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**Botswana Gender Based Violence  
Prevention and Support Centre**

**ANNUAL PROGRAM REPORT**

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## Acronyms

APC	Accelerating Progress in Communities
ART	Anti-Retroviral Therapy
BGBVC	Botswana Gender Based Violence Prevention and Support Center
DC	District Commissioner
DHMT	District Health Management Team
DMSAC	District Multi-sectoral HIV/AIDS Committee
EU	European Union
FELM	Finnish Evangelical Lutheran Mission
FHI 360	Family Health International
GeAD	Gender Affairs Department
GBV	Gender Based Violence
HPP	Humana People to People
HTS	HIV Testing Services
IP	Implementation Plans
KSWS	Kagisano Society Women's Shelter Project
NGO	Non-governmental Organization
PEP	Post Exposure Prophylaxis
PLHIV	Person/People Living with HIV
PrEP	Pre-Exposure Prophylaxis
USAID	United States Agency for International Development
VDC	Village Development Committee

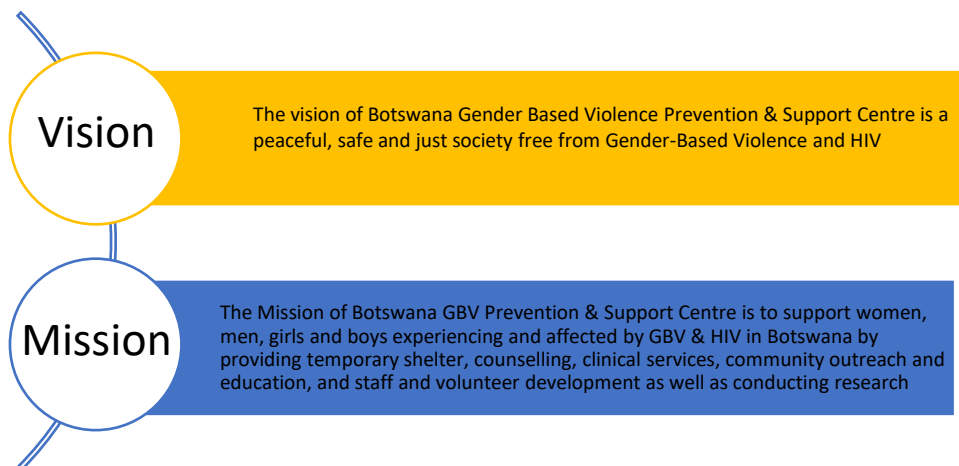
## 1. Introduction

This Annual Program Report provides details of activities implemented by Botswana Gender Based Violence Prevention and Support Centre (BGBVC) with support from Ministry of Nationality, Immigration and Gender Affairs and other international partners (Family Health International (FHI 360), European Union (EU) and Finnish Evangelical Lutheran Mission (FELM)). The report covers period January to December 2021 which is aligned to BGBVC financial year. Funding from the European Union (EU) and Finnish Evangelical Lutheran Mission (FELM) ended in December 2021. BGBVC will work closely with Ministry of Nationality, Immigration and Gender Affairs to absorb these activities in the year 2022 while seeking other funding opportunities.

## 2. BGBVC Program Background

Botswana Gender Based Violence Prevention and Support Centre (BGBVC) is a Non-Governmental Organization (NGO) registered as an independent organization in 2017. Previously the organization operated as Kagisano Society Women's Shelter (KSWs) focusing on supporting women, men, girls and boys experiencing and affected by Gender Based Violence (GBV) in Botswana.

### 2.1 Vision and Mission



The Botswana Gender Based Violence and Prevention program activities are guided by the BGBVC strategic plan which is aligned to the National Gender-Based Violence Strategy 2015-2020 aimed at preventing and eliminating gender-based violence and other regional and international development and human rights instruments such as the Sustainable Development Goals (SDGs), Southern Africa Development Committee (SADC) Gender Protocol, the UN Joint Gender Program on Gender-Based Violence (2018-2020) and the UN-Botswana Partnership framework (UNBPF 2017- 2021).

### 2.2 Strategic Objectives

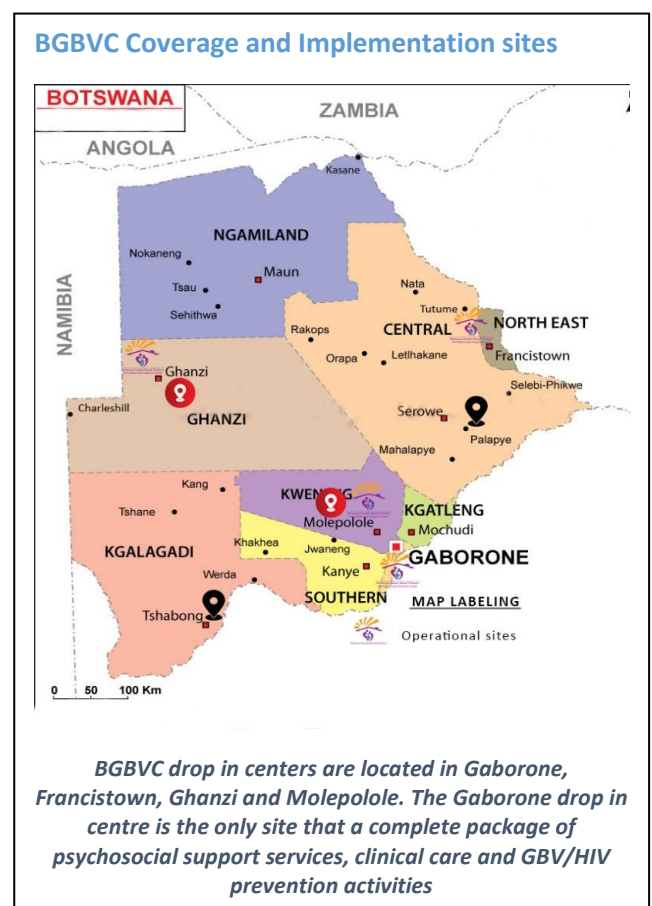
1. To provide integrated and comprehensive care and support services through shelter, counselling and legal support for survivors of Gender Based Violence, and Human Immunodeficiency Virus testing and management.

