Botswana Child Monitor: A Bulletin of Recent Events, Statistics and Acquisitions About Children

September – October 2005

"CHILD RIGHTS the sure way to vision 2016?"

For every child Health, Education, Equality, Protection ADVANCE HUMANITY



Botswana Child Monitor: A Bulletin of Recent Events, Statistics and Acquisitions About Children. Consolidated by UNICEF. September to October 2005

#### Dear Reader:

Welcome once again to the Botswana Child Monitor! The Botswana Child Monitor is a regular production of the UNICEF Resource Centre with the aim of informing programme partners and child rights advocates about recent events, statistics and acquisitions concerning children. The synopsis of recent events is drawn from primary and secondary material, whilst the section on statistics on children uses primary sources such as surveys, censuses, evaluations, etc. The section on acquisitions is a summary of all documents and publications registered by UNICEF Knowledge and Learning Centre during a given period, in this particular bulletin from September to October 2005. This section is also accompanied by a detailed review of one particular publication that has been in high demand by the centre's users and that we feel you should know about, and this time we review an important handbook on Paediatric AIDS in Africa by the African Network for the Care of Children Affected by AIDS. We trust that this bulletin will help to keep you better informed on children's issues and your valuable comments can be sent to Kutloano Leshomo, Communications Officer. (kleshomo@unicef.org). Additional copies can be obtained from Malebogo Lesokwane, Resource Centre Manager (mlesokwane@unicef.org). Finally, the Resource Centre is open to researchers, students, evaluators, policy makers and programme managers, amongst others, who may wish to consult our extensive holdings on Global, regional and national children's issues. Operating hours: Monday to Thursday from 10h00-12h30 and 14h00-16h00 and Friday, 10h00-13h00.

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# <u>Child Monitor – A Bulletin of Issues and Events on Botswana's</u> <u>Children, September to October 2005</u>

- 1. **The World Information Technology Forum 2005** (**WITFOR**) took place in Gaborone from August 30 to 2 September 2005. During the conference, the UN system prepared a presentation and display on DevInfo/CRIS, which are corporate UN databases that facilitate monitoring of progress against core global and HIV/AIDS indicators, many of which are directly relevant to the situation of children in Botswana.
- 2. 17 September 2005 was a *Fun Day for Children Visually Challenged* at **Pudulogo Resource Center for Blind Children**. The fun day was organised by a concerned group of Christian women from Gaborone and facilitated by the Salvation Army Psychosocial Support Initiative (SAPSSI).
- 3. **Ministers of Education from 13 Southern African countries, including Botswana,** met in Ezulwini, Swaziland on 15 September 2005 at a Ministers' Forum, to deliberate on "care and support" for children, in view of the growing threats to the future of children in the region. The delegates committed themselves to take the necessary measures to strengthen the region's education systems, to make schools and alternative learning centres viable as both centres of learning and the primary channels through which essential services are provided for children. Two young people from the Girls Education Movement in Botswana participated in the meeting.
- 4. A three day conference entitled "Towards Zero New HIV Infections" took place in Francistown on 20-22 September 2005, during which many issues related to prevention of HIV in children and adolescents were discussed. The conference participants recommitted themselves to accelerate efforts, increase funding for prevention efforts, and place more attention to prevention amongst adolescents.
- 5. **The Botswana Red Cross Society** held its Annual General Meeting on 23 September 2005. The patron of the Society, *the First Lady Mrs Barbara Mogae* called on all partners to join forces to more effectively address, issues relating to children, particularly orphans and those in very vulnerable situations.
- 6. The **Department of Social Services** held a gathering to mark the month of prayer on 28 September 2005. The prayer was meant to remember those who have died of AIDS, orphans whose parents have died, children and elderly people who are giving care as well as those who are infected.
- 7. Botswana Network on Ethics, Law and HIV/AIDS (BONELA), in collaboration with the National AIDS Council, held a meeting on 28 September 2005 to brief all key stakeholders on the legislative review report of all laws, policies and regulations that have a bearing on HIV/AIDS in Botswana. The process will be used as input into a comprehensive national legislation on HIV/AIDS.
- 8. The UN Special Rapporteur on the Right to Education, Mr Venor Münoz visited Botswana from 26 September 4 October 2005, at the invitation of the Botswana government. The purpose of the visit was to consider how Botswana implements the right to education, and to review measures being taken to ensure successful realisation of that right as well as obstacles encountered at the national and community levels. The Special Rapporteur met with senior officials from the Ministries of Education, Local Government, Finance and Development Planning as well as Labour and Home Affairs and visited several urban and rural sites. While he was delighted at the progress achieved by the country in terms of integrated early childhood development and Education for All, he was nonetheless concerned with the Government's decision to re-introduce school fees at secondary school level.
- 9. The Ministry of Health, with the financial support of the World Health Organization, UNICEF and a range of faith-based and private sector organizations, launched a nationwide *Measles and Vitamin A Immunization Campaign* from 3-7 October 2005. The vaccination took place at all health facilities and other designated points around the country, targeting 180,000 children. The campaign, although planned

