



BOTSWANA GENDER MONOGRAPH 2025



STATISTICS BOTSWANA



**BOTSWANA
GENDER
MONOGRAPH
2025**

INSIGHT REPORT

Published by:

**UN Women East and Southern Africa Regional Office UN Gigiri
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Block M, Ground Floor
P.O. Box 30218- 00100 N
Nairobi, Kenya**

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**ISBN: 978-99968-77-65-0 (Paperback)
ISBN: 978-99968-77-66-7 (E/Book)**

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Acknowledgement

This Gender Monograph Report would not have been possible without the collaboration, expertise, and support of numerous individuals and institutions.

Statistics Botswana would like to express sincere gratitude to UN Women East and Southern Africa Regional Office for its financial and technical support through the *Making Every Woman and Girl Count* (Women Count) programme. This initiative has played a vital role in strengthening gender data systems and enhancing national capacity for evidence-based gender analysis.

We also acknowledge the invaluable contributions of the consultant, Dr. Serai Daniel Rakgoasi, whose leadership in data analysis, synthesis, and stakeholder engagement significantly shaped the scope and depth of this report. Special thanks are extended to the project team, data analysts, and technical reviewers for their meticulous efforts.

We are especially thankful to all government ministries, civil society organisations, academic institutions, and development partners who participated in interviews, consultations, and validation exercises. Your insights brought depth and context to the statistical findings.

Finally, we recognise the contributions of all Batswana, whose participation in national surveys and the Population and Housing Census provided the foundation for this evidence-based analysis. Your voices are the cornerstone of this work.

Together, we hope this Monograph will inspire deeper commitment, stronger partnerships, and bold action towards achieving gender equality and women's empowerment in Botswana.

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Foreword



Gender equality is not only a fundamental human right but also a critical foundation for a just, inclusive, and prosperous society. In Botswana, significant efforts have been made over the years to advance the rights and opportunities of women and girls. These efforts have yielded important gains in areas such as education, legal reform, health, and institutional alignment with global and regional gender equality frameworks.

This Gender Monograph Report represents a timely and evidence-based contribution to our national discourse on gender equity. Drawing on the most recent Population and Housing Census, as well as other national data sources and qualitative insights, it provides a comprehensive analysis of the status of women in Botswana today. It also highlights the persistent gaps that must be addressed—particularly in economic empowerment, political representation, and protection from gender-based violence.

The findings of this report not only deepen our understanding of the lived realities of women and men across Botswana but also point to clear areas for policy and programmatic action. Importantly, the report adopts an intersectional lens, calling attention to the unique challenges faced by women from marginalised groups, including those living with disabilities, in rural areas, or affected by poverty and social exclusion.

As Botswana continues to pursue its commitments under the Sustainable

Development Goals (SDGs), Agenda 2063, and the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW), as well as other global and continental frameworks, including the Beijing Platform for Action, the SADC Protocol on Gender and Development, the Maputo Protocol, and the Convention on the Rights of Persons with Disabilities, it remains imperative to strengthen gender-responsive policies, institutions, and programmes to accelerate progress toward equality. This Monograph will serve as a critical tool for policymakers, planners, civil society, and development partners. It is our hope that it will guide the design of inclusive, evidence-based, and transformative interventions that leave no one behind.

The monograph highlights where critical gaps still persist despite the efforts to address gender equality—which provides evidence that directly informs policy reforms, resource allocation and strengthens accountability towards advancing gender equality. The monograph also ensures that the voice and lived experiences of women and men in Botswana are translated into concrete actions to improve their daily lives, reduce inequalities and drive national development.

We commend all those who contributed to this important work and reaffirm our collective commitment to a gender-equal Botswana.



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List of terms and concepts



1. Gender Equality

The equal rights, responsibilities and opportunities of women, men, girls, and boys. It does not mean that women and men become the same but that their opportunities and life chances are not limited by gender norms or stereotypes.

2. Gender Equity

Fairness and justice in the distribution of benefits, responsibilities, and opportunities between women and men, taking into account their different needs and power imbalances.

3. Gender Mainstreaming

A strategy for integrating gender perspectives into all policies, programmes, budgets, and institutional processes to ensure that gender considerations inform planning, implementation, and evaluation.

4. Gender-Based Violence (GBV)

Any harmful act perpetrated against a person based on their gender, including physical, sexual, emotional, economic, or psychological harm, whether occurring in public or private life.

5. Intersectionality

An analytical framework that recognises that people experience multiple, overlapping forms of disadvantage (e.g. gender × age × disability × geography × socio-economic status).

6. Female-Headed Household

A household in which a woman is recognised as the primary decision-maker and provider, regardless of whether she lives with other adults.

7. Labour Force Participation Rate

The proportion of the working-age population that is either employed or actively seeking employment.

8. Economic Empowerment

The capacity of women and men to participate in, contribute to, and benefit from economic growth in ways that recognise the value of their contributions, respect their dignity, and promote financial independence.

9. Unpaid Care Work

Non-remunerated activities related to domestic work, caregiving, and household management, predominantly performed by women.

10. Sexual and Reproductive Health and Rights (SRHR)

Rights and services ensuring individuals' ability to make informed decisions about reproduction, access family planning, maternal care, HIV services, and sexual health information.

11. Maternal Mortality Ratio (MMR)

The number of maternal deaths per 100,000 live births.

12. Adolescent Fertility Rate

The number of live births per 1,000 girls aged 15–19.

13. STEM Fields

Academic disciplines in Science, Technology, Engineering, and Mathematics, where women are historically underrepresented.

14. Political Representation

The presence or participation of individuals, particularly women, in elected or appointed decision-making structures.

15. Customary Law

Traditional laws and practices governing marriage, inheritance, land rights, and family relations in Botswana's dual legal system.

16. Land Tenure / Land Rights

The system of rights and arrangements governing access to land, whether customary, leasehold, freehold, or joint ownership.

17. Disability-Inclusive Development

An approach that ensures persons with disabilities participate fully in social, economic, and political processes.

18. Poverty Incidence

The percentage of individuals or households living below a national or international poverty line.

19. Qualitative Data

Non-numerical information based on interviews, focus groups, and lived experiences, used to interpret statistical trends.

20. One-Stop Centre (OSC)

A service hub providing integrated GBV response services, health, psychosocial, legal, and police support, in one location.

List of acronyms



AUC	African Union Commission
AU	African Union
BAIS	Botswana AIDS Impact Survey
BBS	Statistics Botswana (formerly Botswana Bureau of Statistics)
BIDPA	Botswana Institute for Development Policy Analysis
BQMTS	Botswana Quarterly Multi-Topic Survey
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women
CSO	Civil Society Organisation
DHS	Demographic and Health Survey
FGD	Focus Group Discussion
GBV	Gender-Based Violence
GFP	Gender Focal Point
HIES	Household Income and Expenditure Survey
ILO	International Labour Organization
KII	Key Informant Interview
MoH	Ministry of Health
NPC	National Planning Commission
NDP	National Development Plan
PHC	Population and Housing Census
RAO	Remote Area Occupant
SDG	Sustainable Development Goal
SADC	Southern African Development Community
SB	Statistics Botswana
SRH / SRHR	Sexual and Reproductive Health / Sexual and Reproductive Health and Rights
STEM	Science, Technology, Engineering and Mathematics

TSM	Temporary Special Measures (for women's political representation)
TVET	Technical and Vocational Education and Training
UB	University of Botswana
UIS (UNESCO- UIS)	UNESCO Institute for Statistics
UN	United Nations
UNFPA	United Nations Population Fund
UNESCO	United Nations Educational, Scientific and Cultural Organization
UN Women	United Nations Entity for Gender Equality and Women's Empowerment
VACS	Violence Against Children Survey
WHO	World Health Organization
WEE	Women's Economic Empowerment
WID / GAD	Women in Development / Gender and Development frameworks



Executive Summary

Botswana has made substantial strides in advancing gender equality and women's empowerment over the past five decades, underpinned by progressive legal reforms, significant investments in education, expanded access to health services, and institutional commitment to global and regional gender agendas. Yet, persistent gender gaps remain across key dimensions of social and economic life, reflecting both enduring structural barriers and the deep influence of socio-cultural norms. The *Botswana Gender Monograph* offers a comprehensive and multidimensional analysis of these gender dynamics, drawing principally on the 2022 Botswana Population and Housing Census, complemented by national survey data, administrative records, online databases, and rich qualitative insights. The findings provide a detailed examination of progress, disparities, and emerging concerns, while highlighting opportunities for more transformative, data-driven, and inclusive gender-responsive policy and planning.

Purpose and Scope

The monograph assesses the status of gender equality in Botswana, focusing on demographic patterns, education and skills development, economic participation, health and well-being, gender-based violence, political representation, social norms, and asset ownership. The analysis is grounded in a mixed-methods approach that integrates statistical evidence with lived experiences captured through focus group discussions and key informant interviews. By triangulating diverse sources of evidence, the report offers both analytic depth and contextual nuance, illustrating not only what the data show but also why the patterns persist and how stakeholders experience them.

The report is further shaped by Botswana's commitments under the Constitution, the National Policy on Gender and Development, Vision 2036, and the National Gender Strategy, as well as international and regional instruments such as CEDAW, the Beijing Platform for Action, the SADC Protocol on Gender and Development, and the African Union's Maputo Protocol. While Botswana has developed a strong policy and legal architecture, implementation challenges, ranging from financing gaps to weak monitoring mechanisms, continue to slow progress.

Key Findings

1. Demographic Patterns and Household Characteristics

Women constitute 51 percent of Botswana's population and are disproportionately represented in older age groups, reflecting higher female longevity. Female-headed households now account for approximately 45 percent of all households, especially in urban villages. These restructuring patterns reflect broader changes in marital status, household formation, and socio-economic roles. Population growth continues to slow, driven largely by fertility decline, falling from about 3.3 children per woman in 2001 to 2.8 in 2022, alongside modest improvements in mortality. Migration remains limited in scale and does not significantly alter gender distributions. These demographic shifts hold implications for care responsibilities, labour market participation, social protection, and long-term planning for an ageing population.

2. Education and Skills Development

Botswana has achieved gender parity in primary and secondary school enrolment, reflecting strong progress in educational access. However, parity does not translate into equitable participation across fields of study. Women remain underrepresented in STEM fields and vocational training programmes, while men dominate in areas such as engineering, construction, and certain technical trades. Women are increasingly surpassing men in secondary completion, yet men still hold a slight advantage in higher education degrees, diplomas, and postgraduate qualifications. This uneven distribution of skills contributes to gendered patterns in labour market participation and income, reinforcing occupational segregation.

3. Economic Participation and Access to Resources

Despite gains in education, gender inequalities remain pronounced in economic participation. Women's labour force participation stands at 58 percent, compared with 73 percent among men, and women face higher unemployment rates, even among those with tertiary education. A persistent gender wage gap, estimated between 20 and 22 percent demonstrates that women continue to earn substantially less than men for similar work. Structural barriers, including limited access to land, credit, and productive assets, restrict women's economic empowerment, especially in rural areas.

Land ownership shows particular gender disparities in agricultural and commercial land, even though men and women maintain near-universal ownership of residential plots. Poor access to financial services, credit, and business networks further entrenches women's vulnerability, particularly among female-headed households and women living with disabilities. Informal work remains feminised and insecure, with inadequate protections and limited coverage under labour regulations.

4. Health, Sexual and Reproductive Health, and Well-being

Botswana continues to register significant progress in health and well-being, including a decline in maternal mortality to 144 deaths per 100,000 live births. Women's access to antenatal care, skilled birth attendance, and HIV treatment has also expanded substantially. However, key challenges persist. HIV prevalence remains markedly higher among women (18.9 percent) compared with men (14.2 percent), reflecting gendered vulnerabilities, unequal power relations, and differentiated risk environments.

Unmet need for family planning, mental health concerns, and barriers to comprehensive sexual and reproductive health services continue to affect women, particularly adolescents and young women. Qualitative evidence highlights challenges such as stigma, uneven quality of SRHR services, and limited male involvement in reproductive health. Women with disabilities face further constraints due to inaccessible services, communication barriers, and minimal specialised health programming.

5. Gender-Based Violence (GBV)

Gender-based violence remains one of Botswana's most urgent gender and human rights concerns. One in three women has experienced intimate partner violence, and emotional, sexual, and economic abuse remain widespread across all population groups. Despite progressive legislation, including the Domestic Violence Act and the Sexual Offenders Registry Act, significant gaps persist in survivor support, service coverage, and prevention programming.

A major limitation is the absence of a recent national GBV prevalence survey. Administrative data remain fragmented and under-reported, particularly for informal settlements, rural areas, persons with disabilities, and male survivors. Qualitative findings reveal additional barriers:

stigma, faith-based discouragement from reporting, inadequate psychosocial support, and rising forms of digital GBV. Communities emphasise that while awareness is improving, structural and cultural barriers continue to impede meaningful progress.

6. Political Participation and Decision-Making

Women continue to be significantly underrepresented in political leadership. They hold only 11 percent of parliamentary seats, well below the SADC and AU targets. Women's representation in cabinet, local councils, and traditional leadership structures also remains low. Barriers include structural constraints within political parties, limited financial resources for campaigns, safety concerns, and persistent cultural norms that link leadership with masculinity. While there are growing examples of women rising into leadership roles, the pace remains slow and uneven.

7. Social and Cultural Norms

Cultural and social norms exert powerful influence over gender relations, shaping inheritance practices, caregiving roles, decision-making authority, and public attitudes toward GBV and political participation. Patriarchal norms remain embedded across both customary and statutory spheres, often resulting in conflicting legal interpretations. While younger generations increasingly challenge restrictive norms, supported by higher education levels and digital advocacy, traditional attitudes continue to slow progress.

Qualitative perspectives reveal both the strength and the fragility of these shifts. Participants noted the growing visibility of women in non-traditional sectors, greater voice through social media, and expanding entrepreneurship. At the same time, they expressed concern over persistent cultural resistance, widening educational vulnerability among boys, and the rise of online harassment targeting women.

8. Asset Ownership, Land, and Property Rights

Residential land ownership is nearly universal and largely equitable across genders, demonstrating the success of Botswana's land administration system. However, women face significant disadvantages in access to agricultural and commercial land, especially in rural areas. Joint ownership of residential plots remains extremely low, limiting women's security within marital and cohabiting unions.

Women with disabilities experience even greater disparities in owning productive land or property titles, reflecting compounded constraints arising from gender, disability status, and socio-economic exclusion. While legal provisions guarantee equal land rights, gaps persist in implementation, awareness, institutional coordination, and gender-sensitive extensions of Land Board services.

9. Institutional and Policy Frameworks

Botswana has developed a strong policy and legal framework for gender equality, including constitutional protections, gender-responsive legislation, and national policies such as the NPGAD. However, implementation has been uneven due to institutional fragmentation, weak monitoring systems, and insufficient financing. Gender focal points across ministries vary greatly in capacity, influence, and integration into planning structures. The expiration of the National Operational Plan in 2020 has left Botswana without an updated national gender strategy, further constraining coordination.

Qualitative findings strongly reinforce the need for stronger enforcement mechanisms, including a standalone Gender Equality Law, gender-responsive budgeting, a dedicated Ministry of Gender, and a national gender information system. Stakeholders emphasise that without legal authority and adequate resourcing, gender mainstreaming efforts will remain limited in scope and depth.

Cross-Cutting Issues

Several themes cut across all sectors:

- **Intersectionality:** Women's experiences vary significantly by age, disability, location, marital status, and socio-economic background. Rural women, female-headed households, and women with disabilities face compounded disadvantages.
- **Urban–Rural Disparities:** Access to services, employment, and land opportunities varies sharply across settlement types, with rural women experiencing greater poverty and exclusion.
- **Youth and Boys' Vulnerabilities:** Concerns about school dropout, risky behaviour, and limited psychosocial support for boys signal a growing gendered vulnerability that requires targeted intervention.
- **Gender Data Gaps:** Major gaps remain in asset ownership, time-use, GBV, digital safety, and the informal sector, hindering monitoring and evaluation of gender commitments.

Conclusions and Implications

Botswana stands at a critical juncture. While legal and policy commitments have created a strong foundation for gender equality, gaps in implementation, financing, data, and institutional capacity hinder progress.

The analysis reveals a dual reality: one of progressive frameworks and expanded opportunities, alongside persistent structural and cultural barriers that continue to shape the lived experiences of women and men. To accelerate progress, Botswana requires a renewed national gender strategy that is fully costed, aligned to Vision 2036, and anchored in robust monitoring systems.

Strategic Recommendations

The monograph calls for coordinated action across six priority areas:

1. Strengthen gender-responsive institutions, including establishing a standalone Gender Equality Law and fully resourced Ministry of Gender.
2. Promote women's economic empowerment, improving access to finance, land, productive assets, and decent employment.
3. Improve sexual and reproductive health and rights, with expanded youth-friendly, disability-inclusive, and community-based services.
4. Scale up prevention and response to GBV, including a national prevalence survey and integrated data system.
5. Increase women's political representation, through electoral reforms, party quotas, leadership development, and campaign financing support.
6. Transform social and cultural norms, using behavioural communication strategies, community engagement, and digital platforms.

A coordinated, fully funded, multi-sectoral approach, supported by stronger gender data systems and accountability mechanisms, is essential for ensuring meaningful, sustained progress.

Chapter 1 – Introduction, Purpose, Methodology & Limitations



1. Introduction

Botswana has made notable strides in advancing gender equality, a recognised driver of sustainable development. Nevertheless, persistent gaps remain in areas such as economic participation, political representation, and social well-being. This Gender Monograph presents a situational analysis of women and men in Botswana, drawing primarily on the latest Census data, and complemented by national surveys, organisational databases, and qualitative evidence. Adopting a mixed-methods approach, the analysis integrates quantitative indicators with qualitative insights to provide a comprehensive and multidimensional picture of gender disparities, progress, and lived experiences across the country.

The analysis of the situation of women and men in Botswana received financial and technical support from UN Women and will contribute to tracking of the national and international gender indicators as well as assess the impact of relevant Government policies and strategies implemented during the past 10 years.

The process of creating an analysis of the situation of women and men will be underpinned by analysis of data and statistics relating to key national and international gender indicators in Botswana; description of the demographic weight and dynamics of the female population in Botswana; analysis of the socio-economic and living conditions of Botswana women, and households headed by women and highlighting the strengths and shortcomings of previous programmes for the advancement of women and dimensions that still require attention.

1.1. Purpose & Objectives of Country Gender Profile

The main objectives of this project is to examine the status of gender equality and women's empowerment in Botswana by analysing demographic, social, and economic patterns, drawing on national data sources, to inform policy, planning, and advocacy for inclusive and equitable development.

Specifically the project aims to:

- Analyse gender disparities across various socio-economic domains using Census data, national surveys, and organizational reports.
- Assess progress toward gender equality and women's empowerment in line with national and international commitments.
- Provide evidence-based recommendations for policymakers, civil society, and development partners to enhance gender-responsive programming.
- Incorporate qualitative insights through key informant interviews and focus group discussions to complement quantitative findings.

1.2. Methodology for the Gender Monograph

Approach

This Gender Monograph adopts a mixed-methods approach, combining quantitative and qualitative data to generate a comprehensive and contextually grounded analysis of gender equality in Botswana. The mixed-methods design was selected to overcome the inherent limitations of any single data source, particularly the constraints of census data, which, although nationally representative, are collected once

every decade and provide limited scope for certain gender-sensitive indicators such as gender-based violence (GBV), time use, or intra-household dynamics. By triangulating statistical evidence with qualitative insights from stakeholders, the Monograph provides a more nuanced depiction of the lived realities of women, men, girls, and boys across Botswana.

Sources of Data

Primary quantitative data

The main source of quantitative data is the Botswana Population and Housing Census 2022, which provides the most recent nationally representative dataset on demographic, social, and economic characteristics. To provide historical context and assess long-term gender trends, the analysis also draws, where possible, on comparable indicators from the 2001 and 2011 censuses.

Complementary household surveys

Several national surveys were used to supplement the census data and provide additional thematic depth:

- Botswana AIDS Impact Survey V (BAIS V, 2021): A nationally representative survey focusing on HIV prevalence, behavioural risk factors, health-seeking behaviour, and selected sexual and reproductive health indicators,
- Botswana Demographic and Health Survey (DHS): Provides internationally comparable indicators on fertility, maternal and child health, contraception, and women's empowerment.
- Botswana Quarterly Multi-Topic Survey (BQMTS, 2022): Provides updated estimates on labour force participation, household welfare, and selected socio-economic indicators.

In addition, online statistical platforms, including the UN Data Portal, World Bank Gender Data Portal, UNESCO UIS database, ILOStat, UN

Women's Gender Data Hub, and the Southern African Development Community (SADC) Gender and Development Monitor, were consulted to complement national datasets, benchmark Botswana's performance, and fill data gaps where local information was missing or outdated.

GBV data constraints

A major methodological limitation relates to gender-based violence. Botswana has no recent national survey dedicated to GBV, and there are no Knowledge, Attitudes, Behaviour and Practices (KABP) surveys or specialised modules on violence integrated routinely into national household surveys. The only relatively comprehensive survey-based source remains the Botswana Violence Against Children Survey (VACS, 2018), which is now dated and focuses primarily on childhood exposure rather than adult GBV.

Administrative data from the Botswana Police Service, Ministry of Health, and Gender Affairs Department were used to complement this gap, but these datasets are affected by under-reporting, inconsistencies, and limited integration across sectors. This situation underscores the urgent need for a periodic, nationally representative GBV prevalence survey.

Qualitative data

Qualitative data were collected through key informant interviews (KIIs), focus group discussions (FGDs), and stakeholder consultations held with government ministries, local authorities, civil society organisations, development partners, and community-level actors. These qualitative inputs provided interpretative depth, contextualised statistical patterns, and helped illuminate areas not captured by quantitative instruments, such as social norms, perceptions, lived experiences, and barriers to service access.

Document and literature review

A desk review of policy documents, legal frameworks, strategic plans, programme evaluations, academic literature, and global or regional gender reports was conducted. Key documents include Vision 2036, the National Gender Policy, NDP 12, sectoral strategies, and international commitments under CEDAW, SDG frameworks, and the SADC Protocol on Gender and Development.

Key Analytical Areas

The key analytical areas of this report include the demographic profile of women and men; economic participation and livelihoods; education and skills development; health and well-being, including sexual and reproductive health; gender-based violence (GBV) and protection mechanisms; political participation and leadership; social and cultural norms affecting gender equality and data gaps and policy implications.

Analytical Framework

The Monograph combines descriptive statistics, trend analysis, intersectional disaggregation (gender × age × disability × socio-economic status × location), and qualitative thematic analysis. Intersectionality is central to the analytical approach, enabling identification of subgroups that experience multiple or compounded forms of disadvantage. Triangulation across data types and sources enhances the robustness, validity, and reliability of findings, consistent with methodological guidance from Patton (2002) and Denzin (1978).

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types and sources enhances the robustness, validity, and reliability of findings, consistent with methodological guidance from Patton (2002) and Denzin (1978).

Limitations of the Report

While the Monograph strives for comprehensive coverage, several limitations remain:

1. Census limitations:

Census data are collected every 10 years and may not fully reflect recent socio-economic or demographic changes. The census also lacks modules on sensitive gender issues such as GBV, unpaid care work, labour market informality, social norms, and intra-household power dynamics.

2. Survey and administrative data gaps:

Differences in sampling, definitions, and methodology across surveys limit direct comparability. Administrative records, particularly for GBV, education, and social protection are sometimes incomplete, inconsistently reported, or not sex-disaggregated.

3. Major data gaps on GBV:

Botswana has not conducted a dedicated GBV prevalence survey. No KABP study or routine household-based violence modules exist, and the few available datasets (e.g., VACS 2018) are dated. As a result, national estimates of adult GBV prevalence, perpetration, attitudes, and service-seeking behaviour remain inadequate.

4. Gaps across emerging priority sectors:

Gender-related data are sparse in critical areas such as climate change, peace and security, infrastructure, water and energy access, digital inclusion, and science, technology, and innovation.

5. Limited availability of gender-specific indicators:

Indicators on time-use, asset ownership, care responsibilities, and gender norms are especially limited, restricting the depth of gender analysis in these domains.

Despite these constraints, the integration of census data with multiple complementary sources, including online databases, administrative datasets, and qualitative evidence, provides a comprehensive and methodologically sound foundation for understanding gender inequalities in Botswana. However, the findings also highlight the need to strengthen gender data systems and invest in more frequent, specialised surveys to support evidence-based policy-making.

Chapter 2 – Legal, Policy & Institutional Frameworks for Gender Equality in Botswana



2.1. Introduction

Botswana has made steady progress in advancing gender equality since independence, supported by legal reforms, national policies, and commitments to international and regional gender frameworks. However, implementation has been uneven and constrained by persistent customary norms, institutional weaknesses, and data gaps, particularly in emerging areas such as GBV, sexual and reproductive health rights, and women's political participation. This chapter presents a structured analysis of Botswana's international and national normative frameworks, institutional architecture, financing arrangements, and monitoring and evaluation systems to demonstrate how the country supports, and sometimes constrains, gender equality.

2.2. International Normative Frameworks

The country is also party to several global and regional instruments that establish binding or voluntary commitments on gender equality.

Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW)

Ratified in 1996, CEDAW remains the cornerstone of Botswana's international gender commitments. In its 2019 concluding observations, the CEDAW Committee commended Botswana for legal reforms but expressed concern about GBV prevalence, low women's political representation, and gaps in data systems (CEDAW, 2019).

Beijing Declaration and Platform for Action

Botswana submitted its Beijing+25 national review in 2019, identifying GBV, SRHR, and underrepresentation in leadership as priority areas for accelerated action. More recently (2024) the country submitted its Beijing +30 report which takes stock of the subsequent five years as well as provide country commitments for the next five years.

Sustainable Development Goals (SDGs)

Botswana is committed to SDG 5 on gender equality and SDG 10 on reducing inequalities. The SDG 5.2 target (ending violence against women) is particularly critical, though progress is constrained by weak data and fragmented services.

SADC Protocol on Gender and Development (2017)

In 2017 Botswana acceded to the SADC protocol, aligning national objectives with regional targets on women's rights, political participation, and access to justice.

African Union Maputo Protocol (2023)

Botswana ratified the Protocol in December 2023, one of the most significant recent developments. It signals a commitment to strengthening SRHR, ending harmful practices, and expanding women's rights protections.

2.3. National Normative Frameworks (Policies, Laws & Strategies)

2.3.1. Constitutional & Legal Foundations

Gender equality is grounded in Section 3 of the Constitution, which guarantees equal protection under the law. Key judicial decisions, including *Attorney General v. Unity Dow (1992–1995)* and *Mmusi & Others v. Ramantele (2012–2013)*, affirmed women's equal citizenship and inheritance rights, setting precedent for harmonising customary and statutory law.

Key Gender-Related Legislation

- Succession Act (1970) – equal inheritance rights for spouses
- Employment Act Amendments (1992) – removed sex-based employment restrictions
- Abolition of Marital Power Act (2004) – granted married women equal legal capacity
- Domestic Violence Act (2008) – protection orders and remedies
- Criminal Procedure and Evidence Act Amendment (2008) – gender-neutral rape definitions, closed-door hearings
- Deeds Registry Act Amendment – women can register property independently
- Land Policy Amendment (2020) – equal land rights for married women
- Sexual Offenders Registry Act (2021) – GBV response coordination

2.3.2. National Gender Policy Architecture

National Policy on Gender and Development (NPGAD, 2015)

The NPGAD established a comprehensive framework grounded in human rights, mainstreaming, and alignment with Vision 2036, SDGs, CEDAW, and SADC.

National Strategy for Gender and Development (NSGD, 2016–2020)

Operationalised the NPGAD through seven thematic areas:

1. Economic empowerment
2. Health and wellbeing
3. Governance and political participation
4. Education and skills
5. Housing, energy & climate
6. Access to justice & GBV
7. Special measures for vulnerable groups

National Operational Plan (NOP, 2016–2020)

Provided outputs, responsible institutions, indicators, and financing needs.

2.4. Implementation Experience of NPGAD, NSGD & NOP (2016–2020)

Although the NPGAD and its implementation instruments provided a strong architecture, implementation was uneven.

Extent of Implementation

Evidence suggests:

- Strong progress in legal reforms, education parity, gender focal point establishment, and national GBV strategy development.
- Moderate progress in gender mainstreaming across ministries, though capacity remained uneven.
- Weak progress in gender budgeting, GBV services coverage, and political representation.

Challenges Identified

- Insufficient financing for gender mainstreaming.
- Limited institutional authority and capacity of Gender Affairs Department and Gender Commission.

- Fragmented coordination across ministries.
- Persistent cultural resistance in areas like inheritance, marriage, and land.
- Significant gender data gaps, especially in GBV, care work, and asset ownership.

What Happens After 2020?

Since the NOP expired, Botswana has been operating without a current national gender strategy. Public consultations by the Ministry of Youth, Gender, Sport and Culture (2022–2024) indicate plans to:

- Develop a new, more robust National Gender Policy Framework (post-2025) aligned with Vision 2036 & Agenda 2063
- Strengthen gender mainstreaming across ministries, including gender-responsive budgeting
- Expand the GBV legal and programmatic framework, including implementing the Maputo Protocol
- Develop a national GBV prevalence survey (acknowledged need in Cabinet discussions)

These future directions highlight recognition that the existing policy cycle has ended and a new framework is urgently needed.

2.5. Institutional Structures for Gender Equality

Although the NPGAD and its implementation instruments provided a strong architecture, implementation was uneven.

2.5.1. Government Coordination

Gender Affairs Department (GAD)

Housed in the Ministry of Youth, Gender, Sport and Culture, GAD is the national coordinating authority for gender policy. Its roles include:

- Policy formulation and coordination
- Gender mainstreaming support to ministries
- Oversight of gender focal points

- Community gender programmes
- GBV policy coordination

National Gender Commission

Established in 2016 to provide oversight and accountability but remains under-resourced.

Line Ministries

Each ministry is required to:

- Appoint Gender Focal Points
- Integrate gender in their policies and programmes
- Report using gender-sensitive indicators

In practice, compliance varies widely, with some ministries (Health, Local Government, Basic Education) being more advanced than others.

2.5.2. Decentralised Structures

- District Gender Committees
- District GBV Committees
- Social and Community Development offices

These structures facilitate coordination at community and district levels but face significant staffing and capacity challenges.

2.6. Financing for Gender Equality

Gender architecture remains **underfunded**, with:

- Limited budget allocation for gender programmes
- No mandatory gender-responsive budgeting (GRB) across ministries
- Heavy reliance on donor-supported projects (UN Women, UNFPA, UNICEF)

The NOP (2016–2020) anticipated a 50 percent increase in GAD budget by 2020, this target was not met. Financing shortfalls continue to constrain GBV response services, data collection, and capacity-building initiatives.

2.7. Monitoring, Evaluation & Learning

The gender M&E system is guided by the NPGAD and NOP but has struggled to function effectively due to:

Key Weaknesses

- Ministries do not routinely conduct gender audits.
- Limited use of gender-sensitive indicators.
- Sex-disaggregated data remains incomplete.
- No integrated national gender information system.
- GBV data especially weak, no recent survey, weak administrative data integration.

Opportunities

- Alignment with Vision 2036 M&E system.
- Strengthening national indicators under SDG 5 reporting.
- Development partner support for GBV data system improvements.

2.8. Summary and Policy Implications

Botswana has a strong normative and institutional framework on paper but faces challenges in implementation, financing, coordination, and data systems. The expiry of the NPGAD implementation instruments signals an urgent need for a new national gender strategy that is:

- Fully costed
- Aligned with Vision 2036, Agenda 2063 & SDGs
- Supported by robust gender data systems
- Grounded in evidence from community-level realities

A renewed framework is essential for accelerating progress toward gender equality and ensuring that Botswana's commitments translate into sustained, measurable change.

2.9. Qualitative Narratives on Policy and Institutional Effectiveness

To complement the legal, policy, and institutional analysis presented in this chapter, it is essential to draw on qualitative insights that illuminate how these frameworks operate in practice. While statutory provisions and policy commitments provide the formal architecture for advancing gender equality, the lived experiences and perceptions of stakeholders reveal the extent to which these instruments are understood, implemented, and felt at community and institutional levels.

Incorporating qualitative evidence therefore strengthens the analysis by exposing gaps between policy intent and everyday realities, highlighting persistent sociocultural barriers, and capturing nuanced gendered experiences that quantitative indicators alone may obscure. These perspectives not only enrich the interpretation of Botswana's gender governance landscape but also offer critical reflections that can guide more responsive and context-appropriate policy reforms (e.g., Creswell & Poth, 2018; Maxwell, 2013).

Against this backdrop, the qualitative perspectives presented below offer grounded illustrations of how Botswana's legal, policy, and institutional commitments to gender equality are interpreted and experienced by different stakeholders.

The narratives provide context-specific reflections on the effectiveness, visibility, and limitations of existing frameworks, thereby revealing the practical realities that shape gender equality outcomes. In doing so, they help bridge the gap between formal policy provisions and lived experience, offering a more complete and textured understanding of the gender landscape in Botswana.

Qualitative findings

The findings highlight both progress and ongoing challenges in advancing gender equality in Botswana. Participants noted that there is increasing awareness and empowerment of women, driven particularly by access to education and opportunities in entrepreneurship. One participant observed, “Women are now entering spaces like mining and construction, fields that were once considered male-only.” They also highlighted a growing presence of women in leadership roles and in sectors traditionally dominated by men, alongside stronger gender advocacy through digital platforms and active engagement from civil society organisations. As one official put it, “Social media has given women a voice; we now see more young women speaking up about issues that were once kept silent.”

Despite these positive developments, persistent challenges remain. A key concern is the absence of a standalone gender equality law that would compel other sectors to take action, thereby limiting enforceability. As one respondent explained, “We can only advocate, we cannot enforce. Other ministries don’t have to listen to us.” Institutional coordination is also weak, with gender mainstreaming neither systematic nor enforced across government ministries. Furthermore, data systems remain insufficient, with notable gaps in gender-disaggregated statistics, particularly regarding informal economic activities and gender-based violence (GBV)-related services. Labour market inequality is another pressing issue, as educated women continue to experience higher unemployment rates and are often clustered in low-paying, traditionally “soft” sectors. In addition, the educational gender shift was noted as a concern, with girls outperforming boys academically while boys, especially in rural areas, are becoming increasingly vulnerable. One participant warned, “Boys are dropping out, engaging in risky behaviours, and no one is paying enough attention.”

GBV remains a major societal concern. Underreporting persists, fuelled by stigma and the absence of adequate support structures, particularly for male victims. Some religious institutions were said to discourage survivors from formally reporting GBV, framing it instead as a spiritual matter to be resolved internally. As one official recounted, “Some churches tell women to pray for their abusive husbands rather than report them.”

Cultural barriers and entrenched public perceptions continue to resist gender transformation. Patriarchal norms remain influential in shaping attitudes and behaviours, while traditional views often slow progress toward equality. At the same time, social media has emerged as an important tool for gender advocacy, but it has also become a space for cyberbullying and digital forms of GBV. A participant noted, “The same platforms that help us mobilise are now being used to harass women online.” Respondents put forward several strategic recommendations to address these issues. These included the enactment of a comprehensive Gender Equality Law and the establishment of a stand-alone Ministry for Gender to ensure dedicated attention and resources. They also advocated for the integration of gender-responsive budgeting and gender indicators across all sectors, as well as increased investment in gender data systems, digital advocacy, and enhanced inter-ministerial collaboration. In the words of one participant, “If we have the law, the data, and the coordination, then we can truly move the gender agenda forward.”

The recommendations emerging from the focus group discussion point to the need for both legislative reform and strengthened institutional frameworks to advance gender equality in Botswana. Participants stressed the urgency of moving beyond policy-based advocacy toward the enactment of a comprehensive Gender Equality Law. Such legislation would mandate

gender mainstreaming and accountability across all government departments, while including clear mechanisms for monitoring progress and applying sanctions in cases of non-compliance.

Institutional coordination was seen as equally critical. It was proposed that the current Gender Department be upgraded into a full Ministry of Gender, equipped with cross-sectoral authority and adequate resources. This should be complemented by the institutionalisation of gender focal points in every ministry, each with a formal mandate to report on progress and ensure the integration of gender indicators into departmental programmes.

To close existing information gaps, respondents recommended the expansion of gender data systems. They called for a partnership with Statistics Botswana to develop a Gender Data Portal capable of compiling sex-disaggregated statistics from all sectors. Priority areas for data collection should include the informal sector, gender-based violence, especially its economic costs, and the emerging challenge of digital GBV.

Another key area of action is the integration of gender-responsive budgeting and planning across government. This would involve training ministry personnel in gender-responsive budgeting approaches and embedding gender indicators within national development plans. Annual reporting mechanisms should be established to track progress and adjust interventions where necessary.

The discussion also highlighted the need to address male vulnerability, especially among boys and young men in rural areas who are at heightened risk of school dropout and engagement in risky behaviours. Suggested interventions include the promotion of positive masculinities, targeted educational support, and the expansion of psychosocial services for men.

Finally, participants emphasised the importance of tackling both cultural and digital resistance to gender equality. Public awareness campaigns should be tailored to engage traditional and faith-based leaders, aiming to dispel misconceptions and foster locally grounded understandings of gender equity. In addition, national policies and educational programmes should incorporate elements of digital safety and rights to address online harassment and ensure that digital spaces become platforms for empowerment rather than tools of discrimination.

Chapter 3 – Gender, Population Structure and Household Characteristics



3. Introduction

Demographic and household characteristics form the foundation for understanding gender dynamics within Botswana's population. They describe who people are, their age, sex, marital status, education, social, economic and household arrangements, and how these factors interact to shape life opportunities and wellbeing. Full comprehension of the gender dimensions of demographic and socio-economic characteristics is essential for interpreting how Botswana's population structure, social systems, and economic opportunities shape the lived experiences of women and men.

3.1. Population Size, Structure, and Distribution

The analysis in the chapter explores gender differences in population structure, age distribution, and marital status and household characteristics, including household headship, composition, and dependency patterns; and how Botswana's population structure reflects gender dynamics in age composition, dependency, and spatial patterns.

Population Size and Growth Trends

Over the past five decades, Botswana's population has grown from approximately 574,000 in 1971 to about 2.36 million in 2022 (Figure 1), reflecting significant demographic expansion and transformation. The growth rate was fastest during the 1971–1981 decade, at around 5 percent per year, driven by high fertility and improvements in child survival. Growth gradually decelerated in each subsequent decade: about 3.2 percent between 1981 and 1991, 2.4 percent between 1991 and 2001, 1.9 percent in the 2001–2011 period, and down to approximately 1.4 percent annually for

2011–2022. This progressive slowing is linked to fertility decline, mortality reductions, and relatively stable levels of net migration.

From a gender and demographic perspective, this evolving growth trajectory has important implications. The high growth phase in the 1970s coincided with large young cohorts and potential for a demographic dividend, but also placed demands on infrastructure, schooling and services, and likely affected women and men differently in terms of labour market participation and caregiving roles.

The subsequent decline in growth indicates a transition towards smaller family sizes and an ageing population structure, which affects men and women in distinct ways: women generally carry heavier burdens of child-rearing and household work during high-growth periods, whereas in later decades issues like female labour force participation, ageing, and palliative care become more prominent. These trends underline the need to monitor how shifting population size and growth interact with gender roles, economic opportunities and service demands over time.

3.2. Natural Increase as the Principal Driver of Population Growth

Historically natural increase accounted for the bulk of population growth, despite significant demographic transitions. Botswana's Total Fertility Rate (TFR) declined from around 3.3 children per woman in 2001 to 2.8 in 2022, continuing a long-term downward trend influenced by rising female education, expanded access to modern contraception, increased urbanisation, and changing social norms around family size (United Nations, 2023; Statistics Botswana, 2022). This

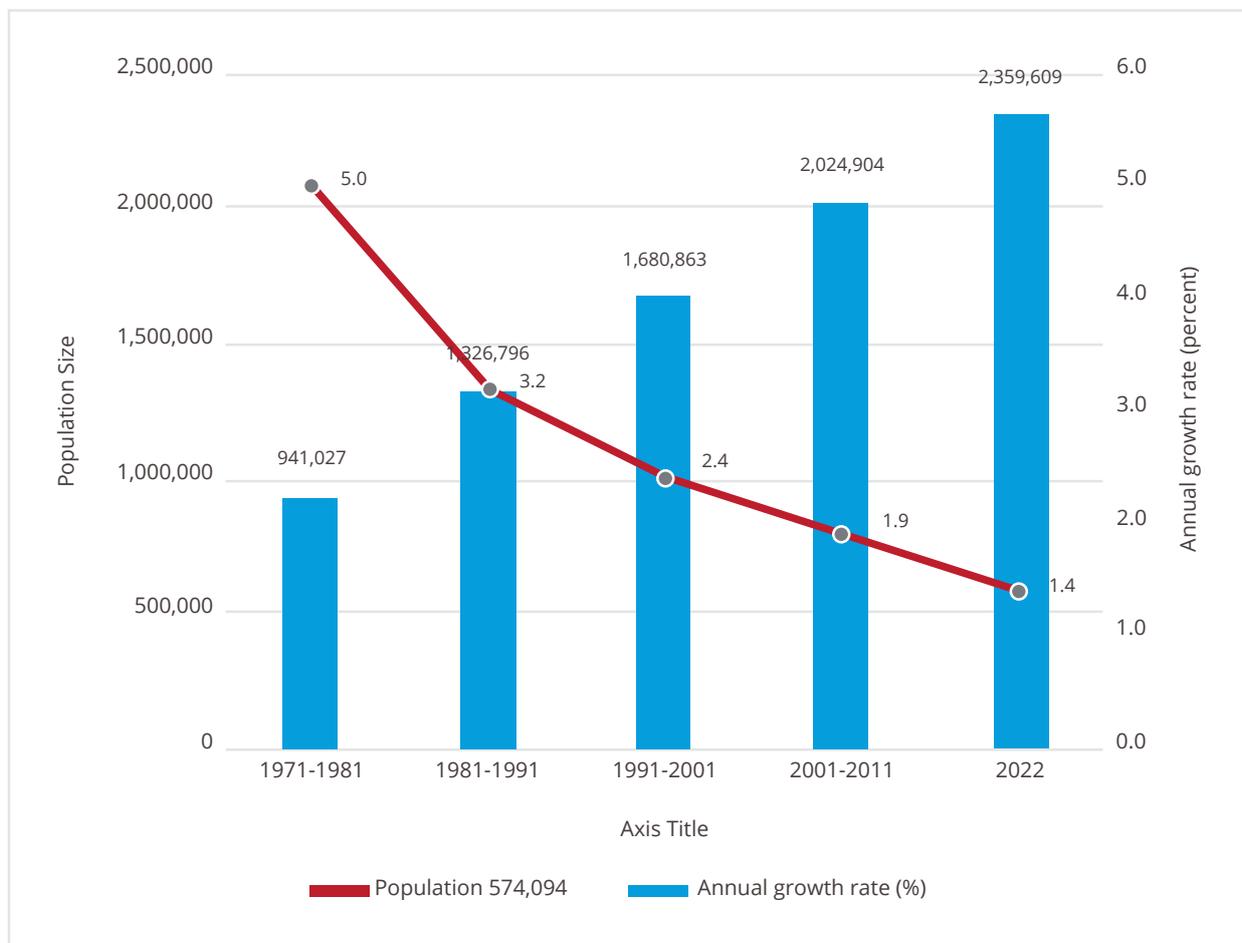


Figure 1: Population size and annual growth rates

decline moderated the rate of natural increase but did not eliminate it: birth rates remained above replacement level, and mortality fell substantially due to expanded HIV treatment, reducing AIDS-related deaths particularly after 2005.