2. To offer community education for the prevention and management of Gender Based Violence and Human Immunodeficiency Virus /Tuberculosis through awareness raising, advocacy and employment of campaign strategies challenging gender norms, roles and behaviors.
3. To provide information for Gender Based Violence response and management through research, surveillance and best practices.

### 2.3 Program Strategy and Approach

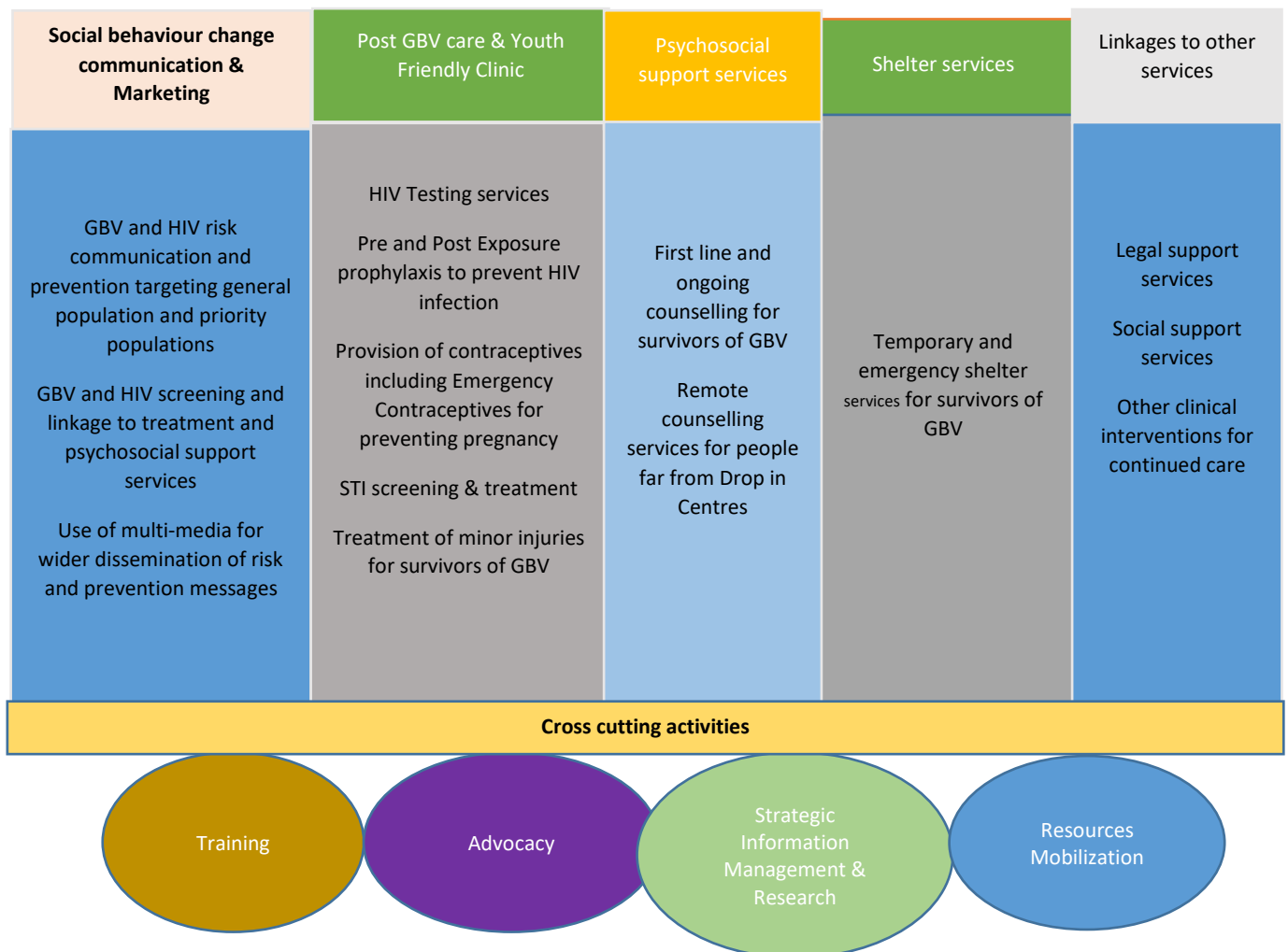
The BGBVC program focuses on primary prevention of GBV and HIV by implementing behavior change activities aimed at addressing harmful practices and behaviors that fuel GBV and expose individuals to HIV; equipping communities and individuals with knowledge and skills to identify and support GBV survivors to access available services. Furthermore, BGBVC complements behavior change and communication initiatives by providing care and support to survivors of GBV through its drop in centers located in Gaborone, Kweneng East, Francistown and Ghanzi districts. Mobile services are conducted to provide services to hard to reach areas or population in the same districts. BGBVC services are also accessible online (emergency line, Facebook and WhatsApp) which makes it easier to reach more people across the country. The drop in centers provide psychosocial support and clinical care services to prevent long-term health and mental complications. BGBVC services are customized to meet the needs of the clients. The drop in centers are open during the week and these are supported by a 24-hour emergency line which makes the services to be available at any time of the day.