since 2004, provided an opportunity to respond to an outbreak of measles during the months of July and August.

- 10. The 2<sup>nd</sup> Africa Union (AU) Health Ministers Meeting was held in Gaborone, Botswana from 10 14 October 2005. The meeting, among other things, reviewed progress made by the member states on major commitments on health and development over the past decade such as plans of action on malaria, HIV/AIDS and Tuberculosis, the draft framework on Reproductive Health and the revised Nutrition Strategy for Africa. The meeting came up with a joint statement called the *Gaborone Declaration* in which they re-affirmed their commitment to the development of *Sustainable Access to Prevention*, *Treatment and Care for the Achievement of the Millennium Development Goals (MDGs)* and committed themselves to achieve Universal Access to Treatment and Care by 2015, through the development of an integrated health care delivery system.
- 11. The Executive Director of UNFPA, Ms Thoraya Obaid launched the 2005 State of the World's *Population Report* on 18 October 2005, during her two day visit to Botswana. The report focuses on gender equity, reproductive health and the Millennium Development Goals (MDGs). The report argues that empowering women and girls propels countries forward towards the MDGs and improves the lives of all. Because the burden of poor reproductive health falls heavily on women and their families, reproductive health cannot be separated from the wider goal of gender equality.
- 12. The Global Campaign on Children and AIDS, "UNITE FOR CHILDREN, UNITE AGAINST AIDS" in which Botswana will be participating, was launched in New York on 25 October 2005 by UNICEF, UNAIDS and many other partners. A Botswana video entitled "Saving A Generation" was used by Botswana Television and broadcasters around the world to highlight the issue of pediatric HIV infections. The campaign seeks to build partnerships and mobilize action and resources for children over the next five years based on four "Ps": Prevention of mother to child transmission, Providing pediatric treatment, Preventing infections in adolescents and young people, and Protecting and supporting children who are affected by AIDS. See <u>www.unicef.org/uniteforchildren</u>. The campaign will be launched in Botswana in the coming months.
- 13. UNICEF donated a vehicle to the **Preschool Division of the Ministry of Education** on 28 October 2005 to help in the monitoring and supervision of IECD activities throughout the country. The vehicle was received by the Permanent Secretary in the Ministry, Mrs Festina Bakwena from UNICEF Representative, Gordon Jonathan Lewis.
- 14. The Botswana Network of AIDS Service Organisations, Botswana Council of Churches and other partners held a *health fair* on 28 October 2005 at the Main Mall in Gaborone to encourage partnerships in working on issues relating to human health, development and children's issues. During the fair, members of the public donated blood and underwent tests for various diseases.
- 16. The World Health Organisation, in collaboration with FIFA, launched a cartoon book on 29 October 2005 entitled *HIV/AIDS Human Rights*. The cartoon book uses football to disseminate messages on HIV/AIDS and highlights the importance of imparting sports skills and health issues to children and young people.