Because fertility decline affects women directly, one might expect visible gender differentials in population growth; however, annual growth rates for males and females remain broadly similar. This is because population growth by sex is structurally anchored in the sex ratio at birth, which is biologically stable (approximately 103–105 male births per 100 female births) and shows no evidence of gender-biased practices in Botswana (United Nations Population Division, 2022). As a result, male and female population growth rates tend to track one another closely, with only minor fluctuations attributable to sex-specific mortality patterns.

3.3. Limited Contribution of Net Migration

Net migration made a modest and fluctuating contribution to population change over the period. Botswana has historically experienced low levels of net international migration and a high degree of circular mobility, some of which is undocumented or temporary. The country remained a net recipient of labour migrants from neighbouring states (especially Zimbabwe and Namibia), but the numbers were not large enough to significantly alter national population growth patterns (UN DESA, 2023). Internal migration, particularly rural-to-urban movement, was more substantial, shaping urban growth, but it does not affect national population size.

Moreover, migrant flows are not strongly gender-skewed at national level; while specific sectors e.g., domestic work or mining may show gender

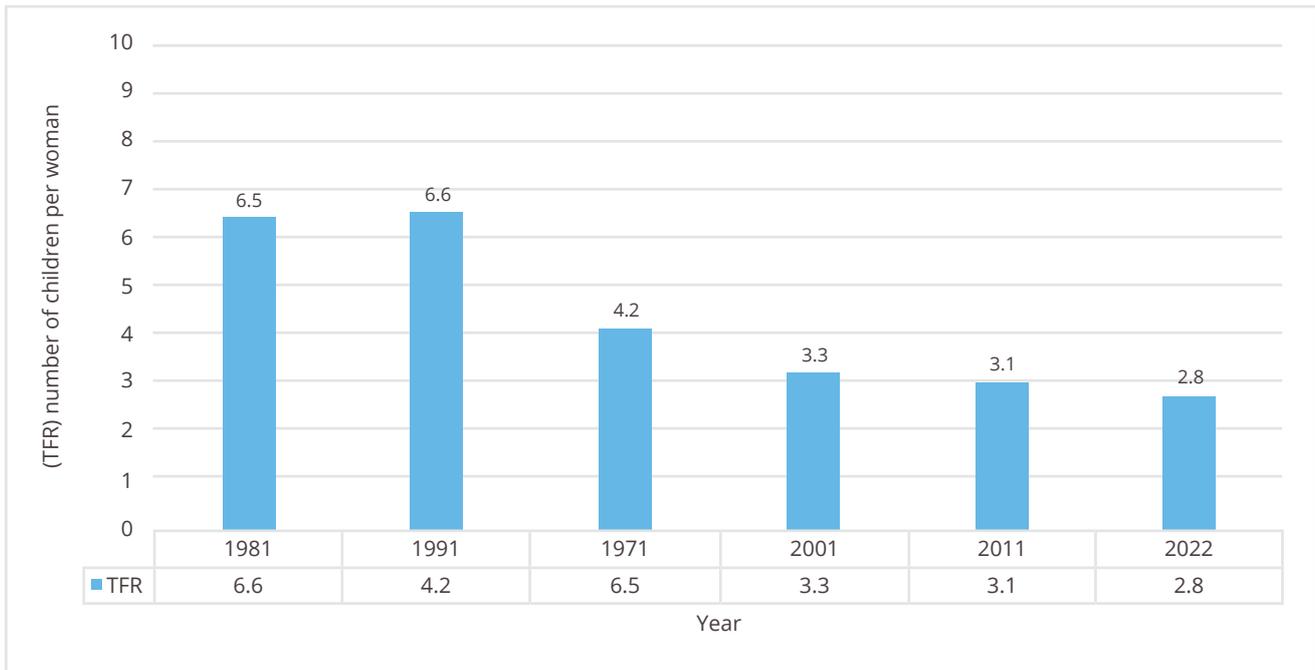


Figure 2: Botswana Total Fertility Rates (1971-2022)

differences, international migration does not appear to introduce sustained sex imbalances in population growth.

Thus, Botswana's population has historically been driven primarily by natural increase, with fertility decline moderating but not reversing population growth. The population continues to grow despite decline growth rates mainly due to inbuilt growth momentum of larger cohorts entering reproductive ages. Net migration played a secondary role, contributing relatively small and inconsistent increments to population change. Gender differentials in annual population growth are minimal or negligible, largely because of the stable sex ratio at birth and broadly similar long-term mortality trends for males and females.

3.4. Age Composition

Age composition is a critical indicator of a nation's development stage and determines demand for services such as education, employment, and health care. The age distribution of Botswana's population (Figure 3) reveals both the country's youthful demographic profile and its evolving gender structure.

When comparing genders, males are more represented in the younger and middle adult age groups, particularly those between 25 and 44 years, indicating a higher presence in the active labour force. Females, on the other hand, dominate the older age categories from age 60 and above, with clear differentials emerging by age 90 and over. For example, 6.9 percent of females are aged 60–64 compared to 5.3 percent of males, and 1.1 percent of females are 90 years or older, compared to only 0.6 percent of males. This suggests a typical demographic pattern where female longevity outpaces that of males.

Differences in age composition between women and men have implications for education, employment, and reproductive health policies. A relatively younger male population and a longer-lived female population highlight gendered opportunities and vulnerabilities across the life course.

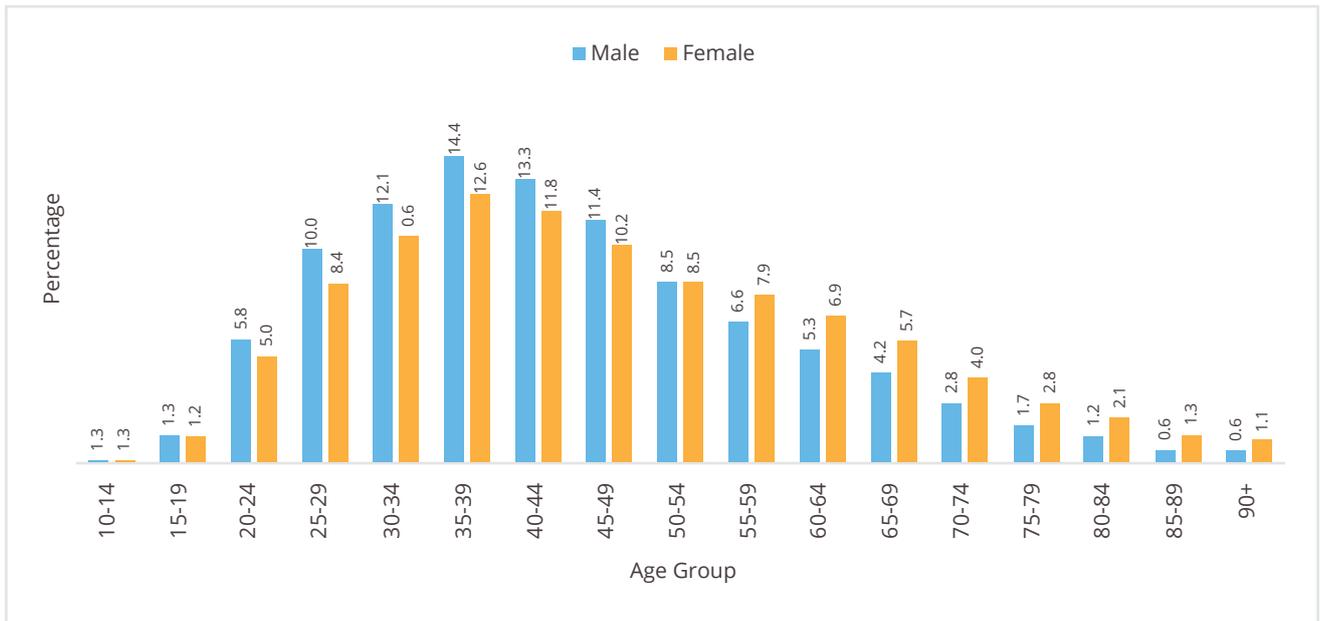


Figure 3: Age Distribution by Gender

3.5. Age-Sex Composition

The combined analysis of age and sex is essential for understanding demographic dynamics and their implications for gender equality. The age-sex distribution provides a detailed picture of how men and women are represented across age cohorts, reflecting fertility, mortality, and migration patterns.

The population pyramid offers a visual and analytical foundation for understanding gender dynamics within Botswana's demographic transition. The age-sex distribution reflects the cumulative effects of fertility, mortality, and migration over time, while also revealing gendered patterns in survival, life expectancy, and social roles. It thus helps clarify where gender gaps emerge, which age groups face heightened vulnerabilities, and how policy responses can be better tailored to ensure equitable outcomes for both women and men across the life course.

A balanced pyramid allows for clear observation of the relative numbers of males and females at each age, which, in Botswana's case, typically differ only slightly in early childhood due to the biologically determined sex ratio at birth (around 103–105 male births per 100 female

births). Consequently, gender differentials in the structure itself are usually modest in childhood, and major variations later in life often point to gendered mortality risks, including the impact of HIV/AIDS in earlier decades or higher male mortality from injuries and non-communicable diseases. Thus, the population pyramid provides insight into how gendered health outcomes evolve across the life course.

From a development planning perspective, the age-sex structure is central to understanding the size of the working-age population, the dependency burden, and the potential for harnessing the demographic dividend. Gendered differences in schooling, labour participation, childbearing patterns, and caregiving roles interact with age structure to shape the economic capacity of each cohort. For example, a larger proportion of young women in reproductive ages has implications for maternal health services, while the growing cohort of older women, who typically outlive men, raises considerations for social protection, pensions, and long-term care.

3.6. Botswana Population Pyramid (Age-Sex Distribution)

The Botswana population pyramid displays a structure that is broadly expanding at the base but gradually narrowing, reflecting a youthful population profile that is transitioning toward slower population growth. The base of the pyramid, representing children aged 0–14 years, is wide for both males and females, indicating that fertility, although declining over the past decades, remains high enough to sustain population growth. The larger size of the 5–9 and 10–14 cohorts relative to the 0–4 cohort suggests a continuing downward trend in fertility, consistent with national estimates showing a decline in the Total Fertility Rate over the past decade.

The pyramid reveals near parity between males and females in the younger age groups, reflecting balanced sex ratios at birth. However, as age

increases, the shape begins to diverge: male bars narrow more sharply in young adulthood and middle age. This pattern is characteristic of many countries experiencing higher male mortality in adolescence and early adulthood, often linked to injuries, accidents, and behavioural health risks. Female cohorts remain wider than male cohorts from about age 30 upwards, indicating higher male mortality over the life course.

From age 60 onwards, the pyramid shows an increasingly feminised older population, with women substantially outnumbering men. This is especially pronounced from age 70 and above, where the female bars are consistently longer. The result is a visibly top-heavy structure for older women and a more tapered pattern for men, reflecting women’s greater longevity in Botswana. The narrow top of the pyramid, particularly for ages 85 and above, illustrates the expected rapid reduction in numbers at very advanced ages but maintains a clear female majority.

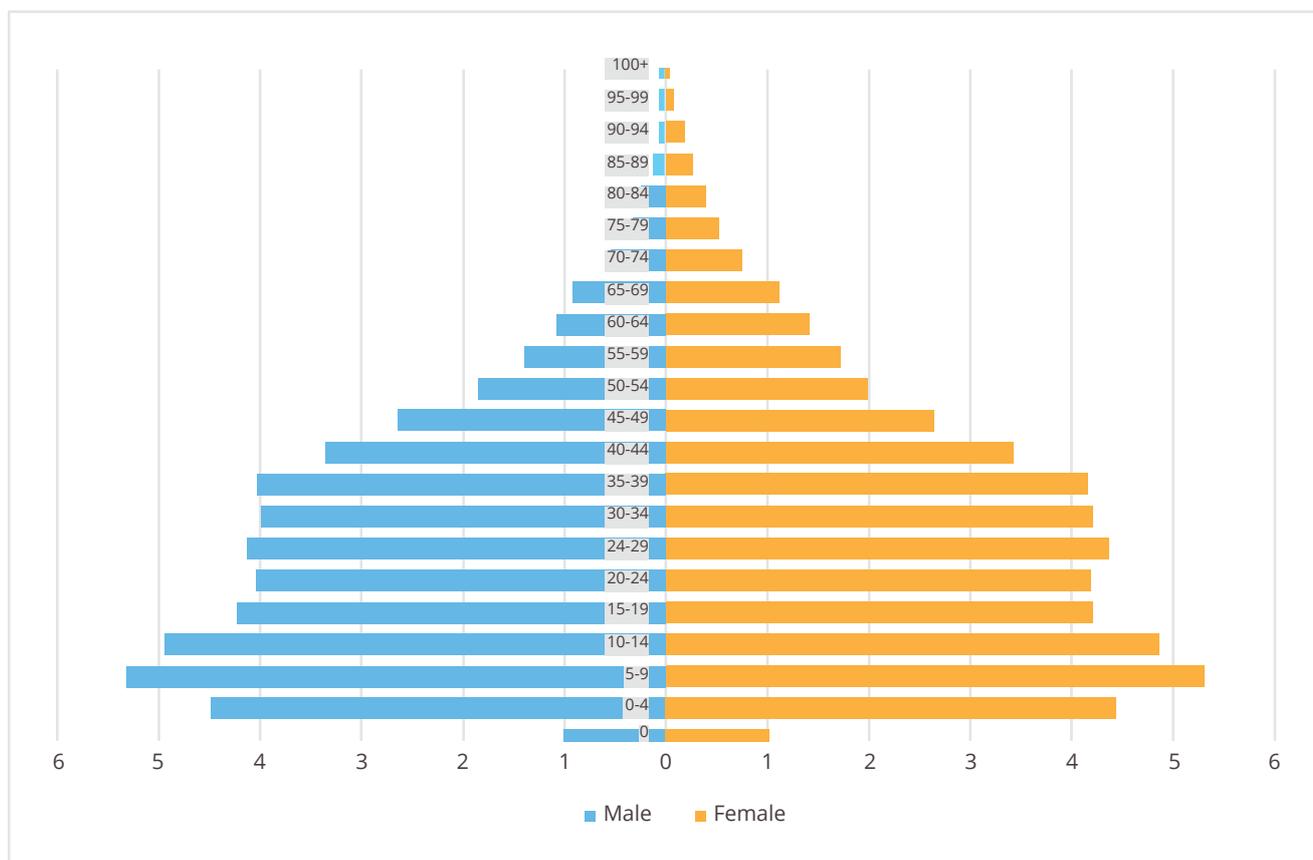


Figure 4: Botswana Population Pyramid (2022)

The overall age pattern reflects the demographic transition Botswana has undergone since the 1980s. The broad younger cohorts signal a past era of high fertility, while the slight narrowing of the youngest cohorts indicates fertility decline. The concentration of the population in the 15–34 age range highlights the country’s substantial youth bulge, with important implications for education, employment, and social protection programming. Meanwhile, the growing number of older women underscores the need for gender-responsive ageing policies, as women are more likely to face old-age poverty, chronic illness, and insufficient support systems.

From a gender perspective, the pyramid highlights how demographic processes shape the lived realities of women and men differently. Balanced numbers in childhood and youth give way to differential mortality and survival in adulthood, producing a feminised older population. This has direct implications for health services, social protection, caregiving burdens, and household composition, issues analysed in later chapters. Overall, the population pyramid illustrates a population that is youthful but ageing gradually, with persistent gender differences in survival and longevity that must be reflected in Botswana’s development planning.

The structure of Botswana’s population pyramid carries significant policy implications for gender-responsive development planning. The broad base and sizeable youth cohorts underscore the urgent need to expand opportunities in education, skills development, and decent employment, with targeted interventions for young women who face greater barriers to labour-market entry. The gradual narrowing of younger cohorts combined with the widening female advantage at older ages signals a demographic shift toward an ageing population, particularly among women. This demands strengthened social protection, improved access to chronic disease management, and expansion of long-term care systems that

consider women’s higher likelihood of living alone in old age. The persistent male–female survival gap also highlights the need for focused male health strategies addressing injuries, non-communicable diseases, and behavioural risks. Overall, the pyramid emphasises that Botswana must plan simultaneously for a youthful workforce and a growing population of older women, with gender-sensitive policies that anticipate future demographic and social needs.

3.7. Population sex ratio (females per 100 males)

Sex ratios are a central demographic indicator that illuminate how gender interacts with mortality, survival, and population ageing across the life course. Expressed here as the number of females per 100 males, the sex ratio reflects the combined influence of biology, social and behavioural patterns, and broader population dynamics.

Because Botswana’s sex ratio at birth is biologically normal and stable, typically yielding slightly more boys than girls at birth, very small gender differences are expected in childhood. Any deviations from parity at later ages therefore point to gendered survival patterns and the cumulative effects of health behaviours, disease burden, and longevity. As such, sex ratios offer an important lens for identifying where in the life course men or women experience heightened vulnerabilities, and they assist planners in anticipating gendered needs in education, labour markets, social protection, and long-term care.

The figure shows that Botswana’s age–sex ratios follow a pattern consistent with countries experiencing advanced demographic and epidemiological transitions. In early childhood and young adulthood, the number of females per 100 males stays very close to parity, ranging roughly between 98 and 105. This confirms that boys and girls experience similar levels of survival during early life and that there is no evidence of sex-selective behaviour or systematic gender

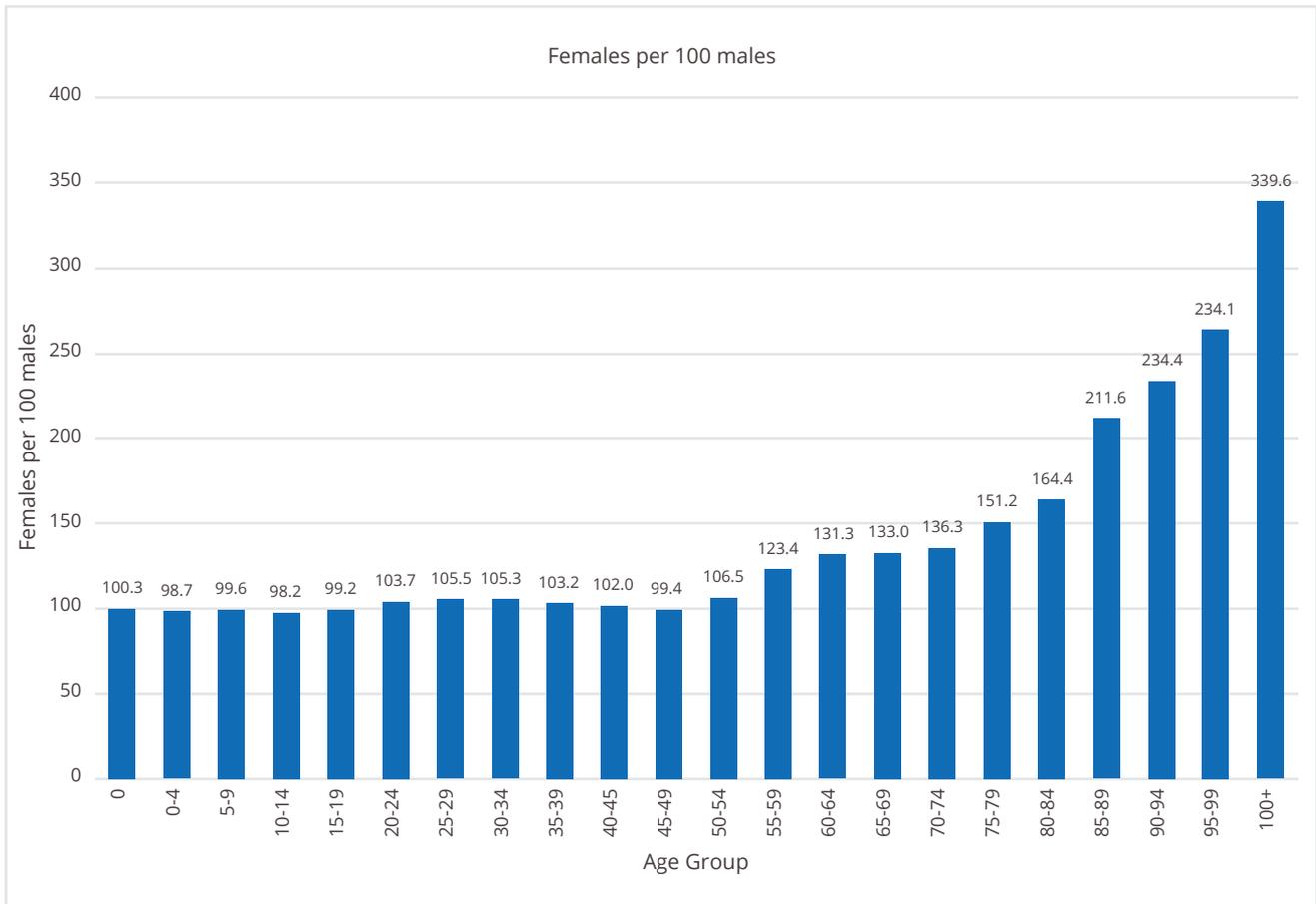


Figure 5: Population Age - Sex Ratios (2022)

disadvantage during childhood. These near-equal ratios extend through the teens and into the twenties and early thirties, demonstrating that, up to this point, male and female mortality risks do not diverge sharply.

From the mid-thirties onward, however, the sex ratios begin to shift modestly in favour of women. By the late thirties and forties, women number slightly more than men, indicating the start of higher male mortality during mid-life. This gradual divergence becomes more noticeable from the fifties into the sixties, where the ratio of females to males rises into the 120s and 130s. These differences reflect long-standing gendered patterns of adult mortality, including historically higher male vulnerability to HIV/AIDS in earlier decades, greater exposure to injuries and accidents, and elevated risks of non-communicable diseases.

The most dramatic changes appear in the older adult and elderly population. From age 75 onward, the female advantage widens sharply, with the ratio surpassing 150 females per 100 males and continuing to rise steeply through the oldest age groups. By ages 85–89, women outnumber men more than two to one; by ages 95–99, almost three to one; and among centenarians, the ratio exceeds three women for every man. This pattern is typical of populations where women enjoy a consistent longevity advantage and reflects the cumulative impact of male survival disadvantages across the life course.

Overall, the age-sex ratios demonstrate that Botswana maintains gender balance in childhood and early adulthood, but women become increasingly overrepresented in older ages due to their higher life expectancy. These patterns have important implications for gender

analysis: they signal the greater need for age-specific services for older women, highlight the gendered nature of caregiving and widowhood, and underscore the importance of tailoring social protection systems to support a predominantly female older population.

3.8. Migration

Migration is a key driver of demographic and socio-economic change, influencing population distribution, labour markets, and family structures. Migration in Botswana is both a demographic and gendered process. Men often migrate for formal employment opportunities, particularly in urban centres and mining areas, while women’s mobility is frequently linked to household responsibilities, informal work, or access to services. These gendered migration patterns affect family cohesion, household headship, and the spatial distribution of poverty and care responsibilities.

Migration plays a modest but meaningful role in shaping Botswana’s demographic and gender landscape, complementing the dominant influence of natural increase. Although overall levels of international migration are relatively low, Botswana has historically experienced net in-migration, particularly of working-age adults from neighbouring countries, while also witnessing circular and temporary out-migration of its own citizens. These movements tend to have limited impact on national sex ratios, as flows are not strongly gender-skewed, but they can influence the age structure by increasing the proportion of economically active adults in urban centres.

Figure 6 shows that the overwhelming majority of Botswana’s population, both male and female, remains in the same locality over short and medium periods. For the 1-year period, more than 90 percent of both men and women

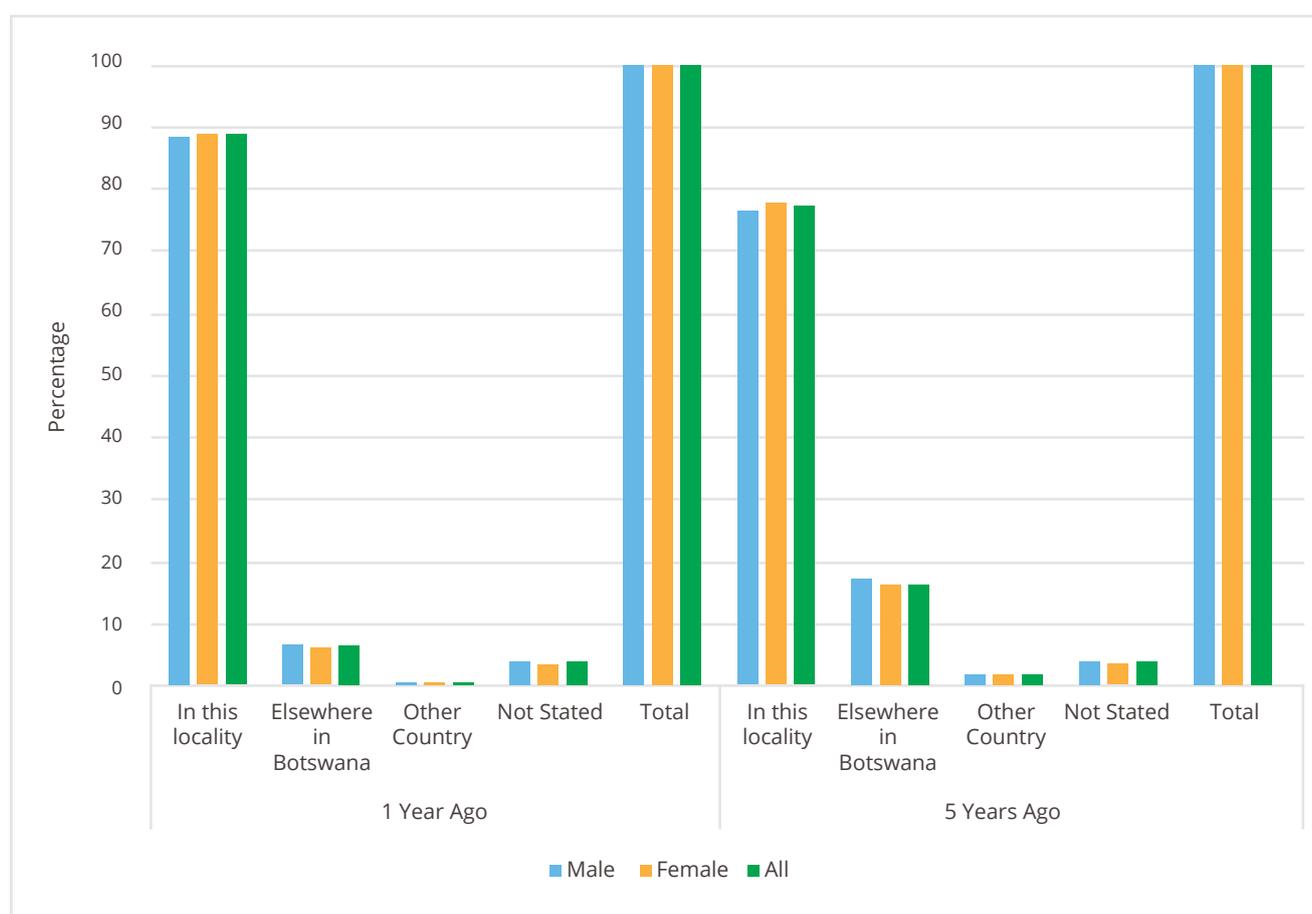


Figure 6: Place of Residence (Migration) one year and five years ago

reported living in the same locality one year prior to the census. Only a very small share, roughly 5 percent or less, had moved from elsewhere in Botswana, and an even smaller proportion had migrated from another country. These patterns indicate relatively low short-term mobility, with negligible gender differences.

The 5-year migration pattern follows a similar structure although, as expected, the proportion of people who had moved from elsewhere in Botswana increases modestly over the longer period. Approximately one in five individuals, men and women alike, reported living in a different part of Botswana five years earlier. Despite this increase, women and men still show almost identical mobility patterns, suggesting that internal migration in Botswana is not strongly gender-differentiated. The share of international migrants remains extremely small for both sexes, and “not stated” responses show no meaningful gender variation.

Taken together, the data suggest that Botswana’s migration dynamics over both short and medium timeframes are characterised by low mobility, predominantly internal movements, and minimal gender disparities. These patterns are consistent with Botswana’s settlement structure, where urbanisation has stabilised and migration flows are largely circular or short-distance, especially between rural villages and nearby urban centres. The similarity in male and female movement also reflects the narrowing gender differences in access to education, employment, and family responsibilities, which historically shaped women’s mobility more strongly than men’s.

The migration patterns observed, characterised by low mobility, predominantly internal movements, and negligible gender differences, carry several implications for development planning. The high proportion of individuals remaining in the same locality over both one-year and five-year periods suggests that

most communities are relatively stable, which supports long-term planning for service delivery, including schools, health facilities, and social protection systems. However, the modest increase in internal migration over a five-year period highlights the continued importance of managing rural–urban linkages, especially in rapidly growing urban villages and towns.

The minimal gender differences in migration imply that both men and women now participate similarly in mobility for education, work, and family reasons, underscoring the need for gender-neutral but inclusive housing, labour market, and infrastructure policies. Finally, the very low levels of international migration indicate limited external demographic pressures but also suggest opportunities to strengthen labour mobility frameworks, especially under regional agreements such as SADC. Overall, these patterns point to the need for coordinated spatial planning and gender-responsive urbanisation strategies that anticipate gradual but steady internal population shifts.

3.9. Religion

Religion remains an integral part of Botswana’s social and cultural fabric, shaping values, norms, and patterns of behaviour across communities. The 2022 Population and Housing Census indicates that the vast majority of Botswana identify with a religious faith, most commonly Christianity, while traditional and non-affiliated groups form smaller proportions. Religion constitutes a key dimension of Botswana’s demographic and socio-cultural profile. It plays a central role in shaping individual identity, social cohesion, and moral frameworks that underpin everyday life.

As a demographic variable, religion interacts with other factors such as age, sex, education, and residence to influence attitudes toward fertility, marriage, and gender equality. Examining religious affiliation and participation

therefore provides insights into how faith-based values intersect with gendered experiences, offering a deeper understanding of the ways in which cultural and spiritual institutions both reinforce and challenge existing social norms in Botswana.

Results from the 2022 Census indicates that Christianity is the overwhelmingly dominant religion (86 percent of the population), with notable gender differences: 92 percent of women identify as Christian compared to 81.1 percent of men. This reflects both historical and contemporary patterns of women’s higher religious participation. However, this aggregate masks some variation by settlement type, with rural areas showing slightly lower adherence than the other geographic types. About 14.0 percent of the population is affiliated with other non-Christian religions. (Figure 4).

Among males, the proportion that identify as Christian is highest in towns (85 percent and urban villages (85.3 percent), while it is lower

among men in rural areas (73.2 percent). A similar pattern but at a slightly higher level, is observed among females, where adherence to Christianity is highest among women in towns (94.6) and urban villages (93.8 percent) and slightly lower among women in rural areas (87.8 percent).

3.10. Access to National Registration & Identity

Access to national identification documents is a cornerstone of citizenship, legal recognition, and participation in social and economic life. From a gender perspective, the ability to obtain and use identity documents such as national identity cards determines access to essential services, including education, health care, voting, and social protection.

Birth registration provides the foundational proof of identity and is critical for safeguarding children’s rights and access to social services. Gender disparities in birth registration often reflect broader inequities in caregiving,

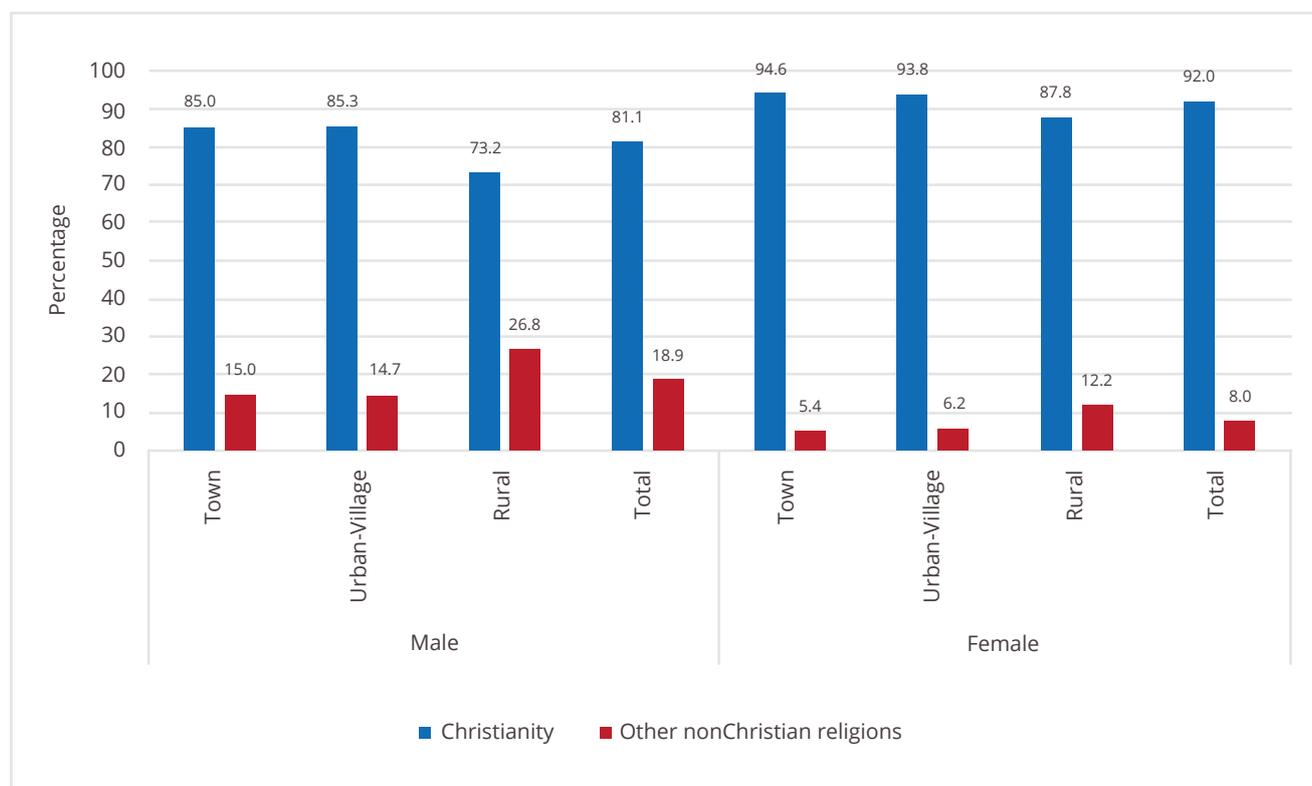


Figure 7: Religion by Gender and Place of Residence

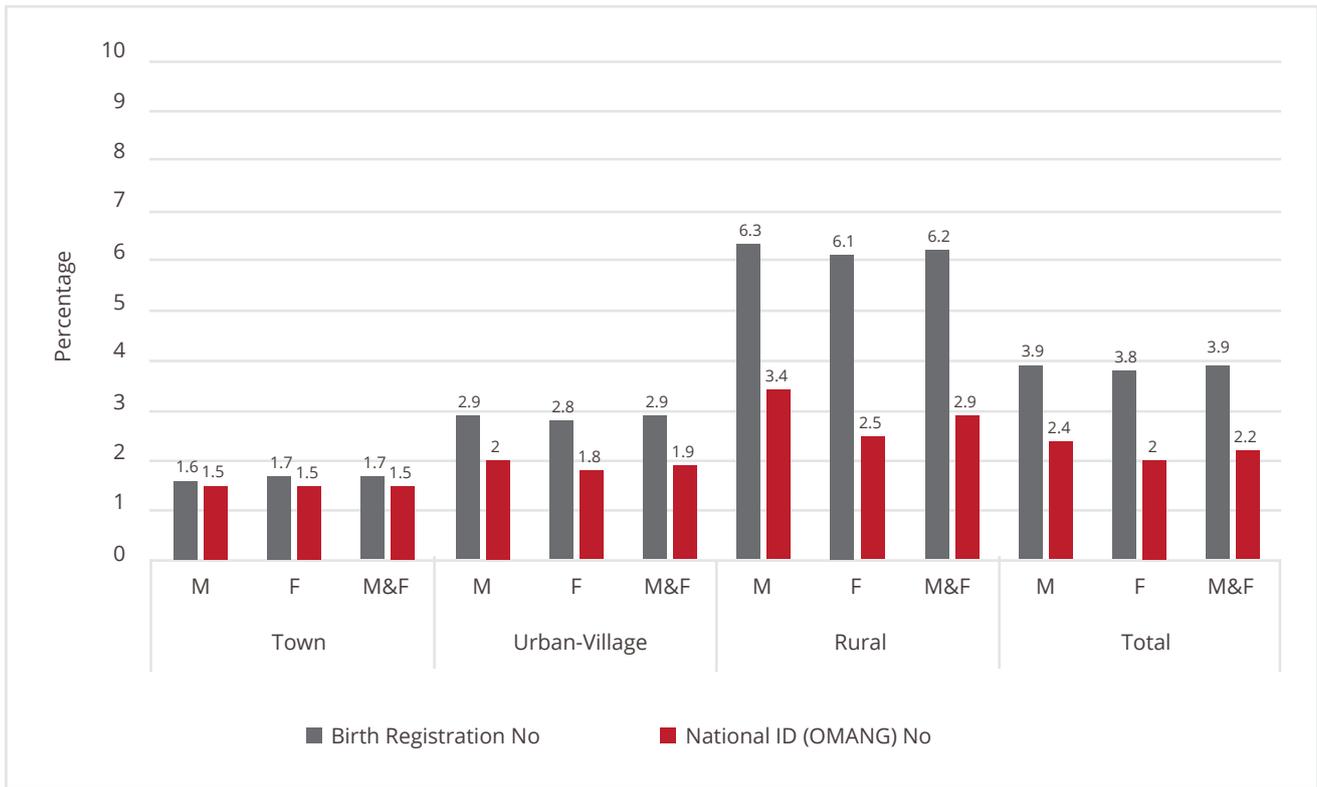


Figure 8: Proportions without Access to birth registration and National ID

administrative reach, and household decision-making. In Botswana, women, who are typically primary caregivers, play a pivotal role in ensuring children are registered, yet barriers such as distance to registration centres, lack of information, or documentation requirements can disproportionately affect mothers in rural or low-income settings.

Overall, the data show very high levels of birth registration and national ID possession across Botswana, with minimal gender differences at national level and across all types of settlements. For both indicators, men and women record near-identical percentages, suggesting that access to these foundational legal identity services is effectively gender-neutral in Botswana.

3.11. Birth Registration

Nationally, birth registration rates are extremely high, standing at 96.1 percent among boys and 96.2 percent among girls, indicating no meaningful gender gap. This pattern of parity is consistent across all residence categories. In towns, registration is almost universal for both sexes (98.4 percent for boys and 98.3 percent for girls). The levels remain similarly high in urban villages, where boys and girls both register at about 97.1–97.2 percent.

Even in rural areas, where registration rates are slightly lower overall, the difference between boys (93.7 percent) and girls (93.9 percent) is negligible. The rural–urban contrast is therefore a more notable feature than gender: rural areas lag behind towns and urban villages by approximately five percentage points, but boys and girls remain almost identically positioned within each locality. In short, the data confirm that access to birth registration is nearly universal and equitable across gender, while still reflecting a modest spatial disadvantage for rural children.

3.12. National ID (Omang)

A similar pattern is observed for National ID possession. At national level, women (98.0 percent) have a marginally higher Omang possession rate than men (97.6 percent), though the difference is small and does not indicate a structural gender imbalance. In towns, possession rates are identical for both sexes, with boys and girls each at 98.5 percent. In urban villages, the rates remain closely aligned at 98.0 percent for men and 98.2 percent for women.

The largest gender difference appears in rural areas, where 97.5 percent of women hold Omang compared to 96.6 percent of men, a gap of less than one percentage point. Although small, this consistent advantage for women in rural areas may warrant further exploration, particularly in relation to gendered mobility patterns, access to services, or administrative processes. Nonetheless, the dominant pattern remains one of very high coverage and minimal gender disparity.

The results demonstrate that Botswana has achieved exceptionally high and gender-equitable coverage in the foundational domains of civil registration and legal identity. Whether in towns, urban villages, or rural areas, boys and girls, and later, men and women achieve almost identical rates of birth registration and national ID possession. The slight variations that do exist are linked primarily to place of residence, not gender. These findings align with Botswana's historically balanced sex ratio at birth, which contributes to the absence of gender differentials in legal identity indicators.

3.13. Spatial Distribution

Population spatial distribution influences the availability of services, the structure of labour markets, and the social and cultural environments that shape gender relations. Urban centres typically offer greater economic opportunities and service provision, while rural

areas often reflect more traditional norms and limited access to resources, conditions that affect women and men differently. By examining population distribution across towns, urban villages, and rural areas, this section provides critical context for understanding the gender disparities observed throughout the monograph and highlights the spatial dimensions of inequality that must be addressed through targeted policy interventions.

Population Distribution by District

The table below shows Botswana population distribution by district gender and age. The population shows a remarkably consistent sex distribution across the country's districts, with important gender patterns emerging across age groups. In the 0–14 age group, the sex ratio is close to parity in every district, with males averaging 50.3 percent and females 49.7 percent nationally. This reflects balanced sex ratios at birth and confirms that there are no structural gender imbalances in child populations across the country. Minor variations, for example, slightly more boys in districts such as Sowa (53.7 percent) and Ghanzi (50.7 percent), or slightly more girls in Orapa (51.6 percent) and Selibe Phikwe (50.8 percent) remain within normal demographic fluctuation.

More notable differences emerge in the 15–64 age group, where women constitute a majority in nearly all districts. Nationally, females account for 51.2 percent of the working-age population, compared with 48.8 percent for males. Urban districts such as Gaborone, Francistown, and South East show some of the largest female majorities (52–53 percent), reflecting labour market, educational, and household dynamics that draw women into urban and peri-urban centres. Districts with significant mining or industrial activity, such as Orapa, Jwaneng, and Sowa, show a reverse or mixed pattern, with higher male proportions, consistent with male-dominated employment profiles in mining towns.

