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Dear partners and friends all over the world.

It is our pleasure once again to present you with a brief account of what happened in 2015 in and around Humana People to People Botswana (HPP) projects

The underlying theme for this report is The people as the agents of change.

With three main examples of activities for this year:

-The HOPE Humana projects in three districts are in partnership with the APC, Advancing Partnership and Communities program by FHI360. The program seeks to achieve the 90-90-90 vision for no new HIV infections. People discuss and plan on prevention, gender norms and gender based violence. Moreover, the project avails HIV home testing and TB screening to people in faraway places and people in high risk.

-The Communities Acting Together to Control HIV (CATCH) is an approach to make the people the agents of change by planning and unfolding activities for improvement. It is being piloted in South East District, namely: Otse, Ramotswa, Mogobane, Taung and Tlokweng with funding from United Nations Program on HIV/AIDS.

-The women’s savings groups with a micro loan scheme have changed many women’s life over the past one and a half years. Women are being organized and sticking together also about all other issues.

We also take you on a journey through facts, stories, actual figures and images from all the districts we have been working in the past year to create development.

A big thank you to all community members, activists, HPP staff, the internship students, national service program participants and institutions who passionately took part in making 2015 an extraordinary year- and we look forward to continued cooperation.

On behalf of HPP Botswana and the communities, we would also like to send a special thank you to our partners. Without your commitment and understanding of the need for your valuable assistance in cash and in kind, it would not have been possible to achieve the results we present here. Thank you.

Moses Juma Zulu
Humana People to People Botswana is a non-profit making organisation that has worked to spread Solidary Humanism and promote People to People actions in the fight for development in the past 15 years in Botswana. Development is the process in which we engage ourselves as people joining with other people, overcoming challenges and creating progress. Each step brings a hundred more issues to deal with, but when people organise themselves together, they get courage to create visions and go for them. This is what this report is about.

WE WORK WITHIN PROGRAMS
Humana People to People works alongside communities across the country to overcome the pressing issues that they face: health, rural development, education and environment. Humana People to People has developed specific programs in each of these areas. Programs are constantly developed and adapted, including fighting with the poor, women’s economic empowerment, fighting HIV and AIDS, nutrition, conservation agriculture, teacher training.

For example: HPP initiated the program Total Community Mobilization (TCM/ TCE). TCM was conducted mainly through door-to-door outreach by dedicated Field Officers and community volunteers to increase awareness of HIV and AIDS, decrease stigma and discrimination, form supporting structures, help people to get tested and understand the functions ARVs. The three years’ campaign reached all corners of society to about half of the Botswana population from 2001 to 2005. This was a frontrunner for the government to scale up ARV treatment.

WE OPERATE WITH PROJECTS AND PROJECT LEADERS
Each of the districts where we work have a HPP project that defines the geographical area and the people involved in the action. A project has a project leader who stays and works in the area together with the people. The program is adapted to fit the problem to be solved on a continuous basis with inputs and inclusion of all the people involved. More staff might be there but a lot of
volunteers connect themselves to the project.

WE WORK IN PARTNERSHIP WITH MANY
Humana People to People works in close cooperation with government, small and big organisations and private businesses where HPP also contribute to the development discussions.

WHERE WE ARE
HPP worked during 2015 face to face with about 75,000 people in 9 projects in the following 11 districts and sub districts in Botswana: Tutume, Francistown, Selibe Phikwe, Palapye, Kweneng East, South East, Goodhope, Southern and Mabutsane, Ghanzi town and Charles Hill village.
Through the engagement of every single person, cooperation with existing infrastructures and the community at large, HOPE Humana forges crucial links with government interventions at national and local level.

Huge progress has been made in the fight against major diseases such as HIV and AIDS and TB over the past 30 years. Thanks to all the advances made in understanding, treating and preventing the disease, Botswana government has invested in treatment and people on ARV treatment can live and thrive for longer years. 67% of people who are HIV positive are on treatment. Botswana is facing 10,000 new HIV infections every year, new TB infections and a steep rise in lifestyle diseases. HPP believes that each and every individual is responsible for his or her own health. However, we acknowledge that the challenges for some communities to carry that responsibility are huge. All HPP projects are addressing health and wellbeing of the people.
HOPE Humana is a project to reduce the spread of HIV and AIDS and to offer care and support to those affected. The projects play an important role in reigniting the quality of life where human dignity has been thwarted, bringing hope, standing in solidarity with the infected and the affected.

HOPE Humana establishes a centre in the community as the base for actions, community mobilization and house-to-house visits to work towards preventing new HIV infections and to support the people affected.

From the HOPE Centre, the project operates in three elements: Health Services including Voluntary Counselling and Testing, Outreach Programs and Opinion Forming Activities. Each activity in HOPE becomes effective when it is giving health services, pushing for behaviour change and reaching people in their community. The three elements cannot work without each other.

For example: Condom distribution is a health service, discussions are there to change condom use behaviour and Outreach distribution of condoms is needed. Each HOPE Humana seeks to address people's local needs.

Above chart mentions many of the activities under each element:
Towards Zero
New infections in Botswana

Humana People to People entered into partnership with FHI360 on the Advancing Partnership and Communities project (APC) from month of September 2015, to move forward the UNAIDS 90-90-90 vision.

The idea behind the 90-90-90 strategy is to prevent any new HIV infections. Everybody must know their HIV status and they should initiate ARV treatment, when their viral load goes up and their CD4 goes below 500. Those on treatment must remain on ARV treatment. When this is achieved, it will be evident that there are very few new HIV infections.

HOPE Humana South East, HOPE Humana Kanye and HOPE Humana Goodhope are implementing this partnership. Humana People to People has been able to scale up the following HOPE Humana activities:

**HEALTH SERVICES**
- Community based and focused HIV rapid testing, prioritising people in high risk and families where a person is living positively with HIV. (In 90-90-90: to ensure that all people who are HIV infected, know their HIV status).
- Refer and ensure that all HIV positive persons achieve a CD4 test and register on the ARV treatment program
- People testing HIV positive receive screening for tuberculosis and sputum testing if they can’t reach to the health facility
- Condom distribution

**OPINION FORMING ACTIVITIES:**
- Several sessions of HIV prevention discussions and elaborating risk reduction plans (PES)
- Gender norms and gender based violence discussions over five sessions.
The main target for these Opinion Forming activities is the youth below age 24, focusing mostly on vulnerable adolescent girls and young women (AGYW) in the age of 10-24 years of age.

OUTREACH
• Support to and referral of people with cases of gender based violence to professional counselling
• Follow up that people received Tuberculosis sputum testing
• Community TB care: Patients on a TB treatment regime are supported at a daily basis as the treatment must be extremely strictly followed.

