Poverty and Hunger	1. No person living below the Income Poverty Datum Line by 2016	Unlikely	Strong
	2. Reduce by 50 percent, the proportion of people who suffer from hunger and malnutrition by 2016	Likely	Strong
2. Achieve Universal Primary Education	3. To achieve universal access to 10 years of basic education by 2016	Achieved	Strong
	4. To improve the relevance and quality of basic Education by 2016	Likely	Strong
3. Gender Equality & Empowerment	5. To reduce gender disparity in all education by 2015	Achieved	Strong
	6. To reduce gender disparity in access to and control of productive resources by 2015	Likely	Strong
	7. To reduce discrimination and violence against women, and the incidence of rape by 50 percent by 2011	Potentially	Strong
	8. To increase the participation of women in leadership, governance and decision-making by at least 60% by 2016	Likely	Strong
4. Child Mortality	9. To reduce the Infant Mortality Rate (IMR) from 48/1000 live births in 1991 to 27/1000 in 2011	Potentially	Strong
	10. To reduce by 2/3, the under-five mortality rate (U5MR) from 63/1000 live births in 1991 by 2011	Potentially	Strong
	11. To reduce the PEM rate amongst children from 18 percent in 1990 to 8 percent by 2011	Potentially	Strong
	12. To increase the proportion of 1-year-old children who are fully immunised from 67% in 1990 to at least 80% by 2009	Likely	Strong
5. Maternal Health	13. To reduce the maternal mortality rate from 326/100 000 live births in 1991 to 150/100 000 by 2011	Potentially	Strong
6. Combat HIV/AIDS & Other Diseases	14. To halt and reverse the incidence of HIV, particularly amongst the youth by 2016	Likely	Strong
	15. To reduce the number of infants born to HIV infected mothers who are HIV positive by their 18th month by half by 2006 and to zero by 2009	Potentially	Strong
	16. To reduce the morbidity and mortality caused by TB	Likely	Strong
	17. To reduce the incidence of confirmed cases of malaria to below 20 per 1000 people	Potentially	Strong
7. The Environment	18. Reduce, by 50 percent, the proportion of people without sustainable access to safe drinking water by 2016	Likely	Strong
	19. Reduce conflict between population growth, land usage and environmental and natural resources degradation	Potentially	Good
	20. Promote environmental education and awareness necessary to reduce contamination and achieve sustainable development	Potentially	Good
8. Global Partnership	21. Develop further an environment conducive for beneficial trade and foreign direct investment	Likely	Strong
	22. In cooperation with the private sector, make available the benefits of new technologies	Likely	Strong

BOTSWANA FROM INDEPENDENCE TO VISION 2016

Botswana prepared this Millennium Development Goals Report (MDGR) for a number of reasons. One is to discharge a sovereign responsibility as a member of the United Nations and as a signatory to the Millennium Declaration. The other is to accord Botswana an opportunity to engage in dialogue on their future, based on an understanding of developments since Independence in 1966 and the challenges Botswana will face in the future.

“...Botswana was one of those territories in Southern Africa, which had been intended for incorporation in what is today the Republic of South Africa. Although it never became necessary for us to take up arms to liberate ourselves, our people had to employ all the means of their command to resist being passed from the British to South African colonialism. In the uncertainty of who the colonial master would be, our country was left to stagnate, undeveloped. At independence therefore we had to start everything from scratch. Whilst other developing countries inherited a modicum of development infrastructure and social services we can categorically say that every facet of development in our country has been planned or produced by ourselves. We are proud of our modest achievements.”

Extracted from the speech of the Former President of Botswana Dr. Q.K.J. Masire at the state dinner hosted by HE the President of Socialist Federal Republic of Yugoslavia on 12 September 1983.

This report is therefore about Botswana’s experience with development and what Botswana hope to achieve in the context of their own development priorities and the global consensus priorities that constitute the MDGs. How has the country fared and with what strategies? What does the future hold for Botswana? Are there any special imperatives for the future? Can Botswana meet them?

HISTORICAL DEVELOPMENT CONTEXT

When Botswana gained independence from Britain in 1966, it was amongst the poorest of the world’s least developed countries. It had a poor resource base: cattle, the main resource; a small rural based and overwhelmingly illiterate population of about 500,000; a relatively vast expanse (about 582,000 km²) of semi-arid land; and wildlife.

Its prospects for development were widely considered bleak. Whereas better-endowed British colonies attracted significant development resources from the colonial power, resulting in the development of physical and institutional infrastructure, Botswana did not. Thus, as a colony, Botswana suffered serious development neglect.

Progress made since independence has, contrary to early prognoses, been remarkable, thanks to the discovery and effective management of mineral wealth, good policies and accelerated investment in the provision of basic services.

By the beginning of the 1990s, a favourable development climate had emerged and good results had been realised in a number of dimensions of human wellbeing. For instance, life expectancy, health, mortality rates, literacy, nutrition, personal incomes, and infrastructure, all improved considerably. Annual per capita GDP, expressed in 1994 prices, increased six-fold from P1, 682 at independence to P9, 793 in 2000.

The development process in Botswana is guided by six-year National Development Plans (NDPs). All NDPs published after 1997 are themselves guided by Botswana’s “*Long Term Vision for Botswana: Towards Prosperity for All*”.

This vision, popularly referred to as *Vision 2016*, articulates Botswana’s long-term development aspirations and provides a broad framework for development. Direct goal-to-goal comparison between Vision 2016 and the MDGs may suggest the two are different. But they have great similarities, as shown on page 15.

Matching Vision 2016 Goals with the MDGs

Vision 2016 Pillars/ Goals	Millennium Development Goals
1. An educated, Informed Nation	MDG # 2: Achieve Universal Primary Education With a primary school enrolment rate of 106%, Botswana has achieved this goal. Vision 2016 thus sets higher priorities in the dimensions of quality, relevance and access (10 years of basic education).
2. A prosperous, Productive and Innovative Nation:	MDG # 1: Eradicate Extreme Poverty and Hunger MDG # 7: Ensure Environmental Sustainability The key elements of this Vision Pillar are sustainable growth and diversification; employment creation; access to shelter; and environmental sustainability.
3. A compassionate, Just and Caring Nation	MDG # 1: Eradicate Extreme Poverty and Hunger MDG # 6: Combat HIV/AIDS, Malaria & Other Diseases This Vision pillar's main priorities are poverty, inequality and social safety nets; and Health and HIV/AIDS..
4. A Safe and Secure Nation	MDG # 1: Eradicate Extreme Poverty and Hunger MDG # 3: Promote Gender Equality & Empower women This pillar addresses some broader issues of human security, e.g. disaster preparedness, to deal with amongst others, drought, animal diseases and floods; national defence; and crime (including violence against women and children.
5. An Open, Democratic and Accountable Nation	MDG # 8: Develop a Global Partnership for Development The fifth pillar focuses on leadership, which is the main prerequisite for international development cooperation, especially FDI, and to a lesser extent aid and trade.
6. A Moral and Tolerant Nation	MDG # 3: Promote Gender Equality & Empower women The key elements of this pillar are values – morality and tolerance. Under tolerance, the Vision gives priority to elimination of discrimination against women, children, the aged and the disabled and speaks against sexual harassment.
7. A proud and United Nation	MDG # 8: Develop a Global Partnership for Development Promotes nationhood based on shared values and shared aspirations. An important element of this Vision pillar, which is also essential to MDG # 8, is good governance and participation.

KEY CHALLENGES FOR THE FUTURE

The overarching development priority of any society is to secure, for all, freedom from poverty and all other forms of deprivation; an expanded range of choices; and high standards of well-being and happiness. Thus, in addition to eradicating poverty, Botswana desires decent work, good health, literacy, knowledge and freedom of association, and of participation, for its people.

By most accounts, Botswana has to date acquitted itself very well in its pursuit of these goals. This is the story to be read from trends in aggregate indicators of development such as per capita income, literacy, and mortality rates. But Botswana now has a more complex economy and a more complex society, having successfully made the transition from least developed country to a middle-income country. Its development challenges are also considerably more complex. Four stand out as particularly important:

1. HALTING AND REVERSING THE SPREAD OF HIV/AIDS AND ROLLING BACK THE DAMAGE IT HAS DONE.

In just two decades, HIV/AIDS has emerged as a phenomenal threat to everything that Botswana have achieved since 1966 and to prospects for realising their future aspirations. It has eroded hard won gains in health. Prior to the advent of HIV/AIDS, Botswana was well on course towards eradicating tuberculosis and significantly reducing child and maternal mortality. Life expectancy would have broken the 70-year threshold but has instead dipped to independence levels.

HIV/AIDS is eroding the very viability of development strategies that Botswana has hitherto pinned its hopes on for sustainable human development. For instance, it starves education and skills development of resources even as it erodes the efficiency of investment in education. By attacking both labour supply and labour productivity, it makes it difficult for Botswana to attract FDI and develop industrial capability.

2. SECURING A FAIR SHARE OF THE BENEFITS OF GLOBAL PROSPERITY.

This challenge implies three interrelated imperatives: (i) managing trade and investment to meet Botswana's development needs and recognising that the development promise of trade and FDI is neither certain nor readily securable; (ii) building a national technological capability to enhance productivity and competitiveness; and (iii) raising productivity and competitiveness in the non-mining sector to levels that would allow Botswana to compete globally, diversify the economy and sustain growth into the future.

3. EMPOWERING BATSWANA EVERYWHERE TO BE VIABLE AGENTS OF THEIR OWN DEVELOPMENT.

Vision 2016 and the MDGs are not agendas for governments or development institutions. It is the people who desire development and it is the people who must own and drive the development process. True empowerment will require, amongst others:

- **SUCCESSFUL HUMAN CAPITAL FORMATION:** Not only are the people the purpose of development, they are also the main resource for development. So, Botswana's

education and skills development programmes must produce globally functional workers and citizens and secure global competitiveness for Botswana.

- **THE RETREAT OF STATE PATERNALISM:** Deliberate measures must be taken to create, in every Botswana, a strong sense of responsibility for own development, and reduce dependence on the state. Similarly, the manner

Botswana at Independence: Some Critical Facts

- National budget was less than \$US1.5 million.
- Over 80 percent of the population lived in rural areas, surviving on low yield arable farming and livestock.
- The main economic activity was cattle farming.
- Most of the country had no roads, electricity, safe drinking water or health facilities.
- Far less than half of all children attended primary school, and very few went on to enrol in the six missionary secondary schools that existed.
- Wage employment opportunities were very limited. South African mines were the main source of formal employment for men.

of delivery of development services should empower people to be part of the development process, and to demand accountability and transparency from their leaders and institutions, rather than encourage passive receipt of benefits and gratitude on the part of the people.

4. ENSURING THAT POLICIES AND PROGRAMMES ARE FULLY IMPLEMENTED.

Botswana has good development policies and programmes to support its development aspirations but often fails at the level of implementation, where personnel constraints and weaknesses in management processes frustrate coordination, implementation, monitoring, evaluation and feedback processes.



Commitment to Vision 2016 and the MDGs provides new and needed impetus to development. Despite Botswana's achievements to date, Vision 2016 and the MDGs require the nation and its institutions to appraise the development process anew in order to improve performance and meet the targets both frameworks set.

Botswana's need to strengthen capacity to design, harmonise and implement laws, policies and programmes is urgent, and so is the need for Government departments to improve their business processes and culture.

Three of the questions that such a process should resolve are in fact already being debated and these are:

■ ***Does Botswana have an adequate system in place to monitor performance against its development targets and evaluate its policies and programmes?***

To be managed effectively, development must be measured adequately. In this regard, Vision 2016 and the MDGs require monitoring and evaluation systems that are adequate in at least five dimensions: timeliness, adequacy, accuracy, relevance and accessibility of information needed by policymakers, implementers, civil society and the general public to engage meaningfully in the development process.

■ ***Are there constituencies that are largely being bypassed by Botswana's prosperity?***

Aggregate measures of success sometimes mask significant inequalities – geographical, intergenerational, ethnic, gender based, etc. There is a fundamental discord between inequality and prosperity for all, and inequality and sustainable human development that cannot be captured by average measures of progress, and yet over the long-term, can undo hard earned gains. Lack of disaggregated indicators of development may mask significant differences among constituencies. It thus makes for inefficient policymaking and disempowers decentralised institutions of governance.

■ ***What should Botswana do to ensure that the people see themselves as the primary drivers of their own development?***

The dependency syndrome is a potent threat to development, as is the paternalism that creates it and feeds off it. Whatever the magnitude of the problem,

Botswana need to take charge of their own development, as individuals and as communities. The Government and its development partners should thus act as, and been seen as, facilitators rather than benevolent providers of development services. Their proper role should be to nurture human agency and participation. And when they consult the people, it should be to engage rather than to inform them.

TRACKING PROGRESS TOWARDS THE GOALS

Monitoring and evaluating progress towards the Vision 2016 and MDG targets is key to achieving the goals themselves and informing national dialogue. While Botswana has a relatively good system for compiling national statistics, the system is not yet adequate. One urgent statistical challenge is to disaggregate data to meet the requirements of key constituencies, e.g. gender and the districts.

Second, the time series on far too many of the basic indicators of well-being, for instance, poverty and maternal mortality, are inadequate. This deficiency impairs meaningful monitoring and evaluation of progress and the effectiveness of the attendant policies and programmes. Thus, failing policies and programmes may be maintained for too long and successful policies not recognised early enough.



Third, there is need to strengthen national capacity to collect, process, analyse and disseminate data to inform policies and programmes and to meet the information needs of end-users i.e., policy makers, policy implementers, researchers, academics, advocacy groups and business. Improving user access to information, especially through information and technology mediums, should also be given priority.

The table on page 19 provides an overall assessment of monitoring and evaluation capacity in Botswana. The chapter on each goal will address monitoring and evaluation in more detail.

Assessment of Monitoring and Evaluation Capacities

Elements of Monitoring Environment	Goal 1	Goal 2	Goal 3	Goal 4	Goal 5	Goal 6	Goal 7	Goal 8
Data gathering capacities	Strong	Strong	Fair	Strong	Fair	Strong	Weak	Strong
Quality of recent survey information	Strong	Strong	Fair	Strong	Fair	Strong	Weak	Strong
Statistical tracking capacities	Strong	Fair	Fair	Strong	Fair	Strong	Weak	Strong
Statistical analysis capacities	Fair	Fair	Weak	Fair	Fair	Fair	Fair	Fair
Capacity to incorporate analysis into policy	Fair	Fair	Fair	Strong	Fair	Fair	Fair	Fair
Monitoring and evaluation mechanisms	Fair	Fair	Weak	Strong	Fair	Strong	Weak	Fair

GOAL 1



ERADICATE POVERTY AND HUNGER

“*But in modern conditions when everyone does not have equal resources on which to base his efforts to improve his lot, we must beware of assuming that everyone who is poor is poor because he is lazy. A lean cow cannot climb out of the mud, but a good cattleman does not leave it to perish... Above all we have to guard against the greatest threat of all to our future welfare a society divided between extremes of wealth and poverty.*”

SIR SERETSE KHAMA

Targets	Will target be reached?	Conducive Environment?
1. No Person Living Below the Income Poverty Datum Line by 2016	Unlikely	Strong
2. Reduce, by 50 percent, the proportion of people who suffer from hunger and malnutrition by 2016	Likely	Strong

Policy and programme support for poverty reduction is strong. Expansive public investment in education and health builds capabilities essential for human agency. More than two decades of sustained macroeconomic stability, economic growth and generous entrepreneurship and job creation incentives provide opportunities for human agency, whilst a comprehensive system of social safety nets provides adequate welfare cover for the indigent. Even so, these measures translate into slow progress in poverty reduction because of structural deficiencies in the economy.