Table 1: Population distribution by district, gender and age

Variable	0-14 years		15-64 years		65 years+		Total	
	Male	Female	Male	Female	Male	Female	Male	Female
Gaborone	49.6	50.4	48.0	52.0	41.0	59.0	48.2	51.8
Francistown	50.0	50.0	47.6	52.4	37.8	62.2	48.0	52.0
Lobatse	49.7	50.3	49.4	50.6	37.4	62.6	49.1	50.9
Selibe Phikwe	49.2	50.8	46.4	53.6	39.8	60.2	47.1	52.9
Orapa	48.4	51.6	45.2	54.8	24.6	75.4	46.1	53.9
Jwaneng	49.9	50.1	52.7	47.3	50.6	49.4	52.0	48.0
Sowa	53.7	46.3	57.7	42.3	75.0	25.0	56.6	43.4
Southern	50.2	49.8	48.5	51.5	39.7	60.3	48.3	51.7
Barolong	50.0	50.0	49.4	50.6	42.3	57.7	49.0	51.0
Ngwaketse West	50.3	49.7	51.2	48.8	45.2	54.8	50.5	49.5
South East	49.9	50.1	47.4	52.6	39.1	60.9	47.6	52.4
Kweneng East	50.2	49.8	48.7	51.3	39.9	60.1	48.7	51.3
Kweneng West	50.4	49.6	52.4	47.6	46.9	53.1	51.3	48.7
Kgatleng (Wards)	50.4	49.6	49.8	50.2	41.6	58.4	49.4	50.6
Central Serowe-Palapye	50.6	49.4	48.9	51.1	38.2	61.8	48.7	51.3
Central Mahalapye	50.4	49.6	49.0	51.0	40.4	59.6	48.8	51.2
Central Bobonong	50.6	49.4	47.0	53.0	39.3	60.7	47.7	52.3
Central Boteti	50.6	49.4	50.2	49.8	41.3	58.7	49.9	50.1
Central Tutume	50.7	49.3	47.5	52.5	36.6	63.4	47.9	52.1
North East	50.1	49.9	47.1	52.9	34.4	65.6	47.2	52.8
Ngamiland East	50.0	50.0	49.9	50.1	43.3	56.7	49.7	50.3
Ngamiland West	50.2	49.8	46.9	53.1	39.8	60.2	47.8	52.2
Chobe	50.7	49.3	51.5	48.5	40.3	59.7	50.9	49.1
Delta	50.3	49.7	56.4	43.6	48.5	51.5	55.1	44.9
Ghanzi	50.7	49.3	52.6	47.4	45.6	54.4	51.7	48.3
CKGR	49.2	50.8	59.8	40.2	41.7	58.3	55.8	44.2
Kgalagadi South	51.0	49.0	49.8	50.2	40.4	59.6	49.7	50.3
Kgalagadi North	50.5	49.5	51.7	48.3	42.0	58.0	50.7	49.3
Total	50.3	49.7	48.8	51.2	39.9	60.1	48.8	51.2

The most striking gender differences appear in the 65 years and older population. Women outnumber men in every district, with a national average of 60.1 percent female compared with only 39.9 percent male. This pattern reflects gendered differences in mortality, where women have higher survival rates into older age. Some districts such as Orapa (75.4 percent female), Sowa (75.0 percent female), North East (65.6 percent female), and Central Tutume (63.4 percent female) display particularly pronounced feminisation of the older population. This has implications for social protection, caregiving, and access to health services, as older women are more likely to live alone, have limited income, and experience chronic illness.

The total population distribution mirrors these age-specific dynamics. Women constitute a small but consistent majority nationally (51.2 percent), and most districts reflect this trend. The pattern is strongest in urban and peri-urban areas, where female populations exceed 52 percent, and weakest in certain mining-oriented districts where men remain slightly more represented. Districts with pronounced female majorities include Francistown, Selibe Phikwe, Orapa, South East, Central Bobonong, Central Tutume, North East, Ngamiland West, and Kgatleng.

Overall, the spatial distribution of the population shows three major gendered patterns:

1. Parity among children, reflecting balanced sex ratios at birth;
2. Female predominance in the working-age population, especially in urban centres; and
3. Strong feminisation of the elderly population, reflecting higher female longevity.

These patterns highlight the need for district-level, gender-responsive planning, particularly in ageing support services, employment and education strategies, and the allocation of health and social services across localities.

The spatial distribution of Botswana's population highlights the need for differentiated, gender-responsive planning across districts. The strong feminisation of the older population especially in districts such as Orapa, Sowa, North East, and Central Tutume underscores the urgency of expanding social protection, chronic disease management, and community-based care services tailored to older women, who are more likely to face economic vulnerability and live without spousal support. The predominance of women in urban and peri-urban working-age populations points to the need for employment programmes, housing policies, and transport systems that address the realities of a largely female labour force in cities. In contrast, districts with higher concentrations of working-age men, notably mining towns, require targeted occupational health and safety interventions. Overall, the gendered spatial patterns call for localised planning that aligns resources with district-specific demographic realities while ensuring equitable access to services for both women and men.

3.14. Population Distribution by Type of place of residence

The patterns observed at the district level where urban centres such as Gaborone, Francistown, and South East show a higher proportion of females, and mining or remote districts show more mixed or male-leaning compositions are further clarified when the population is regrouped by type of place of residence: towns, urban villages, and rural areas. This classification demonstrates how Botswana's demographic and gender patterns are shaped not only by geographic district boundaries but also by differing levels of urbanisation, migration, economic opportunities, and access to services.

Across all age groups, the chart shows that urban villages continue to hold the largest share of Botswana's population, followed by towns and rural areas. This mirrors the district-level results, where many of the country's largest districts

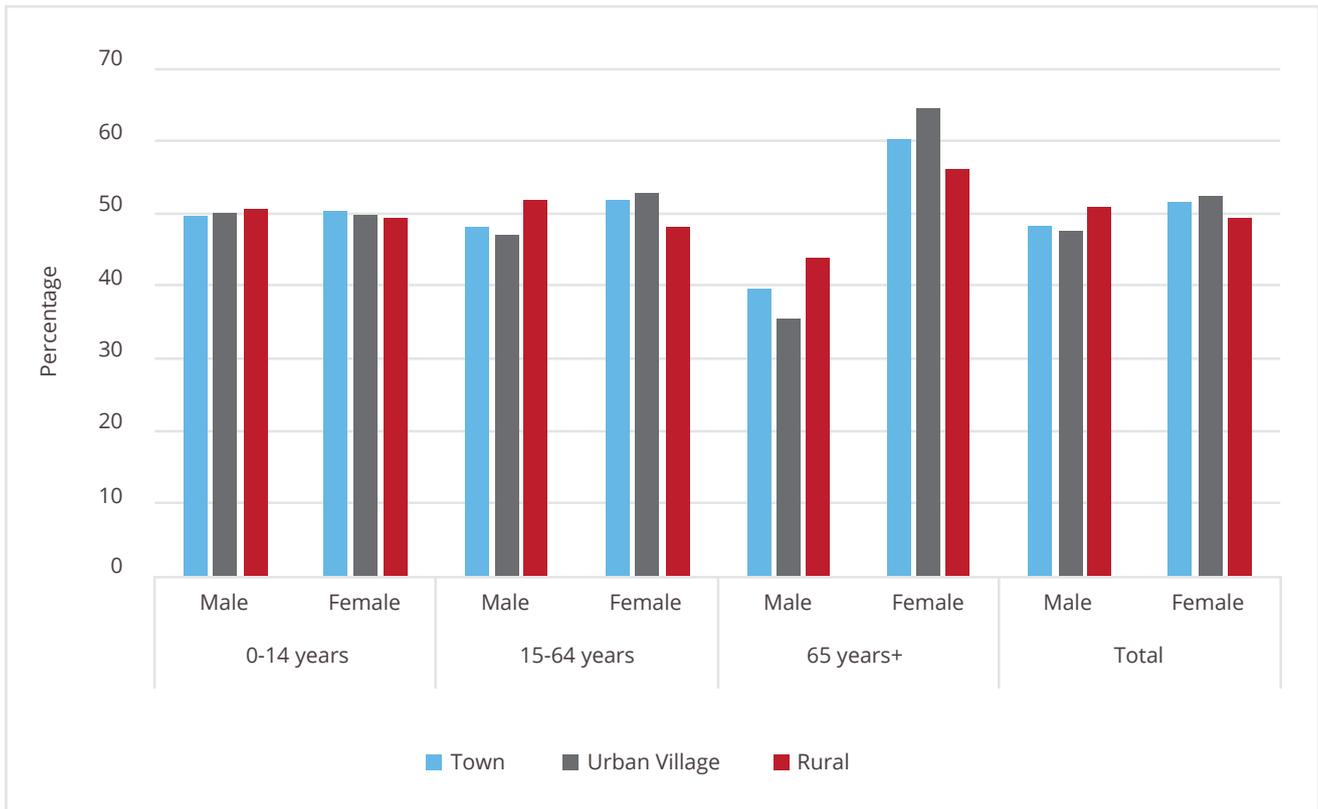


Figure 9: Population spatial distribution by type of place of residence

(such as Kweneng, Central, and Ngamiland) contain major urban villages that function as regional service hubs. Rural areas, by contrast, have smaller and older populations, consistent with depopulation trends seen in districts like Kgalagadi, Ghanzi, and parts of Ngamiland West.

Children (0-14 years)

For both boys and girls, the distribution across towns, urban villages, and rural areas is nearly identical, around 50 percent in towns and urban villages and slightly fewer in rural areas. This indicates that children are relatively evenly distributed spatially and that rural depopulation has not yet substantially affected younger cohorts. This is consistent with the district analysis, where sex ratios among children were close to parity.

Working-age population (15-64 years)

Among working-age males, towns and urban villages hold the majority, but women show an even stronger presence in urban villages,

followed by towns. This reflects the gendered urbanisation patterns identified in district-level results, where major towns and peri-urban districts showed significant female majorities. Women's stronger presence in towns and urban villages may be linked to employment opportunities in services, public sector work, hospitality, retail, and domestic work, which are more accessible in these areas.

Older population (65+ years)

The most striking gender differences appear among older adults. Older women are disproportionately concentrated in urban villages, followed by towns, whereas older men are more evenly split between towns and rural areas. This aligns with district findings showing a significant feminisation of the elderly population in almost every district. Urban villages appear to be important centres of residence for older women, possibly due to proximity to family support networks, health facilities, and social services.

Overall, the total distribution shows that women are more likely than men to reside in towns and urban villages, while men have a slightly higher share in rural areas. This pattern reinforces the earlier finding of female predominance in urban and peri-urban districts and reflects broader gendered migration patterns where women are more likely to relocate for education, service-sector employment, and family responsibilities.

3.15. Dependency and Ageing

Dependency ratios provide an essential lens for understanding how the burden of supporting children, youth, and older persons falls on the working-age population, and they are particularly important in gender analysis because men and women often participate differently in both paid work and unpaid care. High dependency ratios can intensify demands on household labour, income, and time, and these pressures are frequently

unevenly distributed due to gendered roles in caregiving, household management, and economic contribution. Examining dependency patterns therefore helps reveal how demographic structure interacts with gendered responsibilities, highlighting where women or men may face disproportionate support burdens and where targeted social, economic, and care-related policies are most needed.

Figure 10 shows dependency patterns across settlement types. The figures show clear differences in dependency patterns across settlement types, with notable but modest gender variations. In towns, both men and women experience the highest dependency burden, with women carrying slightly more dependents than men. The ratio for town-dwelling women stands at approximately 2.55 dependents per working-age woman,

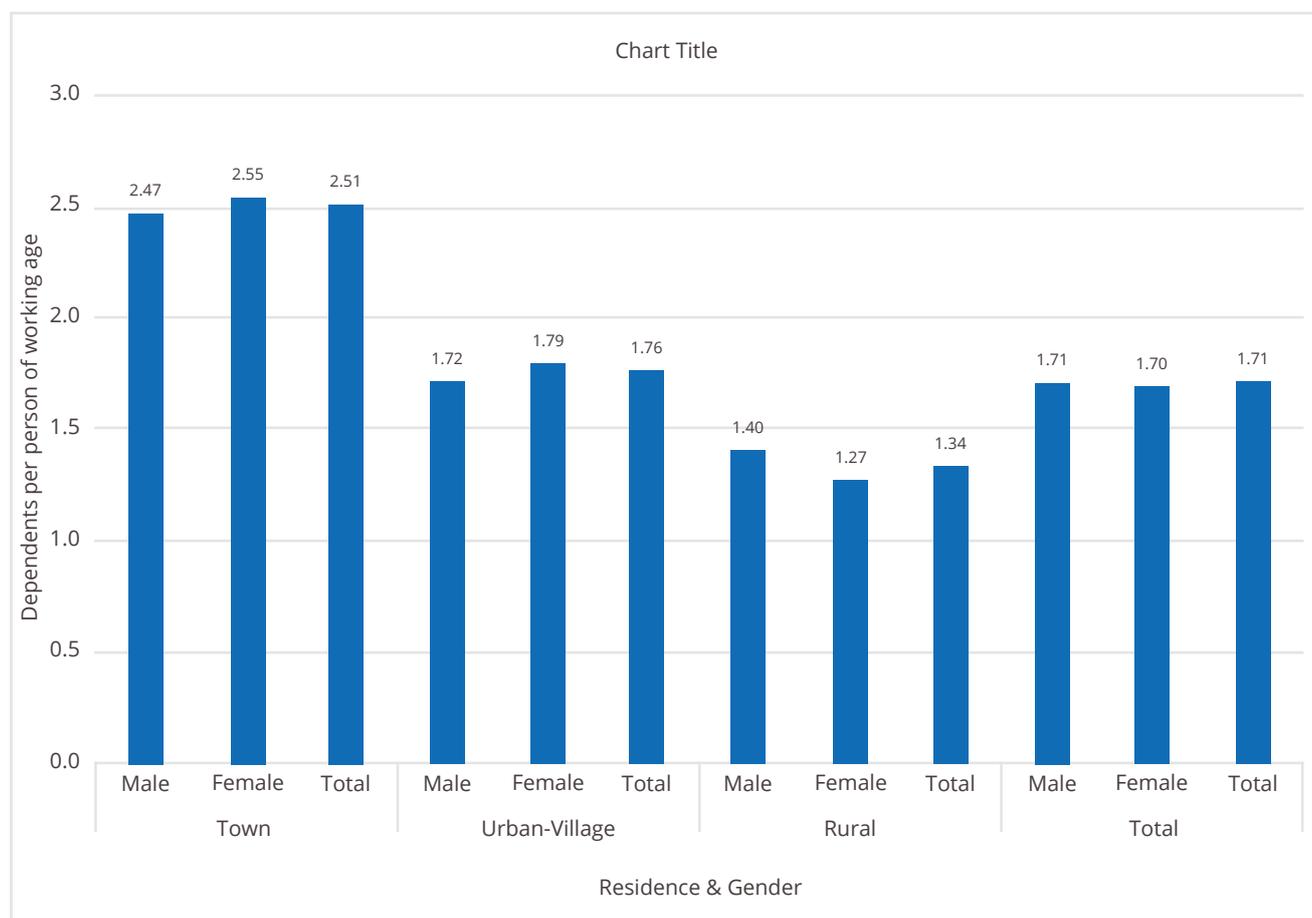


Figure 10: Age-Sex Dependency Ratios

compared to 2.47 for men, resulting in a total urban dependency ratio of about 2.51. This suggests that in towns, each working-age adult supports more than two dependents, and women appear to shoulder a marginally heavier burden, likely reflecting their predominant roles in childcare, kin support, and extended household responsibilities.

In urban villages, dependency ratios fall to around 1.72 for men and 1.79 for women, with an overall level of 1.76 dependents per working-age person. Here again, women experience a slightly higher ratio, although the gap between men and women is small. The lower ratios in urban villages compared to towns may indicate smaller household sizes or a higher concentration of economically active adults, resulting in a reduced support burden for both sexes.

Rural areas show the lowest dependency ratios overall, with men having only 1.40 dependents per working-age adult and women 1.27, giving a total rural ratio of 1.34. Unlike the urban patterns, rural women have a lower dependency ratio than rural men. This departure from the urban pattern may reflect migration dynamics, where working-age women are more likely to migrate to towns and urban villages for employment or education, leaving behind a higher concentration of older adults and children supported by the remaining working-age men.

When viewed at the national level, dependency ratios converge to 1.71 for men and 1.70 for women, confirming that gender differences are minimal when aggregated across settlement types. The total dependency ratio of 1.71 suggests that every working-age person in Botswana supports nearly two dependents, highlighting the importance of economic opportunities, social protection systems, and investments in youth and elderly care.

These dependency patterns have important policy implications for Botswana's social and economic planning. The higher dependency burden in towns indicates the need to strengthen urban social services, particularly childcare, early childhood development, and support for single-parent and multigenerational households where women often bear the brunt of caregiving. The much lower dependency ratios in rural areas, combined with the gender reversal in which rural men carry a slightly higher burden than rural women, highlight the influence of migration and point to the need for targeted support to households with absent working-age members, including improved rural employment opportunities and community-based assistance for older persons.

The overall national dependency ratio of nearly two dependents per working-age person underscores the importance of policies that expand labour-force participation especially for young women: enhance productivity, and sustain investment in social protection systems that buffer households from economic strain. Ensuring that these policies are gender-responsive will help balance caregiving responsibilities, reduce pressure on women in urban settings, and improve the resilience of households across all regions.

3.16. Household Headship

Household headship provides a critical lens for understanding patterns of authority, resource control, and social responsibility within Botswana's households. It reflects both cultural norms and the socio-economic transformations shaping family structures over time. This section there examines gender differences in household structure, headship, and living arrangements as proxies for gendered economic vulnerability.

3.17. Household Headship by Gender

Female-headed households constitute a significant and growing proportion of all households in Botswana, reflecting demographic transitions such as male labour migration, changing marital patterns, and increased female autonomy. While many women successfully manage households as primary providers and decision-makers, female-headed households are, on average, more likely to experience economic vulnerability, linked to limited access to productive assets, lower earnings, and heavier caregiving burdens. Nonetheless, female headship also signals resilience and adaptability, as many women navigate these challenges through informal networks, remittances, and social protection mechanisms.

Figure 11 shows household headship by gender and place of residence. The figure shows distinct gender differences in household headship across Botswana's urban, urban-village, and rural areas. Nationally, 55 percent of household heads are male and 45 percent are female, indicating that while men still represent the majority of heads of household, female

headship is substantial and widely distributed across settlement types.

In urban settings, male headship (57.8 percent) is considerably higher than female headship (42.2 percent). This reflects the demographic and socioeconomic composition of towns where employment opportunities, formal housing markets, and migration patterns often favour men employed in the formal sector. Nevertheless, the sizeable share of female-headed households indicates the presence of independent women living alone, single mothers, widows, and women heading family units in urban centres.

Urban villages display a more balanced distribution, though male headship still dominates at 52.6 percent compared to 47.4 percent female headship. This aligns with the transitional nature of urban villages, which combine rural social structures with growing economic opportunities. The relatively high share of female-headed households reflects widespread patterns of labour migration, marital separation, and the increasing autonomy of women in peri-urban communities.

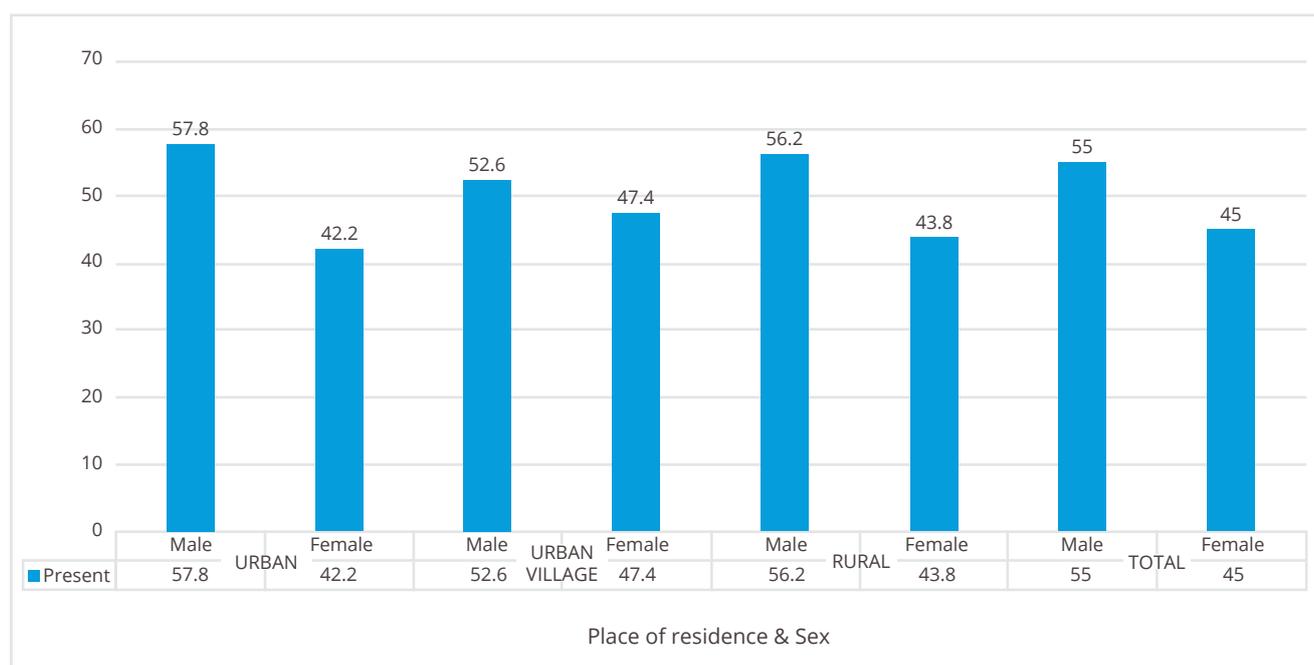


Figure 11: Household Headship by Gender and Place of Residence

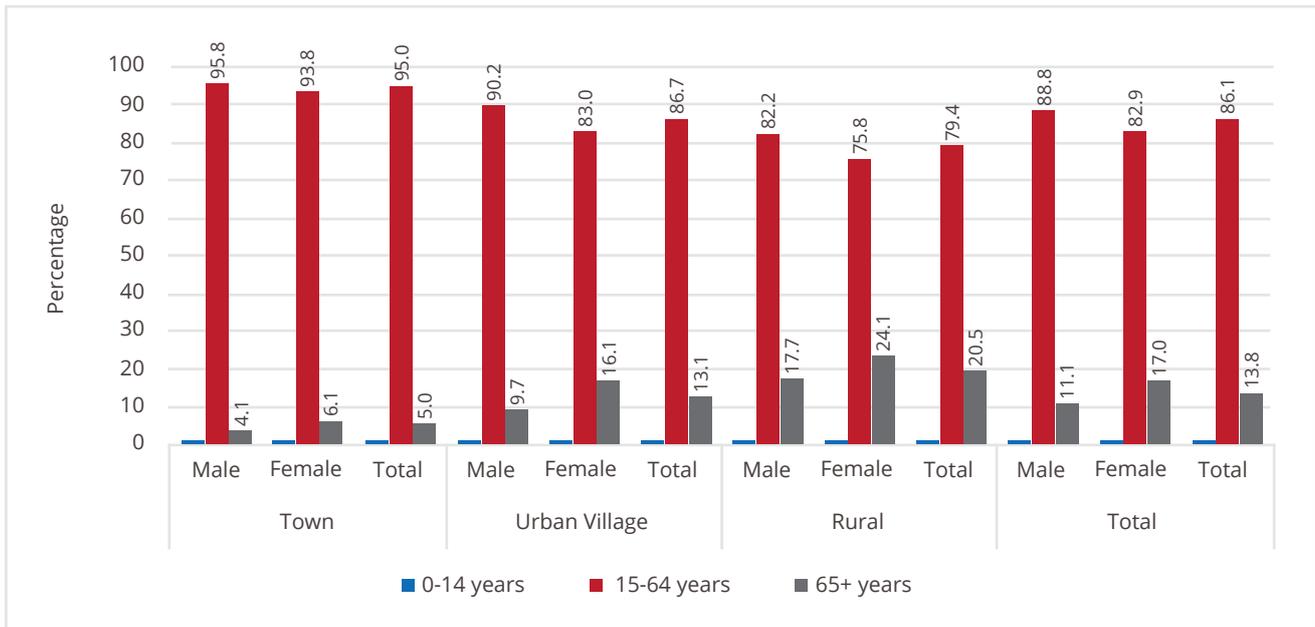


Figure 12: Household Headship by Age of Head of Household

Rural areas show the widest gender gap, with 56.2 percent of households headed by men and 43.8 percent by women. Although male headship remains dominant, the substantial proportion of female-headed households mirrors broader demographic trends, particularly higher male out-migration, higher male mortality, and the greater longevity of women, all of which contribute to increased female headship in rural communities. These households often carry greater caregiving burdens and face higher poverty risks.

Across all residence types, male headship remains the norm but with significant and meaningful levels of female headship. The high levels of female-headed households in both urban villages and rural areas reflect long-standing demographic shifts, including changing marital patterns, mobility, and the growing economic role of women in household provision.

The gendered distribution of household headship across urban, urban-village, and rural areas highlights the need for differentiated policy approaches that recognise the vulnerabilities and responsibilities associated with female-headed households. The substantial proportion of female household heads, reaching nearly half

of all households in some areas, underscores the importance of strengthening social protection systems, particularly income support, childcare services, and access to health and housing programmes targeted at women who often shoulder disproportionate caregiving and financial burdens. In rural areas, where female-headed households are both numerous and more likely to experience poverty, targeted interventions such as agricultural support, livelihood diversification, and community-based care initiatives are essential. Urban and peri-urban areas, with their high concentration of female household heads living alone or in small households, require policies that expand affordable housing, enhance personal security, and improve access to urban services.

3.18. Household Headship by Age

Figure 12 shows the prevalence of different types of households based on the age of head of household. The data show that child-headed households (0-14 years) are extremely rare across all parts of Botswana, accounting for only 0.1 percent of households regardless of the sex of household head or place of residence. Importantly, their sex disaggregation reveals almost perfect parity, with 49.7 percent male-

headed and 50.3 percent female-headed, indicating that boys and girls are equally likely, though still very rarely, to be recorded as household heads. This uniform pattern suggests that, at national level, child-headed households are statistically negligible and not shaped by gender dynamics. The very low prevalence likely reflects the strength of extended family systems and Botswana's social protection mechanisms, which tend to absorb and support children within broader kin networks rather than leaving them to head households.

In contrast, elderly-headed households (65+ years) display strong gender and spatial patterns. Nationally, 17.0 percent of female-headed households are elderly-headed compared to 11.1 percent among male-headed households, reflecting women's higher life expectancy and the demographic reality that older women are more likely to survive into advanced ages and subsequently assume headship, often through widowhood or the migration of younger adults. These gendered patterns are most pronounced in rural areas, where nearly a quarter (24.1 percent) of female-headed households are elderly-headed, compared with 17.7 percent of male-headed households. Rural Botswana therefore shows both the highest concentration of elderly household heads and the widest gender gap, consistent with migration patterns that leave older women in charge of rural households as younger generations move to towns and urban villages for employment and education.

Urban villages occupy a middle ground but still present a notable gender difference: 16.9 percent of female-headed households are elderly-headed compared to 9.7 percent of male-headed households. Even in towns, where the population is generally younger, female-headed households remain more likely to be elderly-headed (6.1 percent) than male-headed households (4.1 percent), though the gender gap is narrower than in rural settings.

The results highlight two key features of household structure in Botswana: the virtual absence and gender neutrality of child-headed households, and the substantial overrepresentation of elderly women as household heads, particularly in rural areas. The latter has critical implications for gender-responsive policy, as elderly female household heads are often more vulnerable economically and socially, and may require targeted support within Botswana's ageing and social protection frameworks.

Figure 13 shows the distribution of child-headed households in Botswana. The distribution of child-headed households across districts shows substantial geographical variation, even though the overall number of such households in Botswana remains very small nationally (780 households). The highest concentrations appear in Kweneng East, Central Serowe–Palapye, Ngamiland East, and Central Tutume, which together account for a significant share of all child-headed households. Kweneng East stands out most prominently, contributing 15.5 percent of all child-headed households nationally (16.2 percent of male-headed and 14.8 percent of female-headed). This pattern likely reflects the district's large population size and its mixed rural–peri-urban profile, where extended family support systems may be uneven or strained.

The next highest contributions come from Central Serowe–Palapye (8.5 percent), Ngamiland East (7.6 percent), and Central Tutume (7.4 percent), all of which are large, predominantly rural or semi-urban districts. These areas may have experienced historical patterns of adult mortality, labour migration, or socioeconomic vulnerability that leave some children without adult guardianship, though the absolute numbers remain very small.

Urban districts such as Gaborone (6.0 percent) and Francistown (4.9 percent) contribute moderate shares, consistent with their population size. Importantly, the presence

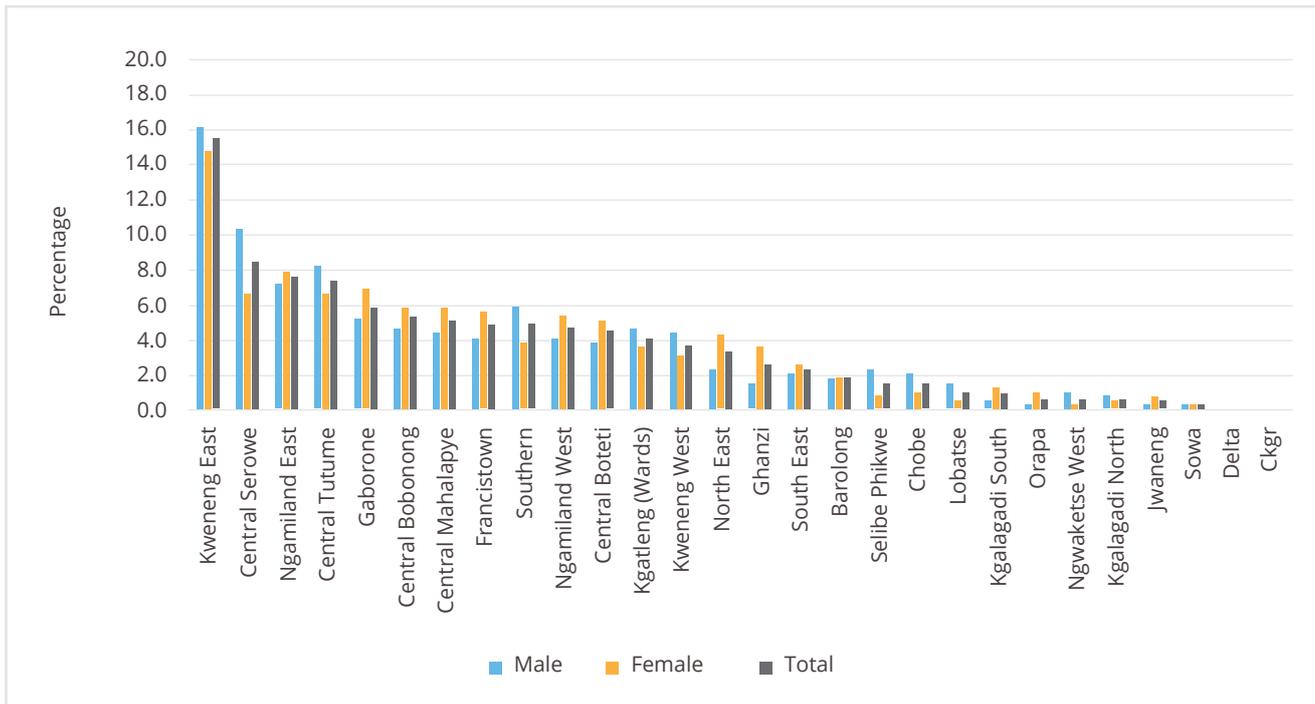


Figure 13: Prevalence of Child Headed households by district

of child-headed households in major urban centres indicates that the phenomenon is not confined to rural areas, even though it remains rare everywhere.

At the lower end of the distribution are smaller towns and low-population districts such as Sowa (0.3 percent), Jwaneng (0.5 percent), Kgalagadi North (0.6 percent), and Ngwaketse West (0.6 percent), where the proportion of child-headed households is extremely small. Districts such as Delta and CKGR report no child-headed households at all, reflecting their very small administered populations or atypical settlement structures.

Gender patterns within districts show no consistent bias toward boys or girls, reinforcing the national picture that child-headed households affect both sexes almost equally. In many districts where child-headed households occur in slightly larger numbers, such as Kweneng East, Ngamiland East, Central Mahalapye, and Central Bobonong, the shares of male- and female-headed child households are broadly similar. A few districts show small gender differences,

such as in Gaborone, where female-headed child households slightly exceed male-headed ones, but these differences are minor and do not suggest a systemic gender imbalance.

Overall, the data confirm that although child-headed households are extremely rare, their distribution is not uniform across Botswana. Larger, more populous districts, particularly in the Central region and Kweneng East, account for the highest shares, while sparsely populated districts contribute very little. Importantly, the gender distribution is nearly equal, indicating that vulnerability to becoming a child household head is not driven by gender, but more likely by broader social and demographic factors specific to district contexts.

These district patterns have several policy implications. The concentration of child-headed households in larger districts such as Kweneng East and the Central region suggests the need for strengthened child protection services and targeted social support mechanisms in areas where extended family networks may be under pressure. Although the absolute numbers are

Table 2: Distribution of child-headed households by district

District	Sex of HH		Total
	Male	Female	
Kweneng East	16.2	14.8	15.5
Central Serowe-Palapye	10.3	6.6	8.5
Ngamiland East	7.2	7.9	7.6
Central Tutume	8.2	6.6	7.4
Gaborone	5.2	6.9	6.0
Central Bobonong	4.6	5.9	5.3
Central Mahalapye	4.4	5.9	5.1
Francistown	4.1	5.6	4.9
Southern	5.9	3.8	4.9
Ngamiland West	4.1	5.4	4.7
Central Boteti	3.9	5.1	4.5
Kgatleng (Wards)	4.6	3.6	4.1
Kweneng West	4.4	3.1	3.7
North East	2.3	4.3	3.3
Ghanzi	1.5	3.6	2.6
South East	2.1	2.6	2.3
Barolong	1.8	2.0	1.9
Selibe Phikwe	2.3	0.8	1.5
Chobe	2.1	1.0	1.5
Lobatse	1.5	0.5	1.0
Kgalagadi South	0.5	1.3	0.9
Orapa	0.3	1.0	0.6
Ngwaketse West	1.0	0.3	0.6
Kgalagadi North	0.8	0.5	0.6
Jwaneng	0.3	0.8	0.5
Sowa	0.3	0.3	0.3
Delta	0.0	0.0	0.0
Ckgr	0.0	0.0	0.0
Total	100.0	100.0	100.0

small, the presence of child-headed households across both urban and rural contexts highlights the importance of ensuring that social workers, community development officers, schools, and local authorities are equipped to identify and respond to such cases promptly.

Districts with very small populations, where child-headed households are virtually absent, may still require mechanisms to detect emerging vulnerable cases, particularly given the mobility of households and changes in caregiving arrangements over time. The near-equal gender distribution indicates that vulnerability is not gender-specific at this age, reinforcing the importance of gender-neutral but age-sensitive interventions that support the welfare, safety, and psychosocial needs of all children at risk of heading households.

3.19. Household Size and Type

Figure 14 shows household size by gender and type of place of residence. The chart illustrates notable gender and spatial differences in household size across urban, urban-village, and rural areas. Across all settlement types, female-headed households (FHHs) are significantly more likely to be single-member households compared to male-headed households (MHHs).

In urban areas, for example, single-member households constitute just over half of all male-headed households but approach 60 percent among female-headed households. This pattern is consistent in urban villages and rural areas, with rural female-headed households showing the highest concentration of single-person living arrangements-over 90 percent, compared with slightly lower proportions among male-headed households.

Larger household sizes - households with three members or four members and above, are more prevalent among male-headed households, particularly in rural areas where extended family co-residence remains common. In rural settings,

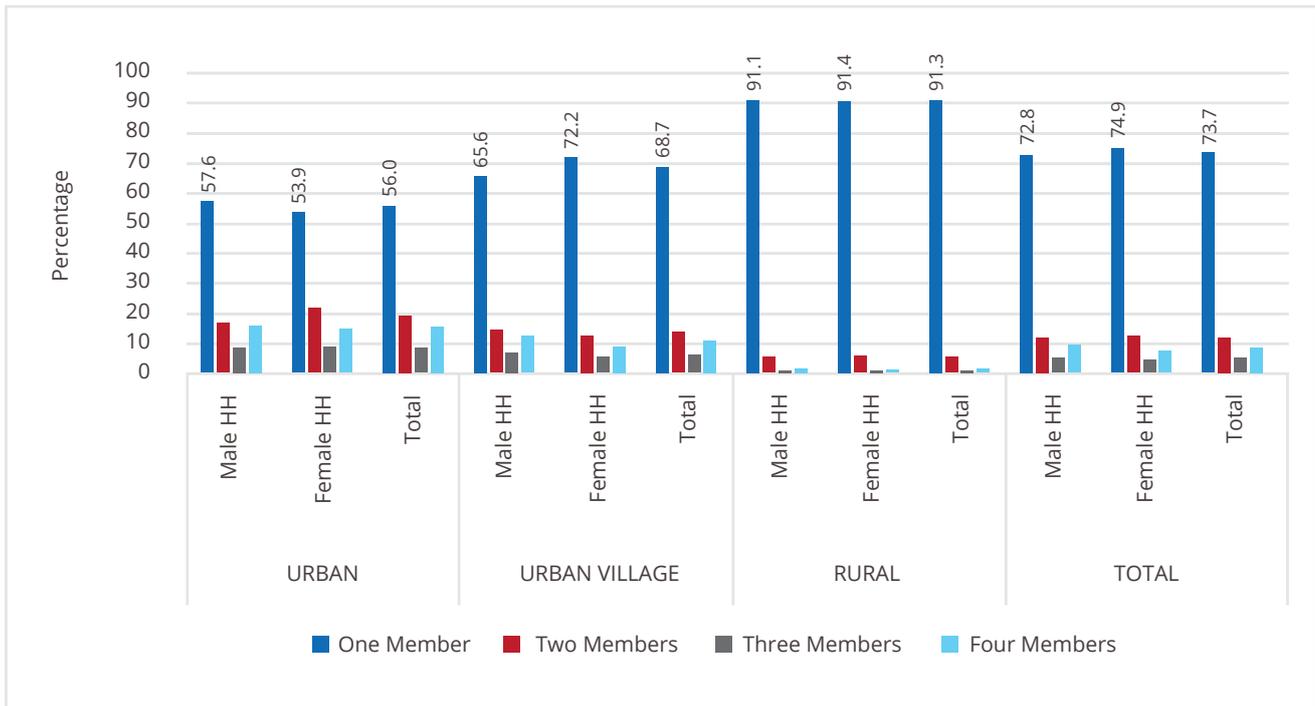


Figure 14: Household Size by Gender and Type of place of residence

households with four or more members are considerably more frequent for both sexes but still more pronounced for male-headed households. In contrast, urban areas display a more mixed structure: while single-person households dominate, households with two or three members are somewhat more common in male-headed households, reflecting diverse living arrangements including shared accommodation, multi-generational setups, or family units.

The overall national picture shows that the majority of households in Botswana are small, with single-member households being the dominant structure, especially among female-headed households. This aligns with broader demographic trends of rising female headship, increased urbanisation, delayed marriage, and growing preferences for nuclear or independent living arrangements. The gender differences in household size also reflect social and economic dynamics: female household heads may be widowed, separated, or economically independent, whereas male household heads more commonly preside over larger or extended family units.

The gendered patterns in household size highlight important implications for social protection, housing, and service delivery. The high proportion of single-member female-headed households, particularly in rural areas, indicates heightened vulnerability, as these households may face greater risks of poverty, social isolation, and limited access to care and support networks. Policies targeting female-headed households should prioritise income support, access to affordable and secure housing, and community-based care models. In contrast, larger male-headed households require interventions that consider the needs of dependents, such as childcare services, education support, and food security programmes. Urban planning and housing policy must also address the growing demand for small and affordable dwelling units suitable for single-member households. Taken together, the spatial and gendered differences in household size call for differentiated policy responses that recognise the diverse living arrangements across urban, urban-village, and rural settings, ensuring that services and programmes reach the households most at risk.

3.20. Distribution of Households by Place of Residence

The 2021 Census reveals that male-headed households dominate both rural and urban areas, a continuation of historical patterns where men are more likely to be formally recognized as household heads. Nevertheless, female-headed households constitute a significant proportion of households, especially in rural areas. This reflects broader demographic dynamics in Botswana, including male labor migration to urban centers and mining towns, leaving women to assume leadership roles in rural households.

In rural Botswana, women often carry the responsibility for subsistence farming, household decision-making, and caregiving, which positions them as de facto heads even when social norms may continue to attribute authority to men. In urban areas, while male headship remains predominant, female headship is visible and often linked to widowhood, divorce, single motherhood, or women's increasing economic independence.

From a gender perspective, this pattern has several implications. First, rural female-headed households may be more vulnerable due to limited access to productive land, capital, and formal employment. National poverty assessments have consistently shown that female-headed households are more likely to fall into lower-income categories than male-headed households (Statistics Botswana, 2022). Second, the rise in urban female headship demonstrates women's growing agency in urban contexts, though they remain constrained by gender pay gaps, housing insecurity, and the burden of unpaid care work.

3.21. Marital Status and Nuptiality Patterns

Marital status is a key demographic indicator that reflects patterns of family formation, social organisation, and gender relations within a population. In Botswana, marriage and union formation have undergone significant transformation over recent decades, influenced by rising education levels, economic change, and evolving social norms regarding gender and partnership. Understanding marital status from a gender perspective provides insight into differences between women and men in timing and prevalence of marriage, cohabitation, separation, and widowhood. Such analysis is essential for assessing how gender dynamics shape household composition, economic dependency, and vulnerability, and how these in turn influence broader social and developmental outcomes.

According to the Census, more than half of Botswana (54.9 percent) have never married, while 32.4 percent have ever been married and 12.7 percent are cohabiting. Gender differences are pronounced: 62.7 percent of women have never married compared to 48.5 percent of men, while men report higher rates of marriage and cohabitation. BQMTS findings support these patterns, particularly regarding men's higher likelihood of remarriage and women's greater vulnerability to widowhood.

Slightly over half of the population (54.9 percent) has never been married. Those who have ever been married constitute 32.4 percent, while individuals who are currently cohabiting account for 12.7 percent. This pattern indicates a youthful population and possibly shifting social norms around marriage.

While less than a third of the population had ever been married, marital rates are consistently higher among males (36.2 percent) compared to females (27.8 percent). For men, marriage rates

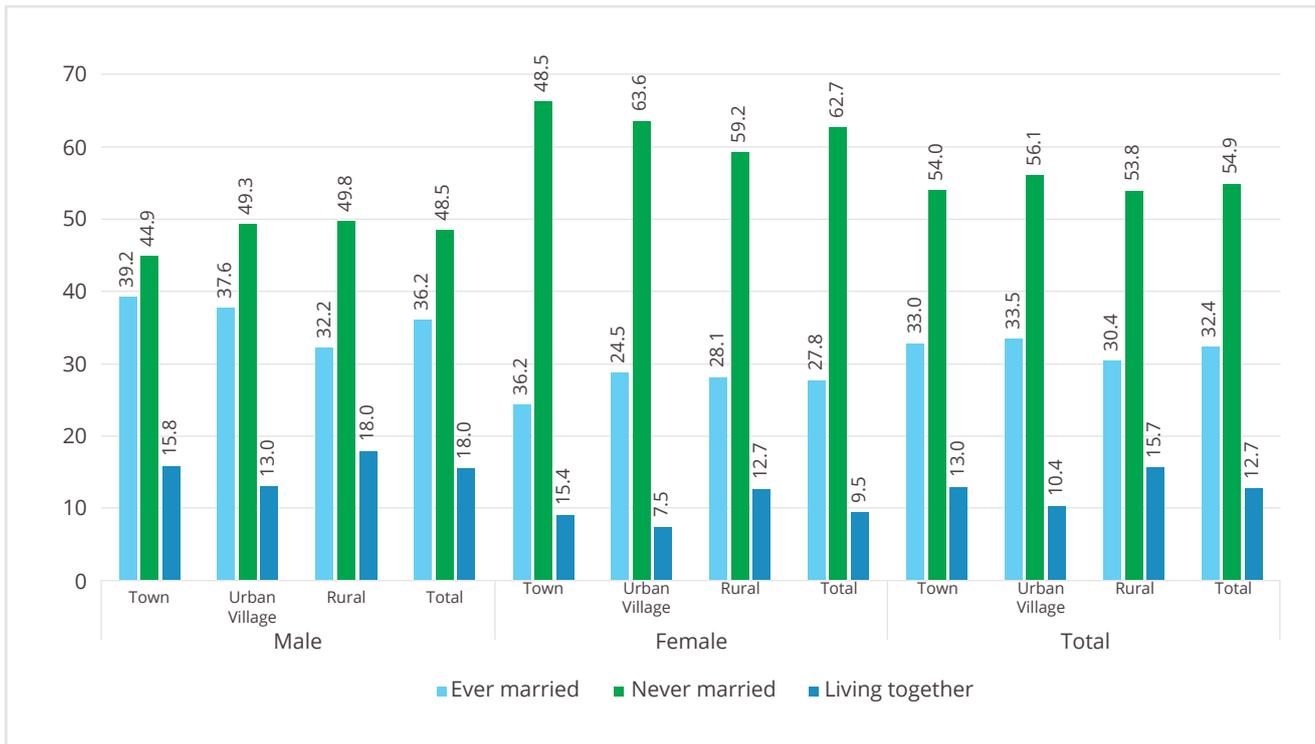


Figure 15: Marital Status by Gender and Place of Residence

are relative higher among men in towns (39.2 percent), followed by men in urban villages (37.6 percent) and lowest among men in rural areas¹ (32.2 percent); while for women, the opposite seems to hold true. Marriage rates among women are lowest in towns (24.5 percent) and they increase slightly among women in urban villages (28.9 percent) and rural areas (28.1 percent).