HPP collaborates closely with all local health facilities, government programs, schools and churches and also refers patients to Botswana Network of People living with HIV and the Baylor Children’s Clinic for paediatric care as they work to form support groups and HIV treatment adherence groups in these three districts in this partnership.

The program started during the last quarter of 2015. People are receiving the Community Heath Workers very well. The gender norm discussions are very useful for people, as gender based violence is fuelling the epidemic. When people see us in white HIV testing coats in their remote village, they are grateful that we reach out to them and we succeed to mobilise them to finally test for HIV.

It takes very good strategising for the home testing to target the hotspots of the epidemic. It takes lots of follow up in the field to ensure all who are eligible get checks and on treatment.
Story from the fields of South East district: A lady in rejection of her HIV status

I met a lady who told me that she tested HIV positive 2 years ago and she was very bitter about the results. She told me that knowing that she was positive she decided that she will not die alone, so she started having more partners and she had unprotected sex with them and she thought by doing this she was doing something good to herself and even to those she was involved with. She told me that she didn’t even bother herself to go for CD4 count checking or being screened for TB. She said she continued with that for a period of one year.

Two weeks later she called me while I was passing by her yard. I went to her, sat down and started to talk to her about HIV/AIDS, basic facts and the importance of knowing one’s status. She asked me what one must do when she is HIV positive and how this person can live a better life. I told her what a person who is HIV positive must do. I told her that I will make an appointment with the nurse for her and she agreed. The following day we went to see the nurse and she took blood for CD4 count and it was 150. The lady was enrolled for ARV’s. I continued to give her supportive counselling twice a week. She ended up disclosing her status to her family members.

Story from the fields: 14 years old girl

In Kanye District, one of our Community Health Workers went on her field of operation doing door to door teaching about HIV prevention and gender based violence. She came across a certain house hold where there was a mother with 3 children and during the discussion the mother agreed to be offered an HIV test especially to the children since she knew her status. The first children tested negative. She asked us to come in the evening when all the children are home. She mentioned that it will be of good help since the elder daughter who is 14 years old was losing weight and also her academic results were going down. She insisted that we also do HIV test since she was born negative.

The mother mentioned that the child had social issues because she was always emotional during the discussions. On the 24th February we revisited the house and met with the daughter and were able to discuss with her issues of abuse and HIV prevention but she was not free to respond. She only
responded asked if she was willing to be tested and she agreed. The mother signed the consent form. The counsellor waited for the result and it came out positive.

She was referred for CD4 count which came out at 83 (very low). She was enrolled on medication. Since the mother was not working and they did not have food supplies in the house, so the girl was referred for the government food basket by the doctor, who attended her at the facility and the children are now assisted through Department of Social and Community Development.

The S&CD program officer has taken the issue to investigate more about what actually happened to the child.

The child at school has been appreciated by the guidance teacher, who also thanked the project for assisting the family. This will help the girl to recover. The girl has gained weight and now she is able to play with others at school like other children. She was also referred to Baylor’s Children clinic paediatric program locally.
Communities Acting Together to Control HIV

HOPE Humana in South East district work alongside with many people in the communities on the Acting Together to Control HIV (CATCH) approach. The UNAIDS funded the piloting of this community driven, bottom up approach that National AIDS Coordinating Agency (NACA) plans to scale up. HPP welcomed the opportunity to assist the communities to drive more activities in response to HIV and AIDS. HPP facilitates that communities in South East district identify their challenges and create and contribute to solutions accordingly. Communities become agents of change in their own locations, empowering them to work together towards achieving the target of zero new HIV infections. The approach is spearheaded by the chiefs (dikgos,

traditional leaderships) in each place. A part of the plan is for communities to erect visible dash boards for everybody to follow specific measurable results and changes. The pilot started in June 2015.

As shown in the chart, households receive visits where they are telling the challenges their locality faces. They are then invited to a kgotla meeting with fellow community members for them to form local action groups that establish a dream, a vision, priorities and elaborate a plan of action. These groups continuously organise actions in their community, evaluate the actions that were carried out, plan for new actions, organise the actions and so forth. The idea is that the first community action groups inspire more and more community members to form groups. The start might be slow, and then the actions gain momentum over time. In the next pages is a report on some of the earliest outcomes of the CATCH approach.
Traditional Authorities are hosting the CATCH approach and present it in a kgotla meeting in Taung to the community.

Community members form groups to dream and then to plan needed activities (Tlokweng).

Community action groups present and discuss the planned activities.

A community group in action.
Preliminary Result 2015

People have responded very well to the CATCH approach. They have eagerly been mapping concerns in the local area and opened up to tell about their own situations.

FACTORS THAT CONTRIBUTE TO NEW HIV INFECTIONS TO OCCUR:

These were developed by the communities involved in the project:

• Lack of disclosure by HIV positive community members that leads to new infections
• Some people are defaulting treatment in the community.
• Unemployment of youth that leads to intergenerational sex for monetary gain.
• Alcohol and drug use. These lead users to not making the right decisions.
• Lack of parental guidance
• High rate of teenage pregnancy

ACTIVITIES CARRIED OUT BY COMMUNITY ACTION GROUPS

• Set up of a youth Pitso for CATCH in Tlokweng
• A Health fair in Tlokweng where Botswana Organisation for Retired Nurses provided HIV testing.

• Families due to the discussions have reduced stigma against HIV positive community members as well as increased the level of trust towards each other
• Strong communication between community and health institutions
• Setting up a water tank to curb the shortage of water.

CONSIDERATIONS IN THIS PILOT:

The approach is seeking to create a whole new level of ownership by the people of the fight for better health. Therefore the staffs – the facilitators play a very different role than in projects or in service delivery. And therefore the approach must not be branded as it belongs to nobody else than the communities. The approach goes well along with other projects that deliver services to people.

There will be much more use of social media on communicating the actions as a sure way to involve the youth in the actions.
Interview with Kgosi Ramolefe: Taung village

Interviewer: What is the purpose of CATCH?

Kgosi: Tota.... CATCH is a community approach that brings the community together to solve issues or concerns and come with the collective solutions. The project is spearheaded by the local leadership Dikgosi, I think it’s a great initiative that involves all the community members.

Interviewer: As the village chief, can you tell me a bit about your contribution on the CATCH approach?

Kgosi: We are trying so much as community leadership in Taung. We have made a point that the people in the community participate in the discussions during the kgotla meetings and we also encourage our people to take serious the community initiatives as they improve people’s life styles.

For example, the dream building session has equipped the communities a lot as they were able to come with the problem they are facing in the community. Household visits are interesting. People in the community are now mobilised on the health issues, including HIV/AIDS and I can bet with you that in the next two years the HIV impact will have reduced.

