

Swaziland

Executive summary

UNICEF Swaziland successfully implemented the second year of the UNICEF Swaziland Country Programme 2016-2020 (CP), underpinned by optimism, building on the gains of 2017 and the official end of the El Niño drought. The fiscal environment, however, was volatile due to the impact of Swaziland's dependence on the Southern African Customs Union on available fiscal space for sectors, especially child-focused sectors. Within this context, UNICEF Swaziland supported programme interventions with a strong resource mobilization strategy, the creation of partnerships for leveraging resources and evidence generation for effective, impactful programme implementation.

Key achievements during the year included development of key strategic documents on HIV prevention and treatment, including: national HIV strategic framework, national guidelines on care and treatment and elimination of mother-to-child transmission of HIV, with clear targets for children and adolescents. Progress was made in strengthening the enabling environment in support of early childhood development (ECD) through development of policy, capacity building and evidence-generation. A progressive education sector policy was developed, incorporating ECD and education, and awaits Cabinet approval; implementation is planned for 2018. The capacity of pre-school teachers and community-based caregivers to follow Swaziland's early learning and development standards was strengthened, and an integrated package of ECD services (including nutrition screening, child protection, safety and early child stimulation practices) was piloted in 80 informal day care centres. These steps, in conjunction with data from a rapid assessment of informal day care centres, will inform development of the national ECD strategy in 2018.

UNICEF Swaziland also continued to implement a mixed emergency, development and resilience agenda, rehabilitating 32 hand-pumps, constructing six boreholes, providing water treatment kits and trucked water to 14 constituencies, resulting in improved access to safe water for 55,016 people (20,917 boys/20,562 girls; 5,801 males/7,736 females). Significant progress was achieved in strengthening in communities' and school's capacity for borehole management and maintenance, and rainwater harvesting in 51 communities and 78 schools.

Promotion of integrated approaches continued to be a priority with increased levels of cross-sectoral collaboration across programme initiatives. UNICEF's child protection and education sections worked together to develop tools for preventing violence in schools, while an assessment was undertaken for programming integrated early childhood education, including water, sanitation and hygiene (WASH), nutrition, HIV and child protection. Furthermore, strategic and high-level advocacy – including a forum with government principal secretaries– contributed to raising awareness on key issues affecting children and adolescents.

Despite the key results achieved, significant shortfalls were experienced, which impacted on the full achievement of planned results for 2017. One major challenge was limited partner capacity, particularly the Children's Services Department which is not yet fully functional. This affected implementation and monitoring of programmes, particularly development of the national action

plan for children, coordination of children programmes and establishment of a social work force to support prevention and response to violence against children.

Other key challenges were continuing delays in the enactment of key policy and legislation and in implementation of legislation, such as regulations for the implementation of the Children's Protection and Welfare Act (2012). Bills awaiting enactment include the sexual offences and domestic violence bill, disability bill and public health bill. The delays continue to negatively impact children and women, especially the most vulnerable.

UNICEF Swaziland continued to strengthen engagement with existing partners in 2017, under the United Nations (UN) development assistance framework and explored new partnerships. The focus was on strategic partnerships to support advocacy work to influence budget leveraging and allocation in favour of children and adolescents and to promoting the equity agenda. Collaboration also included the Ministry of Finance and the Ministry of Economic, Planning and Development to take the lead on equity and budget priority for investing in children.

New areas of collaboration included public financing for children and the multidimensional child poverty analysis. A fiscal space analysis was conducted and budget briefs developed to understand past trends in expenditure on child-friendly priorities to inform future expenditure in the education, health, and social welfare sectors. Additionally, an open budget survey was conducted to support the Government to increase the availability and quality of budget information in the public domain. This is part of UNICEF Swaziland's objective of leveraging additional domestic resources for children and adolescents and informing 2018-2019 national budget discussions.

Strategic partnerships were also established with local non-governmental organizations (NGOs), yielding results in increased awareness and knowledge on prevention and response to violence against children and adolescents, and providing response plans for children at risk of abuse in drought-affected regions.

Humanitarian assistance

From 2014–2016, Swaziland experienced its worst drought in 35 years, causing severe water shortages and threatening the survival of children, especially in the most affected regions of Shiselweni and Lubombo. UNICEF Swaziland, with leadership from the National Disaster Management Agency, provided both technical and financial support to the Government prioritizing recovery and community resilience initiatives for the most in-need populations, aimed at strengthening systems and building capacity for sustainability.

During this emergency UNICEF Swaziland supported the National Nutrition Council to reinforce systems for improved nutrition management at both community and health facility levels. In communities, building on the existing rural health motivator (RHM) system, 324 motivators (5 males) were trained on continuous promotion and monitoring of infant and young child feeding (IYCF) with the objective of early identification of malnourished children for appropriate referral and management at health facilities. They screened 105,042 children, of whom 492 were malnourished and referred to health facilities. At health facilities, 90 health workers from nine hospitals were trained on integrated management of acute malnutrition (IMAM) and treated 473 children with severe acute malnutrition (SAM), with a cure rate of over 90 per cent. In addition, ready-to-use therapeutic food was provided to 41 health facilities. The rural health motivators will continue promotion and surveillance of infant and young child feeding practices and referral

to health centres as a part of routine surveillance.

Further, UNICEF Swaziland partnered with World Vision for the rehabilitation of 32 hand pumps and construction of six boreholes, and provision of water treatment kits and trucked water to 14 constituencies, reaching 55,016 people (20,917 boys/20,562 girls; 5,801 males/7,736 females) with safe water. To achieve sustained community water point management, UNICEF Swaziland collaborated with the Ministry of Natural Resources and Energy to establish and train 113 water committees and 191 community artisans to continuously manage and maintain water points, with clear established rules on use of water. The committees and artisans will continue to support communities in water point management to reduce the system failure rate, which was 28 per cent at end-2017.

Additionally, as co-lead of the education and WASH clusters, UNICEF Swaziland provided technical and financial support to the Ministry of Education and Training (MoET) to undertake a drought impact assessment at 634 schools, which revealed that 50 per cent of the schools had non-functional water systems. In response, UNICEF Swaziland in partnership with World Vision installed solar-powered pumps at 11 schools benefitting 1,828 learners (938 boys; 890 girls) and 61 teachers, and provided rain water harvesting facilities at 42 schools, benefitting 15,670 learners (7,515 girls; 8,155 boys) and 684 teachers (432 females; 252 males). In addition, menstrual hygiene management (MHM) kits were provided to 5,298 adolescent girls in schools, strengthening the case for school-based menstrual hygiene support. High-level advocacy and assistance to the Government for scaling-up these initiatives in schools will continue in 2018.

UNICEF Swaziland and other UN agencies contributed to evidence generation to inform humanitarian programming through documentation and sharing of key lessons learnt from the 2016 implementation of the national emergency response management action plan (NERMAP) 2016-2022. The findings informed post-drought programming and resilience building and enabled sectors to develop multi-hazard contingency plans for 2018.

To further strengthen the multisector response to violence against children during emergencies, UNICEF Swaziland provided financial and technical support to the Department of Social Welfare of the Deputy Prime Minister's Office (DPMO) and trained 35 social workers and 35 police officers on child-sensitive case management. Furthermore, community support networks for child protection in emergencies were strengthened, in collaboration with the Nhlanguano AIDS Training Information and Counselling Centre (NATICC). This was carried out through a pilot initiative on child and family-centred approaches and early identification and response to violence against children. This initiative identified and supported 141 children at risk of abuse, sensitized 305 children on the Children's Protection and Welfare Act (2012), trained 45 community leaders on child protection and mobilized 859 community members to lead prevention and response efforts around violence against children within communities. These interventions represented part of the Government's wider prevention and response efforts, beyond the emergency context, and will be further intensified in 2018.

UNICEF Swaziland, through the UNICEF Regional Office, enhanced internal staff capacity in evaluation of humanitarian actions to better support government preparedness, response and sustainable resilience-building. Subsequently, UNICEF Swaziland undertook a review of its response to the El Niño drought, which informed development of the 2018 emergency preparedness plan. The plan's activities are embedded within the annual work plan to ensure that emergency preparedness is integrated within sectoral development plans and programmes.

Equity in practice

Despite its middle-income status, Swaziland continues to be characterized by high levels of inequality, further exacerbated by its heavy HIV and AIDS burden, which also impacts child survival and development. In addition, economic inequality continues to contribute to marginalization and child deprivation, particularly for the lowest wealth quintile. In response, the country programme (CP) was designed with an equity approach focusing on achieving results, particularly for the most vulnerable children, adolescents and women. UNICEF Swaziland is using an upstream approach that is focused on equitable systems strengthening and capacity building for delivery of quality services to the most disadvantaged and excluded.

The CP identified a mix of key strategies aimed at providing the greatest impact, including increased attention to effective, evidence-based advocacy and policy dialogue. The child poverty analysis and out-of-school children's study conducted in 2017 are two key documents that highlight the inequities and causal factors and provide key recommendations to inform strategic interventions designed to address the identified deprivations. Advocacy and dialogue with relevant ministries will be undertaken in 2018 to inform programme interventions.

Given the large number of orphans and vulnerable children in Swaziland (75 per cent of all children), and to sustain the achievements of the Millennium Development Goals, it is critical that the Government of Swaziland increase both the total amount allocated for priority sectors and the effectiveness of priority spending. Effective investment in priority sectors is essential to enable the country to achieve a longer-term growth and development trajectory. UNICEF Swaziland played a key role in advocating for and supporting the development of policies and programmes that enhance the well-being of children in Swaziland. The fiscal space analysis and sector budget briefs developed in 2017 provided information critical to understanding past trends in expenditure on child-friendly priorities and estimate the future fiscal capacity needed to increase priority allocations in the education, health and social protection sectors.

Although Swaziland has provided free primary education since 2010, numerous education challenges continue to prevent children from accessing education, in particular children living with a disability. Although no data is available on the magnitude of disability among children in Swaziland, there are evident gaps in early identification, referral and management as well as access to education. UNICEF Swaziland supported the identification of learners with disabilities through school health departments, and plans to integrate this into the real-time education management information system planned for 2018.

To improve inclusion and advance equity in education, UNICEF Swaziland implemented approaches focused on ensuring that children with a disability have access to a package of health and education services. The intervention included procurement of equipment and training of 31 school health nurses and one senior medical doctor on early identification and management of disabilities. Through this intervention, 15,652 learners (7,210 boys; 8,442 girls) were screened for disability, of which 117 children with hearing impairment were referred and 13 received hearing devices, while 96 children with vision impairments were referred and 41 received vision devices.

To further strengthen government institutions, 19 officials graduated with specialized inclusive education diplomas from the University of Greater Zimbabwe, supported jointly by UNICEF Swaziland and the MoET, and another 85 MoET senior officials were trained on inclusive learning. Strengthening the capacity of these key officials will enable the expansion of inclusive education to additional schools in 2018, as emphasized in the education policy. UNICEF

Swaziland further supported a capacity building pilot intervention for 26 parents of children with hearing impairment on Swazi sign language, aimed at addressing communication barriers and improving parental involvement in children's learning. In addition, in partnership with the DPMO, UNICEF supported costing of the national plan of action on disability and the development of its monitoring and evaluation framework. The framework will be implemented in 2018, aimed at improving the overall enabling environment for children living with a disability.

Strategic Plan 2018-2021

The UNICEF Strategic Plan 2018-2021 (SP) offers an opportunity to further align UNICEF's goals with national priorities, further emphasizing "leaving no child behind", strengthening capacities of Government and civil society partners to ensure an equity lens and focusing on the most vulnerable and marginalized children. The incorporation of unfinished business of the Millennium Development Goals into the SDGs enables UNICEF Swaziland to continue its commitment to goals on HIV and child and maternal mortality, which continue to undermine Swaziland's progress toward achieving its national vision of an AIDS-free generation.

Key interventions in the two country programme outcomes of young child survival and development (YCSD) and adolescent protection, learning and development (APLD) align with the goals and focus areas of the new SP. The country programme further aligns with the plan's key change strategies, including programming at scale, gender-responsive programming, winning the cause for children from decision-makers and partnerships.

