special insight Sub-Saharan Africa has just over 10 percent of the world’s population but is home to more than 60 percent of all people living with HIV – 25.8 million. In 2005, an estimated 3.2 million people in the region became infected, while 2.4 million died of AIDS.
editorial

Read the words – and then try not to care

Natural disasters are terrible things, but what ultimately defines us is not what happens to us but, how we react.

After the Tsunami in Asia 2004, the world donated as never before. In a year of disasters, one after another, the more privileged part of the world dug deep in their pockets to raise billions for those who lost everything.

This got us thinking about the nature of giving, and what makes for temporary relief versus lasting change. Sudden disasters get the big headlines, yet day after day other tragedies of avoidable dimensions unfold; the one child who dies of malaria in Africa every 29 seconds, the one person who is infected with HIV every 6.4 seconds, and the eight million who die every year because they are too poor to stay alive. So what about them?

In today's Africa, millions of children who need care and protection are forgotten. These children are the poorest and the most vulnerable, the exploited and the abused. Largely ignored by laws, budgets, programs, research and a society that fails to protect all children's rights or even, in many cases, recognise their existence via birth registration.

As a result, these children are all but invisible to their communities and the developing world. They are deprived of equality in healthcare, education and other essential services. Whether they are underserved owing to weak governance or ravaged by poverty, armed conflicts and HIV/AIDS, they are likely to miss out on their childhood and face continued exclusion in adulthood.

To reach these children, and ensure their inclusion, all elements of society must fulfill their responsibilities to children and provide a strong, caring environment wherein no child is excluded or invisible. It's a matter of securing children's rights – today and tomorrow.

In this issue we’re taking a closer look at a war still to be won – against HIV/AIDS. As the figures unfold, one realises the magnitude of the epidemic – and also sees the potential to turn it back. Read the words – and then try not to care.

Get involved – and stay tuned

You don’t have to work for SCS to contribute to the Bulletin. Please, share your experience on fulfilling the rights of children, or comment on our work. You can also visit SCS website, rb.se/eng. Send an e-mail to:
Dahlia El Roubi, SCS Khartoum office, dmroubi@gmail.com
David Neveling, SCS Nairobi office, david.neveling@swedsave-ke.org

Ethiopia

SCS has continued to express its deep concern over the treatment of children in connection with post election turmoil erupted in Ethiopia.

Shortly after SC Alliance organised a press release, that opposed the way children were treated during the unrest in October 2005, information from partners was gathered, covering different forms of child rights violations perpetrated during the unrest and afterwards.

Apart from voicing SCS’s concern, the assessment has outlined possible measures to be taken by partners to minimise the impact of violence at future similar incidents.

Kenya/Southern Sudan

• In Juba, the Government of Southern Sudan, GOSS, announced the ministerial position for the different ministries. The announcement created a lot of excitement, being the first government since the signing of the comprehensive peace agreement one year ago. Mrs Mary Kiden was appointed Minister for Gender, Social Welfare and Religious Affairs, and Dr Michael Milli Hussein was appointed Minister for Education.
• SCS is one of five international organisations being recommended by British Council and Africa Educational Trust, to receive DFID Funded Scholarship and Training Scheme, Sudan.

Northern Sudan

On Wednesday 7 December, as we were looking at the morning papers, we were struck with the headlines and a photo-graph we can never forget.

The photograph of a 4 year old girl lying with her arms facing upwards and the palms of her hands laden with henna; she lay dead and we were left dumbfounded.

She died in the hands of the midwife who caused her blood poisoning from the brutal razor of FGM.

The whole city was and is in shock. Civil society and the governments alike are all lobbying to deal with this incident and meet continued exclusion in adulthood.

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Save the Children

Sweden
Exploitation and abuse

Forum on Street Children Ethiopia (FSCE), a child rights focused NGO and partner to SCS, was founded 1989.

The main focus for the organisation is advocacy and child protection, raising awareness on children’s rights, and implementing support programmes for children living on the streets, children in conflict with the law, and abused children (sexually abused and exploited).

The organisation has three major programmes:

• Child protection programme
• School programme
• Child trafficking

The Child Protection programme is aiming at improve the knowledge of children’s rights among the police, and also improve the treatment of young offenders. FSCE has Child Protection Units (CPU) in 12 towns in Ethiopia, and runs a drop-in center in Addis Ababa, open 24 hours a day. FSCE also collect data of reported cases of child victims and children in conflict with the law.

The School programme is focusing on girls, and how to stop them from dropping out of school, and also arrange Girls Clubs as a fora for discussions and talks.

The Child Trafficking programme is focusing on protection of children who are victims of physical abuse, sexual abuse and exploitation. The working methods are to create awareness on child trafficking; ensure effective law enforcement; protect child victims of trafficking and advocate against child trafficking.

FSCE estimates that 10,000 children are trafficked within Ethiopia – most of them end up at the bus station in Addis Ababa, having nowhere to go and no-one to trust. Girls are especially at risk – in order to avoid abuse and harassment by police or gangs, they start to sell their bodies in order to get some money for shelter. Soon they become prey to brokers and pimps, and as most of them are not aware of safe sex, they are exposed to the risk of contracting HIV/AIDS and other STD infections.

The CPUs are actively trying to find the children, and try to rehabilitate them back to a normal childhood. FSCE runs Safe Homes in Addis Ababa and Dire Dawa, where children can be accommodated for 1 year during rehabilitation.

FSCE also monitor the Child Resource Development Center, a great resource for everyone working with urban, disadvantaged children in Ethiopia.

Save the Children Sweden has been supporting FSCE since the start, and is today one of the organisations biggest contributors.