Interviewer: Kgosi, do you think all people in the community have interest and know a lot about this approach?

Kgosi: The approach has an impact on the people and it has helped a lot, as most of them has changed the way they used to live. They adhere to the medication and use the available health services in the community.

Interviewer: My last question: Where do you see us going? I mean kgosi and his people.

Kgosi: Really I can say we are moving forward and I think the approach will take us very far as I can say people’s lives are improving as now they are open and free to talk about their health status. People are testing in large numbers and have enrolled on ARVs and are adhering to medication. The last thing I can say: It’s high time that we involve the youth in community initiatives as I think the kgotla is not a good platform. Bringing the youth to the kgotla, no, it is not very user-friendly to them.
I am a lady of 48 years of age, living in Taung Village in South East District. I heard about the CATCH approach last year November 2015 through the community mobiliser Mr Garetshele from HOPE Humana. Mr Garetshele visited households and was presenting about the CATCH approach. This is interesting because he was talking about zero infections in the community. I was one of the community members who has attended the dream building session at the kgotla, where we were asked to come with our community concerns and the following was brought forward: Alcohol, HIV and crime and this has opened my mind and I am in a position to come with solutions to problem I encounter.

I really like the CATCH approach because it involves, engages all the community members. CATCH is a good approach, a good community mobilization strategy that builds the community. I would say, through intensive engagement the community have improved the way they used to handle concerns and this will help us to stop the dependence syndrome of the government. People are now and are free to talk about their HIV status. I really applaud the community and for the good engagement. I also would also like to thank Kgosi Ramolefe for encouraging people in the community to attend the kgotla meetings during dream building session.
The HOPE Humana results in numbers during year 2015
The HPP Grant Administration receives the Above main figures weekly from all projects. Grant Administration travels to verify the documentation of them in each district quarterly. Indicators agreed with funders are verified and submitted to funders monthly. A main constrain for the projects in Molepopole, Palapye and Francistown has been very little funding. Another constrain is that none of the projects have a vehicle to reach frequently to the very faraway places.
Story from the fields of HOPE Humana Mabutsane:

In one of the savings group in Mabutsane sub district, there was a lady of 32 years who has eight children, four boys and four girls. The discussion was very open since they all agreed that whatever is discussed in their meeting is confidential. One member asked the lady if she knew about family planning methods. She answered by saying that her husband doesn’t want her to use it.

To her it was very clear that she was talking about condom though others were talking about different methods of family planning. And one of the members asked what really made her to have so many children. She did not answer. After a while another member said the partner is not interested in family planning methods. He becomes very angry when the woman tries to talk about family planning methods. He will say: you want to cheat and control me.

During the discussion one of the findings was that the couple were both jealous of each other, e.g. when the woman wants to use condom for protection during sexual intercourse her partner will think she is sleeping with other men. The woman was doing the same thing to him. Both were accusing each other of cheating.

Group members advised her that life is tough especially when you are poor and you have so many children that you cannot even afford to take good care of them. They advised her to sit down with her partner to discuss about family planning when he is in a good mood, She can also tell him that it can be risky for her health to have more children. One day he will listen and take action.

The following week during the meeting she gave a testimony that they have talked about the issues and they agreed to visit the clinic, where they were counselled by a Health Education Assistant (HEA). She was registered for family planning and she took the injection. The couple was advised to always visit the clinic for supportive counselling. She was very happy and thanked the group members for advising her on family planning.
Story from the field of Palapye: Alcohol and substance abuse

Tumelo is a 32 years old man (not the real name) that I met in the field on one of my days of work. During our discussions on alcohol and drug abuse, he confessed that he is using alcohol at a high rate and he is also addicted to smoking dagga, which has since affected his studies and his parents at home.

We started having discussion about this, but he was acting as if he is no longer caring for his life and his studies. After referring him to the social worker for further assessment, I checked him two times every week for three weeks. It seemed at the third week that something had been clicking in his mind, even though behaviour and attitude change comes with time. He was much better. I continued visiting and talking to him and his parents to help him take good decisions in the process. He was now willing to change, as he was also going for appointments with the social worker.

After a month, when I checked him, he was sober and promising to take his studies serious. He was at a teacher training college, and his lectures confirmed to the social worker that he was better. He said he was only drinking because of the peer pressure that he encountered at school and now he wanted me to meet his friends so that we discuss about issues like alcohol and drug abuse. As we speak, he joined an out of school youth club in his ward for anti-alcohol and substance abuse, as a way of helping others to change for the better in future.

Nutrition through Food Gardens

All HPP projects promote and assist families to establish community, school as well as back yard food gardens. These results in close to 500 food gardens developed and started per year, mostly in vulnerable families. HPP has assistance from Ministry of Agriculture with courses and seeds. The main constrain for most households is that water is expensive to buy.

An example from HOPE Humana South East:

They report: “The HOPE Humana South East project has identified families for establishment of backyard gardens. About 12 backyard gardens have been established so far. Backyard gardens are used to strengthen families economically through selling vegetables and using vegetables as nutritious food. The project has also worked with Department of Forestry and Range Resources to establish a model garden at South East clinic. The clinic is used by the community to learn on how to start up small backyard garden in their households.”
Garden in Radisele, Palapye sub district
"Child Aid works to empower and organise every child and family to take matters into its own hands and take action as a community to improve the lot of the children."

The idea of community development is crucial in Botswana. The country has a fast growing economy, but ensuring that this benefits the whole population in the long term is a huge challenge. Though Botswana is prone to drought, 70% of rural households depend on agriculture for employment and subsistence. Climate change and environmental degradation are potent risks to the livelihoods of many Batswana in rural areas. Eradicating poverty is arguably the defining priority of the current government. The commitment, as per Vision 2016, is to eradicate extreme poverty by 2016. Inequality, though high and certain to slow down the rate of poverty reduction, does not feature prominently in public policy discourse. In the 20th year of the Convention on the Rights of the Child, Child Aid is still one of the contributors to making those rights come true.
Child Aid

HPP through the Child Aid program is fighting shoulder to shoulder with the poor. The program takes a holistic approach and is all inclusive. Families and their communities build their capacities to work towards the common goal of improving their children’s lives. People organise themselves in small groups called Village Action Groups or other community structures. These provide a forum to have discussions, identify problems, take advantage of existing knowledge and to find and implement solutions together. The families are equipped with the skills and knowledge to take responsibility for their own community development. The core objective of all Child Aid initiatives is that children must thrive, grow up healthy, and have access to sufficient food, education, protection and care. All parents wish to create such conditions for their children, but many do not manage on their own. The projects operate in the communities, but with the active involvement of institutions like schools, clinics and government structures.