¹In the Botswana context, settlement classification follows the definitions adopted by Statistics Botswana in the 2022 Population and Housing Census. An urban area is defined as any human settlement with a population of 5,000 or more and where at least 75 percent of the labour force is engaged in non-subsistence activities (Statistics Botswana, 2022). Within this category, towns refer specifically to settlements situated on state land, irrespective of population size, and are distinguished from urban villages, which meet the same demographic and economic criteria for urban classification but are located on tribal or communal land (Statistics Botswana, 2022). All other settlements that do not meet these thresholds are designated as rural areas, encompassing smaller communities with populations below 5,000 and with labour forces primarily dependent on subsistence agriculture or informal economic activities (Statistics Botswana & United Nations Statistics Division, 2023). This tripartite distinction, towns, urban villages, and rural areas, remains a cornerstone of spatial and socio-economic analysis in Botswana, allowing for nuanced comparisons of demographic, gender, and economic indicators across different settlement types.

Over one in ten (12.7 percent) of respondents were cohabiting, cohabitation rates were higher in rural areas (15.7 percent), followed by towns (10.4 percent) and urban villages (10.4 percent). By sex, cohabitation rates were higher for males (15.4 percent) compared to females (9.5 percent). While female cohabitation rates are lower in towns (9.2 percent) and urban villages (7.5 percent) they are relatively higher among female in rural areas (12.7 percent). Male cohabitation patterns also mirror those of females, albeit at slightly higher rate than females. For example, while 15.4 percent of males were cohabiting, this proportion was slightly lower among males in towns (15.8 percent) and urban villages (13.0 percent) and is discernibly higher in rural areas (18.0 percent).

Figure 15 shows marital status by gender and type of place of residence. While just under half (48.5 percent) of males were never married, male non-marital rates were relatively higher in urban villages (49.3 percent) and rural areas (49.8 percent) compared to towns (44.9 percent). However, there are some sex-differentials

in marriage rates in Botswana. Notably, 62.7 percent of females have never been married, compared to 48.5 percent of males. In contrast, 36.2 percent of males report having ever been married, while the figure for females stands at 27.8 percent. Additionally, 15.4 percent of males are living together with a partner, whereas only 9.5 percent of females report the same. These gendered differences may reflect variations in marital patterns, timing of marriage, or reporting tendencies.

3.22. Age at marriage & duration of marriage

Table 3 shows age at first marriage and duration of marriage by gender and type of place of residence. The table shows consistent gender and spatial patterns in both the timing of first marriage and the duration of marriage across Botswana. Nationally, men enter marriage later than women: the mean age at first marriage is 33 years for men compared with 28 years for women, reflecting a five-year gender gap that holds across urban, urban-village, and

rural areas. Women marry earlier in every settlement type, with mean ages ranging from 25 to 27 years, while men’s mean age remains higher at around 31–33 years. The median and mode also confirm this pattern, women’s most common age at first marriage (mode) is 20–25 years, compared with 30 years for men.

Spatial differences are more modest but notable. Urban residents marry slightly later than those in rural areas, particularly women, whose median age at first marriage is 27 years in towns and urban villages but drops to 25 years in rural areas. This likely reflects urban differences in education attainment, labour-force participation, and changing social norms, as well as greater autonomy and delayed union formation among young women in cities. The rural pattern, where women marry younger, may be influenced by more traditional social expectations, lower education continuation rates, and economic factors.

Table 3: Mean Age at Marriage and Duration of marriage by Gender and Type of place of residence

		Age 1st marriage			Marriage duration		
		Mean	Median	Mode	Mean	Median	Mode
Town	Male	32	31	30	12	9	5
	Female	27	27	25	12	10	5
	Total	29	29	30	12	9	5
Urban-Village	Male	33	32	30	13	10	2
	Female	28	27	25	16	11	2
	Total	30	29	30	15	10	2
Rural	Male	33	31	30	16	11	2
	Female	27	25	20	18	13	2
	Total	30	28	20	17	12	2
Total	Male	33	31	30	14	10	2
	Female	28	26	20	16	11	2
	Total	30	29	30	15	10	2

Marriage duration shows strong gender variation as well. Nationally, women have longer marriage durations (mean of 16 years) compared with men (mean of 14 years). This pattern is most visible in rural areas, where women's mean marriage duration reaches 18 years, compared with 16 years in towns and urban villages. Men's marriage duration varies between 12 and 16 years across settlement types. The median duration (10–13 years) suggests that many marriages last about a decade before dissolution through divorce, separation, or widowhood, patterns consistent with Botswana's documented high levels of union instability.

The short mode of marriage duration, two years in most localities, is both striking and indicative of widespread early breakdown of unions, suggesting that a large share of marriages end quickly, even though others endure much longer. This bimodal pattern reflects a mix of long-term unions and short-lived marriages, consistent with social research pointing to relationship instability, economic pressures, extended family obligations, and migration patterns as key drivers of union dissolution in Botswana.

Overall, the data portray a marriage system characterised by gendered timing, urban–rural differences, and considerable union instability, all of which shape family formation, household structure, and child-rearing dynamics throughout the country.

The gender and spatial patterns in marriage timing and duration have important implications for social policy, family welfare, and gender equality. The earlier age of marriage among women, particularly in rural areas, highlights the need for strengthened education and empowerment programmes targeting adolescent girls and young women, including efforts to delay early union formation by expanding schooling, livelihoods, and SRHR services.

The widespread short duration of marriages suggests high levels of union instability, which underscores the importance of strengthening social protection systems for single mothers, separated women, widows, and other vulnerable female-headed households. In addition, the longer marriage duration among rural women points to caregiving burdens that fall disproportionately on them, especially in contexts of widowhood and limited support. Policies that promote gender-equitable family law, enhance economic opportunities for women, and support relationship stability and family well-being, including counselling, mediation services, and community-based support, would help mitigate the socioeconomic impacts of marital dissolution.

Chapter 4 – Gender, Education and Literacy



4. Introduction

Education remains one of the most powerful drivers of gender equality and human capital formation in Botswana, shaping opportunities across the life course and influencing long-term economic and social outcomes. In line with Botswana's Vision 2036, which positions human capital development at the centre of national transformation, the education sector is expected to play a critical role in reducing inequalities and equipping both women and men with the skills needed for a competitive, knowledge-based economy. This commitment is reinforced by the global Sustainable Development Goal 4, which calls for inclusive and equitable quality education, and specifically by SDG Target 4.5, which aims to eliminate gender disparities at all levels of education.

National policy frameworks, including those of the Ministry of Education and Skills Development, as well as the education priorities articulated in NDP 12, similarly emphasise the importance of gender-responsive education systems that promote equal access, retention, and progression for girls and boys alike. Trends since the 2011 Census show steady improvements in educational attainment for both sexes, with notable gains for women in secondary and tertiary participation, although some inequalities persist in STEM fields and among vulnerable populations. The COVID-19 period disrupted schooling patterns and heightened risks of dropout, learning loss, and gendered vulnerabilities, but recent data indicate signs of recovery, with Botswana working to restore learning outcomes while strengthening resilience within the education sector. Together, these developments underline the centrality of education not only as

a fundamental right but also as a cornerstone of gender equality and national development.

4.1. Literacy² and Educational Attainment

Botswana has achieved near gender parity in primary and secondary education enrolment, with females slightly outperforming males in completion rates. However, women remain underrepresented in STEM (Science, Technology, Engineering, and Mathematics) fields in higher education. The transition from education to employment remains a challenge, particularly for young women.

4.1.1. Literacy Levels by Type of Place of Residence

Figure 16 shows that adult literacy levels in Botswana are consistently high across all types of settlements, towns, urban villages, and rural areas, with only modest variation between men and women. In towns, literacy exceeds 95 percent for both males and females, indicating near-universal literacy in urban areas. Urban villages show slightly lower, but still strong rates (around 89–90 percent). Rural areas exhibit the lowest literacy levels, with male literacy at 80 percent and female literacy at 81 percent. Although the rural–urban gap remains visible, the gender gap within each residence type is very small and in some cases favours women slightly.

²Adult literacy is defined within UNESCO and the SDG framework as the ability of individuals aged 15 years and older to read and write with understanding, a standard that aligns with the age at which compulsory schooling ends in many countries. This age threshold is widely used because it captures the segment of the population that has completed basic education or has had a reasonable opportunity to acquire foundational literacy skills.

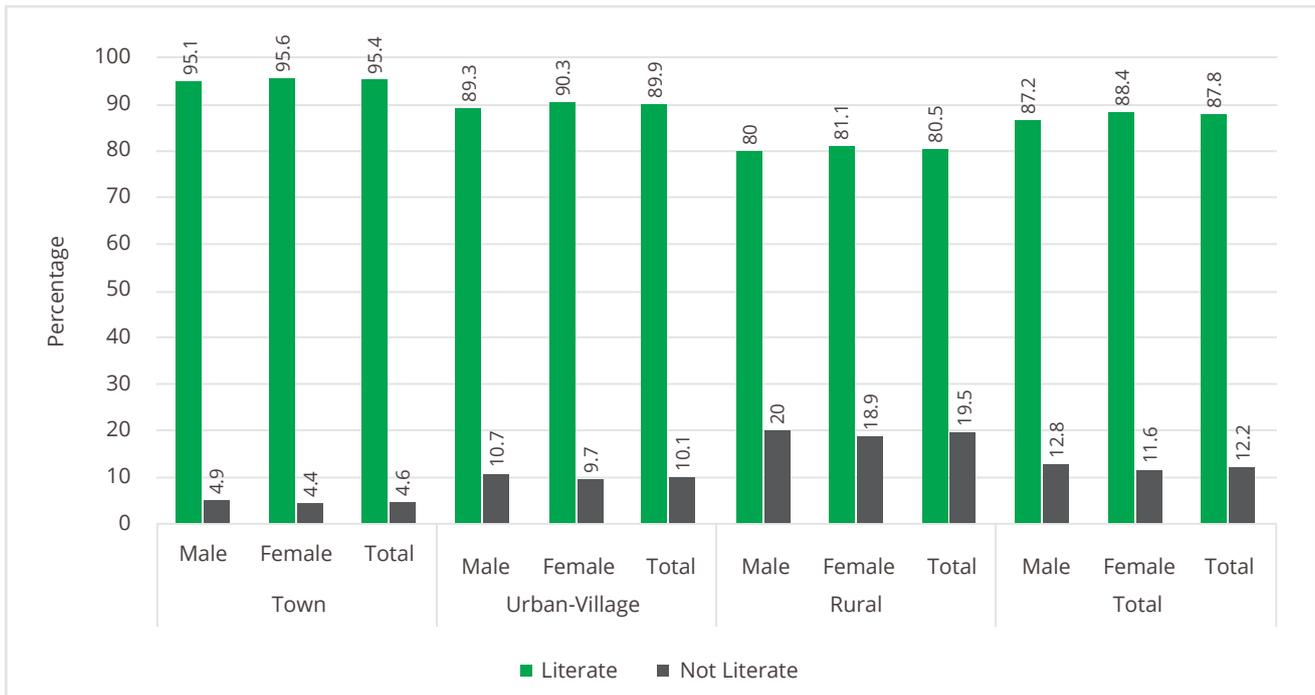


Figure 16: Literacy levels by Gender and Type of place of residence

Notably, rural areas display the highest proportion of adults who are not literate, with illiteracy rates reaching 20 percent among men and around 9–10 percent among women. This suggests that while women in rural areas are less likely to be illiterate than men, rural men remain a particularly vulnerable group in terms of basic education outcomes. Overall, the data reflect strong national performance on adult literacy, but highlight persistent spatial inequalities and gender nuances that require targeted attention.

4.1.2. Literacy Rates by Age Group

Figure 17 reveals a clear age-related decline in literacy for both men and women. Literacy levels are almost universal among younger age groups (15–24 years), with both male and female literacy rates close to 100 percent. However, literacy declines progressively with age, particularly from age 55 onwards.

Between ages 55–69, male literacy declines more steeply than female literacy, indicating that older men are more likely than older women to have limited formal schooling or to have missed educational opportunities earlier in life. In the

oldest age groups (75+), literacy drops below 50 percent for both genders and falls to around 10–15 percent among those aged 100+. This pattern reflects historical disparities in access to education, particularly prior to Botswana’s post-independence investments in schooling.

Overall, younger women and men now enjoy equal literacy, but older men exhibit a greater literacy disadvantage, suggesting a shift in the gendered patterns of educational attainment over time.

These literacy patterns illustrate the need for targeted, gender-responsive, and spatially inclusive adult education strategies. While younger generations have achieved universal literacy, older adults, especially rural men, remain at risk of exclusion from information access, digital services, financial literacy, and lifelong learning opportunities. Expanding adult education and literacy programmes in rural areas, integrating men-focused outreach, and aligning literacy efforts with digital skills initiatives will help bridge generational gaps. Strengthening community learning centres,



Figure 17: Literacy rates by Gender and Age

providing flexible schedules, and leveraging radio, mobile platforms, and local leadership can further support adults with low literacy, particularly in remote settings. Ensuring that these interventions are inclusive of women with disabilities and older women, who face cumulative socio-economic disadvantages, will reinforce Botswana’s commitment to equitable human capital development and the broader goals of Vision 2036 and SDG 4.

4.2. School Attendance & completion

School attendance and completion are among the most critical indicators of educational equity and gender parity. They reflect not only access to education but also the ability of learners, particularly girls and boys from disadvantaged backgrounds, to remain in and complete each level of schooling. In Botswana, high enrolment rates have been achieved at the primary level, yet gendered patterns of attendance and dropout persist, especially during the transition to

secondary and tertiary education. Factors such as early pregnancy, caregiving responsibilities, cultural expectations, and economic pressures continue to affect girls’ school retention, while boys face rising vulnerability linked to disengagement, rural disadvantage, and risky behaviours. Analysing attendance and completion through a gender lens thus provides valuable insight into the social and structural dynamics shaping Botswana’s progress toward SDG 4 on quality education and SDG 5 on gender equality.

Figure 18 shows levels of school attendance by place of residence. The results shows that over three quarters (76.3 percent) had completed school, just over a tenth (12.6 percent) had never attended school while 2.1 percent were still attending school.

In conformity with the population distribution, the highest percentages of school completion occurs in towns (90.3 percent) followed by

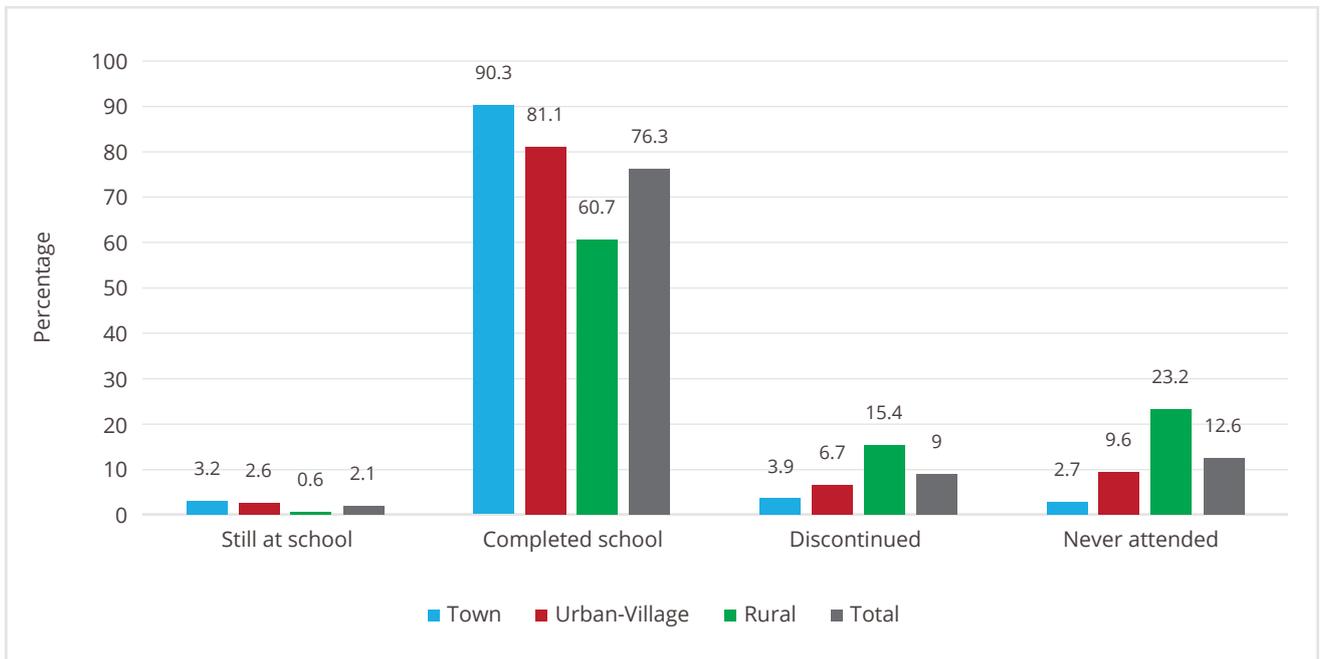


Figure 18: School Attendance by Place of Residence

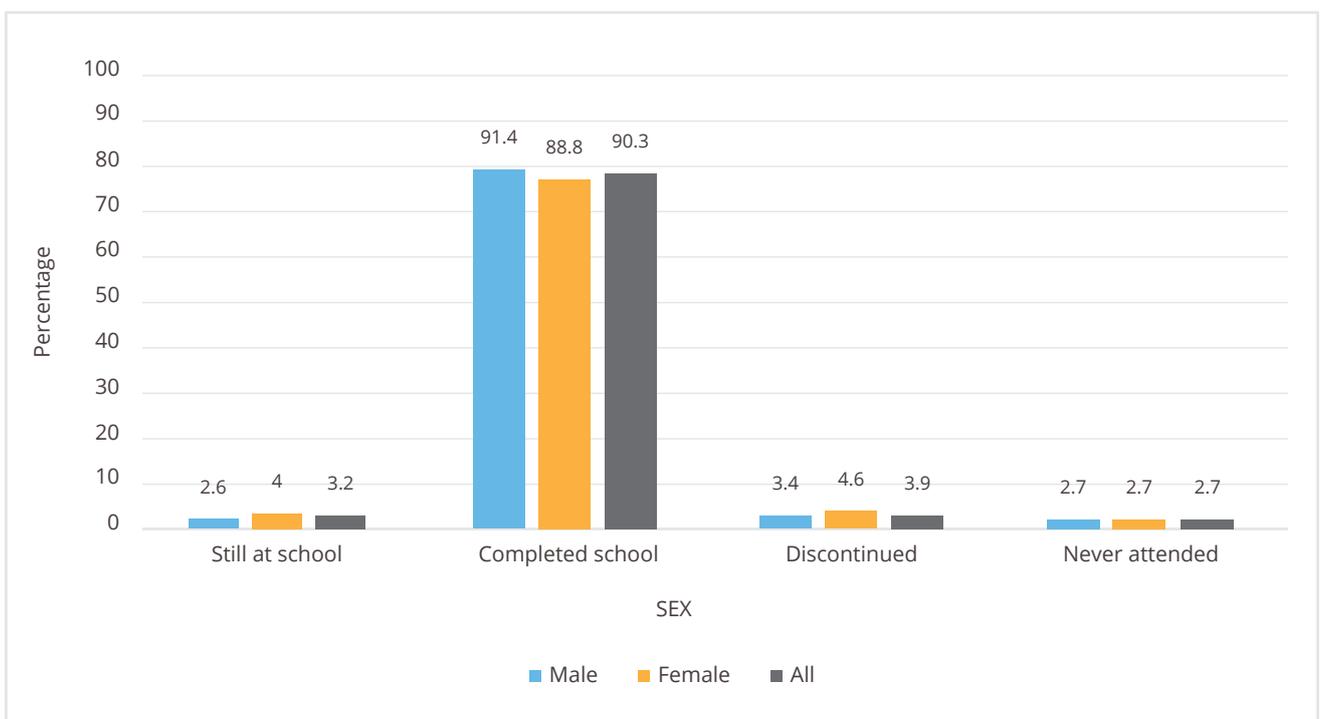


Figure 19: School Attendance by Sex and Place of Residence

urban villages (81.1 percent) and rural areas (60.7 percent). While the proportion of those still attending school is relatively small, is nevertheless more pronounced in towns (3.2 percent) followed by urban villages 2.6 percent) and is lowest in rural areas (0.6 percent). Also, proportions of those who discontinued their education is highest in rural areas (15.4 percent); followed by urban villages (6.7 percent) and is lowest in towns (3.9 percent). Also, non-school attendance is more predominant in rural areas (23.2 percent), followed by urban villages (9.6 percent) and is lowest in towns (2.7 percent).

School attendance in Botswana does not show any significant sex or gender differentials, as shows in Figure 19 which shows that both males and females were equally likely to have completed their education; to be still attending school; to have discontinued their education and to not have attended school at all.

4.3. School enrolment and Completion by Gender

Education is one of the central pillars of gender equality and human capital formation in Botswana. National commitments outlined in Vision 2036 emphasise the development of a skilled and competitive workforce as a foundation for transforming Botswana into a knowledge-based economy (Republic of Botswana, 2023). This national ambition aligns with Sustainable Development Goal 4, which promotes inclusive and equitable quality education, and specifically SDG 4.5, which aims to eliminate gender disparities at all levels of the education system (United Nations, 2015). Botswana's education policy framework, anchored in the Ministry of Education and Skills Development's sector plans and reinforced through NDP 12, places strong emphasis on gender-responsive education planning, learner welfare, and equitable access to post-basic and tertiary opportunities (Ministry of Education and Skills Development, 2023; Republic of Botswana, 2023).

Table 4 shows school enrolment and completion by gender. At the early childhood level, access remains limited. Pre-primary gross enrolment stood at approximately 21 percent in 2015, with little difference between boys and girls, indicating that gender inequality is not a major concern at this stage; however, the low overall participation highlights the need for expanded early childhood education and investment in foundational learning (Statistics Botswana, 2022; UNESCO Institute for Statistics, 2023).

Primary education is characterised by near-universal enrolment, with a gross enrolment rate of about 97 percent in 2022 and negligible gender gaps (Ministry of Education and Skills Development, 2023). Completion rates are also high, at around 91 percent, with girls completing primary school at slightly higher rates than boys (Statistics Botswana, 2022). These patterns suggest that access and retention at primary level are largely equitable, with girls showing a marginal advantage in school progression.

Gender differences become more pronounced at the secondary level. In 2021, gross secondary enrolment was approximately 70 percent, but with a clear female advantage: about 74 percent for girls compared with 66 percent for boys (World Bank, 2023). Lower secondary completion mirrors this pattern, with girls achieving completion rates above 90 percent, compared with roughly 86 percent for boys (Statistics Botswana, 2022). These trends point to a growing vulnerability among boys, who appear more likely to disengage during adolescence, an issue linked globally to labour expectations, social norms, and behavioural risks.

The gender gap widens further at the tertiary level, where women now significantly outnumber men. Botswana's tertiary gross enrolment ratio reached 21.8 percent in 2023, with female participation rising to about 27 percent, compared with approximately 19–20 percent for males (UNESCO Institute for Statistics, 2023);

Table 4: School enrolment and Completion by School Level and Gender

Level	Indicator (latest)	Year	Total	Male	Female	Gender comment
Pre-primary	Gross enrolment rate (percent of pre-primary age)	2015	21.5 percent	21.1 percent	22 percent	Very low overall coverage; girls and boys have similar access. TheGlobalEconomy.com+1
Primary	Gross enrolment rate (percent gross)	2022	96.9 percent	97.3 percent	96.6 percent	Near-universal access, almost no gender gap. CEIC Data+1
Primary	Completion rate	2022	91.0 percent	85 percent;	93.4 percent	Girls slightly more likely than boys to complete primary. TheGlobalEconomy.com+1
Lower secondary	Completion rate	2022	-	86.0 percent	90.3 percent	Clear female advantage in completing lower secondary. CEIC Data
Secondary	Gross enrolment rate (percent gross)	2021	70.0 percent	66.4 percent	73.7 percent	Girls have noticeably higher secondary participation than boys. CEIC Data+2 CEIC Data+2
Tertiary	Gross enrolment rate (percent gross)	2023	21.8 percent	19.5 percent	27.1 percent	Strong female advantage in tertiary participation. Trading Economics+3 CEIC Data+3 CEIC Data+3
Tertiary	Gender parity index (female/male GER)	2023	-	-	GPI = 1.39	About 39 percent more women than men enrolled at tertiary level. Trading Economics+1

World Bank, 2023). The gender parity index of 1.39 indicates that women are nearly 40 percent more likely than men to be enrolled in tertiary education. While this reflects substantial progress for women, it also underscores the need to ensure that men are not left behind and that women’s educational gains translate into equitable labour market outcomes.

Overall, Botswana’s education trends illustrate a system that has achieved strong gender parity at primary level and now exhibits a female advantage in secondary and tertiary participation. Post-COVID recovery efforts have focused on restoring learning continuity, reducing dropout risks, and addressing gender-specific vulnerabilities that emerged during periods of school disruption (Ministry of Education and Skills Development, 2023). These developments reaffirm the critical role of education not only in achieving gender equality but also in securing long-term national development.

4.4. Highest Level of Education Attained

Educational attainment serves as one of the most powerful indicators of human development and gender equality. It reflects not only access to learning opportunities but also the broader social, economic, and cultural conditions that shape women’s and men’s life trajectories. In Botswana, where gender parity has largely been achieved at the primary and secondary levels, analysing the highest level of education attained provides a deeper understanding of residual inequalities in access, progression, and outcomes across sexes. Patterns of attainment reveal persistent gender differences at higher levels of education, with men slightly more likely to hold university degrees and women more concentrated at lower educational tiers. These differences are often rooted in generational access gaps, socio-economic barriers, and gendered expectations regarding subject choice and career pathways.

Understanding these disparities is critical for shaping equitable education and employment policies that advance Botswana's commitments to SDG 4 (Quality Education) and SDG 5 (Gender Equality).

Botswana's education data show that secondary education is the most common level attained in Botswana, with 47.2 percent of the population falling in this category. This is followed by primary education, which accounts for 21.2 percent, and degree-level attainment at 13.2 percent. Other levels such as diploma (10.6 percent), certificate (6.1 percent), and nonformal education (1.4 percent) are less common. Pre-school education is marginal.

Gender differences reveal that males have a higher proportion of attainment for higher education levels. Specifically, 14.1 percent of males possess a university degree compared to 12.2 percent of females. Males also slightly exceed females in certificate and diploma categories. Conversely, females are more likely to have completed only primary education (24.4 percent compared to 18.6 percent for males) or nonformal education (1.9 percent compared to 1.1 percent for males). These trends may reflect generational educational inequalities and access barriers previously experienced by women, particularly in rural or disadvantaged areas.

4.5. School Drop Out & Re-entry

Despite Botswana's strong progress in expanding access to education, school dropout continues to pose challenges, particularly at the secondary level, while opportunities for re-entry remain limited and unevenly documented. Evidence from national education statistics shows that primary school dropout has remained relatively low and generally declining over the past two decades, reflecting near-universal access, strong retention, and the success of school feeding and learner support interventions (Statistics Botswana, 2015;

Statistics Botswana, 2012). At this level, dropout rarely exceeds one to two percent of enrolled learners in any given year, and sex differences are minimal. Earlier education profiles also indicate that boys historically showed slightly higher dropout rates than girls, but the differences were not large, and survival to the last grade of primary improved steadily through the 2000s (Education Policy and Data Center [EPDC], 2018).

By contrast, secondary school dropout remains more pronounced and has shown volatility over time. Time-series data compiled by Statistics Botswana reveal that the number of secondary school dropouts fluctuated between 2005 and 2019, with dropout repeatedly emerging as a major barrier to completion at both junior and senior secondary levels (Statistics Botswana, 2015; Statistics Botswana, 2019). Recent data further underscore the magnitude of the problem: between 2012 and 2022, more than 25,000 learners dropped out of secondary school nationwide, with 2,528 cases recorded in 2022 alone, a figure that represents a notable rise compared to earlier years (Guardian Sun, 2024). The causes of dropout are gendered. In 2022, approximately 71 percent of secondary school dropouts were attributed to desertion or truancy, while pregnancy accounted for at least 362 cases, highlighting the specific vulnerabilities facing adolescent girls (Guardian Sun, 2024).

The challenge extends beyond dropout to the growing number of out-of-school children. A parliamentary report indicated that in one recent year, 3,671 children aged 4–19 were out of school, comprising 1,105 primary-level dropouts and 2,566 secondary-level dropouts (Mmegi, 2023). These numbers suggest that even in a country with strong education access, a significant minority of children and young people remain excluded from learning opportunities each year, with long-term implications for their well-being and economic participation.

In terms of re-entry, the evidence base is weaker. Statistics Botswana's secondary education briefs for recent years include figures for re-entrants, but older time-series data are sparse and incomplete (Statistics Botswana, 2022; Statistics Botswana, 2019). Available data suggest that only a small fraction of learners who drop out return to the formal education system, and re-entry is not systematically tracked at primary level. This constraint limits national ability to design targeted interventions for learners who wish to resume schooling, particularly young mothers or learners who leave due to socioeconomic pressures. Broader analyses of school transitions show that between 2019 and 2021, around 30 percent of Form V completers entered tertiary education immediately, leaving approximately 70 percent outside formal post-school pathways, although this cannot be interpreted strictly as dropout or re-entry (Africa Press, 2023).

Overall, the available data indicate that Botswana faces a two-fold challenge: persistent dropout at the secondary level, especially among boys (due to disengagement, truancy, or labour migration pressures), and gender-specific vulnerabilities affecting girls (linked to pregnancy and early motherhood). At the same time, the lack of nationally consistent, sex-disaggregated re-entry data represents a critical gap for evidence-based policy-making.

These trends point to a clear set of policy priorities. First, interventions to reduce secondary school dropout must be strengthened. This includes improving learner engagement, addressing truancy through psychosocial support and community partnerships, and expanding targeted programmes for at-risk adolescents, especially boys, who are disproportionately represented in desertion-related dropout. Second, prevention and support mechanisms for school re-entry of teenage mothers need further development.

While Botswana has policies that allow girls to return to school after childbirth, the low re-entry figures suggest barriers such as stigma, lack of childcare, and weak school-level implementation. Third, re-entry opportunities for boys, particularly those who exit school due to labour expectations, substance abuse, or behavioural issues, should be expanded through flexible learning pathways, vocational bridges, and second-chance education.

Fourth, education management information systems (EMIS) should be strengthened to routinely collect and publish sex-, age-, district-, and cause-specific data on dropout and re-entry. This will enable more precise targeting of interventions and improve alignment with the commitments in SDG 4 and Vision 2036. Finally, community-level mechanisms for early identification of learners at risk of dropout should be reinforced, particularly in rural and low-income urban settings where household socioeconomic pressures intersect with gendered vulnerability.

4.6. Gender & STEM Education in Botswana

This section provides some key statistics relating to STEM education in Botswana (with gender-disaggregation where available. It is worth noting that data on STEM are still somewhat limited, so in places I flag gaps and caveats.

The participation of women and men in Science, Technology, Engineering, and Mathematics (STEM) education in Botswana remains uneven, despite progress in overall gender parity in tertiary education. According to the Human Resource Development Council (HRDC) Tertiary Education Statistics 2022 report, enrolments are disaggregated by field of study and sex, though figures for specific STEM disciplines are not always fully extracted. The report shows that women constituted approximately 59 percent of total tertiary enrolments in 2022, yet STEM programmes collectively accounted for only 29

percent of total enrolment (HRDC, 2024). This suggests that while women dominate tertiary education overall, their participation in STEM fields remains comparatively limited.

Complementary data from the World Bank Gender Data Portal indicate that as of 2017, women represented about 58 percent of tertiary graduates in STEM fields in Botswana. Although this appears encouraging, the figure includes broad STEM categories such as life sciences and health sciences, areas where women tend to be better represented, thereby masking lower participation in engineering, ICT, and physical sciences (World Bank, 2017).

Other studies reveal a more pronounced gender gap when STEM is examined narrowly. A 2023 media report citing national research found that female students account for only about 30 percent of enrolments in STEM-related fields. The imbalance is particularly acute in Information and Communication Technology (ICT), where women comprise just 4 percent of students, and in Engineering and Manufacturing, where the proportion rises modestly to 11 percent (Sunday Standard, 2023). These figures highlight Botswana's continuing challenge of attracting and retaining women in traditionally male-dominated scientific and technical disciplines.

The Science Granting Councils Initiative (SGCI) Botswana Gender and Innovation Country Brief reinforces this picture. In 2022, Botswana's gender-parity index in research and innovation stood at 0.72, meaning that women reached only 72 percent of men's participation levels in these sectors. The SGCI brief emphasises that women remain significantly under-represented in engineering, technology, and applied science careers, despite their growing presence in education and social sciences (SGCI Africa, 2023).

Qualitative evidence provides further insight into the roots of this disparity. A study by Kokoetso

(2015) titled *STEM Education in Botswana: Understanding the Gender Disparity* identified sociocultural norms, subject-streaming in secondary school, and subtle biases in curricula as major factors that discourage female participation in STEM. Girls are often socialised away from mathematics and science at an early age, resulting in fewer female entrants into STEM pathways at tertiary level and, consequently, fewer women in high-value scientific occupations.

From a gender-equality perspective, the under-representation of women in STEM limits both individual empowerment and national competitiveness. For Botswana, whose Vision 2036 aspires to transform the economy into a knowledge-based one, closing gender gaps in STEM is essential for innovation, productivity, and inclusive growth. Increasing women's participation in STEM education and research will not only enhance gender equity but also expand the country's human-capital base and its potential for technological advancement.

Thus although Botswana has achieved strong gender parity in overall tertiary enrolment, the data above suggest that women remain under-represented in specific STEM fields, especially engineering, manufacturing and ICT. For example, the 30 percent figure indicates a significant gender imbalance in STEM enrolment. The gap is larger still in disciplines such as ICT (4 percent) and engineering/manufacturing (11 percent). These figures point to a "leaky pipeline" where despite access to tertiary education, choices (and outcomes) diverge by sex, influenced by socio-cultural norms and schooling preparation (Kokoetso, 2015).

The higher female share in general STEM (58 percent in 2017) per the World Bank data is interesting and suggests that definitions and field-groupings matter: the broad STEM category may include life sciences and health sciences, domains where women may be relatively well-

represented, whereas the “traditional” STEM fields (engineering, computer science) remain male-dominated.

From a gender equality perspective, narrowing these field-specific disparities matters for several reasons: diversifying STEM contributes both to equity (women accessing high-value careers) and to Botswana’s national agenda of shifting from a resource-based to a knowledge-based economy. It also aligns with your focus on STEM in higher education and the broader monitoring of capacities for Agenda 2063 and SDG 4/5.

The table shows and illustrates the paucity of data and information on STEM education in Botswana. Only the 2022 totals (59,483

enrolled; 35,168 female; 24,315 male) are reported by HRDC. The field shares (Engineering = 18 percent; ICT = 4 percent; STEM broad field = 29 percent) are drawn from HRDC summaries (Priority Skills Report 2025 and 2022 stats).

Table 5: Enrolment and Graduation in Selected STEM Sub-fields (Botswana), 2018–2022

Level	Field (ISCED-STEM subset)	Enrolment			Graduates	
		F	M	T	F	M
2018	Engineering, manufacturing & construction	n/a	n/a	n/a	n/a	n/a
	Information & communication technologies (ICT)	n/a	n/a	n/a	n/a	n/a
	Natural sciences, mathematics & statistics	n/a	n/a	n/a	n/a	n/a
2019	Engineering, manufacturing & construction	n/a	n/a	n/a	n/a	n/a
	ICT	n/a	n/a	n/a	n/a	n/a
	Natural sciences, mathematics & statistics	n/a	n/a	n/a	n/a	n/a
2020	Engineering, manufacturing & construction	n/a	n/a	n/a	n/a	n/a
	ICT	n/a	n/a	n/a	n/a	n/a
	Natural sciences, mathematics & statistics	n/a	n/a	n/a	n/a	n/a
2021	Engineering, manufacturing & construction	n/a	n/a	n/a	n/a	n/a
	ICT	n/a	n/a	n/a	n/a	n/a
	Natural sciences, mathematics & statistics	n/a	n/a	n/a	n/a	n/a
2022	Engineering, manufacturing & construction	n/a	n/a	≈ 10,700	n/a	n/a
	Information & communication technologies (ICT)	n/a	n/a	≈ 2,380	n/a	n/a
	Natural sciences, mathematics & statistics	n/a	n/a	n/a	n/a	n/a
2022 (overall)	All STEM (broad)³	,	,	≈ 29 percent of total enrolment	,	,
2022 (overall)	All fields (total)	35,168	24,315	59,483	,	,

³These proportions in the table are not published; so where they appear they are a result of computation of approximate totals by applying the share to the 2022 total enrolment (rounded to the nearest 10). Disaggregation by female/male within each sub-field are not publicly released for 2018–2022; HRDC’s 2022 report aggregates by ISCED broad fields without a sex split per sub-field.

Chapter 5 – Gender, Economic Participation, Employment, and Access to Resources



5. Introduction

Chapter 5 examines gender differences in economic participation, employment, and access to productive resources, with the aim of assessing how women and men engage with and benefit from Botswana's labour market. The analysis is grounded in national and global development commitments, including Vision 2036 Pillar 2 on Sustainable Economic Development, SDG 5 on gender equality, and SDG 8 on decent work and inclusive growth. It also draws on the National Employment Policy (2022) and recent Labour Force Survey trends to contextualise patterns of labour-market participation, job quality, income disparities, and access to assets. It highlights these gendered dynamics, and thus provides evidence to inform policies that promote equal economic opportunities for all.

5.1. Labour-Force Participation and Employment Status

Gender differences in economic participation reflect both the structure of Botswana's economy and the social norms that shape access to resources, opportunities, and decision-making. Understanding how women and men engage in productive and reproductive work is essential for assessing progress toward inclusive and sustainable development. The analysis of gender and the economy therefore examines who participates in economic activity, in what sectors, and under what conditions, highlighting disparities in labour force participation, income, employment quality, and access to productive assets. This perspective is vital because gender inequality in economic life constrains not only women's empowerment and household welfare but also the country's overall growth potential, productivity, and progress toward SDG 5

(Gender Equality) and SDG 8 (Decent Work and Economic Growth).

Gender disparities remain significant in labour force participation. The Census reports rates of 64.9 percent for men and 50.9 percent for women, a gap of 14 percentage points. BQMTS confirms this divide and further notes that men dominate wage employment (40.2 percent vs. 36.4 percent for women) and agricultural work, while women are more involved in household businesses and formal government employment.

Both sources underscore issues of employment quality. The Census highlights women's concentration in informal and insecure jobs, while BQMTS reports that nearly one in four workers, regardless of sex, work without formal contracts. Gendered disparities in employment benefits are also evident: BQMTS notes that women are more likely to receive maternity leave and pensions, while men more often access transport subsidies, gratuities, and subsidized meals.

Unpaid care work represents a major gender gap. Census results show that 21.9 percent of women, compared to only 8.3 percent of men, reported engaging in housework in the week prior to the survey. Rural women, in particular, carry a heavier burden of unpaid care responsibilities.

5.2. Economic Participation

Botswana's labour force participation rate stands at 58.6 percent of the labour force; and this rate is higher in towns (74.3 percent) and urban villages (56.4 percent) and lower in rural areas (51.4 percent). There is also a well pronounced sex differential in labour force participation rates, for example while the overall

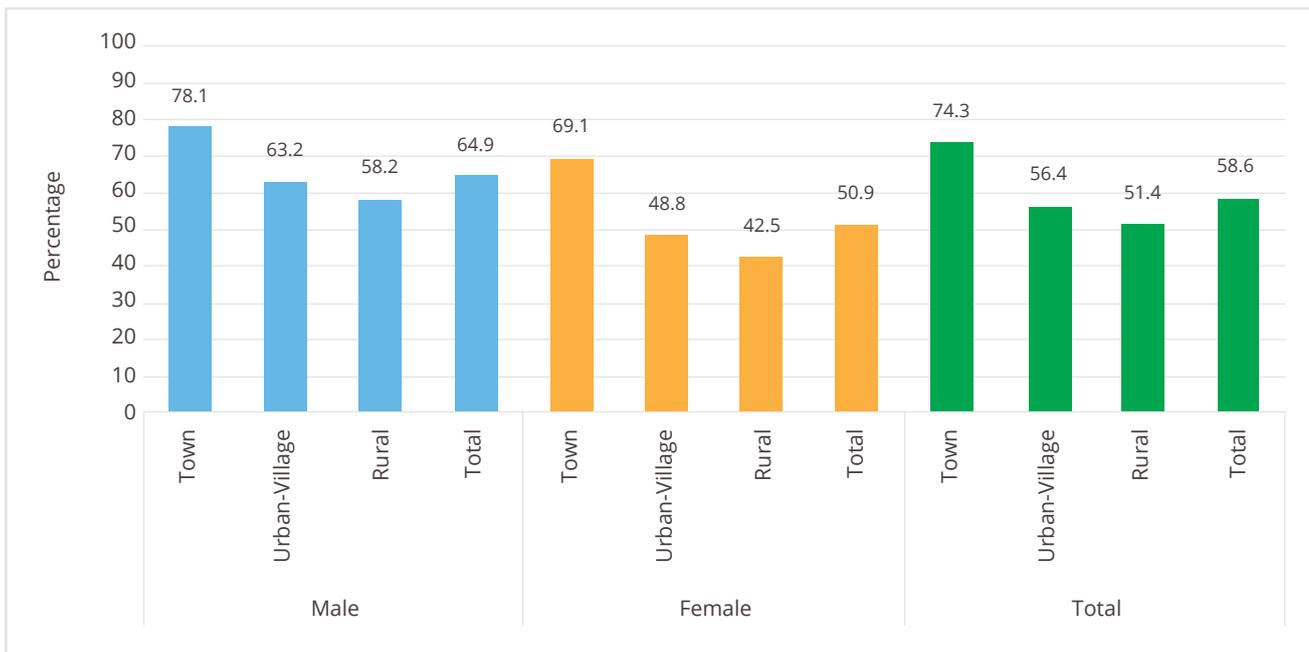


Figure 20: Economically active population by Gender and Place of Residence

labour participation rate is 58.6 percent, this proportion is discernibly lower among females (50.9 percent) compared to males (64.9 percent). This differential is more pronounced between urban and rural areas, as well as between men and women in these areas. For example, while almost two thirds (64.9 percent) of men were in the labour force, compared to half (50.9 percent) of females, labour force participation rates⁴ are higher in towns and urban villages than in rural areas (Figure 7).