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### FACTS AND FIGURES ABOUT THE SITUATION OF CHILDREN AND WOMEN WITH **REGARD TO THE MILLENIUM DEVELOPMENT GOALS** (UNLESS OTHERWISE NOTED, ALL SOURCES ARE FROM MULTI INDICATOR SURVEY **REPORT {CSO, 2000}**

#### Goal One: Eradicate extreme poverty and hunger

Target: Halve, between 1990 and 2015, the proportion of people who suffer from hunger.

Indicator	<b>S</b>	Value	
•	Underweight prevalence	13%	
•	Stunting prevalence	23%	
•	Wasting prevalence	5%	
Goal Two	o: Achieve universal primary education		
	Ensure that, by 2015, children everywhere - boys and girls alike - will be able to complete full course	of primary schooling.	
Indicator		Value	
•	Net primary school enrolment rate	92% <sup>1</sup>	
•	Children reaching Grade Five	84% <sup>2</sup>	
•	Literacy rate of 15 to 19 year olds	90% <sup>3</sup>	
Goal Thr	ee: Promote gender equality and empower women		
Target: E	Eliminate gender disparity in primary and secondary education preferably by 2005 and to all levels of	education no later than 2015.	
Indicator	'S	Value	
•	Literacy rate among 15 to 19 year olds: male/female	87/93% <sup>4</sup>	
•	Primary school enrolment rate: male/female	51.4/49.6%	
Goal Fou	r: Reduce child mortality		
Target: H	Between 1990 and 2015, reduce by two-thirds under-five mortality rate.		
Indicator	'S	Value	
•	Under-five mortality rate	74 <sup>5</sup> per 1000 live births	
•	Infant mortality rate	56 <sup>6</sup> per 1000 live births	
•	DPT immunisation coverage	98%	
•	Polio immunisation coverage	98%	
•	Tuberculosis immunisation coverage	99%	
•	Children protected against neonatal tetanus	72%	
•	Home management of diarrhoea	96%	
Goal Five	e: Improve maternal health		
<b>Target:</b> Reduce by three-quarters, between 1990 and 2015, the maternal mortality ratio.			
Indicator	'S	Value	
•	Antenatal care	97%	
•	Childbirth care	99%	
Goal Six:	Combat HIV/AIDS, malaria and other diseases		
Target: H	Halt and begin to reverse the spread of HIV/AIDS by 2015.		
Indicator	'S	Value	
•	Knowledge of preventing HIV/AIDS (women)	69%	
•	Knowledge of misconceptions of HIV/AIDS (women)	31%	
•	Knowledge of mother-to-child transmission (women)	81%	
•	Attitude to people with HIV/AIDS <sup>7</sup> (women)	68%	
•	Proportion of women who have been tested for HIV	19%	
•	Contraceptive prevalence rate (women)	44%	
Goal Sev	en: Ensure environmental sustainability		
Target 1: Halve, by 2015, the proportion of people without sustainable access to safe drinking water.			
Indicator	S	Value	
•	Use of safe drinking water	97%	
Target 2:	By 2020, to have achieved a significant improvement in the lives of at least 100 million slum dwelle	ers.	
Indicator		Value	
		0.40/	

Use of sanitary means of excreta disposal •

84%

<sup>&</sup>lt;sup>1</sup> Education Statistics 2002, CSO

<sup>&</sup>lt;sup>2</sup> Education Statistics 2002, CSO

<sup>&</sup>lt;sup>3</sup> Botswana 2003 Literacy Survey , 2004, CSO

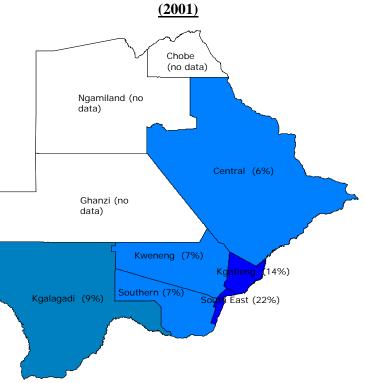
<sup>&</sup>lt;sup>4</sup> Botswana 2003 Literacy Survey, 2004, CSO <sup>5</sup> Source: 2001 population and housing census results, CSO. <sup>6</sup> Source:2001 population and Housing census results, CSO

