Lesotho celebrated 50 years of independence on 4 October 2016. Despite progress and attaining status as a lower-middle income country, it still faces three major challenges: food security, unemployment and HIV/AIDS. More than one in four individuals age 15-49 years in the country are infected with HIV/AIDS, disproportionately so for adolescent girls. Lesotho is still heavily dependent on foreign aid, posing a great challenge in addressing socioeconomic issues, especially for children and women.

Against this backdrop, the Government of Lesotho (GoL) and UNICEF Lesotho implemented the fourth year of the 2013-2017 Country Programme of cooperation, which is anchored on the National Strategic Development Plan (NSDP). Lesotho extended the Plan for an extra year to 2018, and the Country Programme will also be extended.

Severe drought in 2016 induced by the El Niño phenomenon left 679,437 people (58 per cent children) food insecure. The child protection rapid assessment of March 2016 reported increased occurrence of sexual violence, exploitation, and child labour. In response, cash top ups were provided to 26,000 of the poorest households (78,000 children, 53 per cent girls). The Food and Agriculture Organization (FAO) provided the same households with vegetable garden packs to ensure continued provision of nutritional food for children. A total of 12,295 households (61,475 beneficiaries) were provided with safe drinking water through distribution of water purification tablets and flocculants. This exercise was coupled with hygiene education reaching 132,208 people, of which 67 per cent were female, with messaging on handwashing, nutrition, living in clean environments and reducing open defecation.

Continual monitoring of the nutritional status was ensured and the global acute malnutrition rates in the concerned areas showing a reduction from 5.1 per cent, with boys at 6 per cent affected more than girls at 4.2 per cent respectively. During the distribution of nutrition commodities, health and water, sanitation and hygiene (WASH) messages simultaneously communicated in collaboration with the Ministry of Health (MOH). Counselling services and testing for HIV and AIDS was offered to 300 concerned mothers, and those who were HIV positive were referred to health centres for treatment.

Support was provided to the Child and Gender Protection Unit to address cases of child exploitation, assault and abuse. Cooperation with government and civil society organizations resulted in strengthening of the capacity of Justice for Children (J4C) programmes. Protection issues were addressed through the Child and Gender Protection Unit, reaching an estimated 160 girls and boys (91 per cent girls). To deter the escalation of child marriages, the Ministry of Social Development (MOSD) was supported in carrying out campaigns to end child marriage beginning in June in commemoration of the Day of African Child, under the theme ‘Help end Child Marriage: take a child to school’. These campaigns are scheduled to run for the next two years countrywide.

In reflection of Lesotho’s jubilee year, a stocktaking exercise on the fulfilment of the rights of children was conducted through the preparation and submission of the second, third and fourth Combined Periodic Reports (1999-2013) on the implementation of the Convention on
the Rights of the Child (CRC) to the UN CRC Committee. The report acknowledged the slow implementation of the Child Protection and Welfare Act of 2011, mainly due to insufficient allocation of human and financial resources.

The finalization of the education diagnostic study and new sector plan helped the Ministers of Education and Finance to rationalize the education budget to improve performance. Following assessments conducted in 2015, policy makers decided to revise and implement the comprehensive sexuality education curriculum; and develop new guidelines on Test and Treat for adolescents.

Greater emphasis was placed on strengthening and expanding the National Information System for Social Assistance (NISSA) as a single integrated registry nationwide. The registry will also include an emergency module for efficient and effective targeting during humanitarian crises. Through partnerships, an additional 60,000 households are being registered on NISSA, to bring the total registered households to 180,000 by mid-2017. By the end of 2018, all 350,000 households will be registered.

Treatment coverage for HIV infected children doubled, from 29 per cent in 2015 to 57 per cent in 2016, but failed to reach the 95 per cent target set, mainly due to systemic gaps in the identification of children and the ability of health providers to start children on treatment.

Humanitarian Assistance

In 2015 and 2016, Lesotho experienced severe El Niño-induced drought, which prompted the Government to declare a drought emergency in December 2015. In February 2016, the Government developed a national response plan, pledged US$11 million and appealed to the international community for humanitarian assistance.

The severity of the drought, described as the worst in 35 years, is reported to have impacted heavily on the estimated 70 per cent rural population, whose main means of livelihood is subsistence farming. The triple effects of a failed agricultural season in 2015, a weakening South African Rand and overall food shortages in the region resulting in increased food prices and severe food insecurity have compounded the effects of the drought on the rural poor.

Humanitarian needs assessments exercises conducted in January/February and May/June 2016 found 38 per cent (534,000 people) and 48 per cent (679,437 people) of the rural population to be food insecure, respectively. This situation was further aggravated by loss of livestock as well as a cold and harsh winter. The health and nutritional status of women, children below the age of 5, and people living with HIV and AIDS was also compromised. Many food insecure people were reported to be residing in the lowlands, while harvest failures and water scarcity was common across the country.

Emanating from the drought was an acute water shortage, which, according to the Ministry of Water, resulted in an estimated 302,000 people (16 per cent of the population) drawing water for domestic and drinking purposes from unprotected water sources. A Child Protection Rapid Assessment exercise undertaken by UNICEF Lesotho in partnership with World Vision Lesotho (WVL) and the Government reported increases in the number of incidents of sexual violence and exploitation, psychosocial distress, child labour and school dropouts.

UNICEF Lesotho supported the Government through the Ministry of Health (MOH) and other line Ministries to conduct a nationwide mass screening on nutrition, targeting children below the age of 5 as well as pregnant and lactating women. This exercise contributed significantly to the affected populations having access to treatment for severe acute malnutrition (SAM).
In 2016, the UNICEF Lesotho response plan was US$9.1 million, of which US$4.1 million was raised through the Central Emergency Response Fund, Department for International Development (DFID) and Canada. The funding provided therapeutic treatment to 4,402 children suffering from severe acute malnutrition. Of the children discharged from treatment during the year, 79 per cent were cured, 6 per cent had died, 4 per cent defaulted and 12 per cent were classified as non-recovered. UNICEF supported two rounds of nutrition and HIV rapid assessments in five priority districts that helped to determine the magnitude of the effects of El Niño on acute malnutrition. All children identified with severe acute malnutrition during the mass screening exercise were referred to health facilities for treatment.

World Health Organization (WHO) and UNICEF also assisted with in-patient and out-patient treatment to ensure the use of updated protocols and registration of patients to improve reporting and documentation of treatment outcomes for severe acute malnutrition. Moderate malnutrition prevention was successfully implemented and commodities were distributed. The monitoring of the nutritional status and the global acute malnutrition rates in the concerned areas has shown a reduction from 5.1 percent, with boys affected at 6 per cent and girls at 4.2 per cent. During the distribution of nutrition commodities, health and WASH messages were communicated in collaboration with the MOH. Counselling services and testing for HIV and AIDS was offered to 300 concerned mothers and those who were HIV positive were referred to the health centres for treatment.

Through the Child Grants Programme (CGP), a partnership between UNICEF, MOSD and the European Union (EU), an estimated 26,000 poor households caring for approximately 78,000 children were reached with cash transfer top-ups. In partnership with FAO, the same households were also reached with vegetable garden packs to help ensure that the beneficiary households continue to provide nutritional inputs for their children during the drought.

UNICEF Lesotho, in partnership with MOH and Catholic Relief Services, reached approximately 12,295 households (61,475 beneficiaries) with safe drinking water through distribution of water purification tablets and flocculants. This exercise was coupled with hygiene education reaching 132,208 people (67 per cent female) with messaging on handwashing, nutrition, living in clean environments and reducing open defecation. Protection issues were addressed through the Child and Gender Protection Units (CGPU), reaching an estimated 160 girls and boys (91 % girls).

**Emerging Areas of Importance**

Findings from the Lesotho Demographic Health Survey 2014 (LDHS, 2014) show low performance in the achievement of child related outcomes. The LHDS 2014 highlights a neonatal mortality rate of 34 per cent, a 33 per cent rate for both stunting and pre-school enrolment, and 43 per cent birth registration rate for children below the age of 18. In 2016, UNICEF Lesotho, in partnership with the Government and NGOs, focused on strengthening coordination for accelerated integrated early childhood care and development services (IECCD).

In 2016, UNICEF Lesotho supported the Ministry of Education and Training (MOET) to implement the National Policy on IECCD and the Strategic Plan. The support focused on capacity building for stronger coordination, advocacy and evidence generation among key strategic partners. To improve IECCD programming, UNICEF Lesotho also provided technical support to MOET and key line Ministries in the areas of nutrition, child protection, health, monitoring and evaluation. The World Bank supplemented this initiative with a training in applied evaluation.
The IECCD partnership, comprising UNICEF Lesotho, MOET, Catholic Relief Services (CRS), World Food Programme and key line Ministries, utilized various knowledge generation and sharing mechanisms and platforms to accelerate IECCD in the country. In 2016, three multi-sectoral sessions led to the development of intervention plans aimed at tracking progress, challenges and strategies for achievement of outcomes for children under five. In partnership with MOSD, country-wide sensitization sessions led by District Child Protection Teams (DCPT) meetings resulted in the integration of IECCD policy and strategy provisions into monthly agendas of the Teams. This was part of an effort to address issues pertaining to child protection for young children in an integrated manner.

In 2016, UNICEF Lesotho further supported MOET to conduct in-service training for IECCD teachers and trainees, including eight district-based workshops for teacher trainers and home-based resource persons. The trainings focused on child cognitive development, stimulation, pedagogy, nutrition and understanding of the provisions of the IECCD policy and strategic plan. Additionally, 151 caregivers (76 per cent female), underwent in-service training in one mountain district and three lowlands districts. In 2016, 101 people were trained, of whom 95 per cent graduated and received certificates following a two year training programme conducted in partnership with the Lesotho College of Education (LCE). Fifty-one pre-school teachers (98 per cent female) received formal qualification on IECCD. In collaboration with Catholic Relief Services, 88 pre-school teachers from five districts (urban and rural) were trained on IECCD principles.

In 2016, a total of 8,205 young children, (52 per cent female) and 252 pre-school teachers (11.4 per cent female) benefited from IECCD trainings.

Advocacy efforts for accelerated implementation of the IECCD policy and strategy led by UNICEF Lesotho, MOET and CRS culminated in sensitization targeting the local leadership, parliaments and communities across the country. In 2016, ten IECCD ambassadors from all the districts were identified. The ambassadors, ages 4 to 6 years, articulated children’s issues at several national forums, notably the launch of the Nutrition Policy by the King of Lesotho.

In 2016, collaborative efforts between UNICEF Lesotho, CRS, and MOET culminated in a national symposium entitled ‘Investing in IECCD, investing in Lesotho’s Future’. The symposium brought together researchers and practitioners from Lesotho and other southern African countries to share findings and experiences on IECCD issues. The symposium also included a session with private sector.