BGBVC's aims at ensuring that all its drop in centers are equipped to provide one-stop-shop integrated GBV/HIV prevention, care and support services. This will improve GBV care response system and reduce loss of clients within the referral system. Currently BGBVC, with support from Ministry of Nationality, Immigration and Gender Affairs, Ministry of Health and Wellness and FHI 360 has managed to transform the drop in centre in Gaborone to provide integrated GBV/HIV prevention, care and support services. Clients are able to access prevention, clinical care and support visit in one site. In Kweneng East, Ghanzi and Francistown, BGBVC work closely with other local NGOs such as Tebelopele and Government facilities to provide clinical services. Depending on availability of



funding, these districts will also be transformed to provide integrated GBV/HIV prevention, care and support services.

### BGBVC Program Framework



*The Botswana Gender Based Violence Prevention and Support Centre Program Framework*

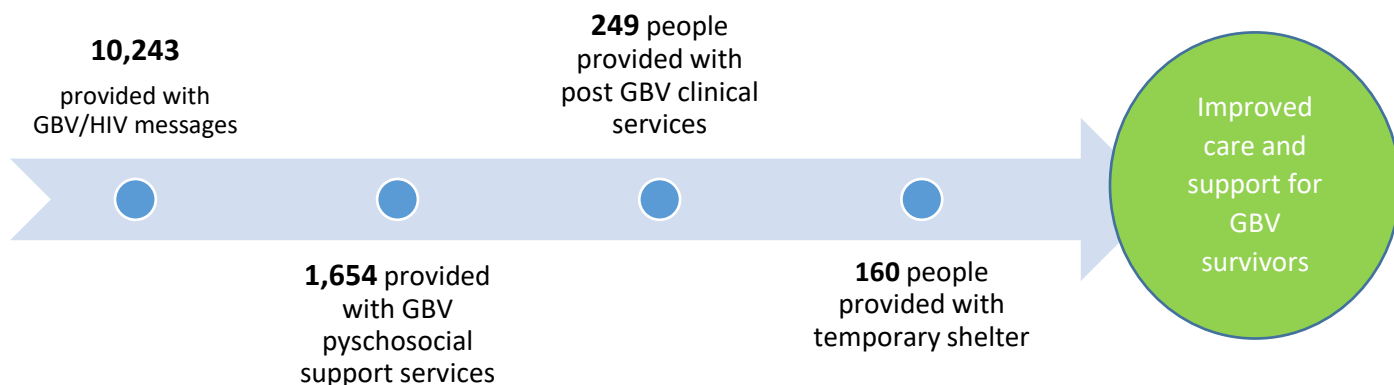
### 3. Program Management and Governance

BGBVC is led by a dedicated Board of Directors, composed of individuals with experience in development projects, who meet on quarterly basis to review its operations and provide strategic guidance. The Management team is also composed of qualified and experienced individuals, with extensive knowledge in project management and the local context of implementation. The team is led by a Chief Executive Officer, supported by the Programmes Associate. BGBVC Management is guided by systems that are in place, including: human resource policies, procurement and financial policies, as well as communications policies; the internal controls are in place and adequate to manage internal financial and operational risks and are enhanced by segregation of duties in authorization of funds. External Audits are

performed annually by an accredited and regulated audit firm, appointed by the Board of Directors, to gauge internal controls and advise management accordingly. The operational documents and systems are subjected to periodic review and approval by the Board of Directors for compliance with local laws.

## 4. 2021 Program Performance

### 4.1 Program Highlights



- ✚ BGBVC with financial support from FHI 360 and USAID contributing towards vaccination roll-out in Gaborone district. BGBVC clinic staff supported vaccination activities in the community and at BGBVC clinic
- ✚ Strengthened collaborations with various stakeholders that deal with GBV, health and social issues in the 4 districts. These include, the Gender Affairs Department, S&CD, the Police, the Courts, DHMT, Prisons, CSO partners and local leadership.
- ✚ Increased community ownership by working closely with community leaders such as Kgosi and VDCs to mobilize communities and improve linkage to care and support services.
- ✚ Trained BGBVC community mobilisers and outreach officers to disseminate GBV and HIV prevention messages, conduct individual screenings to identify any needs and link clients to available services provided by BGBVC centres (psychosocial support, emergency and temporary shelter) and other facilities/ organizations.

### 4.2 Program Performance by strategic area

#### 4.2.1 Social behaviour change communication & Marketing

The BGBVC implemented various activities to engage with communities and disseminate messages aimed at addressing harmful practices and change behaviors that fuel GBV and expose individuals to HIV. The team used these platforms to also create demand for GBV services provided by BGBVC and other partners.