More information about FSCE and their programmes can be obtained through their website, www.telecom.et/~fsce

It’s time to put an end to Gender Based Violence

November was an eventful time for Sudanese people in Khartoum.

As part of the global campaign against Gender Based Violence (GBV), school students, social workers, government officials and human rights activists took to the streets in a rare expression of solidarity against GBV with a special emphasis on FGM. Children with ages ranging from 8 years to their teens carried banners condoning FGM and GBV.

They shouted with all their energy against GBV, and repeated No to violence against women. It was exhilarating!

SCS staff members joined this march, which started in front of the National palace and ended in Khartoum University where there were performances by the students from various school levels and speeches from prominent figures working in the civil society, UN agencies and government alike. The march was covered by international news channels such as the BBC and El Jezira. The event was organised by the FGM network which comprises of over 20 local NGOs working towards the eradication of all forms of FGM in Sudan.

SCS has been a close partner of the FGM network for many years and has funded the network’s work with the media, namely the publishing of articles in the local newspapers at a regular basis.
Child protection in IDP camps in North Darfur

9 Child friendly spaces have been constructed during the last couple of months to give psychosocial support to 450 children in El Salam IDP camp.

The activities in the centres started in November 2005, where 27 animators were selected from within the community to volunteer in the centres, out of this number, 22 attended two weeks trainings on methods of early childhood education, in collaboration with the ministry of Education (Pre-Education Department).

18 child friendly spaces in Tawilla locality have been constructed to serve 1,987 children.

The process is going on to complete the centres to 24. This project is supported by UNICEF.

SCS is supporting 8 Kindergartens at Kassap and Fata Borno IDP camps and Kutum town with a total of 2,131 children. On the other hand, 7 child friendly spaces were constructed in Fata Borno with the support of UNICEF in providing psychosocial support for 1,264 children.

During October, psychosocial training was held in Fata Borno for 27 animators.

The Amal centre team also paid a visit to Kutum to provide legal aid to the children in the area.

CRC Radio Contest

Abdel Karim Mirghani Cultural Centre is a non-governmental and non-profit cultural national foundation. It promotes the principles of popular education in Sudan and develops the knowledge, skills and capacities of the Sudanese people.

The centre also works for promotion and dissemination of the CRC and protecting children, especially those with special needs.

During the month of October, Save the Children, in collaboration with Abdel Karim Mirghani Cultural Centre, funded the broadcasting of radio episodes for 14 days on the National Radio. Each episode was a mini sketch on one of the CRC principles, and the children were to identify which principle was being portrayed by each sketch.

375 children participated and sent their answers, out of which 131 had the correct answers and a raffle was made selecting 10 children to receive the allocated prizes.

Child protection training

A partner of SCS in Khartoum, working in reformatories with detained children, conducted trainings 3–4 December 2005 on Protection of children in difficult circumstances targeting 26 police officers, psychologists and social workers working in reformatories.

The objectives of the training include finding ways to improve children’s deviant behaviour and assist the participants in acquiring new skills in dealing with children in difficult circumstances.

Perhaps the greatest appeal by the Secretariat was the need to be supported in terms of capacity building. This would enable them to stand as independent and accountable to matters of education in Southern Sudan.

National Focal Points Meeting for Juvenile Justice Network

The Juvenile justice regional steering committee meeting organized by SCS in collaboration with Forum on Street Children Ethiopia was conducted from 24th and 25th October 2005 in Addis. The participants were from Ethiopia, Sudan, Kenya, Uganda and Somaliland. The main purpose of the meeting was to share information on experiences of jj work in each country and discuss on strengthening /initiating juvenile justice network in each country creating link with the juvenile justice regional network.

The outcome of the meeting included update on the progress of juvenile justice work; a term of reference for focal points commonly agreed upon, plan of action for promoting national networks in the respective countries 2006.

update

The Blue Nile Recovery and Rehabilitation Project

The Community Based Recovery and Rehabilitation Project for the Blue Nile State (Kurmuk and Geissan) that has been submitted by an INGO’s consortium, composed of Islamic Relief World Wide, Save the Children Sweden and Mine Action Group, has been initially approved of a three years budget of Euro 5.8 million. The final project document has been submitted to UNDP/EC, and the project implementation will start in 2006.

The total budget allocation for SCS during the project period is Euro 923,000. Child Rights Institute and national NGO is taken as SCS associate in project implementation.

New disease kills thousands in Sudan

A new epidemic of Kala Azar is sweeping through Southern Sudan, killing thousands. Kala Azar is a brutal disease, easily and quickly spread. Its symptoms include fever, anemia, weakness and wasting.

You catch it like malaria, from a sand fly, and it wastes you as if you have HIV/AIDS, Dr Erwin de Vries of Medecins Sans Frontieres says.

The treatment for Kala Azar, with compounds of Antimony, takes 17 days to work. For those who can get treatment, the survival rate in Sudan is 90 percent.
Education in Darfur

The Education Program runs its activities in three major areas; El Salam camp in Elfasher; Kutum town, Kassap, and Fata Barno in Kutum Locality; and Tawilla town, Dali and Konjara in Tawilla locality.

El Salam Camp, North Darfur

SCS is supporting 6 schools with 4,000 students, providing 4,571 exercise books and 4,000 text books and uniforms for 2,051 girls and 1,949 boys, in addition to other teaching materials.

20 classes and 5 offices have been rehabilitated in Kutum. 5,842 exercise books and 2,500 text books have been distributed to the children enrolled in the schools at various levels. SCS is supporting 7 schools in Kutum and Fata Barno with a total of 7,062 students.

5,900 exercise books and 3,000 text books were distributed to children enrolled in Tawilla locality. 8 classes and 2 offices were rehabilitated with a total of 4,000 students supported in Tawilla.