UNICEF Lesotho supported MOET to undertake data collection and analysis in an effort to improve planning and implementation for IECCD in 2017/18. UNICEF Lesotho also supported MOET with the engagement of a consultant who in 2017 will lead the content validation study on early learning and development standards and age validation. Results from this exercise will inform the IECCD curriculum reform process, teacher training and parenting education in the country.

To support movements for accelerated results for children, in 2016 UNICEF Lesotho collaborated with Lesotho Council of NGOs (LCN) and sensitized 100 grassroots civil society movements on IECCD policy and issues pertaining to access to education. This forum provided an opportunity for further engagement and development of tools for tracking results for children at a grassroots level.

**Summary Notes and Acronyms**
UNICEF continued to support community capacity development to address gaps in the provision of services to children, especially the most disadvantaged. The emphasis of UNICEF’s work in 2016 was on strengthening the capacity of community-based workers to inform and educate members of their communities on how to keep children alive, healthy, well-nourished and safe from abuse, particularly during the drought crisis.

In response to the El Niño drought, a multi-sectoral communication for development (C4D)
team was established. The team conducted a C4D rapid assessment in the five most affected districts. The findings from the assessment were used to design communication materials and messages on the use of safe water, hygienic practices, how to protect children from abuse or exploitation, and infant and young child feeding. Village health workers in target districts were trained on how to deliver the messages as well as how to distribute water purification commodities.

To date 12,295 households and 61,475 beneficiaries (94 per cent women and girls) were reached with safe potable water through distribution of water purification tablets in five districts. Hygiene education was provided to 132,208 people (67 per cent female). UNICEF collaborated on this effort with CRS, WVL, WHO, MOSD, MOH and the Ministry of Water.

UNICEF also collaborated with MOSD to establish and train the multi-sectoral team on child protection in emergencies. The team organized a national campaign to sensitize people, including parliamentarians, on the need to end child marriage, which culminated in the passage of a motion in parliament to end child marriage.

As part of efforts to end the transmission of polio in the world, UNICEF, in collaboration with WHO, supported the introduction of new vaccines against poliomyelitis. Committees comprised of village health workers and community leaders were trained to promote the uptake of the new vaccine.

**Evidence Generation, Policy Dialogue and Advocacy**

UNICEF, World Food Programme (WFP), United Nations Development Programme (UNDP) and FAO contributed to the finalization of the Lesotho Food and Nutrition Policy, and the Cost of Hunger in Africa Study (Lesotho Chapter), which together with the Scaling Up Nutrition Movement (SUN) were launched by His Majesty the King of Lesotho in 2016. UNICEF is currently costing the nutrition plan and strengthening governance structures for SUN.

Findings of the 2015 country assessment report on adolescent HIV and the situation analysis report on Adolescents and Young People’s Health influenced decisions in 2016 to implement the Global Fund for Adolescent Girls and Young Women, drafting of the school health policy, revision of the comprehensive sexuality education curriculum, and new Test and Treat guidelines for adolescents.

UNICEF led the support on the diagnostic study of 2016 to assess efficiency, effectiveness and performance in the education sector. The findings contributed in informing decisions on programme and management priorities of the sector plan 2016-2026.

UNICEF, FAO and the Oxford Press published a book entitled ‘From Evidence to Action: The story of cash transfers and impact evaluation in sub-Saharan Africa’. The book launch by Her Majesty the Queen influenced high level policy makers to renew commitment to progressively increase the coverage of the child grant programme and review the amount of transfers in 2017.

A process evaluation of the conditional cash transfer pilot, supported by UNICEF and FAO, provided evidence on the unsuitability of the model in Lesotho.

The review of the integrated social protection pilot showed that integration will lead to efficiency and effectiveness gains.

UNICEF, with the Ministry of Finance, MOET, and MOSD, is preparing sectoral budget briefs for health, education, social protection and macro economy to provide policy makers with
evidence to take appropriate actions to address the rights of children, particularly the most disadvantaged.

**Partnerships**

UNICEF Lesotho partnered with the Lesotho National Olympic Committee to benefit 16,000 young people through interpersonal communication and social media, driving demand for reproductive health and HIV services, while addressing the drivers of HIV. UNICEF Lesotho also participated in collaborative initiatives in HIV programming, including the United States-supported DREAMS programme, the Global Fund-sponsored Adolescent Girls and Young Women’s programme, and the ALL IN Initiative on HIV in adolescents.

In 2016, UNICEF, MOSD, EU, World Bank, FAO and other UN agencies embarked on a concerted drive to strengthen the social protection system. This included improving the targeting process, policy implementation, and accountability and coordination mechanisms for addressing multiple deprivations in children. In partnership with FAO, CRS and the World Bank, a social protection plus package known as Sustainable Poverty Reduction through Income, Nutrition and Access to Government Services was modelled in five districts, assisting 3,500 poor households with 10,500 children to exit from the poverty trap. In partnership with FAO, 23,000 households (69,000 children) received farming implements and cash transfers for children to improve their livelihoods. Over the course of the year, mapping of local think-tanks in academia and research institutions took place to expand partnerships for evidence-based, equity-focused advocacy.

Collaboration with Government and civil society organizations resulted in strengthening the capacity of J4C programmes. This has improved reporting of child abuse cases to the Child and Gender Protection Unit, Children’s Court and on the Child Helpline platform. These reports fed into high-level advocacy, leading to a better resourced J4C Programme and Restorative Justice and Diversion Programmes for young offenders. This complemented work with MOET in the rollout of Child Friendly Schools and the provision of alternative learning opportunities with Lesotho Association for Non Formal Education, the Good Shepherd Sisters and Sentebale for children herding cattle.

**External Communication and Public Advocacy**

UNICEF hosted several donor visits, including two from DFID and EU, resulting in the funding of 46 per cent of the drought response appeal budget. The UK National Committee for UNICEF’s visit to Lesotho during the drought resulted in the publication of a series of articles and posts on various social media platforms.

In close collaboration with other UN agencies, several media visits from outlets such as the BBC-Wales, NHK Japan TV and CNN were also utilized to highlight the humanitarian challenges faced by children in Lesotho. Press releases and media pitches on El Niño were shared with the UNICEF Africa services unit in Johannesburg, including social media platforms with over 2,000 hits recorded so far.

Working closely with parliamentarians, UNICEF sensitized the 26 members (43 per cent of them female) of the HIV/AIDS and the Social Cluster Portfolio committees on child deprivation issues in the country. This included the provision of laptops for improved capacity in communication and research for the committees, leading to a motion on ending child marriages and the drafting of a related bill.

Working with the Government, civil society organizations, and their majesties the King and Queen of Lesotho, UNICEF continuously advocated for the fulfilment of children’s rights in the country. His Majesty the King led a high level launch of the Lesotho Food and Nutrition
Policy, the SUN movement and the Cost of Hunger in Africa Study, leading to renewed efforts to end child hunger in Lesotho and accelerating the momentum to reduce stunting, which is down by 15 per cent in the last four years. Her Majesty the Queen led initiatives throughout the year, including the launch of the cash transfer book in Lesotho, Breastfeeding Week (improved by 50 per cent in the last three years), and Day of the African Child, Ending Violence and Child Marriage.

**South-South Cooperation and Triangular Cooperation**

UNICEF Lesotho invested significantly in strengthening South-South cooperation. In 2016, several government Ministries were supported to conduct learning visits, which led to significant results for children.

In collaboration with the UNICEF East and Southern Africa Regional Office, FAO, MOSD and EU, the Cash Transfer Book on the experiences of eight sub-Saharan countries was launched. The Cash Transfer Book, which took eight years of focused and rigorous research to produce, evaluated cash transfer case studies and provides them in one edited volume to inform further research, policy makers and programmers on taking effective and efficient programmes to scale.

UNICEF also supported the MOSD to participate in a Community Of Practice meeting held in Tanzania. The Community Of Practice meeting was a platform for African countries to share knowledge and experiences on cash transfer programmes. This opportunity galvanized the Government of Lesotho to focus on efficiency as it plans to scale up the Cash Grant Programme (CGP) for children.

The MOSD, in partnership with UNICEF, organized a high level delegation from Mozambique on a study tour to Lesotho focused on the integrated social protection system, with specific reference to targeting, enrolment, payment modalities, documentation and management of beneficiary cases.

Lesotho shared the costing of the Children’s Protection and Welfare Act of 2014 to inform the child protection’s 2014 to 2016 annual workplan with the Botswana, Namibia, Lesotho, South Africa and Swaziland (BNLSS) sub region as a good example for resource mobilization efforts in Justice for Children. Also as part of the BNLSS learning and sharing platform, the option B+ meeting reviewed the implementation of prevention of mother-to-child transmission of HIV (PMTCT) services, guiding development of policy towards SDGs targets on the Global Strategy for Women’s, Adolescents’ and Children’s Health, the ‘90:90:90’ initiative.

**Identification Promotion of Innovation**

To improve the quality of performance in primary and secondary schools, UNICEF Lesotho collaborated with the World Bank and designed a new approach termed ‘changing the mindset of middle management’. The approach focuses on training principals, their deputies and senior teachers on a growth mindset through careful planning by the school management. The plans are based on modelling, where teachers see themselves in a process of continually learning, creating space for innovation, providing time for reflection and formative feedback. Sixty-seven per cent of the 31 schools in the programme had a 15 percentage point improvement in pass rates.

In collaboration with Vodacom Lesotho and relevant line ministries, preparations were concluded for the installation of EduTrac, a mobile phone-based data collection system. When deployed, the system will aid in the collection of data on attendance and enrolment, regularly providing real time information at school level. In Lesotho this platform will also be
used to gather information from health facilities on nutrition, expanded programme of immunization (EPI), HIV test and treat for mothers, children and adolescents.

In collaboration with local partners and the US Department of Education’s Office of Special Education Programmes, a conceptual framework on Positive Behaviour Intervention Support was drafted to address HIV prevention among adolescents in and out of schools for the next three years.

Support to Integration and cross-sectoral linkages

Given that the 33 per cent stunting prevalence in children under 5 contributes negatively to health and learning outcomes, UNICEF recognized that it was important to also show the detrimental impact on the country’s economic development. Working with WFP as co-lead in the nutrition cluster, a well-planned and coordinated multi-sectoral approach to generating evidence through the Cost of Hunger in Africa Report (Lesotho Chapter) was produced. This report shows that Lesotho lost an estimated US$200 billion due to undernutrition, adding up to a total loss of 7.13 per cent of GDP in 2014 alone.