1. WHAT IS THE SITUATION LIKE?

Despite its macroeconomic success, Botswana has a serious problem of poverty compared to countries of similar economic stature. In Botswana, poverty is fundamentally a structural problem. It is a consequence of a narrow economic base, which limits opportunities for gainful employment; a poor endowment of agro resources; a small and sparsely distributed population - 1.7 million in 2001; and, as a result of population size and distribution, a small and fragmented internal market. Collectively, these attributes translate into limited capacity for sustainable employment creation and poverty reduction.

The Botswana Poverty Line (PL) is based on six categories of items which are considered to constitute the basic needs of a family in Botswana (CSO 1991):

- ◆ food ("the minimum necessary to maintain physical health")
- ◆ clothing ("to meet minimum necessary to meet minimum standards of legality, decency, practicality and warmth")
- ◆ personal items
- ◆ household goods
- ◆ shelter
- ◆ and miscellaneous items

PEOPLE LIVING BELOW THE INCOME POVERTY DATUM LINE

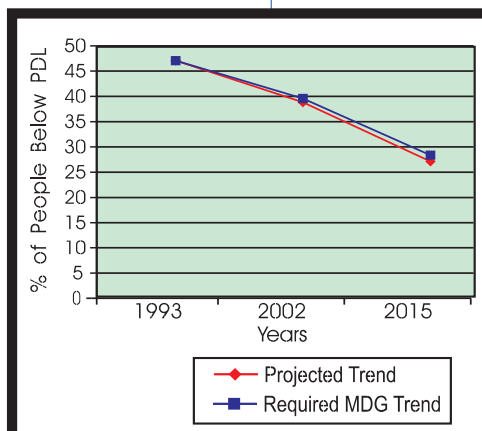
Up to date statistics on the nature and extent of poverty will become available only after the results of the 2002 Household Income and Expenditure Survey (HIES) are released in 2004. Available data do however show the following:

- In 1993, an estimated 47% of the population lived below the poverty datum line of approximately P100 per person per month in 1997 prices, down 12 percentage points from 59% in 1985. Of these, an equivalent of 30% of the total population lived in extreme poverty, compared to 41% in 1986. A 2001 estimate suggests that had the rate of poverty reduction that obtained between 1985 and 1993 been sustained post 1993, the national headcount poverty ratio would have fallen to 36.7% in 2002.
- Rates of poverty are higher in rural areas, possibly because of fewer opportunities for formal sector employment. Over half of the rural population was classified "poor" in 1994 compared to 46 percent in urban villages and 27 percent in towns and cities.
- Poverty has a moderate gender bias. In 1993, 50% of female-headed households were poor compared to 46% for male-headed households, respectively down from 60% and 58% in 1985.

The more immediate causes of vulnerability to poverty are:

- (a) unemployment and underemployment, which are primarily determined by lack of education and skills;
- (b) ill-health, in particular HIV/AIDS, which takes people out of work, destroys accumulated wealth and creates new groups of vulnerable people;
- (c) lack of access to productive assets such as land, water and finance; and
- (d) lack of access to markets.

Proportion of Population Living Below the Poverty Line



The erosion of traditional support mechanisms as the economy modernises is also considered a source of vulnerability. For instance, the *Mafisa* system, through which a poor family could get a small number of livestock, usually cattle, from a better off family for purposes of milking, draught power and possibly seed stock of its own, has all but disappeared. Similarly, it is now difficult for poor families to barter their labour for draught power

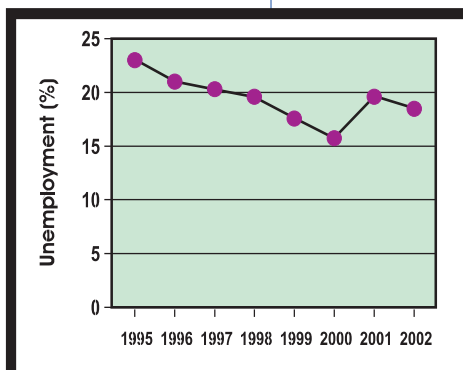
because cash is the dominant medium of exchange. The extended family support system is also collapsing under pressure from modernisation and HIV/AIDS.

Botswana's approach to poverty reduction is three pronged. The *first* prong is that of empowerment through health, education and skills development. The *second* focuses on the creation of opportunities for gainful employment through growth and incentives for entrepreneurship and job creation. The *third* is social welfare. Thus, trends in patterns of livelihood, unemployment, education, health, economic growth and investment, warrant close attention.

Livelihood sources have changed profoundly in post Independence Botswana, due in part to an unexpected mineral led economic boom. Agriculture, which was the dominant sector at independence, accounting for 40% of GDP, has become a marginal source of income for the majority of rural households, eclipsed by, amongst others, private income transfers from the non-farm sector. Its GDP share is now less than three (3) percent while its contribution to employment has declined from 15% in 1991 to three per cent in 2001.

Botswana has made modest progress against unemployment in the last decade. In 2001, the rate of unemployment was estimated at 19.3%, a small improvement from the seven-year peak of 20.9% in 1995 but more or less on a decade long average. The persistence of high rates of unemployment in the 1990s despite high rates of economic growth is a result of the dominance of mining, which is a capital-intensive activity. Available data show that unemployment is concentrated amongst the lowly skilled people and the youth, and that it is a bigger problem in rural areas.

Rate of unemployment
1995-2002



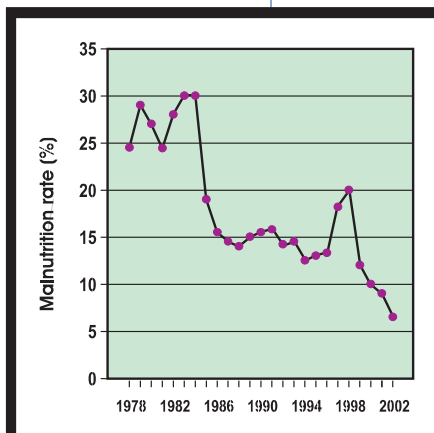
NUTRITION, HUNGER AND FOOD SECURITY

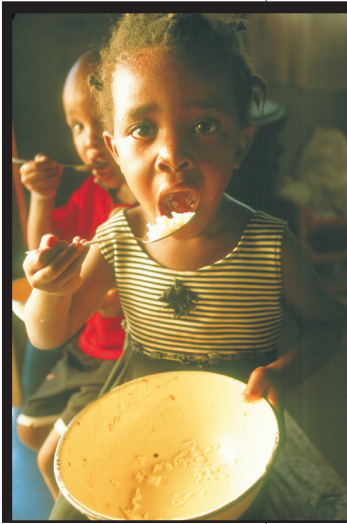
Although Botswana is drought prone and has a high incidence of poverty, it has made good progress against hunger and malnutrition. In 2002, under-five malnutrition, which is adopted as the proxy for malnutrition in this report, was estimated at 6.5%, down from 14% in 1991, due in part to a comprehensive supplementary feeding programme for children under five and an effective system of social safety nets. These results are also due to improvements in household income and food security, and access to health services.

Overall nutrition for the nation also benefits from a school feeding programme and a range of welfare/development programmes - the Remote Area Development Programme (RADP), the Old Age Pension, World War II Veterans grants, Destitution Policy, Orphan Care Programme, Home Based Care etc. - with a focus on basic needs for groups vulnerable to poverty and hunger.

The physical availability of food is assured through a national food security policy and strategy that recognise Botswana's limitations in food production. The policy seeks to ensure that Botswana adequately meets its food needs through a combination of increased domestic production and adequate capacity to import and store

Annual Under Five
Malnutrition Rate From
1978 to 2002





food supplies to supplement domestic production. Household food security is assured through a combination of measures that enhance household income security and transfers from Government to vulnerable groups.

In the specific case of national food security, a critical question is whether Botswana should pursue food self-sufficiency more aggressively. The New National Master Plan for Arable Agriculture and Dairy Development (NAMPAADD), a bold initiative that seeks to raise agricultural productivity and output through commercialisation, modern crop and animal husbandry techniques, and improved infrastructure and extension services, does in fact take Botswana in this direction but there are concerns about possible crowding out of small farmers.

Amongst poor households, an important source of vulnerability to hunger is inflation, which erodes real incomes. Botswana has managed to contain inflation to levels below ten per cent. Over the six years to 2003, the annual rate of inflation has remained below 8.5 percent. Food prices have also remained relatively stable. Food price stability and Government welfare support for vulnerable groups - the elderly, orphans and children - impact positively on household food security.

Although Botswana's natural agro-resources - soils and climate - are poor, quantum improvements in road and telecommunications infrastructure have reduced production and marketing costs and delivered an increasingly more integrated food production, marketing and distribution system. Further infrastructure development and the infusion of modern technology could further improve agricultural productivity and output and significantly enhance Botswana's food self-sufficiency position.

2. THE MAJOR CHALLENGES

The major challenges to the eradication of poverty in Botswana are threefold, viz.,

- (a) employment creation,
- (b) HIV/AIDS, and
- (c) adverse climatic conditions.

The underlying challenge, especially for (a) and (c) is in productivity growth and competitiveness.

CREATING OPPORTUNITIES FOR SUSTAINABLE GAINFUL EMPLOYMENT

Botswana's broad macroeconomic priorities can be summed up as macroeconomic stability, economic diversification and rapid and sustainable growth. On the basis of these, Botswana has enjoyed phenomenal success. Furthermore, sectoral strategies have been pursued with a view to translating this success into broad-based individual and household prosperity through two key entry points, human capital formation and employment creation. Employment creation has however been sluggish.

The overall strategy for employment creation emphasises private sector growth and investment, economic diversification, and export growth and diversification. Policy developments have since the early 1980s, when the Financial Assistance Policy (FAP) of 1982 and the Industrial Development Policy (IDP) of 1984 were introduced, reflected this policy conviction. How then, should future strategies for employment creation evolve?



First, FDI and export promotion are essential pursuits. FDI improves access to external markets and delivers the managerial, marketing, technical and techno-

logical resources necessary to raise productivity, product quality and competitiveness. Increasing the volume and range of non-traditional exports is an economic imperative because Botswana's domestic market is too small to sustain the levels of production necessary to deliver enough quality jobs to reduce poverty.

Second, citizen entrepreneurship development is a necessary requirement, socio-politically and economically, for developing sustainable industrial capability. It crowds in and legitimises FDI. It also forestalls future political instability over ownership

of the economy. Furthermore, being less flighty than FDI, growth in citizen investment is a matter of national economic security.

Serious reflection on the content of strategies for citizen entrepreneurship development is necessary though. In particular, the bottlenecks to be broken through state intervention must be thought through more carefully. For instance, should improving access to finance necessarily entail subsidised credit? Is access to finance in fact the priority bottleneck on growth in citizen entrepreneurship?

Third, job creation also requires a policy shift towards jobs with high skill and technology content and a similar shift in skills development. Investment in labour intensive activities, e.g., low skill manufacturing, has its own merits but only if it does not trap the economy in inefficient modes of production.

Slow modernisation of production systems and low rates of innovation are a threat to industrialisation in developing countries. Unless Botswana is adept at modernising its economy, it runs the risk of having its products competed out of both the export and domestic markets. Low technology labour intensive production that eschews modernisation cannot produce sustainable employment in an integrated and knowledge driven world economy. Rather, future growth can be more effectively secured through improvement in skills, technology, productivity, and export competitiveness across sectors.

The challenge therefore is to successfully make the transition to a high skill high tech economy as a response to the constraints imposed by the structure of the economy and the challenge to compete in an increasingly integrated and freer economy.

OVERCOMING HIV/AIDS AND MITIGATING ITS IMPACT

HIV/AIDS has made the battle against poverty considerably more difficult. At the household and individual levels, it erodes capacity to work, destroys accumulated wealth and creates new groups of vulnerable people. At the macro level, it erodes

state capability, the very foundation for poverty reduction. It also distorts public sector priorities and shifts resources from investment in incremental capacity towards capacity replenishment and maintenance.

HIV/AIDS has seriously eroded human wellbeing and the nation's accumulated assets, especially human and institutional capital, with dire consequences for poverty reduction.



A 2000 study on the "Macro-economic Impacts of HIV/AIDS in Botswana" predicts that by 2011, the proportion of households living below the poverty datum line will have risen by 6 per cent as a result of HIV/AIDS; that the headcount poverty rate will have risen by 4 per cent; and that the economy will, by 2021, be 33% smaller than it would have been without HIV/AIDS.

HIV/AIDS also reduces returns on development resources across sectors. In some, like education, agriculture and health, the effect may be so severe as to

cause deterioration in key indicators. How effective development can be in the context of HIV/AIDS is thus a matter of great concern.

COPING WITH ADVERSE CLIMATIC CONDITIONS AND MANAGING RISK AND VULNERABILITY TO NATURAL DISASTERS

So far, Botswana has coped well with drought, animal diseases and intermittent low intensity floods. Even so, the threat of natural and manmade disasters requires adequate disaster preparedness and management capacity.

This challenge is three fold, viz., to minimise exposure to natural disasters, to respond quickly and effectively when they occur, and to ensure speedy recovery. Meeting these challenges would, in the words of UN Secretary General, Kofi Annan, require "better decision-making, improved planning, effective risk management, innovation in development and environmental protection activities".

On the few occasions when disasters other than drought and animal diseases had struck, for instance, the occasional flood and veldt fires, Botswana's response has been adequate. Botswana's disaster preparedness capacity resides in several key institutions, including the Office of the President, which is in charge of strategy and coordination, the Ministry of Finance and Development Planning, which is responsible for drought, the Botswana Defence Force, which provides equipment and specialised personnel when required.

3. SUPPORT POLICIES AND PROGRAMMES

The battle against poverty requires, in the first instance, an efficient macro policy framework. The consensus view is that Botswana's fiscal, monetary and exchange rate policies meet this standard, as do its legal and regulatory regimes.

The second tier of interventions comprises sectoral and targeted interventions. The National Poverty Reduction Strategy is the latest of second tier interventions,

adding to a wide array of employment creation and welfare programmes. Increasingly, NGOs and CBOs play a significant role in the implementation of these programmes, for instance, in the Community-Based Natural Resource Management Programme.