The young child survival and development programme seeks to ensure that "young boys and girls are immunized, healthy, registered at birth and ready for school", with a focus on improving investment for children's first 1,000 days through integrated interventions in early childhood care and education across the education, health and nutrition, WASH, and child protection fields. Birth registration is also a priority in Swaziland. This programme – focused on reduction of stunting, promotion of maternal and newborn care, immunization, quality ECD, and HIV treatment and prevention – aligns with SP goal areas 1 and 4, addressing child survival and a safe and clean environment. UNICEF Swaziland supported the Government and partners to: develop an ECD strategy, strengthen capacity to apply Swaziland's early learning development standards and deliver an integrated ECD package including: antenatal care, infant and young child feeding, prevention of mother-to-child transmission (PMTCT) of HIV, immunization information and early childhood stimulation. UNICEF Swaziland will continue to support the strategic policy direction and implementation of the ECD strategy.

The adolescent protection, learning and development programme aligns to SP goal areas 1, 2, 3 and 5, covering children's rights to survival, education, protection from violence and exploitation and an equitable chance in life. Priority interventions include gender-responsive adolescent health, HIV treatment and prevention; improved access to quality education and learning outcomes; prevention and response to violence against children; and adolescent empowerment. UNICEF Swaziland's strategies for addressing two key challenges – HIV/AIDS and sexual gender-based violence are closely aligned to goal area 3, protecting children from violence and exploitation. UNICEF Swaziland aims to strengthen institutional capacity, linkages and multisectoral approaches, to ensure a comprehensive approach to preventing and responding to violence against children and women. In this regard, in 2017 it strengthened the capacity of police trainers and social workers to adopt child-sensitive approaches to managing cases of violence against children and advocated for priority implementation of the Children's Protection and Welfare Act, and enactment of the sexual offences and domestic violence bill.

Additionally, the country programme focus on integrating humanitarian and development agendas, as well as strengthening community resilience, align to SP goal area 5, providing an enabling framework for integration. The SP's introduction of the theory of change concept will enable UNICEF Swaziland to improve the CP's critical analysis, identification of strategies and measurement of results.

While there is great value in the UNICEF Swaziland Country Programme 2016-2020 with a life-cycle approach across the result areas, its successful implementation is limited by the Government's sectoral structure. Going forward, UNICEF Swaziland will continue its efforts to support strong coordination across sectors, with comprehensive holistic approaches, placing a strong emphasis on building institutional systems for improved results for children.

Emerging areas of importance

The Government of Swaziland recognizes the importance of ECD, as prioritized in the national development strategy, given its contribution to children's holistic development and laying a solid foundation for later life and learning. Despite this recognition, the country lacks a clear policy direction, strategy and integrated standards for delivery of ECD services. This is compounded by urbanization and industrialization, which have led to increased rural-urban migration and increased numbers of children living in informal and high-density areas with poor living environments, profoundly affecting access to quality services.

Integrated early childhood development (ECD). UNICEF Swaziland provided technical support to the MoET to integrate early childhood care and education in the revised education sector policy, with clear policy statements on the roll-out of early learning within the education system. This was further strengthened by UNICEF's provision of technical support to establish a multisectoral technical working group on ECD, comprising MoET, the Ministry of Health (MoH), and the Swaziland national ECD network. UNICEF Swaziland also developed a communication for development (C4D) strategy for engaging parents, caregivers and communities on early stimulation, nutrition, immunization and birth registration.

To accelerate the implementation of the integrated ECD services package, UNICEF Swaziland, in collaboration with MoET, trained 143 pre-school teachers and 189 community-based caregivers on the country's early learning and development standards. A total of 6,327 children benefitted from the training. An assessment of pre-school teachers on early childhood milestones showed an increase in knowledge from 68 per cent to 77 per cent.

UNICEF Swaziland, in collaboration with an NGO (Siphilile) also strengthened the capacity of caregivers in 80 informal day care centres to provide comprehensive ECD services. These caregivers reached 4,039 children with an integrated package of services that included nutrition screening, child protection, safety and early child stimulation practices. This will inform the national ECD strategy to be developed in 2018. In addition, financial support was provided to strengthen and/or build capacity among 45 mentor-mothers who reached 3,604 pregnant and lactating women with an ECD information package through home visits.

Further, a rapid assessment of informal day care centres in Manzini Region was conducted to inform the development of the national ECD strategy planned for 2018. Information from the assessment will also inform the development of the minimum package for day care centres.

These initiatives and interventions in ECD implemented in selected, underserved informal settings will inform ECD strategy development in 2018 as well as ongoing advocacy efforts and

recommendations on ECD and education as a part of Swaziland's free primary education system.

Summary notes and acronyms

Summary notes

Rural Health Motivator: Rural health motivators are lay/community health workers, trained by the Ministry of Health to provide health information and raise health awareness in communities. There are approximately 5,300 rural health motivators in Swaziland.

World's Largest Lesson: The World's Largest Lesson is a global initiative that introduces the Sustainable Development Goals to children and young people globally to unite them in action.

Acronyms

ANC – antenatal care

APLD – adolescent protection learning and development

ART – antiretroviral treatment

BCP – business continuity plan

BNLS – Botswana, Namibia, Lesotho, Swaziland

C4D – communication for development

CLTS - community-led total sanitation

CMT– country management team

CP – country programme

CRC – UN Convention on the Rights of the Child

DCTs – direct cash transfers

DPMO – Deputy Prime Minister's Office

ECD – early childhood development

ERM – enterprise risk management

HACT – harmonized approach to cash transfers

ICT – information and communication technology

IMAM – integrated management of acute malnutrition

IYCF – infant and young child feeding

LSA – local staff association

M&E – monitoring and evaluation

MHM – menstrual hygiene management

MICS – Multiple indicator cluster survey

MNCH - maternal, newborn and child health

MoEPD - Ministry of Economic Planning and Development

MoET – Ministry of Education and Training

MoH – Ministry of Health

MoHA – Ministry of Home Affairs

NATICC – Nhlngano AIDS Training Information and Counselling Centre

NERMAP – National emergency response management action plan

NGOs – non-governmental organizations

OR – Other resources

ORE – Other resources-emergency

PMTCT – prevention of mother-to-child transmission (of HIV)
RHMs – rural health motivators
RR – Regular resources
SDGs – Sustainable Development Goals
SWA – Sanitation and Water for All
UN – United Nations
UNDSS – UN Department of Safety and Security
USAID – United States Agency for International Development
WASH – water, sanitation and hygiene
YCSD – young child survival and development

Capacity development

Significant gaps in institutional capacity for the delivery of some essential services, especially in the areas of nutrition, violence against children and disability programming, still persist. UNICEF Swaziland, through its upstream approach with an equity prism, focused on strengthening institutional systems and building capacity at the national and sub-national levels for delivery of quality services.

To strengthen institutional and community capacity to deliver malnutrition prevention and treatment services, UNICEF Swaziland supported revision and roll-out of the infant and young child feeding guidelines, trained 90 health workers from nine hospitals on integrated management of acute malnutrition (IMAM), and further trained 324 rural and health motivators at the community and household levels in provision of community-based nutrition promotion, screening and early referral of malnourished children to health facilities. Consequently, 105,042 children were screened, of whom 492 were underweight and referred for management and 473 children with severe acute malnutrition were treated, with a 90 per cent cure rate. UNICEF Swaziland further supported the training of 80 multisector violence against children responders, 70 police officers and 70 social workers on child-sensitive case management to further strengthen case management capacity for child victims of violence in the country.

To strengthen inclusive programming, UNICEF Swaziland trained 85 officials on inclusive education, benefitting 16,000 learners and 31 school health nurses by enhancing their ability to use sign language with children with a hearing disability.

Strengthening community capacity building for recovery and resilient approaches was prioritized in the 2017 emergency response plan. UNICEF Swaziland, with World Vision, trained 113 WASH committees and 191 artisans on borehole maintenance and trained 26,617 people in safe water conservation and treatment and positive WASH practices.

UNICEF Swaziland supported the development of communication for development strategies in support of social and behaviour change communication in key areas including violence against children and adolescent HIV prevention, through which 689 adults from all regions and 31 religious leaders were engaged around ways to address norms harmful to children, and 15 media practitioners from eight media companies were trained on child-sensitive reporting.

Evidence generation, policy dialogue and advocacy

Generating evidence for policy advocacy and informing strategic programme interventions is a priority of the UNICEF Swaziland country programme. To contribute towards increased national knowledge about non-monetary child poverty, UNICEF Swaziland conducted a non-monetary child poverty study based on deprivation of basic needs. The study's preliminary findings

showed that 57.2 per cent of all children – the majority of whom are under five years of age – experience multiple deprivations, and will be used to develop equity profiles in the education, protection and nutrition sectors. The findings will also generate debate around child poverty aimed at influencing change in the approach to child poverty eradication. The full report will be finalized in 2018, when Swaziland is localizing the SDG 1 baseline and targets.

Additional critical evidence generated that informed policy advocacy included: (1) a study on the drivers of violence against children, which broadened the understanding of the causes and manifestations of violence against children and informed the national strategy on violence 2017–2020; (2) a rapid assessment of informal day care centres in Manzini, which will inform the development of ECD strategy, standards and minimum package for day care centres; (3) budget briefs, which provided analytical underpinning for advocacy in favour of more efficient spending in the education, health and social protection sectors; (4) political economy analysis, which identified entry points for advocacy in public financial processes; and (5) the open budget survey conducted by the international budget partnership to support increased availability and quality of budget information in the public domain.

Jointly with other UN agencies and partners, UNICEF strengthened evidence-based programming for the drought response in 2017 through support for research and evaluations that contributed to improving the scope and targeting of humanitarian and resilience-building interventions. Key studies and evaluations included: mid-term review of the implementation of the NERMAP 2016-2022; comprehensive multisectoral assessment; NERMAP lessons learnt; and WASH emergency response project evaluation.

Partnerships

Establishing partnerships and engaging with partners remain central for delivering results for children in Swaziland. In this regard, UNICEF continued to strengthen engagement with existing partners and explored opportunities to engage in new partnerships, focusing specifically on strategic partners for support of UNICEF's efforts to influence budget leveraging and increase budget allocation in favour of children and adolescents and to promote the equity agenda.

UNICEF Swaziland strengthened partnership with the ministries of finance and economic, planning and development, strongly advocating for leadership on equity and priority investments in children. New areas of collaboration included public financing for children, multidimensional child poverty analysis and development and dissemination of budget briefs across the health, education and social protection sectors. These efforts were intended to inform 2018-2019 national budget discussions and result in more efficient and effective spending on children. Support was also provided to undertake a fiscal space analysis, concentrating on the possibility of expanding current government spending on priority programmes that benefit children and adolescents.

UNICEF Swaziland also focused on partnerships for strengthening the humanitarian response. A partnership with United States Agency for International Development's (USAID) Office of US Foreign Disaster Assistance was enhanced, which resulted in mobilization of approximately US\$1.3 million for implementation of the 2017 and 2018 WASH and nutrition emergency preparedness and response plans.

Building on the global memorandum of understanding in support of the 'One Billion Coalition on Resilience Building' with the International Federation of the Red Cross, UNICEF Swaziland established a formal strategic partnership with Red Cross Swaziland. The partnership

contributed toward strengthening community capacity for resilience and effective preparedness to cyclical and humanitarian shocks.

Partnership with UN agencies contributed to the joint humanitarian response, and UNICEF's work on HIV, gender-based violence and violence against children, as well as leveraging resources for the Government, with the development of a funding proposal to the Global Fund for HIV, TB and malaria.

External communication and public advocacy

UNICEF Swaziland intensified advocacy efforts for: an improved enabling environment, increased domestic resources for children, public engagement on protection of children from violence and the importance of investment in the first 1,000 days of life. Central to advocacy efforts was the use of evidence generated from studies, surveys and budget briefs.

In line with UNICEF's global communication and public advocacy Initiative #EndViolence, a six-month campaign on promotion and protection of children's rights was conducted in collaboration with the DPMO and civil society. The campaign reached 700 parents, 72 teachers, 30 faith leaders and 3,000 children; four local chiefs supported their chiefdoms to establish mechanisms for reporting and referrals and were nominated as champions for children. The engagement will continue in 2018, with the establishment of a chiefdom scorecard for children. The campaign provided an opportunity to lobby for passage of the sexual offences and domestic violence and disability bills, which await Senate deliberation.

In efforts to influence the Government's agenda to focus on equity, child poverty and improve budget allocations to child-focused sectors, UNICEF Swaziland established an advocacy forum for strategic engagement with government principal secretaries. The forum discussed key issues affecting children using a national child scorecard, and led the Government to request that UNICEF Swaziland make regular high-level presentations to the Cabinet in 2017. This will continue, with the aim of making children's issues a central issue on the Government agenda, and advocating for increased resources for children.

