

# A Gender Assessment of Social Assistance in the Kingdom of Eswatini

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Gender-Responsive and Age-Sensitive Social Assistance in Eswatini

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## ABBREVIATIONS AND ACRONYMS

<b>ADA</b>	Africa Disability Alliance
<b>AIDS</b>	Acquired Immunodeficiency Syndrome
<b>CBT</b>	Community-Based Targeting
<b>CBTs</b>	Cash-Based Transfers
<b>CEDAW</b>	Convention for the Elimination of All Forms of Discrimination Against Women
<b>CMIS</b>	Client Management Information System
<b>COVID-19</b>	Coronavirus Disease 2019
<b>CPIMS+</b>	Child Protection Information Management System
<b>CRC</b>	Convention on the Rights of the Child
<b>CRPD</b>	Convention on the Rights of Persons with Disabilities
<b>CSG</b>	Child Support Grant
<b>CSOs</b>	Civil Society Organisations
<b>DG</b>	Disability Grant
<b>DPMO</b>	Deputy Prime Minister's Office
<b>DRC</b>	Democratic Republic of the Congo
<b>DSA</b>	Department of Social Affairs
<b>DSW</b>	Department of Social Welfare
<b>ECCD</b>	Early Childhood Care and Development
<b>ENSSB</b>	National Basic Social Security Strategy
<b>ESSP</b>	Education Sector Strategic Plan
<b>EU</b>	European Union
<b>EVAC</b>	Eswatini Vulnerability Assessment Committee
<b>FBOs</b>	Faith-Based Organizations
<b>FGD</b>	Focus Group Discussion
<b>GALS</b>	Gender Action Learning System
<b>GBV</b>	Gender-Based Violence
<b>GDP</b>	Gross Domestic Product
<b>GGGI</b>	Global Gender Gap Index
<b>GGGI</b>	Global Green Growth Institute
<b>GGI</b>	Global Gender Indexes
<b>GII</b>	Gender Inequality Index

<b>GoKE</b>	Government of the Kingdom of Eswatini
<b>GPS</b>	Gender Progress Score
<b>GRASSP</b>	Gender-Responsive and Age-Sensitive Social Protection
<b>HGSF</b>	Home Grown School Feeding
<b>HIV</b>	Human Immunodeficiency Virus
<b>IFAD</b>	International Fund for Agricultural Development
<b>IMF</b>	International Monetary Fund
<b>IMS</b>	Information Management System
<b>INGO</b>	International Non-Governmental Organizations
<b>IPV</b>	Intimate Partner Violence
<b>JCP</b>	Junior Caregiver Program
<b>JSR</b>	Joint Sector Reviews
<b>KII</b>	Key Informant Interview
<b>LEG</b>	Local Education Group
<b>LGBTQI+</b>	Lesbian, Gay, Bisexual, Transgender, Queer, Intersex +
<b>LMIC</b>	Lower-Middle-Income Countries
<b>MICS</b>	Multiple Indicator Cluster Survey
<b>MIS</b>	Management Information System
<b>MoET</b>	Ministry of Education and Training
<b>MoMo</b>	Mobile Money
<b>MP</b>	Member of Parliament
<b>MTAD</b>	Ministry of Tinkhundla Administration and Development
<b>MZN</b>	Metical
<b>NCP</b>	Neighbourhood Care Points
<b>NDMA</b>	National Disaster Management Agency
<b>NDPA</b>	National Disability Plan of Action
<b>NGO</b>	Non-Governmental Organizations
<b>NSEVE</b>	National Strategy to End Violence in Eswatini
<b>NSAP</b>	National Social Assistance Policy
<b>NSPSP</b>	National Social Protection Strategic Plan
<b>NSSP</b>	National Social Security Policy
<b>NSSV</b>	National Surveillance System Report
<b>OAG</b>	Office of the Auditor-General
<b>OPG</b>	Older Persons Grant
<b>OVC</b>	Orphans and Vulnerable Children

<b>PEA</b>	Political Economy Analysis
<b>PSSB</b>	Basic Social Subsidy Program
<b>SADC</b>	Southern African Development Community
<b>SASSA</b>	South African Social Security Agency
<b>SBC</b>	Social Behaviour Change
<b>SDG</b>	Sustainable Development Goal
<b>SFP</b>	School Feeding Programme
<b>SHIES</b>	Swaziland Household Income and Expenditure Survey
<b>SPF</b>	Social Protection Floor
<b>SRH</b>	Sexual and Reproductive Health
<b>SRSP</b>	Shock Responsive Social Protection
<b>SSA</b>	Sub-Saharan Africa
<b>STAAR</b>	Social Protection Technical Assistance, Advice and Resources
<b>SWAGAA</b>	Swaziland Action Group Against Abuse
<b>UN Women</b>	United Nations Entity for Gender Equality and the Empowerment of Women
<b>UNAIDS</b>	The Joint United Nations Programme on HIV and AIDS
<b>UNFPA</b>	United Nations Population Fund
<b>UNICEF</b>	United Nations Children’s Fund
<b>VAC</b>	Violence Against Children
<b>VUP</b>	Vision 2020 Umrenge Programme
<b>WFP</b>	World Food Programme

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## 1. INTRODUCTION

In Eswatini, deeply rooted gender inequalities intersect with poverty to disproportionately disadvantage women and girls, limiting their opportunities and magnifying vulnerabilities throughout their lives. While social assistance programmes aim to mitigate these hardships, this study reveals significant gaps and blind spots, particularly regarding gender responsiveness and age sensitivity. Entrenched cultural norms, insufficient policy coherence, and inadequately funded and implemented programmes prevent social assistance from reaching its full potential to empower women and girls and promote genuine equity. Through comprehensive analysis and stakeholder insights, this report highlights key areas for reform and outlines clear, practical steps toward a more inclusive and transformative social assistance system that genuinely addresses the gendered realities of poverty in Eswatini.

The aims and objectives of this exercise are to analyse gendered risks and vulnerabilities that emerge across the life course to determine the need for social assistance. The first part of the review, Section A: Key Principles and Global/Regional Evidence, sets out key definitions of the Gender-Responsive and Age-Sensitive Social Protection (GRASSP) and an overview of the latest evidence on effective practice, with a particular focus on high-quality evidence from the region, and examples that are most relevant to Eswatini's context (e.g. small Lower-Middle-Income Countries (LMIC) in Sub-Saharan Africa (SSA)).

The second and main part of this review, Section B: Gender Assessment, focuses on the current situation within Eswatini. It seeks to explore and understand Eswatini's socio-cultural dynamics, especially those driving the subordination of women and girls, poverty and deprivation driven by structural inequalities in general, and the bi-directional relationship between poverty and deprivation, and gender inequality and injustice in particular. It also assesses existing national social assistance schemes in Eswatini to identify gender gaps in the current social assistance framework, focusing on gaps in coverage, adequacy, and equity. Policy coherence within the social protection sector, as well as across other relevant policies (particularly on violence and gender), is reviewed, particularly with respect to the shared level of ambition and stated intentions for action on gender equality.

Finally, Section C: Discussion, Conclusion and Recommendations draws together the observations drawn from relevant evidence and analysis of the current situation in Eswatini. It provides broad recommendations for strengthening the gender-responsiveness and age-sensitivity of social assistance policies, programmes, and systems. This will inform the short-, medium-, and long-term steps (system-wide and programme-specific) recommended within the guidance and roadmap to be developed for strengthening gender-responsive and age-sensitive social assistance. The Government of the Kingdom of Eswatini (GoKE) and their strategic and implementation partners will develop this for consideration and implementation.

## 2. METHODOLOGY

The methodology of this Gender Assessment comprises primary research (key informant interviews (KIIs), focus group interviews and workshop consultations) and secondary research (literature review). Section A: Key Principles and Global/Regional Evidence is mainly informed by the secondary research, although the interviews have supplemented it by accessing and validating grey literature with key informants. Section B: Gender Assessment has been informed by both primary and secondary data; both have fed into the overall situation analysis, and preliminary findings were tested and explored through stakeholder consultation. Section C: Discussion, Conclusion and Recommendations is the culmination of both processes; the gaps and opportunities identified through primary and secondary research have been considered through the lens of UNICEF's Gender-Responsive and Age-Sensitive Social Protection (GRASSP) framework. Their viability will be further

considered and validated before feeding into the final guidance and roadmap to be produced through this assignment.

**Primary research:** The field research consisted of interviews and focus groups with a sample of primary and secondary stakeholders.

The aims of the field research were to:

- » Explore and deepen our understanding of Eswatini’s socio-cultural dynamics, particularly those driving the subordination of women and the disproportionate impact of Gender-Based Violence (GBV) and Violence Against Children (VAC) on women and girls;
- » Understand the different gendered risks and vulnerabilities emerging across the life course for people in Eswatini;
- » Understand the current state of affairs in Eswatini with respect to the need for, and impacts of, social assistance across the life course, and identify how well current systems and programmes are (or are not) supporting different groups of citizens – particularly women and girls, and those facing specific life-cycle risks;
- » Understand how social assistance programmes are being implemented on the ground and identify how design principles and guidelines correspond to common practice;
- » Investigate the flexibility and adequacy of current systems to respond to exogenous shocks, with particular reference to support for groups most in need of assistance;
- » Understand the capacities and weaknesses of systems and institutions delivering social assistance, particularly with respect to services and programmes for women and girls.

The analytical methodology, including an overview of the qualitative analytical framework used, is detailed in Annex 1 of this report.

Where relevant, this report also draws from insights from a stakeholder workshop held in November 2024. The workshop included a participatory assessment of programmes and policies in Eswatini and gathered stakeholders’ insights on the drivers of poverty and gender inequality and effective interventions to reduce and mitigate their impacts.

**Secondary research:** To gather information for this report, we began by identifying key academic databases and journals specialising in development studies, social sciences, and health in LMICs; this process was started in the preliminary literature review in the inception report. This comprehensive review sought to build on the preliminary literature review in the inception report, widening the search terms for published literature and deepening the analysis of social assistance programmes in Eswatini through further gathering of grey literature and operational materials from interviewees to validate and update information on how the programmes are operating in practice, including gaining access to internal reviews and evaluations where possible.

The literature review was also expanded to examine gender-responsive and age-sensitive social assistance in other countries. The focus was primarily on (a) lessons from countries directly comparable to Eswatini (SSA, small population, LMIC), including grey literature and (b) global lessons from reviews of high-quality literature (systematic reviews). The literature was interrogated for ways of addressing Eswatini’s specific challenges and opportunities – for example, looking at how other countries have leveraged the sorts of programmes Eswatini already has in place in order to maximise gender responsiveness and age sensitivity. Where possible, reviewing was restricted to literature from the last five years. Still, in some cases (with respect to Eswatini-specific information), older literature was considered due to a lack of recent data.

**Limitations of the methodology:** There were some constraints to the initially planned methodology, which have limited the depth of the analysis this review could undertake and which are reflected in the recommendations. While policy-level documents were readily available and up-to-date, programme documentation was almost completely absent. The research team could not access any comprehensive design documentation for the social assistance programmes under review, making

inferences about design intent much more challenging and, equally, making assessments of implementation fidelity based on qualitative assessments and judgements rather than on the basis of any solid parameters. No monitoring data was available on any of the programmes. Only the School Feeding Programme (SFP) was subject to a relatively recent evaluation due to external (World Food Programme (WFP)) support for the programme. Other in-depth studies were also available (e.g. diagnostic studies on the Disability Grant (DG) and Orphans and Vulnerable Children (OVC) Education Grant) but only partial in terms of their assessment. These limitations are reflected in the recommendations section.

## SECTION A: KEY PRINCIPLES AND GLOBAL/ REGIONAL EVIDENCE

### 3. GENDER-RESPONSIVE AND AGE-SENSITIVE SOCIAL ASSISTANCE: KEY CONCEPTS

Poverty and deprivation are inherently gendered, leading to distinct outcomes for individuals based on their gender. These outcomes are further influenced by evolving risks and vulnerabilities across different stages of life. The GRASSP framework, developed by UNICEF, recognises these complexities and explores how social protection systems and programs can address gendered risks across the lifecycle. The framework provides a diagnostic tool for assessing the extent to which social protection systems and programs are integrating gender considerations and whether they are designed to advance and can deliver gender equality.

GRASSP approaches ultimately aim to improve the effectiveness of all social protection systems for all stakeholders, delivering greater impacts on poverty for all. Gender equality is both an impact in its own right and a very significant contributor to poverty reduction, and social protection systems can have powerful effects in advancing both.

The impacts and outcomes sought by GRASSP are summarised in Figure 1 below.

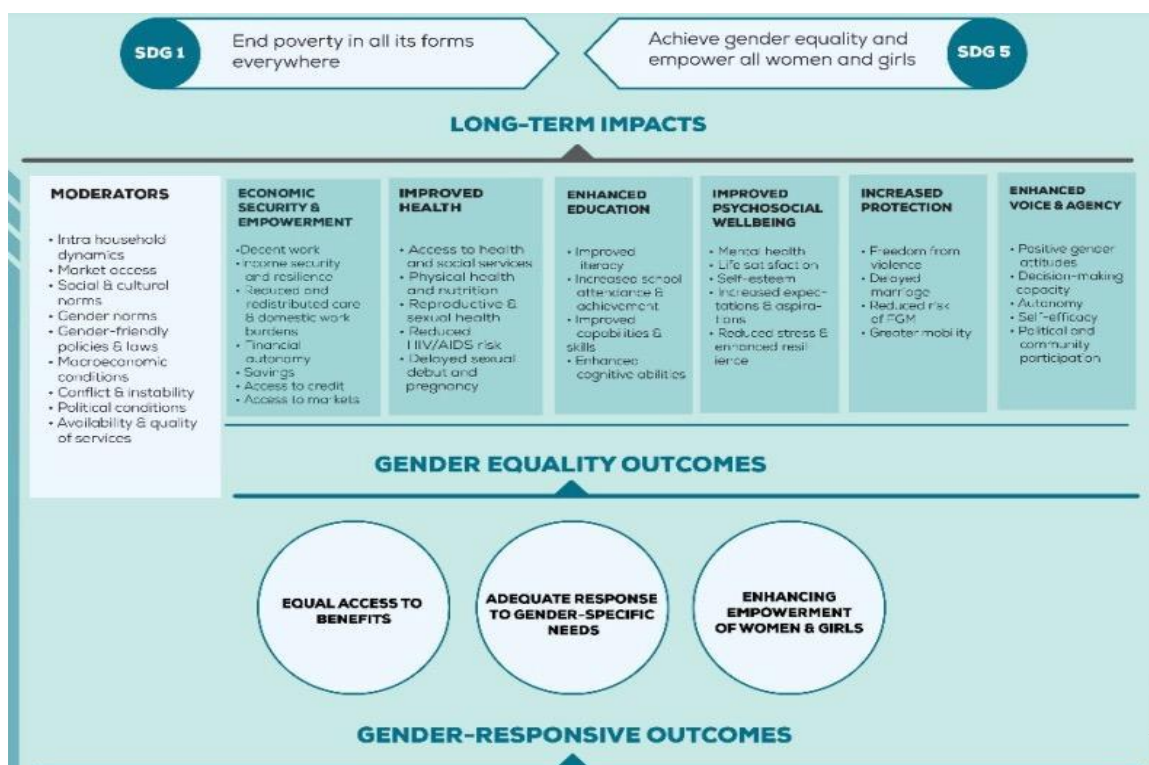


Figure 1 Gender-Responsive Age-Sensitive Social Protection: A Conceptual Framework<sup>1</sup>

<sup>1</sup> UNICEF Office of Research – Innocenti. (2020). *Gender-Responsive Age-Sensitive Social Protection: A Conceptual Framework*. UNICEF Working Paper WP-2020-10, August 2020. Available at: <https://www.unicef-irc.org/research/gender-responsive-and-age-sensitive-social-protection/> [Accessed: 12 March 2025].

Gender-responsive and age-sensitive practices are generally defined in terms of a ‘continuum’ or ‘ladder’ of inclusive practices. The continuum of gender-responsive social protection is articulated by UNICEF in Figure 2 below.

Figure 2 Continuum of Gender Integration in Social Protection<sup>2</sup>

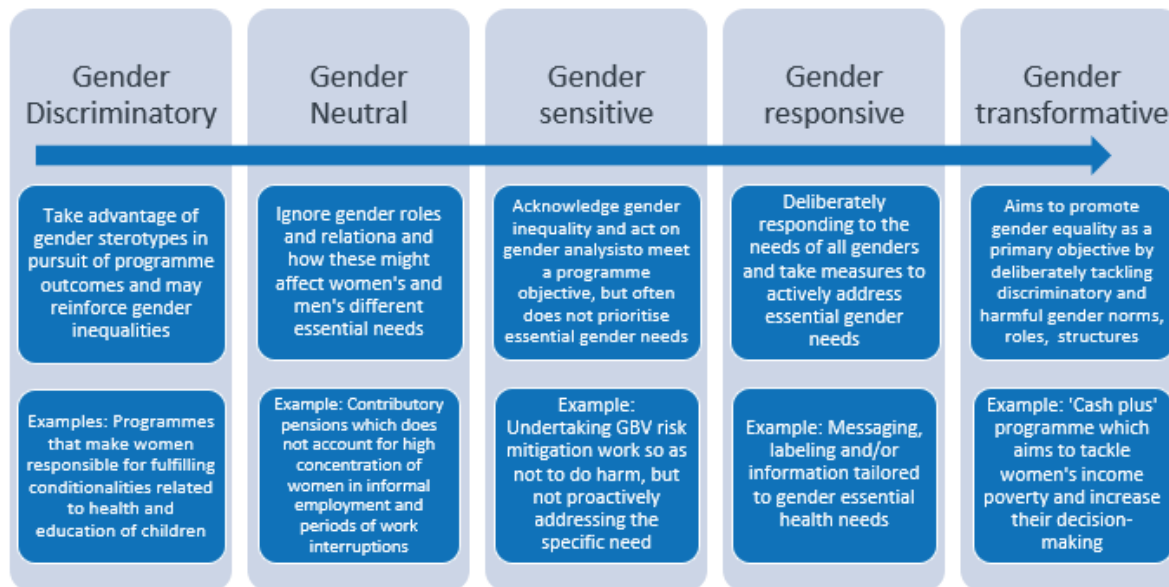
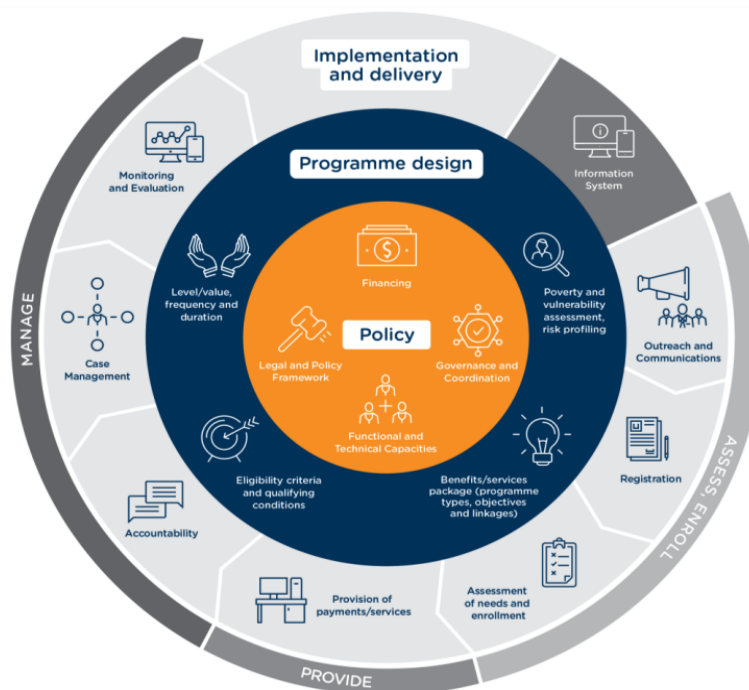


Figure 3 Social Protection as a 'Solar System'<sup>3</sup>

STAAR (Barca et al.)<sup>4</sup> have previously characterised the building blocks of social protection systems in a ‘solar system’ model, set out below. This assessment of Eswatini’s system in this document is broadly structures around the three building blocks (or rings, in Figure 3): policy, programme design and implementation and delivery.

Firstly, it will examine the policy dimensions of social assistance in Eswatini (inner, orange ring, Figure 3). This includes looking at how clear Eswatini’s policies are in their vision of how social assistance acknowledges



<sup>2</sup> Ibid.

<sup>3</sup> Ibid

<sup>4</sup> From Barca, V., Jaramillo Mejia, J.G. (2023) 'Social Protection as a 'Solar' System', Social Protection Technical Assistance, Advice and Resources (STAAR), DAI Global UK Ltd, United Kingdom

and addresses gender and age-related risks, and the financing context.

The following section will review programme design (middle, blue ring, Figure 3) across the five main social assistance programmes in Eswatini. This benefits and service packages, choice of programmes and linkages between programmes, eligibility criteria and qualifying conditions (targeting design decisions) and the level, value, frequency and duration of support (adequacy).

Finally, we will review these programmes at the implementation/delivery level (outer, grey ring, Figure 3). These are the “administrative functions necessary to deliver benefits or services to those in need, when in need.”<sup>5</sup> These include activities to promote awareness of entitlements and procedures (outreach, communications, sensitisation), measures to determine eligibility, assessment and enrolment, formalisation of enrolment and onboarding of beneficiaries, and provision of payments or services.

Finally, it should be emphasised that this study does not cover the whole social protection system but focuses on the subset of social assistance systems and programmes within this. Simply defined, social assistance refers to non-contributory support to individuals or households in need, while social protection is a broader framework that includes social assistance, social insurance, labour market policies and social care services to reduce poverty and vulnerability (see Figure 4 below). However, this study does make links to other parts of the social protection (and, more broadly, basic services) landscape where applicable.



Figure 4 Social assistance and protection definitions<sup>6</sup>

<sup>5</sup> UNICEF. (2021). *Technical Note: Better integration of social protection and humanitarian information systems for shock response*. New York: United Nations Children’s Fund. Available at: <https://www.unicef.org/media/100016/file/Technical%20note%20-%20Information%20Systems.pdf> [Accessed: 12 March 2025].

<sup>6</sup> STAAR Gender Responsive Social Protection Cheat Sheet. Accessed via [https://socialprotection.org/sites/default/files/publications\\_files/05.%20GRSP%20Thematic%20Brief%20-%20Cheat%20Sheet%20-Revised%2012-07-24.pdf](https://socialprotection.org/sites/default/files/publications_files/05.%20GRSP%20Thematic%20Brief%20-%20Cheat%20Sheet%20-Revised%2012-07-24.pdf)

## SECTION B: GENDER ASSESSMENT

### 4. SITUATION ANALYSIS: GENDER INEQUALITY AND POVERTY IN ESWATINI

#### 4.1 Overview

Eswatini is a land-locked middle-income country in Southern Africa with a population of over 1.1 million<sup>7</sup>. It is an absolute monarchy with constitutional provisions and Swazi law and custom<sup>8</sup>. The head of state is the king, who holds supreme executive, legislative, and judicial powers<sup>9</sup>. The political system is based on the Tinkhundla, the traditional geographical and administrative unit<sup>10</sup>. Although the constitution of 2005 mentions the role of political parties, it remains contested and unclear<sup>11</sup>, and some political parties are banned under the Suppression of Terrorism Act<sup>12</sup>.

There are two parallel court systems (Common Law and Traditional Courts) and the political landscape is a blend of traditional monarchical authority (with executive, legislative and judicial powers) and a parliamentary system (comprising the House of Assembly and the Senate, as well as a formal judiciary)<sup>13</sup>.

The vast majority of Eswatini's population are Emaswati, with very small minority groups including Zulu, Shangaan and Tsonga peoples<sup>14</sup>. The population is also overwhelmingly Christian, with small Hindu and Muslim populations<sup>15</sup>.

#### 4.2 Poverty and gender inequality<sup>16</sup>

Eswatini has a relatively high per capita Gross Domestic Product (GDP)<sup>17</sup>, although this is coupled with stark income inequality. A large public expenditure bill (public service wages, government recurrent expenditure and weak tax collection) restrict growth and social sector spending. The country relies heavily on imported food, making it susceptible to price fluctuations that disproportionately affect the poor.

The latest International Monetary Fund (IMF) Article IV<sup>18</sup> report noted that poverty is widespread, at 58.9%. A recent European Union (EU) study highlighted significant vulnerabilities, particularly in rural areas, noting extreme poverty (20%), high unemployment (23%), significant food insecurity (with 20% child stunting under age five), and the world's highest Human Immunodeficiency Virus (HIV)

<sup>7</sup> Phelps, 2022: 3

<sup>8</sup> Wikipedia. (2025). *Politics of Eswatini*. Available at: [https://en.wikipedia.org/wiki/Politics\\_of\\_Eswatini](https://en.wikipedia.org/wiki/Politics_of_Eswatini) [Accessed 11 January 2025].

<sup>9</sup> Ibid.

<sup>10</sup> Parliament of Eswatini. (n.d.). *Background*. Available at: <https://parliament.gov.sz/about/background/> [Accessed 11 January 2025].

<sup>11</sup> Bertelsmann Stiftung. 2024. *BTI 2024 Country Report — Eswatini*. BTI Transformation Index. Available at: <https://bti-project.org/en/reports/country-report/SWZ> [Accessed: 13 January 2025].

<sup>12</sup> Ibid.

<sup>13</sup> Dlamini, T. 2024. *Focus Group Discussion on Local Service Delivery*. [Transcript] Conducted on 2 December 2024. Available on request. Eswatini Government. (n.d.). *Governance*. Available at: <https://www.gov.sz/index.php/about-us-sp-15933109/governance> [Accessed 10 Jan. 2025].

<sup>14</sup> Joshua Project (n.d.) *Western Sahara country profile*. Available at: <https://www.joshuaproject.net/countries/WZ> [Accessed: 12 March 2025].

<sup>15</sup> Ibid

<sup>16</sup> Phelps, L. (2022). *Assessment of Shock Responsive Social Protection in Eswatini: Rapid Capacity Assessment of Humanitarian, Disaster Risk Management and Social Assistance Systems to Facilitate Transition of WFP Assistance in Eswatini*. Oxford: Oxford Policy Management (OPM).

<sup>17</sup> World Bank. (n.d.). *Data: Eswatini*. Available at: <https://data.worldbank.org/country/sz> [Accessed 13 January].

<sup>18</sup> IMF Article IV Report on Eswatini 2024

prevalence (26.8%), all disproportionately affecting women and rural communities. “Women are disproportionately affected, with 35% living with HIV compared to 19% of men.”<sup>19</sup> The population is extremely youthful, 46% are under the age of 20. The majority of children (58% of those under 17) are orphaned/vulnerable due to Acquired Immunodeficiency Syndrome (AIDS)<sup>20</sup> and many grandparents – especially grandmothers – care for these children<sup>21</sup>. Children are more vulnerable to poverty than the general population; according to UNICEF’s Multiple Overlapping Deprivation Analysis, 46.6% of children experienced at least three deprivations of dimensions.

The burden of caregiving (exacerbated by epidemics and pandemics) further limits women’s economic participation. This goes some way to accounting for women’s higher poverty levels, particularly in female-headed households - which make up nearly half of all households<sup>22</sup>. In focus group interviews, one local social worker stated that “*I think 60% or 70% of our work is child maintenance, men are not supporting their children. Even now if you can take a look [at the local Department of Social Welfare (DSW) office] there is a long queue of people... women are there to report men who are not supporting their children*”. (Local service provider, Focus Group Discussion (FGD)). Vulnerable groups, including female/child-headed households, people with disabilities and chronic illnesses, orphans, and rural populations, can end up trapped in cycles of food and livelihood insecurity. Cultural norms also limit women’s access to and control over productive resources, further exacerbating food insecurity. Climate change-related hazards, such as droughts, add further layers of vulnerability, affecting agricultural productivity and exacerbating food and nutrition insecurity. Although women are key to household food production, they often lack access to land, financial services, and agricultural support, undermining productivity and food security<sup>23</sup>.

Social norms and traditional structures and practices marginalise women, reinforcing unequal power dynamics<sup>24</sup>. Boys and girls are socialised separately, and imbued with very different gender roles and expectations. Qualitative research undertaken for this study strongly reinforced the message that women are expected to undertake subservient roles in the home and the workplace. Other studies show that this is reflected in differentiated outcomes for women and men; for example women in Eswatini earn 77 cents for every dollar that men make for the same work, and only 13 percent of women in Eswatini are agricultural landholders<sup>25</sup>.