Empowering Girls Education

SCS has been working collaboratively with SC Alliance, UNESCO, UNICEF and Basic Education Network to reduce gender discrimination in education.

A study assessing practical problems in addressing girls’ education has been conducted, and findings were presented to government and relevant stakeholders.

In collaboration with Ministry of Education, workshops were conducted to duty bearers and other stakeholders in three disadvantaged regions where more than 500 participants attended.

This awareness creation and advocacy process has reached its height by organising a National Workshop with the Ministry of Education, whose purpose was to have an appropriate planning document for girls’ education by all regional education bureaus.

A draft framework has been produced paving the way for more discriminated girls to attend school.

SCS has also been working with National Committee of GCE (Global Campaign for Education) to bring attention to inclusive education.

For its refugee program, SCS has conducted gender empowerment training, whose purpose is empowering boys and girls and address gender discrimination.

Children’s participation

Children have been in the forefront during this year’s Global Campaign for Education programs. In various forums during the campaign, children have expressed their concerns to the regional governments or their representatives in various regions of Ethiopia. Many responded with positive emotions and commitments.

In order to develop Child Participation Programmes, SCS has started to work with one of its partners, CDI, and two secondary schools (Aje and Kuyera).

Most Ethiopian high schools students do not have any significant involvement or participation in school issues.

In order to reverse such a violation of children’s right to participation, discussions were made to assess baseline situation of the two high schools with about 30 participants in each high school. An intensive orientation about child participation was given.

The students have created their own committee to organise discussions with all children in the two high schools, to form student bodies that facilitate their active involvement in school issues.

Sweden was represented in the forum. The key objectives for the ERDF included:

• To make recommendations on improvement of the coordination mechanisms of the education sector for endorsement and implementation by the MOEST.
• To foster greater understanding of crosscutting issues and multi-sectoral linkages in the education sector, and recommend best practices on the same.
• To update the stakeholders on some of the new initiatives in the education sector, and make recommendations on the best way to take these forward.
• The Go-To-School Initiative.
• Mixed modes in Teacher Training (Fast Track and Interactive Radio Instruction).
• To update partners on progress made in the establishment of the MOEST.

The last ERDF meeting was conducted 1–3 November 2005. This was the first ERDF to be organized after the formation of the Government of Southern Sudan and the establishment of the Ministry of Education, Science and Technology (MOEST).

It brought together 120 participants, who included the newly appointed Minister for Education, Science and Technology, Government of Southern Sudan, Dr. Michael Millie Hussein.

Others included the Ag. Under Secretary for Education, MOEST Departmental Heads and other senior Headquarters staff, donor representatives, County Education Directors from various States, heads of schools and Teacher Training Institutes and representatives of 33 Education Partner organisations, both NGOs and UN agencies. Save the children

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Children’s right to grief – Memory Books in Ethiopia

As part of the process of documenting the situation of children in Ethiopia, SCS has started to develop memory books for children orphaned and made vulnerable by HIV/AIDS.

The production of the memory books started in December 2005, by Handicap National, a partner of SCS. The initiative is the result of the psychosocial section of SCS’s OVC program, whose objective is to promote the rights of children to be listened to and have opportunities to describe their situation.

The children participated in workshops, together with a counselor and research team members, to get familiarised with the steps and activities planned in the project. Then a series of workshops were conducted with the children to collect information about their experiences of parental sickness and death.

Through interviews, drawings, story telling, observations, focus group discussions, etc. the children have expressed how it feels like to witness parental sickness and death during childhood, and the spoken of the memories.

The information gathered from the children have been recorded and are being written up into a book, The Memory Book, which will be printed and distributed later in February 2006.

The stories show that children without adult support are missing out on their childhood – despite the legal and moral obligations imposed by international and national commitments made to protect children from exploitation, discrimination and emotional trauma.

Workshop on Justice for Children held in Addis Ababa, Ethiopia

A national workshop on justice for children hosted by Ministry of Social and Labour Affairs, MOLSA, and the Supreme Court with the technical and financial support from Forum on Street Children Ethiopia, UNICEF and SCS was held in Addis 28–29 November, 2005.

The participants were from the Police, Social Affairs offices, the Supreme Court, Health bureau, and NGOs working on juvenile justice in Ethiopia.

The purpose of the workshop was to deliberate on the findings of UNICEF’s report on juvenile justice in Ethiopia, and to promote the idea of diversion as an alternative to the formal justice.

World AIDS Day celebrated in Khartoum

Once again, Khartoum in less than a week saw another expression of solidarity in the Global campaign against HIV/AIDS on the World AIDS Day, 1 December.

The event was under the motto of Unite for children, Unite against AIDS.

Organised by UNICEF, UNAIDS and the Sudan National Aids control Programme, the event took place in the Friendship Palace Hall and was given full media coverage. The First Lady of Sudan, the Minister of Health and the Governor of Khartoum all attended this event and signed an agreement on behalf of the President of the Sudan to work towards the international campaign against HIV/AIDS. The event was crowded with prominent UN officials, ambassadors, and both local and international NGO representatives. Both events have shown the positive effect of child participation.

There were performances and plays done by children with messages regarding HIV/AIDS.

It was uplifting to see child participation expressed in such a positive way.

OD kicks off in Ethiopia

A year long effort, made by SCS in Ethiopia, to start an Organisational Development Programme (OD) is now at a kick-off stage. Five interested partner organisations started their OD Programmes by revisiting their Strategic Plans that would serve as guiding document for the coming four to five years.

