

MLHA	Ministry of Labour and Home Affairs
MMR	Maternal Mortality Ratio
MOE	Ministry of Education
MOH	Ministry of Health
MTCT	Mother-to-Child Transmission (of HIV)
MTSP	Medium Term Strategic Plan (UNICEF, 2002-2005)
NAC	National AIDS Council
NACA	National AIDS Coordinating Agency
NGO	Non-governmental Organisation
NPA	National Programme of Action for Children
NYC	National Youth Centre
OCHA	Office of the Coordinator of Humanitarian Affairs (UN)
OVC	Orphans and Vulnerable Children
PCR	Polymerase chain reaction
PEPFAR	President's Emergency Plan for AIDS Relief (U.S.)
PLWHA	People Living with HIV/AIDS
PMTCT	Prevention of Mother-to-Child Transmission (of HIV)
RADs	Remote Area Dwellers
SAPSSI	Salvation Army Psychosocial Support Initiative
STPA	Short Term Plan of Action
TAAC	Tshireletso AIDS Awareness Centre
TCM	Total Community Mobilisation
UNAIDS	United Nations Joint HIV/AIDS Programme
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNHCR	United Nations High Commissioner for Refugees
UNICEF	United Nations Children's Fund
UNV	United Nations Volunteers
UYP	Urban Youth Project
VCT	Voluntary Counseling and Testing
WHO	World Health Organisation
YOHO	Youth Health Organisation
YWCA	Young Women's Christian Association
WSC	World Summit for Children



A NOTE FROM THE REPRESENTATIVE

This is the second year in the 2003-2007 Country Programme of Cooperation with the Government of Botswana, and the focus has been on sustaining the achievements of 2003, whilst also responding to new and unexpected challenges confronting the fulfilment of children's rights. Although the year's financial implementation rate was slightly lower than in 2003, it is still above the yearly average obtained in the previous country programme cycle. Resource mobilisation has been very good, and despite the many difficulties in attracting donors for children in a middle-income economy, we welcomed this year a positive partnership with the US President's Emergency Plan for AIDS Relief (PEPFAR). All implementing partners can be proud of the following key results for children in 2004:

1. Strengthened human rights-based approach to policy development, legal reform, programming and community capacity development (HRAP/CCD). UNICEF continues to play a lead role in this area, especially in the establishment of the UN Country Team's Working Group on Human Rights, which we chair together with our sister agency, UNDP. The Working Group's primary focus was on capacity building, especially the training of 20 participants from the UN, government and civil society, as well as of 9 facilitators to initiate a process to build the critical mass needed to rollout training. Within the GOB/UNICEF Country Programme, the year focused on: continued application of HRAP/CCD for the national PMTCT programme; strengthening the incorporation of HRAP into legal reform, through the completed review of the Children's Act and the study on Customary Law; and encouraging other partners to adopt the HRBAP approach in their legal reform exercises. In 2005, UNICEF will continue supporting the UN workplan on human rights, with a particular emphasis on ensuring that the revised Children's Act is enacted, developing abridged training modules for parliamentarians and senior policy makers as well as strengthening institutional linkages with the University of Botswana to build a national centre of competence in the HRBAP.

2. Reaching vulnerable children with essential basic services. The sharp increases in child mortality between 1991 and 2001 - infant mortality by 17% and U5MR by 21% - have elevated child survival to a greater priority. The increase is attributed to the high proportion of children who acquire the infection during pregnancy, labour or through breast feeding, and who are not placed on antiretroviral therapy. To address this situation, UNICEF, in collaboration with the Ministries of Health and Local Government, and various other partners, convened the first-ever national consultation on increasing access for HIV-positive children to treatment, care and support services. The consultation enumerated essential action points to improve service delivery, institutional collaboration, capacity building and policy. The phased roll-out of these recommendations, starting in 2005, will have a direct impact on child mortality levels. In the meantime, the national PMTCT programme continues to register increases in programme uptake, from 28 per cent in December 2002 to 36 per cent in December 2003 to 61% in December 2004. Early in the year, and 13 years after being declared polio-free, Botswana registered its first case of imported poliomyelitis. Government acted swiftly and with the support of WHO, UNICEF and Rotary International, mobilised the financial, human and logistical resources to mount two national immunisation campaigns that reached approximately 250,000 children under the age of five years.

3. Consensus building around integrated early childhood development and putting the girl child on the map. Encouraging strides have been made in reaching greater consensus around integrated early childhood development. Traditionally perceived as the equivalent of pre-primary education, the National Integrated Early Childhood Development Framework, and the high-level consultations around it, have helped to foment a much-needed multisectoral approach that will inform policy revisions, programme management and coordinating structures, and model interventions. The proactive engagement of the entire UN Country Team around the Secretary-General's Task Force on Women, Girls and HIV/AIDS (chaired by the UNICEF Executive Director), together with UNICEF's support of the Girls Education Movement (GEM), have helped to draw highly-needed attention to the plight of the girl child as a victim of gender discrimination.

The Country Programme was internally audited in July/August 2004 and many of the recommendations to improve financial management and programme implementation are under way. The introduction of Government's Performance-Based Rewards System (PBRS) provides an opportunity for UNICEF to harmonise itself more with national policies and priorities, as well as for an accelerated focus on children's issues. In 2005, UNICEF will be strengthening its field based reporting and monitoring; applying the human rights-based proposal development guidelines and policy review framework developed in 2003; and vigorously advocating for the implementation of the Committee on the Rights of the Child's Concluding Observations and Recommendations from the Botswana 2004 Plenary Session. Mid-term reviews of the 9th National Development Plan, of the UNICEF, UNDP, UNFPA Country Programmes, and of the United Nations Development Assistance Framework are opportunities to put children's issues at the heart of policies and programmes.

As usual, I wish to thank all implementing partners for the ardent support given to the Country Programme but, more importantly, for being eloquent advocates for the rights of children all over Botswana.



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