Poverty and Hunger Reduction Policies, Strategies and Programmes

The Instrument	Year	Objectives
Policies, Strategies and Programmes to Eradicate Poverty		
National Poverty Reduction Strategy	2003	To link and harmonise anti poverty initiatives, provide opportunities for people to have sustainable livelihoods through expansion of employment opportunities and improved access to social investment, and to monitor progress against poverty.
Revised National Policy for Rural Development	2002	To reduce rural poverty, promote sustainable livelihoods, stimulate rural employment and income generation, diversify the rural economy, reduce dependency on Government, maintain and improve rural capital, increase agricultural productivity and promote participation in development.
Industrial Development Policy of 1984	Revised 1998	To diversify the economy, foster the growth of the private sector, assist small-scale rural entrepreneurs, support growth and employment creation in towns and villages; and achieve higher levels of productivity
Financial Assistance Policy	1982-2002	To create employment opportunities and encourage investment in a range of economic activities.
Citizen Entrepreneurial Development Agency (CEDA)	2002	To promote citizen entrepreneurship, support economic diversification and create employment opportunities.
The 1980 Destitute Policy	Revised 2000	To provide income support to people defined as destitute according to criteria set by the GoB
Policies, Strategies and Programmes to Reduce Hunger		
Labour-Based Drought Relief Programme	To provide work and income in rural areas for people whose livelihoods are temporarily disrupted by drought.
National Policy on Disaster Management	1996	To provide a comprehensive framework for disaster management; reduce the potential loss due to disasters; ensure timely assistance to victims and achieve rapid and durable recovery
The Revised National Food Strategy	...	To provide a framework for attaining national and household food and nutrition security through (a) the attainment of household income security; (b) physical and economic access of households to adequate supplies of safe and nutritionally adequate food; and (c) availability of food through import and production.
The Strategic Grain Reserve	...	To store enough grain to meet the national requirement of cereals for at least three (3) months.
The Botswana Agricultural Marketing Board	...	To offer a favourable price regime and extend marketing services to isolated parts of the country through depots and cooperatives.

4. TRACKING PROGRESS TOWARDS THE TARGETS

The Table below provides an assessment of Botswana's capacity to statistically monitor poverty and to incorporate statistical analysis into policy and programme design, implementation, monitoring and evaluation.

Botswana's experience with the collection of poverty related data dates back to the 1974 Rural Income Distribution Survey (RIDS) and includes Household Income and Expenditure Surveys (HIES) in 1985/86, 1993/94 and 2002.

Systems for monitoring poverty do, however require improvement. Whilst they provide quality household data essential for the measurement and analysis of poverty, HIES occur after long intervals, 8-10 years. Statistical capacity to track and monitor poverty requires further strengthening, whilst capacity to measure and analyse poverty is fragmented.

Capacity to Monitor Poverty

Elements of Monitoring Environment	Assessment		
	Strong	Fair	Weak
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

The capacities that reside at the Central Statistics Office (CSO), the Rural Development Coordination Division (RDCD), the Botswana Institute for Development Policy Analysis (BIDPA), and the University of Botswana, could perhaps be pooled together under a Poverty Observatory along the model of Uganda, which produces bi-annual poverty assessments.

GOAL 2



ACHIEVE UNIVERSAL PRIMARY EDUCATION

“By the year 2016, Botswana will have a system of quality education that is able to adapt to the changing needs of the country as the world around us changes. Improvements in the relevance, the quality, and the access to education lie at the core of the Vision for the future. The education system will empower citizens to become the best producers of goods and services. It will produce entrepreneurs who will create employment through the establishment of new enterprises. Public education will be used to raise awareness of life skills, such as self health care.”

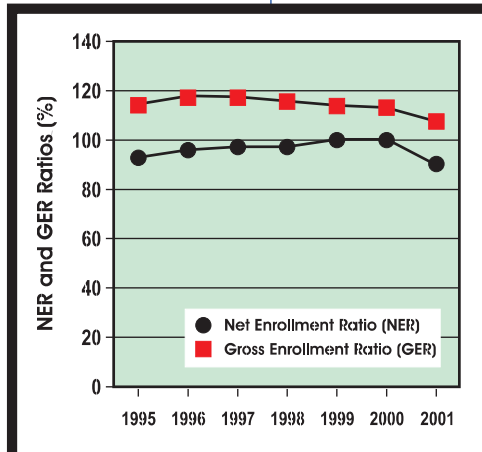
QUOTE FROM VISION 2016

Targets	Will target be reached?	Conducive Environment?
3. To achieve universal access to 10 years of basic education by 2016	Achieved	Strong
4. To improve the quality and relevance of basic education by 2016	Likely	Strong

Although this section will raise concerns about some aspects of Botswana's education, the policy environment and the priority accorded education in the fiscal budget provide an excellent environment for the sector to meet its goals and hence the overall assessment given above. The sector will face a significant but not insurmountable challenge in the form of HIV/AIDS induced capacity erosion. The impact of HIV/AIDS can be mitigated through improved management and innovation in service delivery. Botswana's education sector is well resourced and should raise its performance in the years leading to 2015/16.

1. WHAT IS THE SITUATION LIKE?

School Enrolment
(7-13 Years)



Education has been a key development priority for Botswana since independence. According to the Revised National Policy on Education (RNPE) of 1994, Botswana’s primary education goal is to produce a competent and productive workforce. The policy also gives priority to universal access to basic education, equity and quality.

ACCESS TO BASIC EDUCATION

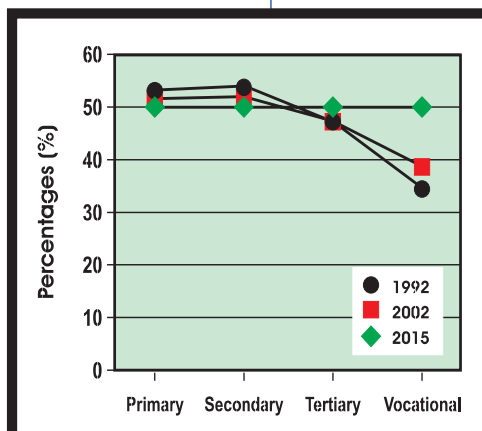
Botswana has achieved universal access to primary education (see figure 4), which provides a strong basis for the higher goal of 10 years of basic education. From 1995-2000, the estimated net enrolment rate (NER) for children aged 7-13 was consistently above 95%, peaking at 100% in 1999 and 2000. Over the same period, the gross enrolment ratio (GER) was at least 11 percentage points higher than the NER, in part because some pupils start school late but also because some dropouts do return to school.

The Government has invested substantially in basic education - now defined as 10 years of schooling - rapidly expanding both infrastructure and services. Education is the single largest expenditure item in the fiscal budget, averaging more than a fifth of the budget. In 2003, it accounted for 24% of total fiscal spending, up from 22% in 1981, and 29% of recurrent expenditure.

In the process, Botswana has generated sufficient institutional capacity to guarantee every child of school going age 10 years of basic education. Increased expenditure on education has improved access to basic education in at least three ways, viz.,

- Education is offered free of charge in all public schools, thus eliminating direct costs as a constraint on access.
- Institutional capacity has expanded at both the primary and junior secondary school levels, thus reducing the supply capacity constraint on access.
- Reduction in the average distance to school to 5km for primary schools and 10 km for junior secondary has reduced the significance of distance as a constraint on access.

Ratio of Girls to Boys
in Education



In addition to improved access to education, progression from one level of study to another has also improved. In 2002, 98.2% of all Standard 7 pupils progressed to junior secondary. Based on these trends, Botswana will make significant gains in literacy by 2016. The foundation for a fully literate society has been laid.

Botswana has also achieved gender equity in formal education. According to figure 5, girls accounted for just over half the gross enrolment in primary and secondary schools and slightly below half that in tertiary institutions in both 1992

and 2002. Vocational education is the only area where girls lag behind boys. Even then, their share of total enrolment increased by about five percentage points between 1992 and 2002. But equity transcends access and gender balance. The equity goal also requires that education should not only be universally accessible but should also be universally good. Thus, some questions of equity could be raised.



- *If, as is the case in Gaborone, private education is better resourced and produces better outcomes than public education, should the goal of equity imply that public education should aim for the same standards as private education?*
- *Should equity, given the limited role played by private education vis-à-vis public education, be looked at primarily in the context of public education itself?*
- *What role then should private education have? Should it be exclusively that of a benchmark on quality, or should it also be seen as a means of bringing more resources into the education system and expanding access?*

- *Are there groups in society - ethnic minorities, remote area dwellers, religious minorities etc. - that face peculiar access problems of the type that generate significant horizontal inequalities?*

The significance of the latter question can be traced to Botswana's commitment to a society in which "... there is equality of educational opportunity, and where no citizens are restricted to the circumstances of their birth." (Vision 2016, p 29).

QUALITY AND RELEVANCE OF BASIC EDUCATION

As a result of growing unemployment amongst people with tertiary qualifications, concern has been raised about whether Botswana's education adequately prepares young people for life after school. The counter question to this is whether the school system should in fact seek to prepare pupils for the job market. Vision 2016 suggests so.

"Education has not been adequately geared to the needs of the country, and the job market. The challenge is to place greater emphasis on technical and practical subjects – the skills that are most needed."

Trends in unemployment do not, however, provide an adequate basis for assessing the quality of education. Unemployment is not necessarily a result of deficiencies in education and training. It is also fundamentally about the existence of employment opportunities. In the absence of more accurate measures of educational outcomes, proxies such as preschool enrolment, the teacher-pupil ratio, classroom accommodation, classroom equipment, and ICT resources may be used.

Preschool Education

All pre-school education in Botswana is provided by civil society organisations, including the private sector. However, the Government provides substantial sup-

port in the form of policy direction, teaching materials, teacher training and grants to NGOs and CBOs involved in preschool education.

Even so, preschool training is inaccessible to children from poor families and rural areas. About 90% of eligible children do not access preschool education, either because preschool facilities do not exist where they live, or because their parents cannot afford the fees, or choose not to enrol their children for preschool.

Preschool education is a key component of integrated early childhood development programmes. It is especially necessary for children from disadvantaged communities such as the Basarwa, who face even steeper hurdles in adjusting to school life. A fundamental quality issue then arises. With over 90% of eligible children starting primary education without preschool education, to what extent is the quality of learning compromised?



Significantly, NDP 9 shows keen awareness, on the part of the Government, of the value of pre-school education, and recognising its own capacity constraints, the Government puts emphasis on upstream roles for itself – policy, strategy, training and regulation/supervision – and partnership with civil society at the level of delivery.

Pupil-Teacher Ratio

The significance of the pupil teacher ratio is that the lower it is the greater the amount of time the teacher spends with each pupil and the greater the quality of instruction. The average pupil-teacher ratio in Botswana's public schools was estimated at 27 in 2002, well below the NDP 9 target of 30 pupils per class. It still compares poorly with the 16 observed in private schools but represents real progress from 45 in 1994.

Classroom Accommodation

Classroom accommodation is central to learning. It reduces the impact of the external environment - weather and events in the community - on learning, and facilitates the organisation and effective use of learning tools such as chalkboards, teaching aids and furniture. Through aggressive construction of new schools and additional classrooms in existing ones, Botswana has reduced its classroom shortage from 2021 in 1994 to only 187 classes in 2003. The shortage of classrooms has a regional dimension however. For instance, Ngamiland North and Ngamiland South respectively had classroom shortages of 37.8% and 29.5% in 2003.

Information Communication Technology

Information and communication technologies (ICTs), especially computers are essential for functional literacy. ICTs also improve the delivery of teaching services and make learning more interesting for pupils. Botswana's secondary schools have computer laboratories and are expected to offer basic computer awareness courses. On average, there is a computer for every 28 students in secondary schools. Many public primary schools on the other hand do not have sufficient ICT resources. Many do not even have access to electricity.

As a result of an ICT based Teacher Capacity Building (TCB) project, Botswana has taken significant steps towards enhancing the use of ICTs in both primary and secondary schools. Provision was made in 2003 for all primary and junior secondary schools to be equipped with a television set and a videocassette recorder as part of an interactive multimedia programme on HIV/AIDS. Primary schools without electricity would be supplied with power generators. Although the TCB infrastructure and equipment are primarily intended to facilitate HIV/AIDS related education, they offer possibilities for delivering mainstream education services as well as informing pupils broadly.



Learning Achievement

The Standard 4 attainment test assesses the effectiveness of learning in primary school. The results suggest that learning is not very effective at the early primary school level, which may reflect lack of preschool training. In 2001, only 39.6% of standard 4s were literate in Setswana, 21.9% had reached the desired competency level in English, whilst only 21.2% had done so in basic numeracy. Learning achievement in life-skills was, however, high at 77.7%, though only 51% of the pupils had attained the desired level of HIV/AIDS competence.

2. MAJOR CHALLENGES

Access to basic education has virtually been achieved even at the higher standard of ten years of basic education. The real challenges, it seems, are to sustain high school enrolment and retention rates; to address the special needs of vulnerable groups; to improve the quality of education in public schools; and to maintain the capacity of the education system in the face of an intense HIV/AIDS onslaught.

INCREASING ENROLMENT AND RETENTION RATES FOR CHILDREN FROM REMOTE AREAS AND NOMADIC COMMUNITIES

Educational statistics suggest that remote areas, where levels of education and household income are relatively low and vulnerability to poverty and other forms of deprivation is relatively high, have the highest school dropout rates. Notwithstanding the fact that the reasons for dropping out of school are many and varied, this suggests that deprivation, and related to it the pressure to work or earn a living, increase the likelihood of a child dropping out of school.

Creative ways have to be found to keep disadvantaged children in school. One option is to "... introduce universal, and compulsory education up to the secondary level." (Vision 2016, p 30). The other is to outlaw child labour except when it serves the child's own development needs. These measures respond comprehensively to a concern raised in Vision 2016, although the vision puts emphasis on a different solution. It argues thus:

"In many cases, parents are exercising rational choice over whether to send children to school. The introduction of universal schooling must go hand in hand

with improvement of socio-economic conditions to the point where children are no longer viewed as an essential source of labour or income for poor families, or girl children used to care for younger siblings when their mother works.”

The immediate effect of compulsory education is to reduce the supply of child labour and affirm the children’s right to education. The immediate effect of outlawing child labour is to reduce the demand for child labour and free children to attend school.

RAISING THE QUALITY OF EDUCATION

The RNPE and the Early Childhood Care and Education Policy (ECCEP) provide the platform for raising the quality of education in Botswana. The RNPE gives priority to quality enhancing educational inputs – school infrastructure and equipment, ICTs, trained teachers, lifelong learning, and a strong curriculum that puts emphasis on science and technology. ECCEP provides for expanded access to preschool education and an appropriate curriculum.



Another important area is Life-skills, whose value lies in preparing children to make informed life choices and in preparing those who are unable to continue with formal education to pursue artisan training in vocational training institutions or to join the labour force. Increased emphasis on life skills is a curriculum development issue, itself an important dimension of quality, along with textbooks – appropriately chosen and provided on time – and ICTs

Other measures that should receive emphasis are measurement and monitoring of educational outcomes. The

management of education will be more effective with better quality, more complete and timely statistics as well as reliable measures of educational outcomes. Further to these, there is an urgent need to expand access to preschool education and to consider a policy shift from ECCEP to Integrated Early Childhood Development (IECD).

