



World Health Organization



A glimpse into WHO work in Botswana





Bakanuki Flora Nfila, WHO National Surveillance Officer for Vaccine Preventable Diseases, at Glen Valley Wastewater Treatment Plant in Gaborone during a waste water sampling activity for polio.

Executive Summary



As the leading health authority within the United Nations system, the WHO Country Office has been at the forefront of supporting the government to improve health in Botswana since 1996. The WHO Country Office supports the Ministry of Health towards realising the health goals defined by the Government of Botswana. Acknowledging that as an upper middle-income country Botswana provides the bulk of its own resources for implementing

health programmes, the WHO brings technical expertise to the table both directly and by collaborating with relevant partners. Where the country office has limitations in terms of human resources with the requisite expertise to answer the country's needs, the regional level and headquarters of the WHO will be mobilised to provide the necessary support.

This publication articulates the WHO Botswana Country Office's focus and investment needs for the biennium 2022–2023, building on achievements, networks, and partnerships fostered in 2020–2021.

“ The Country Office continues to contribute to the WHO's general programme of work to increase its impact on the ground and step up its work in conjunction with the health sector partners. The WHO staff is committed to strengthening its leadership to add the most value and streamline the way the work is delivered. Quicker results with greater impact can also be achieved by working smarter and nurturing a culture of collaboration.”

Dr Josephine Namboze

WHO Country Representative

WHO Core Functions

The WHO fulfils its objectives through its core functions:



PARTNERSHIPS

Providing leadership on matters critical to health and engaging in partnerships where joint action is needed



RESEARCH

Shaping the research agenda and stimulating the generation, translation, and dissemination of valuable knowledge



STANDARDS

Setting norms and standards and promoting and monitoring their implementation



POLICY

Articulating ethical and evidence-based policy options



CAPACITY

Providing technical support, catalysing change, and building sustainable institutional capacity

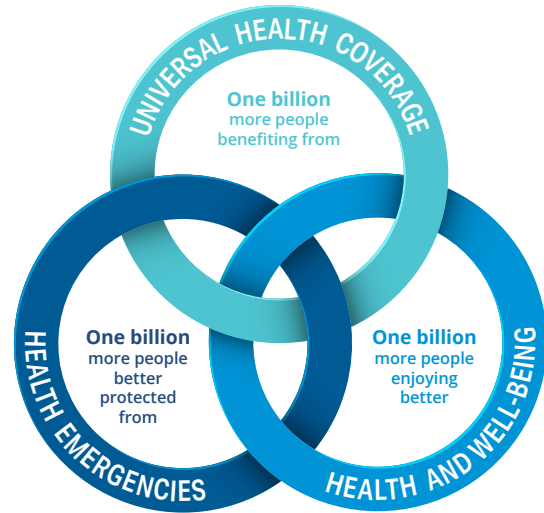


MONITORING

Monitoring the health situation and assessing health trends

WHO General Programme of Work

The WHO has embarked on a bold agenda, led by its Thirteenth General Programme of Work (GPW 13) for 2019–2025 and its ambitious ‘Triple Billion’ targets, which prioritises the deepening of cooperation with partners to achieve impact and improvements in health and well-being for all people, at all ages.



THE WHO'S MISSION

Based on the Sustainable Development Goals, GPW 13 summarises the WHO's mission to:

PROMOTE
HEALTH



KEEP THE
WORLD SAFE



SERVE THE
VULNERABLE

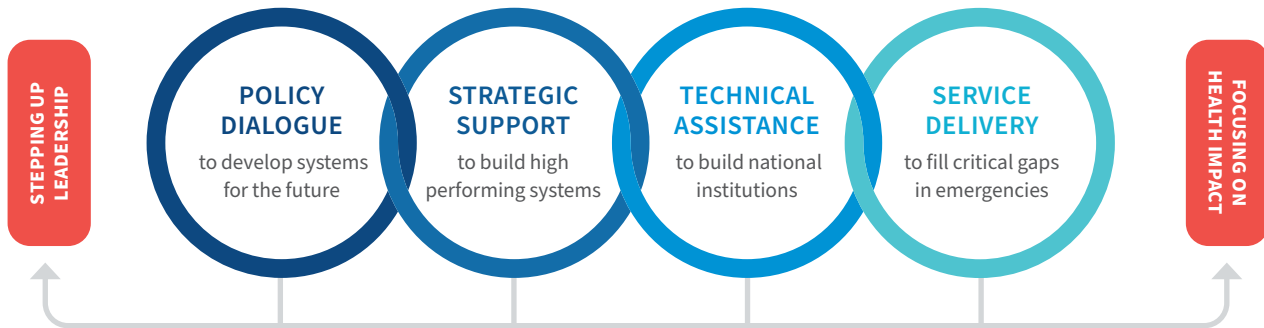
The COVID-19 pandemic has demanded strong leadership and coordination and demonstrated the benefits of the WHO's transformation into an agile organisation that can rapidly leverage global technical expertise and operate locally. The WHO will continue to evolve alongside shifting disease patterns and innovations in science while remaining grounded in its core values of solidarity and equity to build its vision of a healthier, safer, fairer world in the 21st century.

Strategic shifts from the WHO General Programme of Work

The current General Programme for Work guides the WHO to drive public health impact through focused and effective country-based operations by working closely with partners, engaging in policy dialogue, providing strategic support and technical assistance, and coordinating service delivery in response to specific country

needs. In Botswana, interactions exist in all four areas, although, in service delivery, engagement is limited to catalytic actions and collaborations with implementing partners. The result is improved leadership within government structures and a focus on achieving health impact.

A CONTEXTUALISED AND DIFFERENTIATED APPROACH TO SUPPORTING THE HEALTH SECTOR



Co-operation for health in Botswana

Under the direction of the Ministry of Health leadership and the WHO, efforts to improve collaboration and the coordination of partners in the health sector are ongoing.

The **Botswana Health Partners Forum** was established to discuss better ways to support the health sector and strengthen the harmonisation and alignment of partner support. Stakeholders are the Ministry of Health, including the National AIDS Promotion Agency (NAHPA), Local Government, bilateral bodies such as the US government through USAID, PEPFAR and the CDC, the European Union, the Global Fund, multi-laterals such as the UN family, local and international NGOs, academia, and public and private medical aid societies among others.

The Forum meets twice a year to review the health sector's performance and realign efforts and investments towards national health goals.

UN Botswana developed the Cooperation Framework 2022–2026 that aligns with the National Development Plan NDP11 (2017–2023) and will guide the UN Delivering as One pursuant to Botswana achieving its Sustainable Development Goals, including the health targets.

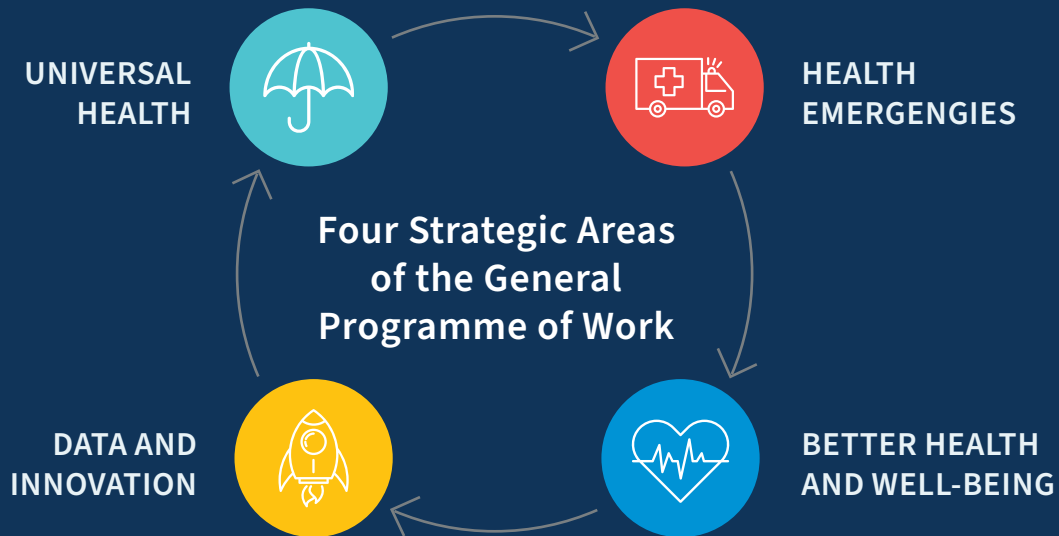
The WHO contributes particularly to Outcome 2 of the UN Cooperation Framework, aiming to provide all people, particularly vulnerable and marginalised groups, with equitable access to quality health services, nutrition, education, and