The commemoration of World Prematurity Day heightened the focus on neonatal deaths in the country, with a firm commitment from the Minister of Health to prioritize reduction of neonatal deaths, improve care during the first 1,000 days and develop a national ECD strategy. Further commitment was pledged by the private sector and UN agencies to support the establishment of a neonatal intensive care unit at the National Referral Hospital.

South-South cooperation and triangular cooperation

In advocating for children's rights, UNICEF Swaziland supported implementation and reporting on international conventions on children's rights and the development of child-friendly policies. Conventions reported on included the Convention on the Rights of the Child and Convention on the Elimination of all Forms of Discrimination against Women.

To contribute to ongoing national efforts to develop an integrated child case management system, UNICEF Swaziland supported the participation of the DPMO's Department of Social Welfare at the sub-Saharan Africa regional case management learning platform, co-hosted by the Government of Zimbabwe, UNICEF Zimbabwe and USAID Zimbabwe. Participation in this knowledge-sharing forum resulted in more robust engagement by UNICEF Swaziland with the DPMO and European Union to identify potential areas of collaboration for the development and adaptation of the integrated child case management system.

As part of implementation of the Sanitation and Water for All (SAW) global initiative, UNICEF Swaziland supported two officers from MoH-Department of Environmental Health to attend an inter-country experience-sharing session on community-led total sanitation (CLTS) hosted by the Government of Zambia and UNICEF Zambia. Lessons learned during the visit informed the development of CLTS roll-out plans for all four regions of Swaziland, to be implemented in 2018. Financial support was provided to support five MoH officers to attend a learning visit on the use of real-time monitoring systems, hosted by Kenya's MoH and UNICEF Kenya, to strengthen generation of real-time data to inform programming. Lessons learned from the visit informed strengthening of the health management information system and development of electronic tracking tools at health facilities.

Support to integration and cross-sectoral linkages

Cross-sectoral collaboration continued to be a priority for achieving programme objectives across the country programme's life-cycle approach. The country programme focused on integrated approaches, mainly in ECD; adolescent prevention; and response to violence, with links to HIV prevention, care and treatment, communication for development, and monitoring and evaluation.

In partnership with the NGO Siphilile, UNICEF Swaziland supported the delivery of integrated nutrition, child protection, health, HIV and WASH to strengthen non-formal ECD centres, specifically through enhancing the capacity of carers. The interventions led to 1,460 children receiving a comprehensive package of services at 80 informal day care centres. UNICEF Swaziland also provided support for reviving the multisectoral technical working group on ECD and the national ECD network, improving coordination across key ministries and NGOs.

UNICEF Swaziland continued in 2017 to support strengthening of a national multi-sector response to violence against children and gender-based violence. An integrated sexual offences training manual was launched and used to train 80 officials from health, justice, police, social welfare and civil society on linkages, roles and responsibilities in the response to child sexual violence. UNICEF Swaziland supported the Government's roll-out of a one-stop centre to provide integrated services to survivors of violence. Two more centres were established in 2017: at the National Referral Hospital in Mbabane and Raleigh Fitkin Memorial Hospital in Manzini. These one stop centres will open in 2018, offering free medical care, psychosocial care and counselling, legal support and social services.

UNICEF Swaziland further supported the development of an integrated communication for development strategy aimed at supporting partners in engaging parents, caregivers and communities on adolescent HIV prevention, violence against children, early stimulation, immunization and birth registration. The strategy will be implemented in 2018, and will include an integrated behaviour-change package for advocacy at the community level.

Service delivery

The UNICEF Swaziland country programme focuses on upstream support to strengthen systems through enhancing capacities to deliver results for children. However, in specific circumstances where access to essential services by children was constrained, support was provided to ensure access to life-saving interventions for children, particularly within the post-EI Niño drought context, which continued to affect children's access to safe water and nutrition in the two worst-hit regions.

To increase access to safe water, UNICEF Swaziland, in collaboration with World Vision rehabilitated 32 non-functional hand pumps, drilled six new boreholes, trucked water, and provided water treatment kits to 78 schools and 51 communities, reaching 55,016 people.

Further, UNICEF Swaziland supported the training of 90 health workers on IMAM and provided ready-to-use therapeutic food to 41 health facilities to enhance treatment for malnourished children, which led to the treatment of 473 children with severe acute malnutrition, with a 90 per cent cure rate. Some 2,237 children living in hard-to-reach areas of one region with low coverage areas for immunization services were also reached. Through trained rural health monitors, community-based nutrition management was strengthened for preventing and managing malnutrition; 105,042 children were screened. Information on nutrition was also provided in relation to infant and young child feeding practices to 1,313 pregnant and lactating women.

As access to more efficacious antiretroviral therapy (ART) for children living with HIV is low in Swaziland – due to lack of capacity to determine appropriate replacements for drug resistance – UNICEF Swaziland supported genotyping for 12 children and switching to an appropriate regimen for enhanced access to third-line ART for HIV-infected children resistant to second-line ART. Psychosocial support for ART adherence was also strengthened through use of the RapidPro platform by teen clubs, and reached 425 adolescents living with HIV, leading to 73 per cent (55 per cent national average) retention in ART.

Human rights-based approach to cooperation

In advocating for children's rights, UNICEF Swaziland supported the implementation and reporting on international protocols on children's rights and development of child-friendly policies. Protocols reported include the Convention on the Rights of the Child and Convention on the Elimination of all Forms of Discrimination against Women.

UNICEF Swaziland further supported finalization of the third and fourth periodic state party report on the Convention on the Rights of the Child, covering the period 2006 to 2016, through technical and financial support to the DPMO's Children's Services Department. The Government also finalized the first periodic state report on the African Charter on the Rights and Welfare of the Child; both reports were endorsed by Cabinet and submitted to the Committee on the Rights of the Child and African Union Commission, respectively. UNICEF Swaziland also supported DPMO's Department of Gender and Family Issues to cost the national strategy to end violence 2017-2022, contributing toward national efforts to implement the Convention on the Elimination of Discrimination against Women.

To strengthen accountability mechanisms for the realization of children's rights, particularly for protection against all forms of violence, UNICEF Swaziland provided technical and financial support to the MoET to review education sector policy and align it with international child rights benchmarks, including the prohibition of corporal punishment in schools.

Further, UNICEF Swaziland provided technical and financial support to the DPMO and the national Federation of Disabled Persons for costing the national plan of action on disability and developing its monitoring and evaluation framework. The capacity of the MoH School Health Department was strengthened through the provision of clinical equipment for screening disability-related conditions: 31 school health nurses were trained to use the equipment and 15,652 learners were screened to identify and effectively manage children with disabilities in

schools. The nurses were also trained on sign language, for improved communication with children with a disability.

Gender equality

UNICEF Swaziland's gender target priorities evolved around gender-responsive adolescent health and gender-based violence. In addition, gender mainstreaming was strategically embedded in sectoral initiatives on WASH, health and nutrition, education and child protection. Both young child survival and development and adolescent protection, learning and development programmes focus on mainstreaming gender, with a specific focus on including age- and sex disaggregation in targeting, monitoring and reporting, and on the development of a national HIV strategic framework; national guidelines on care and treatment; and elimination of mother-to-child transmission.

Violence against children, particularly girls, is a serious problem in Swaziland, and was identified as a gender priority in 2017. To support prevention, response and reporting, including in emergencies, 35 social workers and 35 police officers were trained on child-sensitive case management. UNICEF Swaziland partnered with NATICC to roll out a child and family conferencing programme addressing harmful norms and practices and the root causes of gender inequality, with the aim of improving attitudinal and behavioural outcomes related to violence against children. Support was also provided to the DPMO's department of gender and family issues to cost the action plan for the national strategy to end violence 2017-2022. The plan covers priority prevention interventions, including capacity building of partners on gender-based violence.

Gender-sensitive approaches in WASH improved women's access to clean water through the rehabilitation and drilling of new boreholes, reducing the distance and time required by women to collect water. A menstrual hygiene management programme for girls in secondary schools was supported, providing 5,548 adolescent girls with kits and hygiene information. Additionally, the gender mainstreaming in education programme addressed the gap in comprehensive knowledge on HIV and established a toll-free line for reporting violence in schools. UNICEF Swaziland further supported the MoET to complete the roll-out of life-skills education at all secondary schools. The life-skills curriculum is aimed at improving HIV/AIDS prevention among adolescents during a critical period of their life cycle.

To further prioritize UNICEF's work on gender, a rapid gender programmatic review was undertaken, which identified key entry points and interventions for strengthening gender programming within the country programme, in alignment with the Gender Action Plan 2.0 and the SP 2018-2021.

Environmental Sustainability

UNICEF Swaziland mainstreamed disaster risk reduction in its programmes and, in collaboration with other UN agencies, supported the domestication of international instruments on environment and climate change through the UN development assistance framework and Swaziland's climate change policy launched in 2016, to respond to national climate change concerns.

To reduce carbon emissions, UNICEF Swaziland collaborated with World Vision to replace an electric water pump with a solar water pump at one school, as part of an initiative to scale up the use of solar water pumps at schools. The initiative benefitted 198 learners and 11 teachers. Surface water management in schools and communities was enhanced through provision of

water-harvesting facilities at 42 schools. In addition, 15,670 learners and 684 teachers from the 42 schools and 9,286 community members were trained on water-harvesting techniques.

Also in collaboration with World Vision, UNICEF Swaziland focused on building resilient communities and established and trained 113 community WASH committees on water-point management. This led to committees' establishment of rules on water use, including schedules for communities drawing of water to allow ground-water recharge.

To strengthen children's participation in the climate change response, UNICEF Swaziland in collaboration with the MoET, provided information to 7,520 learners and 44 teachers from 30 schools on sustainable environmental management, linked with appropriate food packaging, recycling and waste management, using the World's Largest Lesson platform, which focused on SDG 2 'Zero Hunger'. As a result, the schools undertook clean-up campaigns, collecting solid and recyclable waste and disposing of it appropriately.

In pursuit of a greener UNICEF Swaziland, measures to reduce carbon footprint were instituted, including promoting paperless meetings, partnership with a paper recycling company and reinforcement of efficient use of electricity by switching off lights and office equipment when not in use.

Effective leadership

UNICEF Swaziland introduced mechanisms to track key management indicators, audit recommendations, and workplan implementation, and provided general oversight to improve operations, programme and management. Major initiatives undertaken by the country management team included: strengthening harmonized approach cash transfer (HACT) implementation, establishing tools for analysing HACT reports (micro-assessments, spot-checks and programmatic visits), partnerships, and monitoring of direct cash transfers (DCTs). HACT trainings were conducted to strengthen the capacity of UNICEF Swaziland staff and partners to effectively manage financial transactions.

Following the development of an audit action plan, UNICEF Swaziland took actions to systematically address audit observations and closed all recommendations. UNICEF Swaziland also centralized monitoring of the implementation of audit recommendations and sustainability by the country management team.

Both the enterprise risk management (ERM) and business continuity (BCP) plans were updated to address gaps, risk drivers, key controls and risk mitigation strategies and governance mechanisms. ERM risks and mitigation measures were regularly discussed and monitored quarterly by the country management team with clear actions/changes.

The business continuity plan was updated in November to include the Botswana, Namibia, Lesotho, Swaziland (BNLS) hub. Improvements in information communication technologies (ICT) were completed, including transition to cloud-based systems for improved office business continuity. To ensure efficiency and accountability, UNICEF Swaziland monitored funds utilization weekly, achieving a 100 per cent utilization rate at the year end. However, challenges with DCTs (such as lengthy turnaround time by government systems for releasing funds for implementation) were experienced and addressed through discussions with the country's accountant general.

The transition to processing transactions through the BNLS hub and using eZHACT caused

some challenges. Several actions were taken to improve operationalization of the hub, including development of new work processes, updating the table of authority to include the hub and segregation of duties in VISION, as well as development and monitoring of a performance tracking tool.

Financial resources management

UNICEF Swaziland improved procedures for ensuring efficient and effective management of financial resources. The country management team provided monitoring and oversight of budget and internal controls. Establishment of the BNLS hub contributed to UNICEF Swaziland's efficiency and effectiveness on financial management in areas of bank reconciliation, bank optimization and payment processes. As a result, monthly bank reconciliations were completed on time, while bank optimization was identified for further improvement.