The reviewing process is one of the recommendations made by the OD consulting firm, commissioned to lead the process and conduct an Organisational Capacity Assessment of the five OD partners.
At the Save the Children Sweden’s members’ meeting in May 2004, it was decided that the organisation would put a specific focus on its work in Africa 2005–2007. This focus will relate both to the three regional Africa programmes and to the work with members, volunteers and the general public in Sweden.

In September 2004, when the regional representatives from the three regional African offices (West Africa, Eastern and Central Africa, and Southern Africa) and the head office met, they decided that their Focus Africa collaboration would prioritise the themes:

- Children and HIV/AIDS
- Children in Armed Conflict and Disaster
- Children in Poverty
- The Human Rights/ Child Rights

In October 2005 during a meeting in Stockholm, some objectives were developed for Focus Africa:

- To highlight the situation of children living in Africa to people in Sweden.
- To share experiences and knowledge between the regional offices in Africa.
- To advocate for children’s rights in Africa and in Sweden.

SCS has started a new program of partnering with boys and young men in three localities in Addis Ababa, Ethiopia.

The new approach takes in to account the gender implications of HIV/AIDS, and aspires to secure active involvement of boys and young men to establish gender equitable relationships and fulfill the sexual reproductive health rights of girls and boys.

The targets are adolescent boys, young men and some girls groups.

Both in-school and out of school boys groups and clubs have been established, and have been running peer education and coffee ceremonies as means of communication with the target young people. The programs will be further developed, and the experiences of SCS, in establishing and running the programs, will be documented in 2006.

While reviewing its partnership portfolio with Friends of Children Society (AMAL), SCS will phase out its support to the alternative training centre in one of the poor areas of Khartoum, Northern Sudan, that has continued since 1997.

This centre was seen as a model of alternative and accelerated learning for drop-outs and working children and as a preventive measure against children coming into conflict with the law.

SCS has contracted a local consultancy firm, Development Initiative Group (DIG), to document the history of the project.

The participatory documentation process will produce a written report and a film to be used for advocacy and fundraising purposes by both SCS, AMAL and the local community.

The writing of the supplementary report to the third report of Ethiopia to the UN CRC committee, was initiated by a coalition of child rights focused NGOs. SCS was having a leading role initially, covering expenses and assigning staff to lead a steering committee.

More than 300 children living in different parts of Ethiopia are allowed to express their views on the role of NGOs and the overall implementation of the CRC. The report is expected to be finalised March 2006.
HIV/AIDS has now infected roughly 50 million Africans since the start of the epidemic, of whom more than 22 million have died. Eight African countries have more than 1 million persons living with HIV/AIDS. The 21 countries with the world’s highest rates are all in Sub-Saharan Africa. Among 15–24 year-olds, 5 percent of women and 2 percent of men are already infected. This reveals the gender dynamics of the epidemic and foretells continued spread in the next generation.

Death Stalks a Continent

Africa. Where the first human beings stood up and walked. The world’s second-largest continent. Home to one in ten of the world’s people, and five of the ten fastest-growing economies. Global source of oil and minerals, and foods such as peanuts, rice, coffee and chocolate.

Just as our past has been bound up with Africa, so are all our futures.

One in two Africans is under age 20, but their futures are under threat. Africa is struggling under a triple crisis that keeps its people poor and its nations weak – the burden of unpayable debt that soaking up money that should go to health and education; the epidemic of AIDS that is taking the lives of an entire generation; and the unfair trade policies that keep Africans from being able to sell their products at world prices and earn their own way out of poverty.

Sub-Saharan Africa, the part of the continent south of the Sahara Desert, is also the world’s poorest place. Seventy percent of its people live on less than $2 a day. 200 million go hungry every day. This year at least a million Africans, most of them young children, will die of malaria and two million will die of AIDS.

Africa is at a critical turning point, and could go either way – the crises could get far worse, or we can all be part of helping Africa turn these crises around. Because African have shown they can turn back AIDS. Because debt relief and development assistance have shown they can be effective. Because more and more African leaders are committed to democracy, accountability and transparency. Because whether and how we help Africa now is a test of our ability to prevent failing states that threaten our security, and even more important, a test of our humanity, and our willingness to respond to the moral crisis of our time.
Acquired Immunodeficiency Syndrome (AIDS) has killed more than 25 million people since it was first recognized in 1981, making it one of the most destructive epidemics in recorded history.

Despite recent, improved access to antiretroviral treatment and care in many regions of the world, the AIDS epidemic claimed 3.1 million lives in 2005; more than half a million (570,000) were children.

The total number of people living with the human immunodeficiency virus (HIV) reached its highest level; an estimated 40.3 million people are now living with HIV. Close to 5 million people were newly infected with the virus in 2005.

It is now globally recognized that HIV/AIDS is not only a health issue but carries cultural, social, economic and political implications that have been observed to impact on human and economic development. Yet economic, social, cultural and legal factors impact on HIV/AIDS interventions demanding for focused action from the affected sectors of society.

Responses to the epidemic need to be harmonised to ensure consistency and equity in service delivery, promote delivery of integrated social and health services while minimising on duplication of efforts to optimised on available resources. This can only be achieved through development of partnerships in an environment where each partner recognises her roles, responsibilities and mandates in fighting the epidemic.

Experiences at global and national levels have shown that HIV/AIDS can only be addressed through the concerted efforts of governments, UN and bilateral organisations, medical, scientific and educational institutions, Non-Governmental Organisations (NGOs) and Faith Based Organisations (FBOs), the business sector, the media, cultural institutions and people living with HIV/AIDS.

The role of the individual, the end point of all services, cannot be underestimated especially in adopting positive behaviours to prevent the spread of HIV and provide care to the infected and affected.

