



POP-UPDATE

Population Update

UNFPA Botswana

September 2017 Newsletter Issue



The SYP Phase II includes strengthening provision of youth friendly services, training teachers & civil society on provision of comprehensive sexuality education for in and out of school youth.

Figure 1: Mr M. Lesetedi- DDC (L) ,Ms M. Segotso - UNFPA Asst Rep (C), Mr G. Jori - DMHT (R)

Bobirwa & Ghanzi welcome the Safeguard Young People (SYP) programme

UNFPA is supporting the Ministry of Health and Wellness expand the Safeguard Young People (SYP) programme to Bobirwa and Ghanzi district respectively.

In Bobirwa, opening the Programme, the Deputy District Commissioner, Mr Mooketsi Lesetedi raised concern about the high HIV prevalence among young people and teenage pregnancy. He lamented the challenges that young girls face in the district including being heads of households looking after their younger siblings. These circumstances often lead to young girls being defiled and contracting sexually transmitted infections including HIV. Mr Lesetedi therefore welcomed the SYP Programme as the beginning of a long, fruitful partnership with UNFPA to protect young people in the Bobirwa district.

The UNFPA Assistant Representative Ms. Mareledi Segotso briefed the district leadership on the SYP Phase II which includes

strengthening provision of youth friendly services, training teachers and civil society on provision of comprehensive sexuality education for in and out of school youth. She encouraged the district to capitalize on the strong district structures to address SRH of young people at the centre of their already strong structures and secondary schools. The Programme will be implemented through health facilities, NGOs and secondary schools.

Collectively the clinics in the Bobirwa district reach about 500 young people a month. A visit to Mmadinare and Matshekge Senior Secondary boarding schools revealed that in a year, each school loses as many as 30 girls (equivalent to a class) to teenage pregnancy. Both schools have a school nurse as part of the Ministry of tertiary Education's plan to establish clinics in secondary schools. The school nurses primarily focus on minor ailments.



In a Year, each school loses as many as 30 girls (equivalent to a class) to teenage pregnancy.

Figure 2: Mrs Shamukuni - Dep School Head (L) Ms M. Segotso, UNFPA Asst. Rep (R)

Following the successful mission to Bobirwa, UNFPA met with key stakeholders in Ghanzi sub-district to introduce the SYP programme. Phase II of the SYP programme covers provision of Youth Friendly Services (YFS) and Comprehensive Sexual Education.

Ms Mareledi Segotso, UNFPA Assistant Representative met with district leadership who attributed the district's position as leading in school dropouts to high teenage pregnancy rate (17%) as well as school desertion.

Peace Corps representative, Ms Regine Adrien noted that the challenges faced by youth programmes in the district include language barriers and cultural differences with the Basarwa communities and limited reach of youth residing in surrounding settlements.

During the mission, Matsha College and Ghanzi Senior Secondary school were visited, both noting that recorded pregnancies are mainly amongst form four students and are due to the academic gap between the completion of junior school and the starting of senior school.

Matsha College school nurse provides students with vital services; selective contraceptives (the pill and injection), HIV testing and meetings for teen mothers but highlighted she could do more if not for challenges such as not having an examination bed and delayed commodities.

Provision of YFS were reviewed in Ghanzi and Hukuntsi. Hukuntsi YFS nurse Ms Natasha Banda nurse emphasized limited access to youth residing in surrounding settlements as a major challenge, further stating, "In April we recorded seven deliveries by teenage girls and all of them are from surrounding settlements." Both clinics noted a low uptake of female condoms despite efforts to encourage understanding and use.

KEY STATISTICS



Bobirwa & Ghanzi Key Statistics

Bobirwa

Ghanzi



Number of Young People 23 127



HIV Prevalence 9.6%



Number of Health Facilities 20



Number of Young People 13 501



HIV Prevalence 8.5%



Number of Health Facilities 25

Low uptake of the Female condom is a contributing factor to teenage pregnancy.

"In a year, each school loses as many as 30 girls (equivalent to a class" to teenage pregnancy"

"Young girls are sometimes heads of households looking after their younger siblings. Often leading to young girls being defiled & contracting sexually transmitted infections."

Matsha College provides students with essential services- HIV Testing & contraceptives (pill & injection)

Gearing Up for National Scale-up – Integrating SRHR & HIV with GBV, TB, Maternal, Newborn, Child, and Adolescent Health



Figure 3: Focal persons for key programs including Family Planning, STIs, PMTCT, HIV testing, Adolescent and Youth Friendly Services attending workshop.

