

MAKING ACCESS REAL

**Collective learning and action for
autonomy**

The Botswana CAL Collective





Title: Collective learning and action for autonomy

Organisation: The Botswana CAL Collective

Country: Botswana

Date: December 2017

Who are we?

The Botswana CAL Collective was established in October 2015 within the working mission of the Coalition of African Lesbians (CAL), and aims to capacitate women (including young, lesbian, bisexual and trans women) to recognize their challenges and confront the oppressions they encounter. It is made up of 6 members – two each from Health Empowerment Rights (H.E.R), Higher Heights for Girls Organization (HHGO), and Lesbians, Gays and Bisexuals of Botswana (LEGABIBO). Our role is to locally implement the Autonomy Project, a CAL campaign for bodily autonomy and integrity. We have 14 volunteers, known as the Autonomy Task Team (ATT), who assist the Collective in achieving our five objectives. These are: media visibility/engagement, consciousness raising, knowledge and research, wellness, and solidarity and movement building.

What was the issue?

Botswana's well known economic prosperity is over shadowed by its poor human rights record. In particular, the rights of women, young girls, lesbian, bi-sexual, transgender and intersex (LBTI) persons, and sex workers have been marginalised. Patriarchy is systemic in Botswana. It gives men the sense that they own women and their bodies. There is little visibility of the issues affecting women – when the matter of abortion was tabled in Parliament, it was immediately dismissed. Gender-based violence is prevalent but not taken seriously enough; so it persists, and people look the other way or victim-blame.

Women have no control or decision-making power over their own lives and bodies.

What was the change we wanted to see?

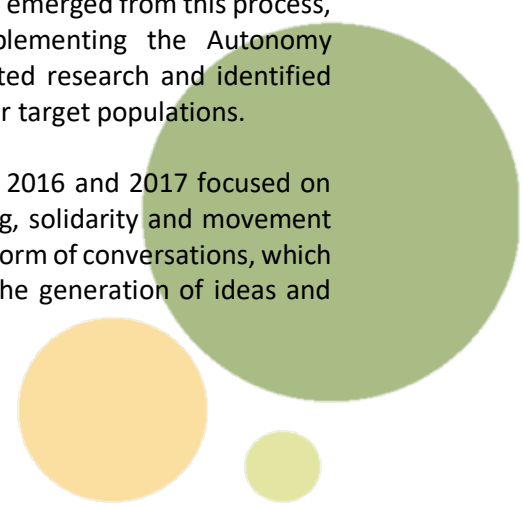
Firstly, we wanted to create visibility of LBT women, sex workers and young women. We wanted to raise consciousness about the issues affecting these target groups, for example, sexual and reproductive health and rights (SRHR). Additionally, we wanted to build a movement of activists who can fully advocate for these target groups. Finally, we wanted to build partnerships with clinics to ensure easy access to health services.

To do all of this, we wanted to start by organising ourselves, building skills in administration and proposal writing, and becoming familiar with policies that affect us directly. We also wanted to create a frame of feminism that worked for us, and spoke to the individuals involved in the project and beyond. Since women are often undermined, we felt it important, as well, to arm ourselves with knowledge, facts and evidence, before embarking on this work. We wanted to be prepared to engage with and influence health systems, and policy and decision makers, in the future.

What did we do?

A large group of women came together in June 2016 with the assistance of CAL to launch the Autonomy Project BW. They came from among the lesbian, bi-sexual and queer (LBQ) community, sex workers, young women and the trans movement, in Gaborone and surrounding areas. The Collective emerged from this process, and has been implementing the Autonomy Project. We conducted research and identified issues relevant to our target populations.

A lot of our work in 2016 and 2017 focused on consciousness raising, solidarity and movement building. It took the form of conversations, which created space for the generation of ideas and



knowledge about how power oppresses non-conformists like us; and about freedom, dignity, and justice. These spaces foster understanding, restore relationships, and promote dialogue. The general theme of our campaign was “Reconstructing Culture and the Notion of the Good Woman: No Good Women Here.” This was about deconstructing the societal definitions of what a woman is or how she should act. We had great support from various individuals, social justice movements and organisations. A total of 314 people participated in the Autonomy Project activities, which took place at LEGABIBO premises, a Collective member’s house, and the Test Kitchen Café.

In preparation for engaging with decision makers next year, we have begun networking, and recently attended the Parliamentary Women’s Caucus and Political Feminist Reflection Group on 8th March 2017 and 17th-19th November 2017, respectively.

What did we achieve?

We raised consciousness amongst ourselves and other Botswana women, creating visibility about LBT women, sex workers, and young women. The conversation series was a success; women showed up for each conversation and were open to sharing. We created a safe space for this sharing by ensuring high levels of consent and confidentiality, enabling the women and trans individuals present to speak freely about their thoughts and experiences without fear of stigma and discrimination. Similarly, we have been able to create a safe space for women to engage on SRHR issues in an affirmative way, and to challenge the status quo.

We have also formed partnerships with various individuals and movements, such as #IshallNotForget, I Wear What I want, and Letsema. This has allowed us to build solidarity amongst our target groups and beyond.

Additionally, our learnings from the project enabled us to write a proposal for funding to work on research and documentation of black queer women in Botswana, and the evolving character of the ownership of our bodies. Finally, we built networks in preparation for future work with decision makers.

What were the key lessons learnt?

Documentation: We could not get information from existing women’s movements on what has already been done and what gaps we can fill. For our part, we did not document our work enough and, in the end, lost a lot of information. We realised it is important to have a lucid documentation strategy to create a record of our lived experiences and our work, both for purposes of advocacy and for posterity.

Language: It is important to make issues relatable, in a language that lay people who are not activists or academics can understand, because a lot of the language used in rights-related engagements is derived from the colonial era and not rooted in the day to day experiences of local women.

Advocacy Plan: We need an advocacy plan to address the how, why, and what questions in the work we embark on.

Media strategy: Our media engagement was ad hoc, and we only really used social media to publicise events. However, realising that the media is a powerful tool in changing people’s attitudes and behaviours, we need to develop a media strategy that details how we want the media to portray our narratives as women on the margins.

Fundraising plan: We realise that funding from our current donors will not always be there and we want the work to continue, so we need to find a way to sustain the project beyond the current grant.

Safety, Security and Wellness: Though Botswana is not a high-risk area for activism and advocacy, it is important to establish a security culture which is designed to increase the safety

of activists when instances of harassment occur. Similarly, due to the nature of the work, activists are prone to burnout, stress, and trauma, so we need to prioritise the mental health and wellbeing of political communities as they work in often hostile spaces.

Capacity Building: Capacity building for the people working within the project is also vital, for them to develop their own organisations. When thinking about meeting with the District Health Management Team, we realised that we lacked skills like public speaking and facilitating. We also underestimated the importance of report writing and proposal writing skills, and did not prioritise them until the end of the year.

Movement building: There is not much solidarity between different women's groups and/or movements – everyone wants to be at the forefront and is not willing to join with others for a common cause.

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