Ethiopia HIV sentinel surveillance among women in attending antenatal care clinics in Ethiopia has improved since 1999. Surveys are conducted annually and 34 sites were used in 2001. Data on HIV prevalence among women attending antenatal care clinics in Addis Ababa were also available for 2002.

In 2000, a special HIV prevalence study was conducted among 72,000 male army recruits drawn from four regions (Tigray, Amhara, Oromia and Southern Nations Nationalities and People’s Region – SNNR). A cohort study carried out from 1997 to 1999 among factory workers in Akaki and Wonji areas also generated data on HIV prevalence.

Twenty out of the 34 sites reported a prevalence rate exceeding 10% in 2001. However, there were seven sites with rates of less than 5%.

HIV infection rates among women attending antenatal care clinics in this country have remained relatively stable around 10% since 1997. Time trends among women attending four clinics in Addis Ababa show that median HIV prevalence was 19% in 1996, 15% in 2000 and in 2002.

In 2000, overall HIV prevalence among rural military recruits was 4%, compared to 7% among urban recruits.

Ethiopian Ministry of Health begun HIV prevention and control efforts in September 1987 focusing primarily in Addis Ababa, though 85 percent of the population lives in rural areas. In 1993, HIV/AIDS prevention and control activities were decentralised to the regional health bureaus.

Currently, an AIDS/sexually transmitted disease (STD) Control Team within the MOH provides technical assistance to regional offices, and coordinates activities and policies from a national perspective. Ethiopia adopted a comprehensive HIV/AIDS policy in 1998 to emphasize prevention, care, and support, and target vulnerable groups. The plan has been updated for the 2000–2004 period through the Strategic Framework for the National Response to HIV/AIDS.

The overall goals of the policy and framework are:

- to reduce HIV transmission;
- reduce associated morbidity and mortality; and
- reduce burdens on individuals, families, and society at large.
The National HIV/AIDS Prevention and Control Council established in April 2000, includes government members, NGOs, and religious bodies.

The Council has seven standing committees and implements national policy through 10 general strategies, the most important of which include:

• Information and education;
• STD prevention and control; HIV testing and screening;
• Adoption of proper sterilisation and disinfection procedures;
• HIV surveillance, notification, and reporting; and
• Provision of medical care and psychosocial support to those affected by HIV/AIDS.

The National HIV/AIDS Prevention and Control Office (HAPCO) was established by proclamation in June 2002 by replacing the National AIDS Council. This is considered as important undertaking, which provided enabling environment and ample opportunities for all those already involved and potential actors in the prevention and control of HIV/AIDS to align for a concerted effort.

Kenya

The trend from 1990 to 2000 suggests that adult HIV prevalence in Kenya will increase to about 14% by the year 2005 and then stabilise at that level. The National HIV/AIDS Prevention and Control Council (NACC) was established in Kenya 2000 as part of the Office of the President to provide leadership and a stronger coordination mechanism for a new, multisectoral national response to HIV/AIDS.

Kenya The trend from 1990 to 2000 suggests that adult HIV prevalence in Kenya will increase to about 14% by the year 2005 and then stabilise at that level. The number of infected people in the population will have increased from 2.2 million people in 2000 to 2.6 million by 2005 and to 2.9 million by 2010.

One dramatic impact of AIDS deaths is the decline in life expectancy. The Central Bureau of Statistics estimates that without AIDS, life expectancy at birth would currently be about 65 years. However, because of the large number of AIDS deaths, it is actually only about 46 years and may decline to 45 years by 2010. Thus almost 20 years of life expectancy have already been lost because of AIDS.

In 2002, the prevalence was 14% in urban areas and 6% outside urban areas. In 2002, the highest prevalence rate of 35% was reported in Suba, while in Bamba, Kalulumo and Kilifi the rate was 4%. HIV prevalence among women attending antenatal care clinics in Nairobi declined from 25% in 1995 to 15% in 1999, and to 14% in 2001. In Mombasa, HIV prevalence among women attending antenatal care clinics fluctuated between 12% and 16%, and was 14% in 2002. HIV prevalence in Kisumu has been fluctuating with the highest prevalence measured in 2000, 35%.

According to the population-based study in Kisumu in 1997/1998, young women were more likely to be infected than men of the same age. Among women aged 15–19 years, HIV prevalence was 23%, compared to 4% among men of the same age.

Recent Demographic and Health Survey (DHS) in 2003 found an overall prevalence of 7% with an increase in differences among urban (10%) versus rural residents (6%). As is the case in many African countries, HIV prevalence in Kenya is higher among women (9%) than among men (4%).

The National AIDS Control Council (NACC) was established in Kenya 2000

Facts that figures

Burundi

HIV rate: 8.3%
Total population: 7.8 million
Average GDP: USD 720
Literacy rate: 35%
Fertility rate: 6.6
Orphans due to AIDS: 200,000 (WHO 2004)

D.R. Congo

HIV rate: 4.9%
Total population: 60.7 million
Average GDP: USD 600
Literacy rate: 77%
Fertility rate: 6.5
Orphans due to AIDS: 770,000 (WHO 2004)

Djibouti

HIV rate: 1.75%
Total population: 0.5 million
Average GDP: USD 1,300
Literacy rate: 46%
Fertility rate: 5.1
Orphans due to AIDS: 5,000 (WHO 2004)

Eritrea

HIV rate: 2.8%
Total population: 4.6 million
Average GDP: USD 710
Literacy rate: n/a
Fertility rate: n/a
Orphans due to AIDS: n/a
In September 2003 the Kenyan government approved a bill that would make it a criminal offence to sack or deny employment to anyone on the basis of their HIV status and would prevent insurers from raising premiums or denying services to HIV-positive clients.