<sup>&</sup>lt;sup>7</sup> Proportion of women expressing a discriminatory attitude towards people with HIV/AIDS

## STATISTIC OF THE MONTH: PRESCHOOL ATTENDANCE IN SELECTED DISTRICTS (2001)

Even though most children of primary school going age are in school, many of these have not attended any organized early childhood education programme. For example:

- According to the 2004 Analysis of Child Focused Indicators Report (based on the 2001 Population and Housing Census), 90% of children aged 3-4 years did not attend a preschool or crèche.
- As shown below, only about one tenth of children aged 3-4 years attend a preschool or crèche in almost all • districts.



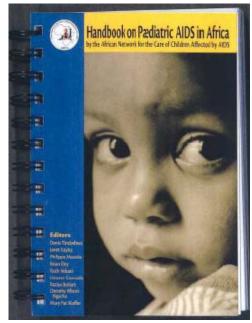
Preschool attendance in selected districts (in %)

Source: CSO/UNICEF: Analysis of Child Focused Indicators – Based on the 2001 Botswana Population and Housing Census (2004)

- Almost all preschools are run by the private sector and a few NGOs. This, therefore, makes it expensive • for most parents. So far, the government's contribution is limited to developing the enabling environment. However, there are still no standards of quality and service provision to guide the few preschools available.
- The Ministry of Education, with the support of UNICEF, developed a national integrated early childhood • development (IECD) framework in 2003. The implementation of this framework will go a long way in addressing some of these major gaps.

#### Publication of the Month Review: Handbook on Paediatric AIDS in Africa (African Network for the Care of Children Affected by AIDS {ANECCA}, third printing, July 2005)

It is a well-known fact that the increases in infant and under five mortality rates amongst African children are directly attributed to HIV infection and AIDS. Indeed, this result from the low coverage of prevention of mother-to-child transmission programmes, as well as the limited access of HIV infected children to national antiretroviral programmes. Indeed, in Botswana, the increase in IMR from 48 to 56 deaths and in U5MR from 63 to 74 deaths, per 1,000 live births, between 1991 and 2001, is directly attributable to these two interrelated phenomena. Fortunately, the PMTCT programme in Botswana is very close to reaching universal coverage, and the political prioritisation to place more HIV positive children on ARVs is growing. In light of these trends across the African continent, this particular handbook is quite welcome, because it provides a simple and practical resource for health professionals and community workers involved in preventing infection and caring for children living with and affected by HIV. The handbook has been compiled by the African Network for the Care of Children Affected by AIDS (ANECCA), which comprises medical professionals and social scientists committed to finding ways to improve care for HIVexposed and infected children in Africa. Readers from Botswana will



be pleased to know that the Director of the Botswana-Baylor Children's Clinical Centre of Excellence is a member of this network, and actively contributed to this publication.

The publication is composed of 12 chapters, the first one being the introduction. Chapter two discusses the epidemiology of HIV infection in African children, and links high paediatric infection to the high HIV prevalence in pregnant women. Differences between adult and infant clinical course of infection are discussed. An interesting element in this chapter is the analysis behind higher mortality rates of HIV-infected African children, compared to their developed country counterparts, attributed to greater concurrent infections, malnutrition, and limited access to anti-retroviral therapy. Chapter three underscores the essential role of PMTCT programmes in preventing paediatric HIV infection, but also in helping to identify and provide care for HIV infected children from an early stage, in order to avert rapid disease progression and mortality. Chapter four outlines what care providers (and not just those in the health sector) can and must do more to improve the comprehensive care and quality of life of children living with HIV. The central message of chapter five is the need to ensure early diagnosis of infection in children as a first step towards quality care, treatment and support.