MAINTAINING THE CAPACITY OF THE EDUCATION SECTOR AND MITIGATING THE IMPACT OF HIV/AIDS

The challenge of maintaining the education system’s capacity requires, at one level, sustaining investment in education even as HIV/AIDS claims an increasing share of the budget. In NDP 9, the Government declares that “...the levels of investment in education that Government has made over the years can no longer be sustained unless alternative avenues for complementing Government efforts are established”.

It accordingly proposes cost sharing in education. The proposition implies an important argument on access, viz., that access is not exclusively an issue of cost to parents/pupils. It is also fundamentally an issue of supply capacity, one that judicious implementation of cost sharing could help resolve.

At another level, the challenge requires reengineering service delivery in education. For instance, closer collaboration with non-state actors may deliver additional resources and capacity. The deployment of ICTs in the delivery of services may extend the reach of otherwise limited capacity whilst flexibility with regard to the recruitment of expatriate teachers may help mitigate staff attrition due to death and illness.

The performance of the education sector will also be influenced by how well it prepares pupils to deal with the challenges of HIV/AIDS in the family. Will the system provide adequate support, knowledge and skills for pupils to deal with the personal challenges of HIV/AIDS? Does the education system have the capacity to meet the special challenges associated with the growing population of orphans?

In the final analysis though, Vision 2016 is right. The quality of the output of the education system will be better the more pervasive prosperity is. But this is a two way street. Just as education is essential for household prosperity, so is household prosperity essential for good education.

3. SUPPORT POLICIES AND PROGRAMMES

Vision 2016 envisages “an educated, informed nation”. The RNPE is the single most important policy instrument for the fulfilment of this ideal. The table below summarises this policy’s objectives and those of the National Literacy Programme.

Policies, Strategies and programmes for universal access to education

Name	Year	Objectives
Policies		
Revised National Policy on Education (RNPE)	1994	<ul style="list-style-type: none"> ◆ To improve access, equity and quality in education; ◆ To effectively prepare students for life, citizenship and the world of work ◆ To increase transition from junior to senior secondary up to 50%, ◆ To reduce primary school class sizes from 45 in 1990 to 30 pupils per class ◆ To improve and maintain the quality of the education system and effectively manage the education system; ◆ To improve cost effectiveness and cost sharing in education finance education ◆ To enact legislation on compulsory education
Programmes		
National Literacy Programme (NLP)	1981	To eradicate illiteracy; enable national literacy programme participants to apply knowledge in developing their cultural, social and economic life; enable participants to effectively perform community duties on the one hand and to exercise their rights and obligations of citizenship on the other

4. TRACKING PROGRESS TOWARDS THE TARGETS

Basic education statistics should be easy to collect at the level of schools so that Botswana could have complete and up to date education statistics. And yet, as the table below suggests, Botswana statistical capacity on education is not as strong as it could be given that the basic institutional infrastructure (the schools) for collecting educational statistics is in place.

The statistical challenge for the education sector is surmountable since the basic problems are organisational. They comprise, in the main, of measures to get the systems for collecting, summarising and analysing educational data to work and coordinate efficiently.

Capacity to Monitor Educational Outcomes

Elements of Monitoring Environment	Assessment		
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

GOAL 3



GENDER EQUALITY AND EMPOWERMENT

“No citizen of the future Botswana will be disadvantaged as a result of gender, age, religion or creed, colour, nationality or ethnic origin, location, language or political opinions. The future Botswana will have eradicated negative social attitudes towards the status and role of women, the youth, the elderly and the disabled, and will be free from all forms of sexual harassment.”

VISION 2016

Targets	Will target be reached?	Conducive Environment?
5. To reduce gender disparity in all education by 2015	Achieved	Strong
6. To reduce gender disparity in access to and control of productive resources by 2015	Likely	Strong
7. To reduce discrimination and violence against women, and the incidence of rape by 50 percent by 2011	Potentially	Strong
8. To raise women's participation in leadership and decision making positions by at least 60% by 2016	Likely	Strong

Since the Beijing conference, Botswana has taken significant measures to create a policy environment that promotes gender equality. Discriminatory Laws have been reviewed. Political commitment to gender is reflected in appointments to cabinet and senior positions in the civil service, and the establishment of a full-fledged department responsible for coordinating the implementation of Government Policy on Gender.

1. WHAT IS THE SITUATION LIKE?

Botswana has made significant progress in promoting gender equality. It has reviewed its legislation to remove discriminatory clauses. Further work may still have to be done to complete the exercise.

Women's representation in decision-making positions, including political office, senior management in both the public and the private sector, and in traditional male domains such as chieftainship and priesthood, has risen. Botswana now has three women in the house of chiefs and ordained female priests in some of the major Christian denominations. These developments were preceded by robust grass root debate of the type that suggests recognition that society is making a major breakaway from tradition.

There is still need for deliberative processes in the more difficult areas such as rape within marriage, where issues of "consent" and "conjugal rights" are often confused in public opinion, and the unification of the marriageable age for boys (16 years) and girls (14 years). These issues are difficult in part because of the strong influence of tradition and institutional culture, the result of which is that practice lags behind progressive policy and legislative reforms. Social mobilisation and public education on gender and human rights, targeting not only communities but also institutions, could bridge this gap between policy and practice.



GENDER DISPARITY IN EDUCATION

Botswana has eliminated gender disparity in most formal education. Girls' enrolment in primary and secondary education is at par with that of boys. The Government Statistician sums the achievement well in Educational Statistics 2001 when she observes:

"Females tend to participate as much as males do at all levels. There is no significant difference of female participation at primary schools, secondary schools and at the University of Botswana."

Even though there are no significant disparities between female and male enrolment in most formal education, enrolment in teacher training colleges and nursing institutions is skewed in favour of women, whilst enrolment in vocational training institutions is skewed in favour of males. This divide is also found at the University of Botswana and its affiliated institutions, where men dominate science-based training and women dominate the humanities and some social sciences.

Significant differences can also be found in respect of gender-specific vulnerabilities that interfere with schooling. For instance, one of the main reasons girls drop out of school is pregnancy, whose incidence among teenage learners is high. However, government policy allows girls to come back to school if they left due to pregnancy. Boys on the other hand may drop out, or never enrol because of household economics - for instance, a family may opt for its son(s) to work rather than study. Boys from poor families are especially vulnerable to such decisions.

GENDER DISPARITY IN ACCESS TO AND CONTROL OF PRODUCTIVE RESOURCES

Although Botswana has made good progress towards achieving gender equality over the last two decades, women do not as yet enjoy equitable treatment vis-à-vis men in many substantive areas of life, including control of productive resources. Even when legislation may be gender neutral, tradition and institutional culture perpetuate practices that disadvantage women in relation to men.

For instance, some financial institutions, and Government departments, treat married women as de facto minors, requiring them to seek their husbands' consent for transactions for which they would not place similar requirements on married men. Furthermore, inheritance and succession practices in traditional communities generally favour men.

More generally, women endure relative economic disadvantage. Employment and wealth are decisively skewed in favour of men. Women account for only 39 percent of workers aged 12 years and above, and yet slightly more than 50 percent of the population is female. Women headed 47 out of every 100 households in 1991 and 46 in 2001. Nearly half of these women, well above the national rate of unemployment, were not engaged in any cash-earning employment.

WOMEN'S PARTICIPATION IN LEADERSHIP AND DECISION-MAKING

Political and economic power is still largely controlled by men. Nevertheless, as the tables show, women are making steady progress in politics (though still short of the SADC target of 30%), the civil service, and in governing boards of Public Enterprises (PEs). In terms of board and executive positions, the private sector lags behind at 14.7%. Women's representation in Parliament increased from 6.8% in 1992, to 9.1% in 1994 and subsequently to 18.2% in 1999. The 2003 Cabinet had five (5) women, who constituted 22.7% of the 22-member Cabinet.

In 1999, men outnumbered women 3:1 in senior management positions in central government and 6:1 in local government. This represented a percentage share of 14.7%. Until fairly recent times, there was no woman in the house of chiefs. Now there are three.

Recently, the Dutch Reformed Church ordained a female priest in Mochudi, a major village, against a background of strong resistance within the Church and a large section of the community. In 2002, 33% of the directors of PEs and 67% of the Deputy Chief Executive Officers were women. In the same year, women headed over 50% of Botswana based NGOs.

Women in Political Positions

	1992	1997	2002
Female Parliamentarians	3(6.8%)	4(9.1%)	8(18.2%)
Total Parliamentarians	44	44	44
Female Ministers	3	3	6
Total Ministers	20	20	22

Ratio of Women in Decision-making Positions (%) 2002

Position	Civil Service	Public Enterprises	Private	NGO
Board Members	N/A	33	14.7	48
Head of Company/Org.	33	10	14	52
Deputy Head	25	67	-	-
Head of department	25	26	36	47
Total Female to Male	28	30	27	48

GENDER BASED DISCRIMINATION AND VIOLENCE

Women endure more gender-based discrimination and violence than men, partly because of deep-seated socio-cultural practices and institutional cultures. Botswana is a patriarchal society. Therefore, women are a priori subordinate to men and have historically endured various forms of discrimination and disempowerment on account of their being women e.g., in access to and control of resources such as land, cattle, power, education and business opportunities.



Whilst progress has been made in bridging the gender gap in these areas, there are no indications that efforts to contain and eliminate violence against women are paying off.

Although consolidated national figures could not be located for this report, violent crimes against women and girls - rape, incest, defilement, murder and emotional abuse - seem to be increasing. For instance, one NGO, Women Against Rape, reported a steady increase in rape cases lodged annually with it from 8 in 1996 through 20 in 1997, 30 in 1998, 27 in 1999, to 35 in 2000. Police reports show that women are frequently victims of assault. In one police station in Gaborone, women accounted for more than 65% of all cases of common assault in each of the years from 2000-02.

Whilst there is recognition that violence against women may be a growing problem, it is worrisome that a mechanism for pooling together information from the courts, police records and NGOs into an organised database that gives a credible measure of the magnitude of the problem does not exist.

Progressive legislative and policy reforms will not, by themselves, advance the course of gender equality far enough. The focus should increasingly fall on social mobilisation. This requires an up to date monitoring and evaluation system to provide credible information.

2. MAJOR CHALLENGES

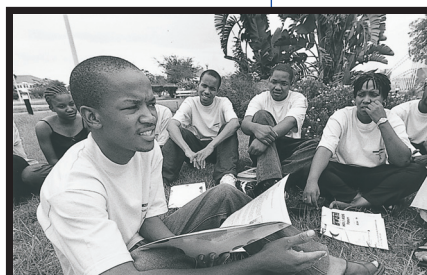
At the policy and legislative levels, substantial progress has been made towards gender equity. The substantive challenge lies in bridging the gap between progressive policy and legislative reforms on the one hand and tradition and deep-seated institutional cultures that stand in the way of equal rights of citizenship for men and women on the other. The key challenge is therefore transformational. It is one of aligning institutional and personal attitudes with progressive policies and laws. Such a transformation will require, amongst others:

PUTTING IN PLACE A MECHANISM FOR MONITORING GENDER INEQUALITIES

Effective action to promote gender equality requires an appreciation of the magnitude of the problem by a broader range of stakeholders. At present, critical information for gender related analysis is out of the public domain. An effective system of monitoring gender-related developments is essential. A number of institutions - the courts, the police, labour department, educational institutions, NGOs etc, generate raw gender related data. This should be pooled to generate a credible database and information that supports gender related policy analysis and advocacy.

CHANGING SOCIAL ATTITUDES ON THE ROLE AND STATUS OF WOMEN WITHIN THE COMMUNITY

Botswana's policies and laws do not discriminate on the basis of gender. At worst, some could be faulted for benign neglect but there are many that actively promote gender equality. Often, women suffer discrimination only because institutional practices and social attitudes respond to progressive policy and legislative reforms with a lag.



Thus, official documents from private and public institutions may still have provisions that discriminate against women; and tradition and custom may limit the range of things women can do or be, including chieftainship and priesthood. Public education to transform practices is thus a critical imperative for gender equality.

Gender based discrimination is a human rights violation. Tougher measures, with due sensitivity where culture and tradition are concerned, should be employed where institutions engage in discriminatory practices or retain discriminatory provisions in their official documents – application forms etc.

PROMOTING THE ASCENT OF CAPABLE WOMEN TO POSITIONS OF LEADERSHIP

There is a connection between life outcomes for particular groups of society and their influence on leadership. Women's empowerment requires women in positions from which they can influence policy. Botswana has built significant momentum towards women's participation in political, corporate and civic leadership.

Many of the women who lead powerful institutions – the Vision Council, the Central Bank, PEs, and Government Ministries at the political and administrative levels, have demonstrated that society suffers no cost from entrusting leadership to capable women. The trend towards having more women in leadership should thus continue.

SUSTAINING THE TREND TOWARDS GREATER DIVERSITY OF EDUCATION AND TRAINING FOR WOMEN

Except for the apparent tendency towards particular disciplines for women, the goal to eliminate gender disparities in education is being met in Botswana. The challenge, therefore, is to facilitate the entry of men and women into disciplines that are traditionally dominated by the other sex, for instance, more women in engineering and more men in nursing.



A second but no less important priority would be to eliminate gender specific constraints on learning. The girl child should be relieved of the burden of household responsibilities beyond normal chores essential for her wholesome development. And no child should have to sacrifice his/her opportunity for schooling in order to work. In this regard, this report argues under Goal 2 for compulsory education and the criminalisation of child labour.

3. SUPPORT POLICIES AND PROGRAMMES

The Women's Affairs Department (WAD) in the Ministry of Labour and Home Affairs is Botswana's lead agency on gender equality in Botswana. The frameworks that guide its work and that of its partners are the National Policy on Women and Development (1996); the UN Convention on the Elimination of all forms of Discrimination Against Women (CEDAW); and the 1997 SADC Declaration on Gender and Development. Under these frameworks, the government has committed itself to instituting legal, constitutional and social reforms, where needed, to remove discriminatory practices and empower women.

A National Gender Programme Framework with a Plan of Action aimed at translating the national gender priorities into programmes has been developed. Under this programme, Botswana has adopted a gender-mainstreaming strategy for all sectors. In addition to gender mainstreaming, WAD coordinates social mobilisation initiatives.

4. TRACKING PROGRESS TOWARDS THE TARGETS

Gender and development is a priority development issue. Botswana has made progress in setting up institutions and in acceding to key global and regional frameworks.