### 4.3 Women’s rights and civil society

**Progress towards gender equality:** Eswatini presents a complex picture in terms of gender equality. The 2023 Global Gender Gap Index (GGGI) ranks Eswatini 46th out of 146 countries with a score of 0.744, placing it in the second quintile<sup>26</sup>. This relatively high ranking is driven by near gender parity in education, improved health outcomes, and a progressive legal and policy framework. However, Eswatini still ranks lower than some neighbouring countries, such as South Africa (20th) and Mozambique (24th).

<sup>19</sup> Defo, B.K., Lema, A.R., Adandjesso, K.E.A., & Gazibo, M. (2023). *Gender Equality and Survival of Children Under Five Years of Age in Africa: Constitutional, Regulatory, Institutional Provisions and Their Impact*. PRAME, Montreal. ISBN 978-2-924907-09-2.

<sup>20</sup> Phelps, 2022: 3

<sup>21</sup> See e.g. <https://www.ajol.info/index.php/ajar/article/view/198886>

<sup>22</sup> Phelps, 2022: 4

<sup>23</sup> Sibiyi, Q.N. & Oluwatayo, I.B. (2023). Gender dimensions of food security among households in rural Eswatini. *Hong Kong Journal of Social Sciences*, 61 (Spring/Summer), pp. 116-124. Available at: <https://hkjoss.com/index.php/journal/article/view/694/690> [Accessed: 12 March 2025].

<sup>24</sup> Danke, P. and Letseka, M. (2022) ‘Tradition and modernity: Thoughts on buntfu embhikhwakhe community’, *Indilinga: African Journal of Indigenous Knowledge Systems*, 21(1), pp. 8-22. Available at: [https://journals.co.za/doi/full/10.10520/ejc-linga\\_v21\\_n1\\_a3](https://journals.co.za/doi/full/10.10520/ejc-linga_v21_n1_a3) [Accessed: 6 February 2025].

<sup>25</sup> Khutsala Artisans. 2021. *Gender inequality in Eswatini*. Available at: <https://khutsala.com/blogs/news/gender-inequality-in-eswatini> [Accessed 11 January, 2025].

<sup>26</sup> World Economic Forum. (2023). *Global Gender Gap Report 2023*. Geneva: World Economic Forum. Available at: <https://www.weforum.org/reports/global-gender-gap-report-2023> [Accessed: 12 March 2025].

In contrast, Eswatini performs much worse on the Gender Inequality Index (GII), where it ranks 141st out of 160 countries with a score of 0.569.<sup>27</sup> This disparity occurs because the Global Green Growth Institute (GGGI) focuses on gender gaps rather than absolute levels of well-being, meaning that Eswatini's educational achievements and equal life expectancy boost its score despite persistent structural inequalities.

Eswatini's GI ranking is negatively affected by:

- » High adolescent fertility rates and maternal health challenges ([WFP, 2023](#)).
- » Limited female participation in the formal labor market, which remains male-dominated.
- » Customary laws and social norms that still restrict women's economic and land rights, despite legal reforms.<sup>28</sup>

While education rates for women are improving, economic barriers and health inequalities disproportionately affect women, which the GI penalizes more heavily than the GGI. This explains why Eswatini appears to perform well in some gender equality metrics while ranking poorly in others.

Women in Eswatini face significant challenges in terms of their rights and opportunities. Gender inequality is deeply rooted in the country's patriarchal society<sup>29</sup>. Women are often treated as legal minors and are not permitted to independently manage property or sign contracts<sup>30</sup>. Without awareness of or access to their rights, girls grow up to become women who depend solely on their fathers or husband<sup>31</sup>.

Despite these challenges, there have been some positive developments in recent years. In 2019, the Eswatini High Court ruled that the common law doctrine of marital power, which gave husbands ultimate decision-making power over their wives, was unconstitutional<sup>32</sup>. The government has also passed laws to prohibit child marriage and curb sexual and gender-based violence<sup>33</sup>. However, implementation and enforcement of legislation are still a challenge<sup>34</sup>.

Women are also under-represented in leadership and decision-making positions - 17.1% hold seats in Parliament after the 2023 elections<sup>35</sup>, despite some progress, including the provisions of the 2018 Election of Women Act and the civil society-led 'Vote for a Woman' campaign. This included

<sup>27</sup> United Nations Development Programme (UNDP). (n.d.). *Gender Inequality Index (GII)*. Available at: <https://hdr.undp.org/data-center/thematic-composite-indices/gender-inequality-index#/indicies/GII> [Accessed: 12 March 2025].

<sup>28</sup> Government of Eswatini. (2024). *The Kingdom of Eswatini Country Progress Report on the Implementation of the Beijing Declaration and Platform for Action – July 2024*. Mbabane: Government of Eswatini. Available at: [https://www.unwomen.org/sites/default/files/2024-09/b30\\_report\\_eswatini\\_en.pdf](https://www.unwomen.org/sites/default/files/2024-09/b30_report_eswatini_en.pdf) [Accessed 6 February 2025].

<sup>29</sup> Amnesty International. 2011. *Amnesty International Report 2011: The state of the world's human rights - Eswatini*. Available at: <https://www.amnesty.org/en/documents/afr55/006/2011/en/> [Accessed 11 January, 2025].

<sup>30</sup> Khutsala Artisans. 2021. *Gender inequality in Eswatini*. Available at: <https://khutsala.com/blogs/news/gender-inequality-in-eswatini> [Accessed 11 January, 2025].

<sup>31</sup> Khutsala Artisans. 2021. *Gender inequality in Eswatini*. Available at: <https://khutsala.com/blogs/news/gender-inequality-in-eswatini> [Accessed 11 January, 2025].

<sup>32</sup> Human Rights Watch. 2020. *World Report 2020: Eswatini (formerly Swaziland)*. Available at: <https://www.hrw.org/world-report/2020/country-chapters/eswatini-formerly-swaziland> Accessed on January 11, 2025].

<sup>33</sup> Ibid.

<sup>34</sup> International Labour Organization. (2023). *Review of the Gender Policy of the Trade Union Congress of Swaziland*. Pretoria: ILO. Available at <https://www.ilo.org/media/91261/download> [Accessed 11 January, 2025].

<sup>35</sup> World Bank. (n.d.). *Proportion of seats held by women in national parliaments (%)*. Available at: <https://genderdata.worldbank.org/en/indicator/sg-gen-parl-zs> [Accessed 11 January, 2025].

“awareness-raising activities at the community level and among women's groups as well as some capacity building of aspiring women candidates prior to voter registration.”<sup>36</sup>

Eswatini has committed itself to several regional and international instruments to promote gender equality, including the Convention for the Elimination of All Forms of Discrimination Against Women (CEDAW), which Eswatini ratified without reservation, and the Southern African Development Community (SADC) Declaration on Gender and Development<sup>37</sup>. Eswatini has also committed to the UN's Sustainable Development Goals (SDGs), including SDG 5 on gender equality<sup>38</sup>. The Sustainable Development Report 2024 ranks Eswatini 133rd out of 166 countries, with an SDG Index Score of 57.76. The report highlights significant challenges across multiple goals, with major obstacles particularly in SDG 1 (No Poverty), SDG 2 (Zero Hunger), and SDG 3 (Good Health and Well-being).<sup>39</sup>

**Gender-based violence:** GBV has significant individual and societal consequences, particularly impacting poorer women and girls. It undermines the effectiveness of social programs and perpetuates cycles of violence across generations. The effects extend beyond victims, impacting children who witness violence, which can lead to long-term psychological issues and an increased likelihood of future violence as either victims or perpetrators.

The Multiple Indicator Cluster Survey (MICS) (2021/22) reports that around 1 in 4 women aged between 15 and 49 have experienced physical or sexual violence (19.5% of 15-19 year olds). Women in Eswatini are often restricted in their ability to negotiate safe sex (due to economic dependency or fear), a factor that contributes to the country's high HIV prevalence<sup>40</sup>. Women in Eswatini are also far more likely to feel unsafe in their neighbourhoods than men. When at home alone, 63.1% of women feel safe, compared to 94.9% of men. Only 33.8% feel safe walking alone in their neighbourhood after dark, compared to 76.7% of men. These proportions vary widely according to wealth; poorer women are much more likely to feel unsafe in either situation<sup>41</sup>.

The Eswatini VAC and Youth Survey (2022) found that 25.5% of females and 31.7% of males aged 13-24 had experienced some form of violence. Sexual violence was more prevalent among females (8.1%) than males (3.3%). The survey also found that exposure to violence in early life perpetuates a generational cycle of violence, exacerbated by poverty, unemployment, substance abuse, and mental health challenges.

One in twelve females aged 13–24 has experienced sexual violence, often committed by someone familiar to them. Among females aged 13–24 who experienced sexual violence, nearly two-thirds disclosed the incident, but only one-quarter sought professional services.

On a broader scale, global estimates of the economic costs of GDP are significant, with lost productivity estimated to be 1.2 to 3.7 percent of GDP—comparable to many countries' spending on primary education. This violence diminishes human capital, slows poverty reduction, and hampers economic growth<sup>42</sup>.

<sup>36</sup> Chitando, E., Maseno, L. & Tarusarira, J. (eds.) (2023). *Religion and Inequality in Africa*. Bloomsbury Academic, London.

<sup>37</sup> United Nations Development Programme (UNDP) (2022). *PIMS 6432 Eswatini AMP Signed ProDoc July 2022*. UNDP.

<sup>38</sup> The Department of Gender and Family Issues. (2024). *The Kingdom of Eswatini Country Progress Report on the Implementation of the Beijing Declaration and Platform for Action*. Accessed at: [https://www.unwomen.org/sites/default/files/2024-09/b30\\_report\\_eswatini\\_en.pdf](https://www.unwomen.org/sites/default/files/2024-09/b30_report_eswatini_en.pdf) [Accessed 11 January, 2025].

<sup>39</sup> Sustainable Development Report. (n.d.). *Eswatini – SDG Index and Dashboards*. Available at: <https://dashboards.sdqindex.org/profiles/eswatini> [Accessed: 12 March 2025].

<sup>40</sup> Amnesty International. (2010). *Too late, too little: The failure of law reform for women in Swaziland*. London: Amnesty International.

<sup>41</sup> Central Statistical Office (CSO). 2024. *Eswatini Multiple Indicator Cluster Survey 2021-2022: Survey Findings Report*. Mbabane, Eswatini: Central Statistical Office (CSO). Available from: <https://mics.unicef.org/news/just-released-eswatini-mics-2021-22-report-and-datasets-including-gis> [Accessed 10 January 2025].

<sup>42</sup> Safety First, World Bank (2021: 2)

Over the past decade, studies on gender norms and attitudes in Eswatini have highlighted both progress and ongoing challenges in achieving gender equality. The 2021-2022 Eswatini MICS shows improvements in some gender-related indicators, such as women’s access to education and awareness of GBV prevention strategies. However, persistent inequalities remain, especially in areas related to intimate partner violence and traditional expectations of women’s roles within households and society<sup>43</sup>.

The Gender Links 2021 Gender Progress Score (GPS) survey indicates fairly regressive attitudes towards gender equality. “For example, only of women and men agree or strongly agree that “women and men should be treated the same”<sup>44</sup>, and 53% agree or “strongly agree that “a woman should obey her husband,”<sup>45</sup> reflecting deep-rooted views that continue to influence behaviour and policy resistance<sup>46</sup>. While individual results were not broken down by sex, overall, men’s attitudes were more patriarchal than women’s as measured in this survey. Deeply entrenched cultural norms in Eswatini contribute to the acceptance and normalisation of violence against women and girls, often leading to a lack of recognition of such acts—particularly sexual violence—as actual violence. Research indicates a significant underreporting of these incidents<sup>47</sup>.

The majority of women lack autonomy over their sexual and reproductive health (SRH) choices, further perpetuating the cycle of abuse and disempowerment (VAC, 2022). MICS reports that only 25.7% of women make their own informed decisions regarding these choices (MICS, 2024). The Gender Links 2021 report also notes that 29% of both male and female respondents are of the opinion that the husband has a right to punish the woman if she does something wrong, and 28% believe that a woman in a short skirt is asking to be raped (Gender Links, 2021). Economic and household decisions are also reported to have 23 and 26% respondents, respectively who believe the husband has autonomy over these (Gender Links, 2021).

However, there are demographic variations in gender attitudes. Younger respondents and those with higher levels of education tend to hold more progressive views, suggesting a generational shift towards gender equality. Nonetheless, significant barriers remain, particularly among older populations and in rural areas, where traditional views are more entrenched<sup>48</sup>.

The trends and patterns observed in the literature review were also reflected in the qualitative interviews, and economics, gender roles, attitudes and violence or repression were often presented as highly interdependent. For example, one stakeholder explained the women’s rights agenda and backlash in the following terms:

*“Women...[were] maybe not given that economic advantage as compared to men, and that then have that limitation. which then perpetrated some of the violence that we see. So I think the economic status of our country and the upholding, to say a man is the one who should be leading and providing for the country then limits the participation of women in those in those spaces... then when they came*

<sup>43</sup> Central Statistical Office (CSO). 2024. *Eswatini Multiple Indicator Cluster Survey 2021-2022: Survey Findings Report*. Mbabane, Eswatini: Central Statistical Office (CSO). Available from: <https://mics.unicef.org/news/just-released-eswatini-mics-2021-22-report-and-datasets-including-gis> [Accessed 10 January 2025].

<sup>44</sup> Southern African Gender Protocol Alliance, 2021. *Gender Progress Score – Gender Attitudes in Eswatini 2021*. Gender Links. Available from: [https://genderlinks.org.za/wp-content/uploads/2021/08/EswatiniGPS\\_GenderAttitudes\\_Final\\_fmhall\\_082021.pdf](https://genderlinks.org.za/wp-content/uploads/2021/08/EswatiniGPS_GenderAttitudes_Final_fmhall_082021.pdf) [Accessed 10 January 2025].

<sup>45</sup> Ibid.

<sup>46</sup> Ibid.

<sup>47</sup> Deputy Prime Minister’s Office, Government of the Kingdom of Eswatini. (2023). *Violence Against Children and Youth, Kingdom of Eswatini: Findings from the Violence Against Children and Youth Survey, 2022 (Final Report)*. Mbabane, Eswatini: Government of the Kingdom of Eswatini.

<sup>48</sup> Deputy Prime Minister’s Office, Government of the Kingdom of Eswatini. (2023). *Violence Against Children and Youth, Kingdom of Eswatini: Findings from the Violence Against Children and Youth Survey, 2022 (Final Report)*. Mbabane, Eswatini: Government of the Kingdom of Eswatini.

*with those issues of gender equality, there was a not a positive response, where they felt like women wants to be equal with men....They want to be men of the home and so on.... we are still trying to work on that patriarchy that has come up as a result of all those attitudes and negative connotations in as far as gender equality is concerned.” (Development partner, KII)*

## 4.4 Gender disaggregated data and evidence

In their recent review<sup>49</sup>, the IMF noted that there are significant gaps in social and labour data in Eswatini, which are outdated and insufficient for monitoring critical issues like poverty, food insecurity, inequality, and gender disparities. The report calls for more frequent data collection, including information on the informal labour sector, to better target social interventions and track progress.

In particular, the latest comprehensive dataset on the reach of social assistance programmes seems to be from 2016/17 national household survey data. Gender data in Eswatini is also very partial; the World Bank’s Gender Data Portal indicates that data is missing for key indicators, such as the proportion of time spent on unpaid domestic and care work by sex. The Commonwealth of Learning 2023 Gender Country Profile for Eswatini outlines available data and rankings regarding gender equality. The profile provides statistics following the World Economic Forum’s Global Gender Gap Index framework, offering insights into areas where data is available and highlighting existing gaps; notably, significant gaps on gender-related social norms<sup>50</sup>. The World Bank’s Gender Data Portal indicates that data is missing for key indicators, such as the proportion of time spent on unpaid domestic and care work by sex<sup>51</sup>. There is a lack of data on the government’s website on social protection, including social assistance. However development partners and the GoKE have been working in partnership to improve gender specific and disaggregated data<sup>52</sup>.

<sup>49</sup> IMF Article IV Mission 2024

<sup>50</sup> <https://oasis.col.org/items/7ca9f576-6132-4e60-9baf-5066fab62546/full>

<sup>51</sup> <https://genderdata.worldbank.org/en/economies/eswatini>

<sup>52</sup> See for example <https://www.comesa.int/comesa-hosts-gender-statistics-training-for-eswatini>

## 5. SOCIAL ASSISTANCE AND GENDER POLICIES AND LEGISLATION IN ESWATINI: OVERVIEW AND GENDER ASSESSMENT

### 5.1 Overview of policies and legislation

**Social protection, international treaties and legislation:** Eswatini has ratified key international treaties supporting social protection, including the International Covenant on Economic, Social, and Cultural Rights (ICESCR), the Convention on the Rights of the Child (CRC), and the Convention on the Rights of Persons with Disabilities (CRPD). However, it has not ratified significant instruments such as the International Convention on the Protection of the Rights of All Migrant Workers (ICMW), the Optional Protocols to the ICESCR and CRPD, or the African Union’s Protocol on Social Protection and Social Security.

The right to social protection is clearly stated in the Constitution of Eswatini, 2005, and the state is obliged to provide appropriate benefits to those that are not able to support themselves as well as their dependents (Constitution of Eswatini, 2005). It mandates that women have the right to equal treatment with men in all areas of life, including political, economic, and social spheres. It ensures that all persons are equal before the law and are protected from discrimination based on gender, race, ethnicity, or social standing (Sections 20 and 28). The Constitution also guarantees children’s rights to protection from abuse, neglect, and exploitation and obligates the state to ensure children’s survival, development, and protection from all forms of abuse and neglect (Sections 29 and 60). While the Constitution does not specifically address gender-based violence, it provides a framework for protecting individuals from all forms of violence, ensuring their safety and dignity.

A range of domestic policies translate these commitments into more concrete commitments to action. The overarching domestic policy document is the National Development Plan 2023/24-2027/28. The most relevant subsidiary policies are: the National Social Protection Strategic Plan and the National Social Assistance Policy (NSAP) (2021, draft). With respect to gender, the main policy instruments are the Reviewed National Gender Policy (2022), and the National Gender Strategy and Action Plan (2020-2030). Violence against women and children is addressed at the policy level through the National Strategy and Costed Action Plan to End Violence (2023-2027). There are also important social inclusion and protection provisions within Eswatini’s National Plan of Action on Disability (2024-2028). Other associated policies include the NSSP (2022) and the Eswatini National Multisectoral HIV and AIDS Strategic Framework (2024).

**Gender equality, international treaties and legislation:** Eswatini has demonstrated a commitment to international instruments that promote gender equality, such as the CEDAW<sup>5</sup>. The government has made recent strides at policy and legislative levels to protect women and girls from sexual and gender-based violence<sup>3</sup>.

However, deeply rooted customary norms and practices, which often favour men in matters like land disputes, continue to undermine women’s rights<sup>6</sup>.

Eswatini has enacted laws and policies aimed at promoting gender equality and addressing GBV. These include amendments to the Marriage Act, which now prohibits child marriage, and the 2018 Sexual Offences and Domestic Violence Act, which provides a framework for curbing sexual and gender-based violence<sup>5</sup>.

The Constitution of Eswatini guarantees equality before the law and prohibits discrimination based on gender<sup>7</sup>. However, it is important to note that the Constitution does not explicitly extend this protection to individuals based on their sexual orientation or gender identity<sup>5</sup>. The dual statutory and traditional systems in Eswatini are frequently disconnected and contradict one another. For example, the traditional system of land allocation, known as *kukhonta*, poses a significant challenge to women's land ownership rights. Under this system, chiefs, who traditionally allocate land, often discriminate against women<sup>8</sup>; this is an example of where discriminatory customary practices undermine the stated aims of government to work towards gender equality.

The most up-to-date policy instruments are briefly reviewed with respect to their content and relevance to social assistance below.

**Framework for gender analysis of policies:** This analysis evaluates the gender dimensions of key social protection and development policies in Eswatini. It uses a comprehensive framework to assess how these policies align with international and national commitments to gender equality, such as CEDAW, the SDGs, and the SADC Gender Protocol (see Annex 2). The framework examines policy context and objectives, gender roles and responsibilities, access to resources, participation in decision-making, intersectionality, budgeting, monitoring, and cultural norms. It aims to identify gaps and opportunities for embedding gender-transformative approaches to promote equity and empowerment effectively. Please note that the full gender analysis has not been presented below, but key points and themes have been summarised for this assessment.

Finally, for those policies not within the social assistance space, the report seeks to draw out connections between these policies and social assistance policies and programmes.

The **Eswatini NSAP** is likely to framework for addressing poverty and inequality through social assistance, explicitly recognising gendered vulnerabilities. This focuses on non-contributory social assistance and therefore covers all of the policies addressed during this assessment – however it is still in draft and under debate, and so cannot be analysed as part of this exercise. However the policy intentions within the NSAP were reflected in several aspects of KIIs, and these will be reflected appropriately throughout this study.

The **Eswatini National Social Protection Strategic Plan (NSPSP) 2023–2028** commits to a life-course approach to social protection, aiming to establish a comprehensive social protection floor (SPF). It reiterates the constitution's commitment to social protection as a basic human right, thereby aligning national policy with global human rights standards. It also identifies gender and disability mainstreaming as a priority, with commitments to gender-responsive budgeting, community advocacy, and multisectoral collaboration to prevent gender-based violence, although the gender mainstreaming commitments broadly lack specificity. The NSPSP covers all forms of social protection including contributory and non-contributory social protection - it is fair to assume (from feedback given by stakeholders during interviews) the NSAP and NSPSP will share overarching governance and accountability mechanisms, which if implemented, should help to ensure their harmonisation. No evidence suggested that the co-ordination mechanisms detailed in the NSPSP have been implemented, although interviews confirmed that the Deputy Prime Minister's Office (DPMO) play a co-ordinating role across the government social protection sector. While the policy has many of the right intentions in place, without an action plan, active accountability mechanism, or budget attached, is unlikely to be fully implemented.

The **National Social Security Policy (NSSP), 2021** also, in principle, represents a significant step towards the establishment of a robust social protection framework designed to safeguard the welfare of its citizens. The provisions detailed in the NSSP align with international standards and human rights frameworks, underscoring the imperative of social security as a fundamental human right. The

policy addresses gender disparities by recognising the disproportionate burden of unpaid care work on women and gaps in maternity income protection. Importantly, it includes provisions to introduce equitable access to maternity benefits and aims to integrate informal workers, a group heavily comprised of women. It also covers existing contributory schemes such as the Eswatini National Provident Fund, Public Service Pension Fund, (employer-based) Workmen's Compensation Scheme and a (limited in scope and implementation) Sickness Benefit mandated by the Employment Act.

There are some proposals for ring-fencing of budgets, but no commitment to gender budgeting. There is a commitment to establishing a National Social Security Authority, but this study was not able to verify its status; the Ministry of Labour and Social Security does continue to administer social security functions, but there was no evidence of formal links between this and social protection systems and functions. The Policy shares the same co-ordination framework as the NSPSP, although as mentioned above, these mechanisms seem to be dormant. There is a results-based framework, which does not contain gender sensitive indicators. While the importance of data and analysis is noted, including gender disaggregated data, there are no concrete plans for developing this, or for more comprehensive gender analysis of the policy measures needed to resolve gender issues. There is an approved action plan for the NSSP, which was adopted along with the NSSP by the Cabinet in 2021.

The **National Gender Policy** of 2023 provides a revised framework for gender equality and equity in Eswatini. While it does not make reference to social assistance in terms of cash or in-kind support to vulnerable populations, there are various sections relating to improving outcomes for women and girls in education, health and the labour market. There is also a dedicated section to GBV, in which various measures to respond to rising rates of GBV are set out. These include prevention programmes (awareness raising on beliefs, attitudes and laws, and online violence), working with both females and males, strengthening institutional mechanisms and co-ordination across stakeholders and sectors, integration of prevention and response across all sectors, commitments to gender safety audits, evidence and research, formulating policies and legislation that prohibits all GBV including online violence. While these are all positive commitments, there does not appear to be a costed action plan attached to the policy and it is not clear how the various commitments will be met or assessed.

The **Disability Act** includes several significant provisions aimed at enhancing the rights and well-being of persons with disabilities, particularly women. Section 30 guarantees that individuals with disabilities receive assistance, including humanitarian settings, underscoring the commitment to inclusivity during times of crises. **Eswatini's National Plan of Action on Disability (2024-2028)** focuses on the critical role of social protection for Persons with Disabilities. It also details a wide range number of directions and interventions that would be highly significant to the overall development of social assistance in Eswatini, not just for Persons With Disabilities, and for addressing intersectional vulnerabilities. These include:

- » Moving away from a charity/social model to a human rights-based approach in compliance with the CRPD (note that taking a human rights based approach would have wider implications for the social assistance system as a whole)
- » Introducing legal provisions to support social assistance programs for Persons With Disabilities.
- » Finalizing national social assistance legislation to consolidate various grant schemes into a comprehensive system.
- » Developing a NSAP and an integrated social registry with a management information system (MIS)
- » Enhancing targeting methods to better identify beneficiaries of social assistance schemes
- » Expanding the coverage of social assistance programs to be more inclusive.
- » Establishing a disability fund to support Persons With Disabilities more effectively.

- » Provision of income support and social security protection for caregivers
- » Facilitation of access to social services through community involvement and decentralized services.
- » Strengthening of programmes to protect Persons With Disabilities from abuse and neglect.
- » Establishing mechanisms for identifying needs, developing distribution guidelines, and providing free assistive devices.
- » Improving the legal environment for social protection.
- » Proposing mechanisms to ensure access to justice for Persons With Disabilities who are victims of GBV.
- » Confirming the need to finalize, implement, and socialize national social assistance legislation.

The M&E framework also contains a number of measures setting out key results areas for the Plan of Action, including measures of the numbers of people with disabilities and caregivers who are informed of their entitlements, and the numbers of Persons With Disabilities and/or caregivers receiving a monthly grant. It also sets out key evaluation questions relating to the range and types of social protection available to Persons With Disabilities, and monitoring questions covering a wide range of process indicators such as the establishment of a national database of families caring for Persons With Disabilities, numbers registered and receiving allowances, and guidelines and manuals for the management of grants and allowances. However, the plan lacks robust strategies to address intersectional issues, such as the compounded vulnerabilities of women with disabilities in rural areas. There is also scope to strengthen its M&E framework with gender-sensitive indicators.

The **National Strategy to End Violence in Eswatini (NSEVE) 2023–2027** is aimed at addressing and reducing GBV through a holistic approach. Social assistance and support services for survivors is part of this strategy, although ‘social assistance’ in this context is defined in terms of service provision; provision of safe spaces and shelters, psychosocial support and medical care, rather than financial or in-kind assistance.

Economic support for survivors is limited to skills training and entrepreneurship, with no mention of direct financial or in-kind assistance. Integrating social assistance into GBV response frameworks would allow for more comprehensive support to survivors.

There are also commitments to legislative and policy reforms and implementation, community awareness and engagement, and M&E. Relevant commitments in the strategy include pledges and indicators on strengthening community systems to respond to violence, developing guidelines for a referral system for survivors, rolling out more comprehensive care for survivors including through health facilities, and expansion of the National Surveillance System Report (NSSV) (reporting system) on violence (which could potentially be linked to the Social Registry and to other programmes working with vulnerable groups, although there is no reference to this in the NSEVE). It also includes commitments to prevention work such as development of a violence prevention plan, violence prevention campaigns for children and young people in and out of school, positive parenting programmes and interventions that involve engaging traditional leaders and men and boys as allies.

The **Eswatini Education Sector Strategic Plan (2022-2034)** aligns closely with social protection objectives, particularly through its commitment to providing inclusive, equitable educational opportunities for vulnerable groups. In line with the National Education and Training Sector Policy (2018), the Ministry of Education and Training (MOET) oversees the SFP, which aims to provide daily meals to learners across government schools, improving attendance and reducing dropout rates. Additionally, the OVC education grants further support equitable education access by reducing economic barriers for vulnerable students. Although the OVC grants are currently administered by DPMO, their strategic linkage to education policies reinforce the collaborative approach outlined in the

Strategic Plan. These interventions collectively contribute towards enhancing educational outcomes, reducing disparities, and strengthening the resilience of vulnerable children as outlined in the Education Sector Policy (2018). Eswatini has established governance and accountability structures in its education sector, such as the Local Education Group (LEG) and Joint Sector Reviews (JSR) for stakeholder coordination and monitoring.