Chapter 6 deals with the common childhood infections and conditions most frequent in HIV infected children and recommendations for their improved treatment and management. Associated with this topic is chapter seven, which deals directly with pulmonary conditions, the leading cause of hospital admissions and death in HIV infected children. Chapter eight is devoted to anti-retroviral therapy and clearly lays out the right of all HIV infected children to comprehensive care and treatment. Chapter nine covers a topic which has heretofore received very little attention – HIV in adolescents, whether acquired vertically or horizontally. The handbook proposes the urgent preparation of a framework for comprehensive prevention, care and treatment programmes for young people.

Chapter 10 shows that improvements in HIV care and treatment will improve and extend the survival of children. However, this also implies that health care providers and services need to adapt themselves to a new reality of long-term care and support for these children and their families, including counselling and psychosocial support described in chapter 11, as well as nutrition, which is the focus of chapter 12. From a UNICEF perspective, one of the most important aspects of this publication is the adoption of a child rights framework based on the UN Convention on the Rights of the Child. Congratulations to the ANECCA team for an excellent publication that will help to fill critical knowledge gaps in the care, treatment and support of children living with HIV.

## ACQUISITIONS LIST FOR THE MONTHS OF SEPTEMBER-OCTOBER 2005 REPORT BY SHELVE NUMBER

#### **HIV/AIDS PREVENTION AND MITIGATION**

African Network for the Care of Children Affected by AIDS (ANECCA). Handbook for Paediatric AIDS in Africa by the African Network for Care of Children Affected by AIDS. (Kampala: 2004) Details: Seeks to provide a simple, accessible, and practical handbook for health professionals involved in preventing infection and caring for children infected and affected by HIV. G8 TIN/Available at www.rcqhc.org

Asian Business Coalition on AIDS. Business Taking Action to Manage HIV/AIDS. A Selection of the Business Practices Responding to HIV/AIDS in and Outside the Asian Workplace. (Bangkok: 2002) Details: Describes how companies can immediately protect their economic, social and human resource interests by providing healthy occupational settings that acknowledge the potential impact of HIV/AIDS in the workplace. G8 BUS/ Available at www.abconaids.org

Association of European Parliamentarians for Africa (AWEPA)/European Parliamentarians for Africa. Scaling Up Parliamentary Efforts for Children and AIDS, Cape Town, South Africa, 26-27 May, 2005. Vol. 19. No.2. (Johannesburg: 2005) Details: Follow up the Parliamentarians Consultation on Orphans and Vulnerable Children. File B

**Botswana Network on Ethics, Law and HIV/AIDS (BONELA).** United Nations Special Session on HIV/AIDS: Botswana Civil Society Delegation Report. (<u>Gaborone</u>: 2002) **Details:** Serves the wider public of Botswana by sharing information and experiences gathered at the first United Nations General Assembly Special Session on HIV/AIDS. **G8 UNI** 

**Children's Budget Unit**. *Government's Social Development Response to Children Made Vulnerable by HIV/AIDS: Identifying Gaps in Policy and Budgeting*. (Johannesburg: 2005) **Details**: Analyses the policy and budget action of one government department - Social Development – in relation to assistance for children made vulnerable by HIV/AIDS. **G8 STR** 

Human Rights Watch. Letting Them Fail: Government Neglect and the Right to Education for Children Affected by AIDS. (<u>New York</u>: 2005) Details: Documents how governments fail children affected by AIDS when they leave school or attempt to return. Churches and community-based organizations provide critical support to these children, but these groups frequently operate with little government support or recognition. **G8 LET (Available at www.hrw.org)** 