In collaboration with the UN, civil society and relevant sectors, UNICEF Lesotho continued to build on the wave of the current political commitment to prioritize the implementation of nutrition-specific and nutrition-sensitive interventions such as community-led total sanitation, IECCD and social protection to reduce diarrhoea, parasitic infestations, and micronutrient deficiencies and improve food availability in households. Twenty-two villages in one district made considerable progress towards becoming free of open defecation, thereby reducing risk to infections for 19,200 children.

The health, child and social protection sectors facilitated registration and issuance of birth certificates through the ‘One Stop Shop’ initiative, whereby all critical social services are provided in one location in a community council, increasing the registration rate by an estimated 20 per cent.

Service Delivery

According to the LDHS 2014, about 27 per cent of households in Lesotho do not have sanitation. To address this situation, UNICEF Lesotho continued to implement the community-led total sanitation pilot in one district. This resulted in the communities constructing 259 latrines in 22 villages, 35 latrines in 4 schools, and 64 handwashing facilities in schools. One village (Ha Khupiso) in Thaba Tseka district was certified ‘Open Defecation Free’.

A national multi-sectoral communication for development (C4D) team established and led by UNICEF Lesotho conducted a rapid assessment on the effects of the drought on communities in the five most affected districts. The findings were used to design communication materials and messages on the use of safe water, hygienic practices, protection of children from abuse and exploitation, and infant and young child feeding. To date 132,208 people (67 per cent of them female) have been reached with messaging through village health workers.

With the Ministry of Local Government, the ‘One Stop Shop’ model was standardized to provide services and information closer to communities, especially in remote areas. Guidelines for planning, organizing and monitoring of implementation were developed. Service Day events, which gave 30,000 children birth certificates, are now part of the mobile citizens’ service centre and are also being organized by councils in six other non-UNICEF focus districts. The Service Days are contributing to filling the gap in the provision of some systematic routine data collection, especially on health and birth registration services. Strengthening systematic routine data collection on child indicators will be one of the key
areas the UN system as a whole will address with the Ministry of Development Planning and the Bureau of Statistics in 2017.

**Human Rights-Based Approach to Cooperation**

Responding to some of the CRC concluding Remarks and Recommendations by the UN Committee on the Rights of the Child, UNICEF Lesotho provided technical and financial assistance to the National Orphan and Vulnerable Children’s Coordination Committee to support implementation and coordination of child protection activities nationally. UNICEF Lesotho also facilitated the re-establishment of the National NGO Coordinating body by CRINSA, giving the country the opportunity to benefit from regional and international capacity-building and resource mobilization efforts.

UNICEF also supported the Government of Lesotho to submit a Combined CRC Report (1999-2013) to the UN Committee on the Rights of the Child following a seven-year default. Presentation of the report is scheduled for 2018.

UNICEF Lesotho also responded to relevant recommendations of the 2014 Universal Periodic Review (UPR), providing an update on the Children’s Protection and Welfare Bill 2004, enacted in 2011. Joint efforts with UNDP are underway to guide the country team to address structural causes of non-realization of rights in Lesotho.

To address the high neo-natal mortality and skills gap, UNICEF supported MOH in generating evidence to inform the improvement of neo-natal care in health facilities. As a result of these efforts, MOH has developed a child mortality tracking system which records causes of death among children 0-12 years of age.

UNICEF is working closely with and building the capacity of the parliamentary portfolio committees for HIV and the social cluster to monitor child indicators in Lesotho. The portfolio committee members were provided with tools and resources to understand the challenges on the realization of children’s rights and to develop the requisite expertise on holding government ministries accountable. In 2017, the committee members will be trained for public financing for children, providing the tools to interrogate government’s budget for the realization of children’s rights.

**Gender Equality**

In collaboration with the MOSD, Ministry of Justice and Correctional Service, WVL and other partners, UNICEF Lesotho supported various awareness raising initiatives to end child marriage. Radio, TV, community dialogues and face-to-face advocacy efforts culminated in the passage of the motion to end child marriage by the Parliament in July 2016. Follow-up consultations, lobbying and capacity building continued with the parliamentary Social Cluster Portfolio Committee to enact the End Child Marriage bill into law.

In response to the El Niño humanitarian crisis, a child protection rapid assessment was undertaken to identify the nature and scope of emergency-induced protection issues, with a focus on the gender dynamics. Findings informed the formulation of Child Protection in Emergencies (CPiE) and Gender Based Violence in Emergencies (GBViE) messaging and the Eastern and Southern Africa-wide report on child protection in emergencies.

Ante natal care (ANC) records show that more than 50 per cent of people who attend ANC are young people ages 15 – 24 years old. LDHS 2014 shows that by the time a girl turns 19 years old, there is a 40 per cent probability that she would have started to have children. Evidence also shows that girls access HIV testing services more than boys. However, service uptake is still low, with less than 50 per cent of girls accessing HIV testing services.
UNICEF Lesotho has therefore continued to support the MOH to capacitate service providers in providing adolescent-friendly services for girls as the group most affected by reproductive health issues and HIV infections. In partnership with WHO, UNICEF Lesotho developed the Adolescent Health Service Delivery Guidelines and complementary training materials, taking into account the specific needs of adolescent girls. UNICEF Lesotho also supported various organizations on reaching adolescent boys and girls with appropriate messages to create demand for services, especially services for sexual reproductive health and HIV.

**Environmental Sustainability**

Specific initiatives to address climate change issues for children were undertaken with partners. In an effort to reduce the country’s emissions contributing to climate change, solar-powered water systems were constructed to provide safe water for a community in Berea district.

UNICEF Lesotho put in place a tracking system for all vehicles in a bid to reduce irregular use of vehicles, promote carpooling with UNDP and UNFPA to reduce the carbon footprint. The volume of documents printed and photocopied was reduced by 27 per cent by projecting information that is required for meetings onto a screen and by staff using their laptops in meetings.

**Effective Leadership**

The country management team (CMT) adopted a vision for incremental improvement in 2016, with clear goals defined through the integrated monitoring and evaluation plan (e-IMEP), annual management plan (AMP), audit findings, global survey results country action plan, and the 2016 office retreat action plan. Minutes with clear action points were shared three days after each team meeting to ensure follow-up and timely completion.

The country management team strengthened oversight and quality assurance through the use of a management dashboard for tracking progress on management indicators on a monthly basis, linked to results for children and the compact between UNICEF Lesotho and the UNICEF Regional Office (RO). The Finance Dashboard provided the country management team with an overview of UNICEF Lesotho’s financial status and kept the office on track with budget utilization, liquidation of direct cash transferred to implementing partners, and expiring grants.

The country management team was appraised on the use of InSight, with an emphasis on the scorecards as a monitoring tool. Following the global guidelines, the team monitored the operationalization of HACT through templates for programme quality assurance on results with disaggregated data and cost effectiveness analysis. Mid-year and annual reviews were held with partners to take stock of progress and plan for the future.

In conjunction with the Learning and Training Committee, a comprehensive Risk Assessment and Reporting exercise based on the new enterprise risk management guidelines was conducted in August 2016, with the participation of all staff and facilitation from UNICEF Regional Office. As a result of the training, the risk and control self-assessment was finalized and endorsed by the country management team for incorporation into the 2017 annual management plan and section annual work plans.

In October 2016, the One UN Business Continuity Plans were updated, with staff and logistical changes incorporated. UNICEF Lesotho provided substantial input, with guidance from the UNICEF Regional Office and New York headquarters and oversight from the country management team.
Financial Resources Management

Monthly, the CMT reviewed key management indicators, including implementation rates, grants monitoring and reporting, resource mobilization, and direct cash transfers (DCT). On a quarterly basis, the CMT followed up on ensuring the maintenance of closed audit actions. Operations and programme management indicators defined in the annual management plan were tracked to ensure adequate oversight on both programme and operations performance.

Significant time was invested in strengthening the implementation of the harmonized approach to cash transfers (HACT) assurance and monitoring. Training on HACT, procurement and the local tax system were carried out for all implementing partners and UNICEF Lesotho staff. Micro-assessments were completed in a timely manner for eligible implementing partners. Efficiency gains were obtained by outsourcing spot checks to an audit firm, which completed all planned spot checks for the year on time. All planned quality assurance activities for programme implementation were concluded to ensure value for money and results for children.

To ensure strong internal controls, the Table of Authority was revised in March and November. Monthly reviews of segregation of duties were carried out to avoid conflicts. Open items were monitored on a weekly basis to ensure identification, prompt correction and clearing of outstanding items. Bank reconciliation statements were approved on time and reconciling items acted upon immediately. Local finance focal points were trained on quality assurance of documents before submission to Global Shared Support Centre (GSSC).

Utilization rates at year end were 100 per cent for regular resources (RR), 100 per cent for other resources (OR) and 100 per cent for other resources emergency (ORE). Outstanding direct cash transfers were at 3 per cent for 6-9 months and 0 for over 9 months. All 11 planned spot checks were carried out and the findings used to improve the management of finances. No partner audit was planned.

Fundraising and Donor Relations

Fundraising continued to remain high on UNICEF Lesotho’s agenda. Monthly country management team meetings continued to track UNICEF Lesotho fundraising efforts, which included funds flow into the office, absorption capacity, as well as timely and quality donor reporting. The community management team also continued to monitor the implementation of the office resource mobilization strategy (2013 – 2017), which focuses on donor relations, implementing the annual partnerships work plan, tracking donor reports due, funds utilization, managing cash transfers and expiring grants.

UNICEF Lesotho organized donor field visits for the EU and DfID in an effort to ensure interaction with beneficiaries and to show how funds received were helping improve their lives. Focus continued to be on strengthening donor relations. A visit from the UK National Committee for UNICEF also raised funds, especially for the El Niño-induced drought, and to create awareness of its impact on children.

In response to the humanitarian appeal for children during the drought crisis, UNICEF Lesotho received US$4.4 million (out of the US$9.1 million appeal). The main donors were DfID and the Government of Canada. As of 30 November 2016, 93 per cent of the US$4.4 million was spent to provide humanitarian assistance to children and their families.

UNICEF Lesotho began the year with US$5,899,503.02, which was 80 per cent of the total annual amount of US$7,412,600.00 ORR budgeted in the country programme document for 2016. To address the funding gap, proposals were developed and shared with donors and the UNICEF Regional Office. By the end of 2016, an additional US$1,595,985.39 had been
raised, increasing the total funding to US$7, 495,488.41 and reducing the funding gap for the year to 0. Ninety-seven per cent of the resources of the annual country programme document ceiling were utilized by December 31.

**Evaluation and Research**

All inputs into the 2016 integrated monitoring and evaluation plan (IMEP) were completed, with a focus on research, studies, and evaluations. Findings were used to strengthen policy work, advocacy and programming. The 2016 IMEP was prepared and endorsed at the beginning of the year and subsequently monitored on a regular basis.