**Conclusions:** Taking all of the policy frameworks together in their totality, while gender equality principles are frequently mentioned, they rarely translate into specific actions or performance indicators, and none of the policies appear to have been costed. However, the social assistance policy has the opportunity to introduce measures that could make significant contributions to gender equality and social inclusion, if designed in a gender responsive and socially inclusive manner.. Examples include better coordination and harmonization of systems and programs through stronger governance and a shared social registry, which can reduce coverage gaps for marginalised groups. The policy also analyses gender and age-based vulnerabilities throughout the life cycle and commits to strengthening gender mainstreaming. To be effective, these measures require concrete action planning and a monitoring and evaluation framework.

## 5.2 Governance and Institutional Capacity

The primary responsibility for social assistance programs in Eswatini lies with the **DSW**, under the **DPMO**<sup>2</sup>. The DSW manages a range of programs, including cash transfers, food aid, and social care services, targeting vulnerable groups such as older people, OVC, and persons with disabilities. However other departments lead on specific programmes and initiatives, including the SFP (Ministry of Education and Training) and Emergency Food Aid (National Disaster Management Agency (NDMA)). Other departments and agencies manage related programmes and initiatives such as social security and active labour market programmes (e.g. Ministry of Labour and Social Security), and health fee subsidy and insurance programmes (e.g. Ministry of Health).

This review did not find any institutional capacity assessments to draw from, although some useful data is available within the evaluation of an EU funded programme of technical assistance to DPMO, This included technical assessment of restructuring options, a functional review and human resources review, leading to recommendations (and some execution of) various reforms and developments. These included new procedures, guidelines, supporting tools, MIS, case management, M&E systems and grievance mechanisms. It also supports drafting of social bills, policy and other strategic documents including recommendations on the harmonisation of social benefits.

The EU's programme's high level of ambition met with patchy success, which is in part attributed to "institutional readiness to move forward on these issues" (EU 2022: 8). Support to the University of Eswatini in building workforce capability was considered somewhat successful, but undermined by high staff turnover (2022: 11). The project also made modest improvements to the Department of Social Affairs (DSA) local social workers working conditions and therefore contributed to increased ability of social workers to attend to more clients and develop partnerships with local non-governmental organizations (NGOs) to provide food assistance (14). There were also successes in terms of the development of tools and approaches relating to budget planning and efficiency gains including the expansion of electronic payments. While the evaluation was not able to ascertain whether this work led to the improvement of social protection sustainability (2022: 13), electronic payments have increased since the technical assistance programme took place.

However the programme was not able to make headway on a number of important issues, that seem to persist today. The constitution of a DPMO monitoring and evaluation system was not programmed, and no progress was made on social work case work data (10, 12: 2022). Little headway was made with proposed reforms on eligibility criteria and targeting methods, harmonization of social assistance benefits, a centralised database of beneficiaries or the design of a grant for OVCs (2022: 14). The evaluation also reports that while the project contributed to promote strategic thinking regarding a

large range of organizational issues, low ownership by DPMO reduced the project's ability to drive changes (2022: 13).

### 5.3 Social Assistance Management Information Systems

Eswatini is now in the process of developing a social registry to improve the targeting and delivery of social assistance programs. The social registry is expected to collect data on households' socio-economic characteristics, including income, assets, and vulnerability factors, including information from different sectoral MIS and vulnerability assessment reports. This information will be used to identify and prioritize households in need of social assistance, ensuring that resources are directed to those who need them most.

The social registry has the potential to promote joined-up assessment and service delivery by providing a centralized platform for information sharing between different government agencies and service providers. This has the potential to help to avoid duplication of efforts, and more importantly improve coordination, and ensure that vulnerable groups receive comprehensive and integrated support. It will not, though, address the inherent gaps in coverage unless there is policy intent to do so. While this work is in formative (though advanced) stages, interviews and workshop discussions with development partners and government highlighted that there is good potential for the registry to harmonise targeting and delivery of social assistance, provide better analysis of key trends, including disaggregation of data, and to more effectively plan and reform social assistance interventions on this basis. Critically, the government and partners are looking at how to ensure that the registry is dynamic and flexible to respond to shocks and crises:

*"What we're trying to work out [is] how to bring in that dynamism into the registry... The intention is [that it will be] digital and dynamic.....The social registry will allow government to pre-identify vulnerable households in the pathway of anticipated disasters, like drought or even during [Coronavirus Disease 2019] COVID-19... to streamline processes and respond more effectively... Ultimately, what government wants is for everybody to use the registry when responding to crises, so that resources are spread to as many affected people as possible." (KII, Development Partner)*

## 5.4 Government and development partner financing

The recent World Social Protection Report: 2024-26 (ILO, 2024)<sup>53</sup> found that social assistance investment in Eswatini, at approximately 1-2% of GDP, is on the lower side compared to the SSA average for LMICs, which typically spend 1-3% of GDP on social assistance<sup>54</sup>. This is lower than comparator countries (e.g. Namibia, another LMIC, invests 3-5% of GDP in social assistance), though more substantial than others in the region (e.g. Zambia)<sup>55</sup>. Overall, Eswatini's spending demonstrates a below average commitment according to the region and income status of the country, and like its neighbours, needs increased budgetary allocations to meet the growing demands of its vulnerable populations<sup>56</sup>.

The most current budget figures (from the Eswatini Government's Budget Estimates for 2024/25<sup>57</sup>) allocate consistent funding for key social assistance programs under the Deputy Prime Minister's Office (DPMO):

- » Old Age Grant: E380 million (~\$20.96 million)
- » Disability Grant: E30 million (~\$1.66 million)
- » OVC Education Grant: E60 million (~\$3.31 million)

These allocations have remained unchanged since 2022/23, reflecting a commitment to supporting vulnerable groups. However, challenges such as inflation, population growth, and static funding levels may reduce their effectiveness over time.

Relatively low spending on social assistance is matched with relatively low coverage of the overall population, although it is very uneven across population groups. Social assistance in Eswatini reflects broader SSA trends of prioritizing specific vulnerable groups, such as the elderly, children, and extremely poor households. Among LMICs, Lesotho and Eswatini have comparatively high coverage of older people, with universal old-age pension eligibility. Eswatini's social assistance coverage for children, while addressing specific needs through programs like SFP and grants for OVC, remains limited compared to other LMICs in SSA. School feeding reaches 79.3% of students in government schools, and OVC grants cover only 4% of the population, placing Eswatini below the SSA LMIC average of approximately 15% child coverage through social assistance<sup>58</sup>. Programmes in countries like Kenya and demonstrate broader inclusivity and higher reach, targeting both vulnerable children and wider demographics. For the working-age poor, Eswatini mirrors the regional trend of minimal support, reflecting a broader challenge in SSA LMICs, where unemployment and disability protections are underdeveloped, leaving large portions of the population underserved.

<sup>53</sup> International Labour Organization (ILO). 2024. *World Social Protection Report 2024-26: Universal social protection for climate action and a just transition*. Geneva: International Labour Office. Available at: [https://www.ilo.org/sites/default/files/2024-09/WSPR\\_2024\\_EN\\_WEB\\_1.pdf](https://www.ilo.org/sites/default/files/2024-09/WSPR_2024_EN_WEB_1.pdf) [Accessed 10 January 2025].

<sup>54</sup> ILO, 2024: 281.

<sup>55</sup> ILO, 2024: 57.

<sup>56</sup> This has been echoed in other analyses e.g. Phelps (for WFP) noted that Eswatini's public spending on social assistance is comparatively low, at 1.5% of GDP in 2015, compared to regional neighbors such as Botswana (2.7% in 2019), Namibia (2.9% in 2018), South Africa (3.4% in 2016), and Lesotho (5.4% in 2017).

<sup>57</sup> Government of Eswatini (2024) *Budget Estimates 2024/25*. Ministry of Finance, Eswatini. Available at: <https://www.gov.sz/images/FinanceDocuments/Budget-Estimates-2024-25-Final-Print-Version.pdf> [Accessed: 12 March 2025].

<sup>58</sup> ILO, 2024: 93.

Financing mechanisms for social assistance in Eswatini are mixed - while long-standing programs like old-age grants are domestically funded, newer initiatives often depend on donor support, constraining scalability and sustainability<sup>59</sup>. Phelps (2022) notes that “despite some political commitment and investment in the Emergency Food Aid, there is still dependency on humanitarian assistance (which covers around 35% of needs) to complement the government capacity, as well as use of predominantly in-kind rather than cash assistance”<sup>60</sup>.

This contrasts with countries like Kenya, another LMIC, which has successfully integrated donor funding into its social protection framework while increasing domestic financing for flagship programs like cash transfers. Having said this, the evolution of social protection financing in Kenya and other SSA countries has been rather different, with Eswatini having a longer history of autonomy over its systems. Nonetheless, to achieve a more inclusive and sustainable social assistance system, Eswatini would need to expand its fiscal commitment, enhance domestic resource mobilization, and implement innovative mechanisms to scale coverage in a manner consistent with regional LMIC leaders<sup>61</sup>.

## 5.5 Evidence on cost-effectiveness of social assistance financing

This review found limited availability of recent evidence on the cost-effectiveness of social assistance expenditure in Eswatini, reflecting broader challenges in the evaluation of social assistance programs across the country. Raju and Younger’s analysis note that none “None [of the programs] reduces either the Gini index or the poverty rate by more than one percentage point” (2021: 5). The combined effect of all five main programs reduces the poverty gap by only 3 percentage points from a baseline of 24.9 percent (2021: 6).

Analysis of the Swaziland Household Income and Expenditure Survey 2016/17<sup>62</sup> found that approximately 20% of social assistance benefits are allocated to non-poor households, while nearly 50% reach moderately poor households. This underscores significant exclusion risks for chronically poor and shock-affected households, an issue that is increasingly urgent amid rising food and fuel prices. Prioritizing the strengthening of Eswatini’s social assistance system to ensure regular and predictable support for vulnerable groups is critical.

The low coverage and intensity of Eswatini’s social assistance programmes are seen as significant contributing factors to their lack of cost effectiveness (as noted by Raju and Younger, 2021 and Schubert, 2020) . This review emphasised the need for greater investment not only in program funding but also in staffing and administrative capacity. It also noted that under-resourced systems hinder the implementation of quality, cohesive programs, and that development partners must be mindful to invest in realistic and scalable programmes, rather than initiatives that the government cannot adopt if and when external finance dries up<sup>63</sup>.

<sup>59</sup> ILO 2024: 210.

<sup>60</sup> Phelps 2022: 7.

<sup>61</sup> ILO, 2024: 10.

<sup>62</sup> Raju and Younger, 2021

<sup>63</sup> Ibid: 11

## 6. SOCIAL ASSISTANCE PROGRAMMES IN ESWATINI

Social assistance programmes in Eswatini are mainly funded and administered by the Government of Eswatini, with some support from international development partners. None of the programmes below are contributory. The social assistance programmes within scope for this review are those with the largest numbers of beneficiaries reported in the Swaziland Household Income and Expenditure Survey (SHIES) 2016/17 (according to World Bank analysis, 2021): the Older Persons Grant (OPG), Neighbourhood Care Points (NCPs), SFP, OVC Education Grant, Emergency Food Aid and the DG. These are all covered by the NSPSP, and will also be covered by the NSAP when it is finalised.

### 6.1 Social assistance programme design

The following section will review **programme design** across the five main social assistance programmes in Eswatini, examining benefits and service packages (including coverage and comprehensiveness), choice of and links between programmes, targeting and eligibility, and adequacy and predictability<sup>64</sup>.

#### 6.1.1 Benefits and service packages

- a. **Older Persons Grants:** introduced in 2005, is a non-contributory, universal cash transfer targeting citizens aged 60 and above. The program aims to alleviate poverty among the older adults who are not covered by contributory social insurance, many of whom care for orphaned grandchildren due to the high prevalence of HIV/AIDS in the country. It is a categorically targeted grant for resident citizens or permanent residents meeting the age criteria – aged 60 years and older, who are not receiving any other social grant (though others in the household may receive social grants). The program has undergone several assessments, highlighting its positive impact on household welfare, including improved food security and reduced vulnerability. It is administered by the DSW, under the DPMO (Freeland 2020 and DPMO 2023).
- b. **Neighbourhood Care Points (NCPs)** Targeting orphaned or vulnerable children of pre-primary age, where the main objective is to provide in-kind health, food, psychosocial support and basic education through Early Childhood Care and Development (ECCD) Programme. The Ministry of Tinkhundla Administration and Development (MTAD) coordinates the programme. These services are largely supported by partners and NGOs (WFP, Taiwan Fund for Children, Bantwana, Young Heroes) and are provided in fixed, physical centres staffed by community volunteers across the country (NSPSP 2023).
- c. the **SFP** subsidises “cooked lunches for students in government primary, secondary, and high schools.”<sup>65</sup> The MOET administers this programme. The government's SFP aims to provide one “cooked meal every school day for each student in government primary, secondary, and high schools.”<sup>66</sup> It has operated in all government primary schools since 2009 and secondary and high

<sup>64</sup> Barca and Mejia 2023 (<https://www.dai.com/uploads/STAAR%20Solar%20System%20Framing.pdf>)

<sup>65</sup> Raju and Younger, 2021.

<sup>66</sup> Ibid.

schools since 2014. The SFP is financed and administered by the (MoET) and WFP. (NSPSP 2023).

- d. **OVC Education Grants** are bursaries “through which the government subsidises part of tuition and exam fees for orphaned and vulnerable children attending public lower and senior secondary schools.”<sup>67</sup> The programme is funded by the government and administered by the DSW along with the Ministry of Education and Training, (NSPSP 2023), although this is due to fully move to MOET.
- e. The **Emergency Food Aid Programme** distributes food commodities to households facing acute food insecurity. These transfers were introduced in 2006 to improve food security and community participation for vulnerable households in drought-prone regions of Eswatini, Households receive either maize meal, corn, soya blend or oil monthly.
- f. In addition to this, WFP Emergency Food Aid provides delivery of unconditional food and cash assistance and nutrition support to address acute food insecurity in coordination with the NDMA. This also includes cash transfers, cash for assets programming (with the Ministry of Public Works and Transport) and resilience-building activities such as livelihoods training. In 2021, WFP-led crisis response covered 120,000 people<sup>68</sup>.
- g. The **Disability Grant** is a categorical monthly grant, led by the Disability Unit in the DPMO, paid at a flat rate per individual recipient. While this has increased in reach and benefit level in recent years, it is not payable along with other benefits, or subject to top-ups according to the severity of disabilities or any other assessed need. Eligibility is assessed by government officials.

**Other associated programmes** (either too small to meet the World Bank’s threshold for review, or classified as social security in the NSPSP) include the Phalala Medical Fund, Community Public Works Programme and the Accident Victims’ Fund. There is also the Ex-Serviceman’s Grant (social assistance for war veterans who served in the 1st and 2nd World Wars, and their widows). The Child Headed Households Resilience programme is also operated by the DPMO and targets children heading households with vocational training; however it is also extremely small (reportedly E1.7 million in 2024, around USD 90,000)<sup>69</sup>. The Public Assistance Grant has, historically, been for vulnerable people of working age, delivered on a short term basis for temporary relief for those in an acute state of vulnerability.

### Choices, coverage and comprehensiveness

Overall, some clear choices have been made regarding who and where in the life cycle is prioritised. A 2022 WFP assessment<sup>70</sup> found that social protection coverage is ‘relatively good’ but unevenly spread across the population. In aggregate, it found that the OPG covers around 89% of those aged 60 and older<sup>71</sup>, whereas 15% of children, 5% of people living with disabilities and 23.1% of eligible individuals for emergency food assistance were covered by social assistance instruments<sup>72</sup>. Given that women predominantly provide care for dependents, they are disproportionately vulnerable to the

<sup>67</sup> Raju and Younger, 2021.

<sup>68</sup> Phelps 2022: 5

<sup>69</sup> <https://www.africa-press.net/eswatini/all-news/dpmo-sets-e1-7m-for-child-headed-households>

<sup>70</sup> ‘Assessment of shock responsive social protection in Eswatini’, Phelps for OPM/WFP (2022: 4)

<sup>71</sup> Ministry of Economic Planning and Development (2022). Multidimensional child poverty in the Kingdom of Eswatini (UNICEF), in Phelps 2022: 8

<sup>72</sup> Ibid.

negative consequences of insufficient social assistance coverage and lack of comprehensiveness across the lifecycle.

The OPG and means-tested DG are both categorical grants designed to address poverty and vulnerability, and to support life-cycle needs. However, despite commitments to a life-cycle approach in Eswatini’s social protection policies, Eswatini does not yet have comprehensive coverage, or a plan that would clearly move the country further towards this.

**Box 1** below provides an example of how lower income countries can enact reforms and transition towards a more comprehensive lifecycle approach, by looking at recent developments in Mozambique. While imperfect, Mozambique’s approach recognises that poverty and vulnerability manifest differently at different life stages, offering tailored support (e.g., child grants specifically for the critical early years 0-2). Eswatini could target appropriate social assistance interventions at all critical development stages. At present, critical life stages are either only covered in a piecemeal way (e.g. infancy, adolescence) or almost entirely missing (e.g. pregnancy). The integration of financial support with complementary interventions (nutrition education and case management), also enhances the effectiveness of social protection by addressing multiple vulnerabilities simultaneously; this is an achievable approach for Eswatini, too.

**Box 1: Mozambique’s transition towards a life-cycle approach**

Mozambique’s experience offers lessons for other lower-income countries seeking to adopt a lifecycle approach to social protection. The country is transitioning its social protection system from general poverty relief to a comprehensive lifecycle approach, recognizing that individuals have different needs at various life stages. This shift aims to break the cycle of poverty and foster long-term human development.<sup>73</sup>

Recent reforms are guided by the National Basic Social Security Strategy (ENSSB) for 2016-2024, which provides a framework for a national SPF. The ENSSB promotes a gradual approach to supporting vulnerable groups, reducing extreme poverty, and enhancing food security.<sup>74</sup>

Mozambique has also integrated climate adaptation into its social protection framework through initiatives like the LINK project, which aims to enhance the climate resilience of vulnerable populations.<sup>75</sup>

The Child Grant 0-2 program provides unconditional cash transfers to caregivers of children aged 0-2 years. The "cash-plus" component includes a bimonthly transfer of 540 MZN (around 9 USD), along with nutrition education and case management support. This program has shown promising results in reducing poverty and improving child well-being.<sup>76 77 78</sup>

Mozambique also provides both contributory and non-contributory disability and old-age benefits. Contributory benefits are available to those who have contributed to social insurance schemes,

<sup>73</sup> Adapted from Mause, M. and Cunha, N. 2010. *Setting up a social protection floor: Mozambique. Successful Social Protection Floor Experiences, Volume 18*. Available at <https://www.socialprotection.org/gimi/Media.action.jsessionid=aGlpVbxJCIA1duaviqkSMFKmbOAKsOU5XNQ0nFNQ6nYloc3ZAt!-16176753?id=11314> [Accessed: 27 January 2025] and Social Protection. 2020. *Lifecycle approach*. Available at: <http://socialprotection.gov.bd/blog-post/lifecycle-approach/> [Accessed: 27 January 2025].

<sup>74</sup> Ibid.

<sup>75</sup> SAP042: Building Climate Resilience by Linking Climate Adaptation and Social Protection through Decentralized Systems. 2022. *Decentralized Climate Adaptation Project*. Available at: [specific URL not visible, clarify if needed] [Accessed: 27 January 2025].

<sup>76</sup> Nombora, G. (2024). *Mozambique’s Child Grant Programme: Case management for gender-based violence (GBV) and intimate partner violence (IPV) reduction*. *socialprotection.org*. Available at: <https://socialprotection.org/discover/blog/mozambique%E2%80%99s-child-grant-programme-case-management-gender-based-violence-gbv-and> [Accessed: 27 January 2025].

<sup>77</sup> Kusoffsky, J. 2022. *UNICEF Mozambique shows how 'Cash and Care' Accelerate Child Well-being*. UNICEF Mozambique. Available at: <https://www.unicef.org/mozambique> [Accessed: 27 January 2025].

<sup>78</sup> The Transfer Project. 2019. *Mozambique*. Available at: <https://transfer.cpc.unc.edu> [Accessed: 27 January 2025].

while non-contributory benefits are provided through the Basic Social Subsidy Program (PSSB) to those who meet specific criteria.<sup>79</sup>

One particularly notable gap in Eswatini is that there is no non-contributory maternity and child benefits, as there is in many other SSA countries (see Box 2 below for an example from South Africa). This affects women and girls disproportionately, as the main caregivers within households.

**Box 2: Maternity and child benefits in South Africa**

South Africa's Child Support Grant (CSG)<sup>80</sup> is a means-tested, non-contributory cash transfer program for children under 18 years of age. It is one of the largest social assistance programs in Africa, reaching over 13 million children. The CSG aims to alleviate poverty and improve the well-being of children.<sup>81</sup> The CSG provides a flat rate benefit of R500 per child per month. It is administered by the South African Social Security Agency (SASSA) and is funded from government revenues. The grant is targeted at the primary caregiver, who is usually the child's mother.<sup>82 83</sup>

The CSG has had notable positive effects including enhanced child nutrition, especially for girls and those not born with low birth weight, increased school enrolment and attendance, especially among girls, alongside better cognitive skills and test scores in maths and reading, reduced child labour, particularly for girls receiving the grant early in life, improved child health and decreased risky behaviours in adolescents, including transactional sex, early pregnancy, and substance use.

It also means that many children are left behind<sup>84</sup> though children under 14 years of age make up 36% of the population. (WFP 2022). While OVC Education Grants, NCPs and SFP all target children of different ages, these are very partial in their coverage. OVC Education Grants and School Feeding, by their nature, only benefit those in school, and while they are at school. While this accounts for most children in primary school (around 95% of children attend school, with no significant differences between genders or between rural and urban areas<sup>85</sup>), this drops significantly for children in secondary schooling; 57% of children complete lower secondary education and 37% complete upper secondary<sup>86</sup>.

<sup>79</sup> Adapted from Mause, M. and Cunha, N. 2010. *Setting up a social protection floor: Mozambique. Successful Social Protection Floor Experiences, Volume 18*. Available at <https://www.social-protection.org/gimi/Media.action;jsessionid=aGlpVbxJCIIA1duaviqkSMFKmbOAKsOU5XNQ0nFNQ6nYloc3ZAt!-16176753?id=11314> [Accessed: 27 January 2025] and Social Protection. 2020. *Lifecycle approach*. Available at: <http://socialprotection.gov.bd/blog-post/lifecycle-approach/> [Accessed: 27 January 2025].

<sup>80</sup> UNICEF. (2012). *South African Child Support Grant: Impact Assessment 2012 Summary*. Available at: <https://www.unicef.org/southafrica/media/1121/file/ZAF-South-African-child-support-grant-impact-assessment-2012-summary.pdf> [Accessed: 27 January 2025].

<sup>81</sup> Government of South Africa. 2014. *Child Support Grant*. Available at: <https://www.gov.za/services/child-care-social-benefits/child-support-grant> [Accessed: 27 January 2025].

<sup>82</sup> Ibid.

<sup>83</sup> UNICEF. (2012). *South African Child Support Grant: Impact Assessment 2012 Summary*. Available at: <https://www.unicef.org/southafrica/media/1121/file/ZAF-South-African-child-support-grant-impact-assessment-2012-summary.pdf> [Accessed: 27 January 2025].

<sup>84</sup> Schubert (2020) <https://www.calpnetwork.org/wp-content/uploads/ninja-forms/2/pop4.281.pdf>

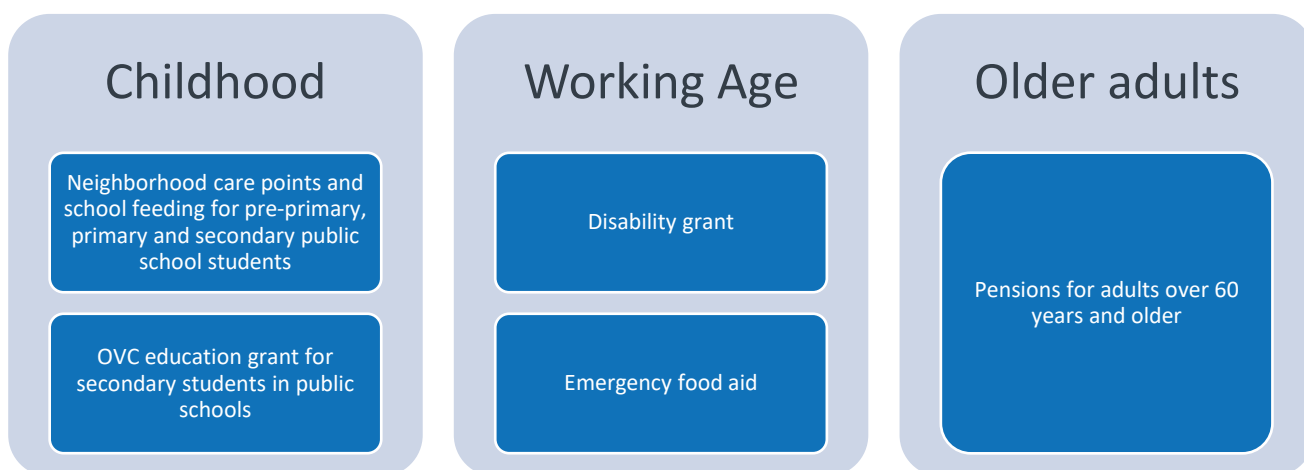
<sup>85</sup> UNICEF Eswatini Country Office Annual Report 2023

<sup>86</sup> Ibid.

According to the Education Strategic Plan<sup>87</sup>, “Compared to their peers, orphaned students are more likely to drop out because of the cost of schooling, and pregnancy among girls. They are less likely to drop out because of poor performance. The most common reason for orphaned students aged 15–21 years dropping out was the cost of schooling (40 per cent), and this was a more common reason than for nonorphaned children (36 per cent) (World Bank, 2021a).<sup>88</sup> Orphaned students were also more likely to drop out because of becoming pregnant (22 per cent compared to 18 per cent). When it comes to poor performance leading to dropout, this was less common for orphaned students (13 per cent) than for non-orphaned students (19 per cent).”<sup>89</sup>

There is relative gender parity in enrolment and attendance; figures are broadly slightly better for girls<sup>90</sup>. However girls face additional barriers to school attendance throughout the school year; for example, the absence of suitable sanitation facilities at school leads to increased absenteeism<sup>91</sup> (estimated by the Taiwan Fund for Children and Families as approximately four days per month)<sup>92</sup> - times when they will miss out on both meals and education. The National School Feeding Programme Evaluation notes the gender specific risks faced by girls (linked to menstruation, their specific nutritional needs, and risk of pregnancy/need for links to SRH services) but the programme itself (or (9apparently any others) does not put measures in place to address these.

Apart from the Disability Grant and Emergency Food Aid, there are no social assistance programmes for working age adults. There are social insurance/security programmes outside the scope of this exercise.



<sup>87</sup> Government of Eswatini. 2022. Eswatini Education Sector Strategic Plan (2022–2034). Mbabane: Government of the Kingdom of Eswatini. Available at: [https://www.gov.sz/images/Health/Eswatini\\_Education\\_Sector\\_Strategic\\_Plan\\_FINAL.pdf](https://www.gov.sz/images/Health/Eswatini_Education_Sector_Strategic_Plan_FINAL.pdf) p49 [Accessed: 12 March 2025].

<sup>88</sup> Government of Eswatini. 2022. Eswatini Education Sector Strategic Plan (2022–2034). Mbabane: Government of the Kingdom of Eswatini. Available at: [https://www.gov.sz/images/Health/Eswatini\\_Education\\_Sector\\_Strategic\\_Plan\\_FINAL.pdf](https://www.gov.sz/images/Health/Eswatini_Education_Sector_Strategic_Plan_FINAL.pdf) p49 [Accessed: 12 March 2025].

<sup>89</sup> Ibid.

<sup>90</sup> Ibid.