#### Ministry of Health/ACHAP.

- A Chronicle of ARV Therapy Information Education and Communication in Botswana. (Gaborone: 2005) Details: Highlights tactics used to manage demand, create awareness, encourage health seeking behaviour and above all, instil a sense of hope in a nation facing its greatest challenge yet. G8 CHR
- *Masa Antiretroviral Therapy. Vol. 16: August 2005.* (Gaborone: 2005) **Details**: Focuses on how one can cure TB, even if he/she is HIV- positive. **Masa file**
- Masa Anti-Retroviral Therapy. Vol. 17 October 2005 (Gaborone: 2005) Details: Describes the importance of counselling. Masa file
- Ministry of Health/UNICEF/BOTUSA. Prevention of Mother-to-Child Transmission of HIV Programme Newsletter. Vol.2, No.1 (Gaborone: June, 2005) Details: Contents include programme uptake, improving training in the PMTCT programme, experiences from Kweneng East, the Losea Bokamoso Campaign, responding to the challenges of PMTCT, a Human Rights Approach to Programming through Community Capacity Development as well as an interview with the Minister of Health Professor Sheila Tlou. PMTCT Folder

National AIDS Coordinating Agency (NACA)/Ministry of Finance and Development Planning. *Botswana AIDS Impact Survey II: Statistical Report.* Details: Informs the public on the nature and extent of the HIV/AIDS epidemic in Botswana and provides data about the exposure, socio-economic, demographic, behavioral and biological factors of HIV infection. **G8 BOT** 

Office of the United Nations High Commissioner for Human Rights (OHCHR)/ United Nations Joint Programme on HIV/AIDS (UNAIDS). Human Rights: HIV/AIDS and Human Rights International Guidelines. Second Internal Consultation on HIV/AIDS and Human Rights, Geneva, 23-25 September, 1996. (Geneva: 2004) Details: Offers concrete measures that could be taken to protect human rights and health where HIV/AIDS is concerned. **G8 HIV** 

**Population Action International**. *What You Need to Know about the Global Gag Rule and U.S. HIV/AIDS Assistance: An Unofficial Guide*. (<u>Washington</u>: 2004) **Details:** Clarifies that the Global Gag Rule does not apply to HIV/AIDS assistance from the U.S, Government. **G8 WHA** 

#### United Nations Programme on HIV/AIDS (UNAIDS).

- Collaboration with Traditional Healers in HIV/AIDS Prevention and Care in Sub-Saharan Africa: A Literature Review. (Geneva: 2000) Details: Gives a brief update on AIDS and traditional medicine in Africa, and reviews initiatives that have attempted collaboration between traditional and biomedical practitioners for HIV prevention. G8 COL
- *Keeping the Promise: Summary of the Declaration of Commitment on HIV/AIDS: United Nations General Assembly Special Session on HIV/AIDS 25-27 June 2001, New York.* (New York: 2001) **Details:** Highlights the fact that, in only 20 years, the HIV/AIDS pandemic has caused untold suffering and death worldwide, destroying entire community undoing development gains, and posing a serious threat to development gains, and posing a serious threat to whole continents, as is currently the case for Africa. **G8 KEE**
- Report of the Meeting of the UNAIDS Reference Group on HIV Prevention in Glion, Switzerland, Held 11-12 January 2005. (Geneva: 2005) Details: Focused on concrete actions to strengthen HIV prevention strategies in the context of expanded treatment access, with specific attention paid to operationalising the recommendations of the Global HIV Prevention Working Group 2004 Report, HIV Prevention in the Era of Expanded Treatment Access. G8 HIV
- 2004 Report on the Global AIDS Epidemic: 4<sup>th</sup> Global Report. (Geneva: 2004) **Details:** Sets out the current knowledge on the state of the epidemic based on the experiences of the Joint United Nations Programme on HIV/AIDS (UNAIDS), which comprises nine United Nations agencies. **G8 REP**
- UNAIDS Partnership: Working Together on AIDS. (Geneva: 2004) Details: Summarizes the various roles and sectors of activity through which the UNAIDS partners help countries respond to HIV/AIDS. G8 UNA