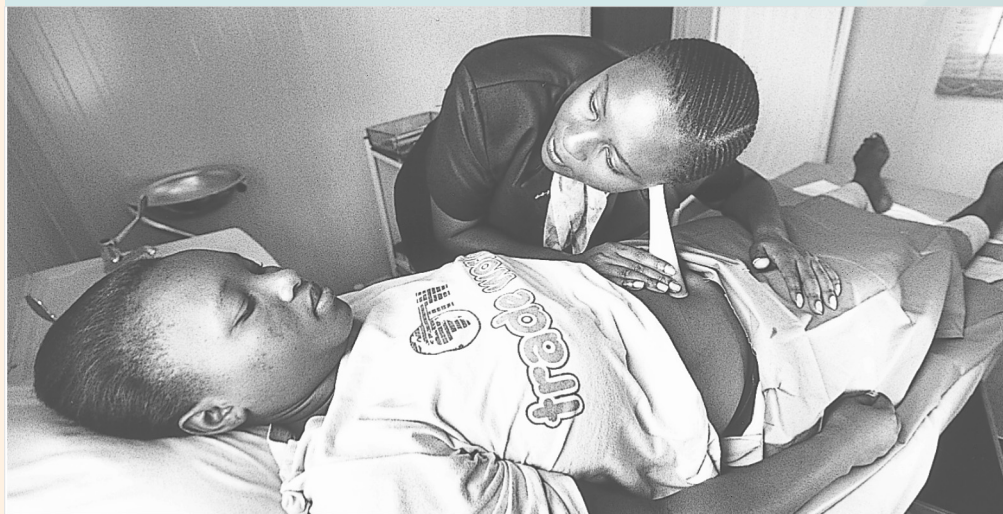
But the institutional capability to monitor, evaluate, document and analyse issues and trends related to gender is still weak. The Women's Affairs Department (WAD), as the lead/coordinating agency on gender, need not collect all the data required on gender. Indeed, in reality, the relevant data are gathered and summarised by institutions such as the police services, the Ministry of Education, etc.

Many of these institutions have the capacity to gather the relevant data. There is need, however, to harmonise the data into a viable and comprehensive system for monitoring gender and development issues.

Capacity to Monitor Gender and Development

Elements of Monitoring Environment	Assessment		
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

GOAL 4



CHILD MORTALITY

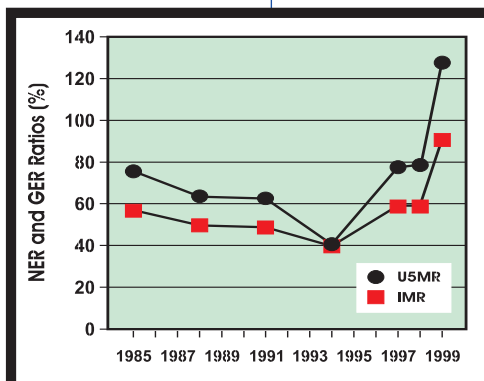
Targets	Will target be reached?	Conducive Environment?
9. To reduce the Infant Mortality Rate (IMR) from 48/1000 live births in 1991 to 27/1000 in 2011.	Potentially	Strong
10. To reduce by 2/3, the under-five mortality rate (U5MR) from 63/1000 live births in 1991 by 2011.	Potentially	Strong
11. To reduce the PEM rate amongst children from 18 percent in 1998 to 8 percent by 2011	Likely	Strong
12. To increase the proportion of 1-year-old children who are fully immunised to at least 80 percent by 2009	Likely	Strong

Although the policy and programme environment supports the attainment of child survival goals, the incidence of HIV/AIDS and behaviour that supports its spread significantly 'pollute' the environment. HIV/AIDS compromises the mother's health and in consequence that of the child and its survival prospects. Both the infant and under five mortality rates started to rise around 1995/96 when the effects of HIV/AIDS became manifest.

1. WHAT IS THE SITUATION LIKE?

Botswana was on track to significantly reducing child mortality until HIV/AIDS made its impact felt in the mid 1990s. In the early 1990s, fewer babies died at birth or within five years of birth than at the end of the decade. In fact, between 1991 and 1996, the number of children who died in their first five years decreased from 63 per 1000 live births to 45 in 1996. Over the same period, the number of babies who died before their first birthday decreased from 48 per 1000 live births in 1991 to 37 in 1996. Since then, both the infant and under five mortality rates have been rising.

Estimated infant and under 5 Mortality (1985-99)

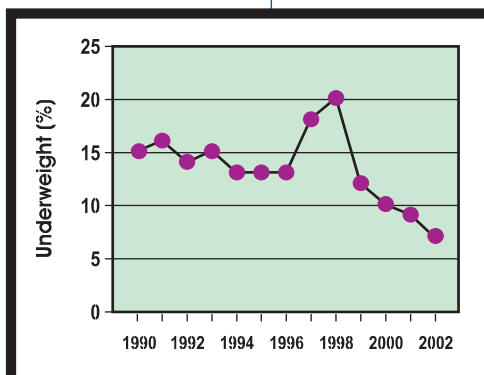


INFANT MORTALITY AND UNDER FIVE-MORTALITY RATE

From the mid 1990s, child mortality rates increased to levels experienced in the seventies, primarily because of rising HIV prevalence. HIV prevalence among pregnant women attending antenatal clinics increased from 13.8% in 1992 to 35.4% in 2002. It is estimated that 40% of the infants born to HIV positive mothers who do not enrol for Prevention of Mother to Child Transmission (PMTCT) therapy are infected with HIV.

Infant deaths closely follow HIV/AIDS prevalence. For every 1000 infants born in Botswana, about 56 die before their first birthday, many possibly from HIV/AIDS related illnesses. The under-five mortality rate (U5MR) has also increased since 1996.

Underweight Children (%) 1990-02



PROTEIN ENERGY MALNUTRITION AMONGST CHILDREN

In 2000/01, 7-9% of children aged 0 to 5 had a low weight for their age or suffered Protein Energy Malnutrition (PEM). This represents an improvement of at least 40% over this group's PEM rate of 15% observed in 1995. This improvement is attributable to the comprehensive feeding programme that was re-introduced in July 1998 after a brief suspension between 1997 and June 1998, when the Government experienced difficulties with a selective feeding programme and PEM rates rose.

The prevalence of malnutrition varies across districts. The highest rates of malnutrition are observed in remote areas but these are also registering steady decline. Infant malnutrition is however exacerbated by HIV/AIDS. Breastfeeding, the long recommended source of nutrition and protection from diseases for infants, is not an option for HIV positive mothers because of the risk of HIV transmission from mother to child. The public health system provides infant formula as a substitute for breastfeeding to HIV positive mothers who enrol for PMTCT.

CHILD IMMUNISATION



Vaccine coverage rates for Botswana have been relatively high since the inception of the national Expanded Programme on Immunisation (EPI) in 1980, leading to a reduction in the incidence of common but vaccine preventable diseases. These include Tuberculosis, Measles, Polio, Tetanus, Whooping Cough and Hepatitis. Botswana's primary child immunisation objective is full immunisation coverage for all vaccine preventable diseases. There has been some progress towards this goal, from 67% in 1990 to 74% in 2000.

Two factors seem to weigh heavily on Botswana's slow progress towards its child immunisation target. One is the difficulty of reaching some rural communities and the supply chain logistics involved in the procurement, storage and distribution of vaccines throughout Botswana. In 2001, vaccine coverage rates fell on account of unreliable supplies of vaccines. The second problem is the user uptake of vaccines. Some, especially users who have to travel from afar to access vaccines, may have other priorities.

Corrective measures have already been taken to strengthen the reliability of vaccine supplies. There is need to strengthen service delivery in general and to sustain public education towards disease prevention and public health in general.

2. MAJOR CHALLENGES

Without a significant turnaround in the war on HIV/AIDS, Botswana will have difficulty returning to the pre 1996 trends towards lower child mortality rates. HIV/AIDS is the main challenge in reducing child mortality. A few specific measures can be considered for augmenting the already expansive national effort to contain and reverse the HIV/AIDS epidemic. These include:

ADOPTING A FAMILY TEAM APPROACH TO SECURING THE HEALTH AND LIVES OF INFANTS AND CHILDREN.

More of the burden of childcare should move from the state to the family. The public health system has expanded the provision of accessible prevention and treatment services for children. Raising family consciousness about and responsibility for preventative child healthcare is the next logical step. In this regard, the foremost priorities are HIV/AIDS and child nutrition.

The rates of HIV infection amongst expectant women and the slow uptake of PMTCT services suggest that too many couples are not yet making responsible reproductive health choices. This is partially explained by the disproportionate responsibility for family health choices and childcare that women carry. Extending more of the responsibility to the entire family could help reduce HIV prevalence amongst newborn babies by getting more couples to test for HIV prior to conception. It could also get more men to participate in prenatal discussions of reproductive health issues and support their partners should they need to enrol for PMTCT. More generally,

HAART

Highly Active Anti Retroviral Therapy

PMTCT

Prevention of Mother to Child Transmission

U5MR

Under 5 Mortality Rate

public health education should perhaps seek to inculcate child health and nutrition competencies in families rather than in mothers only.

BROADENING ACCOUNTABILITY FOR THE HEALTH OF CHILDREN

Botswana's public health system caters well for children. It provides prenatal care services that cover nutrition and health education to pregnant women. It also provides a fully funded nationwide PMTCT programme that includes infant formula as a substitute for breast milk for HIV positive mothers. But the limits of state protection for children can still be stretched further in the case of HIV/AIDS.



Why, for instance, should the state allow a woman who tests positive for HIV to remain ignorant of her HIV status if she so desires when ignorance may result in her not enrolling for PMTCT and stretches the child's period of heightened vulnerability to "Mother to Child Transmission of HIV" beyond pregnancy to ill-advised breast-feeding? Every child has a right to expect state protection from HIV infection. Is it not in the interest of the unborn child for the state to demand that pregnant women be informed about their HIV status and the options available to them to protect their children?

Second, men influence their spouses' reproductive health choices. To facilitate informed choices on such critical issues as HIV testing, enrolment for PMTCT and breastfeeding, they should also participate in prenatal education with their spouses. Men's involvement is critical because many women do not have full control over decisions concerning their health and that of their babies. About 60% of Botswana mothers have their first child at 15-19 years of age, when they are still dependent on others and are unable to make responsible reproductive health choices.

3. SUPPORT POLICIES AND PROGRAMMES

The policies and programmes that impact most directly on infant and child health in Botswana are summarised in the table on the next page. They include the National Population Policy, EPI, PMTCT, IMCI, the CWC and feeding programmes for vulnerable groups

Policy Instruments and Objectives

The Instrument	Year	Objectives
Policies		
National Population policy	1999	To reduce child and adult mortality, ensure household food security, and enhance the nutritional status of the population
Expanded Policy on Immunisation	1993	To reduce infant and child morbidity and mortality from vaccine-preventable diseases
PMTCT	1998	To improve child survival through the reduction of HIV related morbidity and mortality; reduce incidence of HIV infections in children through mother to child transmission by 50%
Baby and Mother Friendly Hospital Initiative (BMBFI)	...	To support infant and young children's nutrition
Vulnerable Group Feeding Programme	...	To develop nutritional food products for the vulnerable children
Revised National Policy for Rural Development	2002	To sustain rural livelihoods
HAART	2002	To improve child survival and development by reducing HIV related morbidity and mortality.

4. TO TRACK PROGRESS TOWARDS THE TARGETS

The table below suggests that Botswana's health system has developed a strong capability to monitor trends in child health. The civil registration system could, however, be improved to allow for more timely compilation of mortality data.

Capacity to monitor Child Mortality

Elements of Monitoring Environment	Assessment		
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

GOAL 5



MATERNAL HEALTH

“*The prevailing high fertility rate, the youthful structure of the population, and high maternal mortality pose serious challenges to Botswana. One of these is to eradicate preventable diseases such as measles, tuberculosis by 2016. Many of the clinics and health posts across the country do not have well-trained staff nor adequate equipment. Many people have had to travel long distances to obtain health care, especially in the remote settlements. This is a challenge that Botswana will have to meet by the year 2016.*”

QUOTE FROM VISION 2016

Targets (Targets are those set by the Botswana Government)	Will target be reached?	Conducive Environment?
13. To reduce the maternal mortality rate from 326 deaths per 100 000 live births in 1991 to 150 by 2011	Potentially	Strong

Data on maternal mortality are not complete. The most up to date measure of the maternal mortality rate is for 1991, so it is not clear how much progress has been made on this crucial development indicator since then. However, difficulties in reaching this goal derive from the impact of HIV/AIDS, whose prevalence is highest amongst young women in the reproductive ages.

1. WHAT IS THE SITUATION LIKE?

Childbirth is a serious health risk for women but data constraints make it difficult to understand the trend paths of the indicators that would help determine the nature and extent of the problem of maternal mortality in Botswana. The risks are more serious for young mothers because they have a higher propensity towards unsafe and illegal abortions and a higher risk of complications at birth due to physical underdevelopment. About 300 in every 100,000 pregnant women die during delivery.

MATERNAL MORTALITY RATE

Botswana's maternal death rate is high even though the overwhelming majority of expectant women in Botswana use preventive health services such as prenatal care and are assisted by trained health professionals during delivery. In 1996, a trained midwife assisted 94 out of 100 pregnant women during delivery. This ratio improved to 97 in year 2000. About 85% of all recent mothers received formal postnatal care.

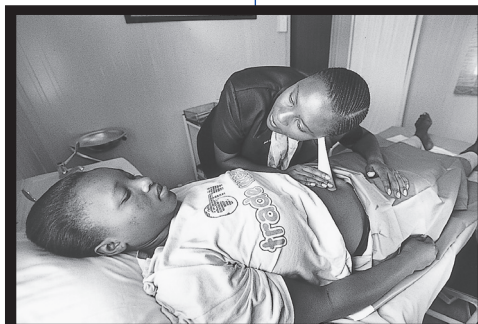
Incidence and main causes of maternal death by age	
15-19 (18.5)	Sepsis
20-24 (22.2%)	Sepsis
25-29 (19.8%)	Toxaemia
30-34 (19.8%)	Haemorrhage

Although skilled/trained midwives attend to most normal deliveries, capacity to deal with obstetric emergencies is generally weak since most health facilities have neither the facilities nor the personnel to handle obstetric emergencies. A study based on obstetric records showed that screening tests to detect high-risk pregnancies were not performed on all pregnant women receiving antenatal care and that in cases where tests were performed and problems identified, the required action was not always taken. Furthermore, there were instances of patients being brought to the clinic/hospital late. In the case of complicated cases that have to be referred to bigger facilities, this could be fatal.

Analysis of the Botswana AIDS Impact Survey of 2001 indicated that 70 out of every 100 pregnant women attended antenatal care either in the second or third trimester. Another study found that many health facilities, especially clinics and health posts, lacked essential equipment and frequently ran out of essential supplies.

The same study also found that access to Emergency Obstetric Care (EOC) is uneven. In the Eastern and Southern region, the majority of clinics (28 out of the 34 sampled) were located 50 km or less from an EOC facility while in the Western region, the mean distance to an EOC facility was 181.25 km and no clinic was located less than 114 km. Another finding from this study is that despite the growing consensus based on evidence that 24-hour quality emergency obstetric care constitutes the most effective response to prevent maternal deaths and disabilities, there is evidence that not all the MCH/FP departments in Botswana's hospitals were open 24 hours, 7 days a week.

Although the average number of children born per woman has been declining steadily since the 1980s, trends in teenage pregnancies are still a serious public health problem. The average number of children born per woman declined from 6 children in 1991 to 3 in 2001. The percentage of teenagers who were mothers



rose from 15.4 percent in 1971 to 24 percent in 1988 before declining to 16.6 percent in 1996. Among 12-14 year old females, 12% had been pregnant in 2001 while 15-24 year olds had a pregnancy rate of 47.3%. Unplanned pregnancies are associated with illegal abortions, which in turn contribute to maternal deaths. It was found that sepsis accounted for 33.3% of the deaths among young women aged 15-19.