The team monitored implementation of the 2016 audit action plan, and UNICEF Swaziland closed implementation of all audit recommendations within four months. Following the closure of audit recommendations, tools implemented in response to the recommendations were monitored for sustainability.

UNICEF invested significant efforts in strengthening HACT implementation, supported by a HACT officer on a four-month stretch assignment. The HACT assurance plan was almost fully completed, including training of 51 partners and 74 per cent UNICEF staff, which improved the quality of programme management and reporting.

The UN maintained a service-level agreement with Standard Bank, which provided competitive charges and quality services. Efficiency gains were made from one long-term agreement for internet fibre, negotiated through the UN ICT working group and provided as a free trial for 12 months, contributing to an estimated cost-saving of US\$30,000.

The management of financial resources was comprehensively analysed throughout the year at the level of programme, operations and country management teams. Funding utilization rates were monitored monthly and discussed at CMT and programme coordination meetings; appropriate actions were taken in a timely manner. This led to 100 per cent utilization of all grants before expiry, 100 per cent utilization of budget management allocation, Regular Resources (RR), Other Resources (OR) and Other Resources-Emergency (ORE) funds by December 2017.

Fundraising and donor relations

UNICEF Swaziland exceeded the 2017 fundraising target for Other Resources (US\$2,740,000), raising US\$2,833,462 in OR and ORE. Funding was received from USAID, Bill & Melinda Gates Foundation and UNICEF national committees in Korea and the United Kingdom. Strategic relations with the UK National Committee continued, following a successful visit by UNICEF Goodwill Ambassador Nicole Scherzinger. The visit contributed towards funding mobilization opportunities for broadening the child survival development agenda, with a focus on maternal, new-born and child health. In support of UNICEF Swaziland's Humanitarian Action for Children appeal to fund the emergency response plan, bilateral donor relations were furthered through meetings, field visits and donor visibility. New funds were received from USAID and UNICEF set-aside funds for the humanitarian fund, accounting for 43 per cent of the appeal.

Swaziland's status as a low-middle-income country posed challenges for attracting funding,

particularly in child protection and health. In line with the office resource mobilization strategy 2016-2020, UNICEF Swaziland also focused on leveraging funds for children and adolescents. Jointly with other UN agencies, UNICEF supported the development of a funding proposal to the Global Fund for HIV and TB for US\$46 million, of which US\$6 million was leveraged for the national programme on adolescent girls and young women.

UNICEF Swaziland submitted all donor reports on time. To ensure that the quality of donor reporting met organizational standards, UNICEF relied on its standard operating procedures for quality assurance of donor reports. The streamlining of this tool has helped to ensure high-quality donor reporting, including donor feedback forms submitted with the reports.

The total OR available in 2017 was US\$2,833,462 in OR and ORE, with OR and ORE fund utilization rate at 100 per cent at the time of reporting.

Evaluation and research

UNICEF Swaziland strengthened its evidence-generation to inform policies, programmes and accountability. A plan for research impact monitoring and evaluation was developed and approved in the first quarter of 2017; one evaluation was completed in 2017.

The external evaluation of the 'child friendly schools (Inqaba) initiative in primary schools' was finalized. The results showed that it is a viable initiative that provides a package of services, including health care, to children, promoting learning achievement. The evaluation informed the MoET decision to rollout the child friendly schools initiative in secondary schools in 2018. UNICEF Swaziland will continue to support the roll-out of this initiative.

For effective management of the plan for research impact monitoring and evaluation (PRIME), UNICEF Swaziland's research and evaluation committee met twice during the year to approve and monitor implementation progress. The country management team provided oversight on the quality and implementation progress of the Plan; a review was conducted at mid-year, which assisted in identifying studies and evaluations for 2018.

Efficiency gains and cost savings

UNICEF Swaziland maintained its internal policy on economy class travel using discounted travel air tickets and shuttle services between Swaziland and South Africa, as opposed to air travel, when applicable. This reduced travel costs by 13 per cent (\$28,407). The UN in Swaziland maintained a service-level agreement with Standard Bank, which provided competitive charges and quality services. Collaboration by UN agencies to secure common services, particularly in IT and procurement, contributed to cost savings in staff time. The use of one Internet service provider by all UN resident agencies reduced Internet charges by an estimated 50 per cent due to a successfully negotiated lower price. Use of one very small aperture terminal reduced bandwidth, contributing to cost savings. The 2017 total cost savings within ICT was approximately US\$15,000.

The use of stretch assignments resulted in cost savings when addressing capacity gaps in the areas of HACT, social policy, and operations (human resources), avoiding the need to engage consultants. The estimated cost savings was US\$29,000.

Supply management

UNICEF Swaziland procured supplies and services valued at US\$896,297. The procurement undertaken included institutional service contracts, administrative service contracts, renting of workshop/conferencing facilities, printing services, programme supplies, administrative supplies and individual contracts. The individual contracts services were sourced through both international and local vendors with a total amount of US\$316,792.

There was also an increase in the utilization of long term agreements for institutional contracts which were established by the BNLS supply hub in Pretoria amounting to the total value of US\$427,636. The use of long term agreements provided timely implementation and contributed to saving staff time. UNICEF Swaziland did not procure programme supplies through Supply Division however received stock ordered in 2016 which was delivered in the first quarter of 2017.

UNICEF Swaziland continued the good practice of not having a warehouse and supplies were directly delivered to partners on receipt which continued to contribute to the cost-saving initiative.

The table shows goods and services procured in 2017.

Type of Procurement	Goods (US\$)	Services (US\$)	Total (US\$)
Programme section			
Off-shore	-	-	-
Local procurement	8,286.37	316,792.05	325,078.42
BNLS Procurement services	-	427,636	427,636
Operations Section			
Local procurement	19,840.46	123,742.08	143,582.54
Total	28,126.83	868,170.13	896,297

Security for staff and premises

Based on the UN Department of Safety and Security (UNDSS) 2016 assessment, Swaziland remained at security level 1. The premises adhered to minimum operating security standards. UNICEF Swaziland remained an active member of the UN security management team, which provided updates to staff and visitors on the in-country security situation. Security advisories were sent periodically to alert staff to security developments in and outside of Swaziland. To strengthen security awareness, UNICEF Swaziland continued to monitor the mandatory security clearance records and adhered to standard security management measures. In addition, mandatory online trainings in basic security and advanced security in the field were monitored through the staff development committee. UNICEF Swaziland updated its business continuity plan, identified an alternative operation site in the case of an emergency and incorporated the

BNLS hub as part of critical staff.

UNICEF Swaziland further hosted a mission by the security manager from BNLS hub who assessed the new UN site and made recommendations to UNDSS Swaziland and also updated staff on security-related issues. Recommendations for improving the new UN site are being addressed by the UNCT, with support from the UN operations management team. In addition, UNICEF Swaziland received regional contingency funds (US\$43,162) for the purchase of security access-control equipment, addressing one of the recommendations.

Human resources

UNICEF Swaziland completed recruitment of four fixed-term positions, bringing the office to full staff capacity. The UNICEF global talent management initiative was used to attract, hire, support and empower staff. Despite completing office recruitments, delays were experienced due to limited human resource capacity and transition to the BNLS hub. Efforts to pursue gender and geographic diversity continued to be both a priority and a challenge. The international professionals category stands at 75 per cent female and 25 per cent male, while the national officer category is at 63 per cent female and 37 per cent male.

In line with the transition to the BNLS operations hub, the operations staffing structure was reorganized to respond to the BNLS review change management plan developed in collaboration with the local staff association (LSA).

UNICEF Swaziland continued to encourage staff to participate in stretch assignment opportunities; two general services staff benefitted from this opportunity. Four staff members were granted continuous contracts. Staff development was prioritized in the 2017 annual management plan and monitored quarterly by the staff development committee and CMT, with 100 per cent achievement of planned group trainings, 70 per cent individual face-to-face trainings and 70 per cent online trainings. UNICEF Swaziland management, in collaboration with the local staff association continued to work on addressing issues arising from the 2017 global staff survey. An action plan was developed and monitored by both management and the local staff association.

ACHIEVE performance planning was closely monitored by the country management team, with a completion rate of 100 per cent in the planning phase. Performance discussions between supervisors and supervisees continued throughout the year to ensure a clear connection between country programme results and individual outputs and accountabilities.

Effective use of information and communication technology

UNICEF Swaziland continued to maintain global ICT standards and policies, providing a secure and stable ICT infrastructure. To strengthen effective and efficient programme delivery, Microsoft Office 365 remained the main pillar for office automation and collaboration. Furthermore, UNICEF Swaziland maintained Internet connectivity via a very small aperture terminal and local connectivity, using fibre link from the Swaziland Post and Telecommunications, obtained through the joint UN ICT initiative. This initiative facilitated migration to LIGHT (the lightweight and agile system) resulting in a reduced ICT carbon footprint for the office, in line with BNLS sub-regional consolidation, allowing staff continued access to the UNICEF system with an Internet connection. This newly established system complemented the business continuity mechanism, since there was no need for an in-house server infrastructure, further reducing the need for expensive hardware, and contributed to efficiency

gains. No incidents of security intrusion were recorded in 2017, despite a sharp rise in malware, phishing and spam emails.

Programme components from RAM

ANALYSIS BY OUTCOME AND OUTPUT RESULTS

OUTCOME 1 By end of 2020, young girls and boys will be immunized, healthy, registered at birth and ready for school.

Analytical statement of progress

The YCSD programme aimed at ensuring that children are immunized, healthy, registered at birth and have access to integrated ECD. UNICEF Swaziland, in collaboration with the Government, NGOs and United Nations (UN) agencies, contributed toward the achievement of the following results in 2017, as compared to the previous year: increase in fully immunized children aged 12 to 23 months from 80 per cent to 81 per cent; increase in HIV-positive pregnant women who received ART for PMTCT from 85 per cent to 95 per cent; 72 per cent of children born to HIV-positive mothers received antiretroviral drugs for prevention; and the number of children 0 to 14 years living with HIV who received ART rose from 72 per cent to 76 per cent. While 79 per cent of the estimated number of children born to HIV-positive mothers got tested for HIV by the age of two months, transmission of HIV from mother-to-child at 18 months of age remained high (6.8 per cent) compared to mother-to-child transmission at six weeks (2.1 per cent), highlighting the need for greater focus on improved IYCF among HIV-positive pregnant women.

A comprehensive health and nutrition survey conducted in 2017 to inform the humanitarian response showed improvement in some indicators compared to the 2014 MICS, as follows: exclusive breastfeeding increased from 68.3 per cent to 70 per cent; open defecation declined from 11 per cent to 7.8 per cent (Lubombo Region reached 16.6 per cent); stunting declined from 25.5 per cent to 23 per cent; the highest rates were in Manzini (24.9 per cent) and Shiselweni (24.8 per cent).

UNICEF Swaziland and WHO supported the MoH to develop HIV care and treatment guidelines in 2017, as well as a national strategic plan for ending AIDS and syphilis in children 2018–2022, aligned with global guidance and targets. UNICEF and WHO at the country, regional and headquarters level provided in-country technical support to the HIV, TB and PMTCT mid-term review, which informed development of the strategic plan, Global Fund proposal and HIV, TB and PMTCT programme improvement initiatives.

In partnership with the Swaziland Nazarene Health Institution, the MoH and Ministry of Home Affairs (MoHA), birth registration was piloted at one health facility. The pilot showed that only 30 per cent of the births were registered and referred to MoHA for issuance of birth certificates, and only 53 per cent of these received birth certificates. Lessons learned and constraints on facility-based birth registration and linkages with MoHA were documented to inform strengthening of national birth registration systems in 2018.

Additionally, UNICEF Swaziland supported the MoH and Swaziland Nazarene Health Institution in the area of quality improvement for maternal, new-born and child health (MNCH) to increase access to services, leading to 20 health facilities implementing quality improvement projects, 33 per cent of children born at one of the major hospitals (Raleigh Fitkin Memorial Hospital) were

circumcised. Further, UNICEF Swaziland in partnership with a local NGO, Siphilile, supported capacity building for the provision of ECD services focused on the 0 to 3 years age group. The support included building the capacity of five daycare mentors, who offered the ECD package at 80 day care centres, and 45 community-based mentor mothers who conducted home visits, reaching 7,044 pregnant and lactating women.