▲ Tigele Chaboneka, a social worker at the Botswana Network for People Living with HIV/AIDS (BONEPWA), talking to community members in Serowe about the importance of HIV medicines during pregnancy and childbirth.

social protection by 2026. Inequitable access to critical health and social services is a key driver of inequality in Botswana and perpetuates the multi-dimensional deprivations experienced by vulnerable people, marginalised groups and children.

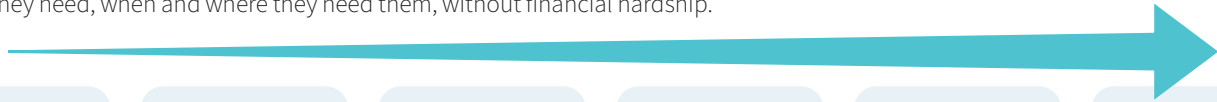
WHO Strategic Priorities in Botswana





UNIVERSAL HEALTH COVERAGE

Universal health coverage means that all people have access to the full range of quality health services they need, when and where they need them, without financial hardship.



CARE FOR MOTHERS

Ensure access to quality care for mothers and their babies, before, during and after delivery.



HEALTH RIGHTS

Promote sexual, reproductive, maternal, newborn, child and adolescent health and rights across the life course.



PRIMARY CARE

Improve access to and quality essential health services at primary health care and referral levels.



ESSENTIAL SERVICES

Improve access to quality essential health services to address immunisation, HIV, STIs, Tuberculosis, Viral Hepatitis, Malaria and Neglected Tropical Diseases at all levels.



EARLY DETECTION

Strengthen the capacity for early detection, diagnosis and management of Non-Communicable Diseases (NCDs).



INTEGRATED CARE

Support the development and implementation of strategies to improve the health and well-being of older persons, including integrated care.



Achievements

Botswana is the first country in the region to provide **universal free antiretroviral treatment to people living with HIV**. Measured against the 90–90–90 set global targets for adults aged 15–64, the cascade results are 93–97–98.

93%

of adults living with HIV reported knowing their HIV status

97%

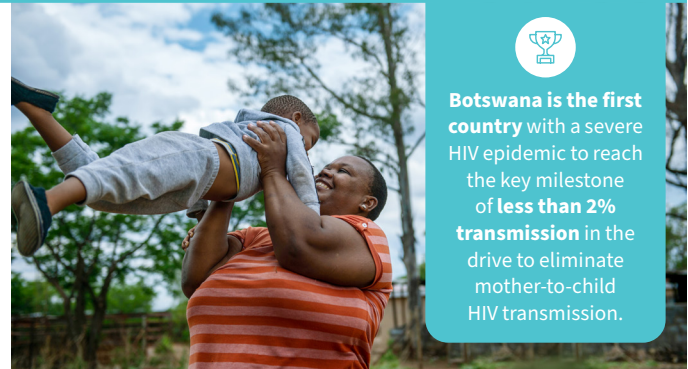
of individuals reported being on treatment

98%

of individuals on treatment are virally suppressed



◀ HE Eric Masisi, President of Botswana, receiving the certification for the elimination of mother-to-child HIV transmission from Dr Matshidiso Moeti on 2 December 2021 in Gaborone from WHO Regional Director Dr Matshidiso Moeti.



Botswana is the first country with a severe HIV epidemic to reach the key milestone of **less than 2% transmission** in the drive to eliminate mother-to-child HIV transmission.

▲ Dora, a woman in Serowe living with HIV, has benefited from the highly effective lifelong triple antiretroviral treatment regimen since she became pregnant with her son Ryaz, who was born HIV-free.



◀ Cecilia from Lobatse is a mother of four who has benefited from free ARV treatment since 2004.