## Key activities implemented

- **House to house visits and workplace presentations** – Community Mobilizers and Outreach officers conduct household visits to provide messages, identify and link people with available clinical and support services
- **Focus group discussions and Community Dialogues:** BGBVC actively engage a group of interest and community members to discuss contributing factors of GBV as well as possible solutions from their perspective and encourage prompt responses to GBV & HIV.
- **Mall activations:** These activities focused on sensitizing community members on GBV and create demand for post GBV care services through the provision of IEC materials to members of the public who visit malls for shopping.
- **Tertiary outreach stall:** activity is done to sensitise and educate young people on GBV issues, encourage HIV prevention through condom demonstration and distribution as well as HIV testing.
- **Radio/TV interviews and social media posts:** BGBVC team used local radio/TV free slots to raise awareness on GBV and also share information of available services. BGBVC Facebook page was used to make posts, run polls and adverts on GBV and services provided by BGBVC.
- **Trainings and life skill sessions:** BGBVC team facilitated trainings targeting service providers to strengthen GBV response and referral systems between partners. Life skills sessions were conducted in schools.

*BGBVC outreach team interacting/facilitating GBV educational sessions in community*



The above activities were supported by support from Ministry of Nationality, Immigration and Gender Affairs and European Union (EU) and Finnish Evangelical Lutheran Mission (FELM).

## Achievements

A total of 10, 243 clients in the four implementation districts. This is a 295 % increase from the year 2020, where 3,466 clients were reached. The increase is attributed to the increase in staff complement. In 2021, the Ministry of Nationality, Immigration and Gender Affairs Botswana Gender Based Violence Prevention and Support Centre



increased the annual grant provided to BGBVC. Through this grant BGBVC was able to increase the number of staff on the ground.

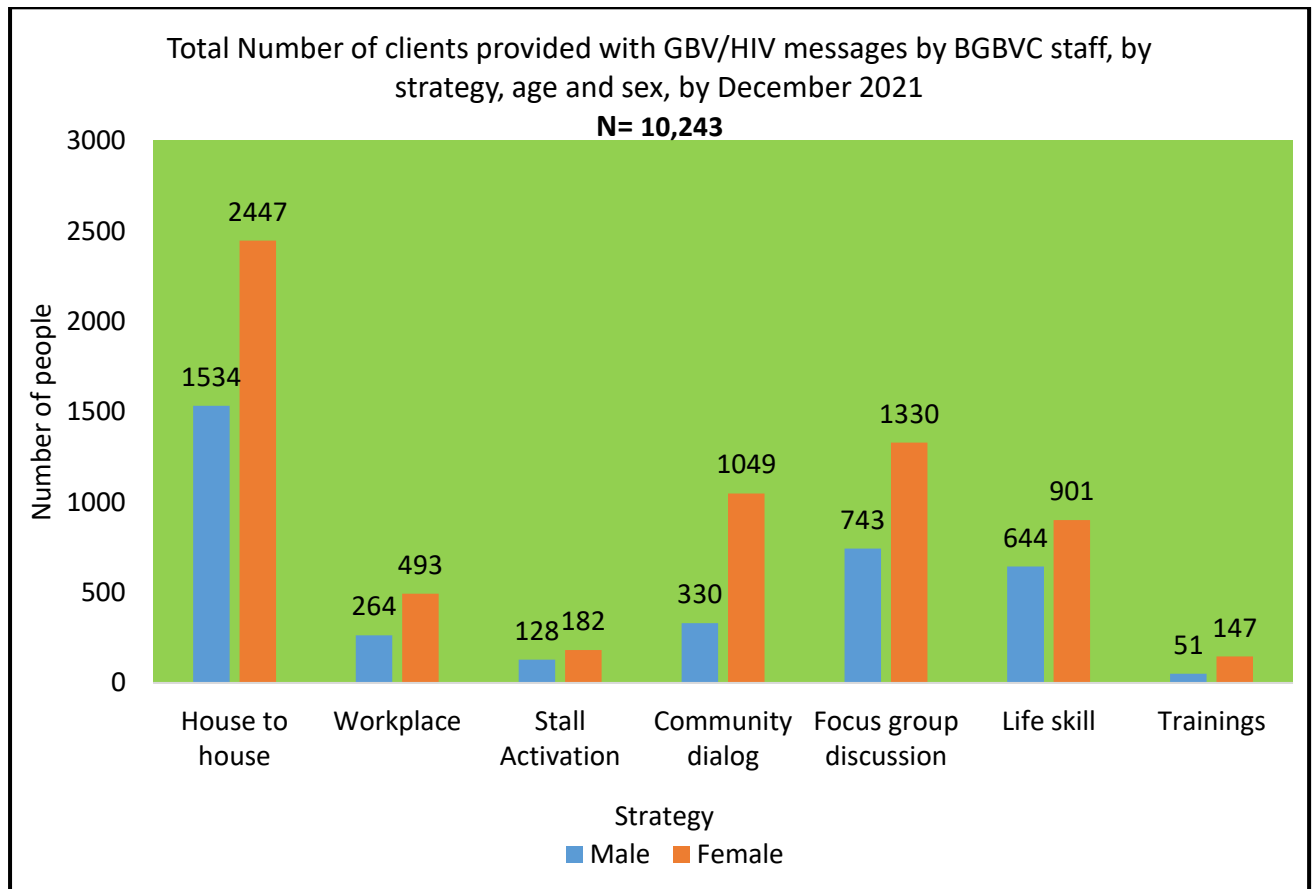


Figure 1: Total Number of clients provided with GBV/HIV messages by BGBVC staff, by strategy, age and sex, in 2021

Figure-1 shows that the house to house strategy reached more people when compared with other strategies. The BGBVC team had to prioritize the house to house strategy to comply with the COVID – 19 regulations and protocols. There were more females reached under each of the strategies used.