To strengthen systems for early detection and management of malnutrition, UNICEF Swaziland collaborated with the Swaziland National Nutrition Council to implement the baby-friendly hospital initiative in eight hospitals, trained 324 RHMs and 90 health workers on IMAM and provided ready-to-use therapeutic food at 41 treatment sites. These interventions, along with previous efforts, have contributed to increasing the exclusive breast feeding rate from 68.3 per cent in 2014 (MICS) to 70.3 per cent in 2017 and an over 90 per cent cure rate among children with SAM.

Responding to the impact of the El Niño-induced drought, UNICEF Swaziland successfully co-led the WASH cluster, in collaboration with the National Disaster Management Agency, and participated in the health and nutrition cluster. Further support was provided for conducting a comprehensive health and nutrition assessment, which informed a review of the 2017 emergency response sector plans. UNICEF Swaziland collaborated with World Vision to provide safe water to 55,016 people in 78 schools, three clinics and 51 communities in Shiselweni and Lubombo regions.

Additionally, UNICEF supported rehabilitation of 32 non-functional boreholes, construction of six new boreholes, water trucking and provision of water treatment kits. To build resilience against future climate shocks, 191 artisans were trained to maintain boreholes, and 42 schools and 51 communities were trained on water harvesting techniques; the 42 schools also received water-harvesting facilities. In addition, 26,617 people (52 per cent female) were reached with hygiene promotion messages and 42 WASH clubs with 16,414 people (49 per cent female) were established and trained in the participatory hygiene and sanitation transformation model.

In partnership with the MoH, UNICEF strengthened the capacity of Swaziland's health management information system to generate real-time data, which informed evidence-based programming and decision-making at the facility level. In addition, UNICEF Swaziland supported the use of an SMS-based platform, U-Report, for client satisfaction feedback at 12 health facilities, facilitating quality improvement.

OUTPUT 1 Appropriate legislation, policies, strategic plans and budgets for maternal, newborn child health, WASH, ECD and nutrition improved.

Analytical statement of progress

In 2017 UNICEF Swaziland sought to develop key policy documents and plans for HIV, WASH and integrated ECD. In collaboration with UNDP, it supported the development of the national water policy and the water sanitation and hygiene strategic development plan 2018–2022, which are being used to guide implementation of WASH programmes in the country. A national sanitation and hygiene policy was drafted and will be finalized 2018. To enhance advocacy on WASH, UNICEF Swaziland supported participation by high-level government officials in the SWA meeting in New York. Following the meeting, Swaziland launched its own SWA and identified a pilot community for its implementation. Lessons learnt from this community will inform the scale up of SWA nationwide.

To guide implementation of the elimination of mother-to-child transmission programme within the global fast-track framework, UNICEF Swaziland, in collaboration with WHO, supported the HIV, TB and PMTCT mid-term review, the findings from which informed the development of Swaziland's national strategic plan for ending AIDS and syphilis in children 2018–2022. Technical support was also provided for finalizing HIV care and treatment guidelines, to ensure that issues of children and adolescents were adequately addressed.

UNICEF also focused on strengthening the MoH nutrition programme, in collaboration with the World Food Programme and WHO, through joint advocacy with MoH management. This led to the establishment of a nutrition unit and commitment by the UN for development of a national nutrition strategy through the provision of financial and technical support in 2018.

To strengthen public financing for children, a health sector budget brief was developed with clear recommendations, including possible savings of up to 24 per cent if alternative vaccine procurement channels (such as through UNICEF Supply Division) are explored. A presentation of the budget brief to the Government resulted in an advocacy meeting with the ministries of finance and health in which a decision was made to explore vaccine procurement through UNICEF's Supply Division in 2018.

Further, UNICEF Swaziland, in collaboration with the DPMO, supported coordination meetings for a multisectoral ECD technical working group and Swazi network for ECD, comprising over 80 organizations working in early childhood care. This led to identification of key priorities, including development of an ECD strategy. To strengthen evidence-based ECD programming, support was provided to conduct a rapid assessment of informal day care centres in Manzini, the findings of which will inform development of an ECD strategy and minimum package, especially for children aged 0-3 years. As part of advocacy and building evidence for resource mobilization for ECD, UNICEF Swaziland produced documentation of informal day care centres in Matsapha and further developed budget briefs on health and education that integrated ECD. The briefs are being used to advocate with the Government for leveraging resources for quality health services for children, particularly in the underserved regions of Lubombo and Shiselweni.

OUTPUT 2 Capacity of key government institutions to provide quality health, HIV, nutrition, ECD, WASH and birth registration services increased.

Analytical statement of progress

To strengthen institutional capacity for delivery of child health and HIV services, UNICEF Swaziland supported the MoH to train 22 EPI focal persons on cold chain management, with the result that 85 per cent of health facilities have functional electronic temperature monitoring systems. In addition, support was provided to 12 public health facilities to conduct at least 80 per cent of their integrated MNCH outreach, covering 2,237 children, with a package of preventive and curative health services, including HIV testing and ART refills (33 tested for HIV; seven received ART). In collaboration with WHO, UNICEF provided technical support to the MoH and U.S. President's Emergency Plan for AIDS Relief partners to scale up ART provision to pregnant women at 89 per cent of health facilities and to children at 85 per cent of health facilities.

To enhance the quality of services, 97 health workers were trained on quality improvement at 20 health facilities, in collaboration with the Swaziland Nazarene Health Institution, leading to implementation of over 10 quality improvement projects. Male participation in MNCH was increased through community dialogues that reached 661 females and 1,123 males (170 males

tested for HIV).

To strengthen systems for delivery of nutrition interventions, UNICEF Swaziland partnered with the National Nutrition Council and trained 90 health workers from 11 health facilities on IMAM, provided ready-to-use therapeutic food to 41 health facilities and certified five hospitals as baby-friendly. As a result, 473 children were treated for SAM, with a cure rate of more than 90 per cent. To enhance community-based systems for malnutrition prevention, 324 RHMs (5 male) were trained on community nutrition management. The RHMs reached 1,313 pregnant and lactating mothers with IYCF and health-seeking behaviour messages and screened 105,042 children for malnutrition, of whom 492 were underweight and referred for management.

To inform the scale-up of facility-based birth registration, support was provided to Raleigh Fitkin Memorial Hospital to pilot registration of births, with linkages to MoHA. This resulted in 2,332 new-borns (30 per cent of all deliveries) registered, of whom 16 per cent received birth certificates.

Significant progress was achieved in strengthening resilience in communities and schools on borehole management and rainwater harvesting in 51 communities and 78 schools. UNICEF Swaziland, in collaboration with World Vision, rehabilitated 32 water pumps, constructed six boreholes; trucked water to 78 schools, three clinics and 51 communities, and provided water treatment kits reaching 55,016 people (52 per cent female) with clean, safe water. To further strengthen resilience in communities, 191 people (64 per cent females) were trained as artisans (to manage and maintain boreholes), while 24,956 people (50 per cent female) from 42 schools and 49 communities were trained on water-harvesting techniques. Further, to improve sanitation and hygiene, 30 people were trained on community-led total sanitation, triggering eight communities to end open defecation. In addition, MHM kits were provided to 5,298 adolescent school girls, strengthening the case for school-based menstrual hygiene support.

OUTPUT 3 Capacity of parents and caregivers to provide integrated quality ECD (early stimulation, learning, safety, care and nutrition) strengthened

Analytical statement of progress

UNICEF Swaziland provided technical and financial support to strengthen the capacity of Government and partners to integrate early childhood care and education across the education, health and nutrition, WASH, and child protection sectors. Further, in collaboration with the MoET and a local NGO, Palms for Life, UNICEF Swaziland supported training on Swaziland's early learning development standards for 143 community pre-school teachers, benefitting 3,432 children; 131 caregivers from 90 neighbourhood care points, benefitting 2,895 children; and 58 care givers from community organizations. Knowledge about early childhood milestones increased from 68 per cent to 77 per cent among community pre-school teachers.

UNICEF Swaziland collaborated with a local NGO, Siphilile, to train 42 mother mentors and nine day care mentors on IYCF practices and WASH, focusing on children aged 0-3 years. Additionally, for enhanced provision of care to children in day care centres, 83 caregivers were trained on psychosocial support, first aid, early stimulation and identification of signs of abuse among children. As a result, the proportion of caregivers who know how to manage day care centres increased from 4 per cent in 2016 to 46 per cent in 2017; child stimulation (reading, singing, storytelling) increased from 38 per cent in 2016 to 72 per cent in 2017; while the proportion of caregivers who take children for outdoor play increased from 52 per cent in 2016 to 75 per cent in 2017. These caregivers reached 4,039 children in informal day care centres

with an integrated ECD package including nutrition screening, child protection, safety and early child stimulation, to facilitate achievement of their developmental milestones.

UNICEF Swaziland further supported 45 mentor mothers to conduct home visits, reaching 3,604 pregnant and lactating women with an integrated information package on antenatal care, infant and young child feeding, PMTCT, immunization information and early childhood stimulation. As a result, 10,905 were referred for birth registration, of whom 228 received birth certificates.

To strengthen responsive parenting, 1,513 parents were reached through community dialogues with ECD information. Sustainability of the ECD programme at the community level remains a challenge, since it is led by an NGO. However, UNICEF Swaziland plans to support the MoH to integrate the ECD package within the RHM programme to ensure that it becomes a routine service.

OUTPUT 4 Capacity of health and education management information systems (HMIS/EMIS) to provide timely disaggregated information improved.

Analytical statement of progress

UNICEF Swaziland focused on strengthening the management information systems, particularly capacity for health management information systems, to provide timely disaggregated information and facilitate monitoring for results. In collaboration with the MoH and Institute of Health Measurement, UNICEF Swaziland supported capacity strengthening of HMIS officers and health facility managers at 12 facilities for generating and utilizing real-time data to inform decision making for improved service delivery.

To strengthen capacity for generation of real-time data to inform programming, financial support was provided to MoH officials to attend a learning visit hosted by the Kenyan Ministry of Health. Lessons learned from the visit informed strengthening of the health management system and development of electronic action tracking tools at health facilities. Further, UNICEF Swaziland, in collaboration with African Alliance Malaria Alliance, provided technical support for the development of Swaziland's MNCH scorecard, which will provide decision makers with near real-time information on programme performance. UNICEF will continue to support the MoH to decentralize the scorecard to regions, to inform programme improvement.

OUTCOME 2 By end of 2020, adolescent girls and boys aged 10-19 years have increased protection from violence and access to quality health services and secondary education.

Analytical statement of progress

UNICEF's APLD programme aimed to ensure that adolescent girls and boys aged 10 to 19 years have increased protection from violence and access to quality health services and secondary education. Primary school attendance is nearly universal (97 per cent) and the gender parity index for primary education is greater than one. However, high repetition and attrition rates (17 per cent and 22 per cent, respectively) between grade 1 and 7 undermine the investment in free primary education. Net enrolment rates for secondary schools remained low (27 per cent), largely due to high repetition rates. Teenage pregnancy accounts for 41 per cent of drop-out from lower secondary school, and 52 per cent of upper secondary school dropout. UNICEF Swaziland and the MoET supported a study on grade repetition and its implications for Swaziland's primary school system. The findings informed the development of the 2018-2019 joint Government and UNICEF workplan to reinforce adherence to the country's repetition

policy. UNICEF Swaziland also supported the Sebenta National Institute to pilot a non-formal curriculum to provide an opportunity for school re-entry.

In collaboration with DPMO, UNICEF supported finalization and launch of the national study on the drivers of violence against children in Swaziland in 2016, and inclusion of the study's recommendations in the national strategy to end violence in Swaziland. To enhance capacity among police to effectively investigate and support prosecution of child violence cases, UNICEF supported the Royal Swaziland Police to train 35 police trainers on child-sensitive approaches to managing cases of violence against who consequently; these officers trained a further 35 police officers. Capacity to apply child-sensitive management approaches was expanded to support the DPMO's Department of Social Welfare to train 70 social workers on basic child-sensitive case management and skills in forensic report writing for child-related cases.

In addition, UNICEF Swaziland supported the Ministry of Justice and Constitutional Affairs to develop the sexual offences training manual: multisectoral approach, aimed at building the capacity of those from multiple sectors who respond to violence against children – including police, social workers, healthcare workers and prosecutors– on survivor-sensitive and child-centred management of sexual violence. The manual was used to train 80 service providers from all four regions.