On systems strengthening, five national management information systems, namely National Information System for Social Assistance (NISSA), MOSD Management Information System (MIS), child protection monitoring and evaluation system, education management information system (EMIS), and health management information system (HMIS), were supported in the course of the year.

Broad achievements in this category included: improvement of the quality of the 2015-2016 health sector annual joint review report; the ongoing work on expanding NISSA (with an additional 60,000 households to be registered and verified by the second quarter of 2017); jump starting EMIS following the diagnostic study; supporting maintenance of MIS for the MOSD; and the development of child protection indicators for the sector.

Sixteen of the planned 21 surveys and studies were completed, three are in progress and two have not been initiated due to lack of funds. Six studies were disseminated to influence decision-making and the remaining 15 studies will be disseminated in early 2017.

Six of the seven evaluations that were planned for 2016 have been completed. One is ongoing – it is an impact evaluation and data collection that established baselines following the completion of the design phase. The findings and recommendations from these studies will inform the development of the 2017 annual work plan and the 2019-2023 country programme.

**Efficiency Gains and Cost Savings**

Attention was paid to efficiency gains, cost reduction and savings in the course of the year. Following the implementation of the Global Shared Services Centre (GSSC) hub, UNICEF Lesotho revised standard operating procedures, work processes and submission checklists to align with the hub. This reduced the number of steps in processes. Quality assurance and timely submission of documents to GSSC were realised.

UNICEF Lesotho continued to use UN Long Term Agreements (LTAs) for various services, resulting in reduced time spent on procurement. UNICEF, UNDP and UNFPA Lesotho piloted a Global Positioning System tracking carpooling system, which brought about efficiencies and effectiveness in the use and management of office vehicles.

Under HACT, UNICEF Lesotho continued to realize efficiency gains through outsourcing of spot checks to an audit firm, resulting in enhanced capacity building for partners and staff through training and interaction with professional accountants.

The replenishment of the local account through Headquarters Treasury gained significant exchange rate savings, despite the local currency’s erratic fluctuations. Using the UN-contracted bank also resulted in savings through negotiation of zero bank charges.

Use of regional consultancy rosters and piggy backing on recruitment processes by other UNICEF and/or UN offices resulted in time savings and faster identification of qualified consultants. The use of the talent management system and all-inclusive consultancy
payments resulted in reduction of the number of transactions. As part of the simplification of processes, UNICEF Lesotho increased the threshold of the contract review committee to US$50,000 and of the partnership review committee to US$100,000.

Scanning of documents eliminated duplication, thus reducing the use and cost of printing resources.

The integration of the UN telephony system eliminated the cost of telephone calls between the UN agencies.

**Supply Management**

In alignment with UNICEF Lesotho’s programming strategy, the annual supply plan was developed in the first quarter and was regularly updated. The procurement volume for goods and services amounted to approximately US$540,000 as detailed below.

<table>
<thead>
<tr>
<th></th>
<th>US$ Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>Programme supplies</td>
<td>323,432.32</td>
</tr>
<tr>
<td>Operational supplies</td>
<td>48,455.36</td>
</tr>
<tr>
<td>Services</td>
<td>168,006.52</td>
</tr>
</tbody>
</table>

Support to Government of Lesotho in procurement services amounted to approximately US$ 900,000, as per the table below

<table>
<thead>
<tr>
<th></th>
<th>US$ Total</th>
</tr>
</thead>
<tbody>
<tr>
<td>GAVI</td>
<td>704,331.74</td>
</tr>
<tr>
<td>Co-financing</td>
<td>195,262.79</td>
</tr>
</tbody>
</table>

UNICEF continued to play a key role in the common UN procurement processes in the establishment of LTAs for security, cleaning, catering, hotels, printing and travel. In the EPI-cold chain and logistics, UNICEF Supply Division and Regional Office commissioned a holistic rapid assessment on human resource capacity. A highlight of 2016 was the rapid response to the El Niño emergency. Timely procurement and delivery of both WASH and nutrition commodities were carried out. In-country logistics from customs clearance and delivery to identified destinations were arranged promptly through meetings with stakeholders, raising awareness on the emergency to customs and revenue authority officials. In collaboration with partners, support was provided to the Government of Lesotho in the distribution of WASH printed information and educational materials for trainings held for Village Health Workers and for distribution of water purification supplies.

**Security for Staff and Premises**

In collaboration with in-country UN Department of Safety and Security (UNDSS), additional mitigating measures were implemented for the safety and security of the office premises. These included window burglar bars and placement of entry doors. Funding in the amount of US$2,000 was received from UNICEF Headquarters Central Investment Funds. In 2017, UNDSS plans to complete the Facilities Safety Security Survey with support from the
Regional Security Adviser.

Both international and local staff continued to benefit from security assessment of their residences by UNDSS. Provisions exist to provide emergency salary advance to local staff for residential security enhancement.

All staff participated in the mandatory safety and security certification courses. Newly arrived personnel were oriented by the local security assistant. Security notices by UNDSS and actions decided on by the UN Security Management Team were regularly disseminated to staff.

The Security Risk Assessment and Security Plans were updated and endorsed in June. All staff members were issued with radios and monthly airtime to enable them to communicate in case of an emergency. A warden system managed by UNDSS is in place. ‘The Communication Tree’, a telecommunications chain for sending security alerts to staff, was updated and tested every Wednesday evening and corrective actions were taken where gaps were identified.

To ensure staff safety, especially when on field trips in the mountains, office vehicles were on a Global Positioning System tracking system and the administration unit carried out vehicle security physical checks on a quarterly basis. Regulations regarding parking before sunset were strictly adhered to and weekly reports on drivers’ driving performance were generated from the tracking system and reviewed.

Human Resources

Gender balance for all staff is equal, at 50 per cent male and 50 per cent female. International staff is 67 per cent male, 33 per cent female; general service staff is 50 per cent male and 50 per cent female; staff in the national officer category is 30 per cent male and 70 per cent female. To effectively respond to the emergency, staffing was complemented with the recruitment of temporary staff, consultants, stand-by partners and interns. Recruitment of staff and consultants was successfully carried out using the new talent management system.

UNICEF Lesotho promoted human capacity development through continuous learning. Staff were given opportunities for stretch assignments and staff exchanges. In addition to UNICEF-sponsored training activities, staff members completed self-directed learning initiatives. The 2016 learning and development plan was established based on capacity gaps identified during performance discussions. Emphasis was placed on enhancing staff skills in results based management, emergency preparedness and response, and contracts management.

UNICEF Lesotho effectively used the new ACHIEVE system to support a transparent performance management culture with continuous ongoing feedback and coaching processes and a strong focus on delivering results. The country office achieved 100 per cent performance planning and regular performance review.

All recommendations from the last Global Staff Survey were addressed and closed. The recommendations were reviewed at the annual staff retreat and a new action plan was established.

Smooth transition of required human resources functions to the Global Shared Services Centre (GSSC) was ensured. Official status files submitted electronically to GSSC staff were also prepared for the transition to GSSC through trainings.

Staff meetings were used to sensitize staff members on UN Cares issues. UN Cares
organized a UN Family day preceded by a Fun Walk for staff and their families. New custodians for post-exposure prophylaxis kits’ were identified and staff were duly informed.

**Effective Use of Information and Communication Technology**

The Information and Communication Technology (ICT) Unit effectively supported the office, ensuring consistent availability of ICT resources and efficient user support through technical maintenance of ICT infrastructure and meeting all UNICEF ICT global objectives and standards. UNICEF Lesotho continued to benefit from the cloud-based office automation tools. Numerous meetings with UNICEF headquarters, GSSC, Regional Office and international suppliers were held using Skype. The UNICEF Lesotho Team site on Share Point was established to enable staff to collaborate and share information and to provide additional secure document storage.

In ICT for development (ICT4D) an ICT assistant provided substantial support in the initiation phase of EduTrack, a system/platform on RapidPro intended to be used to interact with teachers in schools across the country to collect data in real time. This platform is also being extended to the health section for monitoring on child nutritional and health data collection.

UNICEF Lesotho’s digital/social media presence is at a nascent stage. As of end of November 2016 there were 871 Facebook followers, 10,000 YouTube views and 500 Twitter followers.

UNICEF Lesotho adopted a policy of using only laptops and is in the process of completely phasing out desktops, resulting in significant energy savings and users’ continuous access to corporate resources. Obsolete ICT equipment and accessories were disposed of through a reputable recycling company following review by the Property Survey Board.

Virtualization of servers is a global initiative which UNICEF Lesotho complies with by eliminating use of physical servers.

To improve connectivity, office bandwidth was increased from 1.5mbps to 3mbps at no additional cost.

**Programme Components from RAM**

**ANALYSIS BY OUTCOME AND OUTPUT RESULTS**

**OUTCOME 1** PCR 9: Support

**Analytical Statement of Progress:**

UNICEF Lesotho provided the needed support towards efficient and effective implementation of programmes. This was achieved through development of systems which focused on key management and governance areas of financial management, human resources, security and supply. UNICEF Lesotho emphasized effective functioning of the country management team, participation in UN Delivering as One activities, risk management, a functioning business continuity plan and enhanced security for staff and premises. The country management team achieved its governance objective of improving programme and operational effectiveness and efficiency using mechanisms such as regularly scheduled monthly meetings, deciding and communicating priority areas and results, monitoring the implementation of the annual management plan (AMP) and annual work plans (AWPs) using management indicators, monitoring the implementation of recommendations and providing oversight to statutory committees.
A comprehensive risk assessment and reporting exercise facilitated by the UNICEF Regional Office was conducted in August 2016 with the participation of all staff. As a result of the training, the risk and control self-assessment was finalized and endorsed by the country management team for incorporation into the 2017 annual management plan and section annual work plans. The Joint UN Business Continuity Plan was reviewed in October 2016, outlining key functions, lists of critical staff and their roles and responsibilities. A UN-wide simulation exercise was carried out in December 2016.

The security of UN premises was further enhanced with the installation of burglar bars and a change of security service provider. The UN premises are MOSS compliant and are considered one of the safe havens for UN staff and their dependents during emergencies.

OUTPUT 1 IR 9.1: Effective and Efficient Governance and Systems

Analytical Statement of Progress:
The country management team (CMT) adopted a vision for incremental improvement in 2016, with clear goals defined through the integrated monitoring and evaluation plan (e-IMEP), annual management plan (AMP), audit findings, global survey results country action plan, and the 2016 office retreat action plan. CMT minutes with clear action points were shared three days after each meeting to ensure follow up and timely completion. The community management team strengthened oversight and quality assurance through the use of a management dashboard for tracking progress on management indicators on a monthly basis linked to results for children and the compact between UNICEF Lesotho and the RO. The Finance Dashboard provided the team with an overview of the financial status of the office and kept the office on track with budget utilization, liquidation of direct cash transferred to implementing partners and expiring grants.