<sup>91</sup> <https://www.wesnetwork.org/wp-content/uploads/2020/06/MHM-in-Swaziland-1.pdf>

<sup>92</sup> [https://international.ccf.org.tw/news\\_detail/News%20Articles/newsarticles/Eswatini231002](https://international.ccf.org.tw/news_detail/News%20Articles/newsarticles/Eswatini231002)

**Table 1: Eligibility and Coverage of Eswatini’s Social Assistance Programmes - summary**

Programme	Eligibility and Coverage	% of target population covered
<b>*Older Persons Grant</b>	<ul style="list-style-type: none"> <li>Universal targeting; recipients must be at least 60 old, a Swazi Citizen or permanent resident, live in Eswatini and not receive any other regular social grant for themselves (though they can receive emergency assistance and children in their household can receive the OVC Education Grant)<sup>93</sup></li> </ul> <p>94</p>	<ul style="list-style-type: none"> <li>89% of over 60s (in Phelps 2022)<sup>95</sup></li> </ul>
<b>Neighbourhood Care Points</b>	<ul style="list-style-type: none"> <li>Primarily targets OVCs aged 0–18 years, who are particularly at risk. While originally aimed at OVCs, the plan has expanded to include all children within the specified age group who require support, not just those in emergency situations.</li> <li>It is estimated that 43% of the total population of Eswatini are children, and 50% of these children face some form of vulnerability that compromises their well-being. This means approximately 21.5% of the country’s total population (or 250,000 children) are potential beneficiaries of NCP services.<sup>96</sup></li> <li>WFP’s annual report 2023 states that they reached a total of 54,662 beneficiaries through the NCP programme<sup>97</sup></li> </ul>	<ul style="list-style-type: none"> <li>“about 1,700 neighbourhood care point centres located in communities and providing services for about 52,000 children under the age of 8 years<sup>98</sup>.”</li> <li>There is not sufficient monitoring data to estimate the proportion of vulnerable children receiving NCP services.<sup>99</sup></li> <li>World Bank estimates (2021, from 2016/17 data) state that NCPs reach around 4% of the whole population, though more up to date data is needed.</li> </ul>

<sup>93</sup> Deputy Prime Minister’s Office. N.d. “Programmes and services offered”. Accessible: <https://www.gov.sz/index.php/departments-sp-767085135/social-welfare-department> . Accessed: 23 November 2023 via socialprotection.org 16 Dec 2024

<sup>94</sup> Raju and Younger - <https://openknowledge.worldbank.org/bitstream/handle/10986/35747/Social-Assistance-Programs-and-Household-Welfare-in-Eswatini.pdf?sequence=1&isAllowed=y> -

<sup>95</sup> MoEPD/UNICEF

<sup>96</sup> Neighbourhood Care Point Strategic Plan (2023–2028)

<sup>97</sup> [https://docs.wfp.org/api/documents/WFP-0000157761/download/?\\_ga=2.160499641.502682815.1735843084-552567019.1727859997](https://docs.wfp.org/api/documents/WFP-0000157761/download/?_ga=2.160499641.502682815.1735843084-552567019.1727859997)

<sup>98</sup> Government of Eswatini 2022: 39.

<sup>99</sup> Ibid.

<p><b>School Feeding Programme</b></p>	<ul style="list-style-type: none"> <li>• Pre-primary, primary and secondary school students enrolled in public schools</li> <li>• WFP evaluation (2018) reports 845 public schools were covered (all public primary schools); 367,886 students.</li> <li>• Additionally, WFP’s annual report in 2023 states that they reached a total of 24,324 beneficiaries through the home-grown school feeding (HGSF) programme<sup>100</sup></li> </ul>	<ul style="list-style-type: none"> <li>• WFP evaluation (2018 reports 100% of government primary students covered, and 60.8% of secondary students.</li> <li>• 18% of primary school students and 50% of secondary school students were classified as OVCs during the evaluation period<sup>101</sup>.</li> <li>• However data showing what proportion of OVCs are covered is not available. The report notes gaps in monitoring and evaluation, including the lack of baselines and targets for assessing inclusion and exclusion errors. The program design mentions targeting vulnerable children, but systematic tracking of these processes is insufficient<sup>102</sup>.</li> </ul>
<p><b>*OVC Education Grant</b></p>	<ul style="list-style-type: none"> <li>• The child must be a Swazi citizen, a single/double orphan or from a vulnerable household, enrolled in in public secondary school</li> <li>• 58,847 learners were supported during the 2024 financial year (note that this is a partial year figure)</li> </ul>	<ul style="list-style-type: none"> <li>• The enrolment data shows 120,790 learners were enrolled in secondary education, meaning the grant covered approximately 49% of learners. It is not clear what proportion of eligible children are actually covered. <sup>103</sup></li> <li>• World Bank analysis from 2021 (based on 2016/17 figures) indicates that 4% of the whole population is reached by OVC Education Grants<sup>104</sup></li> </ul>
<p><b>*Disability Grant</b></p>	<ul style="list-style-type: none"> <li>• Disability card holders; inability to work for six months or longer for a temporary grant, and unable to work for a year for a permanent grant</li> <li>• DPMO report that 15,303 people are receiving the disability grant<sup>105</sup>.</li> </ul>	<ul style="list-style-type: none"> <li>• 176,184 people - 16.1% - of Swaziland’s population is comprised of disabled people people, with 58% being female and 42% being men<sup>106</sup></li> <li>• This would mean that approximately <b>8.69%</b> of people with disabilities in Swaziland are receiving the DG<sup>107</sup>; no sex disaggregated figures are available.</li> </ul>

<sup>100</sup> [https://docs.wfp.org/api/documents/WFP-0000157761/download/?\\_ga=2.160499641.502682815.1735843084-552567019.1727859997](https://docs.wfp.org/api/documents/WFP-0000157761/download/?_ga=2.160499641.502682815.1735843084-552567019.1727859997)

<sup>101</sup> WFP, 2019, p. 10)

<sup>102</sup> WFP, 2019: 12-15.

<sup>103</sup> INTERDEM Management Consulting. (2024). *Diagnostic Study - Secondary Education OVC Grant: Strengthening Education and Skills Training Systems to Support Human Capital in Eswatini*. Prepared for the Ministry of Education & Training (MOET) and Deputy Prime Minister’s Office (DPMO), Kingdom of Eswatini. Unpublished report.

<sup>104</sup> Raju et al 2021

<sup>105</sup> DPMO presentation, n.p., 2024. This is slightly at odds with a Times of Eswatini article from Feb 2024 stating that the number was 14,459, but this discrepancy may be due to different reporting periods

<sup>106</sup> DPMO presentation, n.p., 2024

<sup>107</sup> Although the aforementioned Times of Eswatini article estimates around 10% of people with disabilities are in receipt of the grant

		<p>However only those with severe functional disabilities are targeted by the DG. It is not clear if the DPMO figures include those with less severe disabilities.</p> <ul style="list-style-type: none"> <li>• If this estimate is correct (if DPMO figures also represent those with severe functional disabilities) it appears that coverage is increasing; a 2022 WFP assessment estimated that 5% of people with disabilities were receiving the DG<sup>108</sup>).</li> </ul>
<p><b>Emergency Food Aid</b></p>	<ul style="list-style-type: none"> <li>• Limited administrative information on government beneficiary numbers and outlay<sup>109</sup></li> </ul>	<ul style="list-style-type: none"> <li>• Approximately 23.1% of eligible individuals are covered by Government Emergency Food Aid during lean seasons<sup>110</sup>.</li> <li>• In 2022 WFP reported that WFP Emergency Food Assistance meets around 35% of the needs identified by the Eswatini Vulnerability Assessment Committee (EVAC) for the lean season response<sup>111</sup>.</li> </ul>

<sup>108</sup> Phelps 2022

<sup>109</sup> Raju and Younger 2021, based on 2016/17 data

<sup>110</sup> Phelps for WFP/OPM 2022: 4, based on 2016/17 data as above

<sup>111</sup> Phelps for WFP/OPM 2022: 3

### 6.1.2 Adequacy, predictability and reliability

Historically, the OPG has exhibited low actual versus expected transfers (Phelps 2022: 7). The DPMO introduced a new payment schedule in April 2023, stating that beneficiaries receiving grants via mobile phones (Mobile Money (Momo)) would now receive their payments in the first week of every month. This adjustment aimed to address previous inconsistencies and enhance the predictability of grant disbursements<sup>112</sup>. However it is difficult to verify whether this has actually been the case; this assessment was not able to access any information on routine monitoring of the Office of the Auditor-General (OAG). One local leader commented that *"Sometimes the elderly grant is delayed, and the elderly people suffer because they depend on that money for their basic needs."* (Local leader KII). Others commented on the adequacy of the grant: *"The OPG has helped to reduce poverty among older persons, but the amount is too small to make a significant difference in their lives."* (NGO KII). However the levels of the OPG have been progressively increasing over time, at a faster rate than inflation (Freedland)<sup>113</sup>.

The DG has also sought to become more systematic, with monthly payments scheduled at designated pay points. This review did not collect any data on whether this is actually the case, although there were several reports from qualitative interviews that backlogs can be long, even when people have applied and qualified for the programme. It is also widely acknowledged to be inadequate to meet the needs of individuals with disabilities and does not consider the income losses incurred by caregivers<sup>114</sup>.

For the other programmes, reports of unpredictability and unreliability are very common. This evidence tends to come from evaluations by development partners (WFP evaluations of the SFP, Neighbourhood Care Points, and the recent World Bank diagnostic study of the OVC Education Grant). It was also reflected in focus group and KIIs, along with the impacts of inflation on food availability. *"Another thing that we have noticed even though the organization we are working for is currently on school feeding, we are discovering that as the years pass by, the food in the school is declining, we are aware that they are claiming to be budgeting hence then the money towards the SFP declines then you find that some schools do not get this support."* (NGO FGD). The main challenges for the programme have been insufficient food supply, primarily due to funding constraints and limited local production capacity. It is also worth noting that the SFP provides one hot meal a day (lunch), although this has been supplemented with breakfast as part of a shock-responsive intervention (during an El Nino-related drought).

However the education sector policy "proposes to increase the average OVC education grant from E3,060 to E4,000 by 2025/26"<sup>115</sup> to assist students in meeting nonfee expenses. This necessitates an increase to the annual allocation for OVC education grants by about E25 million by 2025/26 (DPMO and DSW).<sup>116</sup> "The policy also states that "At the secondary level, the principal mechanism for assisting poor and vulnerable students is the OVC education grant. While decisions regarding the magnitude and distribution of OVC education grants can have important implications for participation in secondary education, these resources are not managed by MoET and have not been included in the Education Sector Strategic Plan (ESSP) annual recurrent spending requirements for MoET"<sup>117</sup>. However, ESSP projections for the cost of secondary education include the expansion of the OVC education grant needed to meet the demands of the increasing enrolment, together with a simulation

<sup>112</sup> As reported in: Africa-Press. (2023). 'The DPM's Office announces new elderly grant payment dates', *Africa-Press*, 29 March. Available at: <https://www.africa-press.net/eswatini/all-news/the-dpms-office-announces-new-elderly-grant-payment-dates> [Accessed: 12 March 2025].

<sup>113</sup> Freedland 2020: <https://www.developmentpathways.co.uk/blog/crocodiles-and-croco-dials/>

<sup>114</sup> 'Proposals towards a Disability Grant Design for Eswatini Final Report (draft)', 2024, p. 38-39

<sup>115</sup> Government of Eswatini 2022: 127.

<sup>116</sup> Ibid.

<sup>117</sup> Ibid.

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of the costs of raising the grant amounts. This is to address the concerns expressed by education “stakeholders that the current grant levels left many students with significant ‘top up’ requirements that excluded them from continuing their studies.”<sup>118</sup>

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<sup>118</sup> Government of Eswatini 2022: 140.

**Table 2: Adequacy of Eswatini’s social assistance programmes – summary**

Programme	Amount/interval/adequacy	Predictability/reliability
<b>*Older Persons Grant</b>	<ul style="list-style-type: none"> <li>Approx. E500 per month USD25/month) (Freeland 2020 and DPMO 2023<sup>119</sup>).</li> </ul>	<ul style="list-style-type: none"> <li>Phelps (2022: 7) reports “a deficit in expected versus received payments for the OPG”.</li> <li>“Challenges such as administrative inefficiencies, delays in payments, and occasional mismanagement have been reported.<sup>120</sup>”</li> </ul>
<b>Neighbourhood Care Points</b>	<ul style="list-style-type: none"> <li>The broad scope of NCPs remit make this difficult to summarise. However food provision is inconsistent, with children typically receiving one meal per day instead of the recommended two.</li> <li>Essential service provision, such as basic education and psychosocial support, is not standardised<sup>121</sup>.</li> </ul>	<ul style="list-style-type: none"> <li>Food supply is inconsistent (resulting in fewer meals being available) and vary according to the local resources and support structures available.</li> <li>Rural NCPs and those not supported by NGOs tend to be less well resourced and consistent than urban/NGO supported NCPs.</li> </ul>
<b>School Feeding Programme</b>	<ul style="list-style-type: none"> <li>The WFP 2019 evaluation found that meals were inadequate in size and lacked diversity, falling short of recommended standards<sup>122</sup></li> </ul>	<ul style="list-style-type: none"> <li>The programme has broad coverage and strong policy support but faces challenges in reliability due to funding shortages, supply chain delays, and weak monitoring systems. These issues result in inconsistent food supply, missed meals, and unmet nutritional standards, particularly in remote areas. School gardens and emergency responses provide some support but are limited by resource constraints<sup>123</sup>.</li> </ul>

<sup>119</sup> <https://socialprotection.org/discover/programmes/elderly-grant>, Freeland 2020: <https://www.developmentpathways.co.uk/blog/crocodiles-and-croco-dials/>

<sup>120</sup> Swaziland Older Persons Grant Impact Assessment (UNICEF/Helpage 2010) -[https://socialprotection.org/discover/publications/swaziland-old-age-grant-impact-assessment-socialprotection.org/\(https://socialprotection.org/discover/programmes/elderly-grant\)](https://socialprotection.org/discover/publications/swaziland-old-age-grant-impact-assessment-socialprotection.org/(https://socialprotection.org/discover/programmes/elderly-grant)).

<sup>121</sup> Neighbourhood Care Point Strategic Plan (2023–2028)

<sup>122</sup> as per the Inqaba Manual and the National Framework for Food Security in Schools. From WFP SFP evaluation 2019

<sup>123</sup> WFP 2019

**\*OVC Education Grant**

- The grant is inadequate and covers only a portion of school fees (on average, only 10–50% of the actual costs incurred by learners). Additional costs range between SZL 3,200 and SZL 12,770 per learner.
- The grant has not been adjusted for inflation since its inception, which reduces its current value<sup>124</sup>.

**\*Disability Grant**

- The DG was recently (as of Feb 2024) revised upwards from E280 per month, to E400 per month.
- Recent analysis found that even if increased to E500, this would still be inadequate to meet the needs of households with disabled dependents<sup>126</sup>
- People in receipt of the OAG are excluded from the DG, as it is intended as income replacement, rather than meeting the additional costs of living with a disability.

**Emergency Food Aid**

- The emergency food aid programme aims to cover a month's worth of food needs for households, but the extent to which this meets daily caloric requirements is unclear. Cash-based transfers are recognized for their potential to improve dietary diversity and strengthen resilience, though their effectiveness can be limited by factors such as inflation and donor preferences<sup>128</sup>.

- Misalignment of disbursement with the academic year creates delays. Funds are typically released 2–3 months late, causing schools to demand deposits and exclude vulnerable learners. Schools rely on loans or credit, which adds financial burdens and increases deposit demands for parents<sup>125</sup>.

- There have been delays in payments (e.g. as reported by the Times of Eswatini<sup>127</sup>), but no government monitoring data was identified on payment reliability.

- Eswatini's emergency food aid program faces challenges in consistently meeting needs due to funding limitations, logistical issues, and weather-related shocks. Delays and supply irregularities persist, potentially affecting vulnerable households in hard-to-reach areas. Cash-based transfers offer a promising alternative for improving dietary diversity and household resilience<sup>129</sup>.

<sup>124</sup> World Bank diagnostic

<sup>125</sup> Ibid.

<sup>126</sup> 'Proposals towards a Disability Grant Design for Eswatini Final Report (draft)', 2024, p. 38-39

<sup>127</sup> See e.g. Facebook posts in May and June 2023, as well as articles in 2019 around temporary cuts to the beneficiary lists (<http://www.times.co.sz/news/123748-struggling-govt-cuts-disability-grants-beneficiaries.html>)

<sup>128</sup> Raju and Younger 2021, Phelps 2022

<sup>129</sup> Ibid.

### 6.1.3 Gender and age-related implications: Coverage

Sex and disaggregated data is not generally publicly available for Eswatini’s social assistance programmes, although an exercise (the Social Security Inquiry) was undertaken with ILO in 2023, which did reportedly improve sex disaggregation of data<sup>130</sup>, but this study did not uncover any further information on this. In general, there was little evidence of explicit differentiation by sex or gender at any stage in the programming process, from design, to monitoring and evaluation. This severely limits the gender and age analysis that can be undertaken in terms of inclusion and exclusion within programmes.

**Older Persons Grant:** According to 2017 Eswatini census data, of the 71,669 people aged 60 or above, 40% were men and 60% were women<sup>131</sup>. While at the time of writing, data was unavailable on the proportion of men and women in receipt of the OPG, it is clear that women live longer (with an average life expectancy of 61.81 years compared to a male average life expectancy of 57.62 years). Around 50% of women over 60 are widows<sup>132</sup>. While census data does not tell us what proportion of women and men are caregivers, it is fair to assume that a particularly large proportion of women will be caring for other family members. The OAG Impact Evaluation in 2010 reported widespread prevalence of ‘skip-generation’ households who had lost adult children to AIDS, where grandparents, particularly grandmothers, were caring for grandchildren. In this study, 64% of over 60s reported having lost at least one child in the past two years<sup>133</sup>. While dated, this study is likely to reflect a social trend still in evidence today.

**Neighbourhood Care Points:** There is no sex-disaggregated data available with respect to coverage of the NCPs. If such monitoring data were to be collected in future, this could be instructive with respect to the different services available, and accessed, through the NCPs.

**School Feeding Programme:** A recent (2022) evaluation<sup>134</sup> of the SFP provides sex-disaggregated data on the programme. This is not particularly instructive in terms of access to the programme (everyone attending school receives meals, and there is no variation between what is offered to different groups of children, including boys and girls). However the evaluation does yield observations on shortcomings within the programme’s design, and variations in the programme’s outcomes, according to gender (see section 6.2.3).

**OVC Education Grant:** While disaggregated figures are not consistently collected and reported on, World Bank research (2024) reports that girls are more likely than boys to benefit from grants due to their higher perceived vulnerability within households. This is due to their elevated risk of drop-out associated with their household domestic duties, caregiving roles, early pregnancy and gender specific needs such as menstrual hygiene products.

**Disability Grant:** The DG has a very high exclusion rate, with recent figures suggesting that around 9% of eligible people receive support (based on DPMO figures on the overall population of persons with disabilities, and current DG coverage). While the DSW **specify that** the severity of the disability is a primary consideration in determining access to support services, the exact methods of assessing severity and other eligibility details are not explicitly documented<sup>135</sup>.

Additionally, the **Swaziland National Disability Plan of Action (NDPA) 2015–2020** highlights the need to review eligibility criteria and program guidelines to eliminate any discrimination based on

<sup>130</sup> <https://www.social-protection.org/gimi/ResultAchieved.action?id=1342>

<sup>131</sup> <https://data.humdata.org/dataset/worldpop-age-and-sex-structures-for-eswatini>

<sup>132</sup> <https://dataspace.princeton.edu/handle/88435/dsp01b2773z959?utm>

<sup>133</sup> <https://www.helpage.org/silo/files/swaziland-old-age-grant-impact-assessment.pdf>

<sup>134</sup> World Food Programme (WFP). *Evaluation of the Eswatini National School Feeding Programme*. December 2022

<sup>135</sup> E.g. in the Eswatini Disability Handbook 2024:

<https://www.unicef.org/eswatini/media/1941/file/Eswatini%20Disability%20Handbook%202024.pdf.pdf>

gender or disability. This suggests an ongoing effort to refine and clarify the criteria for disability-related support services.

Gender considerations in eligibility criteria or outreach seem to be absent. While 58% of disabled individuals in Eswatini are women, the absence of sex-disaggregated recipient data limits the ability to evaluate gender equity in grant access. Disability prevalence increases with age, however, in Eswatini older adults are not able to receive both the Old-Age Grant and DG. This also contributes to high exclusion rates. There is also a need for data on variations in the level of potential recipients' needs (including gender and age dimensions) – perhaps a dedicated Disability MIS.

**Emergency Food Aid:** The Emergency Food Aid programme also has a high exclusion rate, only covering approximately 23.1% of eligible individuals during lean seasons. There is no disaggregated data available so it is not possible to analyse gender dynamics in terms of the programme's coverage<sup>136</sup>.

#### 6.1.4 Gender and age-related implications: Adequacy

Adequacy of cash transfer levels, overall, are a significant factor in how effective (cost-effective) programmes are in attaining their desired outcomes and, if set at too low a level, will not constitute good value for money<sup>137</sup>. In general, women are more deeply affected by inadequate levels of social transfers as they face higher dependency ratios, earn less than men, and bear cultural expectations to provide for families, making them more vulnerable when grants fall short. While there is little Eswatini-specific evidence on this, there is strong evidence across SSA that women will tend to spend more of social grants on others in the household than men (and indeed this was a finding of the 2010 evaluation of the OPG in Eswatini<sup>138</sup>). Predictability and reliability are also more important for those using the grant to care for other people, as they will bear the burden of managing household finances, making choices about how to meet essential needs (Section 6.1.4).

Life-cycle risks also compound these issues; women are more likely to be vulnerable in Older Persons due to their reduced earning capacity earlier in life, and more likely to be widowed due to their longer life span. They may also face additional barriers, for example being stripped of their assets (disinheritance and property grabbing) by their families and/or stigmatised and isolated by the community, sometimes due to expectations of extended mourning periods that increase economic hardships and psychological distress<sup>139</sup>. Nonetheless, women and men receive the same level of OPG, as it is designed as income replacement and not intended to support an entire household, as many older women do. Some considerations of the implications of this, and possible routes for positive reform, are offered up in the discussion and recommendations section.

There are also likely to be gender implications in the adequacy and predictability of the grant, particularly for women, who may face additional financial burdens - this is from the perspective of the grant recipient and for their caregiver/s. The OPG is intended as income replacement and not for use in supporting an entire household, yet for significant numbers of women this will be the case.

There is also no available data looking at the different needs of people with disabilities according to gender, nor is the grant currently designed to respond to differential needs; it is issued as a flat rate per individual. The designs of the DG and OPG are also currently not sensitive to intersectional needs. As soon as the person with disabilities qualifies for and receives the OPG, they are no longer eligible for the DG, though any additional costs associated with their disability will continue to bear on

<sup>136</sup> Phelps for WFP/OPM (2022) *Assessment of Shock Responsive Social Protection in Eswatini: Final Draft*. World Food Programme.

<sup>137</sup> Various studies have looked at what these levels should be; see for example [https://transfer.cpc.unc.edu/wp-content/uploads/2015/09/TransferProjectBrief\\_2013\\_The-cost-of-social-cash-transfer-programs-in-sub-saharan-africa.pdf](https://transfer.cpc.unc.edu/wp-content/uploads/2015/09/TransferProjectBrief_2013_The-cost-of-social-cash-transfer-programs-in-sub-saharan-africa.pdf). UNICEF and GoKE are also in the process of analysing and revising transfer levels for the Disability Grant in Eswatini.

<sup>138</sup> HelpAge 2010 reference

<sup>139</sup> See for example - <https://repository.up.ac.za/handle/2263/61211> and

the person and their household. While there are plans to rectify this, the two grants currently remain exclusionary. There is an example of more holistic practices from the region cited in Box 3, below:

**Box 3 - Integrating gender and disability considerations into social assistance grants in Southern Africa**

**Case Study: South Africa’s Grants to Persons With Disabilities**

South Africa has relatively good coverage (compared to its neighbours) with respect to the numbers of persons with disabilities (severe functional limitations) receiving social grants - 63 per cent receive at least one social grant compared to 23 per cent of persons without a disability. This is likely to be due to disability specific programmes, the Older Persons pension and a policy of equal access to mainstream grants, such as the Child Support Grant and the Foster Care Grant. Recipients of the Disability and OPG can access the Grant-in-Aid programme, in order to purchase additional support from carers.<sup>140</sup> The (inconsistent) exception to this is the Care Dependency Grant for children with disabilities, who cannot also access the Child Support Grant<sup>141</sup>.

Persons with disabilities can also access other benefits on an equal basis with others. The only exception is the Child Support Grant which cannot be accessed by children in receipt of the Care Dependency Grant. The rationale for this exclusion is questionable, since both schemes have different objectives: in effect, children with disabilities are being excluded from a scheme that could make an important contribution to their nutrition.<sup>142</sup> While there are other discrepancies in the system that are yet to be addressed, South Africa remains a leader in the region in terms of tackling poverty and inequality through social protection.<sup>143</sup> In particular, *the combined impact of social grants focusing on caregivers has had an important impact on decreasing the gender poverty gap (Woolard 2022)*<sup>144</sup>.

**Neighbourhood Care Points (NCPs):** Limited and inconsistent data on the adequacy, predictability, and reliability of resources made it difficult to draw specific conclusions about gender implications from secondary sources. However, a 2022 evaluation reported no evidence of government resource allocation to NCPs beyond training during the evaluation period. Many NCPs operate without proper physical structures, cooking and serving facilities, or sanitation amenities (EU 2022: 15).

Interviewees from multilateral agencies and NGOs highlighted the impacts of inadequate and unpredictable resourcing. NCPs lack structured funding and depend heavily on unpaid or minimally paid volunteer caregivers, most of whom are women. This reliance reinforces traditional gender roles, placing the burden of care on women and perpetuating economic inequalities. Caregiving responsibilities at NCPs limit women’s opportunities for education, income generation, and other activities. Additionally, inadequate resourcing leads to high caregiver-to-child ratios, with one respondent citing a ratio of 60:1 due to insufficient caregivers and high demand for the service.

<sup>140</sup> Kidd, S., Wapling, L., Bailey-Athias, D., and Tran, A. 2018. *Social Protection and Disability in South Africa*. Development Pathways. Available at: <https://www.developmentpathways.co.uk/> [Accessed 27 Jan. 2025].

<sup>141</sup> Ibid.

<sup>142</sup> Ibid.Esw

<sup>143</sup> Ibid.

<sup>144</sup> Woolard, I. 2022. *The role of social grants in economically enabling South African women - Women's Report*. Women's Report. Available at: <https://www.womensreport.africa/wr2022-paper-three/> [Accessed 27 Jan. 2025].

Lack of resources inevitably reduces the quality of services on offer, which in turn affects communities' level of engagement. Ultimately, this puts more children at risk of the poverty, vulnerability and abuse that NCPs are intended to prevent and mitigate. One local leader voiced their concerns about the downstream impacts of the lack of protective services; *"Another thing is that the children need to seek refuge from close relatives... That issue perpetrates the sexual violence of children. You find that a 14 year old is being sexually violated by a 60 year old."* (Local Leader KII)

This is all acknowledged within the Government's own NCP Strategic Plan, which states that "[The] unmet needs of caregivers included: financial incentives, capacity and working tools. This resulted [in] caregivers not prioritising their work working at the NCP." (GoKE 2023: 21). It also acknowledges a lack of capacity building for caregivers including ECCD and psychosocial support. Eswatini may learn from some examples in other countries where social protection programmes have been deployed to support caregivers are contributors to public works - see Box 4 for some examples:

**Box 4: Case study of supporting caregivers in social protection programmes**

Rwanda integrates support to caregivers into broader social protection initiatives in various parts of their system. One example is the the **Vision 2020 Umurenge Programme (VUP)**, a social protection program that aims to provide income security and support to vulnerable households<sup>145</sup>. Within the VUP, the **Public Works** component offers temporary employment opportunities, including caregiving roles<sup>146</sup>.

Rwanda also has programs specifically focused on empowering women in caregiving and community health. The **Certified Care** program, developed in partnership with SC Johnson and the Society for Family Health Rwanda, trains and empowers women to become certified Community Health Workers<sup>147</sup>. This program provides women with the skills and knowledge to earn a living wage for providing healthcare services, including caregiving, in their communities. The **Junior Caregiver Program (JCP)** focuses on increasing female youth employment and supporting early childhood development. This program provides young women with training and employment opportunities in caregiving roles, contributing to their economic empowerment and the development of the early childhood education sector<sup>148</sup>.

The VUP and its public works component have contributed to improving the living conditions of women and their families<sup>149</sup>. By providing income and employment opportunities, the program enhances women's economic security and reduces poverty<sup>14</sup>. The Certified Care program has been successful in empowering women and creating economic opportunities in the healthcare sector<sup>150</sup>. The JCP has also demonstrated positive impacts on female youth employment and early childhood development<sup>151</sup>.