While trends are showing a decline in new HIV infections, rates for adolescent girls aged 15-19 years remain high at 1.9 per cent, compared to 0.8 per cent for boys. Comprehensive HIV knowledge among adolescents remains low, at 44.5 per cent (MICS 2014). UNICEF Swaziland in collaboration with other UN agencies, PEPFAR and the Global Fund supported the Government to strengthen the HIV prevention response among adolescents to ensure access to comprehensive HIV prevention information and services. UNICEF Swaziland provided financial and technical support for rolling out the guidance and counselling curriculum at an additional 11 secondary schools. The curriculum seeks to expand the provision of age-appropriate and context-sensitive HIV and sexual reproductive health information to adolescents and young people to curb early pregnancy, HIV infection and violence against children.

Baylor College of Medicine, with technical and financial support from UNICEF Swaziland, provided psychosocial services to 425 adolescents (170 males, 204 females) living with HIV, through teen clubs. This resulted in a high viral load suppression rate of 87 per cent among this group; higher than the national average of 55 per cent. Through the same partnership 1,604 adolescents received HIV information through use of the U-Report platform.

Overall, the challenges impeding progress on this outcome relate to inadequate resources, socio-cultural barriers to sexual behaviour change, weak child protection systems and absence of real-time data to monitor progress and inform interventions. UNICEF will invest in 2018 in approaches that attempt to address these strategic bottlenecks.

OUTPUT 1 Government capacity to legislate, plan, budget for and implement prevention and response to violence, abuse, exploitation and neglect of children strengthened.

Analytical statement of progress

The UNICEF CP aims to strengthen the enabling environment for preventing violence against children and adolescents. To strengthen national policy for the prevention of and response to violence against children in schools and within the education sector, UNICEF Swaziland supported a review of the education sector policy, which incorporates the prohibition of corporal

punishment of learners in favour of positive discipline. The policy will guide future programming.

In addition, to address the high levels of violence against children in Swaziland, UNICEF Swaziland collaborated with the DPMO, DPMO Parliamentary Committee and civil society partners to strengthen national legislation for violence against children. In this regard, UNICEF Swaziland provided technical and financial support for advocacy and dialogue on two key bills: the sexual offences and domestic violence bill 2015 and the disability bill 2015. Both include provisions that comprehensively address offenses relating to violence, including against children with a disability. The sexual offences and domestic violence bill was passed by the House of Assembly and is currently being debated in the House of Senate; the disability bill is due for Parliamentary debate.

To sharpen national policy focus and priority on the prevention of and response to violence against children, UNICEF Swaziland provided financial and technical support to the DPMO to integrate recommendations of the 2016 national study on drivers of violence against children in Swaziland study into both the costed action plan for the national strategy to end violence 2017-2022 and its M&E framework. To strengthen government capacity to prevent and respond to violence against children and children living with disabilities, UNICEF Swaziland also supported the DPMO to cost the national disability action plan and develop an M&E framework for it. These instruments will guide disability programming, including programming to address violence against children with disabilities, for the next five years.

To strengthen the national violence surveillance system, UNICEF supported the DPMO to coordinate multi-sector collation, analysis and dissemination of reported cases of violence, including those against children. The 2016 national surveillance report on violence in Swaziland was published and disseminated to key national stakeholders to inform policy. To support the country to meet its international reporting obligations under the Convention of the Rights of the Child, technical assistance was provided to the DPMO to finalize and submit the periodic country report on the United Nations Convention on the Rights of the Child and the African Charter on the Rights and Welfare of the Child.

OUTPUT 2 Government and civil society capacity to identify and report child abuse, and provide appropriate care strengthened, especially for vulnerable groups.

Analytical statement of progress

UNICEF's programme aimed to strengthen child protection systems, including minimum standards for child care facilities, referral mechanisms and development and implementation of case management of violence against children, as well as capacity to identify, report, and refer child rights violations. To contribute to the national implementation and roll-out of quality and integrated multisectoral services for the response to violence against children, particularly sexual violence, UNICEF Swaziland supported the Ministry of Justice and Constitutional Affairs and the MoH to refurbish physical infrastructure for two one-stop centre sites, at Manzini's Raleigh Fitkin Memorial Hospital and Mbabane Government Hospital, which offer multisectoral support to survivors of violence. The inter-ministerial service level agreement for the centres' operation was officially approved by Cabinet, and both centres are expected to be fully operational in 2018. A communication strategy for the one-stop centres is in place to support demand creation for utilization of the services.

Additionally, to enhance police capacity to effectively investigate and support prosecution of violence against children cases, UNICEF Swaziland supported the Royal Swaziland Police

domestic violence child protection and sexual offences unit to train 35 police trainers on child-sensitive approaches to management of violence against children cases. These trainers were further supported to train 35 more police officers on child-sensitive case management. The Royal Swaziland Police developed a funded training plan, and plans are underway to incorporate child-sensitive case management approaches into the pre-service and in-service training curriculum for police officers.

UNICEF Swaziland further provided technical and financial support to the DPMO's department of social welfare, to train 70 social workers on basic child-sensitive management approaches and skills, including forensic report writing. Recognizing that children with disabilities have a heightened vulnerability to abuse and exploitation, UNICEF Swaziland collaborated with the national Federation of Organizations of Disabled Persons to enhance the federation's capacity to prevent and respond to violence against children with disabilities. The Federation received support to develop a strategic plan for 2017-2022, as did the National Association of Visually Impaired Persons. Both strategies include child protection as a priority programme focus area.

To further support Government efforts to enhance the skills of different sectors involved in preventing and responding to violence against children, UNICEF Swaziland supported the Ministry of Justice and Constitutional Affairs to develop a sexual offences training manual with a multisectoral approach. The main purpose was to ensure that all key stakeholders are capable of carrying out more survivor-sensitive management of sexual violence cases, as well to improved evidence collection at all levels, to maximize conviction rates. UNICEF Swaziland provided financial and technical support for training 90 service providers from the police, legal, health and social services sectors using the new manual.

OUTPUT 3 Safe and protective environments in schools improved.

Analytical statement of progress

The programme sought to redress gaps in services for adolescents and the promotion of their development, protection and citizenship in the area of education and quality learning. Violence in and around schools continues to impact retention and hinder the full development of children and adolescents in Swaziland. To ensure safe and protective school environments, UNICEF Swaziland supported the MoET to complete the re-installation of the toll-free line for reporting of violence in schools. The support included capacity building for the toll-free line staff; full operationalization of the line is expected in 2018.

UNICEF Swaziland, in partnership with the MoH school health department, provided financial and technical support for training 31 school health team members on Swazi sign language to break communication barriers and enhance health service provision for children with disabilities. UNICEF also supported the MoH to procure equipment for early detection of disability and trained a Government medical doctor (ear, nose and throat specialist), to enhance capacity for early detection and management of disability. Through this partnership, 15,652 learners (7,210 boys;8,442 girls), were screened for disability and other ailments, 117 with hearing impairment were referred and 13 received hearing devices, while 96 with vision impairments were referred and 41 received vision aids. UNICEF Swaziland also supported capacity building for 26 parents of children with a hearing impairment on Swazi sign language to overcome communication barriers and improve parental involvement in their children's learning processes, for improved learner academic achievement and protection

OUTPUT 4 Adolescents completion of quality education increased.

Analytical statement of progress

This programme promoted timely transitions between grades and improve retention in school by supporting better learning outcomes and teacher capacity to implement child-friendly approaches. To enhance completion of quality education, UNICEF Swaziland supported the MoET to review the education sector policy, which is awaiting Cabinet approval. Implementation of the policy will benefit approximately 342,000 learners in schools and other educational institutions.

Further, for enhanced effective coordination, UNICEF Swaziland provided financial and technical support to the MoET to convene two sector coordination meetings through the sector-wide approach initiative. The sector-wide approach forum was used for planning, information-sharing and resource leveraging for the education sector, as well as reviewing the national education training and improvement plan.

To strengthen system responses to humanitarian emergencies, especially within schools, UNICEF Swaziland supported the MoET to mitigate the impact of the El Niño-induced drought. As co-lead for the education cluster, UNICEF Swaziland supported a comprehensive education post-drought assessment in 634 schools. Informed by the assessment's results, UNICEF supported capacity-strengthening interventions for schools in 14 constituencies in Shiselweni and Lubombo regions, reaching 859 learners and 286 teachers. The support included provision of safe water to 12,084 learners (6,683 girls; 5,401 boys) from 42 schools through water trucking and provision of water-harvesting facilities. The support will continue in 2018, led by the MoET.

To enhance evidence-generation for promoting adolescents' completion of quality education, UNICEF Swaziland supported the MoET to conduct a study of out-of-school children. The findings will improve understanding of bottlenecks and barriers to education and inform the policy and programmatic response. Support was also provided to MoET to conduct a grade repetition study aimed at identifying the causes, extent and effects of repetition. The study will inform strategic interventions to address the high level of grade repetition, currently around 17 per cent, and ensure adherence to the less than 5 per cent repetition rate defined in the education sector policy.

Additionally, to ensure equitable, inclusive and gender-responsive quality education, UNICEF supported the MoET to strengthen the capacity of 85 senior ministry officials – including inspectorate and regional education officers – on inclusive education. To advance equity and provide opportunity for school re-entry to learners who drop out of primary school, UNICEF Swaziland supported the Sebenta National Institute to align its non-formal curriculum with the formal curriculum, to facilitate reintegration of out-of-school adolescents into the formal education system. A pilot of the non-formal primary education curriculum was conducted in eight centres, reaching 170 learners.

OUTPUT 5 HIV prevention, care and treatment services for adolescents strengthened.

Analytical statement of progress

This programme aimed to enhance the capacity of adolescents to adopt positive behaviours and to facilitate access to and utilization of HIV prevention, treatment and care services. UNICEF Swaziland, in partnership with two local NGOs (Lusweti Institute for Communication and

Kwakha Indvodza) supported HIV testing for 1,724 adolescents, condom distribution for 7,345 adolescents, male circumcision for 15 boys and referral for treatment of sexually transmitted infections for 25 adolescents. These results were achieved through leveraging partnerships with Swaziland's Family Life Association and PEPFAR implementing partners (Elizabeth Glaser Pediatric AIDS Foundation and Population Services International).

Through UNICEF Swaziland financial and technical support to Baylor College of Medicine, teen clubs, 425 adolescents (170 males, 204 females) living with HIV received treatment adherence support through monthly teen club discussion meetings, and maintained a viral load suppression rate of 87 per cent – higher than national average of 55 per cent. Financial support was provided to enable genotyping for 12 children and adolescents resistant to second-line ART, facilitating a transition to appropriate third-line ART drugs. Through the same partnership 1,604 adolescents received psychosocial support via U-Report-based provider response to SMS messages from adolescents. UNICEF Swaziland, in partnership with the MoH and Swaziland Nazarene Health Institution, supported 31 teen clubs with a total membership of 2,959 (60 per cent females) and covering adolescents both in and out of school, to improve their access to HIV and sexual reproductive health information and services.

In partnership with UNFPA and WHO, technical support was provided to the MoH to develop national quality improvement standards for adolescent and youth-friendly health services, which will be rolled out in 2018. Additionally, UNICEF Swaziland collaborated with Kwakha Indvodza to provide information on HIV prevention and gender-based violence to 6,966 adolescent girls and 459 males, which led to a 20 per cent increase in the number of adolescents reporting improved HIV and gender-based violence communication with parents in three targeted communities.

As part of resource leveraging to support access to equitable adolescent HIV prevention, treatment and care information and services UNICEF – in collaboration with the National Emergency Response Council on HIV and AIDS, Co-ordinating Assembly of Non-Governmental Organizations, UNFPA, WHO and UNAIDS – provided financial support and technical leadership for the development of the adolescent girls and young women component of the Government's funding request to the Global Fund for HIV, TB and Malaria. The support enabled the participation of 60 adolescent girls and young women in the development of the funding request and led to approval of US\$6 million to support programming for adolescent girls and young women from 2018 to 2021.

In addition, to promote stronger national focus on HIV prevention among adolescents, UNICEF Swaziland, jointly with other UN agencies, provided technical guidance for the development of the '100 days' national action plan for implementing the global HIV prevention roadmap 2020, adopted in Geneva in October 2017. UNICEF Swaziland will provide technical support for roadmap implementation and ensure that it informs the development of the national strategic framework for HIV and AIDS 2018-2022.