**Uganda** With political commitment from the president and effective outreach through community groups, religious leaders and faith based organizations, Uganda’s concerned efforts to reverse the spread of HIV/AIDS are working.

The Ministry of Health reports that after reaching a high of approximately 15% in 1991, Uganda cuts its HIV infection rate to 5% by 2000, by reaching out to every citizen and teaching the ABC – Abstain, Be faithful, use Condoms-model of AIDS prevention. Uganda also worked to offer AIDS testing and care for the sick, encouraging every person to know his or her HIV status.

Uganda’s fight against AIDS was also supported by resources made available through debt relief. The country’s annual debt service payments have dropped from USD 151 million to USD 60 million.

In addition to funding AIDS programs, debt savings have been used to fund universal primary education – the number of young children attending school increased from 2.3 million at the start of 1997 to 6.5 million by March 1999.

Uganda conceptualised an integrated approach to the epidemic as early as 1987 leading to the development of the Multisectoral Approach to the Control of AIDS (MACA) adopted by Parliament in 1992. MACA calls for individual and collective efforts against the epidemic and has served as the basis for the development of periodic national HIV/AIDS programs and implementation arrangements.

The Uganda AIDS Commission (UAC) was established in 1992 by an Act of Parliament, to oversee and coordinate the multisectoral efforts to ensure focus on a common goal through a harmonised approach.

UAC spearheads processes for setting national priorities and policy formulation and is also charged with advocacy, resource mobilisation, information dissemination, and fostering linkages between the various actors. Partners from government and the non-government sectors are guided by the National Strategic Framework to develop programs in the identified priority areas. Several government ministries are identified as lead actors in the various areas to ensure a coordinated focus on all areas.

The newly established Partnership Structure has enhanced joint monitoring and evaluation of the national program at national and sector levels and eventually district level.

Currently all government ministries and districts, a big number of local and international NGOs, FBOs, CBOs and most bilateral agencies and UN have developed and or support HIV/AIDS programs targeting different issues of the epidemic in the country. UAC coordinates these efforts largely through consensus building on key issues, that involves all key players at policy and technical levels.

Over the years, the country’s response has been characterized by high political commitment right from President Yoweri Museveni; a policy of openness about the epidemic that enhances dialogues at program development and implementation levels; a sense of commitment that resulted in the multiplicity of partners in HIV/AIDS coordinated by UAC; and tremendous technical, material and financial support from development partners.

One of the brightest examples on how to turn back AIDS in Africa.

### Definitions and sources

**HIV rate**

HIV prevalence is defined here as the percentage of men and women between the ages of 15 and 49 who are HIV positive. WHO work with national governments and research institutions to calculate these numbers, but they are estimates, not an exact count of infections.

**Gross Domestic Product (GDP)**

GDP represents the value of all goods and services produced domestically in a country within a year. The average GDP is obtained by dividing the GDP by the population. This figure provides a measurement of average wealth, but can be misleading because a country’s wealth is usually distributed very unevenly.

**Fertility rate**

Fertility is a measurement of the childbearing performance of a population. It is the ratio of live births in an area to the population of that area. The numbers are expressed as per woman.

**Orphans due to AIDS**

Orphans due to AIDS refers to a child under the age of 18 whose mother or father, or both, have died in AIDS.

**Human Immunodeficiency Virus (HIV)**

HIV is the virus that causes the Acquired Immunodeficiency Syndrome (AIDS). HIV attacks and slowly destroys the immune system by entering and destroying the cells that control and support the immune response system. After a long period of infection, usually 3–7 years, enough of the immune system cells have been destroyed to lead to immune deficiency. The virus can therefore be present in the body for several years before symptoms appear. It is possible to monitor the development and degree of immunodeficiency, and while the impacts of the disease can be mitigated with proper treatment, there is no cure for AIDS once a person is infected with HIV. There are three main ways in which HIV is transmitted among people:

- By sexual contact
- When infected blood is passed into the body (e.g. through blood transfusion or use of non-sterilized material)
- From an infected mother to her child during pregnancy, childbirth or breastfeeding

**Acquired Immunodeficiency Syndrome (AIDS)**

A disease caused by HIV, and characterized by failure of the immune system to protect against infections and certain cancers.

**Sources**


### Countries

- **Ethiopia**
  - HIV rate: 6.4%
  - Total population: 73 million
  - Average GDP: USD 600
- **Kenya**
  - HIV rate: 15%
  - Total population: 33.8 million
  - Average GDP: USD 1,500
  - Literacy rate: 78%
  - Fertility rate: 5.0
  - Orphans due to AIDS: 650,000 (WHO 2004)
- **Rwanda**
  - HIV rate: 8.9%
  - Total population: 8.4 million
  - Average GDP: USD 900
  - Literacy rate: 61%
  - Fertility rate: 5.5
  - Orphans due to AIDS: 160,000 (WHO 2004)
- **Sudan**
  - HIV rate: 2.6%
  - Total population: 40.2 million
  - Average GDP: USD 1,000
  - Literacy rate: 46%
  - Fertility rate: 4.8
  - Orphans due to AIDS: n/a
- **Tanzania**
  - HIV rate: 7.8%
  - Total population: 36.7 million
  - Average GDP: USD 710
  - Literacy rate: 68%
  - Fertility rate: 5.1
  - Orphans due to AIDS: 980,000 (WHO 2004)
- **Uganda**
  - HIV rate: 7%
  - Total population: 36.3 million
  - Average GDP: USD 1,100
  - Literacy rate: 62%
  - Fertility rate: 6.7
  - Orphans due to AIDS: 940,000 (WHO 2004)

**Photo source**: Joy Moses
Meetings, workshops and conferences

Human Rights – Know them, demand them, protect them!