<sup>145</sup> UN Women. (2024). *Beijing+30 Rwanda Country Report*. Available at: [https://www.unwomen.org/sites/default/files/2024-09/b30\\_report\\_rwanda\\_en.pdf](https://www.unwomen.org/sites/default/files/2024-09/b30_report_rwanda_en.pdf) [Accessed: 20 January 2025]

<sup>146</sup> Rohwerder, B., Müller, C., Hossain, N., & Nyamulinda, B. (2024). *'You Cannot Live Without Money': Women Balancing Paid Work and Unpaid Care Work in Rwanda*. Institute of Development Studies. Available at: [https://opendocs.ids.ac.uk/articles/online\\_resource/You\\_Cannot\\_Live\\_Without\\_Money\\_Women\\_Balancing\\_Paid\\_Work\\_and\\_Unpaid\\_Care\\_Work\\_in\\_Rwanda/26482558](https://opendocs.ids.ac.uk/articles/online_resource/You_Cannot_Live_Without_Money_Women_Balancing_Paid_Work_and_Unpaid_Care_Work_in_Rwanda/26482558) [Accessed: 20 January 2025].

<sup>147</sup> Hopebuilding. (2023). *How caregiving became a career in Rwanda*. Available at: <https://hopebuilding.blog/2023/06/12/how-caregiving-became-a-career-in-rwanda/> [Accessed 20 January 2025].

<sup>148</sup> YouthPower (n.d.) *Caregiver and Junior Caregiver Programme*. Available at: <https://www.youthpower.org/sites/default/files/YouthPower/files/resources/Junior%20Caregiver%20Program%20Rwanda.pdf> [Accessed 20 January 2025].

<sup>149</sup> UN Women. (2024). *Investing in women's safety and economic empowerment in Rwanda*. ReliefWeb. Available at: <https://reliefweb.int/report/rwanda/investing-womens-safety-and-economic-empowerment-rwanda> [Accessed: 27 January 2025].

<sup>150</sup> Hopebuilding 2023.

<sup>151</sup> YouthPower (n.d.)

The government's Strategic Plan also notes the inconsistency of food supply and of NCP structures, with many 'informal' NCPs being constructed of poor quality materials (GoKE: 19).

**School Feeding Programme:** Evaluations of both the SFP<sup>152</sup> NCPs have revealed similar challenges, including inconsistency and inadequacy in programme delivery. A WFP evaluation of the SFP highlighted issues such as inadequate food supplies, funding gaps, and inconsistent delivery, particularly in rural schools. These challenges may hinder the programme's effectiveness in retaining children in school and addressing gender-related barriers to education, such as early marriage and pregnancy for girls and pressure for boys to engage in child labour.

The evaluation also found that inconsistent funding negatively impacts the predominantly female workforce involved in the SFP, similar to NCPs. This includes increased workload and stress, limited opportunities for professional development, and potential for demotivation and burnout. The reliance on unpaid or underpaid female labour in the face of funding gaps reinforces existing gender inequalities and undervalues women's contributions.

**OVC Education Grant:** The inadequacy of the grant has gender and inclusion implications - girls and learners with disabilities and other specific vulnerabilities may have additional costs not covered by the (already inadequate) grant.

The recent (draft) OVC Diagnostic Report<sup>153</sup> highlights the increased risk of school dropout among girls due to teenage pregnancies. The financial burden of schooling, coupled with societal pressures, can force girls into transactional sex, increasing their vulnerability to early pregnancies and ultimately leading to their exclusion from education. (Interdem Management Consulting 2024, p. 14) This cycle perpetuates gender inequality and limits girls' future opportunities. Schools often require multiple sets of uniforms, creating a significant financial hurdle for vulnerable families - there may also be increased social stigma for girls if unable to meet these expectations. (Interdem Management Consulting 2024, p. 22) The inability to afford uniforms can lead to embarrassment, absenteeism, and eventually school dropout, re YouthPower (n.d.) enforcing unequal access to education.

The report also emphasizes the critical role of food in ensuring school attendance and retention, particularly for children from food-insecure households. Girls, often marginalized within families, may face greater food insecurity, impacting their health, concentration, and ability to learn. (Interdem Management Consulting 2024, p. 22) The grant's failure to address food costs exacerbates this vulnerability, further hindering girls' educational attainment and perpetuating the cycle of poverty. There does not seem to be any coherence between the SFP and the OVC Education Grant, both of which could be more effectively targeted according to need.

Household benefit amounts for **Emergency Food Aid** —equal to a month's food-commodity requirements- vary by household size. While it is important that the transfers are sensitive to household sizes and therefore responsive to those with high dependency ratios, in reality the programme is generally reported to be inadequate, erratic, and sometimes issuing poor quality food. As with the other programmes discussed above, this places additional burdens on caregivers responsible for managing the impacts of crises on the household, who are on balance more likely to be women.

Crises triggering the issuance of food aid tends to be climate-related, with most instances being foreseeable crises such as seasonal droughts. While work has been ongoing between government and partners (e.g. NDMA, DPMO and WFP) to plan for and develop a shock-responsive social

<sup>152</sup> Gandure, S., Sacolo, T. and Silaula, S. (2019). Evaluation of National School Feeding Programme in Eswatini 2010-2018. World Food Programme. Available at: <https://docs.wfp.org/api/documents/WFP-0000112238/download/> [Accessed: 27 January 2025].

<sup>153</sup> Interdem, 2024:14.

protection system rather than rely on short-term, cyclical programming - and to move from food to cash where possible - this remains work in progress<sup>154</sup>.

## 6.2 Social assistance programmes: implementation and delivery

This section returns to analysis of the same five programmes at **implementation/delivery level**. These are the “administrative functions necessary to deliver benefits or services to those in need, when in need”<sup>155</sup>. In this review, we have focused largely on targeting and administration (registration and delivery). However this level of the system also includes activities to promote awareness of entitlements and procedures (outreach, communications, sensitisation), accountability and feedback mechanisms, case management, monitoring and evaluation, and information systems underpinning delivery.

### 6.2.1 Awareness, communications and outreach

Many people may not be aware of their entitlements, let alone able to access them. In the MICS 2021-22, only 85.9% of people reported that they are aware of external economic support such as social assistance programmes, and 26.2% reported ever having received any such support. While these figures may not be typical given the timing of the survey (during the COVID -19 outbreak) there is no reason to assume that the figures would have been lower than at any other time<sup>156</sup>.

### 6.2.2 Targeting and delivery methodologies

**Overview of targeting:** The **OPG** and **DG** are both categorically targeted programmes. All over 60s (meeting some basic, non-poverty/wealth based criteria, see table 3) are eligible for the OPG. The process of qualifying for the DG<sup>157</sup> is more complex. Applicants must obtain a Disability Card through a medical assessment conducted by a senior nurse, medical practitioner, or medical board. Rejection rates are high. Eligibility is granted according to an assessment that the disability/ies renders the applicant unable to work for six months or longer for a temporary grant, and unable to work for a year for a permanent grant<sup>158</sup>. This is, however, subject to potential reform.

**School feeding** is largely universal (see ‘coverage’ section above). However during times of crisis (e.g. during droughts), more vulnerable groups may receive extra meals (as happened with the 2015/16 drought when these children also received breakfast)<sup>159</sup>.

The remaining social assistance programmes are directed through a degree of poverty and vulnerability targeting led by communities, with varying levels of systematisation. Households are “formally registered for **Emergency Food Aid** after community leaders validate their food insecurity status.”<sup>160</sup> Food aid (or sometimes emergency cash) is “expected to be distributed to households categorised as experiencing the severest food insecurity until the food aid supply brought to the community is exhausted.”<sup>161</sup> Decisions are guided by EVAC data, and local leaders help verify beneficiary lists. The government coordinates with partners like the World Food Programme (WFP) for technical support, but maintains control over the final distribution process.

Families benefiting from **NCPs**, according to the government strategy<sup>162</sup>, are identified through community-level initiatives in partnership with caregivers, local leaders, and organizations like Civil Society Organizations (CSOs) and Faith-Based Organizations (FBOs). Vulnerability factors such as

<sup>154</sup> Phelps 2022

<sup>155</sup> Barca et al - reference

<sup>156</sup> MICS 2021-22: 383.

<sup>157</sup> Set out in legal frameworks such as the Persons with Disabilities Act of 2018 and its 2022 Regulations

<sup>158</sup> <http://www.times.co.sz/news/134067-we-want-disability-grant-%E2%80%93-shot-civilians.html>

<sup>159</sup> Evaluation of National School Feeding Programme in Eswatini 2010-2018 (WFP, 2019)

<sup>160</sup> Raju and Younger, 2021.

<sup>161</sup> Raju and Younger, 2021.

<sup>162</sup> Government SP Strategy

malnutrition, lack of education, exposure to abuse, and poor living conditions guide eligibility, laid out in the National Minimum Standards for Care and Protection for the “systematic assessment of needs to ensure standardization across different areas”.

**Overview of delivery:** The two regular social assistance grants directly received by beneficiaries that were covered by this programme - the **OPG** and **DG** - are administered in different ways. The OPG has shifted towards using e-payments (MTN MoMo)<sup>163</sup>, and a 2022 EU Mission<sup>164</sup> found evidence from beneficiaries that they are satisfied with the new delivery mechanisms. The picture is less clear when it comes to the DG. While the EU evaluation (2022) states that these are also being made via e-payments, a more recent report<sup>165</sup> (UNICEF and Africa Disability Alliance (ADA) 2024) reported that payments are still being distributed via cash collection points such as Swazi Post offices (2024:35). In October 2022, DMPO announced disbursement dates for various regions, ensuring orderly distribution and reducing overcrowding at payment centres<sup>166</sup>. Interviewees indicated that there had been no assessment of issues in terms of roll-out and accessibility (e.g. low digital literacy or access to smartphones).

The others have rather diverse delivery methodologies. It appears that **NCPs** are not receiving financial support from the government (though remain a part of the National Social Protection Policy), but deliver food assistance and social services from community hubs to vulnerable families through a combination of other funding sources and volunteer staffing. **OVC Education Grants** are delivered directly to schools to administer and meet eligible childrens’ needs through waiving fees. **Emergency Food Aid** is delivered by NDMA and WFP, supported by local government officials and NGOs. It is distributed through a combination of centralized distribution centres (administered by local government and NGOs) and community-based delivery. Some WFP-supported recipients receive cash transfers in lieu of food<sup>167</sup>.

<sup>163</sup> EU 2022: 16. The Ex-Servicemen’s Grant is not covered in this review, but also uses E-payments.

<sup>164</sup> Ibid., 15.

<sup>165</sup> Eswatini Disability Grant Design Study: UNICEF and ADA (2024)

<sup>166</sup> Times of Swaziland - [https://www.times.co.sz/news/136950-elderly-disability-grants-payment-dates-out.html?utm\\_source=chatgpt.com](https://www.times.co.sz/news/136950-elderly-disability-grants-payment-dates-out.html?utm_source=chatgpt.com)

<sup>167</sup> (National Social Protection Policy and Strategy NSPSP, 2020-2025) - probably other references too

**Table 3: Targeting and administration of Eswatini’s social assistance programmes – summary**

Programme	Targeting methodology	Delivery methodology
<b>*Older Persons Grant</b>	<ul style="list-style-type: none"> <li>Eswatini follows an <i>on-demand targeting</i> approach, which relies on individuals to apply for the OPG. Applicants must have a national ID.</li> </ul>	<ul style="list-style-type: none"> <li>MTN MoMo (from 2023)<sup>168</sup></li> </ul>
<b>Neighbourhood Care Points</b>	<ul style="list-style-type: none"> <li>Recipients are identified through participatory community level initiatives. The National Minimum Standards for Care and Protection guide the systematic assessment of needs to ensure standardization across different areas<sup>169</sup>.</li> </ul>	<ul style="list-style-type: none"> <li>Existing mechanisms include the use of local community-based care points where support and services are delivered, often relying on volunteers and community caregivers to reach children and families<sup>170</sup>.</li> </ul>
<b>School Feeding Programme</b>	<ul style="list-style-type: none"> <li>Targeting of schools and students is universal (see table 2 above). However during times of crisis (e.g. during droughts), more vulnerable groups may receive extra meals<sup>171</sup>.</li> </ul>	<ul style="list-style-type: none"> <li>Components of the programme are: (1) Provision of one hot meal per child per day, with specific nutritional components. (2) Schools are required to have gardens that contribute to the meals (3) Nutrition education is delivered to students, cooks, and all parties involved in food handling. It is managed by MoET in collaboration with other partners</li> <li></li> </ul>
<b>*OVC Education Grant</b>	<ul style="list-style-type: none"> <li>Endorsement letters are required from chiefs and schools.</li> <li>Headteachers must confirm the learner’s enrolment in their school and their vulnerability. Vulnerability status includes: single or double orphans; children with unemployed parents with no source of income; child-headed households; children with mentally or terminally ill parents, children who have disabilities, or parents with disabilities. (NSPSP 2023).</li> </ul>	<ul style="list-style-type: none"> <li>The OVC Education Grant in Eswatini is primarily disbursed through direct transfers to (government) schools. Schools then manage the funds to meet selected students’ tuition and exam costs</li> </ul>

<sup>168</sup> Delisa Thwala. (2023). “Elderly to finally get grant”. Deputy Prime Minister’s Office. Accessible: [https://eswatinipositivenews.com/elderly-to-finally-get-grant/#google\\_vignette](https://eswatinipositivenews.com/elderly-to-finally-get-grant/#google_vignette) . Accessed: 23 November 2023 via socialprotection.org 16 Dec 2024

<sup>169</sup> Neighbourhood Care Point Strategic Plan 2023-2028, Government of the Kingdom of Eswatini, 2023.

<sup>170</sup> Neighbourhood Care Point Strategic Plan 2023-2028, Government of the Kingdom of Eswatini, 2023.

<sup>171</sup> Evaluation of National School Feeding Programme in Eswatini 2010-2018 (WFP, 2019)

<p>*DG</p>	<ul style="list-style-type: none"> <li>Eswatini follows an <i>on-demand targeting</i> approach, which relies on</li> <li>individuals to apply for the DG<sup>172</sup>. Eligibility rests on the possession of a Disability Card, which in turn requires that persons with disabilities apply for and be issued (via the Office of the Registrar) a Disability Card with the medical examination being done by a senior nurse or medical practitioner or a medical board determining the eligibility of the disability stating its type and severity, permanency or if temporary. A lack of qualified staff, facilities or outreach hampers access for people living in rural areas. Children with severe functional disabilities are also eligible for the grant.</li> </ul>	<ul style="list-style-type: none"> <li>In Eswatini, the DG is administered by DPMO and is disbursed to eligible beneficiaries through cash payments at designated centers:</li> </ul>
<p><b>Emergency Food Aid</b></p>	<ul style="list-style-type: none"> <li>Decisions are guided by EVAC data, and local leaders help verify beneficiary lists. The government coordinates with partners like the World Food Programme (WFP) for technical support, but maintains control over the final distribution process<sup>173</sup>.</li> </ul>	<ul style="list-style-type: none"> <li>Eswatini's National Disaster Management Agency (NDMA) delivers emergency food aid either as in-kind (maize, beans, cooking oil), through cash-based transfers (CBTs), depending on market functionality, or a combination of both<sup>174</sup>.</li> </ul>

<sup>172</sup> (Proposals towards a Disability Grant Design for Eswatini Final Report, 2024, p. 33).

<sup>173</sup> Workshop/interview responses - cite quotes

<sup>174</sup> Ibid.

### 6.2.3 Gender and age-related implications of targeting and delivery mechanisms

Aside from the overall selection of recipient age-related categories (e.g. over 60s for the OPG, school children for School Feeding etc), none of the programmes reviewed appeared to have any further gender or age sensitive/responsive considerations built into their stated or actual approaches. There are, however, many different gender and life-stage implications of the programmes in reality evident from primary and secondary sources.

**Targeting:** For the categorical grants delivered directly to beneficiaries (Older Persons and Disability) there are different gender and age equality considerations. The DG is intended as income replacement, and does not consider disability related costs. This is clearly a targeting issue for the OPG, as it is not possible for individuals to receive both the OPG and the DG.

With respect to registering for a Disability Card (a prerequisite for the DG), there are also hurdles that may particularly impact women and more vulnerable groups. A recent study<sup>175</sup> found that 47% of survey respondents had their applications rejected due to the lack of clarity on the required documents and confusion about assessment criteria. There were also areas of confusion around eligibility criteria, and the eligibility assessments themselves were found to be medically focused (excluding broader, more socially focused, considerations of disability<sup>176</sup>)

Other grants had different issues relating to the targeting process, often relating to the decision-making structure in place. As mentioned in the review of global literature, unless well-specified, implemented and monitored, community-based targeting methodologies carry certain risks of inclusion and exclusion error, particularly for individuals with low or no social or political capital<sup>177</sup>.

Interviewees operating at local level identified various problems with all community-based targeting practices. Some of these were technical - for example, it was reported that community leaders often struggle with the criteria set by NGOs and government organizations for identifying vulnerable individuals, and the lack of detailed assessments of household income and well-being was highlighted as a significant issue.<sup>178</sup> This relates to a general lack of rigour and observed inclusion and exclusion errors<sup>179</sup>. Others relate more to the space that is available - and used - for duty bearers at local level to make decisions that are at odds with the programme's intent. The gendered dimensions to the current approach taken to Community-Based Targeting (CBT) in Eswatini are discussed below.

While there are guidelines for the **OVC Education Grant** targeting process, in reality targeting is inconsistent and influenced by personal biases of chiefs, headteachers, and others involved in the process. There are reports of financial demands for endorsement letters, disadvantaging the poorest households, and selection of students being influenced by factors such as political loyalty or bias of chiefs.

The only potential gender bias noted by the study was a preference for including girls due to their perceived (and actual) higher barriers to remaining in education (risk of early pregnancy, household burdens), but this was not quantified or assessed in terms of whether the grant was actually effective in supporting girls to overcome these barriers. Nor is there evidence of any deeper gender assessment, including factors driving boys' early school dropout and strategies for retaining these boys in school. In general, the subjectiveness and lack of transparency in the process is a significant inclusion risk, as duty bearers' biases may compound pre-existing marginalisation and exclusion

<sup>175</sup> (Africa Disability Alliance and UNICEF, 2024)

<sup>176</sup> (Africa Disability Alliance and UNICEF, 2024)

<sup>177</sup> As observed in the Emergency Food Aid programme by Phelps for WFP/OPM (2022: 9)

<sup>178</sup> Note that we can't always give attribution to quotes given that this would identify the interviewees quite easily. This is one of those instances

<sup>179</sup> Same here

within communities (e.g. against children with disabilities, girls returning to school after childbirth). Certain groups are also excluded by design, including children of Swazi mothers and foreign fathers, teenage mothers returning to school, and HIV-positive or disabled children<sup>180</sup>.

However there are other nuances to gender-based inclusion and exclusion. The OVC Education Grant Diagnostic report identifies gaps in the definition of "vulnerable" children eligible for the grant. This ambiguity can lead to the exclusion of specific groups, such as teenage mothers, HIV-positive girls, or girls experiencing violence. (Interdem Management Consulting 2024, p. 12) Without clear criteria, decisions on grant allocation become subjective and potentially biased, further marginalising girls facing unique vulnerabilities. Overall, the absence of mechanisms to ensure uniform application of the selection criteria has led to the inclusion of ineligible children, while many vulnerable children are overlooked.

With respect to the meals issued through the **SFP**, no individual-level targeting strategies appeared to be in operation, and therefore the targeting programme seems to operate on an entirely gender-blind basis. It is not based on the differential needs of individual students, nor are opportunities taken to target any wrap-around or complementary interventions. The implications of this - and potential improvements that could be introduced to the programme - are discussed in section 9 below. The exceptions to this are ancillary aspects of the SFP. There have been examples of extra rations targeted to especially vulnerable students through the SFP in times of crises. The **HGSF Programme** has displayed promising practice, however, in terms of empowering the women farmers engaged in growing the food for the programme<sup>181</sup>. While this in itself is not social assistance per se, it is a good example of how gender-sensitive and responsive programmes can have wider societal benefits.

The Government's **Neighbourhood Care Point** Strategic Plan<sup>182</sup> explains that the NCPs were initially conceived as a community response to support vulnerable children, with a focus on OVCs. However, the new strategic plan expands the target group to all children (0-18 years) who need the services of an NCP, not just OVCs. This implies that the programme is inclusive and aims to provide support to any child in need. While this seems appropriate given the wide nature of the interventions being offered in theory, in practice there does not appear to be a systematic approach to assessing needs and channelling resources appropriately, and as noted above, the capacity and range of services delivered at NCPs vary extremely widely.

A recent study<sup>183</sup> looking at **Emergency Food Aid** highlights significant challenges in the targeting mechanisms used, particularly for women-headed households and other vulnerable groups. The programme relies on CBT, which, while leveraging local knowledge, is prone to biases and errors, resulting in only 23% of severely food-insecure individuals being reached (while no such in-depth studies seem to have been undertaken in Eswatini, various studies of CBT in similar programmes elsewhere note significant risks). Women-headed households are disproportionately affected by poverty and food insecurity due to structural inequalities, such as limited access to land, education, and employment. However, the current targeting mechanisms often fail to adequately account for these vulnerabilities, leaving women and girls at a greater risk of exclusion from much-needed assistance. This underscores the need for improved gender-sensitive approaches to ensure equitable access to emergency aid.

**Delivery:** Recent developments in the **OPG** program have focused on enhancing delivery mechanisms through the adoption of mobile money platforms, particularly in partnership with MTN MoMo. This shift aims to improve accessibility for beneficiaries, especially those in remote areas, by reducing the need for physical travel and ensuring timely payments. The transition is expected to empower elderly women by providing them with direct access to financial resources, fostering autonomy in financial decisions. However, challenges such as low digital literacy and susceptibility to

<sup>180</sup> 'Diagnostic study -Secondary Education OVC Grant' - draft, Interdem for MoET and DPMO (2024)

<sup>181</sup> <https://borgenproject.org/feeding-program-in-eswatini/>

<sup>182</sup> ref

<sup>183</sup> Phelps 2022

fraud among elderly women may remain significant barriers<sup>184</sup>. Addressing these issues through targeted education and robust security measures is essential to ensure the transition to mobile money is inclusive and maximizes its potential benefits for all recipients.

Disadvantaged women, particularly in rural areas, may find it especially difficult to access mobile money due to limited access to bank systems, phones or information. For those needing to make physical journeys for either registration, eligibility testing or picking up cash, women, people with disabilities and other vulnerable groups will often find it more difficult to travel, and may be open to exploitation or abuse. This is particularly the case when payment dates and locations are publicly advertised. People with mobility issues, for example, may need to rely on intermediaries, who may take advantage of this situation. For others, a lack of appropriate transport options essentially renders them ineligible for benefits. The cost of travel and, potentially, accommodation while accessing cash collection points are also a significant issue, and are likely to disproportionately affect those most in need, in the least accessible areas, and/or caregivers with responsibilities that tie them to the home. This includes both caregivers of the applicant, and the applicants themselves who may also be caregivers. Inconvenient application and collection processes also take applicants and caregivers away from work, school and other obligations.

Capacity constraints at local level impact on a range of issues for social assistance programmes, but particularly for outreach - communication with and delivery to marginalised groups, and the linking of vulnerable people to the range of programmes and support they need. It was indicated during interviews and the workshop that the local social work capacity required is simply not there, e.g.:

*“Social workers juggle a lot of work, there is field work, a child has been dumped, now you need to go with the police, you have to do all these things alone. Most of the time you find that there is an emergency but since you are short-staffed then you need to leave behind the long queue of people who need your assistance... Hence I do think that government needs to employ more social workers. Every place needs to have its social worker, the hospital, the court and so on. Currently, the workload currently is a lot.”* (Local service provider, FGD)

While the **DG's** move to mobile money transfers has improved efficiency, individuals in rural areas may face issues such as poor mobile network coverage, limited access to agents for cashing out mobile money, and technological literacy barriers. The uptake of mobile money in Eswatini is relatively good, and broadly, the move to mobile money can be considered extremely positive. However while an 87% financial inclusion rate is impressive, the 13% of the population without access may be the most vulnerable people of all<sup>185</sup>. Proxies help bridge these gaps, ensuring beneficiaries can still access their grants. Some still have to pick up the money due to lack of access. If and when physical pickups are needed, and/or proxies are appointed, it may render the most excluded potential recipients ineligible or vulnerable to exploitation. It is not clear how big a risk this is without any monitoring or grievance mechanism in place.

Some of the same issues may apply to **Emergency Food Aid**. Although this was not explored in the interviews and online literature is not specific, it seems that food aid is distributed through community based delivery, with transition in some areas from in-kind to cash transfers. FGD participants confirmed that it is necessary for recipients to travel for a vulnerability/eligibility assessment for food aid, however. Just as access to the DG is constrained or made more difficult for some groups given the need to physically access payment centres, so the same issues would apply for women and marginalised groups accessing assessments.

<sup>184</sup> Based on wider studies on gender, digital literacy, and mobile technology use rather than specific study of the Eswatini Older Persons Grant - see e.g. the GSMA Mobile Gender Gap Report - <https://www.gsma.com/mobilefordevelopment/resources/the-mobile-gender-gap-report-2022/>

<sup>185</sup> How We Made It In Africa. (2024). *Kenyan-built mobile money platform disrupts traditional banks' hold in Eswatini*. Available at: <https://www.howwemadeitinafrica.com/kenyan-built-mobile-money-platform-disrupts-traditional-banks-hold-in-eswatini/174832/> [Accessed 20 January 2025].

According to a 2022 report, the transition from food assistance to cash under the Emergency ‘Food’ Aid programme has been well received by communities, development partners and government.<sup>186</sup> Aside from the robust body of evidence demonstrating the benefits of cash assistance versus in-kind<sup>187</sup> in most situations, there are also well-documented gender benefits associated with cash transfers<sup>188</sup> - for example, as women are very often charged with maintaining overall household wellbeing, it gives them greater autonomy over how to distribute funds appropriately, rather than having their needs determined for them by donors. This has wider benefits in terms of women’s empowerment and dignity, and respects their ability to make decisions about household expenditure needs.<sup>189</sup>

The lack of evaluation or research evidence, and the large degree of variation in the service delivery offer makes it difficult to draw observations on the gender implications of how **NCPs Care Points** are delivered. However there are some general conclusions that can be drawn from what has been documented and commented on. The heavy reliance on under-supported female volunteers may serve to disadvantage women and further entrench them in poverty. The provision of meals, psychosocial support and other social services should help to protect and educate boys and girls, and the holistic nature of the NCPs have excellent potential to provide child-centred support to vulnerable children and their families. However inconsistent service provision is very likely to dilute the positive benefits offered by the NCPs, as families cannot rely on a consistent, quality service.

Some similar issues may be pointed up with respect to the delivery of the **SFP**. While the programme’s design should support retention of both boys and girls in school, dilution of the service that is delivered may undermine the overall intent of the programme. There is no apparent gender differentiation in the school feeding being delivered, although the reliance on under-resourced female labour to deliver the programme is an issue. However, as noted above, the **HGSF Programme** model does present some potential secondary benefits in terms of empowering and training the female farmers engaged in growing the food

<sup>186</sup> World Food Programme (WFP). (2023). *Changing Lives: Cash-Based Transfers*. Available at: <https://www.wfp.org/publications/changing-lives-cash-based-transfers> [Accessed 20 January 2025].

<sup>187</sup> Doocy, S. and Tappis, H., 2017. Cash-based approaches in humanitarian emergencies: a systematic review. *Campbell Systematic Reviews*, 13, pp.1-200. Available at: <https://doi.org/10.4073/csr.2017.17> [Accessed 13 Jan. 2025].

<sup>188</sup> World Food Programme (WFP) (n.d.) *Cash Transfers*. Available at: <https://www.wfp.org/cash-transfers> [Accessed 20 January 2025]. and cover this in the global evidence section

<sup>189</sup> Ibid.

## 7. GENDER EQUALITY AND RELEVANT SOCIAL CARE INSTITUTIONS, PROGRAMMES AND SERVICES

This review has not gone into the same level of detail on gender-focused institutions, programmes and systems as it has for the gender aspects of social assistance programming; however it does aim to give a broad overview of the key elements of this landscape. As with the other sections, it is based on a brief review of publicly available documents, some interviews, and also the stakeholder workshop undertook a participatory assessment of relevant programmes and services, including those relating to gender and protection.