The community management team was appraised on the use of InSight, with an emphasis on the scorecards as a monitoring tool. Following the global guidelines, the team monitored the operationalization of HACT through templates for programme quality assurance on results with disaggregated data and cost effectiveness analysis. Mid-year and annual reviews were held with partners to take stock of progress and plan for the future. Following a management team decision in conjunction with the Learning and Training Committee, a comprehensive Risk Assessment and Reporting exercise based on the new enterprise risk management guidelines was conducted in August 2016, with the participation of all staff and facilitation from the RO. As a result of the training, the Risk and Control Self-Assessment was finalized and endorsed by the CMT for incorporation into the 2017 AMP and section annual work plans.

In October 2016, the One UN business continuity plans were updated with staff and logistical changes incorporated. UNICEF provided substantial input, with guidance from RO and headquarters, with oversight from the CMT. The annual simulation of business continuity plan was carried out on 16 December 2016.

OUTPUT 2 IR 9.2: Effective and Efficient Management and Stewardship of Financial Resources

Analytical Statement of Progress:
On a monthly basis, the country management team reviewed key management indicators, including implementation rates, grants monitoring and reporting, resource mobilization, and direct cash transfers (DCT). On a quarterly basis, the team followed up on ensuring closed
audit actions. Operations and programme management indicators defined in the annual management plan were tracked to ensure adequate oversight on both programme and operations performance. Significant time was invested in strengthening the implementation of the Harmonized Approach to Cash Transfers (HACT) assurance and monitoring. Training on HACT, procurement and the local tax system was carried out for all implementing partners and UNICEF Lesotho staff. Micro-assessments were completed in a timely manner for eligible implementing partners. Efficiency gains were obtained by outsourcing spot checks to an audit firm, and all planned spot checks for the year were completed on time. All planned quality assurance activities for programme implementation were concluded to ensure value for money and results for children.

To ensure strong internal controls, the Table of Authority was revised in March and November. Monthly reviews of segregation of duties were carried out to avoid conflicts. Open items were monitored on a weekly basis to ensure identification, prompt correction and clearing of outstanding items. Bank reconciliation statements were approved on time and reconciling items acted upon immediately. Local finance focal points were trained on quality assurance of documents before submission to the Global Shared Services Centre (GSSC). Utilization rates at year end were 100 per cent for RR, 100 per cent for OR and 100 per cent for ORE. Outstanding direct cash transfers were at 3 per cent for 6-9 months and 0 for over 9 months.

**OUTPUT 3 IR 9.3: Effective and Efficient Management of Human Capacity**

**Analytical Statement of Progress:**
Gender balance among international staff is 67 per cent male, 33 per cent female; general service staff is 50 per cent male and 50 per cent female; gender parity in the national officer category is 30 per cent male to 70 per cent female. UNICEF Lesotho remains committed to gender parity. To effectively respond to the emergency, staffing was complemented with the recruitment of temporary staff, consultants, stand-by partners and interns. UNICEF Lesotho promoted human capacity development through continuous learning. Staff were given opportunities for stretch assignments and staff exchanges. In addition to UNICEF-sponsored training activities, staff members completed self-directed learning initiatives. The 2016 learning and development plan was established based on capacity gaps identified during performance discussions. Emphasis was placed on enhancing staff skills in results based management, emergency preparedness and response, and contracts management.

UNICEF Lesotho effectively used the new ACHIEVE system to support a transparent performance management culture with continuous ongoing feedback and coaching processes and a strong focus on delivering results. UNICEF Lesotho achieved 100 per cent performance planning and regular performance review. All recommendations from the last global staff survey were addressed and closed. The recommendations were reviewed at the annual staff retreat and a new action plan was established.

Smooth transition of required human resources functions to the global staff service centre was ensured. Official status files were submitted electronically to GSSC and staff were also prepared for the transition to GSSC through trainings. Recruitment of staff and consultants was successfully carried out using the new talent management system.

Staff meetings were used to sensitize staff members on UN Cares issues. UN Cares organized a UN Family day preceded by a Fun Walk for staff and their families. New post-exposure prophylaxis Kits’ custodians were identified and staff were duly informed.
OUTCOME 2 By end of 2014, National M & E System is supported for the collection, analysis and dissemination of strategic information for planning and implementation of national policies

Analytical Statement of Progress:
In 2016, UNICEF Lesotho planned to conduct four equity-focused studies to do evidence-led advocacy with parliamentarians and high level policy makers for children. However, only one study, on national budget analysis from the perspective of children, was conducted and four related budget briefs were drafted. The budget briefs were prepared jointly with the Ministry of Finance, health and primary education. UNICEF provided the partners with training on public finance for children. The child poverty study was not conducted due to delay in releasing the Demographic and Health Survey data. The rate of return on investment in Social Protection study drafted in 2015 was finalized in 2016.

UNICEF, with financial support from the EU, disseminated the study findings on the rate of return on investment in social protection and conducted two advocacy sessions, one with parliamentarians and the other with civil society organizations, targeting policy makers to promote social protection and secure its position in as a priority on decision-makers agenda.

Given the data limitation to complement the child poverty study, discussions were held with the Ministry of Finance, Bureau of Statistics and local research organizations to strengthen partnerships to generate evidence and commitments to follow-up were secured. UNICEF Lesotho will prioritize generation of evidence linked to public finance for children and advocacy to enhance the quality and size of investment in social sectors that mostly benefit children; as well as generation more evidence on child poverty and disparities to put the issue on the policy table with the fact that the country needs such data to monitor its progress on the SDGs.

OUTPUT 1 By end of 2014, National M & E System is supported for the collection, analysis and dissemination of strategic information for planning and implementation of national policies

Analytical Statement of Progress:
The Ministry of Health (MOH) generated data through the health management information system (HMIS) that will be disseminated at national and district levels in early 2017. The Bureau of Statistics completed data collection for the 2016 Census and the preliminary report was released. The Bureau also completed the design of the household budget survey for implementation in 2017. UNICEF Lesotho, WHO and UNFPA contributed to the review of the data collection instrument.

The achievement of planned results is disproportionately low due to funding and capacity constraints in the ministries to carry out monitoring and evaluation activities.

UNICEF is going to establish a long term partnership with the Bureau of Statistics. Thus the priority for the next year would be to validate and finalize the M&E plan of the Ministry of Social Development, conduct the Multiple Indicator Cluster Survey, support the Ministry of Health in dissemination of data at district level and analysis of Household Budget Survey data.

OUTCOME 3 PCR 8: Cross-Sectoral

Analytical Statement of Progress:
Significant time was invested in strengthening the implementation of the Harmonized Approach to Cash Transfers (HACT) assurance and monitoring. Training on HACT, procurement and the local tax system was carried out for all implementing partners and UNICEF staff. Micro-assessments were completed timeously for eligible implementing partners. Efficiency gains were obtained by outsourcing spot checks to an audit firm, which has completed all planned spot checks for the year on time.

Timely procurement and delivery for both WASH and nutrition commodities were ensured for the emergency response. In-country logistics from customs clearance and delivery to identified destinations were arranged promptly through meetings with stakeholders and raising awareness on the emergency to customs and revenue authority officials. In collaboration with partners, support was provided to the Government of Lesotho in the distribution of WASH printed information and educational materials for trainings held for Village Health Workers and for distribution of water purification supplies.

OUTPUT 1 Technical Support and Monitoring and Evaluation for Effective Programme Delivery

Analytical Statement of Progress:
The implementation of a harmonized approach to cash transfers (HACT) is considered a critical risk area where UNICEF Lesotho placed greater focus to ensure quality implementation and efficiency of programme resources.

In 2016, UNICEF Lesotho completed: the systematic financial assessment of all implementing partners; a micro assessment of all implementing partners who receive at least US$100,000; field visits to ensure quality implementation of the programme; financial spot checks; capacity building of implementing partners in financial management; and HACT training for staff and implementing partners.

OUTPUT 2 Communication for Development (C4D) & External Relations

Analytical Statement of Progress:
Emphasis in 2016 was on strengthening the capacity of community-based workers to inform and educate members of their communities on how to keep children alive, healthy, well-nourished and safe from abuse, particularly during the drought crisis.

In response to the El Niño drought, a multi-sectoral communication for development (C4D) team was established and conducted a C4D rapid assessment in the five most affected districts. The findings from the assessment were used to design communication materials and messages on the use of safe water, hygienic practices, how to protect children from abuse and exploitation, and infant and young child feeding. Approximately 300 village health workers and rural health motivators in the five target districts were trained on how to deliver the messages as well as the on distribution of water purification commodities.

UNICEF Lesotho, in partnership with CRS, WVL, WHO, MOSD, MOH and Ministry of Water, utilized the results of the rapid C4D assessment to design a communication strategy targeting the five districts mostly affected by the drought. The C4D strategy was used to support delivery of safe portable water through distribution of water purification tablets in the five target districts. This exercise was coupled with messaging delivered in door to door visits, community gatherings, school visits and health centre talks.

Approximately 12,295 households and 61,475 beneficiaries (94 per cent women and girls) were reached with the water purification tablets. Overall, health education was provided to 132,208 people (67 per cent female). A post-distribution survey of the messaging and water
purification tablets is currently underway and the results will be used to strengthen the C4D strategy in 2017 and beyond.

As part of the response to the drought emergency, UNICEF Lesotho also collaborated with MOSD and WVL to establish multi-sectoral C4D team on child protection in emergencies. The team conducted a rapid response in three districts and established a set of core social norms to be tackled, utilizing various platforms such as radio, social media, drama, public gatherings and schools. Findings of the rapid assessment also strengthened a national campaign on ending child marriages. Parliamentarians were among core audiences reached by the campaign, which culminating with the passage of a motion to end child marriage stretching into 2017.

UNICEF Lesotho and WHO supported national efforts to end polio and strengthen EPI social mobilization efforts through training of village health workers in all 10 districts. The trainees are responsible for conducting door to door campaigns and listing of all under-five children in their catchment areas. All of this is part of an effort to promote routine immunization and support for acceptance of a new vaccine. A more robust C4D strategy will be wholly informed by a knowledge, attitude and practices study on EPI, including maternal and child health issues, which will be launched in 2017.

OUTPUT 3 Supply and Logistics for office

Analytical Statement of Progress:
In alignment with UNICEF Lesotho’s programming strategy, the annual supply plan was developed in the first quarter of 2016 and was regularly updated. The procurement volume for goods and services amounted to approximately US$540,000. UNICEF continued to play a key role in the common UN procurement processes in the establishment of LTAs for security, cleaning, catering, hotels, printing and travel.
In the EPI-cold chain and logistics, UNICEF Supply Division and Regional Office commissioned a holistic rapid assessment on human resource capacity.
A highlight in 2016 was the rapid response to the El Niño emergency. Timely procurement and delivery for both WASH and nutrition commodities were effected. In-country logistics from customs clearance and delivery to identified destinations were arranged promptly through meetings with stakeholders, raising awareness on the emergency to customs and revenue authority officials. In collaboration with partners, support was provided to the Government of Lesotho in the distribution of WASH printed information and educational materials for trainings held for village health workers and for distribution of water purification supplies.