The CHILD AID 10 lines of development:

1. Strengthening the economy of the families
2. Health and Hygiene – hereunder the fight against HIV and AIDS
3. Pre-schools
4. Education
5. Children as active in the political, social, cultural and economic spheres of society
6. Children without parents
7. District development
8. Environment
9. Advocacy against Child labour
10. Crime prevention

Children themselves are heavily involved in Child Aid projects, not just as beneficiaries, but also as participants. By taking part in the Child Aid activities, the children learn that they can act to improve their situation and understand the fact that what they do matters.
The Child Aid Structure

The Action Groups (of any kind) plans the implementation of the 10 lines in their group and the Action Group coordinators are trained by the project in the area to prepare for the lessons in the groups. This structure builds long term development, and is good for any funder to finance for any community intervention.
The Tsela Kgopo OVC & Gender project

HPP has received funds from USAID since 2006 to assist orphans and vulnerable children. HPP Mabutsane, Child Aid Phikwe, Child Aid Ghanzi implemented a five-year partnership with Project Concern International and eight other local organisations on the Tsela Kgopo OVC & Gender project. This project was completed in September 2015 for Mabutsane and Ghanzi, and got an extension in Selebi-Phikwe. The program was holistic and during 2015 more than 2500 vulnerable families with Orphans and Vulnerable Children (OVC) were assisted. Some of the results are shown in the next 16 pages.

Strengthening the economy of the family

In this line of work people do food gardens, income generating activities, short courses in business skills, agriculture and food processing and courses to prepare youth for employment:

Quotes from the Mabutsane project report:

The HPP Mabutsane project has provided mentorship to fourteen “out of school” youth in Khonkhwa village, who have been enrolled in the Youth Employment Program (YEP). The youth who participated in the YEP are now in a position to prepare basic curricular vitae and ready to apply for available job opportunities. This has also encouraged them to search for more opportunities.

The youth have then been linked to employment in the following departments: Out of School Education and Training (OSET), a local butchery, security companies and also the National Service Program (Tirelo Sechaba). One youth is running a secretarial services business which was donated by Mascom. Other youth have benefited from the LIMID Agricultural program for inputs to start small stock rearing.

Mabutsane Economic Strengthening group (ES) is comprised of 7 women who started recycling of paper to make crafts and ear rings and jam production using melons. They are sell their finished products to the community members and they have collaborated with S&CD for the group to be part of district market day activities where they can sell and showcase their products.

The group coordinator had a meeting with district social and community development office to request support for the group through government alternative package, they were then assessed to find out if they qualified for assistance. The good news is that they met the minimum requirements.

The group was later funded at the beginning of February 2015 which included cooking equipment’s for them to scale up the jam production. They worked on the project start and registration of business through the assistance of Department of Community Development until the stage of production. So far, the group has been sustainable all along through common savings.

Story from the field: Mabutsane Economic Strengthening Group
Savings groups are transforming lives

With support from Project Concern Internationals GROW program, the Empowerment of Non-State Actors (European Union) Ministry of Local Government and Ministry of Agriculture, HPP have been able to start up 98 savings groups with more than 1100 members.

**ECONOMY STRENGTHENING:** Savings groups work through fixed contributions of between UD$1-5 per week. Members are able to borrow small amounts from the group to start their own income generation activities, to solve urgent lack of cash in the family or to improve their homestead. Members pay back the money under fair conditions. The groups are encouraged to open bank accounts to safeguard their savings. Members are also advised to develop garden farms, agro-processing, laundries and tuck shops, bakeries and catering businesses, dress-making and knitting projects, hair styling businesses, growing flowers for sale, performing as a dance troop, paper recycling and more. About 52 back yard gardens have been developed as they also help on food security. 12 groups started income generating activities and 83 families starting during 2015 alone, which was a good improvement. The groups saved US$14,000 and members borrowed and paid back up to 50% of the funds.

**STRUCTURE:** The HPP staffs encourage local poor and vulnerable women to be part of the development of savings groups in the communities. Most of the groups have between 10-15 members where some include men. There are some where members consist of only men. The groups have a flat structure where all women learn from taking turns to lead the meetings. Decisions on savings, loans and then actions are taken in the meetings and in agreement of all. Each Child Aid Area Leader is responsible for 5-10 groups and trains the groups in weekly meetings during the first half year. Women learn the art of saving, managing money and being able to collectively and strategically think of better investment opportunities relative to own financial resources. Local Enterprise Authority, various banks and National Food Technology Research Centre have provided trainings. Some of the group members have taken literacy classes.

**SOCIAL AGENDA:** All saving groups have a social agenda which is discussed at each weekly meeting. So the members also benefit from these trainings. Members or visitors give presentations on child health, positive parenting, sexual and reproductive health and rights, HIV, gender based violence and much more. Then the members discuss the subjects. The groups had 3658 health topics during 2015 alone. Therefore, members discuss their family issues and make common plans to take action on them. The women support each other tremendously. HPP assists with knowledge on referral points. The HPP area leaders play an important role to visit the homes and facilitate the family to stick together on the issues.

**REVIEW:** The Tselakgopo Midterm Review Report 2014 of the impact for the women of the program reveals that the greatest result that has been achieved so far is the building and strengthening of social capital especially among women and girls. The process through training, awareness, and providing opportunities for exposure at community level, is empowering women in decision making, strengthening their self-esteem, ability to speaking out and breaking down negative social-cultural practices that often discriminate and disadvantage women.
Savings groups serve as a social and economical safety net, as members at any time can take small loans for emergencies, school fees and house repairs. This combination of women’s increased social and economic independence have greatly changed the lives of most members and helped them make their way out of domestic violence, poverty, low self-esteem and low status in the community. They are also having big dreams about their future. (“My dream together with the other group members is to see ourselves in 2016 being somewhere at the top. I want to drive my own car which I bought through the help of my savings group”) Depending on the weekly amount of contribution, the financial returns from savings groups are slow and take time given the amount of individual savings. Therefore, HPP also assists groups of women to apply for grants for equipment and production inputs from Department of Gender Affairs and Ministry of Agriculture. Some groups also bid for government tenders and this has yielded good results. HPP will seek to strengthen people’s business skills.
Story from the field: Testimony from a community member in Phikwe

“I am a lady of 49 years of age. I am a single mother doing piece jobs to earn a living for me and of my family. I have three children and I am HIV positive. At first I did not accept this status because of the fact that I was scared that I will die and leave my children suffering. There will be no one to take care of them. In 2013 I met a Child Aid Area leader and she provided counselling. I finally accepted my situation. We also discussed about positive living as that’s how I can live long with the HIV virus. And also, when my child failed at school, Child Aid project continued to advise. This year my child was admitted at Construction Industry Training centre. The area leader came to me and talked to me about the savings groups and I joined. Also the GROW members helped and motivated me until my life became better. I thank the Child Aid people a lot because without them I could not manage anything at all. I encourage you to keep on doing that good job.”