### 7.1 Programmes

#### Gender equality and women's empowerment

The GoKE implements sector-specific initiatives to advance gender equality and women's empowerment, notably through education, healthcare, and economic programmes. In education, Eswatini joined the global Education Plus Initiative in 2022, a programme aimed at keeping adolescent girls in school to reduce HIV infections and enhance gender empowerment<sup>190</sup>. In healthcare, the Ministry of Health supports women's empowerment through the Safe Motherhood Programme and the Adolescent SRH Programme, which focus on improving maternal health outcomes and reducing teenage pregnancies<sup>191</sup>. Economically, initiatives such as the Young Women Economic Empowerment project, supported by The Joint United Nations Programme on HIV and AIDS (UNAIDS) and United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), provide rural young women with entrepreneurship training and financial grants to boost economic self-sufficiency<sup>192</sup>. Additionally, the Powering Gender Equality project (2023–2024), a partnership between UNDP and the Ministry of Natural Resources & Energy, equips rural women with renewable energy skills, aiming to facilitate women's entry into traditionally male-dominated sectors<sup>193</sup>.

However, evaluations of some government programmes indicate mixed effectiveness and highlight limitations in their impact. The International Fund for Agricultural Development (IFAD), assessing gender-focused initiatives within Eswatini, found these efforts "moderately satisfactory," indicating room for improvement.<sup>194</sup> This evaluation highlighted that women's high participation in some programmes was largely driven by their pre-existing dominance in agriculture, rather than the effectiveness of the empowerment measures themselves. Moreover, the African Development Bank's appraisal points out that practical implementation of government programmes is often hindered by entrenched patriarchal norms, suggesting that current initiatives may not fully address deeper cultural

<sup>190</sup> UNAIDS. (2022). *Eswatini joins Education Plus Initiative*. Available at: <https://www.unaids.org/en/resources/presscentre/featurestories/2022/october/eswatini-joins-education-plus-initiative> [Accessed 20 January 2025]

<sup>191</sup> Eswatini Ministry of Health. (2023). *Programmes and Departments*. Available at: <https://www.gov.sz/index.php/ministries-departments/ministry-of-health/programmes-departments?start=0> [Accessed 20 January 2025].

<sup>192</sup> UN Women. (2021). *Young women in Eswatini rebuild their lives through economic empowerment*. Available at: <https://africa.unwomen.org/en/stories/news/2021/10/young-women-in-eswatini-rebuild-their-lives-through-economic-empowerment> [Accessed 20 January 2025].

<sup>193</sup> UNDP Eswatini. (2023). *Powering gender equality in Eswatini*. Available at: <https://www.undp.org/eswatini/press-releases/powering-gender-equality-eswatini> [Accessed 20 January 2025].

<sup>194</sup> International Fund for Agricultural Development (IFAD). (2022). *Eswatini Country Strategy and Programme Evaluation – Executive Summary*. Available at: <https://www.ifad.org/documents/38714182/45202796/Eswatini%2BCSPE%2B-%2B%2BExecutive%2BSummary.pdf/59d58e83-ecf1-462d-6d93-e43fc2bd3e76> [Accessed 20 January 2025].

barriers<sup>195</sup>. These critiques emphasize the need for more transformative, culturally sensitive strategies capable of challenging underlying inequalities and achieving substantive gender empowerment.

### GBV and child protection

The GCoE reports that it has developed and implemented a multi-faceted approach to prevent and respond to violence, focusing on legislative measures, public advocacy, and community mobilization<sup>196</sup>. Key initiatives set out in the NSEVE include **prevention programming** by DFGI focusing on strengthening family structures and supporting public advocacy such as community and cultural events. MoET works to prevent school based violence including through life skills education. United Nations Population Fund (UNFPA) are also working with the GCoE on prevention of violence among children and families through interventions such as Positive Parenting.

**Response systems** are available for survivors to access services and the justice system, principally through the health sector, police, existing community structures and CSOs. No mapping or capacity assessment was identified during the course of this exercise, but as one NGO interviewee observed, "There are not enough shelters for GBV survivors, and the existing ones are often overcrowded and lack resources." (NGO FGD). These observations extended to other kinds of GBV services and services for gender equality and social care. Eswatini has made efforts to improve its response to GBV, including developing National Shelter Guidelines for survivors of GBV. As of September 2021, Eswatini had two formal GBV shelters (one operated by a faith based organisation). NGOs such as Swaziland Action Group Against Abuse (SWAGAA) and Bantwana provide counselling, medical referrals, police reporting assistance, and legal support to GBV survivors and children facing abuse and neglect.

There are safe spaces for women and girls, also supported by NGOs such as SWAGAA and multilateral agencies such as UNICEF. However this review could not identify the number of organizations providing such services. Due to the existence of the Child Protection Information Management System (CPIMS+), some data is available on child protection cases. During 2023<sup>197</sup> the CPIMS+ recorded 1,312 child protection cases and the child tollfree helpline, received and referred 2,213 child protection cases. GBV case data is not collected in any way that allows for national reporting, however. For both GBV and child protection cases, some measure of unmet need can be inferred from survey data.

Stakeholders reported that services are inadequate to meet the needs of the population and, in particular, that GBV response is neither adequate or co-ordinated: "...we need to have a coordinated system where every stakeholder come together and bring an effort together so that we can try and come up with programs that will fight on the GBV. But we have seen over the years that the efforts that we have put in in terms of fighting is not equaling to...the outcome that we want to see on the ground, actually, what we are seeing is just that persistent, increasing GBV, and even worse, even the killing of women and children in the country... we need the country to declare GBV as an emergency, which has not yet happened" (Multilateral KII)

There are, however, commitments to expand provision in the National Gender Strategy, NSEVE and draft Social Assistance Strategy. For example this is noted in the "Lobbying and advocacy among political leadership and Parliamentarians on the need to support and sustain social protection interventions as part of the overall developmental goals".<sup>198</sup> Also, the new Hlonipheka programme, a partnership between the EU and the UNFPA, aims to "address GBV and empower vulnerable

<sup>195</sup> (AfDB, 2022, available at: [https://www.afdb.org/sites/default/files/documents/projects-and-operations/eswatini\\_-\\_technical\\_assistance\\_for\\_the\\_implementation\\_of\\_the\\_eswatini\\_gender\\_policy\\_-\\_project\\_appraisal\\_report.pdf](https://www.afdb.org/sites/default/files/documents/projects-and-operations/eswatini_-_technical_assistance_for_the_implementation_of_the_eswatini_gender_policy_-_project_appraisal_report.pdf)).

<sup>196</sup> Deputy Prime Minister's Office (2023). National Strategy to End Violence in Eswatini 2023-2027. Government of Eswatini.

<sup>197</sup> UNICEF (2023). *Eswatini Country Office Annual Report 2023*. UNICEF Eswatini, pp. 1–9. <https://www.unicef.org/media/152241/file/Eswatini-2023-COAR.pdf>

<sup>198</sup> Republic of Ghana (2019). *Strategic Plan for the Department of Social Welfare (2019–2023)*. Ministry of Gender, Children and Social Protection & UNICEF Ghana.

communities in Eswatini, including persons with disabilities”<sup>199</sup>. It broadly supports the priorities and activities set out in the NSEVE. As it was launched in 2024, not much information is publicly available but (as with the NSEVE) there is no reference to social assistance in terms of financial or in-kind support as part of the programme, either in terms of response or prevention work.

## 7.2 Institutional framework

Eswatini's institutional framework for addressing gender issues is led by the Department of Gender and Family Issues, operating under DPMO. This department plays a central role in coordinating gender-related policies, plans, and legislation, ensuring the implementation of international legal instruments, and monitoring gender-related activities across all sectors.

In addition to its core functions, the Department of Gender and Family Issues conducts research on the economic status of women and promotes gender-responsive budgeting. It also facilitates capacity building on gender mainstreaming and analysis for various stakeholders, including government agencies, civil society organizations, and private sector entities.

While the Department of Gender and Family Issues serves as the primary body responsible for gender mainstreaming, other stakeholders, such as the Ministry of Justice and Constitutional Affairs and the Human Rights Commission, also contribute to promoting gender equality. However, these institutions may face limitations in terms of resources and capacity, which can hinder their ability to effectively carry out their mandates.

While Eswatini has made efforts to promote gender mainstreaming, information on specific policies and mechanisms for holding duty bearers accountable for gender equality commitments remains limited. A EU-funded technical assistance programme, supporting the DPMO between 2015 and 2020, did not report much headway, noting that there was minimal gender mainstreaming in DPMO programmes and activities, and less than 30% of decision making positions filled by women<sup>200</sup>. There were no actions to contribute to the African Gender Development Index, as committed at the beginning of the programme - although it is worth noting that Eswatini is represented in the main global gender indexes such as the GGI <sup>201</sup>. More importantly, overall, there still seems to be an absence of accountability frameworks to ensure that any gender equality commitments are translated into concrete actions and measurable outcomes.

This review was unable to identify specific data on the activities, budget allocation, and staffing of the Department of Gender and Family Issues, which oversees gender-related issues. However interviews and workshop feedback indicated that, in terms of resourcing, staffing of the Gender and Family Issues Unit is minimal, and primarily supported by bilateral partner resources<sup>202</sup>. In KIIs, development partners indicated their concern that DPMO must take full ownership of gender issues, including resourcing of staff, and also recognised external agencies' responsibility to reduce the degree to which gender and social care services are aligned with government structures, rather than delivered through parallel mechanisms - it was recognised that this is, to some extent, the case at the moment.

## 7.3 Systems

There is no current centralized case management system for GBV and standard operating procedures for managing GBV cases is limited. The government is taking steps, in partnership with UNFPA, to establish a GBV Information Management System (GBV IMS) to improve data collection,

<sup>199</sup> UNFPA Eswatini. 2024. *Government launches Hlonipheka-Thriving in Dignity programme for GBV survivors and persons*. Available at: <https://eswatini.unfpa.org/en/news/government-launches-hlonipheka-thriving-dignity-programme-gbv-survivors-and-persons> (Accessed: 13 January 2025).

<sup>200</sup> EU 2022

<sup>201</sup> Ibid., 11.

<sup>202</sup> USAID funded posts - the Director and M&E Officer - seem to be the only two national level posts for this department.

inform intervention strategies, and ensure the protection of survivors' personal information. There are nascent plans to take this forward in 2025 (according to stakeholder interviews).

There is a CPIMS/Primero in KoE, established in 2022, to manage child protection data, and enable case management including incident referrals. This supports social workers and their partners and is a collaboration between UNICEF, Bantwana Initiative and KoE<sup>203</sup>. There does not seem to be an equivalent system in operation dealing with GBV among adults (for example, the GBV IMS+ operating in other contexts).

In the context of HIV/AIDS, Eswatini utilizes a Client Management Information System (CMIS) . This system is crucial for tracking patient data, monitoring treatment outcomes, and ensuring the effective delivery of HIV/AIDS services. While the CMIS focuses primarily on HIV/AIDS, it may also collect some information related to GBV, particularly for individuals who are at risk or have experienced violence as a result of their HIV status.

There is very limited information sharing and interoperability between management information and case management systems in Eswatini. While some NGOs have established partnerships and referral networks, deeper primary research would be needed to determine the extent of information sharing and system interoperability across different sectors and service providers.

<sup>203</sup> <https://www.unicef.org/eswatini/stories/eswatini-launches-primero-child-protection-information-management-system-cpims>

## 8. REVIEW OF GLOBAL EVIDENCE

The following review of global evidence provides critical context for assessing Eswatini's social assistance programs. By understanding what has worked in comparable contexts, particularly in other SSA countries with similar socioeconomic profiles, we can better evaluate current practices in Eswatini and identify opportunities for improvement.

There is an emerging body of literature on gender-responsive and age-sensitive social protection, in part driven by the UNICEF GRASSP initiative, along with a wider recognition and understanding of the unique opportunities that social protection instruments present in addressing inequalities and vulnerabilities across genders and the life cycle.

This body of literature tends to address social protection in general rather than social assistance in particular, although for most low to middle-income countries, most social protection schemes studied in terms of their gender and age-related impacts tend to fall within the social assistance category.

UNICEF Innocenti's research programme on Gender Responsive and Age Sensitive Social Protection looked at the following research questions:

1. **Gender equality outcomes:** To what extent do social protection programmes achieve gender equality outcomes?
2. **Gender intentions:** To what extent do social protection programmes intend to address gender inequality, and to what extent do they achieve their gender intentions?
3. **Programme delivery:** What contextual factors moderate gender equality outcomes and implementation processes? What are the key constraints and enablers?
4. **Policy design processes and political economy:** How is gender institutionalised in social protection programmes and systems? What are the key obstacles and levers?<sup>204</sup>

To answer these questions, the GRASSP programme drew on 11 policy analyses and studies across low- and middle-income countries in Africa, Latin America and Asia. The results of this review (UNICEF Innocenti, 2024<sup>205</sup>) will be distilled below and examined for their relevance to Eswatini's context. The same concepts will also be used to assess the gender-responsiveness and age-sensitivity of Eswatini's policies and programmes. The review's findings also inform potential avenues for Eswatini's future development, drawing on useful precedents and lessons learned.

This literature review was organised around the four questions above, and each subsection provides evidence for the corresponding question.

The review of global evidence is predominantly based on three authoritative studies, augmented with more specialised research where applicable:

- » The most recent and authoritative review on social protection and gender, which is the systematic review of reviews conducted by Perera et al. in 2021<sup>206</sup> "on the differential impacts of social protection programmes on women and men, and boys and girls in low- and middle-income countries"<sup>207</sup> (covering 70 reviews in 121 countries).

<sup>204</sup> UNICEF Innocenti – Global Office of Research and Foresight. (2024). Towards gender-responsive social protection: Evidence on policymaking, programme implementation and impacts for women and girls. Florence: UNICEF Innocenti. Available at: <https://www.unicef-irc.org/> [Accessed 10 January 2025]. (<https://www.unicef.org/innocenti/media/9756/file/UNICEF-Innocenti-GRASSP-Synthesis-Report-2024.pdf>)

<sup>205</sup> Ibid.

<sup>206</sup> Perera, C., Bakrania, S., Ipince, A., Nesbitt-Ahmed, Z., Obasola, O., Richardson, D., Van de Scheur, J., & Yu, R. (2022). *Impact of social protection on gender equality in low- and middle-income countries: A systematic review of reviews*. *Campbell Systematic Reviews*, 18, e1240. Available at: <https://doi.org/10.1002/cl2.1240> [Accessed 10 January 2025].

<sup>207</sup> Perera et al.

- » The aforementioned UNICEF review of evidence (looking at case studies from Angola, Burkina Faso, Democratic Republic of the Congo (DRC), Ethiopia and Tanzania), examining different types of social protection programmes. These take diverse approaches in terms of (a) whether they are cash-only, cash-for-work and/or cash-plus programmes, (b) conditional or unconditional, (c) universal/categorical or poverty-targeted (d) length of time in operation and (e) groups targeted – covering different groups of households and individuals according to age<sup>208</sup>.
- » Cookson et al.'s 2023 review of LMIC social protection strategies (covering 52 countries), analysing the gender responsiveness of these strategies<sup>209</sup>

## 8.1 Evidence on gender equality outcomes

This review adopts the GRASSP framework developed by UNICEF to examine the impact of social assistance programs on gender equality across six key “outcome areas: economic security and empowerment, improved health, enhanced education, improved psychosocial well-being, increased protection, and enhanced voice and agency.”<sup>210</sup>

**Economic Security and Empowerment:** The meta-analysis by Perera et al. found that social assistance programs can improve labour participation, savings, and investment among women (Perera et al, 2022, p. 17). The UNICEF review<sup>211</sup> also found significant improvements in women's involvement in economic activities, both agricultural and non-agricultural, particularly in programmes that included supportive "cash-plus" activities such as livelihoods training and mentoring.

However, it is important to note that programs encouraging more active labour market participation among women can also bring risks. In some cases, these programs have been found to have a negative effect, increasing women's overall work burden and levels of stress, particularly if complementary support is not in place. For example, if women's care burdens are not considered and addressed through programming or a more equitable division of labour within the household, these programs may inadvertently perpetuate gender inequalities (Perera et al., 2022, p. 19).

**Reflections for Eswatini:** In Eswatini, the OPG mirrors global patterns where women recipients often support multiple dependents despite the grant being designed as individual income replacement. With 50% of women over 60 being widows and many caring for grandchildren orphaned by AIDS, this reflects global evidence showing how social assistance programs often fail to account for women's caregiving responsibilities. The DG's design as income replacement rather than accounting for disability-related costs further disadvantages women, who make up 58% of people with disabilities in Eswatini.

**Improved health:** Perera et al.'s review found evidence of social assistance programmes leading to increased utilisation of healthcare services and contraception use among women and improved uptake of male circumcision. They also contributed to the reduction of unintended pregnancies, risky sexual behaviours and symptoms of sexually transmitted infections among women. Cash-plus programs have consistently been found to increase girls' knowledge about SRH, HIV prevention, and gender norms. This can empower girls to make informed decisions about their bodies and lives. For example, a study in Kenya found that a cash-plus program that included life skills training led to a 10 percentage point increase in girls' knowledge about HIV prevention [67, p. 2768].

<sup>208</sup> Ibid.

<sup>209</sup> Cookson, T. P., Sandoval, R., Staab, S., Tabbush, C., Bitterly, J., & Mathew, M. (2024). *Do governments account for gender when designing their social protection systems? Findings from an analysis of national social protection strategies. Social Policy & Administration*, 58(1), 78–92. Available at: <https://doi.org/10.1111/spol.12944> [Accessed 10 January 2025].

<sup>210</sup> Adeyeye, O. & Fischer, G. (2023). *Exploring links between social protection, gender, and climate resilience in the Sahel region: A Narrative Review*. Gender Equality Initiative, December 2023.

<sup>211</sup> <https://www.unicef.org/innocenti/media/9756/file/UNICEF-Innocenti-GRASSP-Synthesis-Report-2024.pdf>

Cash-plus programmes reviewed by UNICEF<sup>212</sup> also had significant positive impacts on health outcomes, particularly with respect to child nutrition practices, greater utilisation of maternal and child health services, and access to SRH services. Importantly, some programmes contributed to a sustained reduction in sexual violence and a reduction in risky sexual behaviours (Perera et al, 2022, p. 20).

**Reflections for Eswatini:** While global evidence demonstrates that cash-plus programs can significantly improve health outcomes, particularly for maternal and child health, Eswatini does not currently provide any cash-plus programming, targeted maternity protection or household grants for families with young children. As well as the evidence on the power of child and maternal benefits to intergenerational poverty reduction<sup>213</sup>, the social assistance system could benefit from adopting integrated cash-plus-health approaches that global evidence shows are effective at reducing sexual risk behaviours and improving healthcare utilization. As noted in Section 4.3 Eswatini has the world's highest HIV prevalence rate with women disproportionately affected (35% of women compared to 19% of men).

**Enhanced education:** Perera's meta-analysis found a significant positive effect of cash-plus programmes on school attendance, with girls in these programs being more likely to attend school compared to those in control groups. This effect was particularly strong in SSA. (Baird et al., 2023, p. e1240, in Perera 2022<sup>214</sup>). While the evidence was less conclusive on school completion, some studies showed positive effects on school completion and progression, particularly when the cash transfers were conditional on school attendance. (ibid) (Perera et al, 2022, p. 21).

The evidence regarding educational outcomes was mixed in the UNICEF review, although it is worth noting that the review did not focus on programmes with a particular focus on the education sector. Some programmes did improve educational attendance and helped to pay for school fees and other educational expenses, but others showed no impact (Perera et al, 2022, p. 21).

**Reflections for Eswatini:** While global evidence suggests that cash transfers linked to education can significantly improve school attendance, particularly for girls, Eswatini's approach is to issue a grant to schools for orphans and vulnerable children, effectively a school fee waiver rather than flexible cash. As detailed in Section 6.1.2 and 6.1.3 Eswatini's OVC Education Grant covers only a fraction of educational costs (10-50%) and disbursements are frequently delayed by 2-3 months into the academic year. This undermines the grant's effectiveness in enhancing educational outcomes compared to more adequately funded programs reviewed globally. The fact that the grant only covers partial costs means that the poorest students may be excluded, as they will have no way of making up the shortfall or paying for other school related expenses. The diagnostic study referenced in Section 6.1.3 also notes that girls face additional barriers related to menstruation, pregnancy and domestic duties that the current programme design does not explicitly address.

**Improved psychosocial well-being:** Perera et al.'s review found mixed results regarding the impact of cash-plus programs on mental health. Some studies reported improvements in mental health outcomes, such as reduced depressive symptoms and increased self-esteem, while others found no significant effects. This variation in findings may be due to differences in program design, implementation strategies, and the specific context in which the programs operate. For example, programs that incorporate mental health support or address underlying social and cultural factors

<sup>212</sup> UNICEF Innocenti – Global Office of Research and Foresight. (2024). *Towards gender-responsive social protection: Evidence on policymaking, programme implementation and impacts for women and girls*. Florence: UNICEF Innocenti. Available at: <https://www.unicef-irc.org/> [Accessed 10 January 2025].

<sup>213</sup> See for example: Pontes Lucas, A.D., de Oliveira Ferreira, M., Pontes Lucas, T.D. & Salari, P. (2022). *The intergenerational relationship between conditional cash transfers and newborn health*. *BMC Public Health*, 22, Article 12565. Available at: <https://bmcpublichealth.biomedcentral.com/articles/10.1186/s12889-022-12565-7> [Accessed 20 January 2025].

<sup>214</sup> Perera, C., Bakrania, S., Ipince, A., Nesbitt-Ahmed, Z., Obasola, O., Richardson, D., Van de Scheur, J., & Yu, R. (2022). *Impact of social protection on gender equality in low- and middle-income countries: A systematic review of reviews*. *Campbell Systematic Reviews*, 18, e1240. Available at: <https://doi.org/10.1002/cl2.1240> [Accessed 10 January 2025].

contributing to poor mental health may be more effective than those that solely focus on cash transfers. (Perera et al, 2022, p. 22)

**Reflections for Eswatini:** No cash-plus programmes operate in Eswatini, and cash transfer (DG and Older Person’s Grant) programmes do not measure mental health outcomes. However inconsistent and inadequate social assistance may actually increase stress for women, who bear primary responsibility for household welfare. The reliance on unpaid female caregivers in NCPs (with inadequate support and ratios as high as 60:1) likely contributes to caregiver burnout rather than improved well-being, contrasting with successful global examples (e.g. Rwanda’s VUP) where caregivers are properly compensated and supported.

**Increased protection:** While social protection programmes are not typically designed to target GBV, they can empower women and reduce violence by mitigating poverty-related stress, strengthening social networks, and shifting gender norms. Well-designed, intentional programmes can have a particularly powerful effect in reducing violence<sup>215</sup>. However, they must be carefully managed to avoid exacerbating household tensions or exposing beneficiaries to risks like sexual exploitation. In crisis situations, such as the COVID-19 pandemic, these risks are heightened, emphasising the need for mitigation and monitoring efforts to protect vulnerable populations (Botea et al., 2023, p. 10).

Some studies within Perera et al’s review showed a reduction in experiences of violence and abuse among girls participating in cash-plus programs. However, the evidence was not conclusive, and more research is needed to understand the specific mechanisms through which these programs can protect girls from violence. It is possible that cash transfers, by improving families’ economic situations, may reduce stress and conflict within households, thereby decreasing the risk of violence. Additionally, accompanying interventions that address gender norms and promote positive relationships may contribute to creating safer environments for girls (Perera et al., 2022, p. 23-24).

For example, UNICEF’s review found that training in SRH, gender equality and violence prevention alongside cash transfers (in Tanzania) led to a sustained reduction in sexual violence and (shorter term) reductions in perpetration of physical violence by men. There were, however, some mixed results in other programmes; if not managed, cash transfers can trigger intra-household conflict (for example, due to inequitable distribution of resources among polygamous households and, in the case of the programme in the DRC, conflicts between partners on the use of resources). It is, however, worth noting that those programmes that did not put additional pressure on women tended to show positive impacts on their psychological well-being (Perera et al., 2022, p. 23-24).

Cash-plus programs have been found to have a significant protective effect against HIV infection. The Perera meta-analysis reported that girls in these programs were 33% less likely to contract HIV compared to those in control groups [61, p. 11]. This finding highlights the potential of cash-plus programs to contribute to HIV prevention efforts, particularly in high-prevalence settings. By empowering girls with knowledge, skills, and resources, these programs can help them make safer choices and reduce their vulnerability to HIV infection (Perera et al, 2022, p. 23-24).

The World Bank have also noted that social protection programmes also have the potential to create intergenerational benefits, reducing lifetime GBV risks by promoting education, delaying marriage, and fostering more equitable gender norms<sup>216</sup> (Botea et al., 2023, p. 7). For example, Perera et al.’s meta-analysis found a strong protective effect of cash-plus programmes against child marriage. Girls in these programs were 30% less likely to marry before the age of 18 compared to those in control groups [61, p. 11] Perera et al., 2022, p. 11. This finding is crucial because child marriage often leads

<sup>215</sup> Botea, I., Coudouel, A., Heinemann, A., & Kuttner, S. (n.d.). *Safety First: How to Leverage Social Safety Nets to Prevent Gender-Based Violence – Operational Guidance*. World Bank. Available at: <https://documents.worldbank.org> [Accessed 10 January 2025].

<sup>216</sup> Botea, I., Coudouel, A., Heinemann, A., & Kuttner, S. (n.d.). *Safety First: How to Leverage Social Safety Nets to Prevent Gender-Based Violence – Operational Guidance*. World Bank. Available at: <https://documents.worldbank.org> [Accessed 10 January 2025].

to early school dropout, increased risk of early pregnancy and health complications, and limited opportunities for personal and economic development. (Perera et al, 2022, p. 23-24)

Outside of the programmes covered in these reviews, there are promising but emerging examples of combining cash and livelihoods programming with interventions at the household and community level, changing harmful gender norms and reducing Intimate Partner Violence (IPV), as well as improving household economic wellbeing (for example, various iterations of the Gender Action Learning System (GALS) programme, and the Toose model in Zimbabwe<sup>217</sup>) (Botea et al., 2023, p. 14).

**Reflections for Eswatini:** While well-designed social assistance/protection programs can reduce GBV by addressing poverty-related stress and strengthening women's economic position, there are almost no formal linkages between social assistance programs and GBV prevention or response services. This does not necessarily mean that the presence of social assistance programmes does not have a positive effect on violence reduction, but there is no way of knowing without relevant M&E data. It is entirely possible that the lack of linkages between social assistance and protection services, at a minimum, do not capitalise on the protective potential demonstrated in global evidence. A best-case scenario is that informal and undocumented links are made between services (through NGOs and local community structures rather than formal social work services) although there was little qualitative evidence to support that this is the case. It is, however, of concern that there are no routes for documentation of any harmful effects, through safeguarding or grievance redress mechanisms.

**Enhanced voice and agency:** The Perera meta-analysis found that cash-plus programs have been shown to increase girls' involvement in decision-making within their households and communities. This suggests an enhancement of their voice and agency, allowing them to participate more actively in shaping their own lives and influencing decisions that affect them. For example, a study in Bangladesh found that a cash-plus program increased girls' participation in household decision-making regarding education and marriage [66, p. 6]. Some studies have also reported improvements in self-efficacy, self-esteem, and empowerment among girls participating in cash-plus programs. By providing girls with economic resources and opportunities, these programs can foster their sense of independence and control over their lives. This can lead to greater self-belief and a stronger sense of agency, enabling girls to pursue their goals and aspirations with greater confidence. (Perera et al, 2022, p. 23)

In the UNICEF review, the impacts on women's voice and agency (and broader norms, beliefs and practices) were relatively limited. Intentional activities to change attitudes (e.g. the programme in Tanzania) had some effect, but these faded after the end of the programme. This is consistent with wider evidence on social norms change; deeper shifts in norms, attitudes and beliefs requires intensive, intentional and long-term programming approaches to effect lasting change. However there were also some interesting findings specifically of the potential of social protection programming to increase women's decision making power within the household, as well as their financial autonomy. (Perera et al, 2022, p. 23)

**Reflections for Eswatini:** Global evidence indicates that intentional and sustained programming is required to shift gender norms and enhance women's decision-making power. Deeply entrenched patriarchal attitudes exist in Eswatini (section 4.3), and while prevention interventions do exist (such as the Hlonipheka programme<sup>218</sup> there is no indication that these will be linked to social assistance in any way. However, there could be potential to explore the creation of links in future – for example by ensuring Hlonipheka's engagements with service providers on prevention and response to

<sup>217</sup>SAFE-DD3 Practice Brief: SAFE Programme Evaluation and Learning Unit (2022) *SAFE-DD3 Practice Brief: Evidence from the SAFE Programme, Zimbabwe*. UK Foreign, Commonwealth and Development Office. Available at: [https://intdev.tetracheurope.com/wp-content/uploads/2023/06/FINAL\\_SAFE-DD3-Practice-Brief.pdf](https://intdev.tetracheurope.com/wp-content/uploads/2023/06/FINAL_SAFE-DD3-Practice-Brief.pdf) [Accessed 11 Jan. 2025].