**UNAIDS/UNHCR.** Strategies to Support the HIV-Related Needs of Refugees and Host Populations. (Geneva: 2005) **Details**: Seeks to inform and support key decision-makers on HIV-related issues facing refugees, other populations of concern to UNHCR, and the population of host countries. **G8 STR** 

**United Nations Children's Fund (UNICEF)**/ Association of European Parliamentarians for Africa (AWEPA). Scaling Up Efforts for Children and AIDS: Africa-European Parliamentary Consultation on Children Orphaned and made Vulnerable by AIDS in Africa: Reprioritising International Agendas, Cape Town, South Africa, 23-24 September, 2004. (Johannesburg: 2005) Details: Aimed at designing a Plan of Action to step up efforts on behalf of orphans and children made vulnerable by HIV and AIDS in Africa. U19 SCA

WHO/UNAIDS. Ensuring Equitable Access to Antiretroviral Treatment for Women: WHO/UNAIDS Policy Statement. (Geneva: 2004) Details: Identifies actions needed to address the gender dimensions of equity in access to ART. (HIV FILE)

Youthnet. Youth Issues Paper 6. Adolescents: Orphaned and Vulnerable in the Time of HIV/AIDS. (New York: 2005) Details: Introduces the key issues

affecting adolescents who are orphaned or vulnerable because of HIV/AIDS. It includes analysis, programme summaries, four case studies, and recommendations for action. G8 RUL (Available at www.fhi.org) POLICY, LEGISLATION AND SOCIAL SERVICES **European Parliamentarians for Africa.** • Sustainable Democracy and Human Rights: Occasional Paper Series: Standardisation of Practice in the selection, training and deployment of International election observers, (Netherlands: 1997) Details: Concentrates on the specialist functions of election observers, although, as will be seen, many of the considerations involved in the selection and training of election observers also apply to the broader category of human rights monitor. A4.1 BAL Sustainable Democracy and Human Rights: Occasional Paper Series 8. Parliament as an Instrument for Peace. (Netherlands: 2001) Details: Focuses on ٠ the issue of internal conflicts in Africa and aims to spell out the ways in which peace-building and democratisation are interlinked. A4.1 SUS Ministry of Health. Measles Vitamin – A: What You Need to Know. (Gaborone: 2005) Details: Focuses on what people need to know about measles and vitamin A. G 8.7 MEA Ministry of Health/ UNAIDS. Towards ' Real' Implementation of Sexual and Reproductive Health Programmes: A Project Manual for the Implementing Partners of the Urban Youth Project. Details: Seeks to empower the implementing partners to run efficiently and professionally in order to execute the mandate of the project accordingly. G TOW New Partnership for Africa's Development (NEPAD). G8 Gleneagles 2005: France, a Partner of NEPAD: An Action Plan for Africa. (Paris: 2005) Details: Underscores the priorities set by France and seeks to highlight a number of exemplary actions, whether in a bilateral context or as is often the case, in a multilateral one. B3 GLE **UNFPA**. UNFPA State of the World's Population 2005: The Promise of Equality: Gender Equality, Reproductive Health and the Millennium Development Goals. Details: Calls upon world leaders to fulfill promises made to the world's women and young people in order to meet poverty reduction goals agreed at the 2000 Millennium Summit. H2 UNF United Nations High Commissioner for Refugee (UNHCR). Integration HIV/AIDS Activities with Food and Nutrition Support in Refugee Settings: Specific Programme Strategies. (Washington: 2004) Details: Provides practical guidance for managerial and Technical staff of the United Nations and cooperating partner agencies on implementing programme that incorporate both HIV/AIDS and food security/nutrition activities. G8 INT (Please check title again) UNICEF. Country Programme Evaluation Royal Government of Cambodia/UNICEF 2001-2005. (New York: 2005) Details: Facilitates the exchange of knowledge among UNICEF personnel and its partners. U2.5 BAC WHO. National Measles Follow-up Vaccination and Vitamin A Supplementation Campaign 3rd-7th October: Guidelines for District and Immunisation Post Coordinators. (Gaborone: 2005) Details: Guides District and Immunisation Post Coordinators. G8.7 NAT Kgalagadi Breweries (KBL). Draft National Alcohol Policy Workshop. (Gaborone: 2005) Details: Prepared to provide a framework within which the Government of Botswana and key stakeholders can develop a National Policy on Alcohol, which provides for the needs of all the people of Botswana. B3 DRA **MOBILISATION FOR CHILDREN'S AND WOMEN'S RIGHTS** International Society for Prevention of Child Abuse and Neglect. Child Abuse and Neglect: The International Journal. Vol.29, No.8 (London: August, 2005) Details: Provides an international, multidisciplinary forum on all aspects of child abuse and neglect including sexual abuse, with special emphasis on prevention