That was the motto used by the organisers of an event that took place during the 16 days against Gender Based Violence in Khartoum, Northern Sudan. This special event had a different ring to it as it came after the tragic death of a four year old girl who passed away during FGM (see Regional Update).

The International Human Rights Day was celebrated in the National Theatre and was divided into two parts. The first two and half hours held an exhibition with more than 20 NGO participants. SCS had an extremely rich booth with all publications relevant to human rights, with special emphasis on Sudan.

By the end of the exhibition, the event moved inside the actual theatre where some of the most famous singers and performers gave an energetic display of Sudanese culture through music and dance. UN Agencies, International and National NGOs and almost 3,000 spectators joined together in this celebration.

The minister of Justice as the Guest of Honour added more weight to the event, and reminded us that children such as Inam will not go unnoticed.

International Workshop on Development

Fred Magumba, Program Manager for Save the Children Sweden in Southern Sudan, participated in a workshop entitled ReInventing Development, on 1–4 December 2005 in London, UK.

The workshop which was attended by development practitioners, human rights activists, government policy makers, and human rights and development students from different parts of the world was organised to readdress development especially using the Rights Based Approach.

Fred presented a paper on Save the Children Sweden’s experiences on rights based approach, adding a third world perspective to the workshop on development and children’s rights.

Leadership for Change

A five days training on Leadership for Change was conducted in Nairobi 22–26 November 2005.

A total of 25 participants, comprising of SCS staff from Southern Sudan and Nairobi, attended.

The training was facilitated by Uganda Cooperative Alliance and the Swedish Cooperative Centre (SCC/VI).

The main objective was to develop knowledge and skills of leadership and organisational development in a challenging and fast-moving world.

Some of the topics covered included thinking tools, key strategic thinking styles, impact of organisation/personal values on leadership, personal life goals, and strategic planning in non-profit organisation.

The training was concluded by participants making action plans and evaluation of the training.

Kassala Campaign on Children’s Rights

As follow up on the Child Rights Campaign conducted earlier this year, SCS supported the Kassala state Council for Child Welfare in Northern Sudan to conduct a campaign on children’s rights commemorating 15 years with the CRC.

Other international and local NGO’s are also involved. In addition to financial and technical support to the campaign, SCS conducted a workshop on child labour in Kassala city, bringing together related civil society and governmental bodies on 14–15 December; and training on children rights in New Halfa city targeting mainly community and civil society leaders on 17–18 December.

SCS has been providing child rights materials to support the training of the UN peacekeeping forces in Sudan.

Workshop on legal reforms and camel jockeys

The National Council for Child Welfare (NCCW) the government body coordinating children issues, UNICEF and Qatar Charitable society worked with SCS to organise two workshops in Khartoum, Northern Sudan.

The first workshop, on legal reform, reflected mainly the gaps on harmonisation of Sudanese laws with the CRC and its two optional protocols.

The workshop was mainly aimed as a forum of discussion between the legislative and law enforcement bodies and bodies working on child issues. It can be seen as part of a dialogue on greater legal protection for children in which SCS is playing a lead role.

The other workshop, on camel jockeys, was more controversial because it focused on the need to look at the issue from a rights perspective rather than as a commonly perceived charitable response to the suffering of poor children.

Camel jockeys are children who are separated from their families at an early age, some as young as two or three, and kept under very bad living conditions and exposed to different kinds of abuse and exploitation.

These children, who mostly come from the nomadic tribes of eastern Sudan, are the sole bread winners for their families. Eastern Sudan has some of the lowest social services provision levels and development indicators in the country.

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Expert meeting on the Rights and Welfare of the Child

7th Meeting of the African Committee of Experts on the Rights and Welfare of the Child was held on 19–21 December, 2005. SCS program officers for good governance, child rights and CRP attended the meeting.

During the meeting, six new committee members were sworn, and the Committee members appointed two reporters for the first two countries, Mauritius and Egypt, who submitted Government Reports to the committee.

The Committee also selected the theme for the celebration of the Day of the African Child on the Rights and Welfare of the Child. The selected theme is Rights to Protection: Stop Violence Against Children.

Non-discrimination workshop in Nepal


SCS Regional Program for South and Central Asia brought together 34 development professionals from Bangladesh, India, Nepal, Kenya and Tajikistan, to initiate the first ever workshop focusing solely on the multiple layers and forms of discrimination.

The 5-day workshop, held at Hotel Himalaya in Kathmandu, was an intensive learning experience for participants to deeply comprehend the various forms of discrimination, as well as develop strategies on addressing discrimination in all forms, at all levels.

It was also disclosed by the AU Commission for Social Affairs that there are two prizes to be awarded for organisation in 2006 — one for children champions in Africa and one AU Cozy Johnson Award.

Also, on the agenda of the meeting, Brainstorming Session on coordination with partners. SCS and the Institute for Human Rights and Development in Africa have presented a paper that requests for civil societies participation, and to have observer status in the committees meetings.

The committee members appreciated the initiative and decided to look in to the procedure for the participation of civil societies in the next meeting of the Committee.

Seminar on children and childhood anthropological

SCS and SC Norway, in cooperation with Dalarna University, Sweden, have initiated a study on Conceptualizations of Children and Childhood in Ethiopia.

The purpose is to learn more about ideas and practices of people in different parts of Ethiopia, children’s rights and duties in order to promote more informed advocacy and better targeted programming. The principal researcher for the study is associate professor Eva Poluha from Dalarna University, whose latest publication, The Power of Continuity, Ethiopia through the Eyes of Its Children is published by the Scandinavian Institute of African Studies.