<sup>218</sup> <https://eswatini.un.org/en/261321-government-launches-hlonipheka-thriving-dignity-programme-gbv-survivors-and-persons>

vulnerabilities such as violence and disabilities also includes screening for unmet social assistance entitlements, and support for accessing their rights.

## 8.2 Evidence on gender intentions

Perera et al. (2023) found that social protection programmes with specific gender-related objectives, like reducing child marriage, are more effective than those with broader goals. This highlights the importance of targeted programme design. They also found that (cash or in-kind) transfers alone are often not enough to achieve lasting change, - evidence shows that these programmes must be combined with efforts to strengthen health, education, and social welfare systems. This can be through cash-plus approaches, or dedicated efforts to work coherently with other social systems. For example, a cash transfer program aimed at increasing school enrolment could be more successful if it is coupled with investments in improving school infrastructure and providing teacher training. Similarly, a program aimed at reducing child marriage could be strengthened by providing access to SRH services and promoting girls' education. The study concluded that combining targeted social protection programmes with broader efforts to strengthen support systems can lead to more sustainable and equitable development outcomes.

The UNICEF GRASSP review analysed gender intentions among its' case study programmes, identifying gender intentions in both the stated programme objectives and the design features, and looked at whether the intentions and the design actually aligned. The study found that there was frequently a mismatch between the objectives and the design. It also looked at the extent to which the objectives were actually achieved. The achievement of objectives tended to be partial for various reasons – either due to gaps or weaknesses in the design or in the implementation of the programme. Implementation challenges could arise from a number of different reasons, including a lack of consistent funding, or varying levels of buy-in or understanding among stakeholders playing a role in delivering the programme.

Another review of gender and government social protection systems (Cookson et al 2023<sup>219</sup>) looked at 52 national social protection strategies in low- and middle-income countries. This also found 'a gap between rhetoric and response' when examining social protection strategic plans and their execution - while most recognise the role of social protection in advancing gender equality, few put these intentions into practice in the form of concrete action.

**Gender and life-cycle focused programming:** There are a wide range of social assistance programming models taking a gender-responsive, if not gender-transformative approach, and that are designed to respond to life-cycle risks and vulnerabilities. In their review of 52 countries' social protection strategies and their implementation, Cookson et al (2023) found that benefits targeting women are generally focused around their roles as mothers - for example, there were many examples of child benefits, which can 'address women's practical needs as children's caregivers'<sup>220</sup>. There were fewer examples of income support for widows (despite, as the authors note, the fact that women are at greater risk of poverty "after a lifetime of interruptions to paid work as a result of their socially ascribed caregiving roles").<sup>221</sup> Maternity leave and maternal healthcare were mentioned in just over half of the strategies. The authors' critique was that, overall, women are generally framed as being 'at

<sup>219</sup> Cookson, T. P., Sandoval, R., Staab, S., Tabbush, C., Bitterly, J., & Mathew, M. (2024). *Do governments account for gender when designing their social protection systems? Findings from an analysis of national social protection strategies*. *Social Policy & Administration*, 58(1), 78–92. Available at: <https://doi.org/10.1111/spol.12944> [Accessed 10 January 2025].

<sup>220</sup> Molyneux, M. (1998). 'Analysing Women's Movements', *Development and Change*, 29(2), pp. 219–245. Available at: doi:10.1111/1467-7660.00077 [Accessed 10 January 2025] and Patel, Leila, Trudie Knijn, and Frits Van Wel. 2015. "Child Support Grants in South Africa: A Pathway to Women's Empowerment and Child Well-Being?" *Journal of Social Policy* 44 (2): 377–397. Available at: <https://doi.org/10.1017/S0047279414000919> [Accessed 10 January 2025] in Cookson et al 2023.

<sup>221</sup> Cookson, T. P., Sandoval, R., Staab, S., Tabbush, C., Bitterly, J., & Mathew, M. (2024). *Do governments account for gender when designing their social protection systems? Findings from an analysis of national social protection strategies*. *Social Policy & Administration*, 58(1), 78–92. Available at: <https://doi.org/10.1111/spol.12944> [Accessed 10 January 2025].

the service of the state' (Molyneux 2006, in Cookson et al 2023), as the conduit for reducing intergenerational poverty through their roles as mothers.

However, for social protection systems to be gender-responsive, they must address gendered risks across the life course – “including as paid workers, as caregivers of elder persons, and as elder persons themselves.”<sup>222</sup> The authors also identify the strategic need to ‘incorporate care sensitive and gender-differentiated policy measures’ (Chopra & Krishnan, 2021, in Cookson et al, 2023) and to create stronger links between social protection and GBV prevention and response systems and programmes. The World Survey on the Role of Women in Development (2024) notes that women generally live longer, and spend more of their lives in ill health or with a disability<sup>223</sup>. Globally, women are poorer than men but the gap is widest in Older Persons. HelpAge<sup>224</sup> describe an a lifetime of disadvantage and discrimination for women, describing how women experience risks and disadvantages that accumulate over the life course, and how this can be compounded by ageism. Women are more likely to be unpaid caregivers, informal workers (with no contributory pension), experience discrimination in the world or work, have less access to land and other assets, to live alone, to experience widowhood and to have higher barriers to accessing basic services including education and health care<sup>225</sup>. This underscores the elevated level of need that women have for support in Older Persons.

It is also important to consider the life-course risks of children and adolescents, of course, as well as their caregivers, and how social protection can also play a critical part in mitigating these risks. Adolescents in LMICs, especially girls, face numerous interconnected challenges often exacerbated by poverty and inequality. These include early marriage and pregnancy, which carry health risks for both mother and child, disrupts education, limits future prospects, and can have psychological impacts. It also affects school attendance as young mothers struggle to balance childcare with their studies. Poverty, gender inequality, and early marriage/pregnancy all contribute to school dropout, leading to reduced earning potential and increased vulnerability. Adolescents, particularly girls, are also at high risk of violence and HIV infection. Poverty and lack of educational opportunities often force children, particularly boys, into child labour, with detrimental effects on their health, education, and future. Finally, adolescents are at particular risk of developing mental health issues, especially when faced with poverty, exclusion and/or restricted access to education and other basic services, with significant consequences for their well-being and development.

**Reflections for Eswatini:** The global evidence indicates that programs with specific gender-related objectives achieve better outcomes than those with broadly defined goals. In Eswatini, Section 6 reveals that social assistance programs are predominantly gender-blind, lacking explicit gender intentions in their design. The policy review in Section 5 shows that while high-level policy documents like the National Gender Policy mention gender equality, these intentions have not yet been translated into programmatic design features or implementation guidelines. The roadmap for government will offer some indications of opportunities that could be created to rectify this, for example by ensuring that the Social Assistance Policy contains suitably intentional language and policy levers for gender responsive approaches. Both the Social Assistance Policy and National Gender Policy may also develop action plans containing concrete gender-responsive objectives, outcomes and clearly mapped pathways for achieving them.

<sup>222</sup> Cookson et al

<sup>223</sup> Staab, S., Williams, L., Tabbush, C., and Turquet, L. (2024). *Harnessing Social Protection for Gender Equality, Resilience and Transformation. World Survey on the Role of Women in Development*. New York: UN-Women. Available at: <https://www.unwomen.org/sites/default/files/2024-10/World-survey-on-the-role-of-women-in-development-2024-en.pdf> [Accessed 10 January 2025] p29.

<sup>224</sup> Danesi, S., McGivern, V., & Patel, T. (2024). *Investing in equality: Addressing the funding gap for older women*. London: HelpAge International. Available at: <https://www.helpage.org/wp-content/uploads/2024/09/Investing-in-Equality.pdf> [Accessed 10 January 2025] p. 6.

<sup>225</sup> Ibid.

### 8.3 Evidence on programme design

An overview of key gender aspects of the design of social assistance programmes are analysed here, based on global evidence, and these insights are applied specifically to Eswatini's social assistance programme.

**Adequacy and reliability of benefits:** Social transfers, including cash and in-kind benefits, are often insufficient to meet the full needs of beneficiaries, particularly in regions with high levels of poverty and inequality<sup>226</sup>. In many cases, benefit levels are set below poverty lines, leaving recipients vulnerable to economic shocks. Inadequate social transfers disproportionately affect women due to their greater reliance on these benefits, stemming from limited access to formal employment and prevailing gender norms. For example, programmes designed without gender-sensitive targeting mechanisms fail to address intra-household disparities in resource allocation<sup>227</sup> (see also below). Conversely, predictable, reliable long-term transfers allow for individuals and households to plan, save and make more strategic use of their resources, leading to greater impacts on poverty.

**Targeting:** More generally, targeting mechanisms are a key aspect of social assistance programme design with significant gender implications. For example, programmes that rely heavily on CBT must be designed very sensitively and with strong checks and balances in place, or they are at high risk of entrenching and even exacerbating societal discrimination, including gender discrimination. Community leadership structures are often male-dominated, and their decisions may reflect entrenched patriarchal norms. For example, cultural biases in Ethiopia influence perceptions of who qualifies as "deserving" of aid or any financial inclusion. In many contexts, women are seen primarily as dependents rather than as heads of households and thus face cultural obstacles to having any meaningful participation in community-based decisions. In these communities men are therefore prioritised for cash transfers based on existing norms regarding male community roles, sidelining widows or female-led families<sup>228</sup>. Finally, intra-household dynamics are extremely important aspects to consider in targeting, particularly whether transfers are targeted at household level (and if so, who they are directed towards within the household e.g. caregivers, 'household heads') or at individual level. While this does not necessarily mean the person receiving the transfer will necessarily be fully in charge of it, receipt of the transfer (and associated messaging about what the cash should be used for) has a powerful effect on control over these resources.

**Delivery and administration:** Other aspects of programme design involve how the transfers themselves are delivered, what modality is used (cash-in-transit, mobile money, in-kind assistance, fee waivers, etc.), and who the primary recipient is. This can be extremely context-dependent, with many considerations, such as local economic and stability conditions to be taken into account, as well as the preferences and gender dynamics within communities. Access and accessibility are critical factors in selecting delivery and administration mechanisms. Onerous registration processes, including those requiring formal documentation, good levels of literacy and the ability to travel long or awkward distances, can all serve to exclude marginalised populations and people with heavy

<sup>226</sup> E.g. Bastagli et al. (2016) found that while cash transfers can reduce poverty, their impact is often limited by the size of the transfer and the overall context of poverty and inequality - Bastagli, F., Hagen-Zanker, J., Harman, L., Barca, V., Sturge, G., & Schmidt, T. (2016). 'Cash transfers: What does the evidence say? A rigorous review of programme impact and of the role of design and implementation features' - Overseas Development Institute.

<sup>227</sup> For example, Women in many LMICs, including Eswatini, bear a disproportionate burden of unpaid care work, including childcare, elder care, and care for sick or disabled family members. This can limit their ability to participate in the formal labor market and generate income, making them more reliant on social transfers. A UNAIDS report (2021) highlights the gendered impact of HIV/AIDS and the need for social protection programs that address the specific needs of women and girls - UNAIDS. (2021). Little, M.T., Roelen, K., Lange, B.C.L., Steinert, J.I., Yakubovich, A.R., Cluver, L. & Humphreys, D.K. (2021).

Effectiveness of cash-plus programmes on early childhood outcomes compared to cash transfers alone: A systematic review and meta-analysis in low- and middle-income countries. *PLoS Medicine*, 18(9), e1003698. doi: 10.1371/journal.pmed.1003698.

<sup>228</sup> UNICEF Office of Research - Innocenti, 2024. Implementation of Gender Provisions in Ethiopia's Productive Safety Net Programme: What works, how and why? Global Office of Research and Foresight, August 2024.

domestic burdens. This particularly includes transportation barriers, which may be exclusionary due to cost, safety or accessibility issues<sup>229</sup>.

Other barriers to access relating to delivery mechanisms can include discriminatory social norms. These can manifest in different ways, for example, if women are discouraged from interacting with male programme staff, or if they are subject to exploitation by those supporting them or delivering the programme.

Various modifications can be made to delivery of social assistance programmes to increase their accessibility. Mobile banking can be beneficial to women and other potentially vulnerable groups, as this reduces the need to travel and increases individual control over resources, although this is only a solution when the technology and infrastructural conditions are in place, and the intrahousehold power dynamics allow for women to have some level of control (over phones and money). Information must be available in accessible formats and delivered in ways that are meaningful and timely for the populations being targeted. Programme staff and community leaders can be engaged and trained in order to create the right conditions for women and marginalised groups to register and access their entitlements.

Access to information about programmes can also impact on women and marginalised groups' registration into programmes, due to lower literacy rates, limited access to technology, and/or reliance on male family members for information. This information gap can be particularly pronounced for women with disabilities, who may face additional barriers in accessing information and communication<sup>230</sup>. Lower literacy rates in certain contexts, limited access to technology, and reliance on male family members for information can prevent women from learning about program eligibility and application procedures. Conversely, more active and nuanced approaches to community sensitisation can have a hugely positive effect on inclusion in programmes<sup>231</sup>.

Finally, grievance redress mechanisms (GRMs) and other feedback loops are essential for communities to communicate any problems with the programmes, and for duty bearers at all levels to have a line of sight to these problems and to be able to address them. In general, these are essential for ensuring that programmes are accountable to communities and responsive to their needs. They are especially critical for women, persons with disabilities, and anyone else at risk of unequal power dynamics, as they are more vulnerable to exploitation or abuse. GRMs need to be designed in ways that are sensitive and accessible to all; this requires designing them in ways that are accessible, understandable (taking into account literacy and language issues) and confidential. In order to be effective, this is likely to require establishing multiple channels of communication (e.g. a combination of in-person reporting, hotlines, SMS and online channels could potentially be established).

**Reflections for Eswatini:** global evidence emphasizes that adequacy and reliability of benefits are crucial for effectiveness, particularly for women who face greater dependency ratios. In Eswatini, all programmes face challenges with both adequacy (the DG at E400 is acknowledged as insufficient, the OVC Education Grant covers only 10-50% of actual costs) and reliability (delays of 2-3 months in OVC grants, inconsistent food supply in School Feeding and NCPs). These implementation failures particularly affect women, who, as noted in Section 6.1.4 typically bear responsibility for managing household resources and mitigating the impacts of poverty on dependents.

The global evidence review highlights that poorly designed community-based targeting can entrench social discrimination and gender inequality. This appears to apply to Eswatini, with targeting decisions for programs like the OVC Education Grant and Emergency Food Aid left to the discretion of

<sup>229</sup> As reported in e.g. early gender assessments of the Household Uplifting Programme in Nigeria (author's note, not published)

<sup>230</sup> Little, M.T., Roelen, K., Lange, B.C.L., Steinert, J.I., Yakubovich, A.R., Cluver, L. & Humphreys, D.K. (2021). Effectiveness of cash-plus programmes on early childhood outcomes compared to cash transfers alone: A systematic review and meta-analysis in low- and middle-income countries. *PLoS Medicine*, 18(9), e1003698. Available at: <https://pmc.ncbi.nlm.nih.gov/articles/PMC8478252/> [Accessed 10 January 2025].

<sup>231</sup> Some excellent good practices have been documented on this e.g. [https://www.calpnetwork.org/wp-content/uploads/2020/03/calp\\_communicating\\_cash\\_to\\_communities-1.pdf](https://www.calpnetwork.org/wp-content/uploads/2020/03/calp_communicating_cash_to_communities-1.pdf) [accessed 20 January 2025]

community leaders in male-dominated local power structures. Qualitative data from local service providers indicates that traditional power hierarchies influence allocation decisions.

## 8.4 Evidence on political economy and institutions

The UNICEF GRASSP review examined political economy analyses in some case study countries<sup>232</sup>, in order to analyse the dynamics shaping policy outcomes. It found a number of key levers and moderators at this level. In summary, these were:

**Political commitment:** Many countries have made high-level constitutional, legal and policy pledges towards gender equality and children’s rights, that are not consistently honoured in practice. Institutional mechanisms and gender champions can help to identify, create or build on opportunities for positive change and to hold duty bearers at all levels to account.

- » **Financing:** Consistent and sustained financing for all forms of social protection can be supported by strengthening the legal foundations (the right to social protection), and protecting/promoting the political status of social protection relative to other sectors.
- » **Capacity and attitudes:** Political commitment is partly contingent on the capacity and skills of policy makers and implementers to understand, design and execute programmes that respond to gender inequalities. However this is not just a capacity issue; duty bearers also need to hold attitudes that are genuinely supportive of gender equality and social assistance. According to the UNICEF review, “sustainable capacity development requires catalysing a shift in ideologies related to gender norms and roles within the home and society, the underlying causes of poverty and vulnerability, and the purpose of social protection through deliberative approaches that openly address ideological tensions between different actors.”<sup>233</sup>.
- » **Institutional norms, rules and practices:** Gender actors must understand policy processes and, critically, who holds the power, while governments must ensure that formal spaces exist to meaningfully engage with gender actors. Beyond enhancing the financial and technical capacities of gender and women’s rights departments, it is critical to promote procedures and norms that encourage gender experts and social protection policy actors to work together more closely.
- » **Evidence:** Evidence is critical for developing and evaluating policies and programmes that prioritise gender, but this evidence only has impact when mechanisms are in place to make it so. This evidence has the most impact when it is created and developed by a broad coalition, collected over a sustained period of time and institutionalised within the policy cycle. The role of evidence is further explored below
- » **Social movements:** CSOs leading and participating in gender and women’s rights movements can, and should, also play vital roles in promoting integration. However there tend to be various barriers in place preventing this from happening, including financial and technical capacity issues, power dynamics leading to their marginalisation from decision making process, and internal fragmentation, divergent interests and power dynamics.

On this last point, Cookson et al.’s review of social protection systems and strategies found that many of these strategies - even those with explicit gender commitments - were not drafted in consultation with national gender equality machinery or relevant CSOs. Without this engagement, policymakers’ ability to craft quality and actionable systems is inevitably constrained, particularly with respect to accessing insights into effective social protection for hard-to-reach groups (Cookson et al. 2023).

<sup>232</sup> Angola, Ethiopia, Mexico, Uruguay and Viet Nam

<sup>233</sup> UNICEF Innocenti – Global Office of Research and Foresight. (2024). *Towards gender-responsive social protection: Evidence on policymaking, programme implementation and impacts for women and girls*. Florence: UNICEF Innocenti. Available at: <https://www.unicef-irc.org/> [Accessed 10 January 2025] p. 61.

The political economy of social protection is a critical part of the landscape - without a positive political enabling environment, it can be difficult for countries to make much progress. This operates at a number of levels, ranging from the priorities of political leaders, to public understanding of and support for social protection. Sustained and high-level political commitment is essential for programmes to endure and succeed. Acceptance of and support for social protection by the public are also an important part of the picture. This involves not just acceptance of social protection as a right, but requires reinforcement through effective and accountable delivery by the state and other duty bearers. If programmes are not delivered well (e.g. if targeting is unclear, delivery mechanisms are demeaning or unreasonable, or if lack of transparency leads to suspicions of corruption) then the social contract between citizens and state may be undermined, and public support for social protection is put at risk<sup>234</sup>.

**Reflections for Eswatini:** Global evidence identifies political commitment, institutional capacity, and gender-responsive budgeting as key determinants of effective gender mainstreaming in social protection. In Eswatini, section 9.2.2 reveals significant institutional weaknesses, with a thinly staffed Department of Gender and Family Issues, minimal operational budgets for local social welfare offices, and a lack of gender-disaggregated data for monitoring and evaluation. The Political Economy Analysis (PEA) in section 9.2.10 further highlights how the dual governance system (traditional and formal) creates spaces for discretionary decision-making that often disadvantages women, reflecting the global finding that sustainable capacity development requires addressing ideological tensions between different actors.

## 8.5 Monitoring, evaluation, research and learning

In their review of national social protection strategies, Cookson et al (2023) found little reference to gender data, meaning that they lacked an adequate baseline, as well as the insights necessary to identify and monitor needs in the population. A 2021 UNICEF review on mainstreaming gender into social protection strategies and programmes (Camiletti et al) had similar findings (both were based on extensive reviews of social protection strategies in LMICs). A lack of gender perspective in M&E frameworks can lead to unaddressed gender gaps and biases during program implementation, potentially perpetuating cycles where the rights and needs of women and girls remain unmet. Even when gender inequalities are identified, many programmes fail to implement specific actions to address them. There are, however, good examples, particularly at programme level. In particular, Camiletti et al. found that more intentional programmes, particularly gender-responsive "Cash-plus" programs in LMICs (e.g. combining cash transfers with additional support services), show promise in addressing gendered needs and shifting social norms. However, further research is also needed to determine the most effective designs and implementations for specific outcomes in various contexts.

**Reflections for Eswatini:** The global evidence review highlights how national social protection strategies often lack adequate attention to gender data collection and analysis, limiting their ability to identify and address gender disparities. This pattern is starkly evident in Eswatini, as there is an absence of accessible monitoring and evaluation systems across social assistance programmes – while some information management is reported, systems are in different formats, and some not even in electronic format. Without even basic programme documentation in place, gender-sensitive monitoring is not possible. This creates a significant accountability gap, as decision-makers cannot determine whether programmes are reaching women and girls equitably or addressing their specific needs. The absence of evaluation data for most programs (with the SFP being a partial exception due to WFP support) means that gender-related impacts remain invisible.

<sup>234</sup> See e.g. Staab, S., Williams, L., Tabbush, C., and Turquet, L. (2024). *Harnessing Social Protection for Gender Equality, Resilience and Transformation. World Survey on the Role of Women in Development*. New York: UN-Women. Available at: <https://www.unwomen.org/sites/default/files/2024-10/World-survey-on-the-role-of-women-in-development-2024-en.pdf> [Accessed 10 January 2025]. p98

## SECTION C: DISCUSSION, CONCLUSIONS, RECOMMENDATIONS

### 9. DISCUSSION, CONCLUSIONS AND RECOMMENDATIONS

The preceding analysis has explored how poverty and vulnerability in Eswatini are fundamentally gendered and age-specific, with distinct manifestations across the lifecycle. Eswatini has established important foundations for social protection, particularly through its Older Persons Grant, while making policy commitments to gender equality. However, gaps remain in recognising and responding to structural poverty risks such as limited asset ownership, as well as specific life cycle risks -- for example, women's income losses accrued through undertaking most unpaid caring and domestic labour, and gaps in meeting the needs of children and working-age adults. The global evidence reviewed in earlier chapters demonstrates that lifecycle-responsive social assistance yields stronger poverty reduction outcomes and can help break intergenerational poverty cycles. Enhancing Eswatini's system to better recognise these dimensions presents a valuable opportunity to build on existing strengths while increasing effectiveness and equity. This final chapter synthesises key findings regarding gender and age intentionality within current policies and programmes, and offers practical recommendations for strengthening systems to address lifecycle risks and promote prosperity for all Emaswati.

#### 9.1 Gender and age-related intentionality of policies and programmes

Using UNICEF's GRASSP design principles<sup>235</sup> as a guide, we can conclude that Eswatini's social assistance policy documents frequently cite gender-sensitive intentions (though there were few concrete indications of gender-responsive or transformative aims). However this analysis has shown that the underpinning programmes can mostly be classified as 'gender blind'<sup>236</sup>, with some gender discriminatory and gender sensitive elements. For example, examples of gender sensitivity included empowerment of female farmers in the Home Grown School Feeding Programme<sup>237</sup> and some evidence of decision makers' weighting girls' increased vulnerability in the allocation of the OVC education grant targeting. On the other hand, over-reliance on unpaid female volunteers in the SFP and NCPs may be considered gender discriminatory. No explicit gender intentions appeared to be part of the design of any programme.

In published policies, only the National Gender Strategy itself makes explicit commitments on gender specifically, although these have not been translated into a coherent or measurable action plan. There are indications that the Social Assistance Policy will commit to several key gender responsive areas of action, including the potential for a multi-purpose child grant, and if approved, will go a long way to improve the currently very partial approach to maternity protection. In other key strategies such as the

<sup>235</sup> <https://www.unicef.org/innocenti/media/10031/file/UNICEF-Innocenti-GRASSP-Design-Guidelines-2024.pdf>

<sup>236</sup> Gender discriminatory: "Social protection can be gender-discriminatory when it incorporates design features that favour, or discriminate against, one gender in a way that leads to greater gender inequality. Often, discriminatory design features intentionally reinforce or 'instrumentalise' prevailing gender norms, roles, and stereotypes to achieve programme objectives." Gender blind: "when the design ignores gender differences and thereby unintentionally perpetuates and potentially worsens gender inequality. This occurs because the potential for gender unequal outcomes related to or resulting from the policy or programme design and implementation have not been considered, rendering gendered needs invisible." From: <https://www.unicef.org/innocenti/media/10031/file/UNICEF-Innocenti-GRASSP-Design-Guidelines-2024.pdf>

<sup>237</sup> E.g. initiatives to empower female farmers by improving their market access, providing training, and integrating them into school food supply chains (COMESA 2022, WFP 2024).

National Social Protection Framework, while commitments to gender equality are made in broad terms, these do not translate into actions or performance indicators.

At programme level, the underlying problem is a general lack of specificity and documentation in programme design. Without clearly articulated design principles and guidelines, systematic analysis of this design or programme execution is simply not possible. Gender and inclusivity intentions can only be inferred, and certainly cannot be rigorously assessed. Aside from increasing coverage, it is difficult to make definitive recommendations on how programmes can easily change. They must first set out their intentions in terms of design and guidelines for implementation, before progress can be meaningfully assessed.

## 9.2 Recommendation Matrix: Building Gender-Responsive and Age-Sensitive Social Assistance

The following matrix summarizes our key recommendations, their priority level, implementation timeframe, and responsible entities. These are further detailed in the subsequent sections. Only government stakeholders have been identified, however it is expected that multilateral and bilateral agencies would play a role in supporting many of these actions – these are suggested further in the roadmap.

**Table 4: Key Recommendations for building gender-responsive and age-sensitive social assistance in the Kingdom of Eswatini**

Recommendation	Priority	Timeframe	Lead Responsibility	Supporting Agency
1. Regularize programme design and documentation	High	Short-term	DPMO	
2. Enhance targeting and information sharing systems	High	Medium-term	DPMO, NDMA, MOEP	
3. Strengthen institutional capacity and resourcing	High	Medium-term	DPMO	Ministry of Finance
4. Invest in gender-responsive and age-sensitive programming: Child grants and caregiver top-ups	High	Medium-term	Dept of Gender and Family Issues DPMO	Ministry of Finance
5. Improve accessibility of benefits and associated support	Medium	Short-term	DPMO	Local Government
6. Enhance coordination and alignment of programmes	High	Short-term	DPMO	
7. Establish grievance redress and feedback mechanisms	High	Short-term	DPMO	

8. Strengthen community engagement and participation	Medium	Medium-term	DPMO	Local Government
9. Improve data transparency and accountability, M&E	High	Medium-term	DPMO	
10. Address attitudes and awareness among duty bearers	Medium	Long-term	Dept of Gender and Family Issues	

## 9.3 Overarching conclusions and recommendations on social assistance systems and programmes

### 9.3.1 RECOMMENDATION 1: Regularisation of Programme Design and Documentation

**RATIONALE:** There is a general lack of guidelines and official documentation on programmes, with only general intentions and parameters set out in policy documents. Without proper, available, transparent documentation, it is not possible for government, civil society and other external actors to scrutinize how programmes are being administered. This was recently noted by Eswatini's own Public Accounts Committee, finding that a lack of guidelines makes accountability impossible<sup>238</sup>.

The absence of clear documentation particularly disadvantages women and marginalised groups because in societies with patriarchal values, discretionary decision-making often reflects and reinforces gender biases. As evidenced in Section 6.2.3, community-based targeting in Eswatini has shown indications of bias and exclusion, where local power structures (predominantly male-dominated) make decisions that can disadvantage women, particularly those with low social capital. Without transparent guidelines and criteria, there is no way to ensure that gender-responsive approaches are incorporated or that gender biases in implementation are identified and addressed.

#### ACTIONS:

- » Develop standardized templates for programme guidelines co-created with gender experts, civil society, and marginalised groups
- » Conduct a gender and inclusion focused process evaluation to identify barriers in practice to applying for and receiving benefits
- » Mandate public disclosure of all key programme documents (design, eligibility, budgets)
- » Institute accountability audits linking funding to annual guideline compliance
- » Require gender-disaggregated data in all programme documentation

#### IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:

- » **Gender-specific challenge:** Documentation and guidelines developed without gender expertise may inadvertently institutionalise discriminatory practices that disadvantage women.