Family planning could reduce the maternal death rate by reducing the incidence of unplanned pregnancies, increasing that of planned and informed pregnancies, and reducing vulnerability to sexually transmitted infections, including HIV/AIDS.

2. MAJOR CHALLENGES

Improving access to professional and efficient reproductive health services in rural areas remains a challenge for delivery in the health sector. Access is constrained by, amongst others, inadequacies in the skills and numbers of health professionals relative to the complexities of obstetric and pregnancy complications; and the intermittent availability of required equipment and supplies at health facilities. This makes the management of obstetric cases difficult.

Improving access to emergency reproductive health services requires strengthening the referral system in Botswana. The facilities in rural areas cannot deal with obstetric complications since the referral system is not well resourced for emergencies due to deficiencies in skills, transport logistics and equipment. Also crucial is the management of the use of traditional medicine, which is a factor in both illegal abortions and health care outside the formal health system.

MANAGING AND DELIVERING QUALITY OF MATERNAL HEALTH SERVICES

Substantial resources have been allocated to the health sector. Both access to, and the quality of, maternal health services have improved as a result. The incapacity to accurately capture the status of maternal mortality, however, remains a major weakness in evaluating progress on maternal health.

Maternal mortality is not directly measured in Botswana. There is no audit system to inform management of the service. Limited evaluations are conducted, leaving a gap in information. However, the next Botswana AIDS Impact Study (2004) is expected to generate information that will help determine the actual estimate of the Maternal Mortality Ratio.

DEVELOPING A SYSTEM FOR MONITORING MATERNAL MORTALITY

Botswana needs to develop a comprehensive and reliable system for continuous monitoring of maternal mortality. The interface between the hospital records and the Civil Registration System should be improved to allow for continuous and timely delivery of data on mortality, including child and maternal mortality.

3. SUPPORT POLICIES AND PROGRAMMES

The family planning programme in Botswana has since its inception embarked on an aggressive family health campaign, coupled with building the capacity of the health sector to provide a range of family planning services. Youth Friendly Services were introduced to cater for the needs of young people. These programmes are coordinated under the National Population Policy, summarised in the table below.

Key Policies and Programmes

The Instrument	Targeted Objectives
National Population Policy	<ul style="list-style-type: none"> ◆ Reduce total fertility rate ◆ Reduce the incidence of teenage and unplanned pregnancy ◆ Reduce the incidence of maternal mortality including high risk pregnancies and births ◆ Promote youth, male and female shared responsibilities and participation in their reproductive and productive life ◆ Increase access to family planning
Youth Friendly Services Programme	<ul style="list-style-type: none"> ◆ Improved adolescent knowledge, attitudes, values and behaviour on matters related to sexual and reproductive health issues; ◆ Increased utilization of sexual and reproductive health information and services with increased access to quality and cost effective adolescent sexual and reproductive Health (ASRH) information and services; ◆ Creation of a supportive political and community environment for ASRH

4. TO TRACK PROGRESS TOWARDS THE TARGETS

According to the table, Botswana's capacity to follow trends in maternal mortality is weak. It is not immediately clear why this capacity was not developed along with that for monitoring child mortality. It is clear though that statistical capacity for tracking maternal mortality need urgent attention.

The solution to the problem of inadequate data on both child and maternal mortality lies in strengthening the vital registration system. Given the coverage of antenatal services i.e. more than 95% of all expectant women, an overwhelming majority of births and maternal deaths occur in hospitals.

Adequately documenting maternal mortality is thus largely a matter of feeding the necessary information from hospital records into the vital registration system. Looking at the vital registration system comprehensively, consideration should perhaps be given to enacting legislation that criminalizes failure to report births and deaths.

Table 16: Monitoring and Evaluation Capacities

Elements of Monitoring Environment	Assessment		
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

GOAL 6



COMBAT HIV/AIDS, MALARIA AND OTHER DISEASES

“ We have often spoken of the HIV/AIDS pandemic as a war that needs to be won. Yet in this war, we remain our worst enemies. The continued generosity of international friends, such as the Bill and Melinda Gates Foundation, may assist us. But, it is we, and we alone, who through behavioural change, must achieve our victory. The stigma surrounding the disease remains one of the greatest barriers to the implementation of various care and prevention strategies. This is why, even with our ability to now offer such interventions as Anti-Retroviral (ARV) therapy to preserve the living and protect the unborn, the majority of our sexually active people still do not know their HIV status. ”

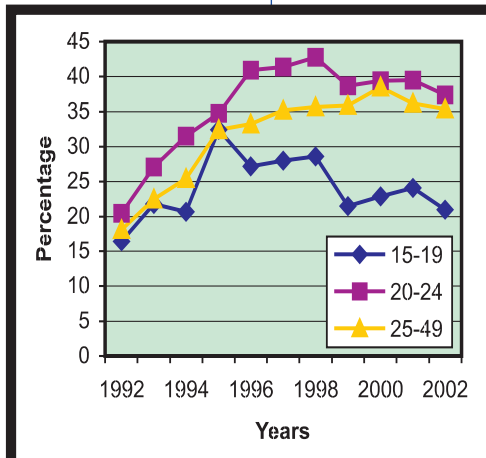
H.E. MR. FESTUS G. MOGAE,
10TH NOVEMBER 2003

Targets	Will target be reached?	Conducive Environment?
14. To halt and reverse the incidence of HIV particularly amongst the youth by 2016	Likely	Strong
15. To reduce the number of infants born to HIV infected mothers who are by HIV positive by their 18th month by half by 2006 and to zero by 2009	Potentially	Good
16. To reduce the morbidity and mortality caused by TB	Likely	Strong
17. To reduce the incidence of confirmed malaria to below 20 cases per 1000 people	Potentially	Strong

Despite Botswana's expansive HIV/AIDS programme, behavioural change still lags behind knowledge about HIV/AIDS, but there are indications that progress is being made. There has been an upsurge in HIV testing since the introduction of routine testing. There have also been reports of stabilisation or even reduction in prevalence rates in some age groups, for instance the 15-19 year group.

1. WHAT IS THE SITUATION LIKE?

Trends in HIV Prevalence in ANC Mothers



Since Botswana’s first case of HIV/AIDS was reported in December 1985, the epidemic has progressed rapidly, affecting all levels in society. Annual sentinel sero-surveillance data show an adult HIV prevalence rate of above 30 percent since 1995. The 2002 HIV sentinel survey, conducted in all health districts, shows that HIV prevalence rates among women aged 15-19 dropped from 24.7 percent in 2001 to 21.0 percent in 2002. For women aged 15-49 years, the rate fell from 36.2 in 2001 to 35.4 in 2002.

HIV/AIDS prevalence rates stabilised statistically since 1999, particularly in the urban areas. Rural prevalence rates on the other hand continued to rise. Women with rural residence have slightly higher prevalence, compared to their urban counterparts.

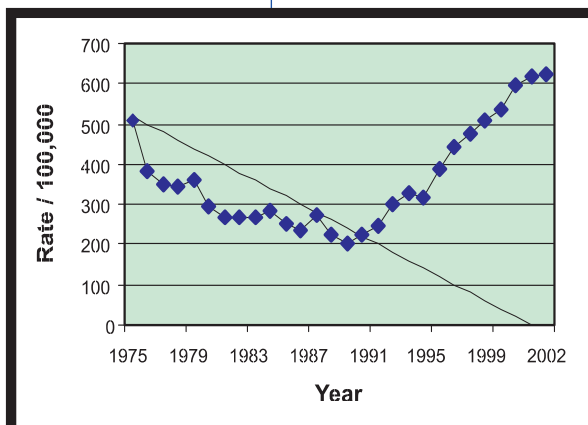
Botswana has mobilised the political will to fight the epidemic and has put substantial resources, into the fight but the results in terms of behavioural change have been poor. A major weakness in the fight is the slow pace of voluntary testing.

Botswana has now adopted an opt-in-opt out policy on routine HIV/AIDS testing in health facilities to increase the uptake of HIV-testing and care and support services and, in consequence thereof, promote positive behavioural change.

MOTHER TO CHILD TRANSMISSION

In 2001, it was estimated that 40 percent of infants born to HIV/AIDS infected mothers were likely to be infected with HIV. Prevention of Mother to Child Transmission (PMTCT) is thus one of the key strategies for halting the spread of HIV. A national PMTCT programme is in place and is functioning well. Its objective is to reduce mother to child transmission of HIV to 20 percent by 2006 and to 10 percent by 2009.

Botswana TB Notification Rate per 100,000 Population 1975-2002



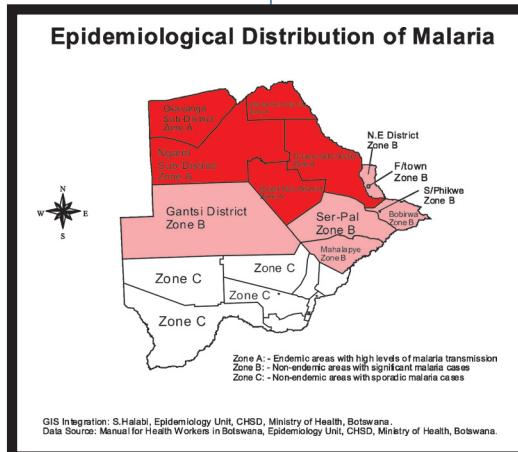
The uptake of the programme was estimated at 36% in 2003. The low uptake of PMTCT could be attributed to HIV/AIDS related stigma and the attendant low

rates of HIV testing. However, recent reports suggest a significant increase in voluntary counselling and testing, in part because of growth in the network of testing centres but also because of a rising propensity to test.

BLOOD TRANSFUSION

The national blood transfusion service in the country has adopted high international standards for blood safety. Donated blood is rigorously screened for HIV. Thus, the blood transfusion service in Botswana is safe.

Epidemiological Distribution of Malaria in Botswana



TUBERCULOSIS RELATED MORBIDITY AND MORTALITY

Tuberculosis (TB) cases began to decline in the mid 1970s, reaching an all time low of 202 cases per 100, 000 population in 1989. Since then, the notification rate has been on the increase. In 2000, the tuberculosis notification rate in Botswana stood at 591/100,000 persons, rising to 620/100,000 in 2001. The upsurge in the incidence of TB is accounted for by rising HIV/AIDS prevalence. Studies have shown sero-prevalence rates between 50% and 80% among TB patients. An outpatient study in Gaborone showed a sero-prevalence rate of about 73%.

MALARIA

Malaria is the main vector-borne disease in Botswana and is one of Botswana’s 14 notifiable diseases. About 40–50 percent of the population is exposed to the risk of infection with Malaria. The incidence of Malaria is closely related to rainfall, which varies considerably from year to year, with major epidemics occurring in years of heavy rainfall. Three epidemiological zones are recognized. These are the northern zone (A), the central zone (B) and the southern zone (C).

The northern zone (A), has a high transmission rate. It is made up of Okavango, Chobe, Ngami, Boteti and Tutume Sub-Districts. It accounts for more than 80 percent of all malaria cases in the country. The central zone (B) has intermediate transmission. The southern zone (C) is largely malaria free, but it can have sporadic cases.

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On the whole, the incidence of Malaria in the affected districts declined until 1998 and rose dramatically in 1999 and 2000 before dropping to its lowest in 2002.

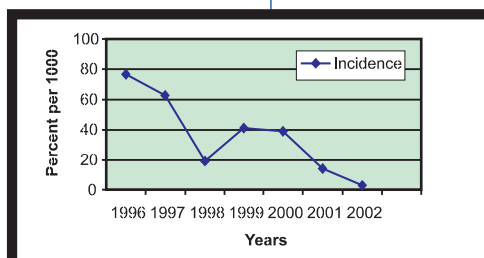
2. MAJOR CHALLENGES

To overcome HIV/AIDS and other life-threatening diseases, Botswana must meet a number of critical challenges.

OVERCOMING STIGMA, FEAR AND REJECTION

The battle against HIV/AIDS related stigma and discrimination is far from being won despite extensive public education. About 90 percent of the population do not know their HIV status even though counselling and testing facilities are available in various parts of the country (16 VCT centres countrywide). By end 2003, only 80,000 people had utilised these centres since they started in 2001. Stigma discourages HIV testing and the uptake of both PMTCT and antiretroviral therapy in general and perpetuates the ignorance on which the epidemic thrives.

Malaria per 1000 population in malaria Epidemic District



COORDINATING AND HARMONIZING ALL THE SYSTEMS AND PROCESSES

In the specific case of HIV/AIDS, there are lots of players who could easily compete with or duplicate each other's efforts. The Government, donors, NGOs, CBOs, private businesses, and the affected communities and individuals are all involved in the fight against HIV/AIDS. This is good but it also presents a major governance, coordination and harmonisation challenge to ensure systemic synergies and maximum impact.

SECURING A BREAKTHROUGH BEHAVIOURAL CHANGE

Positive behavioural change remains the key response to reducing the incidence of HIV/AIDS. Hurdles to behavioural change abound – culture, gender inequality, myths, poverty, etc. – but are surmountable. The culture of silence on which the epidemic thrives must be broken through sustained advocacy and education to facilitate the transformation of knowledge about HIV into positive behavioural challenge.

MITIGATING THE IMPACT OF HIV/AIDS ON DELIVERY CAPACITIES

The magnitude of HIV/AIDS induced capacity erosion suggests an urgent need for Botswana and similarly affected countries to re-engineer service delivery. One

approach is to mobilise the capacities that reside in the communities, NGOs, CBOs and the private sector and outsource the delivery of some services to them.

Community Home Based Care (CHBC) provides a model in Government/community partnerships for the delivery of health care services. Beyond this, a bold strategy to preserve and strengthen service delivery across sectors in the face of capacity erosion is required. It could involve better use of information and communication technologies (ICTs) i.e., e-services, and rethinking training and recruitment strategies, in particular, shortening the duration of some courses and facilitating increased utilisation of expatriate personnel.



CHALLENGES FOR TB AND MALARIA

Measures have been put in place to ensure success in TB prevention. The default rate on the successful Direct Observation Treatment (DOT), through which Botswana made great progress against TB before the advent of HIV/AIDS, is, at 9 percent, higher than desired and could lead to treatment failure and the development of drug resistance. HIV/AIDS creates an added imperative to ensure strict compliance with TB treatment. However, drug resistance levels are monitored and treatment regimens controlled to secure treatment options should resistance emerge. Tuberculosis treatment could be better integrated into home-based care to reduce treatment interruptions.

With regard to malaria, the two main methods of vector control, residual house spraying and the use of insecticide treated materials are hampered by low coverage and this leads to failure to interrupt malaria transmission. The potential for increasing resistance of parasites to anti-malarials is also a problem at the level of case management.

3. SUPPORT POLICIES AND PROGRAMMES

The table below summarises the range of policies, strategies and programmes that have been developed since 1995 to fight the major diseases – HIV/AIDS, Tuberculosis and Malaria.