OUTPUT 6 Capacity of primary and secondary educational institutions to disseminate comprehensive knowledge on HIV and AIDS strengthened.

Analytical statement of progress

The programme aimed to influence behaviour change among adolescents by mainstreaming HIV and AIDS education in primary and secondary schools, including through the roll-out of the comprehensive sex education and HIV curriculum at secondary schools. UNICEF Swaziland

supported MoET to rollout life skills-based sex education at 11 secondary schools, bringing to a total of 122 the number of secondary schools providing comprehensive HIV and AIDS, sexual reproductive health and gender-based violence knowledge to adolescents. In partnership with UNESCO, UNFPA and MoET, 16 head teachers and 75 teachers from 11 secondary schools were trained to rollout life skills education curriculum, reaching an estimated 32,531 learners. Programme monitoring and assessment of the effectiveness of implementation of the life skills education curriculum is ongoing.

Integration of life skills education in the primary school curriculum was constrained by slow process toward development of the outcomes-based primary school curriculum. For further strengthening of institutions, UNICEF Swaziland will prioritize support for integrating life skills education in pre-service teacher training and in the primary school curriculum in 2018.

To generate parental support for school-based life skills education, UNICEF Swaziland provided financial support to the MoET and local NGO Super Buddies Club, to orient 389 parents on life skills education and their role in addressing adolescent development and sexuality.

OUTPUT 7 Perceptions, attitudes and knowledge on key harmful social norms improved.

Analytical statement of progress

The programme aimed to improve perceptions, attitudes and knowledge of key harmful social norms. UNICEF Swaziland provided financial and technical support to NATICC to involve communities in addressing the harmful social norms identified in the national study on the drivers of violence against children in Swaziland (2016), reaching 859 people in Shiselweni Region. Support was also provided for use of the child and family conferencing approach, leading to identification of 108 homesteads at risk of violence against children and 141 children at high risk of violence. To minimize risks in households, 54 of 108 identified homesteads now have care plans that address potential abuse of children, which are monitored by 20 trained community volunteers.

Using available data on the extent and nature of violence, UNICEF Swaziland also supported the development of a community engagement strategy to support partners' delivery of effective and sustainable results in social and behaviour change communication in key areas such as violence against children and women and adolescent HIV prevention. Through a UNICEF partnership with World Vision Swaziland, 689 adults from all four regions and 31 religious leaders were mobilized and engaged on addressing norms harmful to children. Further, four traditional chief champions were identified and 15 media practitioners from eight media companies were trained on child-sensitive reporting.

To promote gender-responsive HIV prevention, UNICEF Swaziland partnered with the Swaziland Olympic and Commonwealth Games, DPMO and MoET to support the Sports for Development Initiative, which aimed at providing HIV prevention information through sports. This initiative was implemented within the context of the Gold Coast 2018 Queens Baton Relay, reaching 909 children through schools.

OUTCOME 3 UNICEF staff and partners are provided tools, guidance and resources for effective communication on child rights issues with stakeholders

Analytical statement of progress

UNICEF Swaziland continued to improve systems and procedures to ensure efficient, prudent and effective management of its financial resources. The CMT provided monitoring and oversight on budget and internal controls. The office monitored expenditure of all expiring grants in 2017, with 100 per cent utilization of grants before expiration. The CMT monitored the progress and status of key performance indicators monthly through UNICEF Insight dashboards and took actions to improve performance. In addition, weekly key management indicators were shared to all staff to allow timely follow-up. Major initiatives undertaken by the CMT included: strengthening HACT implementation, establishing tools for analysing HACT reports (micro-assessments, spot-checks and programme visits), partnerships and DCT monitoring. The CMT met monthly, to ensure oversight key performance indicators for programme and operations.

In 2017 UNICEF Swaziland's annual management priorities covered four areas: emergency preparedness and response, efficient programme implementation and management, efficient and effective office management and support to staff welfare and human resource management. UNICEF completed recruitment of four fixed-term positions, bringing the office to full staff capacity and facilitating achievement of results. UNICEF Swaziland closed all 2016 audit recommendations within the set timeframe. To ensure sustainability of the closed audit recommendations, the actions were monitored monthly during CMT meetings. In addition, the ERM matrix was updated in response to audit recommendation and reviewed quarterly. To strengthen business continuity preparedness, the business continuity plan was updated in November to include the BNLS hub. To ensure continuous collaboration between management and the staff association, joint consultative committee meetings were held quarterly and recommendations shared with the CMT and staff. UNICEF Swaziland management, in collaboration with local staff association, continued to address issues arising from the 2017 global staff survey. An action plan was developed and monitored by both management and the local staff association.

All donor reports were submitted on a timely basis. To ensure that the quality of donor reporting met organizational standards, UNICEF Swaziland used its locally developed standard operations procedures for quality assurance of donor reports. The streamlining of this tool helped to ensure high-quality donor reporting, and included donor feedback forms.

To further ensuring efficiency and accountability, UNICEF Swaziland monitored funds utilization weekly, achieving a 100 per cent utilization rate at year-end. However, challenges with DCT (e.g., lengthy turnaround times of Government systems for releasing funds for implementation) were experienced and addressed through discussions with the Accountant General. UNICEF Swaziland continued to enhance the efficiency and effectiveness of ICT systems in line with UNICEF global standards. Within the context of Delivering as One, UNICEF Swaziland chaired the UN operations management team and ICT working group, with a focus on UN premises and common services. This led to efficiency gains and cost savings through utilization of one internet fibre for all UN offices.

OUTPUT 1 Governance and Systems

Analytical statement of progress

UNICEF Swaziland established statutory office committees to monitor and manage office priorities in line with the 2017 annual management plan, and committee members were oriented on the terms of reference. Statutory committees met as required and submitted recommendations to the CMT for action. To ensure appropriate delegation and segregation of

duties, the table of authority was updated to include the BNLS hub and segregation of duties in VISION. The table of authority was shared with all responsible officers and compliance was monitored by senior management. To ensure compliance with UNICEF rules and regulations, staff members were oriented on updated global UNICEF procedures. Standard operating procedures, split functions and service-level agreements were developed and implemented, in alignment with BNLS hub operationalization. The BCP was reviewed and updated taking into consideration the establishment of the BNLS Hub.

The 2017 annual management plan was reviewed at mid- and end-year, and achieved over 90 per cent of the planned results. Management priorities for 2018 were identified based on lessons learned and the changing operating environment in Swaziland. One of the key priority areas to be strengthened in 2018 is DCT management.

The CMT monitored implementation of the 2016 audit action plan and UNICEF Swaziland closed implementation of all audit recommendations within four months. After closing the audit recommendations, tools implemented in response to the recommendations were monitored for sustainability. UNICEF Swaziland also centralized monitoring of the implementation of audit recommendations and sustainability by the CMT. The ERM was reviewed in response to the closure of the audit recommendation; emerging issues were addressed and monitored with quarterly updates to the CMT.

For enhanced staff welfare, UNICEF Swaziland elected a new staff association executive and developed a work plan implemented and monitored by all staff. The staff association executive, in partnership with senior management, led the review of 2017 global staff survey results and developed an action plan jointly with all staff. Implementation of the plan is ongoing and served to inform development of the 2018 staff association work plan. The office worked with staff support structures (peer support volunteer, respectful workplace advisor and caring for us) to address staff welfare issues.

OUTPUT 2 Financial Resources and Stewardship

Analytical statement of progress

UNICEF Swaziland continued to improve systems and procedures to ensure efficient, prudent and effective management of financial resources. It monitored the status of key management indicators through the Insight dashboards weekly. This led to 100 per cent utilization of grants before expiration, 100 per cent utilization of BMA, OR and ORE and 91 per cent utilization of RR by the end of December 2017. The establishment of the BNLS hub contributed to UNICEF Swaziland's efficiency and effectiveness on financial management in the areas of bank reconciliation, bank optimization and payment processes. As a result, all bank reconciliations were completed on time, although banking optimization was identified for further improvement. In response, a new tool was introduced and will be implemented in 2018.

In line with year-end requirements and in preparation for the office move to new UN premises, a physical inventory was conducted and financial support from regional contingency envelope was provided to UNICEF Swaziland in support of the move. Furthermore, an internal schedule was developed to facilitate proper and timely year-end financial closure and review of accounts.

OUTPUT 3 Implementation of the HACT Plan

Analytical statement of progress

UNICEF Swaziland completed recruitment of four fixed-term positions bringing the office to full staff capacity. The UNICEF global initiative on better talent management was used to attract, hire, support and empower staff members. Despite the achievement in recruitment, delays were experienced due to limited human resource capacity and reliance on the BNLS hub. The office complement comprises: Representative's office (3), programme effectiveness section (3), adolescent participation learning and development section (4) young child survival and development section (5) and operations section (8). Efforts to pursue gender and geographic diversity continued to be both a priority and a challenge. The international professionals category stands at 75 per cent female and 25 per cent male, while the national officer category is 63 per cent female and 37 per cent male.

In line with the transition to the BNLS operations hub, the operations staffing structure was reorganized to respond to the BNLS review change management plan developed in collaboration with the local staff association. The office continued to encourage staff to participate in stretch assignment opportunities. Two local general service staff members benefitted from the stretch assignment programme. Four staff members were granted continuous contracts.

UNICEF Swaziland prioritized staff development in the 2017 annual management plan and developed a plan that was monitored quarterly by the staff development committee and CMT. This led to 100 per cent achievement of planned group trainings, 70 per cent for individual face-to-face training and 70 per cent for online training. Orientation on ethics was also conducted for all staff during UNICEF's ethics leadership month. Knowledge-sharing initiatives conducted through all-staff meetings, programme coordination meetings and brown-bag lunches provided opportunities to expand staff knowledge on key human resources and operational policies, programme implementation and internal work processes.

ACHIEVE performance planning was closely monitored by the CMT, resulting in UNICEF Swaziland attaining a completion rate of 100 per cent in the planning phase. Performance discussions between supervisors and supervisees continued throughout the year. The CMT focused on performance management, ensuring a clear connection between UNICEF Swaziland CP results and individual outputs and accountabilities.

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OUTCOME 4 Country program is efficiently designed, coordinated, managed and supported to meet quality programming standards in achieving results for children.

Analytical statement of progress

UNICEF Swaziland successfully implemented the second year of the CP, underpinned by optimism and building on the gains of 2017, with the official end of the El Niño drought. UNICEF Swaziland supported programme interventions with a strong resource mobilization strategy, creation of partnerships for leveraging resources as well as evidence-generation for effective, impactful programme implementation. UNICEF Swaziland also continued strengthening its engagement with existing partners and explored opportunities to engage in new partnerships, focusing specifically on strategic partnerships to support advocacy work related to budget leveraging and allocation.

The programme focused on maximizing efficiency in programming by improving planning, coordination and evidence-generation as well as cross-sectoral programming and implementation. This was achieved through training of staff in HACT, regular updating of planning tools, weekly monitoring of key performance indicators and alignment of rolling work plans for planning and reporting on the UN development assistance framework. To ensure continuous monitoring of programme results, monthly, mid-year and annual reviews were conducted in collaboration with implementing partners.

To increase national knowledge about multiple deprivations and child poverty in Swaziland, UNICEF, in collaboration with the Ministry of Economic Planning and Development (MoEPD), conducted a non-monetary child poverty study, which provided information on child poverty based on deprivation of basic needs. The preliminary findings indicated that 57.2 per cent of all children aged 0-17 experience multiple deprivations, the majority of whom are children under five years of age. The findings also highlighted greater deprivations among children living in rural areas, with Shiselweni region facing the highest

proportion of poverty. The report will generate debate around child poverty and influence change in the approach to child poverty eradication with a focus on leaving no child behind. The full report will be finalized in 2018, when Swaziland will be developing its new national development strategy, social protection policy, and localizing SDG 1 baseline and targets.

In collaboration with the MoEPD, budget briefs for key social sectors (health, education and social protection) were developed and used to strengthen evidence to inform advocacy for increased resource allocation for children and adolescents and influence the prioritization of children in 2018-2019 national budget allocations.