HEALTH SECTOR DIALOGUE

Health sector dialogue on the revitalisation of Primary Health Care is supported. The Botswana Primary Health Care Consultative (BPHCC) Forum was held to reach a common understanding of the revitalisation of the primary health care agenda for sustained investment in achieving Universal Health Coverage.



HEALTH SECTOR COORDINATION REVITALISED

The Botswana Health Partners Forum (BHPF) was held to harmonise and align planning, financing, implementation, monitoring, and evaluation of the health sector. The BHPF will meet twice a year.



DHMT TRAINING

Training 18 newly deployed District Health Management Teams (DHMTs) on corporate and technical roles in the decentralised health service delivery.



MALARIA ELIMINATION

In 2020, Botswana committed to the WHO-led Malaria Elimination 2025 initiative (E-2025).



- ◀ Botswana developed a Multi-sectoral Strategy for the Prevention and Control of Non-communicable Diseases.



- ◀ The Southern African Development Community (SADC) Human Resources for Health Strategic Plan 2020-2030 'Investing in Skills and Job Creation for Health' as part of the joint WHO, ILO and OECD Working for Health (W4H) programme, was adopted in November 2020.



ELIMINATION OF NTDs

Accelerated the elimination of Neglected Tropical Diseases (NTDs) mainly by Soil-transmitted Helminths (STHs)



- ▲ WHO staff distributing stool-sample containers to students at Parakarungu Primary school in Kasane for NTD testing.

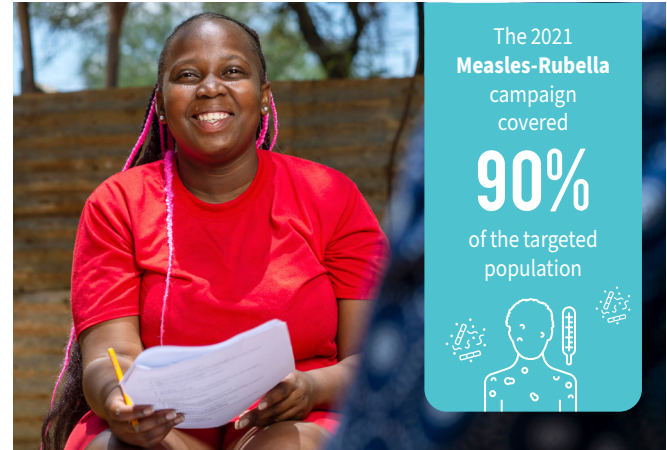
MASS DRUG ADMINISTRATION AGAINST NTDs



90%
coverage of the target population in 2021

STENGTHENED RMNCAH-N PROGRAMME

Strengthened the adolescent component of the Botswana integrated Reproductive, Maternal, Newborn, Child and Adolescent Health and Nutrition (RMNCAH-N) programme



The 2021 Measles-Rubella campaign covered

90%

of the targeted population



- ▲ Keneilwe is a 17-year-old student in Lobatse who dreams of becoming a pharmacist in her community.



ADDRESSING HEALTH EMERGENCIES

The WHO supports the Government, in collaboration with its partners, to enhance the country's capacity to increase preparedness, detection and management of all hazards and health emergencies.

- ▶ Minister of Health Dr Edwin Dikoloti (centre), Permanent Secretary Grace Muzila (right) and WHO Country Representative Dr Josephine Namboze, before welcoming the UK Emergency Medical Team called to respond to the Covid-19 pandemic in Botswana. August 2021.



Laboratory



Surveillance



Human Resources



Health emergency
framework



Health service
provision



Risk
communication



Successful response to the COVID-19 pandemic

Out of the national target of
1,390,856 people
(above 18 years),



of the population had received at least one dose of the vaccine, and



were fully vaccinated.




By the end of 2021, a cumulative **2,044,973 laboratory tests** had been performed in ten laboratories across the country.

A total of **266,913 cases** and **2,538 deaths** had been reported




- ▶ Critical care nurses and a doctor at the Scottish Livingstone Hospital in Molepolole assessing the isolation centre. September 2021.



- ◀ The first shipment of 24,000 AstraZeneca COVID-19 vaccine doses arrived in Botswana on 27 March 2021 through COVAX.