#### and treatment. D7.2 LEV (This belongs under HIV/AIDS Prevention programme because it focuses on child protection)

**Community Law Centre.** Article 40 Vol.7, No.2: The Dynamics of Youth Justice & the Convention on the Rights of the Child in South Africa: UN Guidelines on Child Victims and Witnesses of Crime. **Details:** Brings the World one step closer to becoming a safer place for children, as they seek to protect the rights of child victims and witnesses of crime. **File B** 

#### OHCHR/UN.

- *Teaching Human Rights: Practical activities for Primary and Secondary Schools.*(<u>New York</u>: 2003) **Details:** Offers practical advice to teachers and other educators who want to foster human rights awareness and action among primary and secondary school children, including suggestions for developing learning activities. **A4.1 TEA**
- The United Nations Decade for Human Rights Education (1995-2004) No. 3: The Right to Human Rights Education: A compilation of provisions of international and regional instruments dealing with human rights education. (New York: 1999) Details: Outlines the growing consensus and the commitment expressed by the international community to educating all members of society on human rights. A4.1 UNI

## **OTHER RELEVANT RESOURCES IN THE CENTRE**

- Asia Pacific Perspectives Vol. 3, No. 6 (October, 2005)
- Bank of Botswana. Financial Statistics. (Gaborone: April, May, June and July, 2005)
- Banana Let's Chat: National Youth Centre Newsletter. Issue 5. (Gaborone: 2005)
- **BIDPA**. *Briefing* 2<sup>*nd*</sup> *Quarter* 2005. (<u>Gaborone</u>: 2005)
- BMJ: Health in Africa. No.7519. (1 October 2005)
- Botswana College of Distance and Open Learning (BOCODOL). Newsletter. (Gaborone: 2005)
- BONASO.
  - Directory of members 2004 (Gaborone: 2004)
  - 2004 Annual General Meeting
- Botswana National Productivity Centre. Productivity & Quality Forum. Vol. 10, No.2 (Gaborone: April-June, 2005)
- Botswana Bureau of Standards (BOBS).
  - Annual Report 2005. (Gaborone: 2005)
  - Newsletter Vol.34.
- Botswana Telecommunications Authority (BTC). Annual Report 2004/2005 (Gaborone: 2005)
- Bulletin of the World Health Organisation 2005. Vol. 83, No.9 (September), Vol. 83, No. 10, (October), Vol.83, No.11 (November)
- Department for International Development. Newsletter for Beyond Access: Gender, Education and Development: Message to the G8: Act now on Girl's Education. Issue 13 (July August, 2005)
- The Economist 2005.
  - September 10<sup>th</sup>-16<sup>th</sup>, 24<sup>th</sup>-30<sup>th</sup> 2005

- October 1<sup>st</sup>- 7<sup>th</sup>, 8<sup>th</sup>-14<sup>th</sup>, 15<sup>th</sup>-21st, 22<sup>nd</sup> -28<sup>th</sup>
- November 5<sup>th</sup>-11th
- The Evaluation Exchange. Vol. XI, No.2. (2005)
- Harvard Business Review 2005
  - What leaders need to hear (September)
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