#### 4.2.2 Psychosocial support services

The BGBVC counselling team provided counselling to survivors of gender-based violence in all the 4 districts. Remote counseling was used to extend services to people who cannot visit drop in centers. This was done through BGBVC emergency line, Social Media platforms (AME APP, Facebook). Shelter services were provided to clients who were in eminent danger or in need of emergency shelter in Gaborone and Francistown. GBV survivors who accessed counseling services provided at BGBVC drop in centres came in as referrals from the outreach team; other civil society organizations;



A BGBVC counsellor with a client at Gaborone drop in centre

government departments or offices such as police and department of social services. Others clients were reached through remote services. The counselling services were supported by support from Ministry of Nationality, Immigration and Gender Affairs and other international partners (Family Health International (FHI 360), European Union (EU) and Finnish Evangelical Lutheran Mission (FELM)).

### Achievements

A total of 1,654 people were provided with psychosocial counseling services in all the 4 districts.

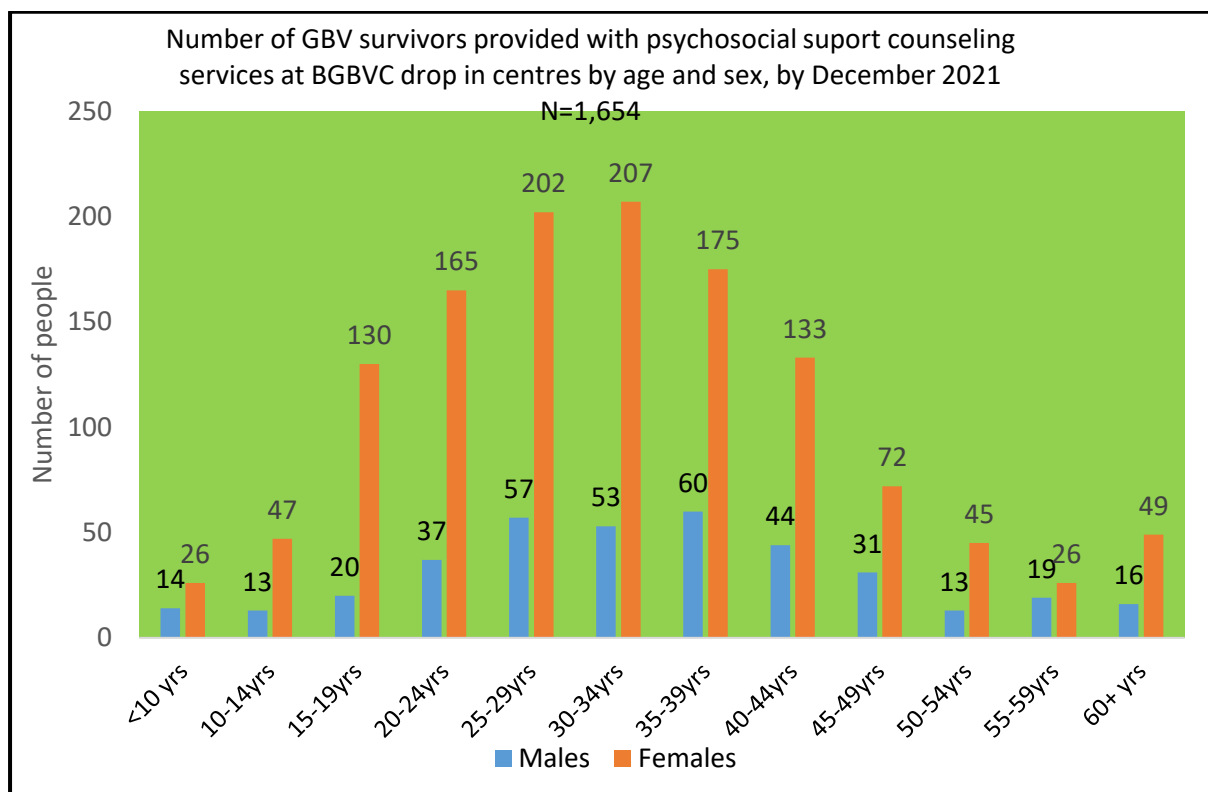


Figure 2: Number of GBV survivors provided with psychosocial support counseling services at BGBVC drop in centres by age and sex, by December 2021

Figure-2 shows that 61% of people who were provided psychosocial support counseling services were females. Most of people who accessed counseling services at BGBVC drop-in centres were young people aged between 15 to 39 years.