- ▶ Drive-through COVID-19 vaccination campaign in Gabarone. October 2021.



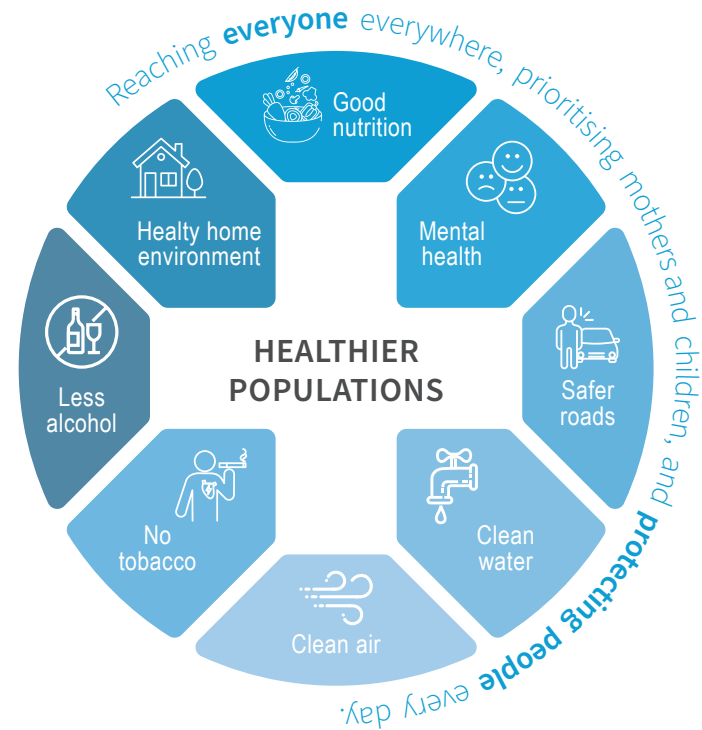
BETTER HEALTH AND WELL-BEING

To ensure healthy lives and the well-being of all at all ages, reaching everyone everywhere, prioritising mothers and children, and protecting people every day, multiple determinants of health are acknowledged and addressed:

- ✔ Social determinants include good nutrition and **mental health** throughout the life course.
- ✔ Environmental determinants, including **climate change**.

To reach every community for better health and well-being, the Country Office engages in multisector action to:

- ✔ Develop and implement **technical packages** to address risk factors.
- ✔ **Adopt, review and revise laws**, regulations and policies related to tobacco, alcohol, and pollutants.
- ✔ Create an **enabling environment** for healthy cities, villages, homes, schools, and workplaces.





Achievements

TOBACCO CONTROL BILL NO.9 OF 2021

Launched in December 2020, the Global Adult Tobacco Survey (GATS), reports that 240,000 adults in Botswana use tobacco, the highest rate in the SADC region. Tobacco Control Bill No.9 of 2021 repeals and re-enacts the Control of Smoking Act to align it with the WHO Framework Convention on Tobacco Control to which Botswana is a party.

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▲ The 'Commit to Quit' campaign in Gaborone marked the World No Tobacco Day, 31 May 2021.



◀ Professor Bontle Mbongwe, from the Department of Environmental Health at the Faculty of Health Sciences, University of Botswana, received the Special Recognition Award on World No Tobacco Day 2021. Professor Mbongwe is the founder of the Anti-Tobacco Network and leader in the tobacco control area in Botswana.



WHO Botswana received two awards for leadership in road safety

Streets for Life activities at Ithuteng Primary School in Gaborone during the Global Road Safety Week in May 2021.



Healthy diet

The 2020 State of Food Security and Nutrition in the World states that

64.5% of Botswana cannot afford a healthy diet.

A healthy diet helps to protect against malnutrition in all its forms, as well as Non-communicable Diseases (NCDs).





DATA AND INNOVATION

Strengthening monitoring and evaluation systems for evidence generation and monitoring national health trends is one priority of the WCO's work plan.