My name is Maikano of Maiteko a Bomme Savings group (not her real name). I joined the group on the 11th May 2014. Before I joined, I was living at the cattle post that side of Botshabelo and my children went to school in Botshabelo. They walked a long distance. They ended up not going to school anymore because of the distance they have to travel to get there and back. One day we made an activity as Maiteko a Bomme group and we invited the Matshelo savings group. We work with this group mostly during our activities. During discussions on social issues I told the other members that I have a challenge of my children refusing to go to school because of long distances. We discussed the issue on how we can bring them to Botshabelo to shorten their distance. The group members agreed to discuss the issue with my sister, who is staying in Botshabelo, whom I was afraid to talk to. I believed that she will not agree. They talked to my sister and she simply agreed. After that they called my 4 children and talked to them. They gave them counselling and the children agreed to go back to school. Some group members meet every Friday with my children to see how they are doing in school and how they are performing. As I speak my children are at school and they are doing very fine. I thank the group members for helping me with my children.

The other thing is that in our group we contribute P50-00 each weekly. As of now we all have a small business – tuck shops. The money we contribute adds up to P500 every month and we give loans to each other to start up or pick up our businesses. This has improved our tuck shops as we can afford to buy stock with that money and our businesses grow. Child Aid and the group have really improved my life socially and economically.”
Story from the field of Phikwe, Testimony

“I was not able to participate in any of the activities or jobs in the community because my husband would not allow me to do so, and I was not able to share anything with my neighbours or relatives. Since I have joined the savings group, my life has changed. I am able to save and borrow money, even to interact with other people and share my challenges with them so they could help me solve my problems. My husband really likes it. I have opened a small business, and my garden is doing very well. I am also able to work for the Ipelegeng program, something I was never allowed to before. I am always happy since I joined the savings group, and my husband is mobilising other men to form their group next year.”
Story from the field:
Motsewabadiri savings group

“I am a lady of 37 years of age, living in Selebi-Phikwe. I heard about the savings group in 2014, got interested and decided to join the group of Motsewabadiri savings group. The first time when I started going to the savings group my intention was to save up and borrow money, when I have a problem and also discussing about the issues affecting us in our homes. In my first attendance I met all the women of the savings group and also Morula and Botekanelo savings groups.

It was at the third time attending meetings in the savings group, we were discussing such issues of domestic violence. Most of the members had ideas and were willing to assist, so they encouraged me to talk about how I am abused and at last I spoke out. But by the time I was staying with a man in the house, who didn’t marry me and I was pregnant with a child, He was not allowing me to talk to people. He was abusing me sexually and also locking me inside the house, so that I may not talk with anyone. Today everything is different, everything has changed.”

Story from the field: a disabled child in Phikwe

“I am a woman and mother of a girl child living with disability. One day I visited the Social and Community Development office to seek registration for her for assessment so that they can refer her to SOS children home. The S&CD office took long to attend to my child’s case. My child is deaf and she cannot do anything for herself. Her health status is at risk because she is picking food to eat from the dust bins. One day, I was visited by the savings group and they asked me how the girl is doing and how they can be of assistance. During the savings group visit they advised me on how to take good care of her looking at her current situation. After some time, they made a follow up and brought her some stuff and to my surprise they brought her a box full of goods such as blankets, food and toiletry. I was so happy because I realised that people from the community were concerned about my child. The group visits her regularly to check on her accompanied by the social workers. They advised me to protect her from dangerous men who abuses young girls more especially those living with disabilities. They have also advised me to monitor her monthly periods. I am also thankful to the GROW program which assisted my family and I am now stress free.”
Savings groups consisting of only men in Mabutsane sub district
Children as Active in the Political, Social, Cultural and economic spheres of society

Life skills for children and youth:

Bonani from HOPE Mabutsane reports: “1500 Peer-educators, children and youth in schools have participated in life skills sessions to prevent teenage pregnancy, HIV and sexual abuse. Youth join youth clubs of different kinds. Peer educators in schools are now leading the discussions on issues related to HIV/AIDS and Gender based Violence to their peers”.

With assistance from PCI and REPSSI Journey of Life program, we conducted life skills sessions, especially for vulnerable groups in the community. These members of families and communities were reflecting on the development they want to create, starting with identifying community challenges and needs and then mapping out community solutions. Through specialised life skills session vulnerable women, adolescents and youth have been able to bring out in the open serious issues that otherwise are not openly discussed. We have had very fruitful and objective discussions.

It comes out clear that these trainings have given the participants opportunities to discuss child neglect, child abuse, rape, poor parent - child communication, corporal punishment, food insecurity and poverty, child labour, and inter-generational sex. It comes out clear that this results in teen age pregnancies, adolescents dropping out of school, limited access to education including Integrated Early Child Development activities, alcohol and drug abuse, Gender Based Violence, intimate partner violence and poor ART adherence. There were a lot to elaborate plans and concrete actions for. Some of the cases of child neglect and abuse including sexual abuse were reported to social workers and the police some resulted in conviction”.

Sam from Child Aid Ghanzi narrates: “We conducted life skills sessions under the Journey of Life program to identify vulnerable adolescent & Youth in Kabakae Primary, Ghanzi Primary, Kgaphamadi Primary School and Ghanzi Brigade. This was conducted in collaboration with the Guidance and Counselling Teachers in different schools. A total of 336 students participated in several sessions. Children living in difficult situations were identified and referred to S&CD and all have been assisted. Department of Social Services provides food basket, for school materials and in Selebi-Phikwe for a scholarship to preschool. Child Aid area leaders are following up”.

Registration of children’s births:

In some communities we find a number of families who have not made sure to register the birth of their children. Without a birth certificate the children cannot enroll in school, get access to health services or any other government service.

From Child Aid Ghanzi, Sam reports: We have been working with the Department of Civil and National Registration in both Ghanzi and Charles hill. We have partnered for transport to reach out to the far away settlements in this district. Then people from there also started to approach us in the Child Aid center to get assistance to register. Child Aid Ghanzi has supported 106 people with birth registration and 1 with death registration. Around 21 persons have managed to get both the birth certificates and identity cards. The site also supported 21 who have received their birth certificates.”
Children’s drawings of their tree of life

Parents registering birth of their Children.
Children without parents

Orphans and vulnerable children vulnerability status vary from being paternal or maternal orphans, living under poverty, negligence, and abusive environment or living with HIV.