<sup>238</sup> Dlamini, S. (2024). Govt Pays Out E4 Billion Without Guidelines. Available at: <http://www.times.co.sz/news/145405-govt-pays-out-e4-billion-without-guidelines.html> [Accessed 10 January 2025].

- » **Practical approach:** Establish a gender review panel with representation from the Department of Gender and Family Issues, women's organisations, and gender experts to review all programme documentation before finalisation.
- » **Resource implication:** Allocate specific budget for gender expertise involvement in the documentation development process and for translation of materials into formats accessible to those with limited literacy.
- » **Stakeholder insight:** Local government officials noted that *"everyone is doing their own thing"*, highlighting the need for standardised documentation to ensure gender-responsive implementation across all social assistance programmes.

### 9.3.2 RECOMMENDATION 2: Targeting and Information Sharing Systems

**RATIONALE:** At present, all programmes have their own targeting systems with little to no cross-referencing, harmonisation of variables or interoperability. The development of a Social Registry (which will include all members of society) has great potential to gather hard data on Eswatini's population, track who is receiving programme benefits, and analyse inclusion and exclusion patterns.

Gender-responsive targeting is essential because women face unique barriers to accessing benefits. As detailed in Section 6.1.4, women bear higher dependency ratios, earn less than men, and face cultural expectations to provide for families, making them more vulnerable when the current targeting methods fail to account for these gendered realities. The review found that current community-based targeting processes in Eswatini often reflect and reinforce rather than counteract existing gender inequalities. A harmonised targeting system that explicitly considers gender dimensions would help identify and address these gaps, ensuring that programmes reach those most in need, particularly women who are primary caregivers, female-headed households, and adolescent girls who face specific lifecycle vulnerabilities.

#### ACTIONS:

- » Create formalized and harmonized M&E systems for each programme, with interoperability between one another and the social registry
- » Collect data that is (at minimum) disaggregated by gender, age and disability
- » Develop a shared digital platform linking all programs with real-time gender analytics
- » Review and reform targeting methodologies, particularly for community-based targeting
- » Conduct regular verification of registry and MIS data with support to civil society for third-party monitoring

#### IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:

- » **Gender-specific challenge:** Women, especially in rural areas, are less likely to have formal identification documents, digital literacy, or access to technology necessary for registry inclusion.
- » **Practical approach:** Design the registry with hybrid approaches (digital and manual) for registration and incorporate outreach strategies specifically targeting women and other vulnerable groups.
- » **Resource implication:** Budget for mobile registration teams to reach remote areas and women with limited mobility, and ensure systems can operate offline in areas with limited connectivity.
- » **Stakeholder insight:** Government stakeholder and development partners noted the opportunity to reduce the risks of elite capture or bias in beneficiary identification.

### 9.3.3 RECOMMENDATION 3: Institutional Capacity and Resourcing

**RATIONALE:** Institutional and administrative capacity in social assistance programmes is overstretched, particularly at local level and in programmes not supported by development partners. This was supported by the available literature<sup>239</sup> and confirmed by interviewees. A lack of investment in M&E makes assessment difficult, but there are clear indications that spending levels are lower than required.

The gender equality implications of under-resourced systems are profound. As detailed in Section 6.1.4, women are disproportionately affected by inadequate social transfers due to their greater reliance on these benefits, stemming from limited access to formal employment and prevailing gender norms. Moreover, Section 6.2.1 highlighted that women and vulnerable groups are more likely to be excluded from access to information about available benefits, compounding their disadvantage. The lack of operational budgets for transportation, as identified in the EU evaluation, particularly impacts women in remote areas who face mobility constraints and safety concerns when travelling to access services. Additionally, the reliance on unpaid or underpaid female labour in programmes like NCPs and School Feeding (Section 6.1.4) potentially reinforces gender inequalities by relying women's time and labour without compensation.

#### ACTIONS:

- » Invest in the social work services workforce and partner NGOs and CBOs
- » Develop clear programme guidelines and capacity building for implementation
- » Create dedicated budgets for gender mainstreaming (including M&E, training, partnerships)
- » Prioritise investments in rural areas, transport and outreach infrastructure
- » Introduce gender-based budgeting for government budgets in the longer term

#### IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:

- » **Gender-specific challenge:** Current institutional structures lack dedicated gender expertise, resources, and accountability mechanisms, leading to gender-blind implementation of programmes.
- » **Practical approach:** Engage gender focal points within each implementing department with clear terms of reference, reporting lines, and a quarterly coordination mechanism.
- » **Resource implication:** The EU evaluation in 2022 found that *"regional DSW offices... have still almost no operational budget for transportation or other need"*<sup>240</sup>, which particularly affects services to women who have greater mobility constraints.
- » **Stakeholder insight:** Local social workers reported that transport limitations prevent them from conducting proper outreach and assessments, leaving women in remote areas particularly underserved.

### 9.3.4 RECOMMENDATION 4: Investments in Gender-Responsive Programming

**RATIONALE:** Eswatini's spending on social protection is low in relation to need and compared to its peers<sup>241</sup>. Without functional monitoring and accountability systems, it is difficult to determine

<sup>239</sup> See e.g. Phelps (2022): 9)

<sup>240</sup> EU (2022)

<sup>241</sup> Raju and Younger (2021)

effectiveness, but there are many avenues for the social assistance budget to be invested poorly, particularly when relying on the discretion of unaccountable groups for decision-making.

Current programme designs do not address key gender-specific lifecycle risks and vulnerabilities. As detailed in Section 6.1.2, Eswatini does not issue maternity and child benefits that are highly effective in supporting women and their families during critical life stages. The burden of unpaid care work falls disproportionately to women, with Section 6.1.4 highlighting how the Older Persons Grant fails to account for the reality that women recipients (60% of beneficiaries, with 50% being widows) often support multiple dependents despite the grant being designed as individual income replacement. Similarly, the Disability Grant does not consider the added costs of caregiving, which falls predominantly on women. As evidenced in Section 6.2.3, the reliance on unpaid female volunteers in programmes like NCPs reinforces gender inequality and perpetuates women's economic disadvantage. Investments in gender-responsive programming would not only advance gender equality but would also increase the cost-effectiveness of social assistance by addressing these structural issues.

#### **ACTIONS:**

- » Consider implementing a Child Grant (or Child and Maternal Health Grant)
- » Build caregiver allowances into Disability Grants and Older Persons Grants
- » Provide stipends to caregivers delivering community level interventions (NCPs, SFP)
- » Create pathways for caregivers to professionalize their work
- » Conduct regular cost of living assessments and adjustments for all benefits
- » If means-testing is to be considered in future for any of the categorical grants, consider light-touch affluence testing rather than poverty testing

#### **IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:**

- » **Gender-specific challenge:** Cash transfer programmes are currently designed as income replacement but do not account for additional costs of disability, illness, and caregiving, which disproportionately affect women.
- » **Practical approach:** Introduce caregiver allowances as a component of existing grants, starting with pilot programmes in areas with highest dependency ratios.
- » **Resource implication:** Gradual introduction of new lifecycle programmes, beginning with those targeting the most vulnerable (e.g., mothers with children under 2 years), would allow for progressive realisation within budget constraints.
- » **Stakeholder insight:** Evidence from regional case studies shows that combined approaches addressing both caregivers' and beneficiaries' needs yield stronger outcomes for gender equality and poverty reduction.

#### **9.3.5 RECOMMENDATION 5: Accessibility of Benefits and Associated Support**

**RATIONALE:** Social workers are highly constrained as to the extent of outreach they can undertake, meaning that vulnerable, hard to reach and stigmatized populations are at high risk of being excluded from programmes and support. Local level, traditional structures lack clear guidance or oversight regarding gender sensitivity in their practices.

Gender inequality significantly impacts accessibility. Section 6.2.3 reveals that women, particularly in rural areas, face greater barriers in accessing social assistance due to mobility constraints, time poverty from caregiving responsibilities, and lower access to information. Local service providers reported that directives about social assistance benefits were only communicated via media, disadvantaging women who have less access to information channels.

The shift to mobile money payments for the Older Persons Grant, while generally positive, may disadvantage the 13% of the population without access to financial services—likely the most vulnerable women. The Disability Grant application process requires travel for medical assessments, creating disproportionate barriers for women with disabilities who face both gender and disability-based discrimination.

Cultural norms and power dynamics also affect accessibility, with Section 4.3 highlighting that women have less autonomy and decision-making power, which limits their ability to claim entitlements. Improving accessibility would address these gender-specific barriers and enhance women's access to critical social protection.

#### ACTIONS:

- » Research current accessibility of programmes (registration and receipt) to identify where marginalized groups are being left behind
- » Implement specific recommendations from existing reviews (e.g., for the Disability Grant)
- » Create outreach campaigns using various methods for specific groups
- » Simplify application processes for marginalised groups
- » Offer options like voice-to-text for applicants with limited literacy or visual impairment

#### IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:

- » **Gender-specific challenge:** Women face disproportionate barriers to accessing services, including limited mobility, time constraints from caregiving responsibilities, lower literacy levels, and cultural norms restricting their interactions with male officials.
- » **Practical approach:** Establish mobile service points in communities, with female staff available, scheduled at times that accommodate women's domestic responsibilities.
- » **Resource implication:** Greater investment in multiple modes of communication and outreach (see above and below)
- » **Stakeholder insight:** Multiple modes of communication (visual, audio, face-to-face) are necessary to ensure women with different literacy levels and media access can learn about available programmes.

#### 9.3.6 RECOMMENDATION 6: Co-ordination and Alignment of Programmes

**RATIONALE:** Co-ordination of social assistance programmes, both with one another and with other sectoral programmes, is very weak. MIS and other data systems are not shared, and there was limited evidence of referral mechanisms or data-sharing practices between programmes.

Poor coordination has disproportionate impacts on women and girls. As Section 4.3 documents, women face higher rates of gender-based violence (25.5% of females aged 13-24 experienced some form of violence) yet Section 7.1 reveals almost no linkages between social assistance and GBV prevention or response services. Women's multiple vulnerabilities—economic dependency, caregiving responsibilities, and higher exposure to violence—require coordinated responses across programmes. The fragmented system means women must navigate multiple, disconnected services while managing caregiving and domestic responsibilities. According to Section 6.1.2, women-specific needs, like maternity protection, fall through the cracks between programmes. Improved coordination would enable a more holistic response to women's lifecycle needs and reduce the time and resource burden on women trying to access multiple services.

#### ACTIONS:

- » Establish high-level coordination structures to ensure oversight of policy, systems, and programmes
- » Institute processes for social workers to screen, assess and connect beneficiaries to all needed services
- » Regularize and strengthen local coordination of social assistance
- » Develop integrated and transparent MIS systems
- » Ensure female representation in coordination structures

**IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:**

- » Government officials confirmed coordination gaps: "Everyone is just doing their own thing. So, we don't know each other well to even know what happens in the different departments" (government official KII)
- » National Social Assistance legislation is under development to "establish a framework to consolidate the various grant schemes into a comprehensive system"<sup>242</sup>

**9.3.7 RECOMMENDATION 7: Grievance Redress and Feedback Mechanisms**

**RATIONALE:** There was little evidence of any grievance redress or feedback mechanisms in any of the programmes reviewed. Phelps (2022) reported that *"talks are underway to explore the possibility of the DSW piggybacking onto the NDMA's hotline for routine SP as well as SRSP"*<sup>243</sup>, but progress is unclear.

Grievance and redress mechanisms need to be designed and delivered in a way that supports women and other marginalised groups, who ordinarily face systematic obstacles to expressing opinions, to have their voices heard. As detailed in Section 4.3, women in Eswatini face deeply entrenched patriarchal norms, with only 25.7% making their own informed decisions regarding sexual and reproductive health choices. Without safe, confidential channels for reporting issues, women are unlikely to challenge traditional power structures that disadvantage them. Section 6.2.3 highlights risks of exploitation in programme delivery, particularly for women requiring intermediaries to access benefits. Effective GRMs would provide women with channels to report misuse of power, exploitation, or exclusion, which is critical in a context where community-based targeting and traditional leadership structures may reinforce gender biases.

**ACTIONS:**

- » Establish independently administered safeguarding, grievance reporting and redress mechanisms for all programmes
- » Create formal data sharing and referral mechanisms between departments and agencies
- » Ensure multiple reporting channels (in-person, hotline, SMS, online)
- » Design mechanisms that balance protection needs with rights to confidentiality
- » Consider specific pathways for reporting gender-related concerns

**IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:**

- » **Gender-specific challenge:** Women face significant barriers to reporting grievances due to power imbalances, fear of reprisals, and limited autonomy in traditional settings.

<sup>242</sup> Dlamini, S. (2024). Govt Pays Out E4 Billion Without Guidelines. Available at: <http://www.times.co.sz/news/145405-govt-pays-out-e4-billion-without-guidelines.html> [Accessed 10 January 2025].

<sup>243</sup> Phelps 2022: 9

- » **Practical approach:** Establish multiple, confidential channels for reporting (phone, in-person, through trusted intermediaries) and ensure female staff are available to receive complaints.
- » **Resource implication:** Dedicated budget is needed for training on gender-sensitive complaint handling and for conducting community awareness on the right to provide feedback.
- » **Stakeholder insight:** Community members need access to reporting mechanisms that operate independently from local power structures, as women may not feel comfortable reporting to traditional authorities who make targeting decisions.

### 9.3.8 RECOMMENDATION 8: Community Engagement and Participation

**RATIONALE:** While communities are involved in targeting and resource allocation, structures are not set up transparently, and no safeguards against exploitation, corruption, bias or elite capture were identified. Community-based targeting is vulnerable to local power dynamics that may disadvantage women and marginalised groups.

Meaningful community engagement is essential for gender equality, but current approaches reflect and reinforce gender imbalances. Section 6.2.3 indicates that community-based targeting in Eswatini's programmes is implemented through traditional structures where, as noted in Section 4.3, deeply entrenched patriarchal norms prevail. These attitudes influence how resources are allocated at the community level. Women's participation in decision-making is limited, with only 17.1% of parliamentary seats held by women (Section 4.3). Transforming community engagement approaches would create opportunities for women's voices to shape programme implementation and challenge discriminatory practices in resource allocation.

#### ACTIONS:

- » Review local level governance and accountability structures for opportunities to improve gender equality
- » Establish transparent and inclusive feedback loops to ensure community input directly influences programme improvement
- » Actively involve vulnerable and marginalized groups in engagement processes
- » Create safeguards against elite capture in community-based decision making
- » Formalize the role of traditional structures in accountable ways

#### IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:

- » **Gender-specific challenge:** Community engagement processes often replicate existing power structures, limiting women's meaningful participation and influence in decision-making.
- » **Practical approach:** Establish quotas for women's representation in community-level decision-making bodies and create women-only consultation spaces to encourage open discussion of gender-specific concerns. Schedule meetings at times and locations accessible to women.
- » **Resource implication:** Budget for transport and childcare during community consultations to enable mothers' participation.
- » **Stakeholder insight:** Local service providers noted significant barriers to effective assessment: *"Assessment is very important and yet tricky. I won't leave the social office and go on ground to do assessment whereas there is Bucopho on ground to do that. Those people are our extended hand, but then they need to be honest with their job"* (Local service provider, FGD).

### 9.3.9 RECOMMENDATION 9: Data, M&E, Transparency and Accountability

**RATIONALE:** There are well-recognized gaps in monitoring and evaluation across all programmes, particularly those fully financed by government. Without foundational documents, it is not possible to meaningfully monitor or evaluate programmes.

The absence of gender-sensitive M&E severely limits progress toward gender equality. Section 4.4 identifies significant gaps in gender disaggregated data in Eswatini, with key indicators like time spent on unpaid care work completely missing. Without this data, programmes cannot be designed or evaluated for their impact on gender equality. As Section 6.1.3 notes, sex-disaggregated data is not generally available for social assistance programmes, making it impossible to analyse gender-based inclusion or exclusion patterns. This data gap reinforces gender blindness in programme design and implementation, as documented in Section 9.1. The review of global evidence in Section 8.5 emphasizes that without gender-responsive M&E frameworks, programmes fail to identify and address gender inequalities, perpetuating cycles where women's and girls' needs remain unmet.

#### ACTIONS:

- » Develop foundational design documents for all programmes
- » Create M&E frameworks with clear alignment to guiding policies and action plans
- » Invest in knowledge and infrastructure to collect and report relevant data
- » Include gender-sensitive indicators (e.g., time use/poverty, caregiving responsibilities)
- » Publish M&E and budget data through user-friendly portals
- » Support third-party monitoring by civil society

#### IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:

- » **Gender-specific challenge:** Current M&E systems lack gender-sensitive indicators and sex-disaggregated data collection methods, making it impossible to assess programmes' differential impacts on women and men.
- » **Practical approach:** Develop a core set of gender indicators to be integrated into all programme M&E frameworks, including both quantitative measures (e.g., percentage of female beneficiaries) and qualitative aspects (e.g., women's decision-making power over resources).
- » **Resource implication:** Allocate specific budget for gender-sensitive data collection methods, including female enumerators for interviewing women and privacy provisions for discussing sensitive topics.
- » **Stakeholder insight:** NGOs highlighted the lack of accountability in current systems: *"It then becomes a problem of it's like the state is giving out money without any form of accountability or just a monitoring and reviewing element of it"* (NGO FGD).

### 9.3.10 RECOMMENDATION 10: Attitudes and Awareness Among Duty Bearers

**RATIONALE:** Among many service providers and some policymakers, there was a strong perception that females, particularly girls, are being unfairly advantaged over boys. Patriarchal norms and attitudes appear prevalent at all levels of society, with limited understanding of structural gender inequalities.

Addressing duty bearers' attitudes is crucial for gender equality. Section 9.2.9 reveals that many service providers and policymakers believe women and girls receive unfair advantages, despite evidence of structural disadvantages women face. Section 4.3 documents deeply entrenched gender norms, with the Gender Links survey showing only 60% of respondents agree that "women and men should be treated the same." These attitudes directly influence programme implementation as duty bearers make decisions reflecting these biases. Section 6.2.3 highlights how these biases affect

targeting and resource allocation decisions. The global evidence in Section 8.4 emphasizes that "sustainable capacity development requires catalysing a shift in ideologies related to gender norms and roles." Without addressing these fundamental beliefs among those implementing programmes, even well-designed policies will fail to deliver gender-equitable outcomes.

**ACTIONS:**

- » Conduct a Knowledge, Attitudes, and Practice survey with duty bearers
- » Undertake Social and Behaviour Change interventions with officials and community leaders
- » Increase investment in SBC interventions to transform social norms at community level
- » Make explicit linkages between SBC interventions and social assistance policies and programmes
- » Ensure boys and men are integrated into gender equality programmes

**IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:**

- » **Gender-specific challenge:** Deeply entrenched patriarchal attitudes among duty bearers can undermine gender-responsive policies, as officials may resist or incorrectly implement approaches they perceive as favouring women "unfairly."
- » **Practical approach:** Design capacity building that frames gender equality as benefitting all of society rather than as a zero-sum game, using local examples of how addressing women's needs strengthens families and communities.
- » **Resource implication:** Long-term investment in attitudinal change is needed, including regular refresher training and ongoing support rather than one-off sensitisation exercises.
- » **Stakeholder insight:** Targeting gender norms transformation at duty bearers is essential for sustainable change, as these actors have direct influence over resource allocation and can either reinforce or challenge discriminatory practices.

**9.3.11 RECOMMENDATION 11: Political Economy Analysis**

**RATIONALE:** This study highlighted a clear need for deeper understanding of the political economy of social protection in Eswatini. The combination of vaguely specified programmes, lack of transparency and the dual political system leaves substantial room for individual/elite decision-making to dictate social assistance on the ground.

A gender-focused political economy analysis is essential because gender inequality is deeply embedded in Eswatini's governance structures. Section 4.3 documents how patriarchal norms influence all levels of society, with women treated as legal minors in many contexts. Section 9.2.10 highlights how the dual governance system (traditional and formal) creates spaces where gender biases influence resource allocation decisions. As one local service provider noted, *"this one [the traditional system] has more power compared to this one, and unfortunately we are employed by this one [the government]."* The traditional system often reinforces gender inequalities, with local leaders making decisions based on patriarchal values rather than programme guidelines. Understanding these power dynamics is crucial for designing interventions that can effectively challenge gender inequality rather than inadvertently reinforcing it.

**ACTIONS:**

- » Conduct a detailed Political Economy Analysis (PEA) with a clear gender lens
- » Ensure the PEA captures gender and inclusion nuances within the political environment
- » Use PEA findings to inform strategic decisions and policy formulations

- » Build understanding of the social contract around social assistance
- » Identify key enablers and blockers within the wider enabling environment

#### IMPLEMENTATION CONSIDERATIONS AND SUGGESTIONS:

- » **Gender-specific challenge:** The dual governance system creates complex power dynamics that often marginalise women's voices and needs, as traditional structures may prioritise cultural norms over gender equality principles.
- » **Practical approach:** Ensure the PEA methodology includes specific attention to how gender power relations operate within both formal and traditional governance systems, with explicit mapping of decision-making points that affect women's access to services.
- » **Resource implication:** Invest in participatory approaches that allow women from different socioeconomic backgrounds to safely share their experiences of navigating both systems.
- » **Stakeholder insight:** Local service providers highlighted the tension between systems: *"I keep on going back to the dual system that is happening in the country... this one [the traditional system] has more power compared to this one, and unfortunately we are employed by this one [the government]"* (Local service provider, FGD).

## 9.4 Summary of priorities

Based on this comprehensive review, we recommend the following highest priorities:

1. **Review and document programme designs:** Fully review all existing programmes (with a strong focus on gender and inclusion) to develop clear, publicly accessible design documents and implementation guidelines<sup>244</sup>.
2. **Establish monitoring and evaluation systems:** Link programme documentation to transparent M&E processes that are inclusive in both theory of change and indicators, with meaningful civil society engagement.
3. **Address lifecycle gaps through additional programme interventions:** Take concrete steps to meet GoKE's commitment to a comprehensive life-cycle approach, particularly addressing the most under-served groups: young children, at-risk adolescent girls, mothers and other working age caregivers. A multi-purpose child grant should be prioritised.
4. **Support caregivers:** Prioritise benefits for caregivers and account for the additional costs of living with disabilities and illnesses for greater equity and cost-effectiveness. As an immediate step, eligibility for the Older Persons Grant should not disqualify older people with disabilities from the Disability Grant. Caregivers delivering social assistance programmes on a voluntary basis should also be adequately supported, e.g. with stipends and transport costs.
5. **Implement safeguarding mechanisms:** Create safeguarding and grievance redress mechanisms across all social assistance programmes, preferably as a unified system.
6. **Ensure an inclusive social registry:** Design the social registry to be inclusive and promote gender-responsiveness and broader social inclusion through greater integration of benefits and service provision.
7. **Increase system investment:** Invest strategically in the whole system, from local service delivery to leadership, with particular attention to field-level workers and proactive outreach to marginalised groups.

<sup>244</sup> It is recognised that this is underway for some programmes already to some extent (Disability Grant and OVC Education Grant), but these need to be processes that are coherent across the whole system, and lead to publicly available design and implementation guidelines and accountability mechanisms.

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- 8. Conduct Political Economy Analysis:** Use PEA with a gender and inclusion lens to identify key enablers and blockers for reform, ensuring all work is politically and culturally grounded.

The GRASSP guidance and roadmap will further unpack the key proposed steps in implementing these recommendations, setting out key options/actions and timelines, in close consultation with UNICEF, GoKE and key stakeholders.

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## ANNEX 1: DETAILED METHODOLOGY

This Comprehensive Gender Review was conducted using a mixed-methods approach, combining qualitative and quantitative techniques to collect and analyze data on gender dynamics in Eswatini. The study aimed to understand the perspectives of various stakeholders on gender roles, policies, and programs, and how they intersect with social assistance systems.

### Data Collection

The study involved multiple stakeholder groups, including government officials, international non-governmental organizations (INGOs), NGOs, and local community leaders, ensuring a diverse range of perspectives. Data collection methods included KIIs and Focus Group Discussions (FGDs). KIIs were used to gather in-depth information from individuals with specific expertise or experience, while FGDs facilitated discussions among groups of stakeholders to explore shared experiences and perspectives.

### Stakeholder Engagement

- Government officials provided insights into policy frameworks, implementation challenges, and strategic directions for gender equality. They shared their perspectives on existing policies, obstacles encountered in implementation, and recommendations for enhancing gender policy effectiveness.
- INGOs offered perspectives on grassroots gender initiatives and the potential of Gender Responsive Age Appropriate Social Security Assistance (GRASSA). They discussed funding mechanisms, strategies for incorporating community feedback, and practical challenges faced in implementing policies at the local level.
- NGOs shared experiences and challenges in integrating cultural considerations into program design and implementation. They engaged in collaborative discussions, assessing the effectiveness of existing programs and initiatives aimed at promoting gender equity.
- Local community leaders provided firsthand accounts of gender-related issues and local development challenges. They shared their experiences, challenges, and community-specific factors that influence program implementation and effectiveness.

### Data Analysis

Thematic Framework Analysis was used to analyze the qualitative data. This involved a systematic process of:

- Familiarization: Analysts reviewed transcripts and field notes to gain a comprehensive understanding of the data.
- Initial Coding: Broad categories were applied to data segments to capture emergent themes.
- Thematic Framework Development: Initial codes were refined into a structured thematic framework.
- Stakeholder-Specific Analysis: Data were analyzed considering the unique context of each stakeholder group.

### Analytical Frameworks

Two analytical frameworks were used to guide the analysis:

1. Gender Analysis Toolkit by Jhpiego: This toolkit provided a framework for assessing gender roles and relations, including tools and methods for conducting gender analyses.

- Harvard Analytical Framework: This framework focused on economic efficiency through gender equity, examining gender roles, resource access, and influencing factors.

### Participant breakdown

Stakeholder Group	Type of Interview	Number of Interviews	Number of Interviewees
Primary: National Government	KII	11	11
Secondary: National Government	KII	4	4
Primary: NGO/INGO	FGD	1	6
Primary: UN	KII	4	4
Secondary: Local CSO/CBOs	FGD	1	5
Secondary: Local Traditional Leadership	KII	1	1
Secondary: Local Government Leadership	KII	1	1
Secondary: Service Providers	FGD	1	5
<b>Total</b>		<b>24</b>	<b>37</b>

## ANNEX 2: GENDER ANALYSIS FRAMEWORK FOR SOCIAL POLICIES

### 1. Policy context and objectives

- Does the policy explicitly address gender equality or women's empowerment as an objective?
- How does the policy align with national or international gender equality commitments, such as CEDAW, the SDGs, or regional frameworks? (Reference: [UN Women, 2019](#))

### 2. Gender roles and responsibilities

- How does the policy consider existing gender roles and responsibilities within households, communities, and workplaces?
- Does the policy challenge or reinforce traditional gender roles? (Adapted from Oxfam, 2014)

### 3. Access to and control over resources

Does the policy account for gender differences in access to and control over resources, services, and opportunities (e.g., healthcare, education, economic assets)?

Are there mechanisms to ensure equitable distribution of resources among genders? (Reference: [FAO, 2021](#))

### 4. Participation and decision-making

- Are men, women, and non-binary individuals equally represented in the design, implementation, and monitoring of the policy?
- Does the policy include provisions for empowering marginalised groups, including women, to participate in decision-making processes? (Reference: [UNDP Gender Equality Seal Toolkit, 2020](#))

### 5. Impacts on different gender groups

- Has the policy been analysed for its differential impacts on women, men, and non-binary individuals?
- Does the policy include measures to mitigate any potential negative impacts on specific gender groups? (Adapted from [UN Women, 2019](#))

### 6. Intersectionality

- How does the policy address intersecting forms of discrimination based on race, ethnicity, disability, sexual orientation, age, or socioeconomic status?

- Are vulnerable and marginalised groups specifically targeted by the policy? (Reference: [European Institute for Gender Equality, 2016](#))

## 7. Budgeting and resources

- Does the policy allocate resources for gender-responsive implementation?
- Is there a gender budgeting framework in place to ensure effective resource utilisation? (Reference: [UNDP Gender Equality Seal Toolkit, 2020](#))

## 8. Monitoring, evaluation, and accountability

- Does the policy include gender-sensitive indicators and targets for monitoring and evaluation?
- Are there accountability mechanisms to track progress on gender-related objectives? (Adapted from [FAO, 2021](#))

## 9. Cultural and social norms

- How does the policy account for or aim to shift harmful cultural or social norms that perpetuate gender inequality?
- Are there provisions for public awareness campaigns or capacity-building initiatives? (Reference: [Oxfam, 2014](#))

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