Following the decision by Government to scale-up integrated reproductive, maternal, newborn, child, adolescent health (RMNCAH)/HIV/TB and gender based violence services nationwide, the Ministry of Health & Wellness (MoHw) and UNFPA organized a training on Integration of Health Services. The training was targeting District Integration Coordinators as well as focal persons for key programs. The specific focus areas were; Family Planning, STIs, PMTCT, HIV testing, Adolescent and Youth Friendly Services to lead their respective districts through a process of transitioning to an integrated service delivery at all levels of care. The interactive trainings are designed to be participatory with a strong focus on familiarizing participants with the concept and practice of health service integration as a road map to archiving national health goals.

The three training workshops in Jwaneng, Gaborone and Palapye are part of initial scale-up activities, and identifies policy, systems and service delivery as entry points for integrated services the capacity building of health care workers to deliver quality comprehensive integrated services.

It was highlighted that implementing services in an integrated manner requires a paradigm shift in which all service providers work in unison to provide patient focused services. The highlights of the training workshops included discussions and exchange of ideas and experiences on;

- Addressing the SRHR needs of key populations in the face of a legal environment that is not supportive.
- The imperative of making sure that integration does not overburden existing services in a way that compromises service

quality, by ensuring that integration actually improves healthcare provision (managing any potential increased workload for staff who take on additional or ‘task-shifting’ responsibilities)

- Reorganizing/re-orienting service provision processes such as patient flow.
- Combating stigma and discrimination from and towards healthcare providers, which has the potential to undermine the effectiveness of integrated services regardless of how efficient they are in other respects of their skills.
- Adapting services to attract and involve men, who tend to see sexual and reproductive health, and especially family planning, as ‘women’s business’ e.g. SRHR information and services integrated with male circumcision for combination HIV prevention services.
- Integrating Gender Based Violence (GBV) into integrated service delivery with a highlight on global and national standards for response to GBV by the health sector.
- Reaching those who are most vulnerable but least likely to access services, such as young people and people living with disabilities and the hard to reach in resource constrained environments.

In order to have a continuous support and best practices sharing platform, a district Integration Coordinators’ WhatsApp group was also created to enable coordinators to share experiences, implementation challenges, mutual learning and collaborative solution generation. The WhatsApp group facilitates the distribution of guides, manuals and information.

Engaging Young People In Their Own Space

Commemoration of World Population Day



Join Twitter Chat



with
Permanent Secretary Ministry of Health and Wellness
@PSHalabi

Family Planning: Empowering People, Developing Nations

How to join:

How do you think we can improve family planning in Botswana? [#AskPSHalabi](#)

#HerFuture TUESDAY | 11 JULY | FROM 11:00 TO 12:00

Permanent Secretary Ministry of Health and Wellness, Ms S. El-Halabi took to Twitter to engage with the youth on the state of family planning in Botswana.

The Twitter chat supported by UNFPA and hosted in commemoration of World Population Day themed *Family Planning: Empowering People, Developing Nation*, created a platform for the Permanent Secretary to interact with the youth on all family planning matters. The initiative bridged the gap between government and the youth and was well received as an opportunity to ask questions and comment of the accessibility of family planning for young people.

The hour long virtual exchange also facilitated the solicitation of views and key information on what young people want and how they can be better serviced by their Government. Ms El-Halabi commended the Twitter chat as an interesting and lively discussion having been able to answer many important questions and share family planning information.