HPP staffs have documented working with 1234 orphans and vulnerable children in 8 district. The assistance mostly consist of parental courses, counselling of the family, referral to the government social worker and follow up on the success. HPP has strengthened the ability to identify and respond to cases of child abuse and raise awareness of this issue in the community:

“In the beginning, with child abuse cases, if I saw a child being abused, I used to think, if I go into that house, I would be told to mind my own business! But now, I walk into that home, I don’t fear anything. I stand up for the rights of the child. I can even quote the act for a person and tell them they aren’t doing the right thing” (staff member, from: USAID Botswana Performance evaluation – Tsela Kgopo Gender & OVC project final report, November 2015, 62). As this quote suggests, with knowledge of child rights and legislation, staff members feel empowered to take action and also to respond to cases of abuse.

Eye Vision tests:

HPP Botswana entered into a great partnership with LIONS Club in Gaborone and mobilized the caretakers to allow their OVC to attend the service. HPP then partnered with Bokamoso Private Hospital that showed another good gesture by transporting the children back and forth. This resulted in 36 Orphans and Vulnerable children from Molepolole and 20 Orphans and Vulnerable Youth from Ramotswa going for vision tests in Gaborone, where a LIONS club member runs an Optometrist shop. Twelve children, who needed glasses, later received them for free from the shop. This was a very big day for the children and a crucial support for the children and their care takers, as the children will be able to succeed better in school and in life.

“Community members are mobilised, recruited and trained in activism, which is vital for assisting in organising the community”
HPP working with Orphans and Vulnerable children continued: Due to the work Child Aid has done for Orphans and Vulnerable children in the most affected communities in Selebi-Phikwe, BCL Mine decided to build a center in Botsabelo for this work:
Fighting Gender Based Violence

Protection of basic rights for adults and children

“To make development a success, each person in the community both male and female, must be included, they must take active part in creating development in their own lives and communities”

Over the past decade, Botswana has made significant strides in improving women’s rights, including discrimination against women. But the country still struggles with very high levels of gender-based violence: about 67% of women have experienced some form of violence and 25% of them sexual violence in their lifetime. There is a need to promote crucial rights for all. People are organised to discuss gender norms in relation to culture with the aim to reduce gender-based violence while mitigating its harmful effects on people. Unless women, girls, men and boys fully enjoy their human rights and are free from violence, then progress toward development will fall short.

GENDER BASED VIOLENCE HAS TO STOP. HPP Botswana has taken up this challenge. The support from Project Concern International (PCI), Family Health International 360 and Empowerment of Non-State Actors (European Union) has made HPP able to put more work together with the people to reduce gender-based violence (mostly domestic violence). As seen in the past pages the projects are addressing the linkages between poverty and vulnerability. A total of 1120 adults were involved in discussions and actions during year 2015.

PROJECTS FOLLOW UP: Projects provide introductory counselling, referral and follow up to the Department of Social and Community development and the Police services. This enables government to improve services for survivors of violence. The projects supported children who were defiled and their cases are referred for further investigations. Child Aid Area Leaders visit the families in their homes to address some of the causes for violence such as heavy alcohol consumption and men controlling the family members and the economy of the family which all lead to food insecurity and poverty. The door-to-door approach to vulnerable families is very powerful to create awareness and instigate change for the better. Life skills sessions in schools were conducted for teenagers, PACT club members and groups of orphans and vulnerable children, as a way of building knowledge and self-esteem amongst them.

LIFESKILLS: It is important to approach old problems in new ways. We must include men as part and parcel of community mobilization as they are the most common perpetrators of rape and domestic violence. HPP first held discussion sessions with traditional authorities to get good backing for the activities. With support from PCI, HPP has trained parents, teachers and social workers in relevant life skills.

IN HER SHOES – men have to put themselves in the shoes of women and children who are victims to domestic violence. Men have to take a stand and act as the change agents to end this social ill in the community. Groups of men were meeting to hear, discuss and learn from examples in form of case stories of Gender based Violence. HPP has also conducted training sessions for social workers, Police officers and teachers. In other meetings community members pick topics that allow Child Aid Area Leaders teach a variety of needed social skills. The activities offer the community an opportunity to closely interact, observe and learn more. These events have built the community to come much closer together.
Stories from the field work in Mabutsane Sub district:

The following are some of issues discussed by the participants during the above trainings:
Early marriages – The worrisome issue is intergenerational relationships which also make young girls victims of gender based violence due to their lack of negotiation powers.

Cohabitation - On cohabitation they agreed that it’s a common practice in the communities. But men are perceived as head of household and control any decision including sexual related matters which leads to abuse.

Cultural idioms/Proverbs – Community members pointed out clearly that Gender Based Violence is influenced by gender versus culture because in the traditional set up, the man is the head of the household. They reiterated that men misuse their powers, which result in violating the rights of the women and children.

When the matter is reported to the elders, they will always say “Monna ke tlhogo ya lelwapa” which translates to: “The man is the head of household”. Cultural idioms have always given the power to violate the woman. The following examples were given: “Monna selepe o a adimanwa” or Men can sleep around with many women, and “Monna ga a botswe kwa tswang” or “You cannot ask a man about his whereabouts”. The participants together, both men and women agreed that somehow the men do not understand why they were like that. They reiterated that the man should be a protector of his family and not an abuser.

Purchasing toys – The participants indicated that they have realized that the way some of the people in their society including themselves are socialized has dictated gender roles to their children, e.g. buying car/gun toys for the boy child or dolls for the girls. In conclusion participants agreed to ensure they purchase assorted toys for their children so that they can learn that all roles in a household can be done by all regardless of gender.

A story from the field: Alcohol abuse and domestic violence

Fredrick is a 47-year-old man living with his family in Western area. Western area is one of the poorest areas in Selibe Phikwe. Fredrick is staying with Grace, his wife for 14 years. They are both HIV positive. They are staying with their 4 children in an inherited 2-bedroom house.

“I met the family for the first time in February this year. I had discussions and sought to find out how they are living. I found out that Fredrick was working as a construction worker and his wife was not working. He couldn’t work for more than 10 – 15 days a month. His deteriorating health and daily alcohol drinking made him too frail to even get out of bed. Fredrick will keep most of his meagre earnings for alcohol,
leaving Grace with just around US$15 a month to buy food for the family. Illiterate and unskilled, Grace sometimes pawns household items (given as security for a loan) to meet the shortfall.