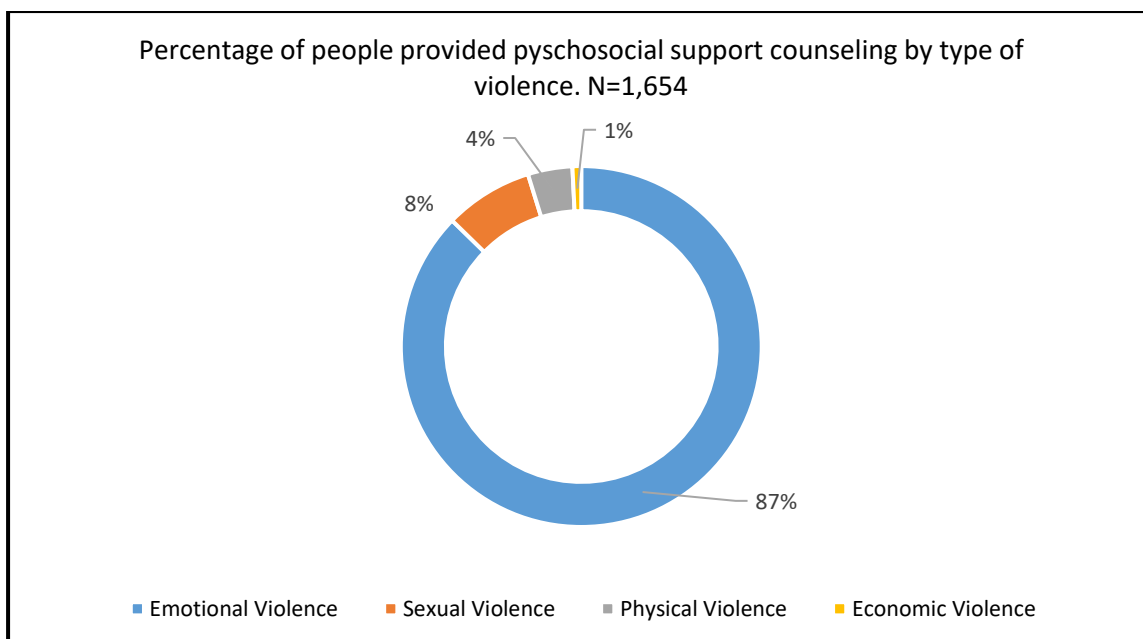


Figure 3: Percentage of people provided psychosocial support counseling by type of violence.

Figure-3 shows that 87% of clients who were provided psychosocial support counseling reported to have experienced emotional violence; followed by sexual violence at 8%, physical violence at 4% and economic violence at 1%.

#### 4.2.3 Post GBV care & Youth Friendly Clinic

BGBVC provided clinical services to survivors of GBV at its clinic in Gaborone and outreaches in Molepolole. BGBVC clinical package for GBV survivors is aimed at preventing HIV infection and unwanted pregnancies.

Minimum Service Package – Post GBV care services	
Services provided to survivors of physical, emotional & sexual violence	Additional services provided to survivors of sexual violence