Gender mainstreaming was strategically embedded in UNICEF Swaziland's sectoral initiatives on WASH, health and nutrition, education and child protection. To further prioritize UNICEF's work on gender, a rapid gender programmatic review was undertaken to identify key entry points and interventions for strengthening gender programming within the CP. This was aligned to UNICEF's Gender Action Plan 2.0 and the SP. The review identified key priorities, such as promoting adolescent girls' nutrition, pregnancy care and prevention from HIV and AIDS as well as addressing sexual abuse and physical violence.

Support for the planning and coordination of humanitarian assistance facilitated emergency and resilience interventions into regular programming. UNICEF Swaziland successfully mobilized resources for the delivery of an integrated humanitarian response to drought-affected children and women. With support from the UNICEF Regional Office, UNICEF Swaziland developed a 2018 emergency preparedness plan, which informed prioritization of interventions and resource mobilization. This led to strengthened coordination and response by the education and WASH sectors, co-led by UNICEF Swaziland and the Government.

OUTPUT 1 UNICEF staff and partners are provided guidance, tools and resources to effectively design and manage programmes

Analytical statement of progress

The programme aimed to strengthen programme design, coordination and management through provision of tools and resources to guide staff and partners for effective delivery of results for children. To facilitate achievement of results for children, the 2016-2017 work plan was reviewed and endorsed by the Government. Progress on implementation of the plan was monitored through mid-year and annual review meetings in collaboration with Government and partners to identify and address bottlenecks hindering achievement of results. To strengthen the focus on selected key results areas, the 2017 annual management plan was developed and monitored quarterly by the CMT, leading to prompt action on areas requiring attention.

To monitor internal programme management, key performance indicators – including fund utilization, DCTs, HACT assurance plan, partnerships and donor reporting – were monitored on a weekly basis. This led to timely utilization and submission of all donor reports. To ensure accountability to donors and improved quality of reports, donor feedback was solicited through feedback forms and exit meetings. In addition, monthly programme coordination meetings involving all relevant UNICEF staff were conducted, which led to improved programme integration and efficiencies in resource utilization.

Programme partnerships and accountability were strengthened in 2017 through the use of standard operating procedures for programme cooperation agreements, small-scale funding

agreements and donor reporting. To support implementation of the work plan, eight programme cooperation agreements and 11 small-scale funding agreements were signed with civil society organizations, contributing to accelerated achievement of results for children.

Efforts to improve financial risk management and programme monitoring included HACT training and strengthening capacity to prepare financial and narrative reports. UNICEF Swaziland trained 51 Government partners and 17 UNICEF staff on HACT procedures and assurance tools. This led to quality implementation of HACT assurance activities and increased accountability from partners. As a part of HACT training, tools for end-user monitoring were introduced internally.

OUTPUT 2 UNICEF staff and partners are provided tools, guidance and resources for effective communication on child rights issues with stakeholders

Analytical statement of progress

The programme sought to provide guidance, tools and resources for effective communication on child rights with stakeholders. To influence Government focus on issues of children, UNICEF Swaziland, in collaboration with the Prime Minister's Office, established an advocacy forum for strategic engagement with Government principal secretaries using a child scorecard generated from government statistics. The forum generated interest from all ministries to further engage on children's issues and recommended similar engagement at Cabinet level.

In line with UNICEF's global communication and public advocacy initiative #EndViolence, a six-month campaign on promotion and protection of children's rights was conducted in collaboration with DPMO and civil society. The campaign reached 700 parents, 72 teachers, 30 faith leaders, and 3,000 children; four chiefs were nominated as champions for children and support to their chiefdoms was provided to establish mechanisms for reporting and referrals. This engagement will continue in 2018 with the establishment of a chiefdom scorecard for children. The campaign also provided an opportunity to lobby for passage of the sexual offences and domestic violence, and disability bills, which await Senate deliberation.

The commemoration of World Prematurity Day heightened the focus on neonatal deaths in the country, and led to a firm commitment from the Minister of Health to prioritize reduction of neonatal deaths and improve care during the first 1,000 days. Commitments by the private sector and UN agencies were also made to support the establishment of a neonatal intensive care unit at the national referral hospital. As part of advocacy for International Day of the Girl Child, UNICEF Swaziland, in collaboration with the DPMO, UNFPA and civil society partners supported dialogues on preventing and reporting cases of violence and abuse in a community in Lubombo Region with high prevalence of violence and abuse of children, particularly girls. These dialogues presented an opportunity to engage children, adolescents, parents, teachers and community leaders on solutions for addressing violence against children.

To further support efforts to sensitize children and adolescents on the SDGs, UNICEF Swaziland supported the 'World's Largest Lesson' initiative. Forty-four teachers from 30 schools were sensitized on SDG 2 (Zero hunger) and undertook an online course on teaching sustainable goals. These teachers sensitized 7,520 learners at the 30 schools.

As part of resource mobilization, UNICEF Swaziland hosted the United Kingdom National committee and UNICEF Goodwill Ambassador, Nicole Scherzinger. A film on maternal and neonatal health in Swaziland featuring the Goodwill Ambassador was produced and will be used

as an appeal for Soccer Aid 2018. In addition, multi-media materials including videos and photographs on ECD, WASH, inclusive education and the use of innovation to improve data use in health facilities were produced for resource mobilization and advocacy.

OUTPUT 3 Effective planning and monitoring of country programme results and quality disaggregated and gender-sensitive data for evidence- based decisions available.

Analytical statement of progress

Evidence generation for policy advocacy and informing strategic programme interventions is a key priority of UNICEF Swaziland's CP. To increase national knowledge about multiple deprivations and child poverty in Swaziland, UNICEF Swaziland collaborated with the MoEPD to conduct a non-monetary child poverty study, which provides information on child poverty based on deprivation of basic needs. The preliminary findings indicated that 57.2 per cent of all children (0-17 years) experience multiple deprivations, mainly children under five years. The findings also highlighted greater deprivation among children living in rural areas; Shiselweni Region was found to be facing the highest proportion of poverty. The findings will be used to develop equity profiles in the education, protection, nutrition sectors and will further generate debate around child poverty aimed at influencing change in the approach to child poverty eradication. The full report will be finalized in 2018.

Evidence-generation to inform policies, programmes and accountabilities was further facilitated through development of a plan for research impact monitoring and evaluation to guide studies, surveys and evaluations. UNICEF Swaziland's research and evaluation committee provided guidance and quality assurance for all planned research, surveys and evaluations.

Critical evidence generated to inform policy advocacy comprised: the drivers of violence against children study, which broadened understanding of the drivers and manifestations of violence and informed Swaziland's national strategy on violence 2017–2020; rapid assessment of informal day care centres in Manzini, which will inform the development of ECD strategy, standards and minimum package for day care centres; and finalization of an evaluation of the process, impact, efficiency and effectiveness of the Swaziland child friendly schools (*Inqaba*) initiative, to inform scale-up to secondary schools.

To strengthen evidence to inform advocacy for increased resources for children, a fiscal space analysis was conducted and budget briefs developed, which provided analytical underpinnings for advocacy on more efficient spending in the education, health and social protection sectors. Additionally, an open budget survey was conducted by the international budget partnership to support the Government to increase the availability and quality of budget information included in the public domain. A political economy analysis was also conducted, identifying key entry points for advocacy efforts in public financial process. This is part of UNICEF's objective to leverage additional domestic resources for children and adolescents and inform 2018-2019 national budget discussions.

With technical support from Regional Office, UNICEF Swaziland undertook a review of its response to the El Niño-induced drought, which served to inform development of the office's emergency preparedness plan for 2018. In partnership with World Vision, an evaluation of the WASH emergency response in Swaziland was conducted and the report shared with partners. The findings will be used to inform the 2018 emergency response plan

OUTPUT 4 National capacity to develop an HIV- and child-sensitive social protection policy framework and action plan strengthened.

Analytical statement of progress

The programme focussed on strengthening national and subnational capacities to deliver effective HIV-sensitive social protection programmes with linkages to key sectors such as health, education and child protection. This work resulted in a fully budgeted national social protection programme benefiting the most vulnerable children. To increase national knowledge about non-monetary child poverty in Swaziland, UNICEF supported the MoEPD to implement a non-monetary child poverty study, introducing a multidimensional definition and operational measure of child poverty, based upon deprivation of basic needs. The report will generate debate around child poverty and influence change in the approach to child poverty eradication toward leaving no child behind. UNICEF Swaziland also collaborated with the MoEPD on budget analysis and developed budget briefs for key child-sensitive social sectors, including health, education, and social protection. The budget briefs informed advocacy with technical and finance officials from key sector ministries and permanent secretaries for increased allocation and more efficient spending of resources for children. UNICEF Swaziland also partnered with the Ministries of Finance, and Economic and Planning to conduct a fiscal space analysis. The results of the fiscal space analysis will be used by the Ministry to improve resource allocations to social sectors affecting children, with a focus on social protection, education and health. A political economy analysis was also completed in 2017, to identify key entry points and strategies for more effective engagement in and influence on public financial processes, particularly 2018 national budget sessions. The document will be used by UNICEF Swaziland to shape future advocacy efforts.

Although plans had been made to draft a social protection policy by the end of 2017, limited coordination and leadership led to delays in the finalization of the recruitment process for technical assistance by UN agencies. Participatory development of the social protection policy, in collaboration with the DPMO's department of social welfare will be prioritized in 2018 in partnership with the World Food Programme, UNDP and European Union. To support greater integration and closer linkages between cash transfers and other sectors, UNICEF Swaziland supported a South-South learning visit to Zimbabwe by key officers from the Department of Social Welfare to increase their knowledge about social protection cash plus care, as well as protection linkages for children and adolescents. The support is closely aligned to the ongoing work of the Department of Social Welfare, and increased their understanding of integrated case management systems. The lessons learned will inform the development of the Swaziland case management system, which will be supported by UNICEF, the European Union and 4Children.

OUTPUT 5 Strategies to address cross cutting issues related to child rights are developed and applied, such as DRR and operational support for delivery of programme results.

Analytical statement of progress

The programme sought to nurture strategic partnerships to increase the momentum around child rights in Swaziland. In collaboration with the MoH's health promotion unit and civil society organizations, UNICEF Swaziland supported development of a community engagement strategy to support the CP. The strategy is intended to support partners to deliver effective, efficient and sustainable results through social and behaviour-change communication. As part of strategy development, 40 participants from civil society and Government were trained on human rights-based approaches to C4D. A national task force to oversee implementation of C4D initiatives was established. The strategy will be implemented in 2018, and will enable behaviour-change

approaches to be mainstreamed into the work of Government and NGOs at all levels.

UNICEF Swaziland continued to support the National Disaster Management Agency humanitarian response, with a focus on recovery and resilience-building in drought-affected regions of Shiselweni and Lubombo. Significant progress was achieved in strengthening coordination mechanisms, through regular sector meetings during the response. To strengthen coordination of the emergency response, UNICEF Swaziland co-led the WASH and education clusters and participated in the health and nutrition cluster. In partnership with the MoH, Ministry of Natural Resources and Energy, World Vision and Red Cross Swaziland, capacity for WASH and nutrition was enhanced and access to life-saving interventions reached 55,016 people with safe water and 105,042 children with nutrition interventions. In 2018 UNICEF Swaziland will continue to focus on strengthening national systems to build resilience among drought-affected people to ensure that development gains are sustained during emergencies.

To increase UNICEF staff capacity on emergency preparedness and planning, technical support was provided by the UNICEF Regional Office to conduct a lessons learned review of UNICEF Swaziland's response to the El Niño drought, to inform the 2018 emergency preparedness plan, in line with new UNICEF global guidance. All emergency management team staff members were trained in the new preparedness guidance. UNICEF Swaziland further updated its early warning/early action plan in line with the country's changing emergency context.

Document center

Evaluation and research

Title	Sequence Number	Type of Report
Budget briefs	2017/008	Survey
Comprehensive health survey	2017/007	Survey
Country programme document	2017/006	IMEP
Situation analysis	2017/005	SitAn
Drivers of violence	2017/004	Study
WASH emergency response in Swaziland	2017/003	Review
WASH emergency response in Swaziland	2017/002	Review
Evaluation of the Swaziland child-friendly schools programme	2017/001	Evaluation

Other publications

Title
2017 /2018 Budget Briefs (Overall budget, education, health, social protection)
Communication for development report: Five key lessons learnt during drought emergency response 2016 /2017

Lessons learned

Document Type/Category	Title
Lesson Learned	Scaling up birth registration among children under 5 years, piloting a health facility based platform : the case of Raleigh Fitkin Memorial Hospital