In fact, the Botswana Labour force Survey of 2022, estimated women’s labour force participation at 56 percent compared to 74 percent for men (Labour Force Survey, 2022). The World Bank observed that while Botswana has made strides in gender equality in

employment, disparities persist, with women’s labour force participation rate estimate to be at 58 percent, compared to 73 percent for men (World Bank, 2022). One of the results of this gap in labour force participation is that the existence of a wage gap, with women earning on average 20 percent less than their male counterparts in formal employment.

Another factor is the disproportionate representation of women in the informal and precarious employment, further subjecting women to low wages (prevalent in the informal sector) and limiting their access to social protection.

Figure 20 compares male and female labour force participation rates across three settlement types, towns, urban villages, and rural areas, as well as national totals.

Labour force participation in Botswana displays clear gender and spatial disparities. Overall, 64.9 percent of men are economically active compared to 50.9 percent of women, indicating a persistent gender gap of nearly 18 percentage points. This suggests that

⁴In Botswana, the labour force participation rate is defined as the proportion of the economically active population, comprising all persons aged 15 years and above who are either employed or actively seeking employment, expressed as a percentage of the total population in the same age group. This definition is consistent with International Labour Organization (ILO) standards and is used by Statistics Botswana in the Labour Force and Multi-Topic Surveys (LFMS). (Source: Statistics Botswana, 2024. Labour Force and Multi-Topic Survey Report 2023; Gaborone: Statistics Botswana.)

despite progress in education and access to employment, women continue to participate in the labour market at substantially lower rates than men.

Spatially, participation is highest in towns for both sexes but remains consistently higher for men (78.1 percent) than women (64.9 percent). The lowest levels are observed in rural areas, where only 42.5 percent of women are economically active compared to 58.2 percent of men. This pattern points to the intersection of gender and geography: women in rural areas face compounded barriers to economic participation arising from limited access to employment opportunities, childcare support, and productive assets such as land and credit.

In urban contexts, especially towns, the gender gap narrows slightly, suggesting that urbanisation and access to formal-sector jobs may facilitate women's participation. Towns tend to offer more diverse economic activities, including public service, retail, and financial sectors, where women are better represented. Conversely, rural economies remain heavily dependent on agriculture and informal trading, sectors often characterised by unpaid family labour and low income, where women's contributions are substantial but undervalued or undercounted in labour force statistics.

Nationally, the total labour force participation rate stands at 58.6 percent, with men's higher involvement driving the overall average. The gender differential highlights the continuing burden of unpaid domestic and care work, which falls disproportionately on women and constrains their ability to engage in paid employment. This aligns with the census finding that "housework" is a common reason for economic inactivity among women, particularly in rural and urban-village settings.

From a gender-equality standpoint, the data illustrate that women's economic participation

in Botswana remains shaped by structural inequalities, access to jobs, social norms assigning caregiving roles to women, and the gendered division of labour. While the narrowing urban gap signals gradual progress, the persistent rural disadvantage underscores the need for targeted interventions that improve rural women's access to education, productive resources, and childcare infrastructure. Addressing these inequalities is essential for Botswana's achievement of SDG 5 (Gender Equality) and SDG 8 (Decent Work and Economic Growth), as well as the aspirations of Agenda 2063 on inclusive and equitable growth.

Figure 21 shows the percentages of the population that were actively seeking work. Overall, and despite a much higher unemployment rate, just over a tenth (12.8 percent) of respondents were actively seeking work. The proportion looking for work was much higher in urban villages (14.7 percent) compared to towns (11.7 percent); urban villages (14.7 percent) and rural areas (10.8 percent).

The relatively low proportion of people actively seeking work in the context of very high levels of employment and underemployment, might be a sign of the extent to which potential job seekers are discouraged by the lack of jobs in the market.

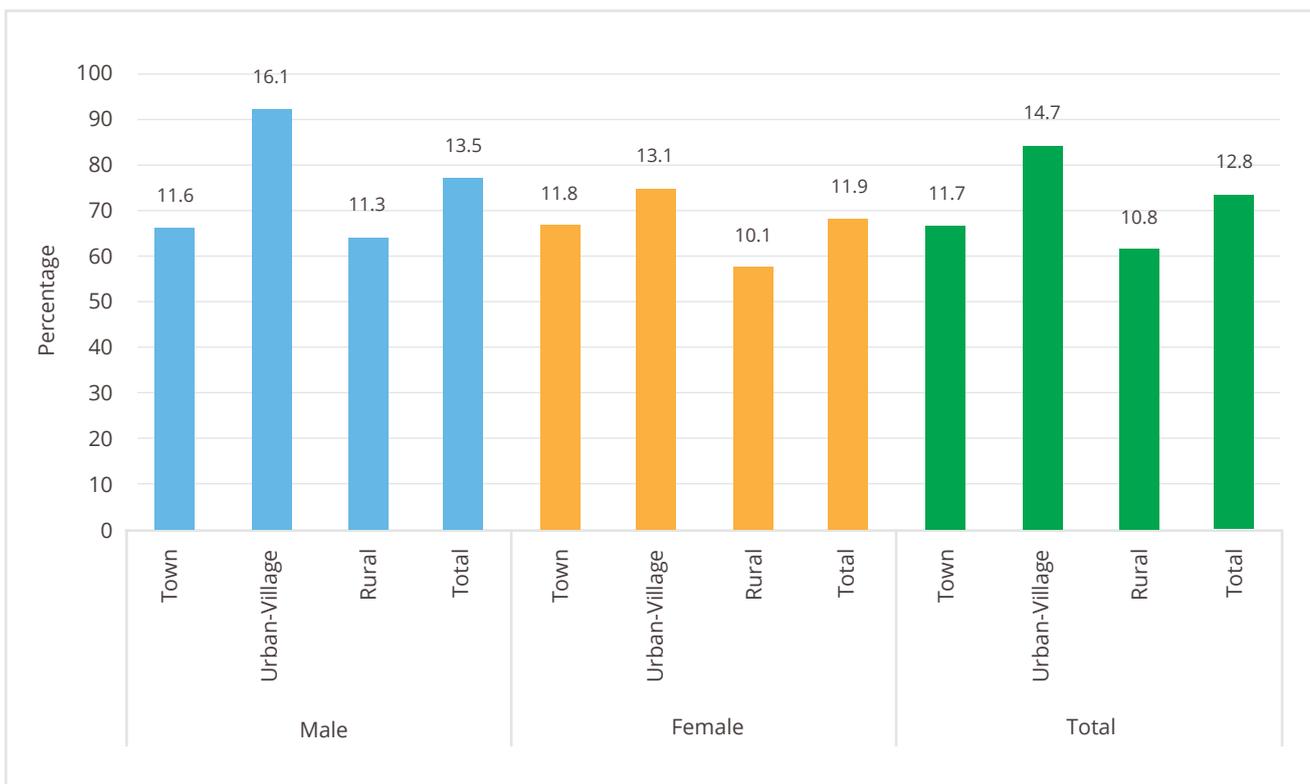


Figure 21: Actively Seeking Work by Gender and Place of Residence

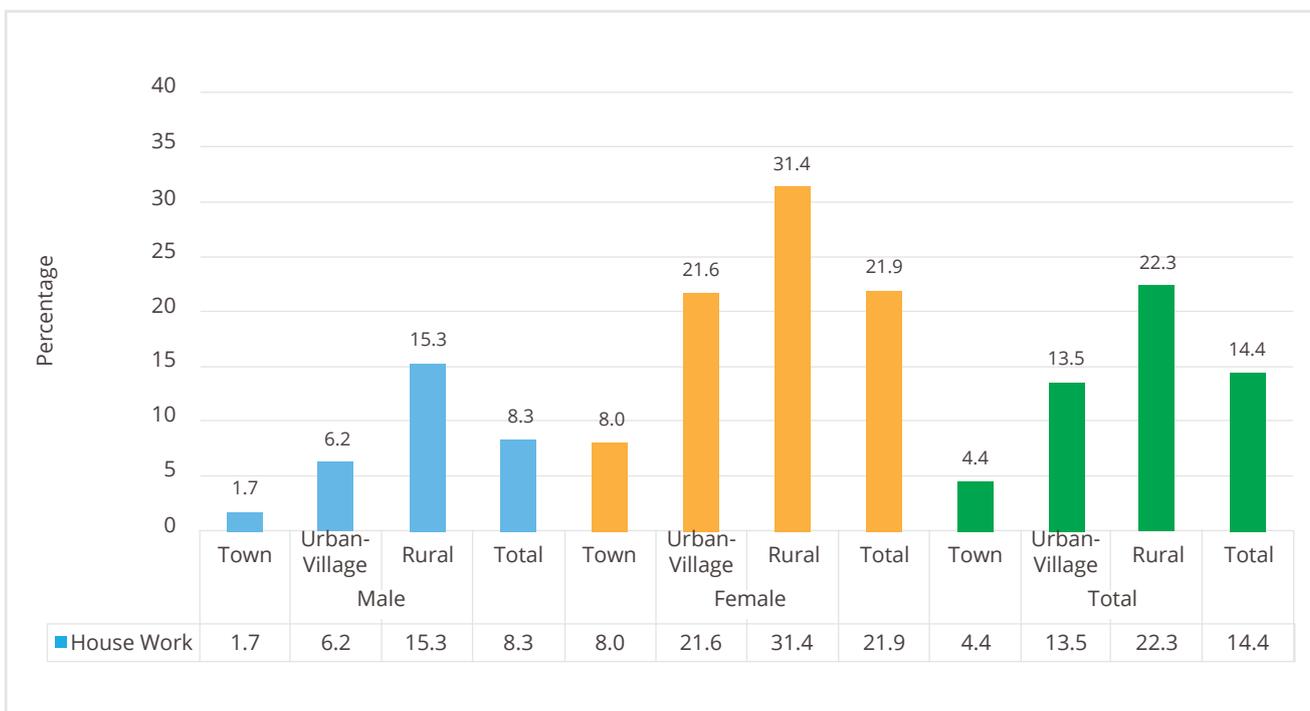


Figure 22: Housework by Gender and Place of Residence

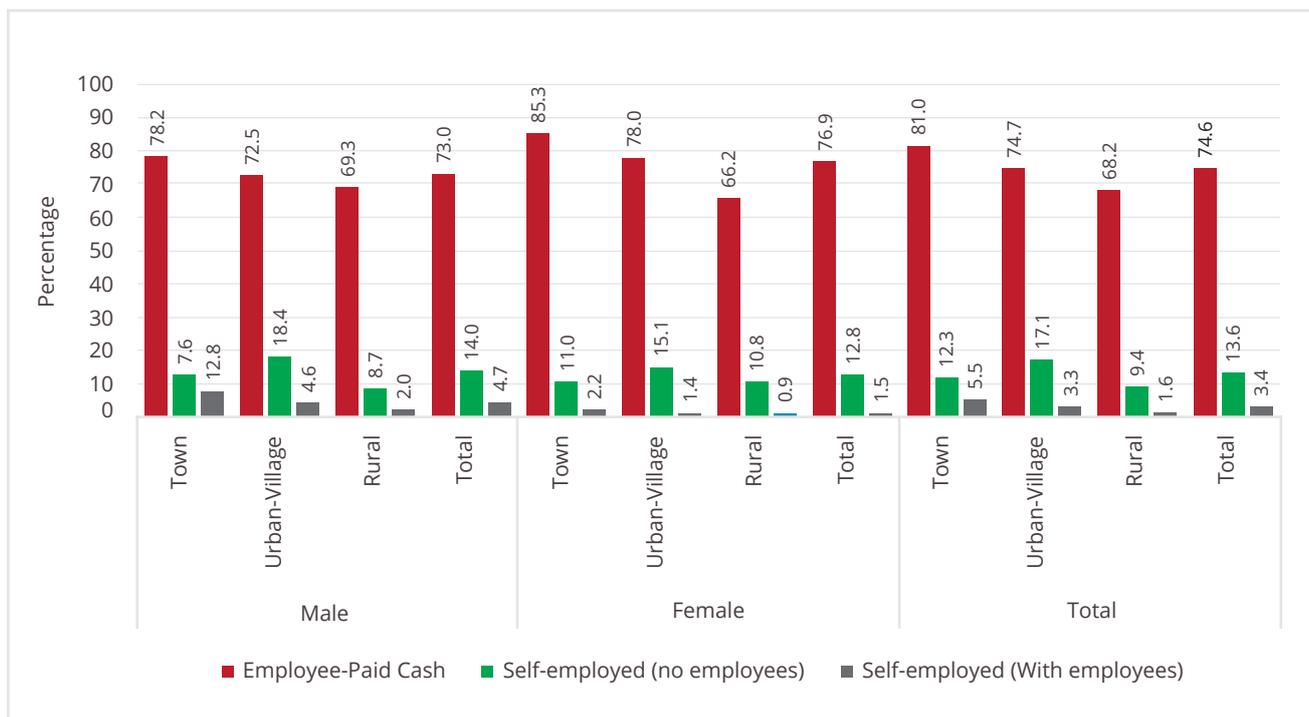


Figure 23: Employment by Gender and Place of Residence

5.3. Engagement in housework⁵

Housework is not only one of the most neglected areas of economic measurement, but also one in which women are likely to be disproportionately engaged in. Figure 22 shows the proportion of the population engaged in housework during the week preceding the survey, by sex and place of residence.

The results show that while 14.4 percent were engaged in housework, this proportion is much higher among females (21.9 percent) compared to males (8.3 percent). However, housework was also common in rural areas (22.3 percent) followed by urban villages (13.5 percent) and towns (4.4 percent) (Figure 9). For both males and females, the rates of participation in housework are lowest in

town, are slightly higher in urban villages and are more pronounced in rural areas. For men the proportions increase from 1.7 to 6.4 and 15.3 percent, among men in towns, urban villages and rural areas, respectively. A similar pattern is observed among females, although at a discernibly higher rate than males. For example, the proportion of females engaged in housework increases from 8 percent to 21.6 percent and further to 31.4 percent among women in towns, urban villages and rural areas, respectively.

Figure 23 shows employment by type, place of residence and gender. Three quarters (74.6 percent) of employees were paid with cash; just over a tenth (13.6 percent) were self employed with employees, while 3.4 percent were self-employed with no other employees. As can be expected the percent of employees paid in cash is highest in towns (81 percent) followed by urban villages (74.7 percent) and is lowest in rural areas (68.2 percent),

⁵In Botswana surveys, “housework” refers only to unpaid domestic activities performed by household members, such as cleaning, cooking, laundry, caregiving, and collecting water or fuel. It excludes any paid domestic work carried out by hired helpers, maids, or other household employees, as such labour is classified under formal or informal employment rather than unpaid household production.

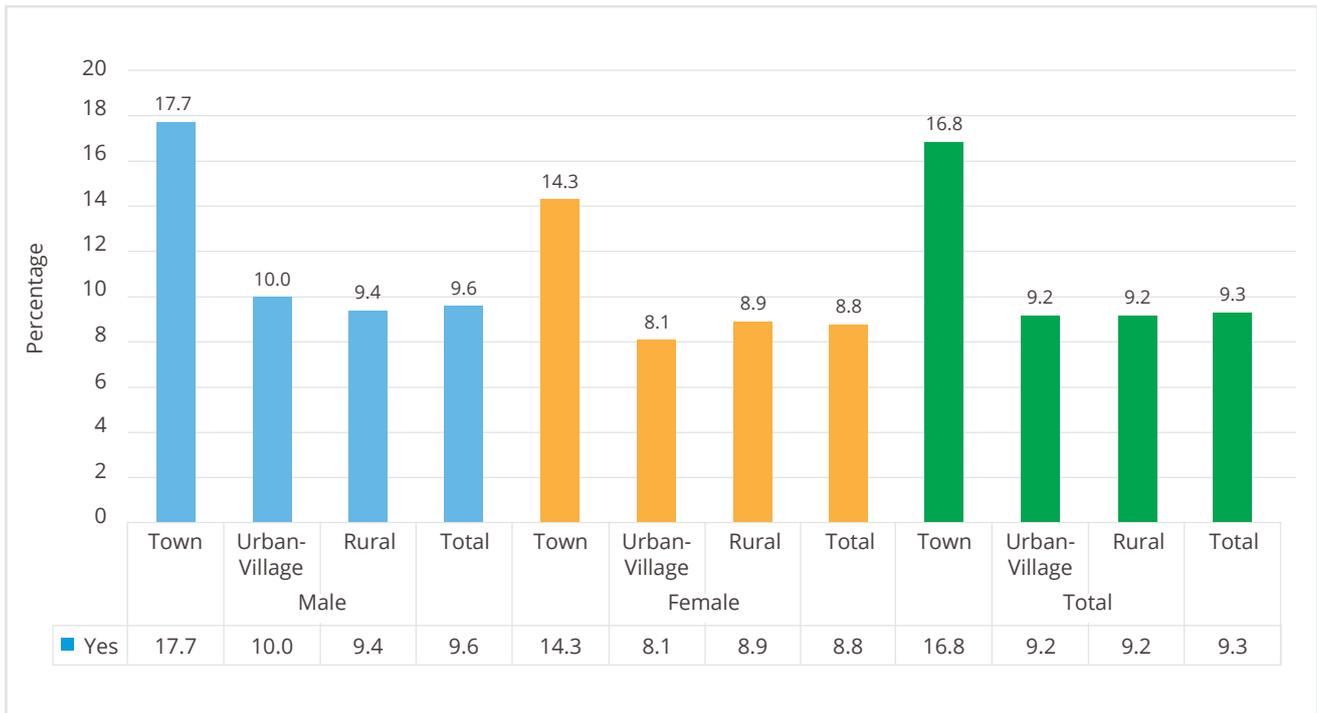


Figure 24: Engagement in Economics Activity by Gender and Place of Residence

The proportion of employees paid in cash is slightly higher among females (76.9 percent) than males (73.0 percent). As can be expected, the proportion of employees paid in cash declines as one moves from towns to urban villages to rural areas. For males, this proportion declines from 78.2 to 72.5 to 69.3 among men residing in towns, urban villages and rural areas, respectively. Among females, these proportions decline from 85.3 to 78.0 to 66.2 percent among women residing in towns, urban villages and rural areas, respectively.

Figure 24 shows the proportions of men and women engaged in economic activity a week before the survey, by place of residence. The figure shows that approximately a tenth (9.3 percent) were engaged in economic activity during the week preceding the survey. However there a significant differentials in levels of economic activity by place of residence with urban areas (16.8 percent) recording levels of economic activity that are almost twice those in urban villages (9.2 percent) and rural areas (9.2 percent).

Similar differentials by place of residence are observable among males and females. For, example, while less than a tenth of both males (9.6 percent) and females (8.8 percent) were engaged in some economic activity during the week proceeding the survey, for both groups economic activity was much more pronounced in towns (17.7 percent and 14.3 percent for men and women, respectively), while the corresponding rates were significantly lower for urban villages (10 percent and 8.1 percent for men and women, respectively) and rural areas (9.4 percent vs 8.9 percent for men and women, respectively).

5.4. Time-Use and housework (Hours worked)

Understanding how women and men allocate their time across paid work, unpaid care, household production, and community responsibilities is essential for analysing gender inequality in everyday life. Time-use data provide a fuller picture of economic contribution by capturing activities that are not reflected in conventional labour statistics, particularly unpaid care and domestic work, which are disproportionately carried out by women. These data help reveal the “hidden economy” that sustains households and communities, highlight gendered constraints on labour-force participation, and show how responsibilities differ across urban, urban-village, and rural settings. Incorporating time-use findings therefore strengthens the analysis by linking gender roles, economic participation, and wellbeing, and provides a necessary foundation for interpreting the results presented in the next section.

The distribution of hours worked across different economic activities shows clear gender differences in how women and men in Botswana allocate their labour. Among those working for a wage or salary, men report longer working hours than women on average, with a mean of 46 hours per week compared with 40 hours for women. This aligns with the tendency for men to be more concentrated in full-time formal employment, while women are more likely to occupy part-time or more flexible positions due to competing household responsibilities. The median values reinforce this pattern, with men typically working 43 hours and women 40 hours per week in paid employment.

A different pattern emerges in activities related to supporting the paid work of other household members. Women contribute substantially more time than men to this form of labour, with a mean of 36 hours compared to 28 hours for men. The exceptionally high female median of 48 hours, compared with only 15 hours for men,



Figure 25: Hours worked across different economic activities (Time Use and Housework)

highlights the disproportionate role women play in unpaid support work, often linked to family enterprises, caregiving responsibilities, or informal assistance that enables other household members to earn income. This underscores a persistent gender divide in unpaid but economically significant work.

In non-farm household businesses, the differences between men and women are narrower. Men average 44 hours of work compared to 41 hours for women, and the medians (46 for men and 42 for women) are relatively close. This suggests that when both sexes engage in household enterprises, their time contributions are more similar, reflecting shared roles in small-scale trade, services, or informal economic activities where both men and women participate actively.

When helping in non-farm household businesses, the gender gap narrows even further. Both men and women report an identical mean of 31 hours, although women show a higher median (35 hours compared to 16 for men). This indicates that while average contributions appear similar, women are more consistently involved at higher levels of weekly hours, while men's involvement is more variable.

The largest gender difference is observed in household farming, livestock, and fishing activities. Men contribute significantly more time, averaging 33 hours per week compared to 25 hours for women. This reflects gendered labour roles in Botswana's agricultural and pastoral systems, where men traditionally undertake the bulk of field labour, herding, and livestock management. The median values (30 hours for men versus 20 hours for women) confirm this pattern, while the modal values suggest that particular tasks or seasonal demands may affect men and women differently.

Taken together, the data reveal a gendered division of labour in which men dominate

hours worked in formal employment and agricultural production, while women shoulder a disproportionate share of unpaid household-support work and show more consistent involvement in non-farm household businesses. These patterns highlight the need to recognise and value women's unpaid labour contributions and to consider how gendered time allocation affects economic empowerment, labour market participation, and household well-being in Botswana.

The gender disparities in time spent on different forms of work highlight the need for targeted policies that recognise and address the unequal distribution of labour between men and women. Women's substantially higher contribution to unpaid support work and their consistent involvement in household enterprises point to the importance of expanding childcare services, strengthening social protection for informal workers, and promoting flexible work arrangements that enable women to balance paid and unpaid responsibilities. At the same time, men's longer hours in formal employment and agricultural activities underscore the need for initiatives that diversify rural livelihoods and reduce dependency on labour-intensive subsistence or livestock work.

Botswana would also benefit from systematically incorporating unpaid household labour into national statistics, in line with SDG commitments, to ensure that women's economic contributions are fully captured. Finally, rebalancing gendered time use requires community-level awareness programmes that challenge traditional norms while encouraging shared household responsibilities, thereby enabling both women and men to participate more equally in economic and social life.

Chapter 6 – Gender and Living Conditions (Poverty and Vulnerability)



6. Introduction and Conceptual Framework

Poverty and living conditions remain central indicators of human development and social equity in Botswana. Despite the country's upper-middle-income status and sustained economic growth, significant disparities persist across gender, geography, and household type. Women, particularly those heading households, continue to experience higher levels of poverty and economic vulnerability, reflecting enduring structural inequalities in access to productive resources, formal employment, and social protection. The gendered nature of poverty is also evident in patterns of housing quality, access to basic services, and reliance on informal or subsistence livelihoods, factors that directly affect women's and children's wellbeing.

Understanding poverty through a gender lens therefore goes beyond income measurement; it encompasses broader aspects of living conditions such as access to water, energy, sanitation, and secure shelter. These dimensions influence time use, health, and productivity differently for women and men, with rural women bearing the heaviest burden of deprivation. Analysing gender differences in poverty and living standards thus provides valuable insights into the intersection of economic inequality and social vulnerability, and informs Botswana's efforts to achieve inclusive growth and the Sustainable Development Goals (particularly SDG 1 and SDG 5).

This section draws primarily on data from the 2022 Population and Housing Census, the 2015/16 Botswana Multi-Topic Household Survey (BMTHS), and complementary analytical reports produced by Statistics Botswana,

the World Bank, and the Botswana Institute for Development Policy Analysis (BIDPA). The analysis focuses on both income-based and multidimensional measures of poverty, examining disparities by sex of household head, place of residence, and household composition. Indicators of living conditions, such as type of dwelling, access to electricity, water, sanitation, and ownership of durable goods, are also disaggregated by gender and settlement type to capture inequalities in material wellbeing.

The results show that female-headed households generally live in better quality housing compared to male-headed households. For example, only 10.4 percent of female-headed households lived in houses with poor-quality walls compared to 14.9 percent of male-headed households. Similarly, female-headed households had slightly better floor (94.3 percent vs. 91.3 percent with good quality) and roof quality (94.2 percent vs. 93.9 percent).

In terms of overall housing quality, 87.3 percent of female-headed households lived in "good" housing units, compared to 82.6 percent of male-headed households. Male-headed households were more likely to report "poor" or "fair" housing. This finding somewhat challenges conventional assumptions that male-headed households have better socioeconomic resources, suggesting that female heads may be investing more in housing quality, possibly as a form of household security.

This chapter therefore examines how gender shapes living conditions, poverty, and vulnerability in Botswana by linking individual and household characteristics to broader social and economic outcomes. Using both income and multidimensional poverty concepts, the

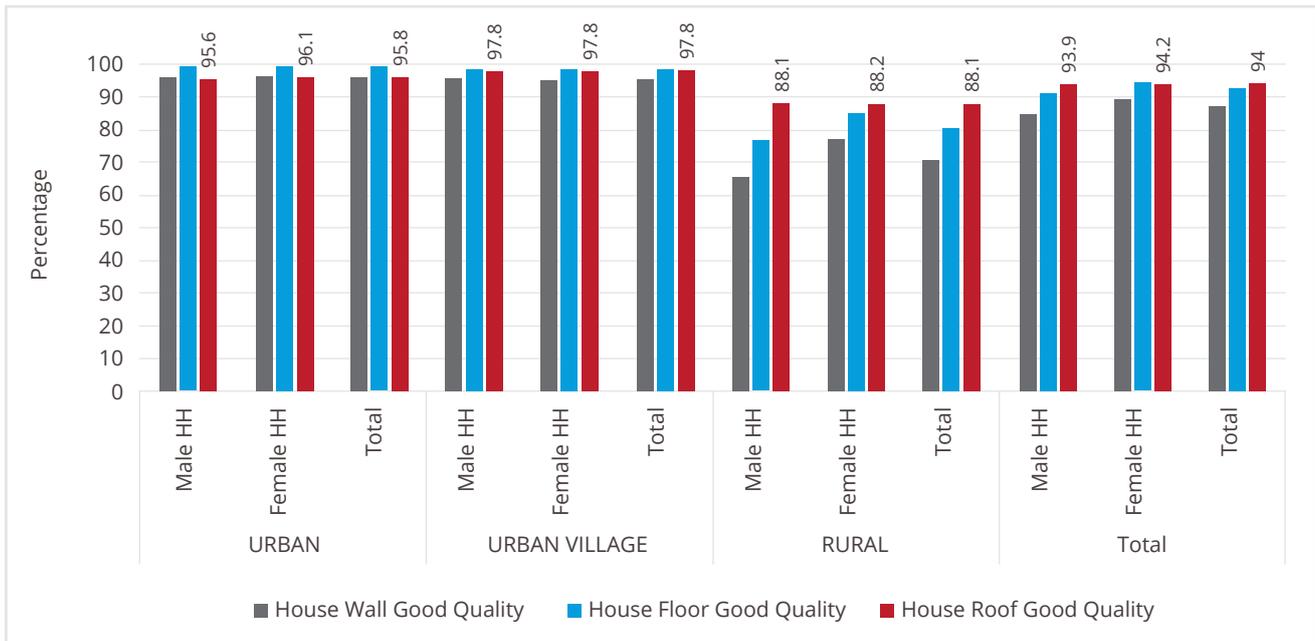


Figure 26: Proportion of households using good quality materials for construction by gender and type of place of residence

analysis highlights how material deprivation and exposure to risk differ for women and men. It aligns with national commitments under Vision 2036, NDP 12, and global goals such as SDG 1 and SDG 5, which recognise poverty as both an economic and a gendered phenomenon. It applies an intersectional lens, considering the sex of the household head, place of residence, and household type, to identify which groups face the greatest disadvantages and to inform targeted policy responses.

6.1. Quality of Housing and Housing Materials

Housing quality and the materials used in dwelling construction provide an important measure of household living standards and exposure to environmental risk. Because women, especially those in female-headed households, tend to occupy lower-income and service-deficient settlements, housing characteristics often reflect underlying gendered inequalities in access to resources and infrastructure. This section examines variations in dwelling quality and construction materials to illustrate how gender, location, and socio-economic status intersect to shape housing conditions across Botswana.

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Figure 27: Quality of housing unit by place of residence and gender of head of household

6.2. Access to Land

Land remains one of the most critical assets for livelihoods, wealth creation, and social identity in Botswana. It underpins agricultural production, housing development, and access to credit, and serves as a key determinant of economic empowerment and social security. The system of land tenure in Botswana is characterised by three main categories, tribal land, state land, and freehold land⁶, each governed by distinct legal and administrative frameworks. While the country's land policy promotes equitable access and sustainable use, gender disparities persist in ownership, control, and decision-making over land.

⁶Botswana's land tenure system comprises three main categories: (1) Tribal land, which constitutes roughly 70 percent of the national land area and is administered by Land Boards under customary law for residential, agricultural, and communal use; (2) State land, representing about 25 percent of the total, managed by central or local government for public, industrial, and commercial purposes; and (3) Freehold land, accounting for the remaining 5 percent, held under private ownership and transferable through market transactions. This tripartite system reflects Botswana's dual legal structure of customary and statutory tenure, as established under the Tribal Land Act (1968, revised 2018) and related land policy frameworks.

From a gender perspective, access to and control over land are central to achieving economic independence and reducing vulnerability, particularly among rural women whose livelihoods depend heavily on agriculture and natural resources. Although legislative and policy reforms such as the Botswana National Land Policy (2019) have expanded women's rights to own and inherit land, traditional norms and administrative barriers continue to constrain the effective realisation of these rights. The gendered nature of land tenure thus reflects broader patterns of inequality in resource distribution, authority, and opportunity.

This section examines Botswana's land tenure system through a gender lens, analysing patterns of ownership, allocation, and utilisation across land types. It also explores how socio-cultural factors, inheritance practices, and institutional processes shape women's and men's access to land, and the implications for poverty reduction, rural development, and gender equality.

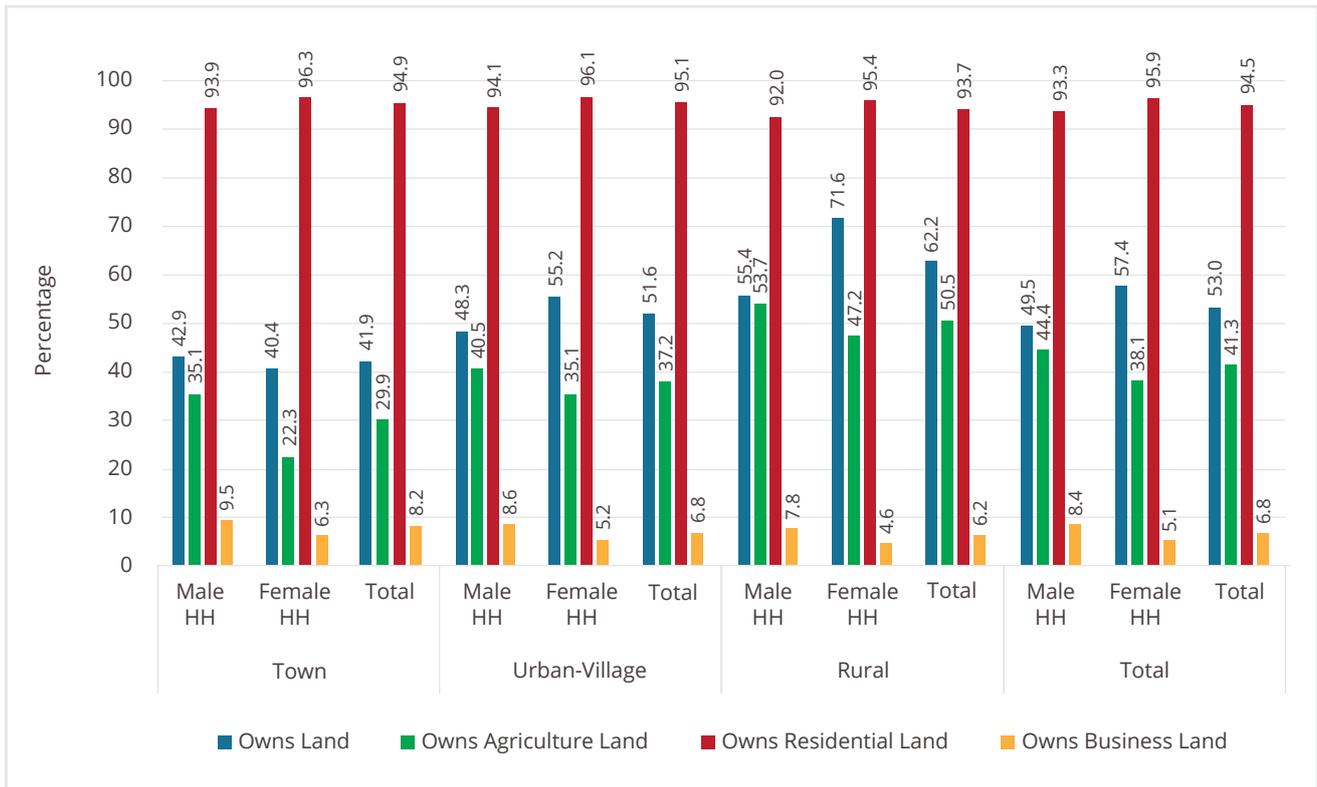


Figure 28: Land ownership (type of land) by Gender and Type of place of residence

Land ownership

Figure 28 reveals clear patterns in land ownership by gender and type of residence in Botswana. Across all settlement types, towns, urban-villages, and rural areas, residential land ownership is strikingly high, with both male-headed and female-headed households reporting levels above 90 percent. This near-universal access suggests strong equity in residential land allocation, reflecting the long-standing functionality of Tribal Land Boards and the prominence of residential plots in Botswana's land tenure system.

Beyond residential plots, however, notable gender differences emerge. Male-headed households consistently report higher ownership of agricultural land than female-headed households, a gap that is especially visible in rural areas where agriculture remains central to livelihoods. This disparity indicates that although the legal framework guarantees equal rights, women continue to experience reduced access to productive land due to socio-cultural

norms, inheritance practices, and limited access to agricultural financing and support services.

General land ownership also shows a gendered pattern, with male-headed households holding a higher share in every residence category. Rural areas display the highest levels of ownership for both genders, which aligns with the broader availability of customary land and the livelihood orientation of rural households. Nevertheless, women remain underrepresented even in these areas, suggesting persistent structural constraints in acquiring land beyond residential plots.

Business land ownership is extremely low across all residence types and for both genders, rarely exceeding five percent. The consistently low levels reflect broader challenges in accessing commercial land, including the cost of serviced plots, bureaucratic hurdles, and, for women especially, reduced access to capital and collateral.

Overall, the narrative emerging from the chart is one of formal equality in residential land ownership, an encouraging achievement, paired with enduring gender gaps in access to productive and commercial land, where women remain at a relative disadvantage. These disparities highlight the continued influence of socio-cultural norms and economic constraints, and signal the need for targeted gender-responsive reforms within land administration and agricultural support systems.

These findings underscore the need for targeted gender-responsive reforms within land administration, particularly in the allocation and transfer of agricultural and commercial land. While the near-universal ownership of residential plots reflects commendable progress, the persistent gender gaps in productive land ownership point to underlying structural and socio-cultural barriers that limit women's economic agency. Strengthening women's access to agricultural financing, simplifying land transfer procedures, and enhancing gender mainstreaming within Land Boards and local

governance structures would help reduce these disparities and support more inclusive participation in Botswana's land-based economy.

6.3. Land ownership by Disability Status

Figure 29 reveals important differences in land ownership patterns between households headed by persons with disabilities and those headed by persons without disabilities, with gender shaping these patterns further. Residential land ownership remains overwhelmingly high across all groups, typically above 93 percent, indicating that disability status does not substantially limit access to residential plots. This suggests strong equity in the allocation of residential land, likely driven by Botswana's universal land allocation mechanisms under customary and state land systems.

However, disparities become more pronounced when examining ownership of productive land. Among non-disabled household heads, men report higher levels of agricultural

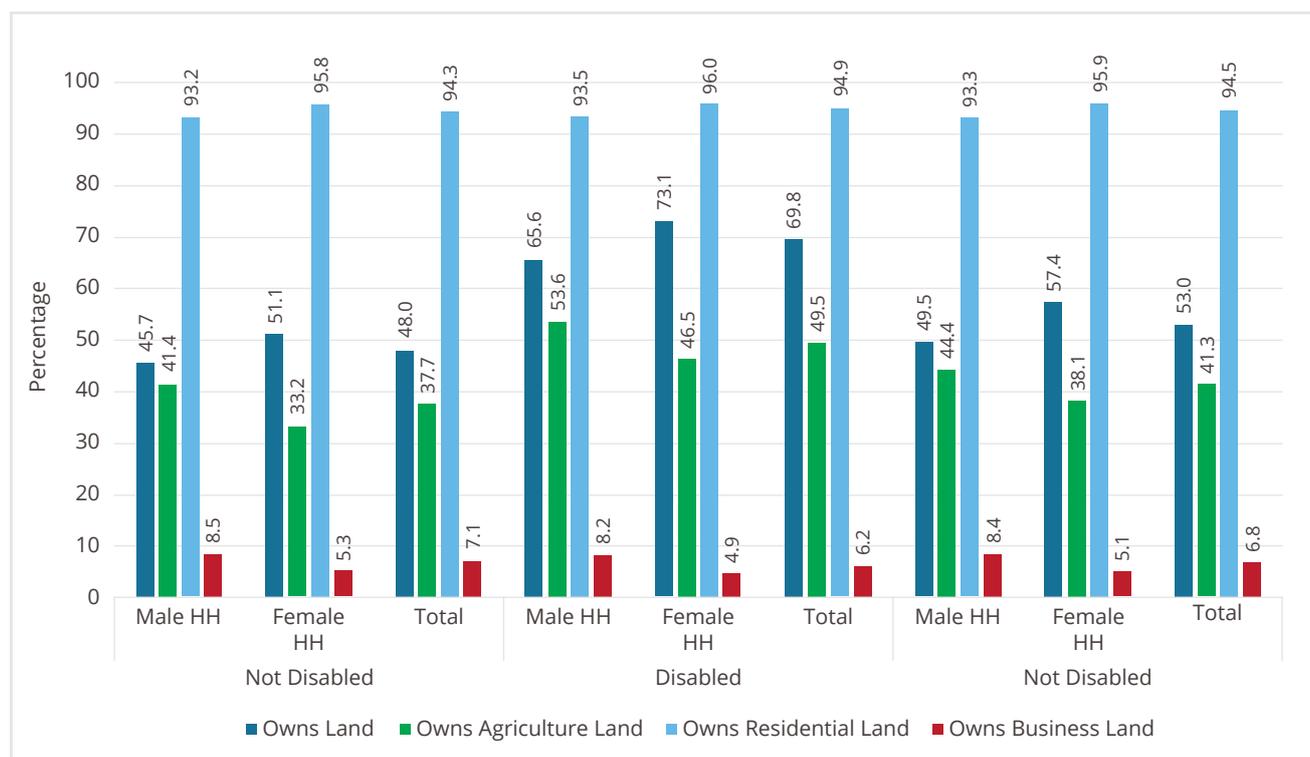


Figure 29: Land ownership by Gender and Disability Status

land ownership than women, reflecting the familiar gender gap seen across the broader population. A similar pattern persists among disabled household heads: male-headed households with disabilities report higher agricultural land ownership than their female counterparts. This indicates that disability does not eliminate gendered inequalities; rather, the intersection of gender and disability may compound disadvantage for women with disabilities, who remain the least likely to own agricultural plots.

General landownership shows a similar trend. Disabled male-headed households report higher land ownership (65.6 percent) than their non-disabled male counterparts (45.7 percent), suggesting that disability status does not uniformly reduce access to land and may reflect targeted support, family transfers, or age-related patterns, given the higher likelihood of disability among older household heads. Female-headed households with disabilities, however, do not show the same advantage. Their land ownership rates remain lower than those of disabled men and comparable to non-disabled women, again revealing the persistence of gendered barriers.

Business land ownership is low across all categories, typically below 10 percent, but slightly higher among disabled male-headed households. This pattern suggests that disability does not significantly alter the structural constraints that limit access to commercial land for most households.

Overall, the data demonstrates that while Botswana has achieved broad equity in residential land ownership, significant inequalities remain in access to productive land along both gender and disability lines. Women with disabilities appear to face a dual disadvantage, experiencing lower ownership of agricultural and general land compared to both disabled men and non-disabled women.

These intersecting inequalities highlight the importance of adopting disability-inclusive and gender-responsive approaches within land administration and economic empowerment policies.

The intersection of gender and disability in land ownership highlights the need for more deliberate, inclusive approaches within Botswana's land governance system. While residential land allocation appears equitable, the lower rates of agricultural and general land ownership among women with disabilities point to structural and socio-economic barriers that existing policies do not fully address. Strengthening disability-responsive provisions in land administration, simplifying procedures for vulnerable applicants, and expanding targeted support, such as accessible financing, legal aid, and tailored agricultural extension services, would help reduce the compounded disadvantage faced by this group. Integrating both gender and disability perspectives into Land Board operations and national land policies would promote a more inclusive and equitable land tenure landscape.

6.4. Access to land for housing & acquisition by Sex of Head of Household

Access to land for housing is limited for both sexes, with only about 35 percent of households reporting access, regardless of sex of head. There is no major gender disparity in this regard. However, when disaggregating land acquisition methods, some gender patterns emerge. Female-headed households were more likely to acquire land through land boards (62.4 percent vs. 57.8 percent), whereas male-headed households reported slightly higher reliance on purchases, leases, and employer provision (7.6 percent vs. 3.7 percent). This indicates that women depend more on formal institutional channels, while men use market-based or employment-related opportunities.