#TwitterImpressions

58 800

#Mentions

150

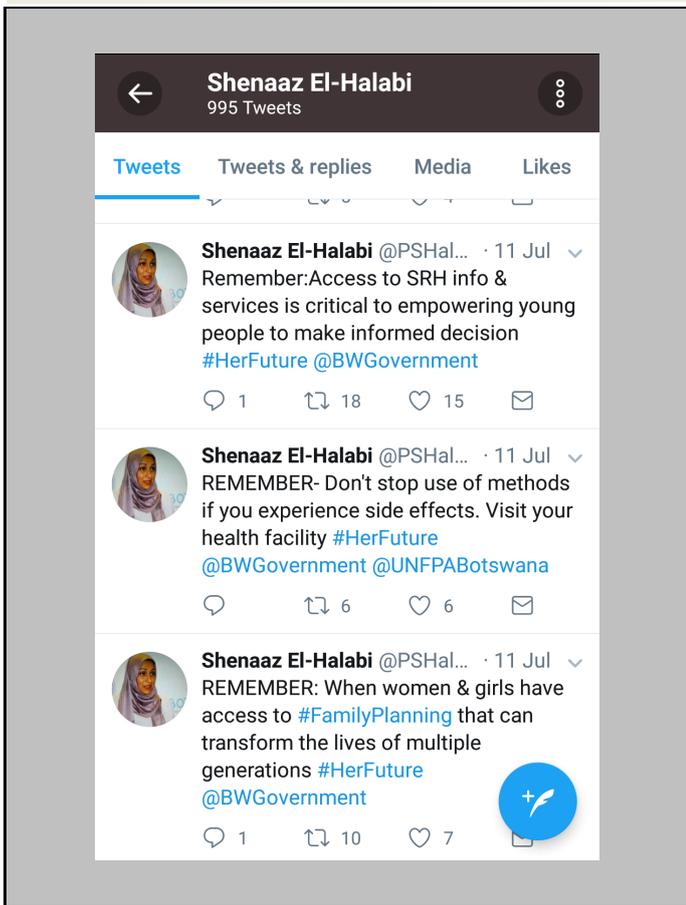
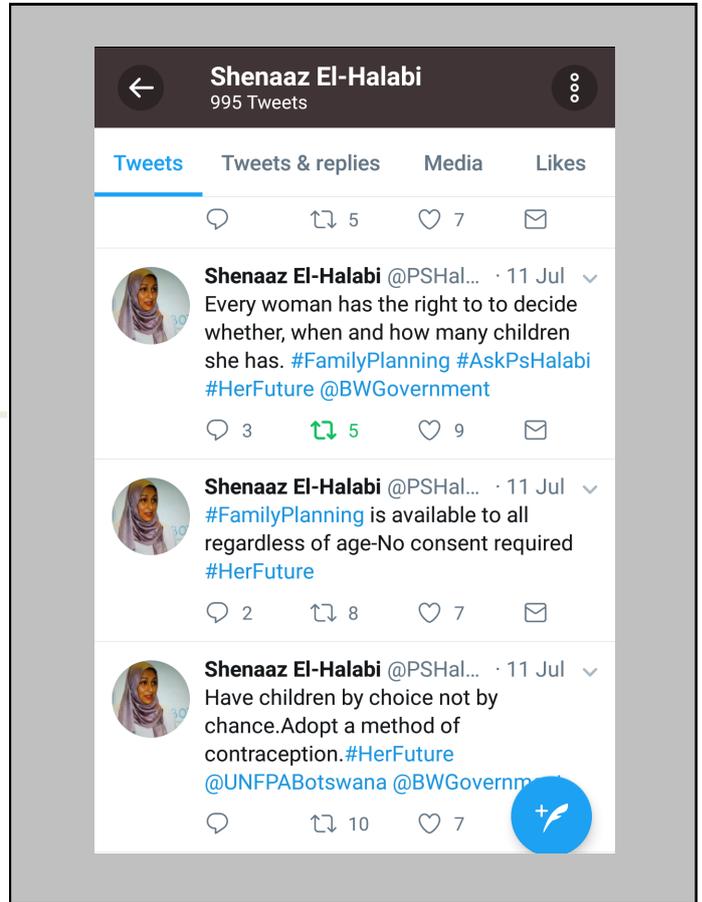
#Tweets

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Some of the issues that Ms S. El-Halabi engaged youth are the importance of access to SRH information and its criticality in empowering young people to make informed decisions.

Some of the youth engaged said that they enjoyed the Twitter chat as it created a more youth-friendly platform for them to gain access to more information from a well-informed source. They expressed that more twitter chats should be organized in order for them to be engaged and be more empowered.



1010 young people registered in 7 days!



Figure 4: Youth at the Tune Me Stall activation at the Botswana Consumer Fair 2017

The Annual Botswana Consumer Fair attracts 60 000 people every year and this year was no exception. The 7 day exhibition attracted businesses, service providers, public sector, private sector and NGOs from local and neighbouring countries such as Namibia, Zimbabwe, Swaziland, Lesotho and South Africa.

UNFPA participated at the fair registering young people on the TuneMe mobisite. TuneME is an interactive platform that engages young people on issues affecting their Sexual and Reproductive Health through the use of their mobile phones. A total of 1010 young people were registered in the platform during the exhibition.

The newly registered young people applauded the site as a great initiative for them to acquire the relevant and age appropriate information to enable them to make informed life choices.

Parents, who often are challenged with discussing such issues with their children, commended hailed the TuneMe site as it will assist

with providing information that young people may often find difficult to talk openly with them about. A mother of a young person who registered for TuneMe stated; “As a mother, I am thankful for TuneMe.”

UNFPA aims to have registered 3000 young people by the end of 2017 and to have them actively participate in the mobisite and the Facebook page so as to help young people avert challenges and making uninformed decisions that they find themselves grappling with due to lack of relevant and age appropriate information.

Tune Me was launched in Botswana in December 2016 with the aim to leverage on technology and engage adolescents and young people on issues that most affect them so as to deliver behaviour change communication that empowers young people to improve their sexual and reproductive health.



Figure 5 & 6 Youth getting information at the TuneMe Stall



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'Delivering a world where every pregnancy is wanted every childbirth is safe and every young person's potential is fulfilled'



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