Fredrick was also abusive especially when he was drunk. He will come in the middle of the night and beat and insult his wife in front of the children. His wife felt helpless as she was also threatened not to report to anyone or she would face death. My plan to this family was clear, to provide on-going supportive counselling on gender based violence and nutrition needs. I linked the family with service providers like Social and Community Development welfare (S & CD) for material support and the clinic for health related issues.

On April this year, I invited Fredrick for a local leaders training workshop organized by the project. He agreed to attend. The purpose of the training was to equip and sensitize participants on gender based violence, its cause and consequences. “I was surprised to see I was not the only one with alcohol and violence problems. It helped me tremendously to listen to the problems of the other men and find solutions to my own,” Fredrick said after the workshop. “But most importantly I learnt to include my wife in decision making, especially in money matters,” he adds. Inspired by other participants in the workshop, the construction worker also encouraged his wife to join GROW group.

Today Fredrick’s children are back to a healthy weight, thanks to the food basket that they get from Department of Social & Cultural Development. Grace has joined GROW savings group where she is able to make some savings and also discuss social issues with other women. Fredrick has long quit drinking and is able to work more days. “This is a better life,” he smiles.”

Volunteer mobilising a football team in Selebi-Phikwe for a discussion session on gender norms and Gender based Violence
Education is a basic human right and a significant factor in the development of children, communities and the whole country at large. Opening classroom doors to all children, especially girls, will help break the intergenerational chains of poverty because education is intrinsically linked to all development goals such as supporting gender empowerment activities, improving child health and maternal health, reducing hunger, fighting the spread of HIV and diseases, spurring economic growth, and building peace. Families are mobilized through campaigns to send all school age children to school and secure that no child is left out or ill treated at home. Child Aid makes actions to find children who fell out of school (some of them due to child employment) and get them back into school again. School children are assisted with their homework at the HPP centre. Information on the importance of education has been provided to young persons. Also the deliberate interventions were to improve the livelihoods of youth. These interventions were Youth Employment Program (YEP), enrolment in vocational training, business skills and entrepreneurship training. Some of the youth are also participating in GROW groups that are found in their respective localities. Women are enrolled with Non Formal education.

Quotes from the HPP Child Aid Ghanzi report:

Three mini Career fairs targeting youth in Ghanzi and Charles hill were conducted and about 150 young people attended. These were conducted in collaboration with Ghanzi brigade, which offers courses such as plumbing, plastering, bricklaying and electrical maintenance. About 19 youth, who are the Child Aid members, were enrolled with the Brigade. Furthermore, two young people were assisted to enrol with Limkokwing University in Gaborone and the other with Institute of Health Sciences in Molepolole.
Pre-schools and informal playgroups

Good preschools are an important foundation for the child development at an early stage. HPP continues to run play groups inspired from PCI in the Tseta Kgopo program in three districts. Here we cite an example from the HPP in Mabutsane report:

Mabutsane sub district has three private preschools which only benefit children from families that can afford to pay school fees. Orphans and vulnerable children are left behind which make it difficult for them to cope, when they are introduced to the primary school environment. HPP wishes to provide a much needed period for the children to prepare themselves to start in primary school and also to improve the retention rate in local primary schools.

Therefore HOPE Mabutsane started informal play groups targeting these vulnerable children to access early learning. Informal play groups are stimulating the cognitive skills of the children, and helps the children to relate well with others, learn life skills and to be the classes.

About 481 OVC has been referred to preschools and play-groups. The activities for the informal play groups run twice a week for two hours. The play group sessions had been facilitated by three community volunteers. The Peace Corp volunteer assists through facilitating kids’ activities such as children's games. The activities included learning colours, letters and numbers, storytelling, educational and cultural games, songs and dances.

More results came out of these efforts during 2015:
A total number of 84 children had been referred to standard one Orientation. Also a total of 222 children in play groups had been followed to their homes and assessed. Khakhea Village development committee has offered their preschool to be used during play group sessions. MYSC Mabutsane Office staffs have pledged to buy some equipment’s for the children in the existing play group at the centre.

Families in the villages now acknowledge the importance of IECD for their children’s development. It is evident that IECD services are helping children to learn how to interact with others, develop friends (social networks) and improve the child’s confidence and self-esteem especially for vulnerable children, and improve child-parent communication and inter-personal relationships. HPP Botswana also prepares them to cope with and break out of stigma and discrimination, abuse, rejection, neglect and isolation at the community or at households level. HPP hopes to start training of preschool teachers during 2016.
Civil society calls for more action against child labor

(Published on Gazette Newspaper: 1st – 7th April 2015)

Children’s rights activists have called for more action on issues regarding child labour, saying inadequate attention given to the issue has allowed the crime increase especially in rural areas where capacity to enforce minimum age requirements for schooling and work is lacking.

Humana People to People Botswana (HPP) Resource Mobilization Officer, Lily Ponatshego said she has seen firsthand that child labor is more prevalent in Botswana than people are aware of. She said more should be done to discourage it especially in rural areas, where many appear not to be aware of its consequences on children. She said children who are forced to work have become objects of extreme exploitation as they fall out of school, are being made to work for long hours and given minimal pay. She said the conditions of their work are particularly terrible, often not providing the stimulation for proper physical and mental development.

“Child labor continues to be a great concern in many parts of the world and Botswana is no exception. We have in the past managed to rescue over a thousand children from child labor in areas such as Ghantsi, Selibe Phikwe and Charles Hill, where the trait is most prevalent. There is desperate need for education on this issue in those areas because we have realized that while others were taking advantage of vulnerable children, others just did it blindly, not knowing what it does to a child to work especially in harsh conditions. Children work for a variety of reasons, the most common being poverty and the induced pressure upon them to escape from this plight.”

She said some children are drawn to child labour because of economic deprivation and lack of schooling. School is one of the most essential platforms for early intervention against child labour as it restricts their participation in menial jobs. She said child labour can be controlled by economic development, increasing awareness and enforcement of anti child labour laws. She further stated that they have signed a memorandum of agreement with Botho College to help with research on the issue so that they will be in a better position to address them.

Childline Botswana Coordinator, Onkemetse Montsheki said child labour is one of the most under reported forms of child abuse in Botswana as more is happening out there than it is revealed. “We did some research in 2012 and we found out that it was shamelessly underreported. I suspect this is because of lack of understanding of the difference between what is accepted as child chores and child labour in some cases,” she said, adding that efforts should be made to educate people especially in rural areas on such issues.