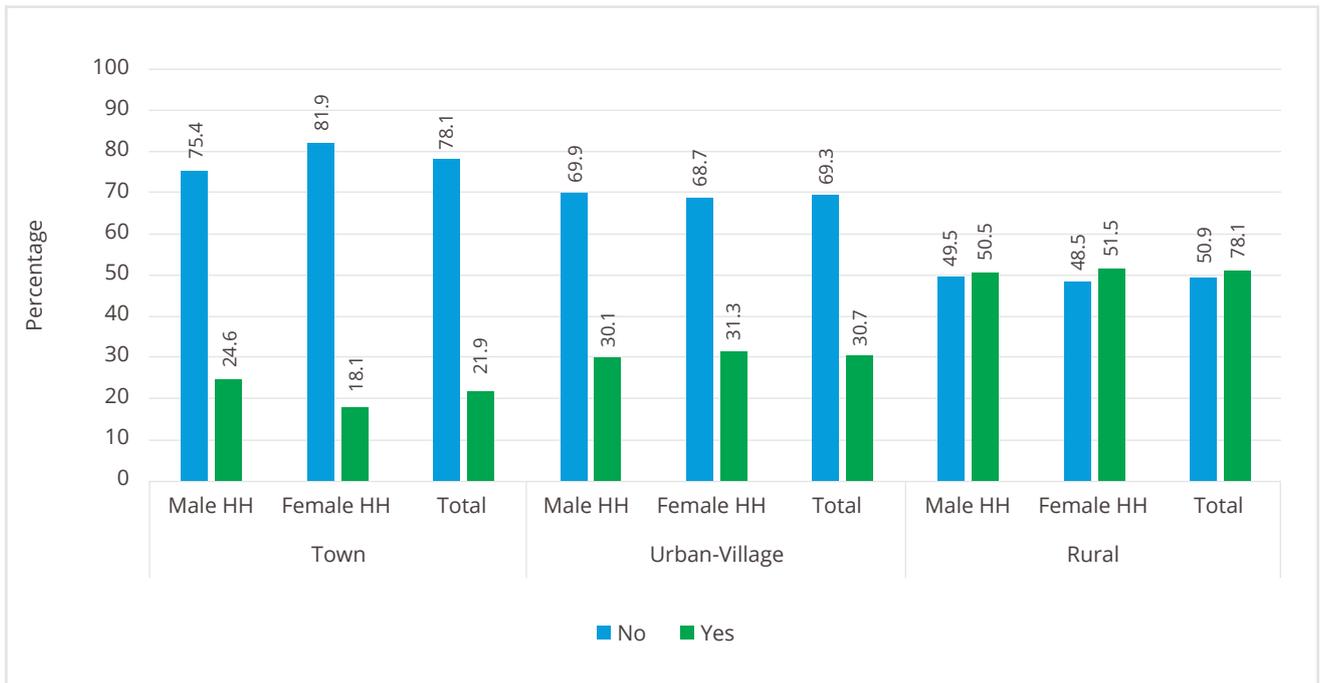


Figure 30: Access to land for housing by gender and type of place of residence



Figure 31: Land acquisition for housing unit by Gender and Type of Place of Residence

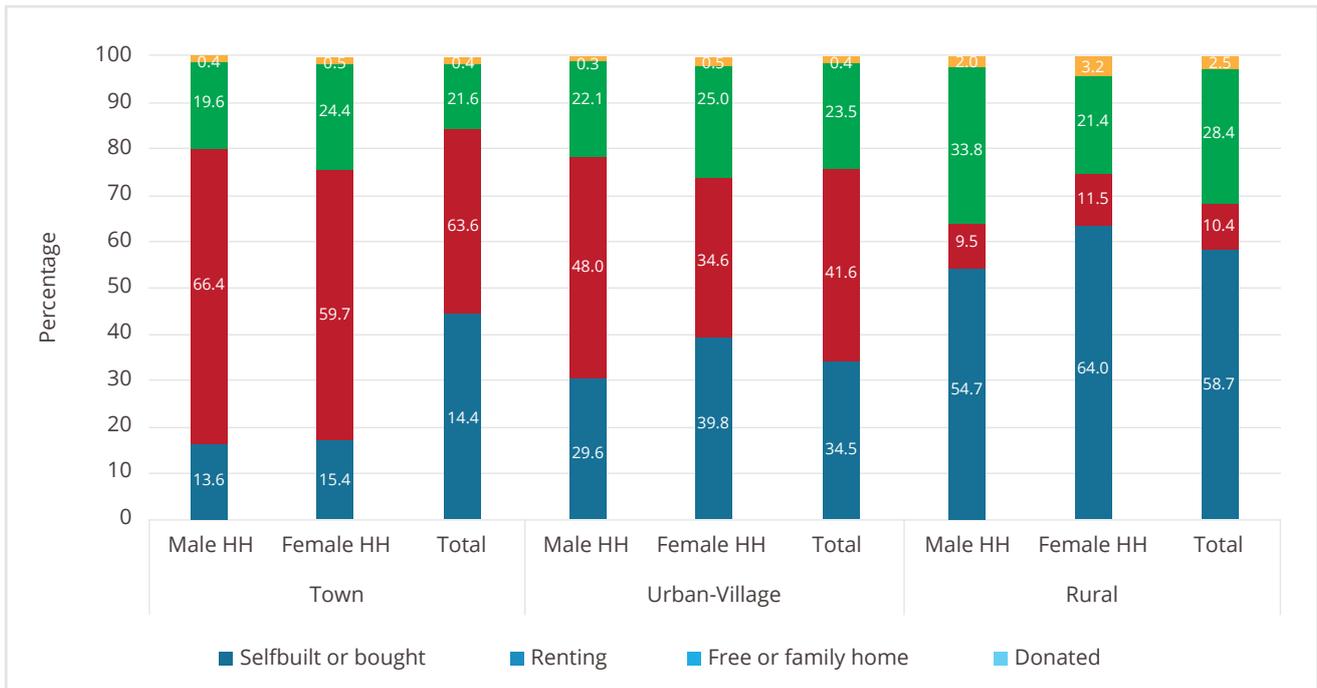


Figure 32: Acquisition of housing unit by gender and type of place of residence by Gender and Type of Place of Residence

Regarding the acquisition of housing units, 42.6 percent of female-headed households built or bought their homes, compared to 34.4 percent of male-headed. Male-headed households were more likely to be renting (39.1 percent vs. 32.3 percent). This suggests women tend to secure ownership more, while men are more engaged in rental housing.

6.5. Property Rights (Land Certificate or Title Deed)

Secure property rights, particularly the holding of land certificates or title deeds represent a critical foundation for economic empowerment, household security, and intergenerational wealth. In Botswana, the legal framework guarantees equal rights for women and men to acquire, own, and transfer land; however, the extent to which these rights translate into equitable control over titled property varies across social and economic groups. Examining gender differences in the possession of land certificates or title deeds therefore provides valuable insight into both the practical functioning of land governance systems and the broader dynamics of gender equality in asset ownership.

This section explores these patterns and their implications for women’s economic agency and land tenure security. Figure 33 shows patterns of ownership of agricultural certificate or title deed by gender and type of place of residence.

Figure 34 shows custodianship of ownership rights of residential certificates or title deeds. The graph shows that ownership of residential certificates or title deeds is exceptionally high across all settlement types in Botswana, with both male-headed and female-headed households reporting levels consistently above 85 percent. This pattern holds in towns, urban-villages, and rural areas, indicating that formal documentation of residential land has become a near-universal feature of household land tenure, regardless of gender or location. The uniformly high rates suggest effective administration by Land Boards and widespread uptake of land registration processes.

Although male-headed households generally show slightly higher individual ownership rates than female-headed households, the differences are marginal and do not indicate substantial

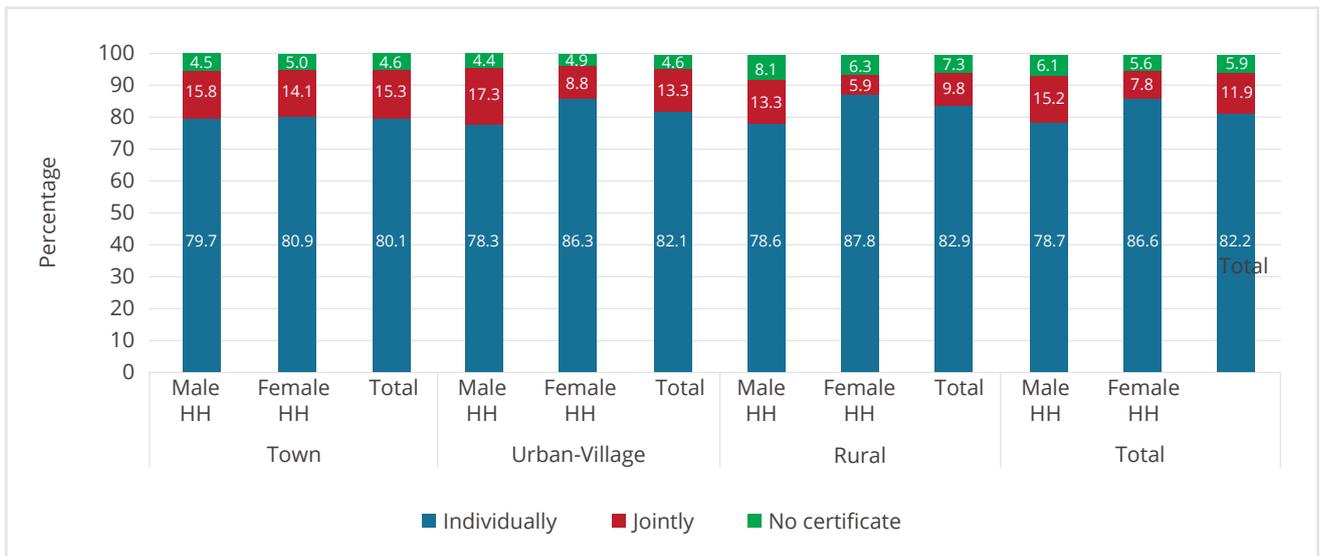


Figure 33: Ownership of Agricultural Certificate or Title Deed by Gender and Type of Place of Residence

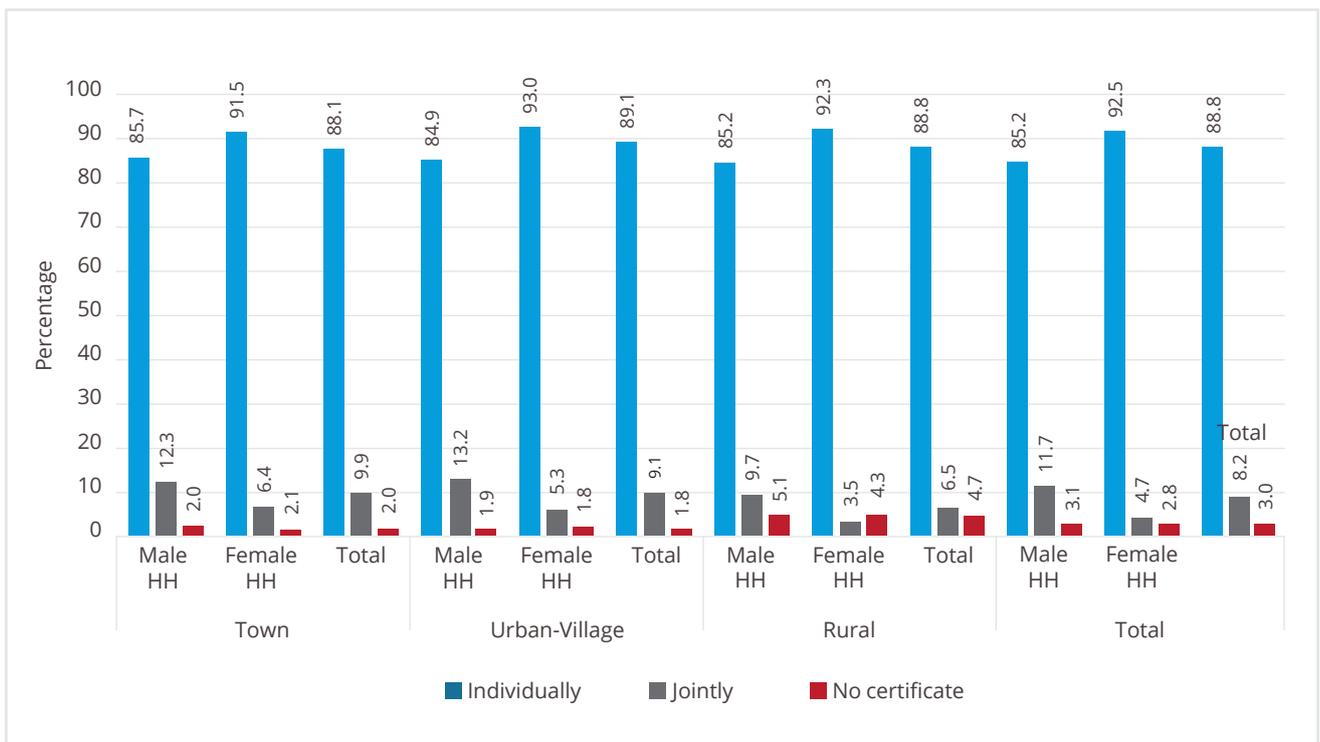


Figure 34: Ownership of Residential Certificate or Title Deed by Gender and Type of Place of Residence



Figure 35: Ownership of Business Certificate or Title Deed by Gender and Type of Place of Residence

gender disparities. Female-headed households maintain similarly high levels of individual title ownership, demonstrating that women are accessing formal land documentation at rates comparable to men, a positive indicator of gender equality in residential land rights.

Joint ownership of residential certificates remains low across all areas, generally below five percent, suggesting that households rarely register residential plots in more than one name. This may reflect cultural norms favouring individual allocation or administrative practices that prioritise single-name registration. Nonetheless, the low levels of joint titling also indicate a missed opportunity for strengthening women’s security in households where male partners traditionally assume the primary ownership identity.

The proportion of households without any certificate is extremely small, typically between one and three percent, and shows little variation by gender or residence. This underscores the effectiveness of Botswana’s land administration system in ensuring that most households, urban and rural alike, hold formal documentation for their residential plots.

Overall, the evidence points to a strong and equitable system of formal residential land rights, with minimal gender gaps in the possession of residential certificates or title deeds. The findings highlight Botswana’s progress toward gender-equal land governance while also signalling areas, such as joint titling, where further policy attention could enhance shared ownership and household-level security for women.

The combined findings on land ownership and land rights reveal that Botswana has achieved substantial equity in residential land access and documentation, with women and men holding residential certificates or title deeds at similarly high levels across all settlement types. However, significant gendered and disability-related disparities persist in the ownership of productive and commercial land, particularly agricultural and general land, where women, and especially women with disabilities, remain underrepresented.

These inequalities reflect deeper structural and socio-cultural barriers that undermine women’s economic agency despite strong legal guarantees of equal land rights. Strengthening gender- and disability-responsive provisions

within Land Boards, simplifying procedures for accessing and transferring productive land, expanding tailored financial and extension support, and promoting joint titling could help close these gaps. A coordinated policy approach that protects formal rights while enhancing equitable access to economically valuable land assets is therefore essential to advancing gender equality and inclusive development in Botswana's land governance system.

6.6. Household Access to Energy by Sex of Head of Household

The data shows minimal gender differences in access to energy, though female-headed households tend to have slightly better access to modern energy sources. For example, 76.6 percent of female-headed households use electricity from the national grid for lighting, compared to 70.9 percent of male-headed households. Conversely, male-headed households are more reliant on off-grid solutions such as solar (11.4 percent vs. 6.1 percent).

When it comes to cooking and heating, traditional fuels (wood, coal, paraffin) still dominate (about 74 percent for cooking and 69 percent for heating), with no significant gender gaps. However, for water heating, male-headed households are marginally more reliant on electricity (53.7 percent vs. 51.9 percent), while female-headed households use traditional fuels more (47 percent vs. 45.1 percent). This points to lingering energy poverty affecting both groups, with a slight tilt against women in access to modern heating for water.

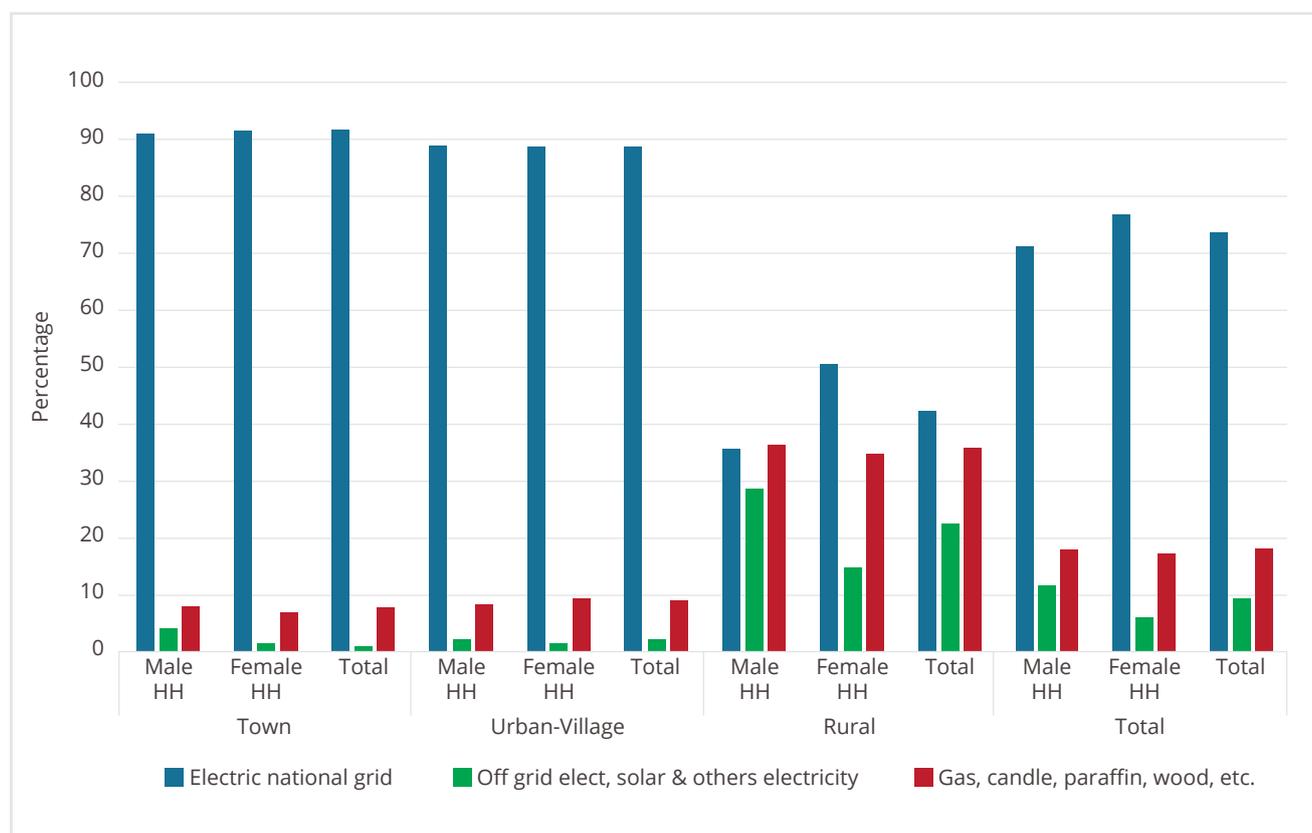


Figure 36: Household Sources of Energy for Lighting by Gender and Type of Place of Residence

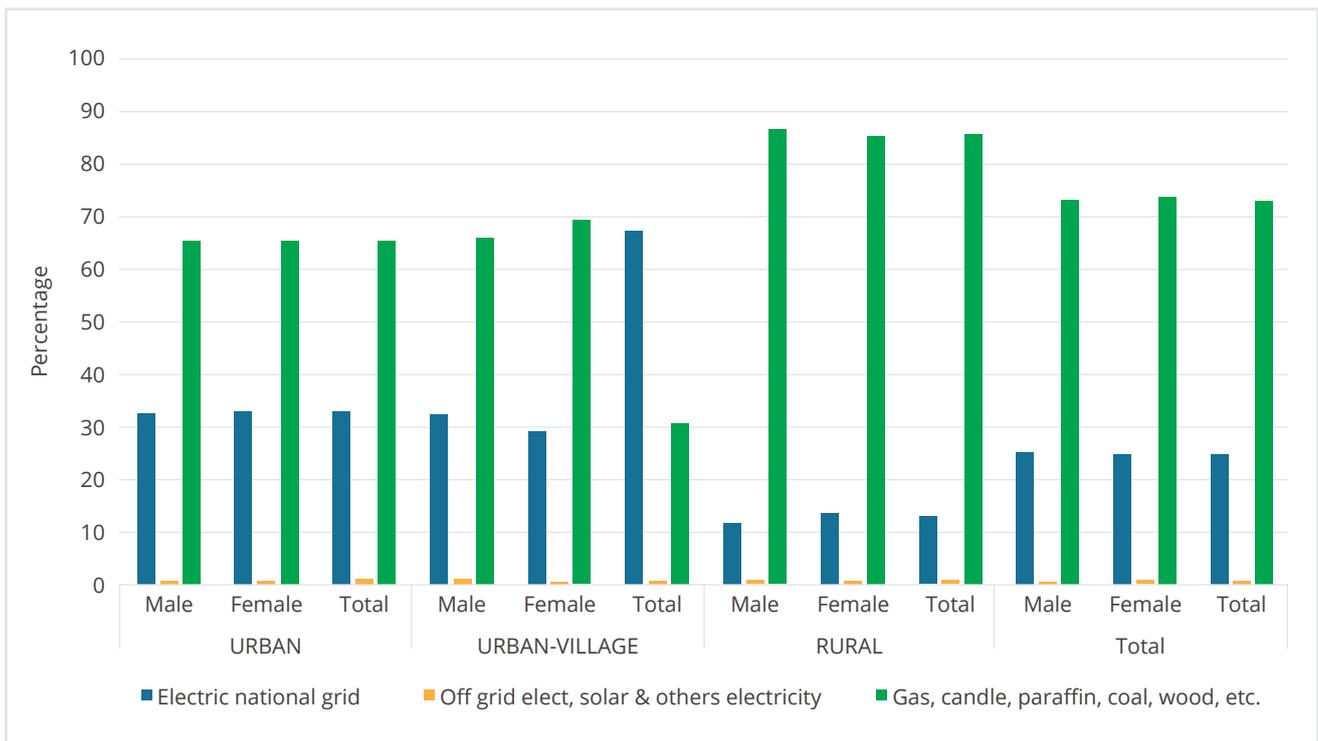


Figure 37: Household Sources of Energy for Cooking by Gender and Type of Place of Residence

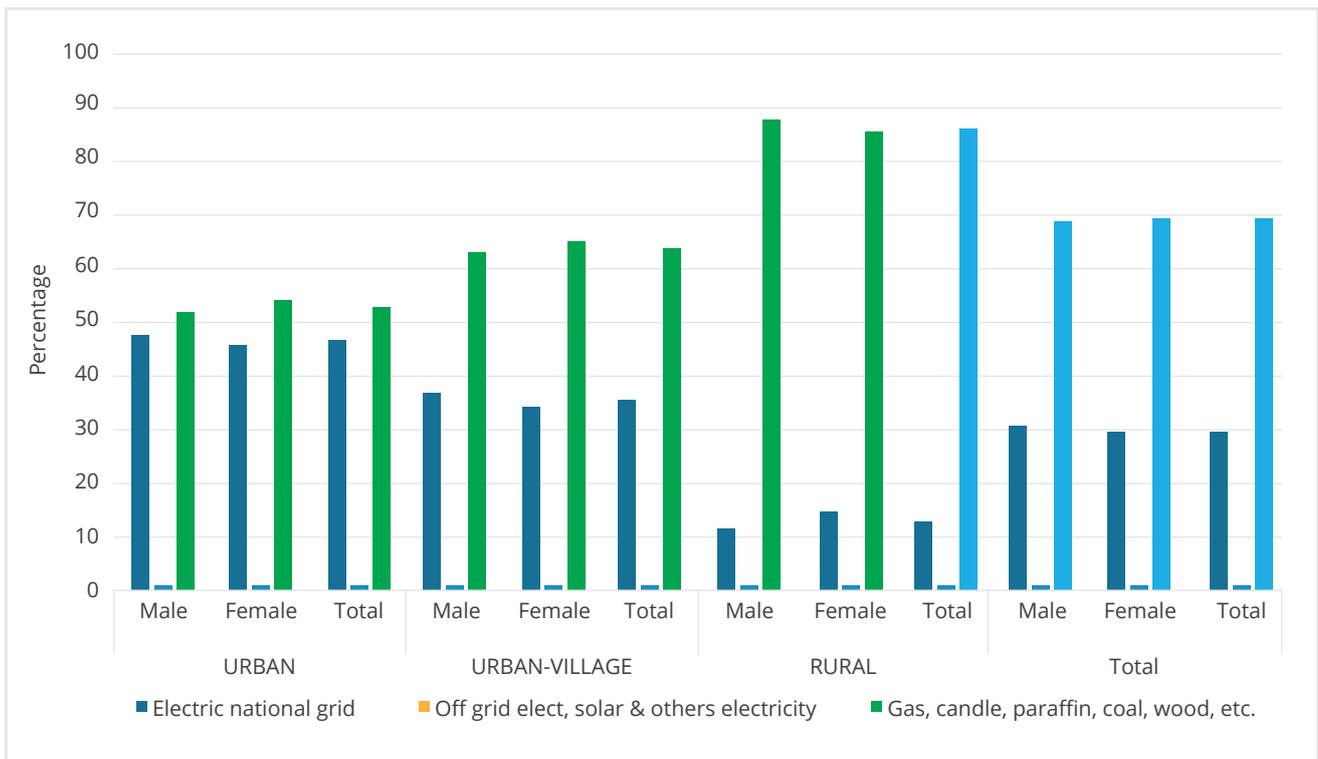


Figure 38: Household Sources of Energy for Heating Space by Gender and Type of Place of Residence

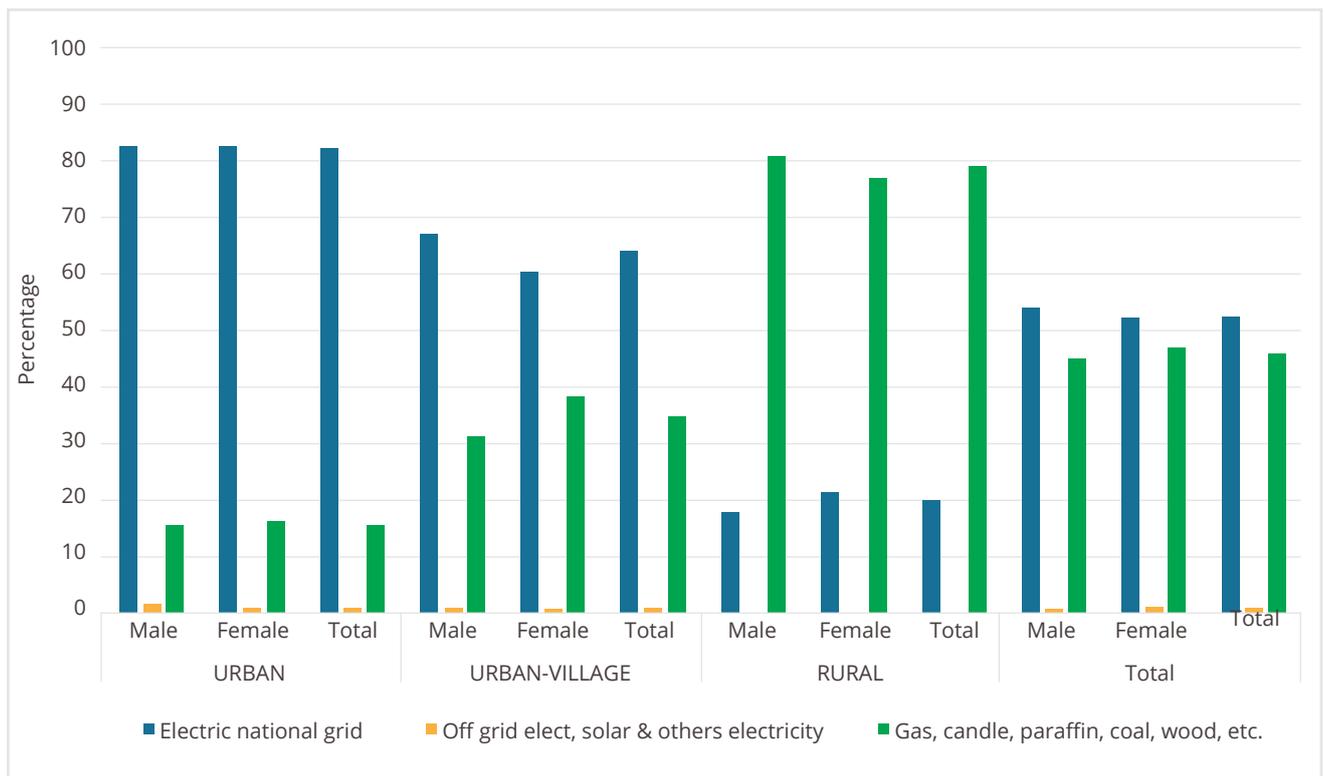


Figure 39: Household Sources of Energy for Heating Water by Gender and Type of Place of Residence

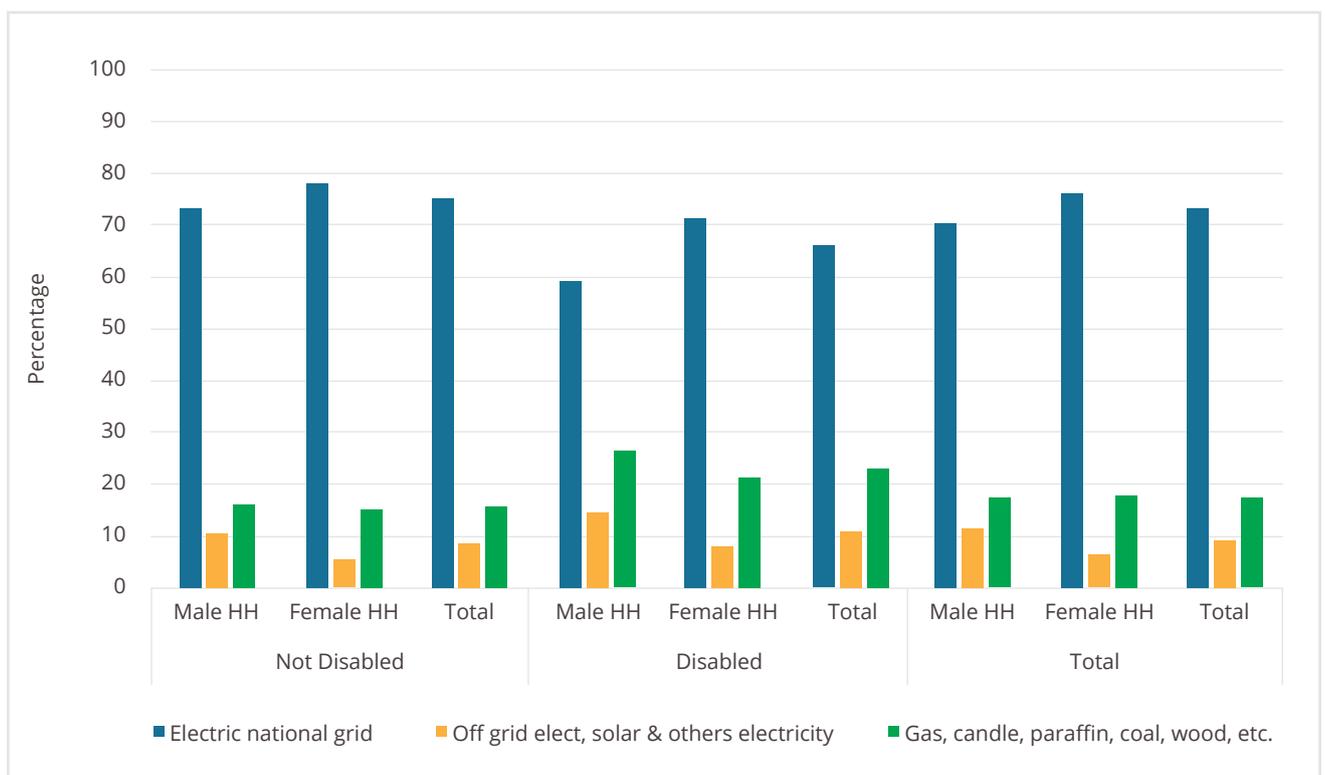


Figure 40: Household Sources of Energy for lighting by Gender and Disability Status

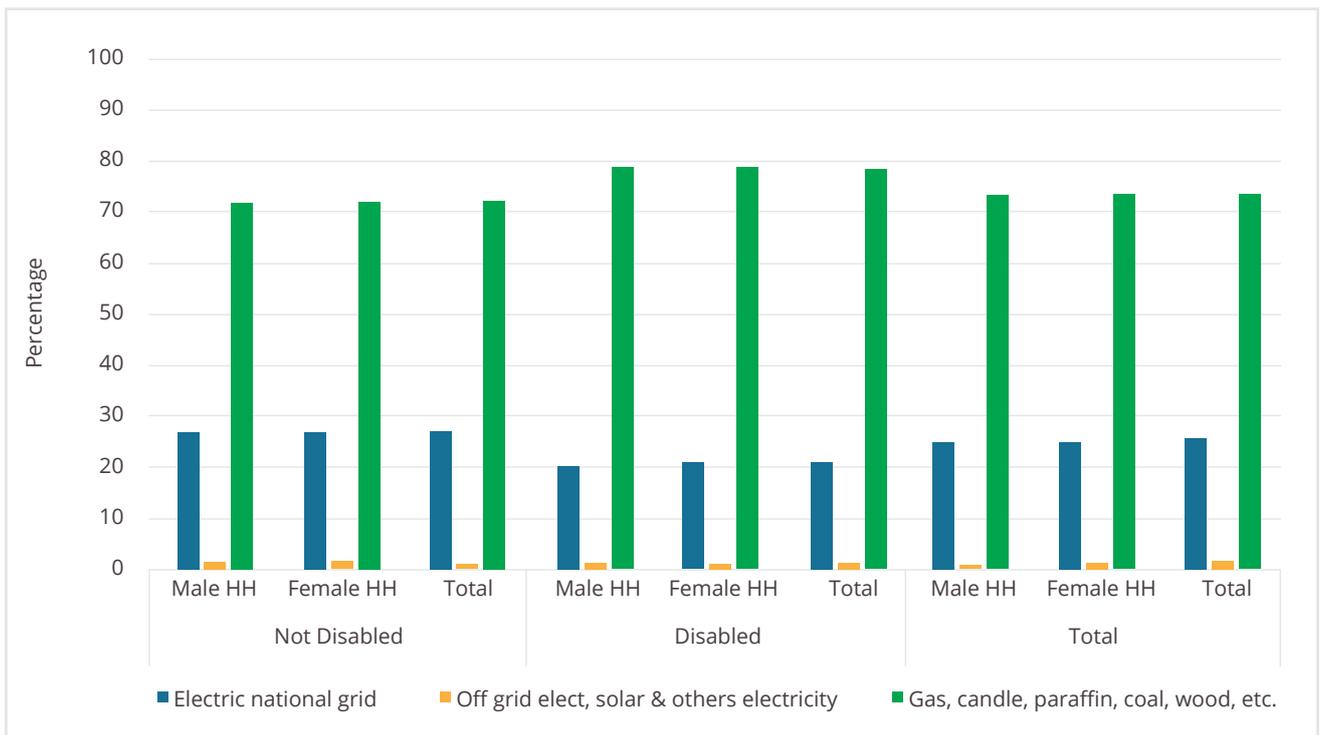


Figure 41: Household Sources of Energy for Cooking by Gender and Disability Status

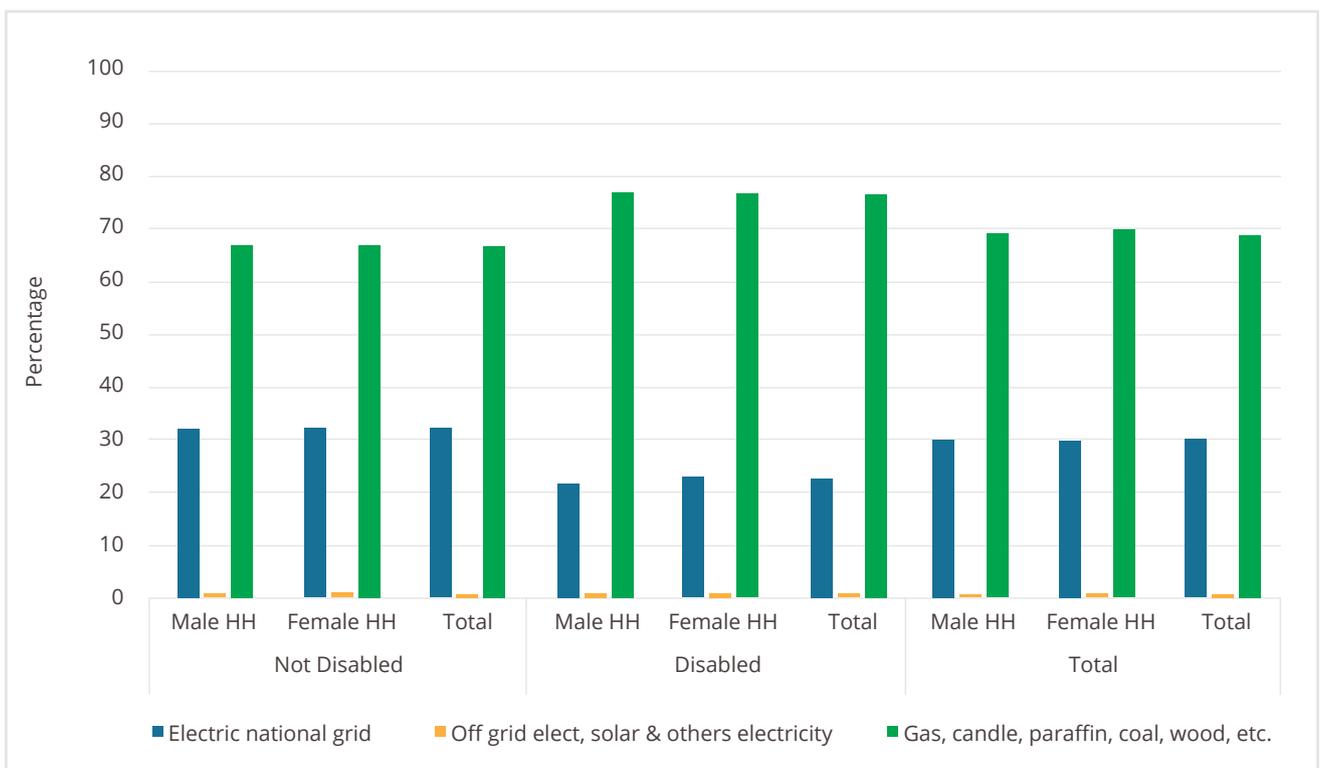


Figure 42: Household Sources of Energy for Heating Space by gender and disability status

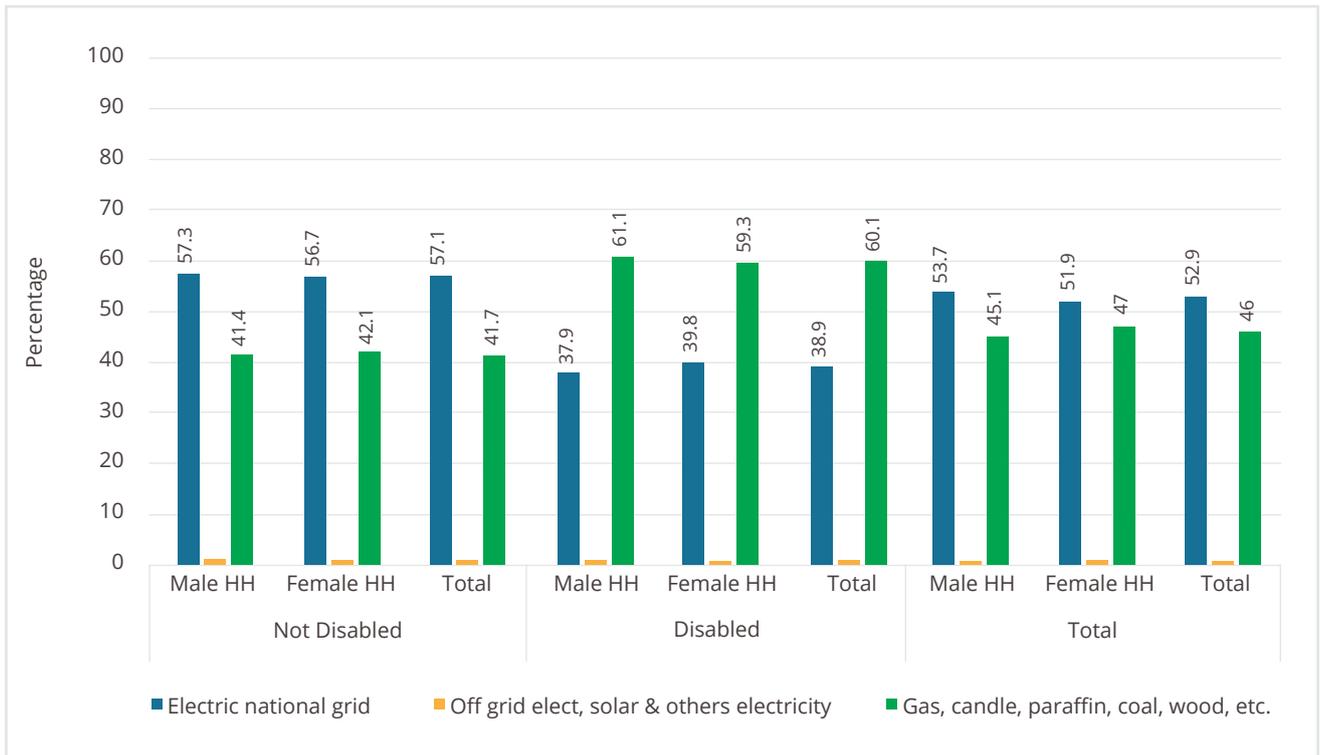


Figure 43: Household Sources of Energy for Heating Water by Gender and Disability Status

6.7. Disability, Vulnerability, and Social Inclusion

Disability and vulnerability are critical dimensions of social inclusion and human development, reflecting the extent to which all citizens can participate fully in economic, social, and political life. In Botswana, disability affects individuals across all age groups and settlements, influencing access to education, employment, healthcare, and community participation. The 2022 Population and Housing Census recorded persons with disabilities as a notable share of the population, highlighting both the progress made in disability inclusion and the continuing barriers to equal opportunity. From a gender perspective, disability often intersects with poverty, age, and location to create multiple layers of disadvantage, particularly for women and girls, who are more likely to face exclusion from education and the labour market, limited mobility, and heightened risk of gender-based violence.

Vulnerability, in the broader sense, encompasses individuals and households whose wellbeing is compromised by economic hardship, health shocks, social exclusion, or limited access to essential services. Groups most affected include persons with disabilities, orphans, the elderly, female-headed and child-headed households, and those living in rural and remote areas. Analysing disability and vulnerability together provides a more complete understanding of social inequality in Botswana, revealing how gender, age, and socio-economic status interact to shape resilience or exposure to risk.

This section therefore examines patterns and determinants of disability and vulnerability through a gender lens, drawing on data from the 2022 Population and Housing Census, national disability surveys, and social protection reports. It highlights disparities in education, employment, health, and access to social assistance, and assesses Botswana's progress toward inclusive development in line with the National Disability Policy (2021), Vision 2036, and Sustainable Development Goal 10 on reducing inequality.

The results reveal a clear gender disparity in disability prevalence. Female-headed households reported higher levels of disability across all types compared to male-headed households. For example, 20.9 percent of female household heads reported difficulty seeing compared to 12.9 percent of males; 9.0 percent reported walking difficulties compared to 4.4 percent among males; and 8.5 percent reported memory difficulties compared to 4.4 percent.