OUTPUT 4 ICT Equipment and Administrative Functions.

Analytical Statement of Progress:
The Information and Communication Technology (ICT) Unit in UNICEF Lesotho ensured consistent availability of ICT resources and efficient user support through technical maintenance of ICT infrastructure and meeting all UNICEF ICT global objectives and standards. UNICEF Lesotho continued to benefit from the cloud-based office automation tools. Numerous meetings with UNICEF headquarters and Regional Office, the Global Shared Services Centre and international suppliers used Skype for business. The UNICEF Lesotho Team site on Share Point was established to enable staff to collaborate and share information and to provide additional secure document storage.
In ICT for Development (ICT4D), the ICT Assistant provided substantial support in the initiation phase of EduTrack, a system/platform on RapidPro intended to interact with teachers in
schools across the country to collect data in real time. This platform is also being extended to
the health section for monitoring on child nutritional and health data collection.
UNICEF Lesotho’s digital/social media presence is at a nascent stage. As of end of November
2016 there were 871 Facebook followers, 10,000 YouTube views and 500 Twitter followers.
UNICEF Lesotho adopted a policy of using only laptops and is in the process of completely
phasing out desktops, resulting in significant energy savings and users’ continuous access to
 corporate resources. Obsolete ICT equipment and accessories were disposed of through a
reputable recycling company following review by the Property Survey Board.
Virtualization of servers is a global initiative in which UNICEF Lesotho complies with by
eliminating use of physical servers.
To improve connectivity, office bandwidth was increased from 1.5mbps to 3mbps at no
additional cost.

**OUTPUT 5** Meetings/Workshops/Misc.

**Analytical Statement of Progress:** UNICEF Lesotho continued to increase efficiency and
reduce costs through: the use of conference rooms in the UN house for workshops and
trainings; the use of low value procurement to reduce transaction costs; the use of webinars
resulting in reduced costs for catering and travel; and the negotiation of favourable rates for
the UN with hotels and guest houses in Lesotho.

**OUTCOME 4** Outcome 1: By 2015, 95% of coverage of quality PMTCT and paediatric HIV
care and treatment services attained to eliminate new infections among children and to keep
those infected alive.

**Analytical Statement of Progress:**
Considerable efforts were made in 2016 to improve coverage of preventing mother-to-child
transmission of HIV and paediatric HIV care and treatment services in Lesotho. The
proportion of adults eligible for treatment, which includes adolescents, has slightly increased
from 34 per cent in 2015 to 41 per cent by September 2016.

Estimates for the number of children living with HIV have been revised downward, from
19,000 to 13,684, leading to a positive impact on the ART coverage. Testing at under-five
clinics introduced by UNICEF Lesotho in partnership with Elizabeth Glazer Paediatric AIDS
Foundation (EGPAF) enhanced early identification of children in need of treatment. By the
end of September 2016, approximately 57 per cent of children in need of treatment were
receiving ART medication. UNICEF, the U.S. President's Emergency Plan for AIDS Relief
(PEPFAR) and other implementing partners supported MOH to introduce Test and Treat
guidelines in June and the rollout began in July 2016. The number of adults initiated on
treatment during July to September quarter is 13,376, an increase from 8,000 in the
preceding quarter of March to June 2016.

In 2016, UNICEF continued to support packaging of anti-retrovirals for preventing mother-to-
child transmission of HIV; however, the coverage remains at 72 per cent.
In Rwanda, child births attended by skilled health personnel are increasing as more
deliveries are occurring in health centres. By end September 2016, with strong support from
UNICEF Lesotho in social mobilization and promoting use of waiting mothers’ homes in
health centres, about 40 per cent of health centres previously rendering only ANC services
had added delivery services. The social mobilization messaging encourages booking early
ANC and the use of waiting mothers’ homes. The national program initiated efforts for the
HIMS to generate data on women who attend ANC during the first trimester, with reports
expected to be produced beginning in 2017.
HIV services are well integrated at the maternal, newborn and child health platforms building on the partnership between UNICEF and EGPAF in which HIV testing services were introduced at well baby clinics (immunization clinics). The number of children who received ARV prophylaxis at birth increased to 9,742. This figure is expected to increase during the last quarter of the year and in light of Test and Treat guidelines. The quality of data remains a challenge for general programe in the health sector. Therefore in 2017 UNICEF will continue to support MOH to strengthen the use of DHIS2 as a way to improve the quality of data and provide regular programs feedback for timely actions.

**OUTPUT 2** Output 1.2: Strengthen the community structures to generate demand for MNCH services that will enhance for an increased uptake of PMTCT and ART for children and ensure retention by end of 2017.

**Analytical Statement of Progress:**
UNICEF Lesotho, together with implementing partners and the UN family, was engaged in strengthening maternal, newborn and child health (MNCH) systems. UNICEF specifically supported the integration of HIV services within the well-baby platforms in order to make infant testing available to all babies exposed to HIV, and linking children living with HIV to treatment and care as early after infection as possible. This is a milestone toward eliminating new HIV infections among children. The efforts contributed to creating an enabling environment at MNCH thus enhancing retention into care.

The implementation of the 2015 ‘Retention into care standard operating procedure’ identified more loss to follow up during postnatal care period. UNICEF supported MOH to develop and disseminate the post-natal register, which follows up the mother baby pair post-delivery and is now in use at all 207 health facilities that provide PMTCT services. As a result it became easier to identify loss to follow up clients, and as evidenced by the Health Information System data, 78 per cent of clients who were lost have been brought back into and retained in care.

With support from UNICEF Lesotho and the Global Fund, a total of 750 village health workers were trained on the new manual for sick babies at community level. The cadre is equipped with skills to carry out home visits and identify, manage or refer sick neonates.

In 2017 UNICEF will focus on development of job aids and reporting tools for village health workers.

**OUTPUT 3** 1.4: Increase national capacity to operationalize, budget and generate knowledge for maternal neonatal and child health policies

**Analytical Statement of Progress:**
UNICEF Lesotho supported the MOH to adapt the community health workers manual for sick babies at community level. The manual is intended to assist with integrated community case management and facilitate home visits. A total of 750 village health workers underwent initial training and were exposed to the manual. The group now has the capacity to conduct home visits, assess newborn and sick babies at village level, and manage them accordingly before referral as appropriate.

To address issues of access to health services by disadvantaged children, UNICEF Lesotho continued to advocate for community-based services delivery during the ‘One Stop Shop’ service days. The integrated service days, with transport support from World Vision, reached 11,200 children, with special focus placed on identification of HIV-exposed infants and
continuum of care with ART ensured.

UNICEF continued to partner with the Lesotho Netball Association to mobilize communities to use health facilities, with a focus on facility-based delivery. The intervention increased uptake in the area of Melikane and Matebeng Health Centres in Qacha’s Nek. About 40 per cent of facilities that provide antenatal care services are now open 24 hours to provide emergency obstetric and neonatal care services. Social mobilization through Lesotho Netball Association is addressing the socio–cultural practices and beliefs that might cause late booking for antenatal care.

UNICEF Lesotho continued to support MOH to generate knowledge. In partnership with Jphiego, UNICEF identified gaps in pre-service curriculum for nurses on newborn care, noting that on completion of their training, nurses do not have required competencies to provide emergency newborn care services. Based on the identified needs, the MOH and the Nursing Council of Lesotho were supported to develop an addendum to the current nursing curriculum specific to newborn care, thus equipping graduates with skills to manage emergency neonatal cases with ease. UNICEF also supported Jphiego to train 19 nurse educators on Helping Babies Breathe (HBB), a skill that is required in emergency neonatal care and will be imparted by the newly trained nurse educators to an estimated 140 nursing students who graduate every year.

In 2017 UNICEF will continue to support MOH to develop guidelines for newborn care and institutionalize perinatal review system as a strategy to address factors facilitating intervention to address the high neonatal mortality rates.

**OUTCOME 5** Outcome 2: 80% of adolescent girls aged 15-19 have the knowledge and practice the behaviours that reduce their risk of HIV infection.

**Analytical Statement of Progress:**
In the efforts in 2016 to contribute to gaps in knowledge and skills of adolescents, UNICEF Lesotho supported local organizations to increase knowledge levels among young people and also get them to know their HIV status. Through partnerships with Lesotho National Olympic Committee more than 16,000 young people were reached. Continued technical support to United Nations volunteers and churches is planned to build capacity of organizations to reach more young people in their respective communities.

In terms of data and coordination challenges with respect to adolescent health issues, UNICEF with UNAIDS supported MOH and partners to better understand the situation of adolescents with respect to HIV, providing support for the collection and analysis of data as part of the ALL IN! Initiative. The report showed that there are still data gaps, cross sectoral collaboration within government is weak, and that some areas such as health and education still need further support in institutionalizing concerted efforts in addressing HIV prevention among young people.

In the updated situation analysis of adolescent health service delivery, young people indicated that they do not seek services because of the ‘unfriendliness’ of the services towards adolescents. UNICEF, UNFPA and WHO since supported the Ministry of Health in the development of adolescent-friendly standards, strategy and yet-to-be-completed guidelines.

To date, 119 health facilities (approximately 60 per cent) have been sensitized on the standards, with 15 service providers from district hospitals and nurse training colleges trained as trainers on the adolescent friendly service delivery guidelines. UNICEF Lesotho and UNESCO also supported the Government in the development of the school health
policy, leading to a comprehensive school health programme, with a draft policy already in place.

These tools are aimed at building capacity of providers in attracting adolescents to utilize services for HIV testing, voluntary male circumcision, antiretroviral treatment (ART), sexual and reproductive health (SRH), antenatal care (ANC) and sexually transmitted infections (STI) screening and treatment. It is anticipated that these will address the demand that will be created due to the introduction of Test and Treat, which includes self-testing and Pre-Exposure Prophylaxis (PrEP); as more young people will go out to seek information and services to protect themselves from HIV.

In order to also address issues around coordination of adolescent-focused interventions, UNICEF contributed to programmes supported by Global Fund and USAID/PEPFAR, with a seat in their respective coordination bodies. As a result, there have been better communication among partners on the generation and sharing of evidence on working interventions for adolescents.

OUTPUT 1 Output 2.1 Capacity of four districts to provide improved HTC and referral services to adolescents, particularly girls aged 15 - 19 is strengthened, by December 2014.