Concrete actions are taken to:

- Strengthen health information systems for monitoring health services utilisation, coverage, morbidity and mortality statistics.
- Support periodic strategic plans and programme evaluations to inform policy reviews and the documentation of best practices.
- Support upgrading and scaling-up digital health systems for medical records, health care technology, telemedicine, an eHealth Innovation platform, and health services management at all levels.
- Capacity building in health research, health assessments, data analysis and evidence generation to inform policy and health services delivery.



BOTSWANA HEALTH DATA COLLABORATIVE



The Botswana Health Data Collaborative initiative was launched in March 2020 in conjunction with the Ministry of Health and CDC Botswana. It aims to rally the relevant actors in the areas of monitoring and evaluation and health information towards a common M&E and health information system that enhances the health system through improved efficiencies, transparency, and accountability.

- ◀ Dr Oduetse, Serowe DHMT head (seated), familiarising herself with the docking workstation. In June 2021, WHO Botswana, with financial support from European Union Civil Protection and Humanitarian Aid Operation (ECHO), donated ICT equipment to the Ministry of Health (MoHW) to support the Integrated Disease Surveillance Response (IDSR) in 18 districts in Botswana.

Contributions to WHO Botswana

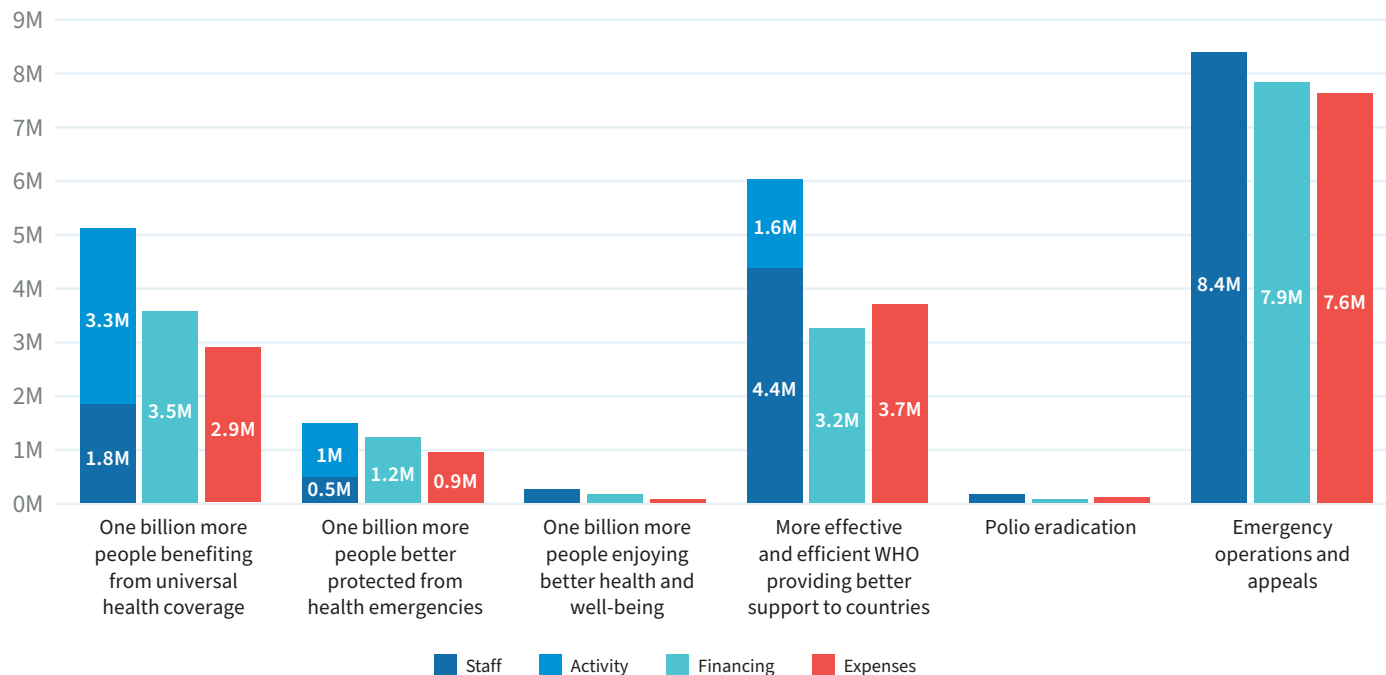
With a utilisation rate of 92%, the total budget for the biennium 2020–2021 is 7,993,151 US\$. In addition to the assessed- and core voluntary contributions, the following sources of funding supported the WHO Botswana Country Office's activities and operations in 2020 and 2021:

 <p>The Global Fund To Fight AIDS, Tuberculosis and Malaria</p>	 <p>United States Agency for International Development (USAID)</p>	 <p>Rotary International</p>
 <p>European Commission (DG for International Cooperation and Development – DEVCO and Directorate-General for European Civil Protection and Humanitarian Aid Operations – ECHO)</p>	 <p>The Russian Federation</p>	 <p>Germany</p>
 <p>UNDP Multi-Partner Trust Fund (MPTF)</p>	 <p>Federal Ministry for Economic Cooperation and Development (BMZ), Germany</p>	 <p>JAPAN GOV THE GOVERNMENT OF JAPAN</p>
 <p>United Nations Environment Programme (UNEP)</p>	 <p>Department for International Development (DFID), United Kingdom (*Foreign, Commonwealth & Development Office (FCDO), United Kingdom)</p>	 <p>SWEDEN</p>
 <p>Joint United Nations Programme on HIV/AIDS (UNAIDS)</p>	 <p>Department of Foreign Affairs, Trade and Development (DFATD), Canada</p>	 <p>Norwegian Agency for Development Cooperation (NORAD)</p>
 <p>Centers for Disease Control and Prevention (CDC), United States of America</p>	 <p>Azerbaijan</p>	 <p>Denmark</p>