Key Policies and Programmes

The Instrument	Year	Objectives
Policies		
HIV/AIDS Policy	Revised 2004	To guide the governance and coordination of HIV/AIDS programmes in Botswana
Strategies		
National Strategic Framework (NSF)	2003	Provides guidance on the national response and encompasses prevention methods, strategies, goals, objectives and targets
Programmes		
Prevention of Mother to Child Transmission (PMTCT)	1999	To improve child survival through the reduction of HIV related morbidity and mortality; reduce the incidence of HIV infections in children through mother to child transmission by 50%
Community Home Based Care (CHBC)	1995	Ensuring quality care at all levels from health facility to home level; To provide food through the food basket strategy
Isoniazid Preventive Therapy (IPT)	2000	To prevent TB among HIV infected persons
ARV/HAART therapy	2002	To reduce the impact of AIDS through treatment
Voluntary counselling and testing (VCT)	2002	To provide opportunities for HIV testing in the whole country
Botswana National TB Control Programme (BNTCP)	1975	To control the spread of Tuberculosis
Information Education and Communication	...	To create awareness through advocacy for prevention of HIV/AIDS; To mobilise participation of different partners and Stakeholders
Routine HIV Testing	2004	To raise the uptake of HIV testing

4. TO TRACK PROGRESS TOWARDS THE TARGETS

Botswana has a credible system of collecting health statistics. The table below suggests that this capacity is fairly robust. Even so, there are areas where significant improvements are needed.



In the specific case of HIV/AIDS, sentinel surveillance data provide an inadequate basis for estimating prevalence. Population based surveys – the maiden survey is being carried out at this time - provide more reliable information on prevalence. Furthermore, there are difficulties in estimating HIV incidence and AIDS related mortality.

The problems of measuring incidence are in part attributable to the nature of HIV/AIDS, especially the long incubation period, and the stigma attached to the disease. The decision by the Government to move from 'voluntary' to 'routine' testing as of January 1st 2004 is likely to improve the situation. Confronting stigma should also make it easier to separate AIDS deaths from other deaths, thus improving the ability to document HIV/AIDS related mortality properly.

Monitoring and Evaluation Capacities

Elements of Monitoring Environment	Assessment		
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

GOAL 7

“By the year 2016, economic growth and development in Botswana will be sustainable. Renewable resources will be used at a rate that is in balance with their regeneration capacity... There will be a fully integrated approach towards conservation and development. The key natural resources and assets of the country will be equitably distributed between its people. Communities will be involved in the use and preservation of their environmental assets, and will benefit directly from their exploitation. The attitude towards natural resources will pay attention to a fair distribution between present and future generations. The wild life of Botswana will be managed for the sustainable benefit of the local communities, and in the environment.”

QUOTE FROM VISION 2016



THE ENVIRONMENT

Targets	Will target be reached?	Conducive Environment?
18. Reduce by 50 percent, the proportion of people without sustainable access to safe drinking water by 2015	Likely	Strong
19. Reduce conflict between population growth, land usage and environmental and natural resources degradation	Potentially	Good
20. Promote environmental education and awareness necessary to reduce the level of environmental contamination and achieve sustainable development	Potentially	Good

Botswana's range of policy and legislative instruments for sustainable use of environmental resources is extensive. Institutional and monitoring capabilities should receive similar attention.

1. WHAT IS THE SITUATION LIKE?

Botswana’s stock of natural resources includes land, minerals, water, flora and fauna, and is the backbone of the economy and livelihoods. The basic principle governing the management of these resources is, as stated in NDP9: “Integration of the conservation of natural resources into the national development process” to achieve sustainable development. The attendant objectives are the achievement of equity, intra and intergenerational, in the use of natural wealth. Thus sustainable development is viewed in terms of strategically linking population dynamics, the economy and natural resources to balance development interests within and across generations.

The management of Botswana’s natural resources is guided by national environmental legislation and strategies, and multi-lateral environmental agreements (MEAs), seven of them signed between 1997 and 2003 alone. The Government is committed to Agenda 21, the global environmental agenda for addressing the key socio-economic and environmental challenges of the 21st century.

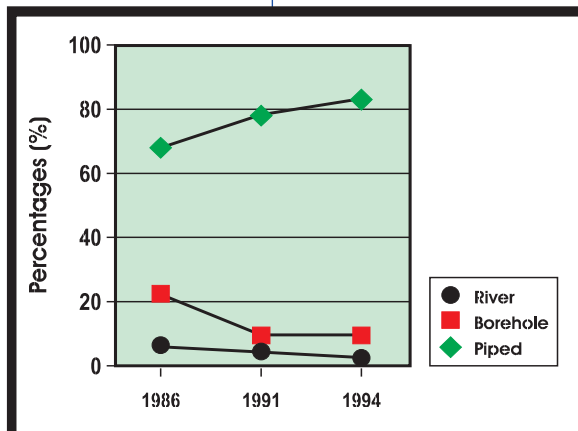
Within the framework of the sustainable use of environmental resources, the priority environmental issues are: (a) land degradation and the related issues of desertification, soil erosion and biodiversity loss; (b) conflicting land uses, some of which are discussed below; (c) climate change; (d) access to water, for household, livestock, arable and industrial use; (e) water scarcities; (f) fuel wood depletion and lack of alternative forms of energy; and (g) the protection of cultural and natural heritages.

The human development concerns emanating from the foregoing are equitable access to land resources such as water and land; and land use conflicts. The key land use conflicts are those between human beings, livestock and wildlife; those between commercial interests such as large-scale farming, mining and tourism on the one hand and subsistence interests such as small-scale farming, hunting and gathering on the other; and that between the present and the future - do current generations’ use of natural resources provide adequately for future generations’ development need for such resources?

Multilateral Environment Agreements signed by Botswana.

1. UN Framework convention on climate change (UFCDD).
2. UN Convention to Combat Desertification (UNCCD)
3. Convention on Biological Diversity (CBD).
4. The Ramsar Convention on Wetlands of International Importance.
5. The Basel Convention on control of Trans-boundary movement of Hazardous Waste and their Disposal.
6. The Cartagena Protocol on Biosafety
7. The Convention on the Protection of the World Cultural and Natural Heritage

Percentage of Households using Piped Boreholes and River Water source



ACCESS TO SAFE DRINKING WATER

Although water is a scarce resource in Botswana, the country is firmly on course to ensuring universal access to safe drinking water. The proportion of the population with sustainable access to safe drinking water has increased, rising from 77% of the population in 1996 to 97.7% by the year 2000.



Surface water resources, though limited, are the main source of water supply in urban areas while rural areas rely more on underground water resources. All officially recognised settlements have at least one standpipe within an average radius of 400m from every household, provided and maintained by the Government.

Some disparities in access to water exist between urban and rural areas. In 2000, nearly all households in urban areas had running water in their homes (52.1%) or could fetch it from a nearby public standpipe. Only 9.1% of rural households had piped water in their homes. About 7% did not have access to safe drinking water at all.

Main Sources of Piped Water for Households in Botswana in 2000 (%)

Location	Inside House/Plot	Outside Plot	Other
Urban	52.1	47.9	0.0
Urban Village	50.1	49.7	0.2
Rural	9.1	84.2	6.7
National	37.1	60.6	2.3

ACCESS TO SANITATION

According to 2001 census data, 77% of households in Botswana have adequate on site sanitation – 95% in urban areas and 51% in rural areas – as per the WHO standard. Slum conditions do not exist anywhere in the country. Even so, there are high-density areas in towns where sanitation levels are relatively poor. Furthermore, the majority of households outside towns and cities use pit latrines and septic tanks, which are threats to underground water resources.

Sewerage coverage and waste management in towns and cities is good, so sewerage programmes are putting more emphasis on rural areas. The National Master Plan for Waste Water and Sanitation aims to double sewerage coverage from 12.5% of the population to 25% by 2030. Commensurate effort should go into sewerage and waste water management. Botswana has about 75 wastewater treatment facilities and manages to avail only half of its annual throughput of wastewater for reuse.

Sanitation Standards

The WHO on site sanitation standard accepts a pit latrine as adequate. The Government of Botswana uses a relatively higher standard, the ventilated pit latrine. According to this standard, sanitation levels drop to 39% in 2001 – 53% in urban areas and 18% in rural areas.

The GoB aims to raise access to sanitation to 75% by 2030 through initiatives that target the population without access to sanitation and those using unventilated pit latrines

MANAGING AIR POLLUTION

Information from Botswana's 17 monitoring stations in the country indicates that air pollution levels are high in three major population centres, namely, Gaborone, Selibe Phikwe and Maun. In Gaborone, the key pollutants are industrial dust, motor vehicle emissions, and smoke from burning refuse. In Selebe



Phikwe, the main pollutant is sulphur dioxide gas from the local copper-nickel smelter complex. Though sulphur dioxide concentration levels remain within the allowable limit of $160\mu\text{g}/\text{m}^3$ most of the time, the gas damages both natural vegetation and crops around the town, and is a health hazard, especially to asthma patients. Maun has registered high concentrations of ozone pollution, whose annual peak, in October, coincides with the dry season and veldt fires.

Air pollution is regulated through the Atmospheric Pollution Prevention Act (APPA), which sets pollution control standards and provides for the monitoring of industrial pollution and the issuance of Air Pollution Registration Certificates (APRC) to compliant polluting industries.

LAND USAGE AND ENVIRONMENTAL DEGRADATION

Botswana's land surface area is about 582,000 km². Only about 5% of this is cultivable and less than 1% is tilled. The main forms of land use are (a) reserved forest and vegetation, (b) pastoral farming (60%), (c) National Parks, Game Reserves and Wildlife Management areas. Botswana has set aside 17 percent of its land area for national parks and game reserves. Wildlife utilization has been earmarked as the main form of land use on a further 22 percent. In addition, there are several private game reserves and sanctuaries.

There are three forms of land tenure in Botswana, viz., customary, freehold and state. Customary land accounts for 71% of the total land surface area and is a communal resource on which user rights are relatively insecure. State land accounts for 23% of the country's land surface area and is managed exclusively by the State. It comprises game reserves and forest reserves. The remaining 6% is freehold land under which users have well defined and well protected exclusive rights of use.

Pressure on land resources comes from a variety of sources: economic expansion, population growth, migration, livestock populations, animal populations, and climate change. Economic activities, industry, farming, etc., not only consume land resources but also pollute them. Population growth leads to the annexation of more virgin land to meet human needs such as shelter, energy and water, and the generation of higher volumes of waste. Thus, the GoB has opted for integrated land use planning to strike a balance between competing land uses.



ENVIRONMENTAL EDUCATION AND AWARENESS

Education and public awareness about environmental issues is fairly strong even though the total effort on environmental education appears under-resourced and in need of stronger coordination. The National Conservation Strategy Agency (NCSA) coordinates advocacy and public awareness on environmental conservation. A number of NGO's



are also active in environmental conservation and awareness creation. Significant achievements have been made.

Environmental education has been integrated into the school curriculum. Public education seminars are held in districts/communities and every year, high profile commemorations are held on environmental issues. The print and broadcast media (radio in particular) also cover environmental education. Strict regulation of hunting activities has also generated strong community consciousness about conservation issues and significantly reduced illegal hunting.

The impact of environmental education on public perceptions and practices in relation to the environment is not easy to measure but the message, even when received and understood, may be in operable under conditions of poverty. For instance, fuel-wood is the dominant source of energy for poor people, especially in rural areas. In 2002, an estimated 92% of rural households and 43% of urban households depended on fuel-wood for energy. This is a threat to biodiversity but technology is yet to deliver viable alternatives for poor people. Nevertheless, there has been a steady decline in dependence on fuel-wood between 1991 and 2001, which most likely reflects rising scarcity values for fuel-wood and growth in household income.

2. MAJOR CHALLENGES

Botswana is alert to many of the mainstream environmental challenges and has signed the major international instruments relating to these. The country must now focus on strengthening institutional capacity to take care of its environmental resources in accordance with these commitments and its development needs. The challenges are many and varied but two of the more urgent challenges relate to water and land.

RESPONDING TO THE INCREASING DEMAND FOR WATER

Water is a scarce resource in Botswana. It is scarce enough to become a binding constraint on development given the rapid increase in consumer and industrial demand for it. The water challenge is threefold.



First, Botswana must stay on the course of developing and protecting (from contamination) surface and underground water resources to meet demand. This should include maximising the capture of runoff water during good rains and exploring the viability of treating and recycling wastewater for reuse. Second, more effort must go into the search for more efficient technologies for using water in the household and at the industry level. Third, user consciousness about water conservation should be raised. These interventions should be elements of a strategy for sustainable development and distribution of water to all.

Access to water is also about developing and sustaining adequate supply capacity. How much of the cost of such capacity should the Government pass to users directly? A progressive cost recovery strategy may be evolving. The Water Utilities Corporation, aims for full cost recovery in the areas it serves, which are urban and richer. The Department of Water Affairs, which serves the poorer rural areas, aims for full recovery of operational costs and partial recovery of capital costs. Cost recovery in the provision of water is a sensitive proposition because water is an essential commodity, thus any cost recovery strategy proposed must be income progressive.

IMPROVING LAND MANAGEMENT TO MEET DEVELOPMENT NEEDS.

Land management remains a contentious issue in Botswana because of conflicting land uses and the expansion of human settlements and economic activity into new territories. The high profile issues of the moment are, (a) conflicting land uses, which underpin the ongoing conflict between the Basarwa and the Government over the former's relocation from the Central Kalahari Game Reserve; (b) the land market in urban areas, which is redistributing land in favour of the rich and frustrating Government programmes that give poor people access to land in urban areas; (c) and the privatisation of communal land for commercial purposes and the consequent curtailment of poor people's access to natural resources on such land.

Though less mentioned, holding land for speculative purposes is a cost society can ill-afford, especially in and around major human settlements. Botswana should perhaps consider a progressive land tax to improve land use efficiency.

OVERCOMING RURAL POVERTY

Many of the challenges related to the environment require that progress be made against poverty. For instance, the Ventilated Improved Pit Latrine is not costly but is still beyond the reach of poor households. Successful poverty reduction could generate significant gains in environmental sanitation.

3. SUPPORT POLICIES AND PROGRAMMES

Botswana has an impressive mix of policies and legislation with a bearing on the environment, well in excess of 20. The key ones are listed in Table 19. The NCSA is the main agency overseeing the implementation of these policies and legislation.