<ul style="list-style-type: none"> <li>• Counseling (first – support)</li> <li>• HIV Testing services</li> <li>• STI screening, prophylaxis and treatment</li> <li>• Treatment of minor injuries</li> <li>• Shelter (clients in imminent danger)</li> <li>• Referrals for other services as necessary</li> </ul>	<ul style="list-style-type: none"> <li>• PEP (within 72 hours)</li> <li>• Emergency contraception</li> </ul>

Minimum package of services provided to GBV survivors at BGBVC clinic in Gaborone

In addition to the above the clinic provides the following Youth Friendly services

- Sexual reproductive health services with focus on pregnancy prevention education and provision of contraceptives and condoms

- ✚ Provision of Pre-Exposure prophylaxis to prevent HIV infection for adolescent girls and young women and other priority populations

### Achievements

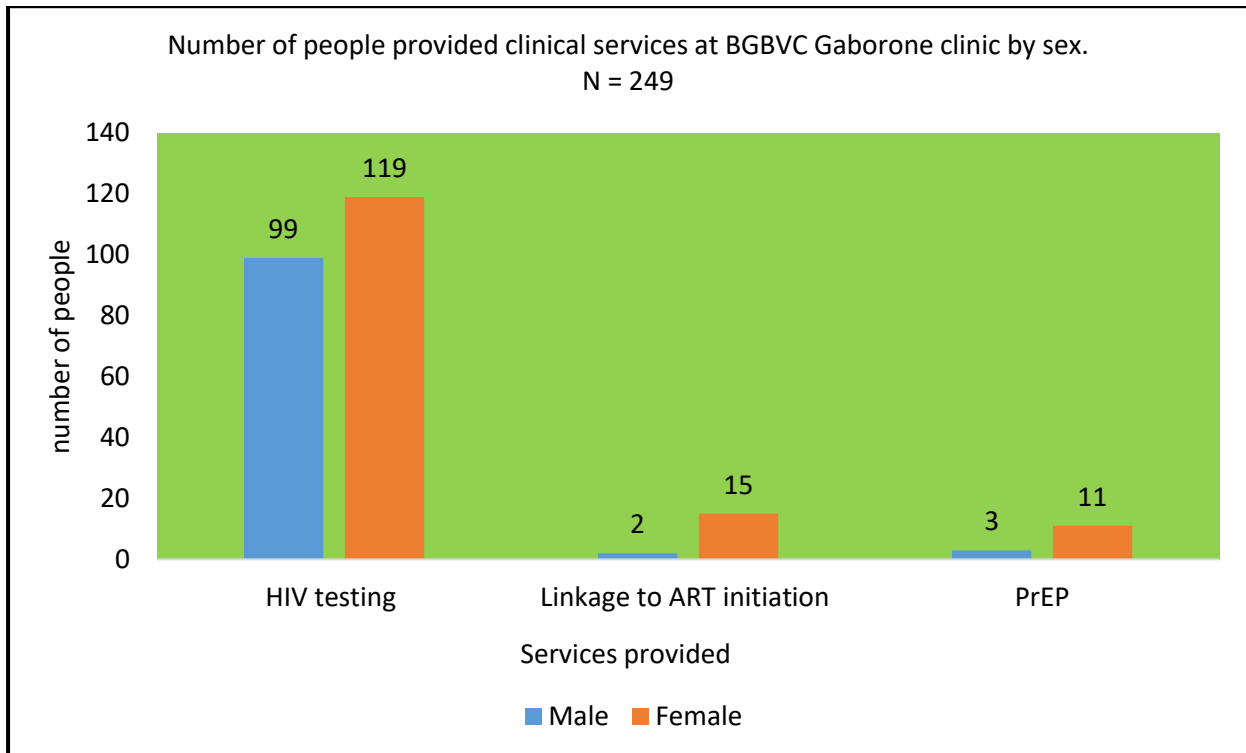
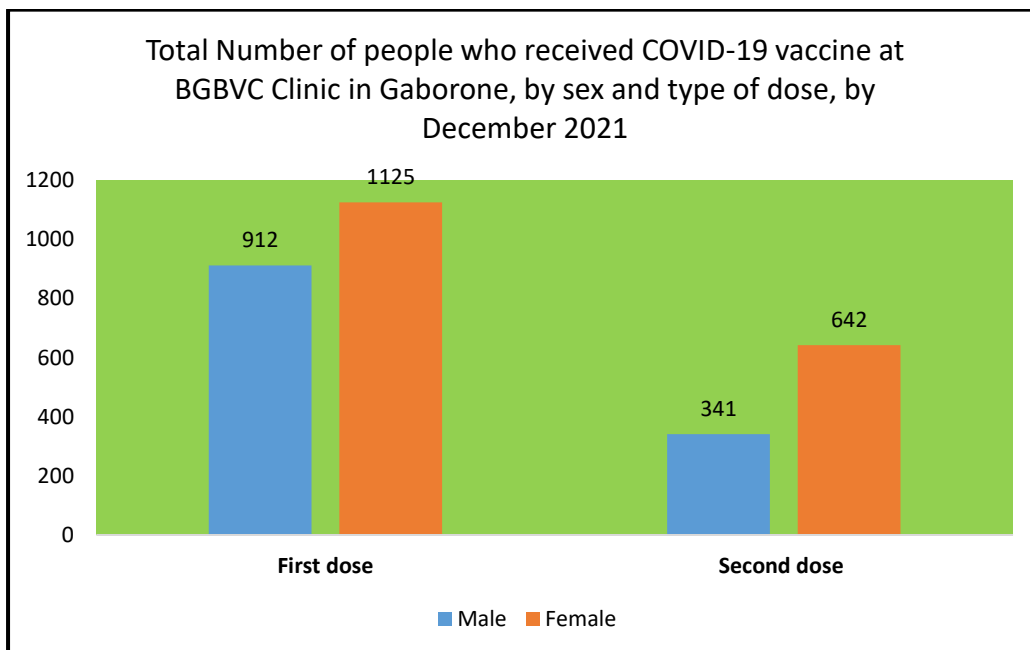


