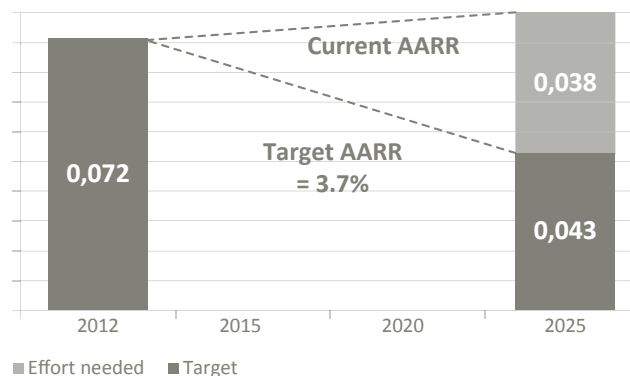


# Botswana

Joined: April 2015

Beginning prevalence: 31.4% **Targeted Stunting Reduction (million U5 stunted children)** Target prevalence: 19.3%



<b>Under five stunting:</b>	<b>31.4%</b>
<b>Low-birth weight:</b>	-
<b>0-5 months old exclusive breastfeeding:</b>	-
<b>Under five wasting:</b>	<b>7.2%</b>
<b>Under five overweight:</b>	<b>11.2%</b>
<b>Women Anaemia 15-49 years:</b>	<b>28.5%</b>

*\*data sources detailed in Annex 1*

## Highlights

- There is general consensus that social protection programme contribute immensely to addressing hunger, poverty and vulnerability. Therefore, Botswana has set up a complex social protection system and dedicates a large part of its national income to finance several social protection programmes. Botswana's social indicators compare well with those of upper-middle-income countries.
- It has been recognised that weaknesses in the design, implementation, coordination and monitoring, and fiscal sustainability of these social protection programs need to be addressed.



Botswana joined the SUN Movement on 9<sup>th</sup> April 2015, with a letter from the Honourable Minister of Agriculture, Patrick Pule Ralotsia, in which progress achieved in food security was highlighted as well as areas requesting further attention in the future such as: food accessibility, quality and utilization, addressing the needs of the most vulnerable, coordination and monitoring & evaluation for nutrition.

There is no multi-stakeholder platform specialised in nutrition yet, but three main options are envisaged to create one, either through the Rural Development Council (RDC) which engages Permanent Secretaries of relevant line ministries on various rural development policy issues, NGOs, and the private sector; through the reconstitution of the multi-sectoral country team assembled by the Ministry of

Agriculture that prepared for the New Partnership for Africa's Development (NEPAD)/Comprehensive Africa Agriculture Development Program (CAADP) Nutrition Capacity Development Workshop that took place in Botswana in 2013; or through the revival of the National Early Warning Team (NEWT) reporting structures.

Two interim high-level national government official and technical focal points from the Ministry of Agriculture have been nominated to lead all SUN-related process.

Scientists have been very involved in drafting nutrition relevant legislation. Mobilisation of donors, civil society, United Nations agencies and the private sector on nutrition are to be initiated and the establishment and coordination of in-country networks is seen as a priority.



Botswana has a revised National Food Strategy (2000) and a National Nutrition Strategy which is not yet endorsed. It has common salt regulations which include iodisation and the Food Control Act (2008).

It also has regulations for the marketing of breastmilk substitutes which date to 2005, but, Botswana recognises that their effective implementation remains a challenge due

to the behaviors of local industries and other country trade partners. The draft of an Infant and Young Child Feeding Strategy exists but is not yet enacted.

Finally, though food fortification is not mandatory in Botswana, the government provides fortified sorghum and maize products through the Vulnerable Groups Feeding Program.



Botswana has no Common Results Framework yet but is leading several programs that contribute to better nutrition among the population, including: a growth monitoring program to identify vulnerable under-five children that need special attention; a Vulnerable Groups Feeding Program implemented across the country; a School

Feeding Program; a Destitute Persons' Program (food basket); Backyard Garden Projects which are part of the poverty eradication program; a Youth Grant Program enabling youth to engage in agriculture (crop and animal production) and the Ipelegeng Program, whose main objective is to provide short term employment support and relief.



There is currently no information provided by Botswana regarding the existence of financial tracking systems for nutrition allocations and spending or specific funds dedicated to nutrition.