Analytical Statement of Progress:
UNICEF Lesotho supported the Ministry of Health in collaboration with WHO, UNFPA and UNESCO in addressing adolescent-friendly service delivery in the country. In 2015, UNICEF supported MOH to orient service providers in 119 health centres on the Minimum Standards for Adolescent Friendly Service Delivery. As a follow up, in 2016, MOH was supported in the adaptation of WHO Adolescent Friendly Service Delivery Guidelines and subsequent training materials.

To date, 15 service providers from district hospitals and two nurse training institutions have undergone the first round of trainings as trainers on adolescent-friendly service delivery. These efforts contributed to an increase in the number of health facilities offering adolescent friendly services. All Government and Christian Health Association of Lesotho health facilities now offer adolescents HIV services, including testing, treatment and care. UNICEF Lesotho also supported the Government to develop guidelines for the Youth Resource Centres based at district level. UNICEF plans to support the step down trainings and supervision of adolescent friendly service delivery in 2017.

In August 2016, UNICEF, in collaboration with Sentabale, supported the feedback session of young people who attended the 2016 International AIDS Conference, which had been held in Durban in July. The plans for 2017 will also include recommendations from a feedback session.

Even though there are no schools yet implementing the school health programme, UNICEF and UNESCO have supported the Ministry of Education in the development of the school health policy, which is in draft, ready for approval. UNICEF plans to support the development of a costed strategy or programme in 2017.

UNICEF continued to support a better understanding of the adolescent situation, and in 2015, specifically embarked on the ALL IN!! Initiative as an advocacy tool to inform these efforts. The ALL IN phase 1 report made the following recommendations: Strengthening HIV testing services for adolescent to know their status; increasing coverage of the revised curriculum for comprehensive sexuality education (CSE) in all schools; strengthening of adolescent friendly health service delivery; revision of routine data instruments including disaggregation of adolescents and young people data should be augmented and mechanisms for sharing available information on adolescent and young people including policies and guidelines geared towards adolescents should be strengthened. Subsequent
phases of this process will be implemented in 2017 and beyond.

**OUTPUT 2**

**Output 2.2. Enhanced ability of adolescents to practice healthy behaviours related to HIV and AIDS by 2015**

**Analytical Statement of Progress:**

UNICEF Lesotho, in partnership with UNESCO, had provided technical support in 2015 to the Government to pilot the Comprehensive Sexuality Education (CSE) curriculum for Grade 8 in 100 schools. UNICEF specifically contributed to the training of 100 school teachers on the revised curriculum.

In 2016, a report on the pilot was shared among both teachers and students, who were favourable to the findings. This led to the development of teaching and learning materials for Grades 9 and 10, which are now complete. Currently, 100 schools are using the revised life skills curriculum for their Grade 8 students. The Ministry of Education plans to roll it out to other schools and grades in 2017. The Global Fund and PEPFAR have plans to support the roll out in other schools in 2017.

In efforts to continue increasing the number of adolescents reached with messages on how to correctly identify risky behaviour and increase those referred to HIV Testing Services (HTS), UNICEF supported the Lesotho National Olympic Committee in getting young people to test through the blood donation platform. This programme reached out to adolescents and young people in five districts, with a special focus on high school and tertiary students. The programme reached 10,889 likes on the NGO’s Facebook page and 6,000 through interpersonal communication. A total of 573 people (356 females and 217 males) got tested. The Facebook page engaged young people on issues around knowledge and access to services. UNICEF also continued to support national efforts to reach more adolescents with HIV Testing Services. Routine data indicate that in 2016, 88,816 adolescents ages 10–19 years accessed the services, of which 45 per cent were testing for the first time.

UNICEF also supported capacity building of 30 UN volunteers to reach young people and adolescents at community level through delivery of CSE and other youth related interventions. UNICEF also trained 30 church leaders on CSE, who will contribute to reaching more than 700 adolescents and young people within their churches.

**OUTCOME 6**

**Outcome 3. Access to high impact health, nutrition and WASH interventions increased by at least 10 percentage points in four focus districts that have the worst child mortality and malnutrition rates**

**Analytical Statement of Progress:**

Lesotho has achieved some progress in expanding access to quality, high impact interventions in health, nutrition and WASH nationwide. A notable difference was observed in the four target districts of Berea, Thaba-Tseka, Mokhotlong and Qacha’s Nek, those with the highest child mortality and malnutrition rates out of the 10 districts of Lesotho. To address shortfalls in coverage and to improve the quality of services provided, UNICEF Lesotho focused on providing support for the development of policies, standards/guidelines and strengthened the capacity of service providers. UNICEF worked with GoL and partners to improve access to services in the 4 target districts.

Although, national stunting rates remain high, (39% in 2009 to 33% in 2014 and 41% in 2009 to 35.1% in 2014 in rural areas), there has been significant strategic milestones achieved to build the capacity for planning and for service providers. UNICEF, in partnership with WHO, supported MOH to strengthen treatment of acute malnutrition in accordance with national standards in which SAM treatment (percentage of children under five with severe acute malnutrition that receive treatment as per national standard) exceeded the 70 per cent target and achieved 180 per cent of children under the
The improvement in SAM treatment is attributable to enhanced capacity of service providers and to a large extent to the response to the El Niño emergency crisis. UNICEF, in partnership with the Government, will continue to roll out community led total sanitation (CLTS) to eliminate open defecation. However, in 2016, slow progress was made in rolling out the initiative to additional communities, with only 12 communities out of the planned 50 reached. The 12 communities are yet to be certified Open Defecation Free. As of the end of September 2016, routine immunization national coverage data stood at 68 per cent for Penta 3 and 61 per cent for measles - a decline compared to the 70 per cent baseline for Penta 3 in 2013. Under-reporting during routine immunization may be undermining the coverage of measles and Penta 3. UNICEF continued to support MOH with implementation of the cold chain improvement plan, which included procurement and installation of new vaccine refrigerators and completion of the temperature mapping study.

To address the Joint Appraisal (MOH, GAVI, and WHO and UNICEF) recommendation on building the capacity for the EPI programme officers, UNICEF supported the mid-level management training for public health nurses and coordinators from the 10 districts. UNICEF Lesotho supported the Government-led humanitarian response to the El Niño emergency during 2016, with specific contributions in nutrition, WASH and social protection sectors. At least 12,295 households with 61,475 people were provided with water purification tablets to improve household water quality across five districts (Thaba Tseka, Leribe, Mokhotlong, Botha Bothe and Maseru).

To strengthen reporting on management of acute malnutrition, UNICEF supported MOH district nutrition offices to conduct an in-depth monitoring exercise prior to the introduction of updated IMAM tools required for reporting into DHIS2.

In 2017, following the launching of the Food and Nutrition policy, the Scaling-Up-Nutrition (SUN) movement and the cost of hunger study in Africa (COHA), multisectoral nutrition planning and costing of the national nutrition plan of action essential to sustain reduction of stunting will be implemented. Also in 2017, high level advocacy events will be held for decision makers, community leadership parliamentarians, senators and parliamentary portfolio committees on CLTS. The main output of this advocacy event is for each Parliamentarian to trigger at least one community in their respective constituency toward zero open defecation. UNICEF will also continue to advocate for inclusion of CLTS in the upcoming review of the National Water and Sanitation Policy. UNICEF, in collaboration with WHO, will continue to provide technical and financial support to Government to improve immunization coverage and reduce bottlenecks through the health systems strengthening programme, vaccine management and implementation of the cold chain replacement plan.

**OUTPUT 1 3.3:** Enhanced ability of families in the lowest wealth quintile for health behavior, improved nutrition, adequate sanitation and hygiene practices in four districts by December 2017

**Analytical Statement of Progress:**
UNICEF partnered with Lesotho Red Cross, Ministries of Health and Ministry of Water to introduce community-led total sanitation (CLTS), resulting in one village (Ha Khupiso) achieving status as ‘open defecation free’ in the pilot district of Thaba Tseka in 2016.

The CLTS programme facilitated the construction and use of 149 latrines in 12 out of 29 triggered villages. Within the triggered villages, 17 schools were provided with handwashing facilities and 4 schools were provided with 35 latrines, reaching 3,169 children overall. A national monitoring system reporting on equity of WASH services needs to be developed. Through the use of up-to date stock management tools, only a measles stock out was experienced, for one month, in September 2016. UNICEF Lesotho, through its procurement services systems, supported MOH with the procurement of 57 refrigerators, 250 Fridge type...
2 tags, 30 Log tags, 1 MULTILOG, 2 laptops, 2 desktops computers and a printer in accordance with the cold chain improvement plan. The coverage of functional cold chain was 72 per cent, on track and moving toward the 100 per cent target set for 2017.

Following the procurement of the cold chain equipment, training of cold chain technicians and installation of the refrigerators were commissioned and completed in November 2016. Multi-log systems (at central level) and log tags (at district vaccine stores) were installed to strengthen vaccine management in the country. A temperature monitoring study and temperature mapping were conducted and results indicate the need to recalibrate the two cold rooms at the central vaccine store. Through community 'One Stop Shop' service days, 11,200 children were reached with integrated nutrition and health services in 2016. In an effort to understand the factors contributing to health seeking behaviours, UNICEF will provide technical and financial support to conduct a knowledge attitudes and practices (KAP) study.

OUTPUT 2 3.5: Strengthened capacity for delivery and access to services to ensure women children and households have access to child health EPI, WASH and nutrition services.

Analytical Statement of Progress:
Past investments in the positive deviance (PD) approach and partnership with the World Food Programme culminated in the establishment of 20 community nutrition education clubs to support infant and young child feeding practices. As part of the contribution to the global polio endgame efforts, UNICEF, in collaboration with WHO, supported MOH to introduce two new vaccines (bOPV & IPV) in April 2016. Thirty five health workers were trained on social mobilization to promote community uptake of new and routine vaccines. These capacity building efforts resulted in Lesotho successfully switching within the recommended global tOPV to bOPV switch timeframe. To further strengthen capacity on EPI programme management, MLM training was conducted for 25 district public health nurses and PHC coordinators from all 10 districts.

In 2016 there was an increase in the documented number of children treated for SAM, from 1,711 to 4,402. The increase in treatment for severe acute malnutrition (SAM) was attributable to financial support and availability of therapeutic emergency commodities from CERF emergency fund as well as UNICEF’S partnership with MOH. UNICEF’s technical support enabled MOH to improve monitoring and reporting of SAM outcomes. In 2016, education sector reports indicated that 86 per cent of schools had improved drinking water sources and 81 per cent had improved sanitation facilities. Data on availability of handwashing facilities in schools is not available; however, under the CLTS programme 17 schools in five districts received tipi taps for handwashing. This data will set baseline targets for the UNICEF Lesotho 2017 WASH programme.