In connection with the study, SCS invite to a seminar on children and childhood anthropological on 20 February, between 8:30 and 17:00, at SCS in Addis Ababa.

Facilitation skills training phase II

Training on facilitation skills, phase II, took place 28 November to 2 December in Rumbek, Southern Sudan.

The training focused on review and feedback on field practice, and feedback on follow-up activities of the Core team/facilitator’s assessment.

Other areas covered included developing training codes, curriculum development, monitoring and evaluating training program, and documentation.

SCS film on child participation in Southern Sudan

SCS aims to promote child- and youth participation with a rights based approach.

In Southern Sudan, children and youth are playing an important role in promoting peace, rehabilitation and reconstruction. During the Universal Children’s Week, 14–20 November, SCS produced a documentary film on children’s voices on matters of their rights, peace, reconciliation and reconstruction.

The documentary, We call for peace, was broadcasted on Kenyan Television on 11 December. More information, send a mail to david.neveling@swedsave-ke.org.

Workshop on ethics and civic education

Workshop on Ethics and Civic Education for 400 Education Officials and experts, schoolmaster and Children Civic Education Clubs was organized by Federal Anti-Corruption Commission (FACC), partner of SCS in Ethiopia.

The overall objective of the workshop was promoting democracy in schools, promoting the aims of education as provided in CRC, article 29, participation of children in school governance, and promote against corporal punishment.

Annual review and planning workshop

The annual review and planning workshop for Kenya/Southern Sudan, took place 5–8 December in Rumbek.

Over 25 participants from the field and Nairobi participated in the workshop. The first day was utilized to discuss SCS internal issues, which included presentation of HR Policy by the new HR manager, followed by discussions and inputs.

Other issues covered were the organogram for Kenya/Southern Sudan, job evaluations, and procurement and reporting.

On 6–7 December, a workshop on protection was held. The aim was to collect ideas and information as a platform for developing a strategy for protection.

• Share what we do in Eastern and Central Africa on protection.
• Give a brief overview on the program area in relation to the program and how it relates to our projects.
• Make situation analysis of protection issues in Southern Sudan.
• Identify the priority areas and discuss the role of GOSS.

Panel discussion on Children with Disabilities

At the celebration of the International Day of Persons with Disabilities, SCS partners Handicap National (HN) and Ethiopian Association of Mentally Retarded Children and Youth (ENAMARCY), in collaboration with AA City Administration, organised a panel discussion on the theme Rights of Persons with Disabilities Action in Development.
Thousands and possibly millions of Sudanese children suffer from exploitation and discrimination, said Ted Chaiban, UNICEF’s representative in Sudan, at the launch of the State of the World’s Children 2006 report in Khartoum, Northern Sudan, 14 December.

The report comes at an important time when attention is being focused on the practice of FGM in Sudan.

SCS has seized the UN Secretary General’s Study on Violence against Children as an opportunity to seek relevant information that could increase insight and provoke interest on the deep rooted practice of physical and humiliating punishment of children in Eastern and Central Africa.

The reports, for Ethiopia, Kenya, Sudan and Uganda, explore the views and perceptions of physical and humiliating punishment against children among children, teachers and parents.

The reports also identifies the types, prevalence, magnitude, causes and effects of the punishment on children. Moreover, they review the policy and legal framework as to identify loopholes and/or good practices with regards to physical and humiliating punishment against children.

According to the findings of the studies, parents and teachers were identified as the main perpetrators of physical punishment in the home and at the school. Street children receive physical punishment from adults on the street and from police officers.

Within the penal system, corporal punishment is practiced, particularly during the investigation period. Reasons for physical punishment focused on the poor awareness of teachers, parents and children themselves about the rights of children and the alternatives to punishment.

If you would like a PDF-version of the studies, or more information, send a mail to david.neveling@swedsave-ke.org


Upcoming events, new publications and picks

New reports on Physical and Humiliating Punishment

Regional Calendar

20 January
SCS/SCN arrange childhood seminar with Prof. Eva Polhuha and Prof. Karin Norman Addis Ababa, Ethiopia

20–21 January
Workshop on MDG and PRSP for children Addis Ababa, Ethiopia

23–24 January
Workshop on MDG and PRSP for Kebele officials, community members/leaders and civil society organisations. Addis Ababa, Ethiopia

23–25 January
SCS program visit to Tigray, Ethiopia

25–26 January
Consultation on the II PRSP for Kebele officials, Community repr. and children. Addis Ababa, Ethiopia

30–31 January
Training on district Development Plan Preparation for concerned stakeholders for Kebele, woreda/district and sub-city officials. Addis Ababa, Ethiopia

7–12 February
SC Alliance meeting with Martin Scheinin, Prof. HR and UN Special Rapporteur Addis Ababa, Ethiopia

10–11 February
Gender Strategy Development Workshop Addis Ababa, Ethiopia

14–17 February
Review 2005 for SCS Ethiopia Addis Ababa, Ethiopia

23–24 February
SCS Country Directors meeting Nairobi, Kenya

23–24 March
SC Alliance Inclusive Education Workshop Addis Ababa, Ethiopia

Calendar dates are accurate at press time; please send a mail to david.neveling@swedsave-ke.org or call +254 736 139 166 for more information.

SCS on Khartoum Radio

Rawa Gafar, Program Officer at SCS in Khartoum, Northern Sudan, participated in the first radio programme discussion on the issue of camel jockeys as continuation of SCS long-term efforts to raise public awareness of the issue of camel jockeys.

These initiatives have allowed camel jockeys to be prioritised on the Northern Sudan agenda. It is important to also give credit to the police force that has shown considerable efforts to reduce trafficking of children.

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