Environmental Concerns of Existing Policies, Programmes and Legislation

The Instrument	Year	Objectives
Policies		
National Policy on Natural Resources Conservation and Development	1990	To pursue policies and measures that increase the effectiveness with which natural resources are used, managed, and integrated in the works of sectoral ministries and interest groups.
Tourism Policy	1990	To obtain from tourism on a sustainable basis, the maximum possible net economic and social benefits
National Agriculture Development Policy	1991	To enhance rangeland management
National Settlement Policy	1998	To guide national physical planning as well as the distribution of investment and services in line with the settlement's comparative advantages and characteristics.
The Wildlife Conservation Policy	1996 Under review	To provide an overarching framework to guide the conservation and sustainable utilization of wildlife in Botswana
Plans and Programmes		
National Water Master Plan	1992	To provide an adequate road map for water development and utilisation
District Development Plans	1985	To rationalize the provision of infrastructure and social services and address pressure on land use and land resources
Integrated Land Use Plan	...	To address land use conflicts and ease land use pressure
Environmental Legislation		
Town and Country planning Act	1977	To harmonise and rationalize allocation of land to different uses and to ensure orderly development in declared planning areas.
Tribal Land Act	Amended 1994	To contribute towards responding to the land use pressure and address problems relating to land use land competition and land conflict
Agricultural Resources Conservation Act	...	To guide the control and conservation of agricultural resources
Waste Management Act	1998	To address the issue of land pollution and dereliction associated with human settlements.
Wildlife Conservation and National Parks Act	1992	To contribute towards the conservation of wildlife as land resources and to address the land use conflict between wildlife and livestock.

4. TO TRACK PROGRESS TOWARDS THE TARGETS

Botswana's institutional capacity to manage environmental resources is still in the early development phase. This capacity constraint is especially manifest at the level of statistical capability, which is weak in many dimensions.

The weaknesses in monitoring and evaluation capabilities reflect a wider institutional challenge for the management of natural resources. The Ministry of Environment was established only recently and has brought together a number of departments that had been housed in other ministries. It has an enormous organisational challenge that includes developing coordination and management systems and filling critical positions.

Monitoring and Evaluation Capacity

Elements of Monitoring Environment	Assessment		
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

GOAL 8



GLOBAL PARTNERSHIP

“ Botswana will continue to cooperate with other nations for mutual benefit. In particular it will work with its neighbours to increase the degree of regional integration in trade and other policies, with a view to improving the competitiveness of the region as a whole. It will also continue to work with its neighbours and others to promote peace and an equitable international economic order. ”

QUOTE FROM VISION 2016

Targets	Will target be reached?	Conducive Environment?
21. Develop further, an environment conducive for beneficial trade and foreign direct investment	Likely	Strong
22. In cooperation with the private sector, make available the benefits of new technologies, especially information and communications technologies	Likely	Strong

Botswana's policy environment and the state of the economy are both conducive for international development cooperation and private sector development. It has an investor friendly tax regime, no foreign exchange controls, and a high sovereign credit rating, the highest in Africa. Its infrastructure is good and is still getting better. The Ministries of Trade and Industry (MTI), and Communications, Science and Technology (MCST) are overseeing policy and strategy developments that will further enhance Botswana's capacity to expand and sustain international trade and investment.

1. WHAT IS THE SITUATION LIKE?

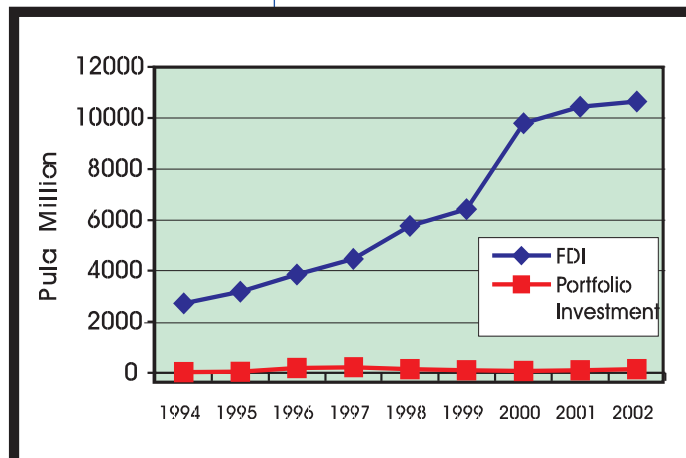
Botswana has benefited handsomely from international development co-operation, trade and investment. It has been privileged to enjoy the sustained goodwill of developed and developing nations across the world, thanks to a good foreign policy, good governance at home and good trade relations with its neighbours and the rest of the world.

EXPANDING TRADE AND FOREIGN DIRECT INVESTMENT

Botswana is a beneficiary of several progressive trade arrangements:

- *The SADC Free Trade Protocol, which effectively establishes a regional free trade zone;*
- *The Southern African Customs Union (SACU), a five nations – Botswana, Lesotho, Namibia, South Africa and Swaziland - customs free zone that establishes a large regional market for each of the member states and provides an optimal structure for collecting and distributing customs revenue;*
- *The Cotonou Agreement, which accords products from African, the Caribbean and Pacific (ACP) countries preferential access to the European Union (EU);*
- *The African Growth and Opportunity Act (AGOA), which accords some Botswana goods duty free and quota free access to the US.*

Foreign Investment
Position



Except for the SADC Free Trade Protocol and SACU, these arrangements are largely discretionary on the part of the conceding parties, and generally promote exports of primary goods and low value manufactures such as textiles and garments.

Over the period 1991-2001, the major destination of Botswana's exports was the European Union, accounting for 82.9 percent of total exports, mainly rough diamonds and beef. Diamonds continue to dominate exports, accounting for about 80% of the country's foreign exchange earnings. Export diversification is thus a strategic goal for Botswana and a matter of national economic security because of the economy's high dependence on mining for foreign exchange.

The measure of success achievable in export diversification depends on successful mobilisation of investment and economic diversification. In this regard, the critical imperatives are to accelerate growth in productivity and competitiveness in the non-mining sector and to the extent possible, engage in mineral based value adding activities. Mining accounts for a dominant share of Botswana's FDI stock. Foreign direct investment plays a critical role in both investment and economic diversification, but FDI is itself concentrated in mining.

The mining share of the FDI stock in Botswana was estimated at 79% in 2000. In fact, since the last major mining investment was made in 2000, growth in FDI has been slow. FDI promotion efforts must thus focus more on the non-mining sector.

Botswana offers one of the most secure environments for private investment in the developing world. The fiscal regime is very competitive. The company (profit) tax is only 25%. A select set of priority sectors, e.g., manufacturing and companies affiliated to the International Financial Services Centre (IFSC), are taxed at 15%. The top marginal tax rate on personal income is only 25%. The law defines and protects property rights well. More generally, the regulatory environment is investor friendly.

ENHANCING INFORMATION AND COMMUNICATION TECHNOLOGY CAPABILITY

Though not a leader in innovation, Botswana has the potential to become a decent technological diffuser because of its economic, educational and institutional capabilities. In 2002, it established a Ministry of Communications, Science and Technology (MCST) to oversee the development of its science and technology capabilities. The MCST has already moved to develop an ICT Policy and ICT Legislation, as well as to upgrade and expand communications infrastructure.

Prospects for creating and/or acquiring cutting edge knowledge and technology also rest substantially on the growth and quality of Botswana's trade and investment flows, and close collaboration with research and development institutions in the developed world. These are processes Botswana can facilitate through policy activism and investments in communications infrastructure and skills.

ATTRACTING MORE FOREIGN AID

When Botswana became a middle-income country in the mid 1990s, its aid inflows went down considerably. Whilst the country retained a strong fiscal position, the civil society sector haemorrhaged as external support went down. Donor support returned to Botswana when HIV/AIDS became a national crisis. But Botswana needs aid support beyond HIV/AIDS, especially for the non-Government sector, which contributes to good governance and provides incremental delivery capacity, but has stagnated since donors left in the 1990s.

2. CHALLENGES FOR ACHIEVING THE GOAL

The goal of building a global partnership for development may appear to be exclusively about what developed countries and multilateral agreements ought to accomplish for developing countries. But, from the developing world, the big gainers will be nations that proactively take measures to attract international resource inflows. In this regard, a number of key challenges stand out for Botswana, amongst them the following:



ACCELERATING THE PACE OF EXPORT GROWTH AND DIVERSIFICATION

Botswana needs to develop capacity to manage external trade and investment effectively. Some of the required measures are institutional. Others are of a policy and regulatory nature. Much work has been done on the latter. With regards to the former, Botswana must build adequate capacity in the Department of Trade to manage trade and investment policy reforms and build synergies between the institutions that promote trade and investment. The global trade regime also presents a challenge because it has a number of flaws. For instance:

- *It permits developed countries to protect their manufacturing industries through tariff escalation on value-added products from developing countries, and low tariffs on raw material inputs from developing countries;*
- *It urges high paced trade and investment liberalisation on developing countries, which experience indicate is inimical to the industrialisation process;*
- *It permits a patent and intellectual property regime that denies poor countries access to essential technologies such as life saving drugs and productivity enhancing technologies.*

For Botswana and other developing nations to realise the potential benefits from world trade, the rules of the game must change to improve market access; accord poor countries the policy space to develop their production base; and improve access to new technologies.

Furthermore, the multilateral forums that develop and implement global trade rules, e.g., the World Trade Organisation, must be democratised. At present, there is a pervasive view that they serve the interests of developed nations as opposed to promoting development throughout the world.



CREATING INNOVATIVE AND COMPETITIVE NICHES FOR ATTRACTING FDI

The existing political and policy environments no longer provide a decisive advantage for Botswana in promoting FDI because virtually all developing countries either have or are undertaking liberalising reforms. Therefore different forms of incentives are needed to increase FDI inflows into the country. It has become necessary for Botswana to focus its FDI promotion efforts less on fundamentals

such as political and policy correctness - reforms at this level are now universal - and more on measures that create competitive niches for FDI.

Three immediate challenges emerge from the required shift. One is deepening the skill base. The other is deepening Botswana's technological capability. Both require increased but focused investment in education and technology and systematic reduction of investor hassle costs to competitive levels. The last is the development of sector specific investment incentives based on discernible and exploitable potential.

IMPROVING THE NATION'S SERVICE ENVIRONMENT

The 2000 Investment Policy Review pointed to the existence of significant “has-sle costs” for foreign investors, including unnecessary delays in business licensing, registration and the issuance of work and residence permits for expatriate directors and workers. Another important aspect of the service environment is the creation of a liveable environment – good schools, health facilities, restaurants, recreation facilities etc.

The question is whether taking these and other measures would change the current slow-pace of attracting FDI and promoting trade. There are issues over which Botswana has little or no influence, and yet impact on both the nature and potency of international development cooperation. One such issue is the development of an equitable and rule based system of global trade. As a small developing economy, Botswana shares the disadvantage of so many like her. It has little capacity to influence discussions in multilateral forums such as the WTO.

STRENGTHENING PARTNERSHIPS IN THE FIGHT AGAINST HIV/AIDS

Botswana cannot win the war against HIV/AIDS on its own. Although Botswana funds 60-70% of the cost of its HIV/AIDS programme, the financial contribution of international development partners is significant, as is their expertise and technology.

Development resources for HIV/AIDS programmes help mitigate the diversion of state resources from other development priorities to HIV/AIDS. Development partners also provide technical support for programme design and implementation. Equally important is the foreign expertise going into research towards the development of an HIV/AIDS vaccine or cure.

3. SUPPORT POLICIES AND PROGRAMMES

The Government of Botswana has been proactive in promoting economic diversification, export growth, and foreign direct investment. Its strategy includes tax incentives, a liberal foreign exchange control regime, and special fiscal incentives such as the Citizen Entrepreneurial Development Agency (CEDA). The Ministry of Communications, Science and Technology, established in 2002, will oversee the development of key policies and programmes that aim to propel Botswana towards information and digital inclusion. Botswana is negotiating a number of Bilateral Investment Treaties, which will hopefully improve FDI inflows from the other parties to Botswana on terms that serve Botswana's development interests.

Policies and Programmes

The Instrument	Year	Objectives
Policies and Strategies		
Development Policy [IDP]	1990	To promote and facilitate diversification, export development and employment creation opportunities
Competition Policy	Being finalised	To promote and regulate FDI, business licensing, registration and work and residence permit system
FDI strategy	Being finalised	To promote and regulate FDI
Investment Policy Review	2000	To measure progress made and provide guidance for future action
ICT Policy	Drafting stage	To promote investment in and use of ICT
Legislation and International Agreements		
Competition Law	Being finalised	To promote and regulate FDI, business licensing, registration and work and residence permit system
ICT Legislation	Drafting stage	To promote e-commerce
Cotonou Agreement	...	To allow products from Botswana access to the European Union [EU] market free of customs duties or at preferential rates of duty
AGOA	...	To allow duty-free and quota free access for Botswana products to the US
Norway/Botswana GSP Programme	...	Botswana exports copper and nickel to Norway

4. TO TRACK PROGRESS TOWARDS THE TARGETS

Trade and Foreign Direct Investment are central to Botswana's development strategy and so trends in trade and FDI need to be closely monitored and analysed. Trade statistics are fairly adequate. FDI statistics are not, however. This reflects the absence of a systematic approach to measuring FDI flows. Furthermore, the analysis of both trade and FDI statistics is largely limited to commentary by CSO and Bank of Botswana. Trade and FDI require not only close monitoring but also rigorous analysis to inform policy.

Assessment for Monitoring and Evaluation

Elements of Monitoring Environment	Assessment		
	Strong	Fair	Weak
Data gathering capacities	Strong	Fair	Weak
Quality of recent survey information	Strong	Fair	Weak
Statistical tracking capacities	Strong	Fair	Weak
Statistical analysis capacities	Strong	Fair	Weak
Capacity to incorporate statistical analysis into policy	Strong	Fair	Weak
Monitoring and evaluation mechanisms	Strong	Fair	Weak

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VISION 2016 GOALS

In 1997, following a long process of consultation with all stakeholders, the Government of Botswana finalized the “Long Term Vision for Botswana: Towards Prosperity for All”, popularly referred to as “Vision 2016”. It follows the five national principles of Democracy, Development, Self Reliance, Unity and 'Botho'. Vision 2016 calls upon all citizens of Botswana to embrace and manage the process of change in accordance with the following goals.

GOAL 1: AN EDUCATED, INFORMED NATION.

GOAL 2: A PROSPEROUS, PRODUCTIVE AND INNOVATIVE NATION.

GOAL 3: A COMPASSIONATE, JUST AND CARING NATION.

GOAL 4: A SAFE AND SECURE NATION.

GOAL 5: AN OPEN, DEMOCRATIC AND ACCOUNTABLE NATION.

GOAL 6: A MORAL AND TOLERANT NATION.

GOAL 7: A UNITED AND PROUD NATION.

MILLENNIUM DEVELOPMENT GOALS

In September 2000, at the United Nations Millennium Summit, the world leaders from 189 nations agreed to a set of time-bound and measurable goals and targets. Botswana was also a signatory to the Millennium Declaration, and all UN agencies, funds and programs are committed to the 8 goals.

GOAL 1: ERADICATE EXTREME POVERTY AND HUNGER.

GOAL 2: ACHIEVE UNIVERSAL PRIMARY EDUCATION.

GOAL 3: PROMOTE GENDER EQUALITY AND EMPOWER WOMEN.

GOAL 4: REDUCE CHILD MORTALITY.

GOAL 5: IMPROVE MATERNAL HEALTH.

GOAL 6: COMBAT HIV /AIDS, MALARIA AND OTHER DISEASES.

GOAL 7: ENSURE ENVIRONMENTAL SUSTAINABILITY.

GOAL 8: DEVELOP GLOBAL PARTNERSHIP FOR DEVELOPMENT.