The overall disability indicator shows that 28.5 percent of female household heads live with at least one disability, compared to 18.8 percent of male heads. Furthermore, women are more likely to report multiple disabilities, with 6.3 percent reporting at least two, compared to 3.6 percent of men. This suggests a higher burden of disability among women, which may influence socioeconomic.

Census and survey data confirm that women are slightly more likely than men to report disabilities, especially in vision and mobility. BQMTS reveals that women more often attribute disability to aging, while men more frequently cite accidents. These findings are consistent with Census evidence of women's greater representation in older age groups.

6.8. Disability Prevalence by Sex and Age Group

While examining disability at the household level provides valuable insight into the distribution of households that include persons with disabilities, and the potential implications for caregiving, poverty, and service needs, it does not fully reveal the lived experiences, demographic characteristics, or gendered vulnerabilities of individuals with disabilities themselves. To understand how disability intersects with gender, age, location, and socio-economic status, it is necessary to shift from a household perspective to an individual

or population-level analysis. This transition allows for a more precise assessment of who is affected, the nature and severity of disabilities, and the specific barriers individuals face in accessing education, employment, health services, and participation in community life.

Tables 43 to 46 summarise disability prevalence across disability types, gender, place of residence, and age groups, and further highlight the proportion of individuals living with multiple forms of disability.

6.8.1. Disability by Type and Gender

The distribution of disability types shows notable gender differences across all categories. Women and girls report higher prevalence in functional difficulties such as *seeing*, *walking*, *remembering*, and *self-care*, reflecting both biological and socio-structural factors that shape health risks across the life course. Men, however, show relatively higher proportions in difficulties related to *hearing* and *communication*, which may reflect occupational exposure, risk behaviours, or gender-linked health-seeking patterns.

Overall, the data suggest that women experience a broader range of functional limitations, while men's disabilities tend to be concentrated in fewer but distinct categories. These patterns underscore the gendered nature of disability, with implications for access to assistive devices, long-term care, and social support systems.

6.8.2. Disability by Type, Gender and Age

When disability is analysed by gender and age, the prevalence increases sharply with advancing age for both males and females, but women consistently report higher levels across almost all disability types. Among older women, particularly those aged 60 years and above, difficulties with *walking*, *seeing*, and *remembering* are most pronounced, reflecting cumulative health disadvantages and longevity-associated morbidity.

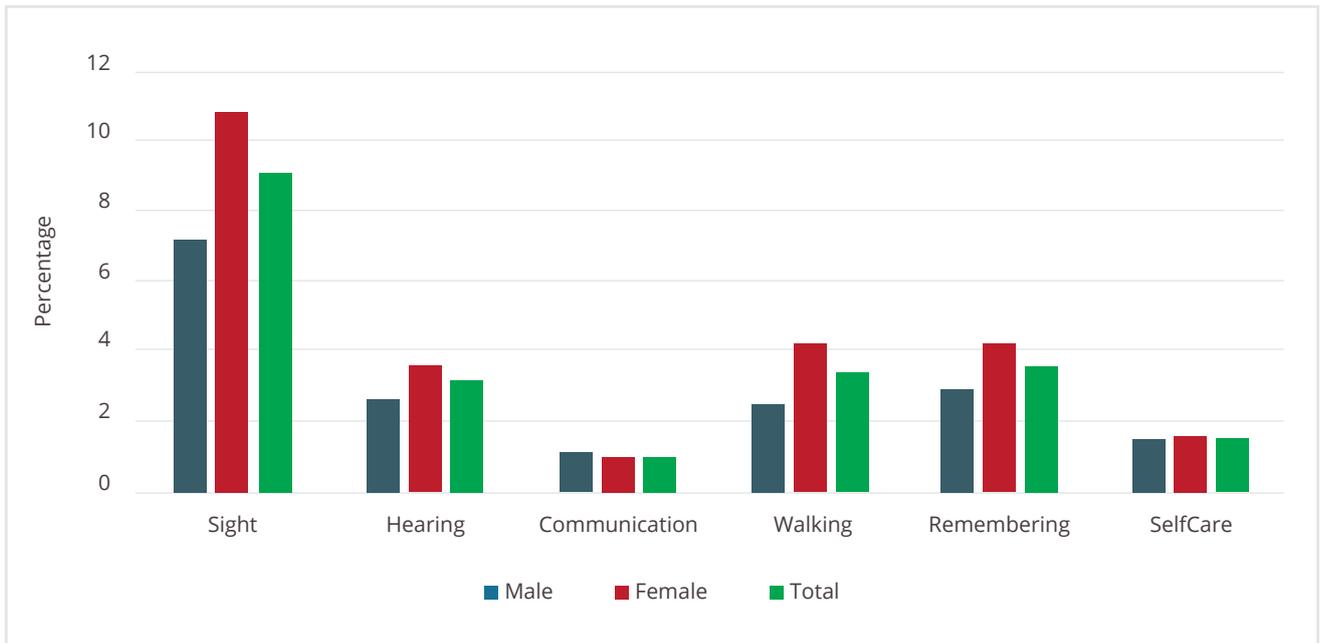


Figure 44: Disability by Type and Gender

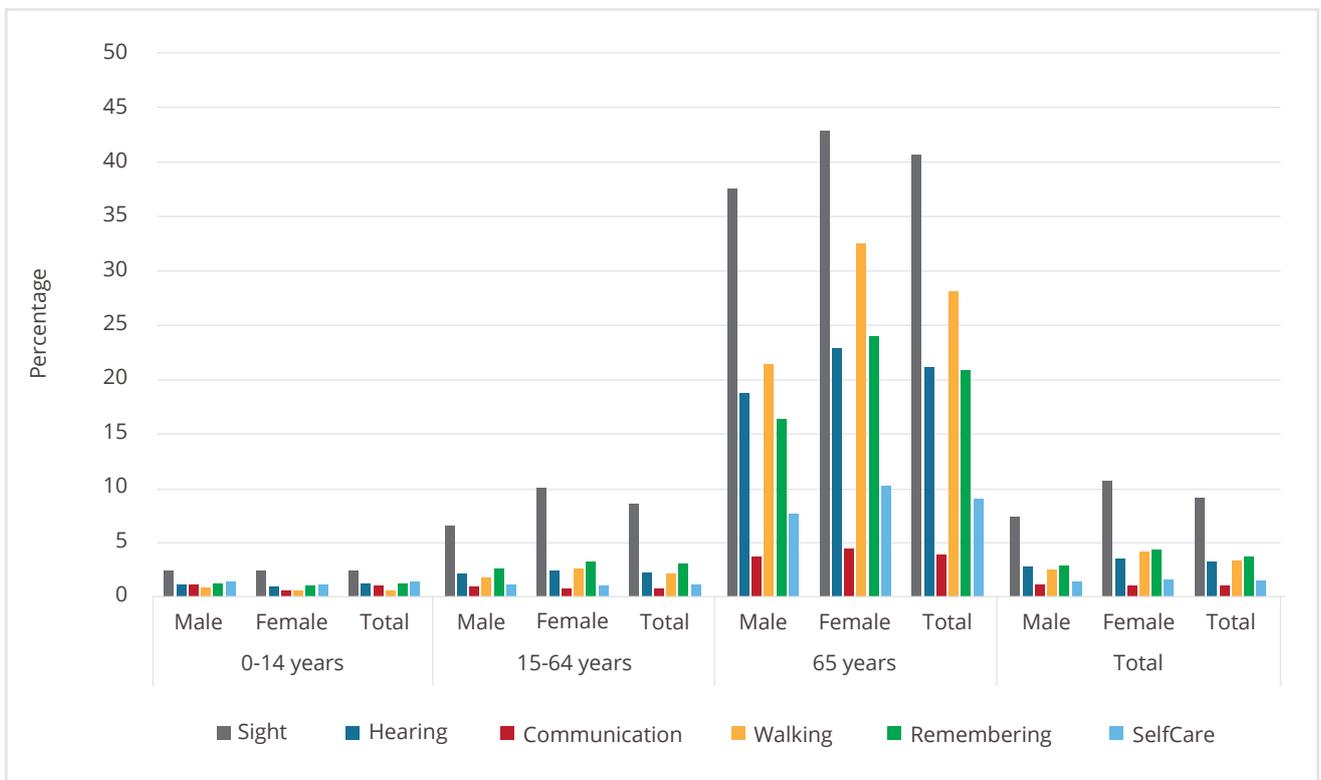


Figure 45: Disability by Type; Gender and Age

Men show a similar age-related increase but with slightly lower prevalence. The gender gap widens with age, indicating that older women are disproportionately affected by functional limitations. This has implications for caregiving needs, access to health services, and the economic vulnerability of older female-headed households.

6.8.3. Number of Disabilities by Age and Gender

The number of disabilities per individual increases significantly with age, and women are more likely than men to experience multiple disabilities, particularly in older age categories. While younger age groups show low levels of multiple disabilities, prevalence increases sharply from middle age onwards, with the highest concentration among women aged 65+ years. This pattern suggests cumulative lifetime disadvantages for women, including unequal access to health care, greater exposure to caregiving burdens, and longer life expectancy.

Men also show an increase in multiple disabilities with age, but the magnitude is lower compared

to that of women. The findings highlight the intersection between gender, ageing, and functional decline.

6.8.4. Proportion with at Least One Form of Disability by Gender and Age

The proportion of individuals reporting at least one disability increases steadily with age, with women consistently exhibiting higher prevalence than men from early adulthood through old age. The widest gender gap appears among older adults, where women’s higher survival rates contribute to the concentration of disability among the elderly female population. Among younger males, the prevalence of at least one disability is slightly higher or comparable to females, reflecting behavioural risks, injury patterns, or early-life health conditions.

However, from middle age onward, women surpass men across all age groups. This shift demonstrates how gendered life-course experiences, such as differential access to nutrition, health services, and socioeconomic resources, shape disability outcomes.

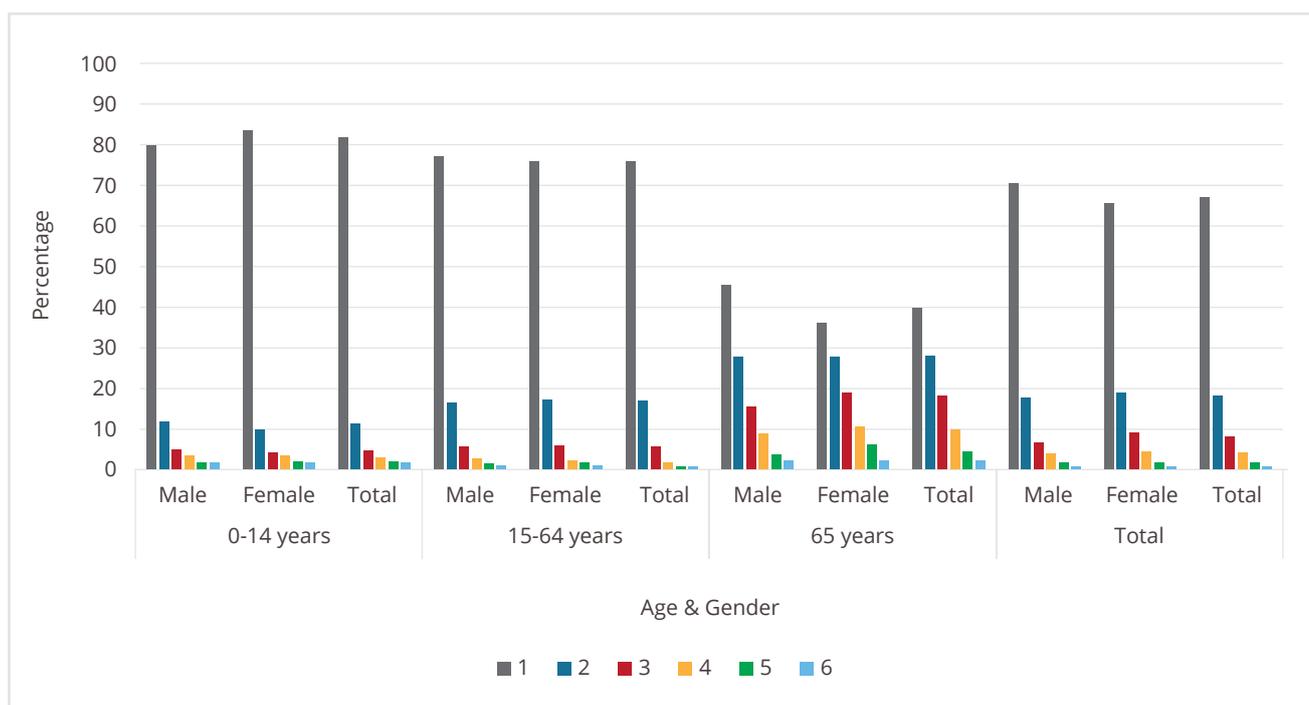


Figure 46: Number of Disabilities by Age and Gender

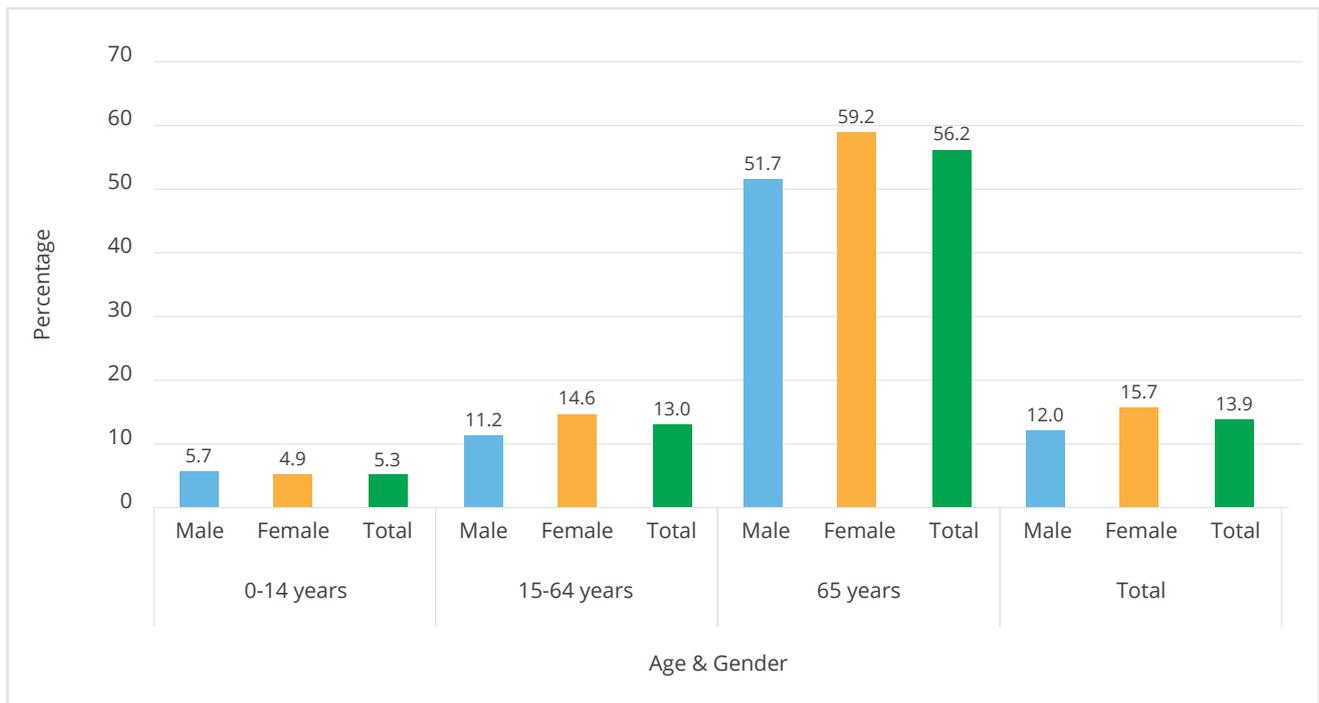


Figure 47: Proportion with at least one form of disability by gender and age

The patterns observed across all four charts point to the need for gender-responsive, disability-inclusive approaches in health, social protection, labour market participation, and community development. Botswana should prioritise early screening and prevention programmes, particularly for women, who experience higher levels of functional limitations and multiple disabilities at older ages.

Strengthening access to assistive devices, rehabilitation services, and community-based care, especially in rural areas, will be essential. Policies must address the heightened vulnerability of older women, including strengthening pension adequacy, expanding long-term care support, and improving social protection coverage for disabled women and female-headed households. In addition, disability services must incorporate tailored approaches for men, particularly in areas such as hearing and communication, where they experience relatively higher prevalence. Ensuring disability accessibility in public buildings, service delivery points, and transport systems should be a national priority.

Finally, integrating disability-disaggregated data into national planning systems will be critical for monitoring progress and designing inclusive programmes that align with SDG 5, SDG 10, and Botswana’s commitments under the CRPD.

Chapter 7 – Gender, Health & Well-Being (Gender Perspective)



7. Introduction & Framework

Health and wellbeing are fundamental dimensions of human development and key indicators of social progress. In Botswana, sustained investment in health infrastructure, disease prevention, and social protection has significantly improved population health outcomes over the past decades. Life expectancy has risen, maternal and child mortality have declined, and access to essential health services has expanded across the country. However, despite these gains, disparities persist between women and men in both health status and access to healthcare, reflecting the influence of biological, socio-economic, and cultural factors.

From a gender perspective, health and wellbeing encompass more than the absence of disease, they reflect differences in exposure to risk, control over health-related decisions, and the ability to access quality care. Women's health outcomes are shaped by reproductive roles, gender-based violence, and unequal access to economic resources, while men face higher risks from lifestyle-related illnesses, occupational hazards, and lower health-seeking behaviour. These gendered patterns highlight the importance of addressing social determinants of health, including education, income, and living conditions, as integral components of health equity.

This section examines trends in life expectancy, fertility, mortality, access to sexual and reproductive health services, and health-seeking behaviour. The analysis also considers emerging challenges such as non-communicable diseases, mental health, and the lingering effects of HIV and AIDS, providing insights into progress

toward SDG 3 (Good Health and Wellbeing) and SDG 5 (Gender Equality).

The Census highlights gender differences in health outcomes. Women report higher HIV prevalence (18.9 percent vs. 14.2 percent for men) and remain vulnerable to maternal mortality, estimated at 144 per 100,000 live births. Gender-based violence also persists, with 37 percent of women reporting lifetime experience of violence.

7.1. HIV Testing and HIV-Positive Status by Household Headship

Figure 48 shows the proportion of households with a household member with HIV test results, and the proportion of households with a member who is HIV positive, by gender of the head of household. More than three quarters (79.7 percent) of households in Botswana have a member with HIV test results, while over a quarter (27.7 percent) of households have a member who is HIV positive.

Botswana has one of the world's highest HIV prevalence rates, with adult prevalence estimated at 20.8 percent in 2021 (UNAIDS, 2022). Gender disparities are pronounced: women, especially young women and those of reproductive age, are disproportionately affected.

The 2021 Census data show that female-headed households are more likely to have members who have tested for HIV compared to male-headed households. This is consistent with the long-standing finding that women in Botswana are generally more proactive in engaging with health services. National survey data have shown that over 90 percent of women aged 15–

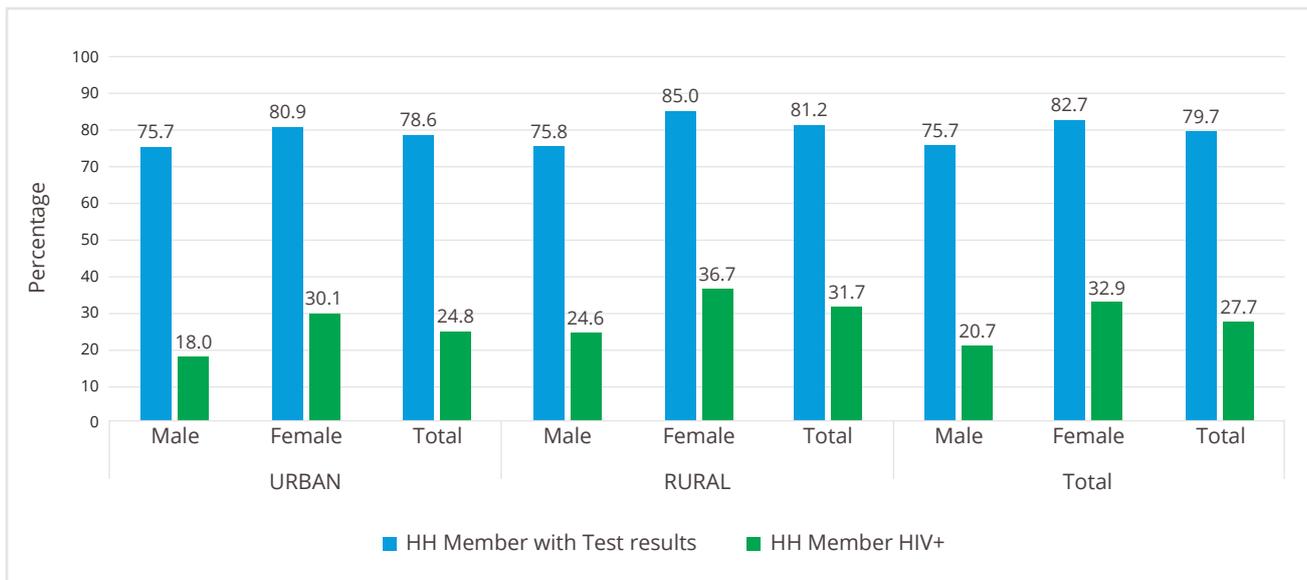


Figure 48: Proportion of Households with a Household Member with HIV Test Results by Gender and Type of Place of Residence

49 had ever tested for HIV, compared to about 80 percent of men (BAIS V, 2021). The role of women as caregivers further reinforces testing within female-headed households, as they are often responsible for managing health needs at the household level.

At the same time, female-headed households are more likely to have a member who is HIV-positive. This reflects both the higher burden of HIV among women in the general population and the socioeconomic vulnerability of female-headed households, which can heighten exposure to risk factors such as transactional relationships and unequal power dynamics in sexual partnerships (NACA, 2022). The presence of an HIV-positive member in the household also increases the caregiving burden, which falls disproportionately on women.

The intersection of household headship and HIV highlights a gendered vulnerability in Botswana's development landscape. Female headship is simultaneously a marker of agency and resilience, demonstrating women's capacity to lead households, and a marker of disadvantage, reflecting socioeconomic and health burdens disproportionately borne by women.

From a policy perspective, these findings highlight several important implications. Female-headed households, being more likely to host HIV-positive members, should be prioritized in social protection initiatives through targeted support such as food assistance, income transfers, and improved access to healthcare services. At the same time, HIV prevention and treatment services must be strengthened in rural areas, where female-headed households are more concentrated, with interventions tailored to improve accessibility and reduce stigma.

Addressing the structural inequalities that drive women's vulnerability also requires deliberate investments in women's access to land, credit, and employment opportunities, consistent with the objectives of SDG 5 on gender equality and SDG 1 on poverty eradication. Moreover, these insights resonate strongly with continental and national development frameworks, including the African Union's Agenda 2063, which prioritizes women's empowerment and the elimination of health disparities, and Botswana's Vision 2036, which underscores gender equality and health security as pillars of sustainable development (Republic of Botswana, 2016).

7.2. Knowledge of Partner Status, and Disclosure of Positive HIV Test Results by Sex

The results in Table 1 Annex 1 shows high HIV testing coverage in Botswana, with slightly higher rates among females (90.7 percent) than males (86.9 percent). Recent testing within the past 12 months also shows a gender gap (35.6 percent for females vs. 31.3 percent for males). Women record a higher HIV-positive prevalence (28.0 percent) compared to men (16.3 percent), consistent with broader epidemiological evidence that women in sub-Saharan Africa bear a disproportionate HIV burden. Knowledge of HIV status and disclosure patterns vary: females are more likely to know their HIV status (25.5 percent vs. 13.9 percent) and to disclose to partners (87.3 percent vs. 78.1 percent) and family (87.4 percent vs. 80.2 percent). Interestingly, disclosure to doctors and friends is fairly balanced across genders. These results highlight gendered vulnerabilities in HIV acquisition, with women more likely to test, know, and disclose, but also more likely to live with HIV.

7.3. Mental Health Conditions by Gender

According to Table 2 Annex 1, there are notable gender disparities in mental health. Women report higher prevalence of depressive symptoms (16.6 percent vs. 14.7 percent), anxiety (14.2 percent vs. 11.8 percent), and worry (14.9 percent vs. 12.7 percent). Overall, 25.6 percent of women had at least one mental health condition compared to 23.1 percent of men. Moreover, women are more likely to report multiple symptoms simultaneously (e.g., 4 conditions: 4.9 percent vs. 3.5 percent). This pattern suggests that mental health issues are more prevalent and more intense among females, potentially reflecting intersecting stressors such as caregiving roles, gender-based violence, and social inequalities.

7.4. Diagnosis with Non-Communicable Diseases (NCDs) by Gender

Hypertension is significantly higher among women (14.5 percent) compared to men (9.0 percent). Women also report higher rates of cancer (0.8 percent vs. 0.2 percent) and other NCDs (4.2 percent vs. 1.8 percent). By contrast, diabetes prevalence is similar across sexes (3.8 percent vs. 3.5 percent). When grouped into an NCD index, 22.5 percent of women reported at least one NCD compared to 15.4 percent of men, and women are more likely to report multiple NCDs (4.3 percent vs. 3.2 percent). These findings underscore that women in Botswana face a higher burden of NCDs, with hypertension standing out as a major gendered health issue. Also refer to Table 3 in Annex 1.

7.5. Access to Medications for Chronic Conditions by Gender

According to Table 4 in Annex 1, access to medications varies by condition and gender. For hypertension, women show slightly higher access (82.7 percent vs. 77.8 percent), consistent with their higher prevalence. For diabetes, access is nearly equal across genders (54 percent). For less common conditions such as heart disease, lung disease, and kidney disease, gender differences appear but the small sample sizes caution against over-interpretation. Interestingly, men report slightly higher access to mental health medication (40.3 percent vs. 33.6 percent), despite women showing higher prevalence of symptoms in Table 2, a potential indicator of gendered inequalities in treatment uptake. Overall, while medication access is generally good for hypertension and diabetes, gaps remain in treatment coverage for other chronic conditions, particularly for women.

7.6. Maternal & Reproductive Health

Maternal and reproductive health remains a central pillar of gender equality, reflecting both women's health outcomes and their broader social and economic wellbeing. Although Botswana has made notable progress in expanding access to reproductive health services, persistent disparities in utilisation, outcomes, and decision-making power continue to reveal the gendered dynamics that shape health experiences across different population groups. Situating maternal and reproductive health within this monograph therefore allows for a deeper examination of how gender norms, structural barriers, and health-system factors interact to influence women's autonomy, access to care, and overall reproductive wellbeing. The following section presents key patterns and emerging issues, offering insights that complement the legal, social, and economic dimensions discussed earlier.

7.7. Maternal Mortality in Botswana

Despite notable strides in maternal health service coverage, Botswana continues to face elevated maternal mortality rates, which remain a significant concern for achieving gender-equitable health outcomes and the broader SDG 3.1 target of reducing the maternal mortality ratio (MMR) to less than 70 deaths per 100,000 live births (World Health Organization [WHO], 2025).

According to the most recent official data published by Statistics Botswana, in 2022 a total of 89 maternal deaths were reported from 50,704 live births, yielding an MMR of 175.5 maternal deaths per 100,000 live births. This figure reflects a decline from the extremely high pre-2022 figure of 240 deaths per 100,000 live births recorded in 2021.

Historical trends show significant year-to-year fluctuation: for example, the MMR declined to as low as 127 per 100,000 in 2016, rose again to 166.3 per 100,000 in 2019 (76 deaths from 58,244 live births) and then surged to 240 in 2021 (128 deaths from 53,326 live births). The 2022 result of 175.5 therefore represents progress, yet still remains more than two-and-a-half times the SDG target.

It is important to note that these figures derive from the vital registration system and live births as reported by Statistics Botswana, rather than being solely based on the 2022 Population and Housing Census. The 2022 Census data informed but did not exclusively provide the MMR value. The 2022 Vital Statistics report notes that births used in the calculation were "adjusted by percent health facility deliveries" and indicates the collaboration of the census data in refining the indicators.

While disaggregation by sub-national region, maternal age, HIV status, and cause of death is limited in the summary published figure, some underlying analyses provide insight. For example, earlier work in Botswana found that hypertensive disorders (pre-eclampsia/eclampsia), obstetric haemorrhage and infections contributed a significant share of maternal deaths, and that women living with HIV had higher risk (Kadima et al., 2014). PMC Given Botswana's generalised HIV epidemic and high antenatal service coverage, interplay between HIV and maternal mortality remains relevant.

The exceptional spike in 2021 (MMR = 240) has been linked in the 2021 report to "Other viral diseases complicating pregnancy, childbirth and the puerperium (28.9 percent)", reflecting the impact of the COVID-19 pandemic on maternal outcomes. The subsequent reduction in 2022 suggests recovery, but the level remains high. In practical terms, an MMR of 175.5 means that for every 570 live births, one maternal death

Table 6: Trends in Maternal Mortality Ratio (MMR) in Botswana, 2018–2022

Year	Number of Maternal Deaths	Number of Live Births	MMR (per 100 000 live births)	Notable Context / Contributing Factors
2018	74	59 825	123.7	Continued decline due to strong antenatal and skilled delivery coverage.
2019	97	58 244	166.3	Rise in indirect causes and delayed referrals.
2020	113	53 955	209.4	Health-system strain during early COVID-19 disruptions.
2021	128	53 326	240.0	Surge associated with COVID-19 complications and indirect viral causes.
2022	89	50 704	175.5	Post-pandemic recovery, yet still more than twice the SDG 3.1 target.

Sources: Statistics Botswana (2024); *Vital Statistics Report 2022*; *Maternal Mortality Ratio 2022 Report*; WHO (2025).

occurred, a risk that is unacceptably high in an upper-middle income country like Botswana.

From a gender perspective, the persistent maternal mortality burden has several implications. First, it undermines women’s reproductive rights, health security and survival, key dimensions of gender equality. Second, high maternal mortality carries social and economic consequences: each maternal death destabilises families, increases orphanhood and imposes costs on health systems and communities. Third, because maternal mortality is deeply linked to service access, quality of care, socio-economic status, and discrimination, the observed rates expose inequities in the health system.

As shown in the table above, Botswana’s maternal mortality ratio (MMR) fluctuated considerably over the five-year period. The MMR fell to a low of 123.7 deaths per 100 000 live births in 2018, but then rose sharply between 2019 and 2021, peaking at 240 in 2021, the highest level in over a decade. The 2022 decline to 175.5 marks a partial recovery but remains significantly above the SDG 3.1 global target of fewer than 70 maternal deaths per 100 000 live births and the African Union’s Agenda 2063 Goal 3 aspiration of reducing preventable maternal deaths by half.

The pattern reflects both direct obstetric causes (e.g., haemorrhage, eclampsia, sepsis) and indirect causes related to HIV infection and viral diseases that complicated pregnancy, especially during the COVID-19 pandemic. Indeed, the 2021 Maternal Mortality Report attributed nearly 29 percent of all maternal deaths to “other viral diseases complicating pregnancy,” highlighting the pandemic’s indirect toll on maternal health outcomes (Statistics Botswana, 2022).

The subsequent improvement in 2022 demonstrates the resilience of Botswana’s health system and its commitment to restoring essential maternal and reproductive health services. Nevertheless, the level of maternal mortality remains unacceptably high for an upper-middle-income country with nearly universal antenatal care coverage and skilled birth attendance rates above 95 percent. Persistent inequalities across districts, delays in emergency obstetric care, and the burden of non-communicable and HIV-related complications continue to elevate risk among women of reproductive age.

From a gender and development perspective, high maternal mortality signifies not only a health-system challenge but also structural gender inequity. It reflects differential access to timely and quality healthcare, women’s limited decision-making power in

seeking care, and broader socio-economic vulnerabilities. Addressing maternal mortality, therefore, requires a multi-sectoral approach; strengthening health-system readiness, improving referral networks, empowering women with reproductive autonomy, and enhancing the completeness and timeliness of civil registration and vital statistics (CRVS) data.

The fluctuations in MMR emphasise the importance of reliable vital registration, disaggregated data and timely mortality audits. Botswana's 2022 Vital Statistics report underlines that the CRVS (Civil Registration and Vital Statistics) system is improving but still faces data quality and timeliness issues.



Chapter 8 – Gender-Based Violence (GBV)

8. Introduction

Gender-based violence (GBV) remains a pervasive human rights abuse and public health challenge in Botswana. UNFPA Botswana (n.d.) estimates that over 67 percent of women have experienced some form of abuse, whether physical, sexual, or emotional, at least once in their lifetime, a figure that is more than double the global average. The Gender-Based Violence Indicators Study conducted by Machisa and Van Dorp (2013) found that approximately 62 percent of women reported experiencing intimate partner violence (IPV), while nearly 29 percent experienced IPV within the preceding 12 months.

More recent evidence from the 2018 Botswana National Relationship Study indicates that 37 percent of women and 21 percent of men have experienced GBV, either by an intimate partner or non-partner (UN Women, 2024). Community perception data from the Afrobarometer Round 9 survey (2022) further corroborate the persistence of GBV: half of all respondents considered violence against women and girls to be common in their community, with 23 percent describing it as “very common.”

This chapter examines the prevalence, forms, and consequences of gender-based violence (GBV) in Botswana, applying a gender and human-rights lens to understand both its scope and underlying risk factors. The analysis covers physical, sexual, emotional, and economic violence across intimate-partner and non-partner contexts, reflecting the multidimensional nature of GBV and its impacts on individuals, households, and communities. The discussion is anchored in national and global commitments to eliminating

violence, including SDG 5.2, the Botswana National Gender-Based Violence Strategy (2022–2027), and Vision 2036’s emphasis on governance, peace, and security. Together, these frameworks provide the foundation for assessing progress, identifying persistent gaps, and highlighting pathways for strengthening prevention and response efforts.

8.1. Prevalence and Forms of Violence

GBV in Botswana manifests in multiple forms, including emotional or psychological violence, physical assault, sexual violence, and economic deprivation (SDDirect, 2022). Emotional violence remains the most reported form, reflecting the normalization of verbal humiliation, control, and intimidation within relationships. Physical violence, such as slapping, beating, and strangulation, affects a substantial proportion of women, while non-partner sexual violence (including rape) has been reported by roughly 11 percent of women (SDDirect, 2022).

Younger women, particularly those aged 18–29 years, are disproportionately affected. Contributing factors include gender norms that reinforce male dominance, economic dependency, and limited access to protective services (Machisa & Van Dorp, 2013). Women living with HIV, adolescent girls, and persons with disabilities face heightened vulnerability to violence and stigma (SDDirect, 2022).

8.2. Reporting and Access to Justice

Underreporting of GBV remains a major concern in Botswana. The 2012 Indicators Study revealed that only about 1.2 percent of survivors of violence reported their experiences to the police

or sought legal recourse (UNDP Botswana, 2013). Factors contributing to underreporting include fear of stigma, lack of confidence in the justice system, economic dependence on perpetrators, and the normalization of violence in intimate relationships. Consequently, a significant gap persists between the prevalence of GBV and the number of cases formally addressed through the legal system.

8.3. Health and Social Impacts

GBV has severe implications for women's health and wellbeing. Survivors often face physical injuries, unwanted pregnancies, sexually transmitted infections (including HIV), and mental health challenges such as depression and anxiety (Peltzer et al., 2020). The intergenerational impact of violence, where children witness or experience abuse, contributes to the perpetuation of violent norms across generations. GBV also undermines national efforts to achieve gender equality, human capital development, and social cohesion.

8.4. Policy and Institutional Response

Botswana has enacted several policy and legal instruments to combat GBV, notably the Domestic Violence Act (2008), which allows both civil and customary courts to issue protection orders. Other policy frameworks include the National Policy on Gender and Development (2015) and the National Gender-Based Violence Strategy (2022–2027), which outline coordinated responses through multi-sectoral collaboration.

Despite these initiatives, implementation gaps persist. Weak institutional coordination, fragmented data systems, and limited survivor support services hinder effective GBV prevention and response (World Bank, 2025). In 2023, the Government of Botswana, through the National Emergency on GBV Campaign, acknowledged the need for urgent, multi-stakeholder engagement to address the escalating crisis (United Nations Botswana, 2023).

8.5. Institutional and Policy Response

Botswana has developed a comprehensive institutional and policy framework to address gender-based violence (GBV), reflecting a sustained national commitment to prevention, survivor protection, and accountability. The legal foundation includes the Domestic Violence Act of 2008, which provides for protection orders and legal remedies for survivors (Republic of Botswana, 2008); provisions on rape, defilement, and sexual assault under the Penal Code and Sexual Offences statutes (Republic of Botswana, 1997); and the Children's Act, which strengthens safeguards for minors and outlines mandatory reporting requirements (Republic of Botswana, 2009). Building on this legislative environment, the National Gender-Based Violence Strategy (2022–2027) sets out a multisectoral framework for coordinated action across prevention, service delivery, capacity development, and justice-sector strengthening (Gender Affairs Department, 2022). Although implementation progress varies across districts, the strategy has helped align government, civil society, and development partners around common priorities.

Institutionally, the national response is coordinated by the Gender Affairs Department (GAD), which provides policy direction, research coordination, and public awareness programming. Operational mechanisms include the Botswana Police Service's specialised GBV Units, which offer victim-friendly reporting and investigation services, and Health Sector GBV Response Teams, which provide medical treatment, psychosocial support, and referral pathways within health facilities (Botswana Police Service, 2021; Ministry of Health, 2020). Community engagement has intensified in recent years, particularly following the declaration of the National Emergency on GBV in 2023, which prompted public mobilisation efforts, community dialogues, and social norm-change campaigns.

Botswana has also strengthened GBV data and monitoring systems, including the Police GBV Register, the routine health-sector reporting system, and nationally representative surveys such as the Botswana Violence Against Children Survey (VACS), which provides critical evidence on childhood exposure to violence and long-term impacts (Ministry of Local Government and Rural Development et al., 2018). These data sources support trend analysis and policy targeting, although gaps remain in data harmonisation, case tracking, and timely reporting. Overall, Botswana's legal, institutional, and community-driven measures reflect an increasingly coordinated national response to GBV, with continued attention needed to implementation capacity, inter-agency coordination, and evidence-driven accountability.

8.6. Gaps in GBV Response

Despite notable progress in strengthening Botswana's legal and institutional framework for addressing GBV, several critical gaps remain in both system-level responses and community norms. At the institutional level, national policies emphasise multisectoral coordination and survivor-centred services, yet implementation is uneven across districts. Many districts still lack fully operational GBV referral protocols, resulting in fragmented service pathways and inconsistent survivor support. Similarly, not all multi-sectoral GBV committees are functional or meet regularly, limiting coordination between police, health services, social workers, and community structures.

Health-sector involvement is also uneven: although national guidelines require all health facilities to offer clinical management of GBV, only a proportion currently provide comprehensive services such as forensic examination, emergency contraception, post-exposure prophylaxis, and psychosocial care. These system weaknesses are compounded by resource constraints, with GBV programming receiving only a small share of the broader

gender-sector budget, restricting the scale and sustainability of prevention and response interventions.

A major cross-cutting challenge is the limited availability, completeness, and integration of GBV data. Existing administrative systems, including the police GBV register, health management information systems, and social services case records, are not fully harmonised, making it difficult to track cases across sectors or assess service quality. Nationally representative surveys such as VACS provide valuable insights but are infrequent, leaving long data gaps. Routine reporting is often inconsistent, underreported, or incomplete, particularly for psychological, economic, and non-partner violence. The lack of reliable, sex-disaggregated, district-level data hampers evidence-based planning, monitoring, and evaluation of GBV interventions.

Community norms and perceptions further constrain progress. Surveys show that a significant minority of the population continues to endorse attitudes that justify violence, particularly within intimate relationships. The persistence of the "wife-beating is justified" belief reflects deep-rooted gender norms that undermine prevention efforts. Afrobarometer (2022) findings indicate that many Botswana perceive GBV as widespread, signalling both heightened awareness and the severity of the problem. However, this awareness has not yet translated into sustained norm change across all communities.

While promising prevention initiatives such as school-based life skills programmes, community dialogues, and faith-based interventions are emerging, their reach varies widely across districts, and they are often not systematically evaluated. These gaps in institutional capacity, data systems, and social norms highlight the need for stronger district-level implementation, improved data integration, increased investment in GBV services, and expanded, evidence-based

community engagement to shift attitudes and reduce the acceptability of violence.

These gaps highlight the need for a more coordinated and well-resourced national GBV response; strengthening of district-level implementation of referral protocols, ensuring that all health facilities provide comprehensive clinical management; and revitalising multisectoral GBV committees to improve service quality and accessibility. Increased and ring-fenced funding for GBV prevention and survivor support is essential, alongside systematic capacity-building for frontline responders. A national priority must be the development of an integrated GBV data system that harmonises police, health, and social services records and supports timely, sex-disaggregated reporting. Finally, community-level prevention efforts should be scaled up and evidence-based, focusing on transforming harmful norms, engaging men and boys, and reinforcing school- and faith-based initiatives to reduce the social acceptability of violence.

Chapter 9 – Gender, Women’s Political Representation and Decision-Making



9. Introduction and Context

This chapter examines the extent and patterns of women’s representation in political and public decision-making structures in Botswana, and explores the structural and social factors that shape women’s participation. Women continue to be underrepresented in elected and appointed leadership roles, despite constitutional guarantees of equality and Botswana’s commitments under Vision 2036, the National Gender Policy, and global frameworks such as the Convention on the Elimination of All Forms of Discrimination against Women (CEDAW) and the Sustainable Development Goals, particularly SDG 5.5, which calls for women’s full and effective participation in political life.

The chapter assesses trends in women’s participation in Parliament, local government councils, senior public service positions, and statutory bodies, drawing on national electoral data, administrative statistics, and recent studies on leadership pathways. It also considers the social, cultural, and institutional determinants that influence women’s access to political power, including party nomination processes, resources, gender norms, and caregiving responsibilities. By analysing both progress and persistent barriers, this chapter provides evidence to inform policy options for strengthening gender-responsive governance and enhancing women’s voice and influence in Botswana’s decision-making spaces.

9.1. Women’s participation in parliament

Women’s participation in political and decision-making processes in Botswana remains notably low, despite the country’s long-standing commitment to gender equality through both

domestic and international frameworks. As of the most recent data, women occupy only 8.7 percent of parliamentary seats, equivalent to six out of sixty-nine members of the National Assembly following the 2024 general elections (Inter-Parliamentary Union [IPU], 2025). This marks a decline from approximately 11 percent in 2019, reflecting a persistent challenge in translating Botswana’s policy and legal commitments into tangible political outcomes (Gender Links, 2025).

9.2. Women’s participation in local government

Representation at the local government level exhibits a similar pattern. Following the 2024 district and municipal elections, women accounted for only 54 of the 609 elected councillors, roughly 8 percent of the total. When nominated councillors are included, women’s participation rises modestly to about 15 percent (Gender Links, 2025). These figures position Botswana well below both the SADC average of 24 percent and the African Union target of 50 percent female representation in national parliaments (UN Women, 2024).

The limited representation of women in politics is not due to an absence of commitment to gender equality. Botswana has ratified the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and acceded to the SADC Protocol on Gender and Development, which both advocate for equal participation of women in governance. Nationally, the National Policy on Gender and Development (2015) and the National Gender and Development Strategy (2016–2020) articulate gender parity as a development priority (Republic of Botswana, 2015). However, the absence of legally mandated

gender quotas or temporary special measures in electoral processes remains a critical barrier to women's advancement in politics (Office of the High Commissioner for Human Rights [OHCHR], 2025).