According to International Labour Organization, global estimates on child labour progress towards the elimination of child labour in Sub-Saharan Africa are lagging behind other regions of the world. Sub-Saharan Africa has the greatest incidence of children in economic activity with 28.4 per cent of all 5 to 14 year-olds, compared to 14.8 per cent for Asia and the Pacific and 9 per cent for Latin America. It ranks second behind Asia in absolute terms, with 58.2 million children working in the same age group. The persistent challenges of widespread and extreme poverty, high population growth, the AIDS pandemic, recurrent food crises, and conflict exacerbate the problem. In the region, 38.7 million children aged 5 to 17 are in worst forms of child labour (hazardous work).
“Humana People to People has decided to make tree planting an important part of the contribution to mitigate climate change”
Construction of model fire wood saving stove by Mr. Ishmael in Distance in Selebi-Phikwe.
Humana People to People in partnership with Department of Forestry and Range Resources are giving people in communities’ trees for planting. Trees give shade, fruits, firewood, animal fodder and some enrich the soil. Trees also absorb good quantities of the CO2 that are creating global warming and climate change. HPP projects teach people on the climate changes that are taking their toll in Botswana.
Partnership in Development

The Humana People to People Charter notes that strength does not stem from the hair, it stems from the passionate hearts, the devoted souls and the will power to practise The Solidary Humanism. The actions carried out in 2015 were made possible by the passion, commitment and co-operation Humana people to People has entered into with many diverse partners. The different partners gave funding for specific programs. It is each of the numerous commitments coming from a company, government grant, international donor support, government department, foreign missions and UN organisations, which make the difference. HPP has been engaged in nurturing smooth implementation of the big and small funding committed to the projects with the sole aim of achieving double value from the results. The more we join forces, the more we build on what we have just conquered. HPP is always willing to do more and implement good deeds on behalf of our partners. The government plays a vital role to lay a solid foundation to address the underlying causes of poverty. HPP joins in to assist by working with poor people in their continuous fight for a decent life. Together we achieve an impact on overcoming challenges that people face. We full heartedly thank all our partners for their contribution, cooperation and enthusiasm during 2015 in creating a better life for the neediest.

Partnership in development during year 2015

Funders:
- Empowering Non State Actors (EU)
- FHI360 (Family Health International)
- Project Concern International
- Skillshare International
- United Nations program for HIV/AIDS

In Kind donations:
- Bamangwato Concessions Ltd. (BCL),
- Baylor Clinic International
- Bokamoso Private Hospital,
- BOSA BOSELE Training Institute
- Botswana Glencore Nickel
- CLICKS stores
- Department of Civil and National Registration
- Department of Community Development
- Department of Forestry & Range Resources
- Department of Gender Affairs

In Kind donations continued:
- Department of Public Health (DMSAC)
- Department of Social Protection
- DUNNS stores
- G S P Building & Civil Engineering Contractors
- LIONS Club Gaborone
- Ministry of Agriculture
- Ministry of Health
- Ministry of Youth, Sports and Culture
- Norilsk Nickel Africa
- Peace Corps Botswana
- Podwind Investment
- SHELL Oil Botswana
- University of Botswana

Collaborations:
- National AIDS Coordinating Agency
- Ministry of Education & Skills Development
HPP Economy and manning

Humana People to People Botswana is a not for profit development organization, which was registered in 2001 as a Botswana Trust (registration no.: MA 70/2001).

Vision: HPP-Botswana envisions a well informed and equipped community with capacity to liberate itself from all forms of dehumanizing ills of society to be able to foster their own development.

Mission: HPP through the implementation of projects to empower people with tools, knowledge and skills to foster own development in their own households, communities and the nation.

The funds were used in 3 sectors

Revenue

The HPP projects are 100% funded by partner’s grants. During 2015 the main grants have been:

- Planet Aid Inc: 46%
- UNAIDS: 5%
- FH 360: 7%
- Empowerment of Non-State Actors: 1%
- Botswana Government: 1%
- NAPS: 20%
- Protection Concern International: 20%
- HPP Eastern Holding: 20%
- Molepolole: 3%
- Francistown/Tutume: 3%
- Palapye Sub-District: 3%
- Ngwaketse West Sub-District: 8%
- Barolong Sub-District: 12%
- Gaborone: 20%
- South East District: 21%
- Selebi Phikwe: 12%
- Kanye/Moshupa: 16%
- Ghanzi Town: 2%

Financial Audits

The financial administration of Humana People to People is based at the organization national headquarters in Gaborone. The organization’s finances are administered according to generally accepted accounting practices as required by the companies Act. Humana People to People’s accounts are audited by an external auditor company Mazars. HPP-Botswana has received no disqualifications of its audits over the years.
The Federation for Associations connected to the International Humana People to People Movement

The Federation for Associations connected to the International Humana People to People Movement is a membership network for organisations working with long-term, sustainable development. Humana People to People Botswana is also a member. Humana People to People members work with pressing issues facing mankind around the globe such as poverty and climate change. Humana People to People has developed specific programs in each of these areas. There are 31 members, working in 45 different countries in five continents operating more than 800 projects, working with people at grass root level and building people’s own capacity to help themselves. Members operate within the areas of Education, Agriculture and Rural Development, Community Development, promoting health and fighting diseases, Clothes collection globally, Micro finance and Relief Aid. The members are all independent national organisations.
HPP Botswana National office, Plot 823 Pabalelo Way, Extension 2; P O Box AD 595 ADD, Kgale View Gaborone, Tel: +267 391 3650, Fax: +267 391 3687, E-mail: informhppbots@gmail.com, www.hpp-botswana.org, Face book: Humana Botswana

CHILD AID GHANZI: Kurakura Ward Along Hospital Road; P O Box 834, Ghanzi, Tel: +267 659770

CHILD AID PHIKWE: Mmutle Road; P O Box 2203 Selibe Phikwe, Tel: +267 77634844

HOPE KANYE/MOSHUPA: Mmamokhasi Ward next to Kgolola P O BOX 10204 Mafhikana, Kanye; Tel: +267 5480894

HOPE MABUTSANE: Botapo Ward; P O Box 5 Mabutsane, Tel: +267 5010097

HOPE SOUTH EAST: Lesetlhana Ward Next to Poultry; P O Box AD 595 ADD, Kgale View, Gaborone, Tel: +267 5390195

Web site: hpp-botswana.org; Face book: Humana Botswana youtube.com/user/HPPBotswana

HOPE PALAPYE: Plot 1999, Lotsane Ward; P O Box 10778 Palapye, Tel: +267 4900584

HOPE GOODHOPE: Podile ward; P O Box 224, Goodhope, Tel: +267 5404057

HOPE KWNENG: Plot 1999 Borakalalo Ward, Next to Bus Rank, Molepolole; P O Box AD 595 ADD, Kgale View, Gaborone, Tel: +267 592 0072

CHILD AID PHIKWE: Mmutle Road; P O Box 2203 Selibe Phikwe, Tel: +267 77634844