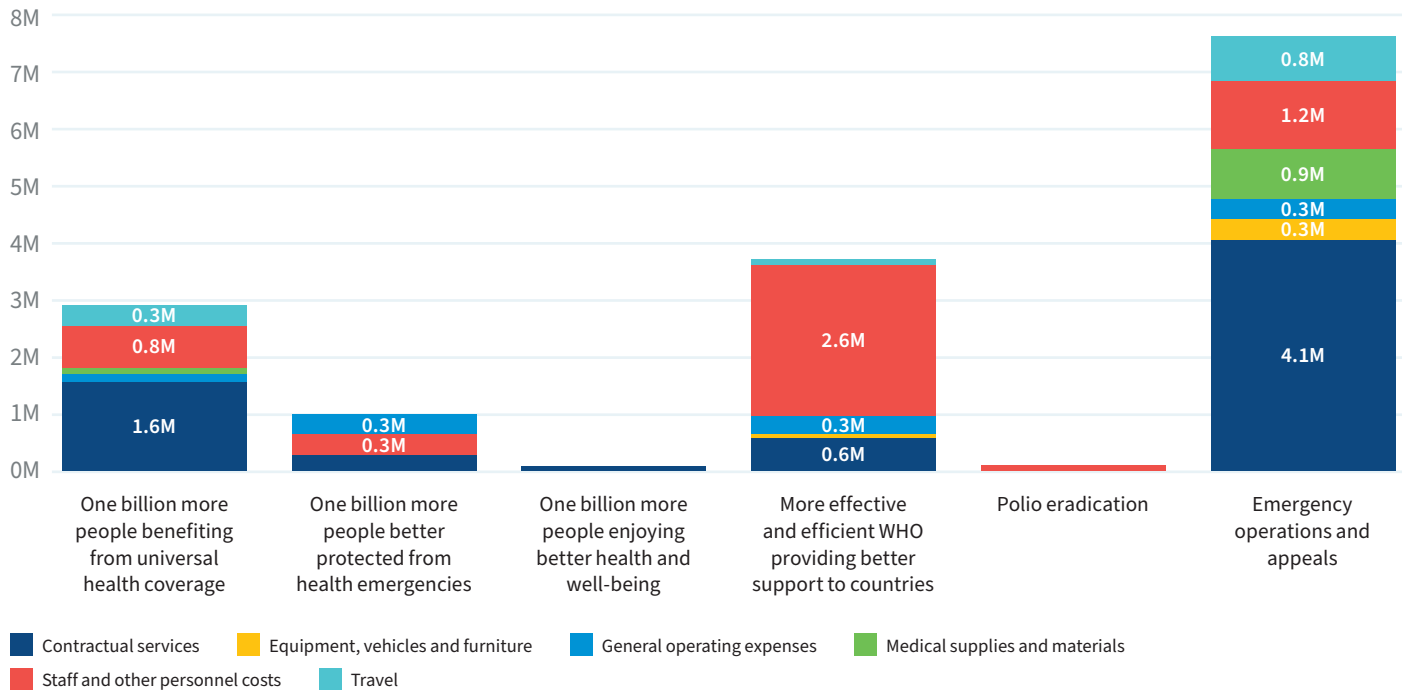
Biennium 2020–2021

Strategic objective key figures

UPDATED UNTIL Q4-2021



Summary expenses biennium 2020–2021



Case for investment

WHO Botswana will continue to deliver activities as planned by the Thirteenth General Programme of Work (GPW 13) for 2019–2025. To contribute to the Triple Billion targets and achieve measurable impacts on people's health in Botswana, the Country Office will focus on:

UNIVERSAL HEALTH COVERAGE

- ✓ Review and development of the National Health Policy and Strategy
- ✓ Review and development of the Health Financing Strategy
- ✓ Review and development of the Essential Health Care package
- ✓ Conduct comprehensive elimination audits of all the targeted diseases (malaria, NTDs, syphilis, mother-to-child transmission of HIV)
- ✓ Development of strategic documents and SOPs for the prevention and control of NCDs

ADDRESSING HEALTH EMERGENCIES

- ✓ Building sustainable capacity to respond to the COVID-19 pandemic and other emergencies
- ✓ Establish a One Health platform in collaboration with the relevant sectors

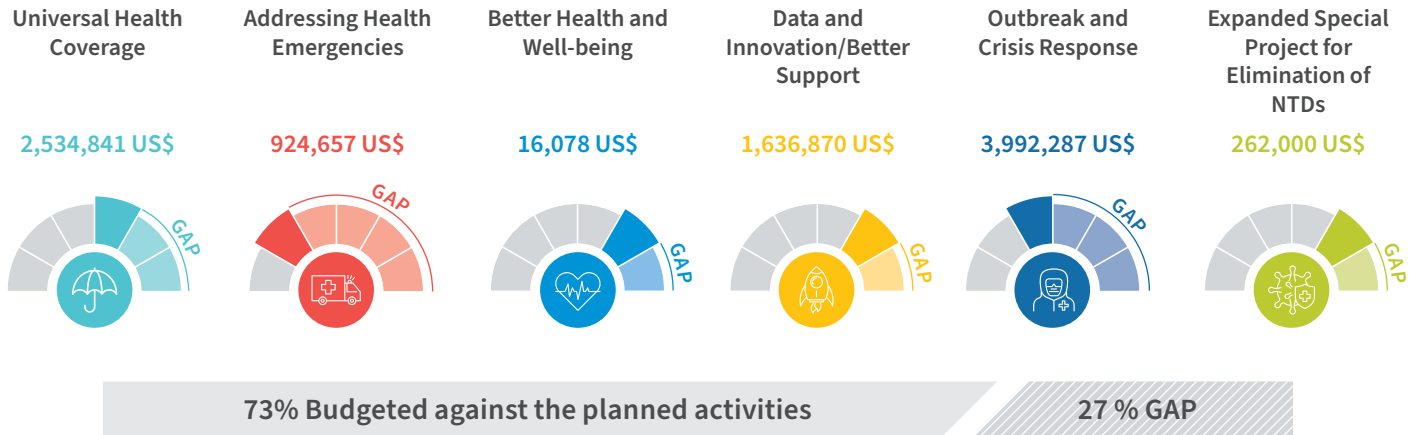
DATA AND INNOVATION/ BETTER SUPPORT

- ✓ Strengthen health information systems for monitoring health services utilisation and capacity building

BETTER HEALTH AND WELL-BEING

- ✓ Strengthen health systems for climate resilience
- ✓ Strengthen the intersectoral platforms to promote health and well-being to address the social determinants of health

A total of **9,366,733 US\$** is planned for activities and human resources in 2022–2023 to be distributed as follows:





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