The nomination and candidate-selection processes within political parties are also major structural impediments. In the 2024 general elections, only 28 women were fielded as candidates out of 258 contestants, representing roughly 10 percent (ConstitutionNet, 2024). Party primaries often favour male aspirants who possess greater financial resources, broader political networks, and stronger internal party support. This structural bias, combined with gender stereotypes and limited campaign funding, continues to undermine women's political competitiveness (Make Every Woman Count [MEWC], 2024).

Cultural and social norms further reinforce women's marginalisation in politics. Traditional expectations of women as caregivers and homemakers conflict with the demands of political life, which requires extensive travel, public visibility, and assertiveness; traits

often perceived as unfeminine in the Tswana sociocultural context. The political arena has thus remained a predominantly male domain, particularly at the national level. Financial barriers also persist, as women are less likely to access campaign financing, media visibility, or the political patronage necessary to sustain candidacies (Gender Links, 2025).

The consequences of this under-representation are significant. Women's limited participation in political decision-making constrains the diversity of perspectives in parliamentary debate and policy design. Issues such as gender-based violence, reproductive health, childcare, and equal pay may therefore receive inadequate attention or resources. From a governance perspective, low female participation also weakens Botswana's ability to meet its commitments under Sustainable Development Goal 5.5, which calls for women's full and effective participation and equal opportunities for leadership at all levels of decision-making.

In recent years, several stakeholders including civil society organisations, women's movements, and academic networks have called for reforms

Table 7: Trends in Women's Representation in Political Decision-Making in Botswana (1999–2024)

Year / Electoral Period	Women in Parliament (percent)	Women in Local Councils (percent)	Notes / Key Developments
1999 General Election	11 percent (6 of 57 seats)	19 percent	First election after CEDAW ratification; initial gains in female representation.
2004 General Election	11 percent (7 of 64 seats)	18 percent	No quota system; minor improvement attributed to civic campaigns by women's NGOs.
2009 General Election	7.9 percent (5 of 63 seats)	17 percent	Decline linked to internal party nomination dynamics and reduced donor support for gender advocacy.
2014 General Election	9.5 percent (6 of 63 seats)	14 percent	Government launches National Policy on Gender and Development (2015).
2019 General Election	11 percent (7 of 64 seats)	18 percent	Slight recovery; civil-society pressure for temporary special measures increases.
2024 General Election	8.7 percent (6 of 69 seats)	8 percent elected / ≈15 percent incl. nominated	Representation declines again; still far below SADC target of 50 percent.

Sources: Inter-Parliamentary Union (2025); Gender Links (2025); SADC Gender Protocol Barometer (2023); Statistics Botswana (2024).

to enhance women's representation. Suggested measures include the introduction of party-level quotas, capacity-building for female aspirants, and gender-responsive electoral financing. Comparative experiences from the region, such as Rwanda and South Africa, demonstrate that the adoption of quota systems can rapidly transform women's political representation, providing a compelling model for Botswana's consideration (Inter-Parliamentary Union, 2025; SADC Gender Protocol Barometer, 2023).

Thus, while Botswana has established strong normative and institutional commitments to gender equality, the country continues to face deep-rooted structural and sociocultural obstacles that limit women's access to political office. Bridging this gap requires deliberate legislative reform, internal party transformation, and societal efforts to challenge patriarchal norms. Empowering women to participate fully in governance is not merely a matter of fairness but also a prerequisite for inclusive, responsive, and sustainable development.

As the data show, women's political representation in Botswana has remained below 12 percent for over two decades, with periodic fluctuations but no sustained upward trajectory. The modest gains achieved between 1999 and 2019 have not been consolidated; instead, the 2024 elections marked another decline in female participation both in Parliament and in local government.

This persistent stagnation reflects the combined influence of institutional inertia, party nomination biases, and cultural constraints that continue to disadvantage women in the political arena. The absence of legally binding gender quotas or temporary special measures has made Botswana an outlier within the Southern African Development Community (SADC) region, where many member states have adopted such mechanisms with demonstrably positive results. For instance, Namibia, South Africa, and

Mozambique have achieved representation rates above 40 percent through proportional-representation systems or party-level quotas (SADC Gender Protocol Barometer, 2023).

From a policy perspective, Botswana's trajectory underscores the need for a multi-pronged strategy that includes legislative reform, gender-sensitive political financing, and sustained civic education targeting both women aspirants and party leadership. Without structural interventions, women's representation is unlikely to reach the thresholds envisaged under Agenda 2063 Goal 17 and Sustainable Development Goal 5.5, which call for full and effective participation of women at all levels of decision-making.

Chapter 10 – Gender, Cultural and Social Norms



10. Introduction and Conceptual Overview

This chapter explores the cultural and social norms that shape gender relations in Botswana, recognising that gender inequality is not only a product of economic or legal structures but is also deeply rooted in long-standing social values, belief systems, and everyday interactions. Botswana's cultural heritage, including Setswana customary practices, kinship systems, rites of passage, and expectations around masculinity and femininity continues to play a central role in defining the rights, responsibilities, and opportunities available to women and men.

Socialisation processes within families, schools, and communities reinforce these expectations, influencing attitudes toward leadership, labour roles, sexuality, caregiving, and decision-making. Religious traditions, both Christian and traditional, further contribute to shaping perceptions of gender roles and authority, often promoting values that support social cohesion while sometimes limiting women's agency and public participation.

Understanding these cultural dimensions is essential because norms and beliefs often operate beneath formal institutions, subtly influencing how laws are interpreted, how policies are implemented, and how individuals navigate social and economic life. Persistent norms that privilege male authority, reinforce rigid gender roles, or normalise certain forms of violence and discrimination continue to affect women's access to resources, mobility, and opportunities.

At the same time, Botswana is undergoing social change: urbanisation, education, media exposure, and youth-driven activism are contributing to shifts in attitudes toward gender equality.

10.1. Patriarchal Structures and Gender Roles

Cultural norms in Botswana, as in much of Southern Africa, remain deeply rooted in Setswana traditions that historically emphasize patriarchal authority, seniority, and lineage through the male line. While these cultural values provide social cohesion and identity, they also shape gender relations by defining expectations, rights, and roles of women and men in ways that frequently disadvantage women (Ndlovu & Mutale, 2021).

Traditional Tswana society is patrilineal and patrilocal, with inheritance and family leadership passing through male lineage. Men are regarded as heads of households and custodians of family property, while women are expected to manage domestic affairs and caregiving responsibilities (Molokomme, 1991). This division reinforces gendered power relations, limiting women's participation in decision-making both in the family and community spheres. Even as Botswana's Constitution guarantees equality before the law, customary practices continue to prioritize male authority in matters of marriage, inheritance, and land allocation (Republic of Botswana, 2015).

10.2. Marriage, Inheritance, and Property Rights

Customary law and cultural expectations historically positioned women as dependents of male relatives or husbands. Although progressive legislation such as the Abolition of Marital Power Act (2004) and subsequent

amendments to the Land Policy (2020), has expanded women's legal rights, implementation remains inconsistent. In practice, local customary courts sometimes continue to apply norms that favour men in property division, inheritance, and custody cases (Macharia, 2019). Consequently, women's economic empowerment and access to productive resources remain constrained, especially in rural settings where customary law predominates.

10.3. Socialisation and Gender Stereotypes

Cultural socialisation reinforces gender stereotypes from an early age. Boys are encouraged to display strength, assertiveness, and independence, while girls are often socialised into nurturing, submissive, and domestic roles (Mookodi & Letamo, 2018). These expectations affect educational and occupational choices, contributing to women's underrepresentation in science, technology, engineering, and mathematics (STEM) fields and in leadership positions. Traditional notions of masculinity can also perpetuate harmful behaviours, such as tolerance of intimate partner violence or resistance to male involvement in caregiving (UNFPA Botswana, 2023).

10.4. Marriage, Polygamy, and Gender-Based Violence

In certain communities, cultural acceptance of polygamy and bride price (*bogadi*) practices continues to influence marital relations and women's autonomy. While *bogadi* is culturally valued as a sign of union between families, it may reinforce perceptions of women as property, thereby normalising male dominance in marital decision-making. These cultural dynamics intersect with gender-based violence (GBV): studies show that women in unions where traditional male dominance is strongly endorsed are more likely to experience intimate partner violence (Machisa & Van Dorp, 2013).

10.5. Religion, Modernity, and Cultural Transformation

Christianity, which is practised by over 85 percent of Botswana, interacts with traditional beliefs in complex ways. Some religious interpretations reinforce patriarchal gender hierarchies, for example, restricting women's leadership in congregations, while others promote gender equality and social justice. Meanwhile, urbanisation, education, and global exposure are gradually reshaping gender norms, particularly among younger generations and in urban centres (UN Women, 2024). Nonetheless, the pace of cultural change is uneven, and traditional expectations remain powerful in rural areas.

10.6. Implications for Gender Equality

Cultural norms in Botswana both enable and constrain gender equality. While they promote community solidarity and identity, they also perpetuate unequal power relations and restrict women's access to economic, political, and social opportunities. Addressing gender disparities therefore requires not only legal reforms but also transformative cultural and behavioural change, including community engagement with traditional leaders, faith-based organisations, and men's groups. Efforts to promote positive masculinities, intergenerational dialogue, and rights-based education are key to shifting entrenched norms and advancing Botswana's commitments under Agenda 2063, CEDAW, and SDG 5.

10.7. Policy and Legislative Framework

Botswana has ratified key international frameworks, including the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) and the SADC Protocol on Gender and Development. National gender policies have been developed, yet implementation gaps persist, particularly in enforcement mechanisms and resource allocation.

Chapter 11 – Closing The Gender Gaps



11. Discussion

The analysis presented demonstrates that Botswana has made commendable progress toward gender equality, supported by a relatively strong legal and policy framework, improved access to services, and widespread recognition of women's rights. Yet, the evidence shows that gender disparities remain deeply embedded in social, economic, and political structures, intersecting with inequalities linked to age, disability, geographical location, and socio-economic status. These patterns reflect a persistent gap between formal commitments and their translation into transformative outcomes for women and girls.

The legislative and policy environment provides a solid foundation, with Botswana being a signatory to several international and regional gender equality instruments, including CEDAW, the SADC Protocol on Gender and Development, and the AU's Agenda 2063. However, the qualitative findings underscore the need for a more coherent implementation architecture, strengthened coordination mechanisms, and a reinvigorated national gender strategy. Stakeholders consistently highlighted fragmented institutional responsibilities, uneven gender mainstreaming capacity, and limited monitoring frameworks as factors that hinder the effective operationalisation of gender commitments.

Demographic patterns reflect major societal shifts, including the increasing prevalence of female-headed households, the ageing of the population, and the growing demand for care services. Female-headed households, now representing more than 45 percent of all households, often carry a disproportionate burden of economic insecurity, unpaid care responsibilities, and

limited access to productive assets. Although women's leadership in household management is increasingly visible, the persistence of patriarchal social norms continues to shape decision-making and resource allocation at both household and community levels.

Education data reveal significant achievements in gender parity at primary and secondary levels, but gendered subject choices remain pronounced. Women are underrepresented in STEM fields, vocational training, and technical programmes, while men remain more prominent in higher-paying, industrial, and technical occupations. The qualitative narratives point to entrenched perceptions of gender-appropriate subjects and occupations, suggesting that stereotypes continue to influence young people's choices despite policy efforts to promote gender inclusivity.

Economic participation remains one of the most critical gender gaps. Although women participate actively in the labour force, they experience higher unemployment rates, lower wages, and limited mobility into high-growth sectors. Occupational segregation persists, with women concentrated in care-oriented, administrative, and informal jobs, while men dominate in technical and leadership roles. Access to land, credit, and productive assets remains unequal, particularly in rural areas where agricultural land ownership is heavily skewed in favour of men. Women with disabilities experience compounded disadvantage due to limited accessibility, discrimination, and lower access to productive resources.

Health and reproductive health outcomes (Chapter 6) show marked progress in service

coverage, including antenatal care, skilled birth attendance, and HIV treatment. However, reproductive health challenges persist, particularly for adolescents and young women facing high HIV incidence, limited access to youth-friendly services, and gendered barriers to contraceptive use. Mental health concerns emerged strongly in qualitative findings, particularly among women experiencing domestic violence, socio-economic stress, and care burdens.

Gender-Based Violence remains one of Botswana's most pervasive human rights and public health challenges. Despite legislative reforms, GBV prevalence remains high, affecting approximately one in three women. Survivors face complex barriers, including stigma, fear of retaliation, inconsistent quality of services, and perceived insensitivity of law enforcement. The qualitative narratives highlight deep-rooted social norms that normalise violence, unequal power relations, and limited male engagement as major obstacles to eliminating GBV.

Political participation represents one of the starkest gender disparities, with women holding only 11 percent of parliamentary seats. Cultural perceptions of leadership limited financial support for female candidates, and male-dominated political party structures contribute to underrepresentation. Women in traditional leadership structures also remain few, reflecting the persistence of patriarchal norms.

Social and cultural norms continue to shape gender roles, power dynamics, and expectations in ways that limit women's autonomy and reinforce male privilege. Qualitative accounts reveal ongoing tension between progressive legal ideals and deeply entrenched customary practices in areas such as inheritance, marriage, and division of labour. While there is increasing openness to more egalitarian norms, especially among youth, changes remain slow and uneven across regions.

Finally, data on asset ownership and land rights highlight both progress and persistent inequalities. Residential plot ownership is nearly universal and shows minimal gender disparity. However, access to agricultural and commercial land remains unequal, and joint titling is rare. Women with disabilities face particularly limited access to productive land and capital assets, demonstrating how gender intersects with disability to reinforce exclusion.

Overall, Botswana presents a dual reality: the legal and policy environment increasingly reflects gender equality principles, yet structural barriers, shaped by norms, resources, institutions, and economic systems, continue to limit women's full participation in social and economic life. Closing the gender gaps will require not only legal reform, but also strategic investments in gender-responsive governance, comprehensive behaviour change initiatives and strengthened accountability mechanisms.

11.1. Conclusion

The available data confirms that Botswana has made tangible progress in promoting gender equality across multiple spheres. Improvements in education access, reproductive health outcomes, household living conditions, and legal protections highlight the country's commitment to advancing the rights of women and girls. More women are accessing education, gaining leadership roles within households, and benefiting from expanded health and social services.

However, persistent gender inequalities remain, and these are deeply rooted and multidimensional. Women continue to face significant barriers in economic empowerment, access to productive assets, representation in political and decision-making structures, and protection from gender-based violence. These disparities are further compounded by intersecting factors such as disability, age, rural residence, and socio-economic status.

To close these gaps, Botswana requires a reinvigorated national gender framework grounded in strong institutions, adequate financing, and robust accountability systems. The need for updated strategies, clear implementation plans, and integrated monitoring mechanisms is urgent. Transformation will require coordinated action from government, civil society, development partners, traditional authorities, the private sector, and communities.

Investing in gender data systems is essential to guide this process. Without reliable, timely, and disaggregated data, progress cannot be accurately measured, and interventions cannot be effectively targeted. A national gender data repository, periodic gender audits, and strengthened statistical capacities will support evidence-based policymaking and accelerate progress.

This monograph serves not only as a diagnostic analysis but also as a roadmap for advancing Botswana's commitments to gender equality, equity, and human rights. By addressing persistent inequalities and leveraging demographic, social, and economic opportunities, Botswana can ensure that women, men, girls, and boys contribute to and benefit from national development in equal measure. Achieving this vision is central to the aspirations of Vision 2036, the Sustainable Development Goals, and Agenda 2063, and essential to creating an inclusive and prosperous future for all.

11.2. Recommendations for Closing the Gender Gaps

1. Legal and Policy-Level Actions

1.1. Enact a standalone Gender Equality Act

- Codify equality rights, define discrimination, and establish binding obligations for ministries.
- Provide legal backing for gender mainstreaming, GBV protection, and enforcement mechanisms.

- Harmonise customary and statutory laws with constitutional equality provisions.

1.2. Revive and update the National Gender Strategy

- Develop a fully costed and time-bound strategy aligned with Vision 2036, SDGs, and Agenda 2063.
- Include clear indicators, a financing framework, and annual reporting obligations.

1.3. Introduce Temporary Special Measures (TSMs) for political representation

- Encourage political party reforms to promote inclusive candidate selection processes.
- Enact legislative or party-based quotas for women in Parliament and local government.
- Provide public financing incentives for parties that meet gender-parity thresholds.

1.4. Strengthen land and property rights enforcement

- Amend land legislation to promote joint titling by default.
- Strengthen appeal mechanisms for women denied customary land allocations.
- Introduce safeguards for widows, divorced women, and women with disabilities.

2. Institutional-Level Actions

2.1. Establish a dedicated Ministry for Gender Equality and Social Inclusion

- Elevate the gender mandate for greater authority, coordination, and accountability.
- Strengthen capacity for cross-sectoral gender budgeting and policy monitoring.

2.2. Strengthen Gender Focal Points (GFPs) across MDAs

- Upgrade GFPs from junior roles to senior

technical/managerial positions.

- Provide mandatory gender analysis training and technical toolkits.
- Require annual departmental gender reports integrated into the NDP monitoring cycle.

2.3. Expand specialised GBV courts and one-stop centres

- Establish these services in all districts, not only high-density areas.
- Ensure staffing includes counsellors, social workers, interpreters, disability specialists, and paralegals.

2.4. Enhance Land Board gender capacity

- Deploy gender experts to Land Boards.
- Train officers on gender-sensitive allocation, conflict resolution, and disability accessibility.

3. Programmatic-Level Actions

3.1. Women's economic empowerment programmes

- Scale up business incubation hubs for women, especially rural women and youth.
- Provide tailored, collateral-free financing mechanisms (e.g., guarantee funds).
- Support women's participation in high-growth sectors such as ICT, green economy, STEM industries.

3.2. Gender-responsive labour market interventions

- Introduce pay transparency and gender pay-gap reporting for public and large private institutions.
- Expand maternity protection and introduce paternity leave to encourage shared care.
- Promote flexible work arrangements without penalising career progression.

3.3. SRHR and adolescent health programmes

- Scale up youth-friendly SRHR services in rural and peri-urban clinics.
- Introduce mobile SRHR outreach for remote areas.
- Integrate mental health services into routine SRHR and HIV care.

3.4. GBV prevention programmes

- Implement interventions targeted at men and boys (positive masculinities, fatherhood initiatives).
- Create school-based violence prevention curricula.
- Expand safe shelters and reintegration programmes for survivors.

4. Community and Norms-Level Actions

4.1. Engage traditional and religious leaders

- Build structured partnerships to align customary law with gender equality norms.
- Facilitate dialogues on harmful practices (inheritance, land, marital authority).

4.2. Public social and behaviour change communication (SBCC) campaigns

- Large-scale media campaigns promoting gender-equitable norms.
- Use radio, social media, and community theatre to reach diverse audiences.
- Target youth with modern platforms (TikTok, Instagram, influencers).

4.3. Promote shared household responsibilities

- Community dialogues on care work and parenting.

- Male-engagement programmes that highlight benefits of gender equity at home.

5. Economic and Asset Ownership-Level Actions

5.1. Expand women's access to productive land

- Introduce fast-track land allocation for women farmers.
- Provide subsidised extension services tailored for small-scale women farmers.
- Assist women with disabilities through accessible land-allocation processes.

5.2. Improve access to finance and credit

- Introduce gender-sensitive loan products for women entrepreneurs.
- Provide financial literacy and digital literacy training.
- Incentivise banks to increase lending to women-owned businesses (performance targets).

5.3. Promote joint land and property ownership

- Make joint titling the default option for married and cohabiting couples.
- Require banks and property developers to promote joint mortgage registration.
- Raise awareness on the benefits of joint land ownership for women's security.

6. Data, Monitoring, and Evidence-Level Actions

6.1. Establish a national gender data repository

- A centralised, public portal managed by Statistics Botswana.
- Track SDG 5, Agenda 2063 gender indicators, and national targets.

6.2. Expand gender-disaggregated data collection

- Priority areas: GBV, disability, digital access, unpaid care work, climate resilience.
- Introduce a dedicated national GBV prevalence survey every 5 years.
- Integrate gender modules into existing administrative systems (health, labour, education).

6.3. Institutionalise gender audits

- Every ministry should undergo a gender audit every two years.
- Findings should inform budget allocations and programme redesign.

7. Cross-Cutting and Vulnerability-Focused Actions

7.1. Disability-inclusive gender programming

- Ensure all public services have accessible infrastructure and communication formats.
- Train service providers on disability inclusion in health, land, political participation, and GBV services.

7.2. Rural and remote-area service expansion

- Mobile clinics, mobile GBV units, and mobile land services.
- Target rural women in cash transfer programmes and agricultural subsidies.

7.3. Youth-focused gender equality initiatives

- Target young women with vocational training in male-dominated trades.
- Develop digital safety programmes for girls.
- Support boys and young men with psychosocial support, mentorship, and life skills (addressing emerging vulnerabilities).



Annex 1 - Tables

Table 1: HIV Testing knowledge of partner status and disclosure of positive HIV test results by Sex

Variable		SEX			
		MALE	FEMALE	Total	N
Ever tested for HIV	Yes	86.9	90.7	89.1	15,288
	No	13.1	9.3	10.9	1,866
	Total	100.0	100.0	100.0	17,154
Respondent has ever been tested for HIV	Yes	86.7	90.5	88.9	15,293
	No	13.0	9.5	11.1	1,861
	Total	100.0	100.0	100.0	17,205
Respondent has been tested for HIV in the past 12 months	Yes	38.8	41.6	40.5	5,816
	No	61.2	58.4	59.4	8,556
	Total	100.0	100.0	100.0	17,205
Final HIV status determination	Positive	16.3	28.0	23.2	3,424
	Negative	83.7	72.0	76.8	11,339
	Total	100.0	100.0	100.0	14,763
Respondent knew their HIV status	Yes	13.9	25.5	20.6	3,547
	No	72.0	64.7	67.7	11,656
	Total	100.0	100.0	100.0	15,203
HIV Positive	Positive	83.9	72.1	76.9	11,683
	Negative	16.1	27.9	23.1	3,505
	Total	100.0	100.0	100.0	15,188
HIV Status of Partner 1	Positive	78.5	79.4	79.0	7,450
	Negative	21.5	20.6	21.0	1,975
	Total	100.0	100.0	100.0	9,425
Partner1 knows you HIV Status	Yes	21.9	12.7	16.5	1,945
	No	78.1	87.3	83.5	9,837
	Total	100.0	100.0	100.0	11,782
Disclosed HIV status to (Spouse or partner)	Yes	85.6	79.5	81.2	2,859
	No	14.4	20.5	18.8	660
	Total	100.0	100.0	100.0	3,519
Disclosed HIV status to (Doctor)	Yes	92.7	91.7	92.0	3,257
	No	7.3	8.3	8.0	285
	Total	100.0	100.0	100.0	3,542
Disclosed HIV status to (Friend)	Yes	47.6	48.2	48.0	1,700
	No	52.4	51.8	52.0	1,838
	Total	100.0	100.0	100.0	3,538
Disclosed HIV status to (Family member)	Yes	80.2	87.4	85.4	3,023
	No	19.8	12.6	14.6	518
	Total	100.0	100.0	100.0	3,541
Disclosed HIV status to (Other)	Yes	13.7	13.3	13.4	469
	No	86.3	86.7	86.6	3,034
	Total	100.0	100.0	100.0	3,503

Table 2: Mental Health Conditions by Gender

Variable		SEX			
		MALE	FEMALE	Total	N
Frequency of having no interest	Never	90.4	88.3	89.2	15,267
	Yes	9.6	11.7	10.8	1,848
	Total	100.0	100.0	100.0	17,115
Frequency of having no interest	Never	85.3	83.4	84.2	14,427
	Yes	14.7	16.6	15.8	2,712
	Total	100.0	100.0	100.0	17,139
Frequency of feeling anxiety	Never	88.2	85.8	86.8	14,887
	Yes	11.8	14.2	13.2	2,263
	Total	100.0	100.0	100.0	17,150
Frequency of worrying	Never	87.3	85.1	86.0	14,728
	Yes	12.7	14.9	14.0	2,400
	Total	100.0	100.0	100.0	17,128
Mental health conditions present	0	76.9	74.4	75.5	12,976
	1	8.8	8.9	8.8	1,521
	2	6.4	6.5	6.5	1,115
	3	4.4	5.2	4.9	840
	4	3.5	4.9	4.3	738
	Total	100.0	100.0	100.0	17,190
Indicator for presence of mental health	No	76.9	74.4	75.5	12,976
	Yes	23.1	25.6	24.5	4,214
	Total	100.0	100.0	100.0	17,190

Table 3:Diagnosis with Non-Communicable Diseases (NCDs) by Gender

Variable DIAGNOSIS		SEX			
		MALE	FEMALE	Total	N
Diabetes	No	96.2	96.5	96.4	16525
	Yes	3.8	3.5	3.6	620
	Total	100	100	100	17145
Hypertension	No	91	85.5	87.8	15067
	Yes	9	14.5	12.2	2087
	Total	100	100	100	17154
Heart Disease	No	98.7	98.2	98.4	16888
	Yes	1.3	1.8	1.6	271
	Total	100	100	100	17159
Kidney Disease	No	98.7	99	98.9	16952
	Yes	1.3	1	1.1	196
	Total	100	100	100	17148
Cancer	No	99.8	99.2	99.5	17057
	Yes	0.2	0.8	0.5	92
	Total	100	100	100	17149
Lung Disease	No	99.1	99.2	99.1	17001
	Yes	0.9	0.8	0.9	147
	Total	100	100	100	17148
Mental Health	No	99.1	98.9	99	16995
	Yes	0.9	1.1	1	174
	Total	100	100	100	17169
Other NCDs	No	98.2	95.8	96.8	16596
	Yes	1.8	4.2	3.2	546
	Total	100	100	100	17142
Recorded NCD index	No NCD	84.6	77.5	80.5	13842
	1 NCD	12.2	18.2	15.7	2697
	Multiple NCDs	3.2	4.3	3.8	661
	Total	100	100	100	17200

Table 4: Access to medications for Chronic Conditions by Gender

Variable Chronic Condition Medication		SEX			
		MALE	FEMALE	Total	N
Diabetes medication	Yes	54.2	54.0	54.1	335
	No	45.8	46.0	45.9	284
	Total	100.0	100.0	100.0	619
Hypertension medication	Yes	77.8	82.7	81.2	1,692
	No	22.2	17.3	18.8	393
	Total	100.0	100.0	100.0	2,085
Heart Disease medication*	Yes	40.9	50.0	46.9	127
	No	59.1	50.0	53.1	144
	Total	100.0	100.0	100.0	271
Kidney Disease medication*	Yes	25.8	20.4	23.1	45
	No	74.2	79.6	76.9	150
	Total	100.0	100.0	100.0	195
Lund Disease medication*	Yes	50.7	63.8	57.8	85
	No	49.3	36.3	42.2	62
	Total	100.0	100.0	100.0	147
Mental Health medication*	Yes	40.3	33.6	36.2	63
	No	59.7	66.4	63.8	111
	Total	100.0	100.0	100.0	174
Other medication*	Yes	21.3	24.6	23.8	134
	No	78.7	75.4	76.2	428
	Total	100.0	100.0	100.0	562

RESULTS FROM MOALUSI AND MOGEGEH INTERVIEWS

1. Transcript Summaries

Transcript 1: Mogegeh Interview

- **Progress:** Women have more opportunities in education, employment, and politics compared to 10 years ago. Policies and intentions are strong.
- **Barriers:** Entrenched sociocultural practices and gatekeepers limit women's access to opportunities (e.g., *Bogosi* remaining male-dominated). Even with policies, systemic obstacles persist.
- **Economic empowerment:** Women engage in small-scale businesses, but structural barriers (lack of capital, security, mentorship) undermine sustainability. Many initiatives collapse due to poor packaging and failure to address vulnerabilities.
- **Representation:** Women remain underrepresented in leadership and decision-making structures. Calls for deliberate legal frameworks (e.g., gender equality laws, quotas).
- **STEM & education:** Some progress, but policies are imported and not grounded in local realities, leading to abandoned initiatives.
- **Health:** Mental health highlighted as a growing concern, shaped by culture and social expectations.
- **Policy/legal gaps:** Current policies are "well-intentioned but not robust." Stronger, directional measures needed.

"We have good policies, intentions are where they should be, but practically on the ground we are not prepared sufficiently to deal fairly and equitably with lived experiences."

Transcript 2: Moalusi Interview

- **Progress:** Women have advanced in public service leadership (e.g., Permanent Secretaries, Police Commissioner) and in tertiary education enrollment. However, women lag in politics (representation declining to ~8%) and STEM.
- **Economic empowerment:** Women remain concentrated in the informal sector. Closure and mishandling of the Women's Economic Empowerment Programme undermined progress. Financial institutions are not supportive of small-scale women entrepreneurs. COVID-19 further crippled informal businesses.
- **Cultural & structural barriers:** Traditional leadership and political party structures exclude women. Gendered household roles limit time for self-development and leadership preparation.
- **Policy & data:** Policies exist but are poorly implemented due to lack of costed action plans and accountability. Gender-disaggregated data is limited, fragmented, and inconsistently used.
- **Health challenges:** Women disproportionately affected by HIV/AIDS, maternal health issues, and lack of access to SRHR services. Adolescents face barriers in accessing youth-friendly clinics.
- **GBV:** Prevalence remains high; women disproportionately affected. Weaknesses include poor implementation of strategies, limited resources, and lack of national database. NGOs play a role but face severe funding shortages.
- **Legal framework:** Domestic Violence Act lacks criminalization provisions; marital power abolition law underutilized; customary courts undermine access to justice for women.
- **Policy reform priorities:** Urgent reform needed in GBV response and women's economic empowerment. Political participation also critical but secondary.

"We create beautiful laws and policies, but we do not have a plan on how, by whom, with what, those policies will be implemented."

2. SWOT Analysis (Combined from Both Transcripts)



STRENGTHS

- Strong national policies and intentions on gender equality.
- Visible progress in women's leadership in public service.
- Higher female enrollment in tertiary education.
- Growing national discourse on GBV and legal reforms.
- Civil society and NGOs provide critical services.



WEAKNESSES

- Poor implementation and follow-through of policies and programs.
- Women underrepresented in politics, traditional leadership, and STEM.
- Economic empowerment programs poorly structured and unsustainable.
- Lack of reliable, comprehensive gender-disaggregated data.
- Persistent sociocultural barriers and gatekeeping in communities.



OPPORTUNITIES

- Potential for quotas or equality laws to increase women's representation.
- Strengthening gender-disaggregated databases and monitoring systems.
- Building mentorship and incubation programs for women entrepreneurs.
- Integrating SRHR, HIV, and mental health into holistic health strategies.



THREATS

- Entrenched patriarchal norms that resist change.
- Collapse of donor funding cripples NGOs delivering gender services.
- Economic shocks (e.g., COVID-19) disproportionately harm women's informal businesses.
- Weak enforcement of legal protections leaves women vulnerable to GBV.

3. Detailed Write-Up of Results

The two interviews highlight both **progress and persistent gender inequalities in Botswana**.

On the one hand, **women's advancement is evident** in education and public service leadership. As Moalusi observed, *"for the first time we saw...the Permanent Secretary to the President being a woman."* Similarly, female enrollment in tertiary education has overtaken men.

Yet, both respondents emphasize that these gains **mask persistent gaps**. Women remain grossly underrepresented in politics and decision-making, with participation in Parliament falling from 11% to around 8%. Mogegeh was emphatic: *"Representation is very primary...for as long as we don't have a law that says there's got to be equal representation, I don't think we will make a dent in all this."*

Economic empowerment remains fragile. Structural barriers such as lack of collateral, weak incubation, and short-lived government initiatives constrain women's entrepreneurship. The closure of the Women's Economic Empowerment Programme was cited as a turning point that "crippled" many small businesses.

In health, gender disparities persist. Women remain disproportionately affected by HIV/AIDS and face barriers to sexual and reproductive health services, especially adolescents. Mogegeh highlighted mental health as an under-addressed issue, while Moalusi pointed to persistent teenage pregnancies and gaps in SRHR access.

GBV emerged as a **pressing concern**, with both participants highlighting high prevalence, underreporting, and weak institutional response. Moalusi stressed the urgency: *"If we were to prioritize, I would prioritize GBV because we are losing lives."*

Finally, while Botswana has developed progressive policies and laws, implementation is consistently weak. Both respondents criticized the lack of clear action plans, resources, and accountability. As Moalusi put it, *"We create beautiful laws and policies, but we do not have a plan on how, by whom, with what those policies will be implemented."*

Qualitative Results by thematic area

This section presents findings from qualitative interviews conducted with key informants as part of the Botswana Gender Monograph Project. The perspectives highlight progress, persistent challenges, and emerging opportunities in gender equality across education, economy, politics, health, and governance.

1. Education and Skills Development

Both participants acknowledged progress in women's access to education. Female enrollment now equals or surpasses that of males from primary through tertiary levels. However, women remain underrepresented in STEM fields (science, technology, engineering, and mathematics), limiting their access to high-demand careers.

As one participant noted:

"From primary school to secondary school, enrollment is equal. But when we get to tertiary, women have a higher enrollment rate—even though they are still lagging behind in the STEM subjects." (Moalusi)

While Botswana has introduced affirmative initiatives, participants criticized their lack of grounding in local realities. Imported concepts often fail to take root, leading to abandoned programs.

2. Education and Skills Development

Women remain concentrated in small-scale and informal businesses, with limited access to finance, mentorship, and markets. Both interviews highlighted structural barriers: lack of collateral, risk-averse banking practices, and poorly designed government programs. The collapse of the Women's Economic Empowerment Programme was cited as a setback.

"Even from the very initial stages of a response, whether trying to stimulate economic or social growth, it's important to understand the nature of what this particular group needs so that empowerment becomes real and not just a report." (Mogegeh)

"We used to see women developing and growing businesses through the Women's Economic Empowerment Program... but the transfer to another ministry crippled the women's businesses." (Moalusi)

COVID-19 further worsened vulnerabilities by decimating informal livelihoods. Despite these challenges, participants emphasized the potential of targeted mentorship, incubation, and supportive financing as strategies to sustain women's enterprises.

3. Political Participation and Decision-Making

Despite gains in public service leadership, women remain underrepresented in politics and traditional leadership. Parliamentary representation has declined from 11% to around 8%. Both participants called for deliberate interventions, including quotas or equality laws.

"Representation is very primary. For as long as we don't have a law that says there's got to be equal representation, I don't think we will make a dent in all of this." (Mogegeh)

Cultural norms and structural barriers within political parties continue to restrict women's

entry and retention in leadership. Examples from unions such as BOSETU, which introduced gender-targeted measures, were cited as potential models for scaling.

4. Health and Well-Being

Health concerns disproportionately affect women. HIV remains a major burden, with women consistently showing higher prevalence across age groups. Participants also identified sexual and reproductive health rights (SRHR) as an area of crisis, citing shortages of contraceptives, closure of service providers, and barriers to adolescent access.

"According to BAIS 5, women are more affected by HIV than men across all ages. It's a women's burden." (Moalusi)

Mental health emerged as a cross-cutting concern. Cultural expectations and gender roles amplify stressors for women, while available services remain limited and underutilized. As one participant put it:

"One key thing for me is mental health... cultural influences sometimes limit the choices of women, especially in rural communities." (Mogegeh)

5. Gender-Based Violence (GBV)

Both interviews underscored GBV as one of Botswana's most pressing gender challenges. Prevalence remains high, with women disproportionately affected. The 2018 Botswana National Relationship Study found that 37% of women and 21% of men had experienced GBV.

"If we were to prioritize, I would prioritize GBV because we are losing lives—physically, mentally, and emotionally." (Moalusi)

Implementation gaps undermine existing strategies such as the National GBV Strategy (2016–2020). Limited resources, weak monitoring systems, and donor withdrawal have

crippled NGO service delivery. Nonetheless, innovative approaches such as teletherapy and digital outreach have emerged.

6. Policy and Legal Frameworks

While Botswana has progressive policies, their effectiveness is curtailed by weak implementation, lack of resourcing, and inadequate enforcement. For example, the Domestic Violence Act provides for protection orders but does not criminalize domestic violence, forcing survivors to rely on other statutes.

“We create beautiful laws and policies, but we do not have a plan on how, by whom, with what those policies will be implemented.” (Moalusi)

Participants also emphasized that equality measures should not be seen as favors but as rights:

“Policies must be very directional in terms of addressing gender gaps. Otherwise, it becomes business as usual, and those outside will remain there for the longest time.” (Mogegeh)

Gaps in gender-disaggregated data further weaken policy design and monitoring. Fragmented data sources, particularly on GBV and economic participation, hinder evidence-based decision-making.

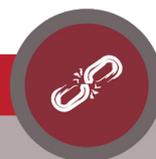
7. SWOT Synthesis

The combined insights highlight both progress and persistent challenges (see Table).



STRENGTHS

- Strong national gender policies and discourse.
- Women advancing in public service and education.
- Growing civil society engagement on GBV and rights.



WEAKNESSES

- Weak implementation and resource constraints.
- Low political representation; exclusion in traditional leadership.
- Collapse of key empowerment programs; fragmented data systems.



OPPORTUNITIES

- Quotas and equality laws to boost representation.
- Mentorship and incubation for women entrepreneurs.
- Strengthened national gender data systems.



THREATS

- Entrenched patriarchal norms and cultural barriers.
- Donor withdrawal cripples NGO capacity.
- High prevalence of HIV and GBV disproportionately affecting women.

Overall

The findings reveal that Botswana has made commendable progress in gender equality, particularly in education and public service leadership. However, systemic barriers rooted in culture, weak policy implementation, and inadequate support mechanisms continue to undermine women's full participation in economic, political, and social life. Addressing GBV, strengthening economic empowerment initiatives, and ensuring robust policy implementation emerge as urgent priorities for achieving gender equity.



Appendix 1 – Policy Brief

Closing the Gender Gaps in Botswana: Accelerating Progress Toward Vision 2036, Agenda 2063, and the SDGs

1. Background

Botswana has made notable progress in promoting gender equality through legal reforms, expanded education access, improved health outcomes, and strategic commitments to global and regional gender frameworks. Yet persistent gender disparities remain entrenched across economic participation, political representation, asset ownership, health and SRHR outcomes, and exposure to gender-based violence. These gaps reflect structural, institutional, and socio-cultural barriers that limit the full realization of gender equity.

The findings from the *Botswana Gender Monograph* provide a comprehensive evidence base for designing accelerated strategies to close these gaps. This policy brief outlines priority interventions at the legal, institutional, programmatic, and societal levels.

2. Key Gender Gaps Identified

2.1. Economic Participation

- Women's labour force participation is lower than men's, with higher unemployment and underrepresentation in high-growth sectors.
- Persistent gender pay gaps (20–22 percent) and occupational segregation disadvantage women.
- Women—especially those in rural areas and those with disabilities—have limited access to land, credit, and productive assets.

2.2. Political Representation

- Women hold only 11 percent of parliamentary seats, far below SADC and AU targets.
- Political party structures remain male-dominated, with limited support for female candidates.

2.3. Health and SRHR

- Despite progress, maternal mortality remains above SDG targets.
- Young women face high HIV incidence and limited access to youth-friendly SRHR services.
- Mental health needs, especially among GBV survivors, remain poorly addressed.

2.4. Gender-Based Violence

- One in three women experiences GBV. Reporting remains low due to stigma, fear, and weak service coordination.
- Survivors, especially women with disabilities, face barriers in accessing justice and psychosocial support.

2.5. Social and Cultural Norms

- Patriarchal norms continue to influence inheritance, land rights, domestic roles, and decision-making.
- Young men and boys face rising vulnerabilities, with mental health, unemployment, and school dropout emerging as concerns.

2.6. Land and Property Rights

- While residential land ownership shows near parity, women are disadvantaged in agricultural and commercial land ownership.
- Joint titling remains extremely low.
- Women with disabilities face compounded marginalisation in land access.

3. Policy Recommendations

3.1. Strengthen Legal and Policy Frameworks

- Enact a Gender Equality Act to provide binding obligations, enforcement mechanisms, and harmonisation of customary and statutory laws.
- Update and fully cost the National Gender Strategy, with clear indicators aligned to Vision 2036 and Agenda 2063.
- Introduce Temporary Special Measures (TSMs) such as quotas or reserved seats in Parliament and local councils.
- Reform land-related legislation to institutionalise joint titling and protect widows, divorced women, and women with disabilities.

3.2. Build Stronger Gender-Responsive Institutions

- Establish a Ministry for Gender Equality and Social Inclusion with adequate authority and resources.
- Strengthen Gender Focal Points (GFPs) through upgraded roles, standardised tools, and technical training.
- Expand GBV courts and one-stop centres to all districts with integrated legal, psychosocial, and health services.
- Enhance Land Boards' gender capacity to implement gender-sensitive land allocation and dispute resolution.

3.3. Promote Women's Economic Empowerment

- Develop a national women's economic empowerment programme with business incubation hubs, collateral-free financing, and digital entrepreneurship support.
- Mandate gender-sensitive public procurement, allocating a share of tenders to women-owned businesses.
- Support female participation in STEM,

green economy, and digital sectors through scholarships, mentorships, and incentives.

- Introduce pay transparency legislation and require public reporting on pay gaps.

3.4. Strengthen SRHR and Health Services

- Expand youth-friendly SRHR services, including mobile outreach for rural areas.
- Integrate mental health care into SRHR and HIV services, with targeted support for survivors of GBV.
- Improve maternal health services through investment in emergency obstetric care and remote-area referral systems.

3.5. Reduce Gender-Based Violence Through Comprehensive Approaches

- Operationalise the Sexual Offenders Registry and strengthen inter-agency data sharing.
- Scale up community-based prevention, including transformative masculinities programmes.
- Provide safe shelters, reintegration programmes, and survivor-centred services nationwide.
- Institutionalise mandatory training for police, health workers, and social workers on handling GBV cases.

3.6. Transform Gender Norms and Promote Social Change

- Launch a national SBCC campaign promoting gender-equitable norms, shared care work, and positive masculinities.
- Partner with traditional and religious leaders to address discriminatory norms in inheritance, marriage, and land allocation.
- Implement school-based gender equality and GBV prevention curricula within Life Skills Education.

3.7. Strengthen Gender Data Systems and Accountability

- Establish a national Gender Data Repository housed at Statistics Botswana.
- Conduct periodic national GBV prevalence surveys every five years.
- Integrate gender-disaggregated modules into administrative data systems across health, labour, education, and land.
- Institutionalise gender audits across all ministries to inform budgeting and planning.

4. Priority Groups for Targeted Interventions

- Women with disabilities: accessibility, legal protection, tailored services.
- Rural women: mobile services, agricultural support, land rights enforcement.
- Adolescent girls and young women: SRHR, HIV prevention, digital safety.
- Female-headed households: social protection, financial inclusion, productive assets.
- Men and boys: mental health support, masculinities programmes, school retention.

5. Conclusion

Closing the gender gaps in Botswana requires coordinated action, strong institutions, updated legislation, targeted programming, and sustained investment. The evidence is clear: gender equality is achievable, but only through systemic transformation, not incremental change. These actionable recommendations—grounded in robust data and aligned with national and regional commitments—provide a roadmap for accelerating progress toward an inclusive, equitable Botswana where all people can fully realise their rights and potential.

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ISBN: 978-99968-77-65-0 (Paperback)
ISBN: 978-99968-77-66-7 (E/Book)