UNICEF will continue to support MOH with cold chain capacity, management systems, and supplementary immunization campaigns and introduction of new vaccines. To strengthen reporting on management of acute malnutrition, UNICEF will continue to support MOH district nutrition offices to conduct in-depth monitoring and the introduction of updated IMAM tools required for routine reporting into DHIS2.

OUTPUT 3 3.6: Strengthen national capacity to formulate policy, plan, budget for and monitor and evaluate maternal, neonatal and child health and nutrition interventions.

Analytical Statement of Progress:
UNICEF, in collaboration with WFP, UNDP and FAO, provided financial and technical support to the development and high level launching of the Lesotho Food and Nutrition
Policy, the SUN movement and the Cost of Hunger in Africa Study. The launch was officiated by His Majesty the King of Lesotho and the African Union commissioner for social affairs.

UNICEF continued to support MOH to strengthen management information systems to generate periodic reports with data disaggregated by age and sex at all levels. In 2016, 100 per cent of health facilities in Lesotho had functioning water, sanitation and hygiene facilities as a result of MOH health care infrastructure rehabilitation efforts. A WASH scorecard was not developed in 2016 due to policy sector review processes. A multi-stakeholder platform was convened with collaborative support between UNICEF and WVL under the guidance of the CLTS Foundation to develop CLTS guidelines for use during CLTS implementation. UNICEF advocated for inclusion of CLTS in the country’s water and sanitation policy, which is under review.

UNICEF Supply Division in UNICEF’s East and Southern Africa Regional Office supported a rapid assessment on human resource capacity for the EPI programme, with specific focus on cold chain and logistics components.

In order to facilitate coordinated multi-sectoral nutrition programming and alignment with the SUN movement initiative, a costed action plan and investment case for nutrition will be developed. Nutrition governance structures will be strengthened through engagement with REACH (renewed efforts towards child hunger). UNICEF and WHO will support the MOH to review the EPI policy and development of standard operating procedures and guidelines to accommodate new vaccines.

UNICEF responded with treatment of severe acute malnutrition reaching approximately 4,402 children and provision of water purification tablets for 57,765 beneficiaries, 7 water storage tanks (5000 L each) to reach 6,950 pupils, handwashing facilities and toilets for 15 schools with 3,416 pupils, and, through partnership with WVL, CRS and Ministry of Health, water and sanitation facilities for 18,709 people.

OUTCOME 7 PCR 4. Protective environment strengthened for children at risk of and exposed to violence, exploitation and abuse.

Analytical Statement of Progress:
According to the Juvenile Training Centre report, out of 116 child court cases received by the Children’s Court, a total of 31 children were sentenced to the Centre by the Children’s Court. Of the sentenced children, 26 were boys and 5 were girls. By employing Restorative Justice and Diversion alternatives to sentencing, the backlog of children’s cases was reduced. Only serious offences, such as 106 sexual offences and 16 murders, were sentenced through the formal criminal court system. UNICEF, in partnership with the Ministries of Social Development and Justice and Correctional Services (JTC), supported the Juvenile Training Centre to implement alternative sentencing, restorative justice and diversion for children in conflict with the law. The reduction in number of children in detention is due to enhanced capacity of law enforcement to implement the Child Protection and Welfare Act.
A total of 66 sexual offence cases were recorded in the Children’s Court in 2016. Of these cases, only six cases were successfully closed through imprisonment. The main reason for the low percentage is the withdrawal of cases by complainants. To address this, the Ministry and World Vision have been carrying out community, radio and TV sensitization programmes to encourage effective management of cases by all law enforcement officials. UNICEF provided technical support in preparing communication materials. No property grabbing cases were reported by the Master of the High Court.

According to the Lesotho Demographic Health Survey, 43 per cent of children’s births were registered up till 2016. All the children whose births were registered were provided with birth certificates. UNICEF supported the Ministry of Home Affairs to set up registration services available at selected health centres. UNICEF also supported the Ministry of Local Government to implement the ‘One Stop Shop’ service centres to provide disadvantaged people, including children, with public services, including birth registration facilities.

Two major strategies -- capacity building of implementing Ministries and Government-NGO-UNICEF tripartite partnership -- contributed to the achievement of the results. However, a number of bottlenecks such as inadequate financial resource, limited human resources, weak accountability relationship and limited data or evidence to inform decisions, were encountered while achieving the planned results.

In the recent advocacy dialogue with the Government, relevant Ministers renewed their commitment to strengthen the child protection system in Lesotho. UNICEF will strengthen its advocacy to fully realize short- and long-term results for children in need of justice services through increased investment in children.

**OUTPUT 1** By end of 2014, the knowledge foundation (gap analysis, costs, etc.) is in place for the effective implementation of the Children’s Protection and Welfare Act 2011 (CPWA)

**Analytical Statement of Progress:**
According to Justice for Children programme report, a total of 1,330 social service workers, including social workers, psychologists, probation officers, prosecutors and correctional service officers and others at district and national levels, were provided with enhanced knowledge on Justice for Children (J4C). UNICEF supported the MOSD and Ministry of Justice and Correctional Services with technical and financial support to train the social service workers.

Four procedures, including relevant services that are stipulated in the Children’s Protection and Welfare Act of 2011, were applied in children’s court following international standards. As a result, reporting on child abuse cases by law enforcement officials improved. According to the Child and Gender Protection Unit of the Ministry of Policy, a total of 160 abuse cases (106 incidences of sexual violence, 16 murders, 12 abductions, 12 neglect, 7 cases of property grabbing and 7 assaults) were reported in 2016. Due to improved application of procedures and services for children in need of justice services, no complaints were directed to the Ombudsman’s Office. UNICEF supported the Ministries to train J4C partners on application of child-friendly procedures and services.

In 2016 MOSD and MOJCS were slow to take ownership of the justice for children initiative. However, in the recent multi-stakeholders dialogue, the Government expressed its strong commitment to expand the implementation of the J4C initiative. A UNICEF priority in 2017 will be to support the Ministry of Social Development and the Ministry of Justice and Correctional Services (MOJCS) to roll out of the J4C programme throughout the country.
Analytical Statement of Progress:
Successful delivery of programmes was ensured through joint planning that led to the signing of Government of Lesotho-UNICEF annual work plan for each programme, scheduled monitoring and semi-annual review of all the four programme components (social policy, HIV and health, education and child protection). Each programme component was reviewed twice during 2016, at mid-year and end of year.

The reviews assessed progress made toward achieving the planned results in the signed annual work plans, analysed the challenges that hampered the achievement of the results and made recommendations on measures to adopt to overcome the challenges. The annual reviews noted that out of seven programme outcomes, six were on track, one was constrained. The outcomes that were on track were: access to education, social policy, HIV prevention among adolescents, access to health, nutrition and water, sanitation and hygiene interventions in four focus districts, strengthened child protection systems, child and gender sensitive social protection system. The only outcome that was constrained was paediatric HIV.

OUTPUT 1 Programme Coordination

Analytical Statement of Progress:
The UNICEF Lesotho annual management plan (AMP) was finalized and shared with the UNICEF Regional Office and with UNICEF Lesotho staff during the first week of February 2016. The AMP score remained static at yellow (low). All staff were directed to use the AMP as the guide for the management of UNICEF support to the Country Programme. Staff were also reminded that:
- The annual management plan must be used by all staff.
- The AMP ensures that the human, material and financial resources of UNICEF Lesotho remain focused on the planned strategic results for children.
- The AMP defines the management and coordination mechanisms.
- The AMP defines related staff accountabilities. It enables staff, teams and committees to understand their respective roles. The agreed upon priorities and results provide the basis for assignments of staff.
- At regular intervals and in management meetings, the indicators in the AMP will be used to monitor progress that UNICEF Lesotho was making towards the achievement of the planned results stated in the AMP.
- The Signed Annual Work Plans provided the basis for the requisition of inputs (cash, supplies, contracts, travel and salaries) and disbursement of funds to carry out planned activities

UNICEF Lesotho worked with implementing partners to develop and implement programme cooperative agreements and small scale funding agreements using the simplified UNICEF tools. Forty-one programme assurance visits (about double the number planned) were carried out. The programme assurance visits provided relevant information that was used to monitor the implementation of the programmes and projects.

OUTPUT 2 Advocacy / Communication

Analytical Statement of Progress:
In 2016, UNICEF Lesotho advocacy and communication efforts focused on strengthening the capacity of staff and partners to effectively engage with national and sub-national decision makers to respond to the needs of claim holders. This was done in an effort to ensure improved health, education, child and social protection outcomes for children. Efforts
also focused on influencing policy decisions to push for child sensitive budgetary allocations. A great part of the UNICEF Lesotho’s work in communication and advocacy was on raising funds and seeking new partnerships for better response to the El Niño-induced drought, which placed more than 600,000 people at risk of food insecurity. UNICEF Lesotho was guided by communication strategies developed in partnership with the UN agencies, the Government and EU.

UNICEF, in collaboration with the social cluster as well as HIV and AIDS committees of Parliament, organized sensitization workshops for Parliamentarians on child-focused budgeting and child protection (especially ending child marriage). This collaboration resulted in capacity building of the two Parliament committees, whose members were equipped with laptops and received basic training. Working in partnership with World Vision and the Ministries of Social Development, Health, Education, and Justice, Parliament was sensitized on several child deprivations and their manifestations. This exercise led to the passing of a motion by Parliament on ending child marriages.

UNICEF Lesotho efforts also focused on strengthening collaboration with NGOs/CSOs, media, academia and the private sector. This collaboration manifested in a partnership with Lesotho Council of Non-Governmental Organizations, an umbrella body for 100 civil society organizations who were sensitized on various issues facing children in Lesotho. This collaboration paved the way for strategic partnership, mostly on areas of service delivery for children as well as social accountability.

In 2017 various advocacy-based platforms such as the ending child marriage campaign (which will be entering its second year in 2017) will be used to kick–start collaboration. This campaign is led by the Minister of Social Development and Her Majesty the Queen in her capacity as Champion for Children’s Rights in the country.

Working with Government, CSOs, and the King and Queen of Lesotho, UNICEF Lesotho continuously advocated for the fulfilment of children’s rights in the country. Following UNICEF advocacy efforts, His Majesty led a high level launch of the Lesotho Food and Nutrition Policy, the SUN movement and the Cost of Hunger in Africa Study, leading to renewed efforts to end child hunger in Lesotho, and accelerating the momentum to reduce stunting. Her Majesty the Queen led initiatives throughout the year such as the launch of the cash transfer book in Lesotho, Breastfeeding Week, and Day of the African Child, Ending Violence and Child Marriage.

Media visits from outlets such as BBC-Wales, NHK Japan TV and CNN highlighted the humanitarian challenges of children in Lesotho including use of social media platforms.
Lessons learned

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Programme documents

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