Figure 4: Number of people provided with clinical services at BGBVC Gaborone clinic by sex

Figure-4 shows that 87% of the clients who visited BGBVC drop in centre in Gaborone were provided with HIV testing. Of these, 7.7% were supported to initiate on HIV treatment (ART) at Tebelopele Wellness Clinic. A total of 14 people were initiated on PrEP at BGBVC clinic.



To support the MOHW vaccination roll-out program, the BGBVC clinic also provide COVID-19 vaccination to clients visiting the clinic. This started in July 2021 after receiving approval by the Greater Gaborone DHMT. The vaccination program is supported by FHI 360 and USAID

Figure 5: Total number of people who received COVID-19 vaccine at BGBVC clinic in Gaborone by sex and type of dose by December 2021

Figure-5 shows that most of the people who were vaccinated at BGBVC received first dose. There were more females who received vaccines at BGBVC clinic for all doses.

#### 4.3.4 Shelter services

In 2021 provision of shelter in Gaborone and Francistown was supported mainly by Ministry of Nationality, Immigration and Gender Affairs.

#### Achievements

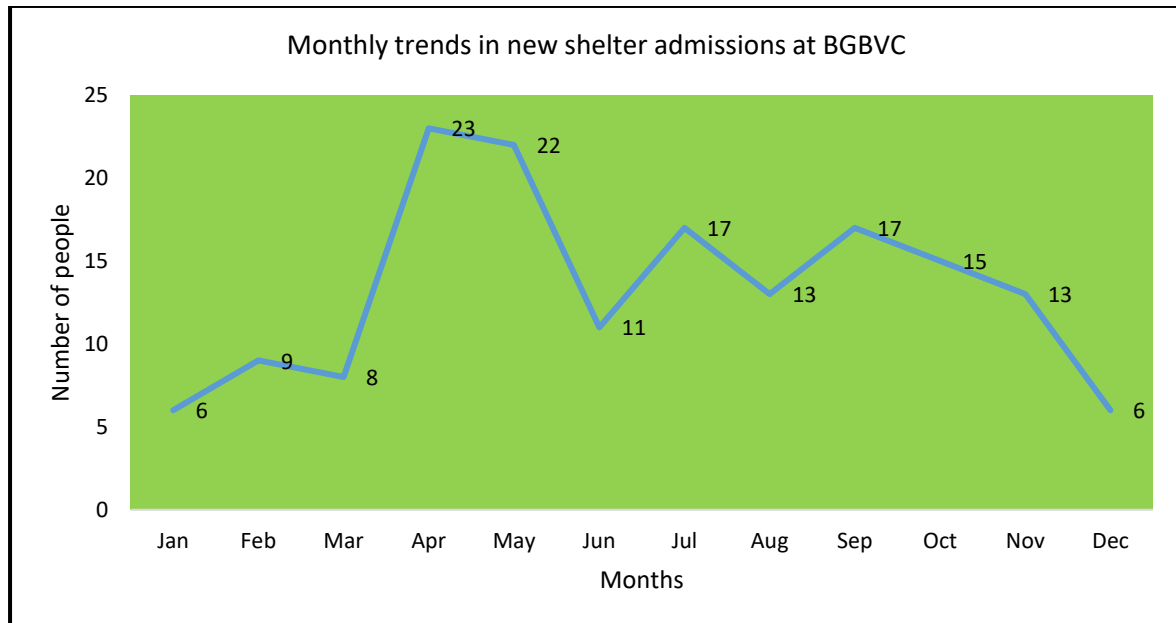


Figure 6: Monthly trends in new shelter admissions at BGBVC

In total BGBVC provided shelter to 160 clients through its shelters located in Francistown and Gaborone districts. Figure-3 shows that on average; BGBVC admitted between 6 to 23 clients per month. The highest number of admissions were between April and May 2021.

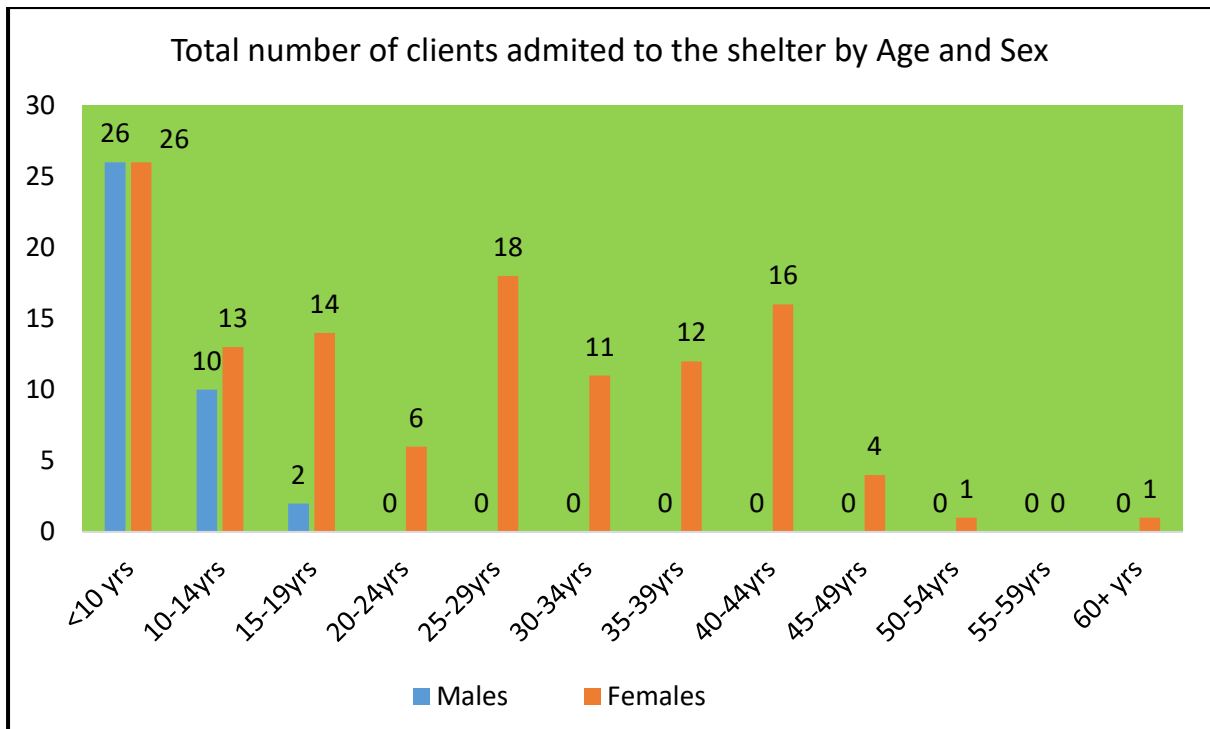


Figure 7: Total number of clients admitted to the shelter by age and sex

Figure-7 shows that 76% of people provided shelter were females. Most of the people who were provided shelter were below the age of 44 years.

### 4.3 Cross Cutting Issues

#### 4.3.1 Coordination and Networking

At district level BGBVC teams participated in various activities, meetings, and workshops organized by DHMT, DAC, Gender Affairs Office and other CSO's. At national level, BGBVC management participates in various meetings by Ministry of Nationality, Immigration and Gender Affairs, NAHPA, Ministry of Health and Wellness, UN family and other key stakeholders. In addition, BGBVC attends various meetings organized by umbrella CSO'S (BONASO and BOCONGO), Ministry of Nationality Immigration and Gender Affairs and United Nations Agencies. Through these meetings BGBVC is able to advocate for its program and additional resources.

#### 4.3.2 Strategic Information Management and Research

The BGBVC M&E team worked closely with the program team implemented various activities to ensure that data is collected, analyzed and reported accordingly. Quarterly support and monitoring visits were conducted by the Program Management team to provide guidance and mentorship for the field teams. These visits were also used to consult with district authorities such as the district Gender Affairs Office, District Commissioner, District AIDS Coordinator and DHMTs. These meetings were useful to strengthen collaborations and lobby for BGBVC support at district level.

BGBVC also continues to receive support from other partners to strengthen its strategic information management system. Through the support of funding from Ministry of Nationality, Immigration and Gender Affairs, BGBVC engaged a consultant to develop an electronic data management system to improve the quality of data and efficiency in reporting. The system will be rolled-out in the year 2022.