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## United Nations Children's Fund

Executive Board

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Item 4 (a) of the provisional agenda\*

### Country programme document

#### South Africa

#### *Summary*

The country programme document (CPD) for South Africa is presented to the Executive Board for discussion and approval at the present session, on a no-objection basis. The CPD includes a proposed aggregate indicative budget of \$6,500,000 from regular resources, subject to the availability of funds, and \$41,430,000 in other resources, subject to the availability of specific-purpose contributions, for the period March 2026 to December 2030.

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\* [E/ICEF/2026/1](#).

*Note:* The present document was processed in its entirety by UNICEF.



## Programme rationale

1. Thirty years since the end of apartheid, South Africa has made substantial progress furthering the rights of every child. With an upper-middle income classification, robust democratic institutions, a progressive social policy framework and a positive ratio of working-age citizens to dependents, the country is well positioned to not only meet its commitments expressed in the National Development Plan, but to direct its significant influence towards realizing an Africa more fit for children.

2. Although South Africa is a champion promoter of child rights, human dignity and equality through its constitution and bill of rights, it remains the most unequal country in the world. With a Gini coefficient of 0.63,<sup>1</sup> high income coexists with asset inequality and deep multidimensional poverty, concentrated primarily in Black African, large and female-headed households living in rural areas. Despite modest declines in income poverty in the post-apartheid era, recent estimates suggest that some 63 per cent of adults live below the upper-middle-income poverty line<sup>2</sup> and 62 per cent of children aged 0–17 years are multidimensionally poor.<sup>3</sup> People with disabilities are also more likely to live in poverty.

3. Natural disasters are increasing in frequency and severity with climate change, while weakly regulated urban expansion contributes to significant biodiversity loss and pollution. These issues intersect and contribute to human, social and economic losses affecting the health and well-being of children. The coastal provinces of KwaZulu-Natal and the Eastern Cape are highly exposed to climate risks, but poorer households across the country are most vulnerable to impacts of floods, drought, water scarcity and food insecurity.

4. South Africa has emerged as a new migration hub, hosting an estimated 2.4 million international migrants in 2022 from across the continent and beyond.<sup>4</sup> The trend of migration is expected to continue, with migrants pushed by conflict, insecurity or environmental stress and drawn by the promise of economic opportunity. While immigrants hold the potential for skills exchange and a contribution to the tax base, irregular migration also challenges the State to address gaps in urban infrastructure and the coverage of basic social services, including those that foster social cohesion and protection from violence, abuse and exploitation.

5. Although historical spending on the social sectors was commendable, recent national budget allocations fall short of addressing the scale of challenges facing children. Weak domestic growth, the debt burden and declining official development assistance have constrained the fiscal space, leading to less adequate and more contested investments in social protection and basic services. Inefficiencies in the management of public resources impede decentralization and undermine the coverage and quality of services.

6. The social protection system of South Africa is robust, with various social assistance programmes supporting children, including those with disabilities, such as the Child Support Grant, the Foster Child Grant and the Care Dependency Grant. The Child Support Grant reaches 82.6 per cent of eligible children, making it one of the most effective grants in the world. However, this still leaves nearly 2.2 million

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<sup>1</sup> United Nations Country Team, *United Nations Country Analysis: South Africa – Final report*, United Nations, Pretoria, August 2025, p. 43, available at <https://uninfo.org/v2/location/32/documents>.

<sup>2</sup> *Ibid.*, p. 21.

<sup>3</sup> UNICEF, *Situation Analysis of Children and Adolescents in South Africa 2024: summary report*, UNICEF, Pretoria, 2024, p. 23.

<sup>4</sup> *Ibid.*, p. 96.

children who should receive the grant without critical support.<sup>5</sup> The absolute value of the grant is also low and further losing value with consumer price inflation. Uptake is impeded by the lack of a policy framework to better link social protection to social services, data gaps, child naming practices and other administrative barriers to birth registration and grant access. High and rising unemployment also increases pressure on the social assistance system, especially for those 18 years and older.

7. Several national institutions have an intersectoral mandate, such as the Parliament, Human Rights Commission and the Office of the Rights of the Child, but weak interdepartmental coordination hinders the implementation of strategic, multisectoral plans such as the National Plan of Action for Children. Technical capacity gaps and resource limitations at provincial and district levels impede effective planning, budgeting and delivery of social services for children. Data collection on poverty and inequality remain irregular and outdated, with limited disaggregation. Although the Parliament provides a formal platform for participation, the voices of children and youth remain underrepresented in media and in other forums that foster policy and budget dialogue.<sup>6</sup>

8. South Africa has made great strides in improving child survival, with the under-5 mortality rate declining over the past decade. However, progress was reversed recently, as child mortality increased from 30 deaths per 1,000 live births in 2020 to 40 in 2022.<sup>7</sup> This negative trend is linked partly to the maternal mortality ratio, which is twice the middle-income average; rates of stillbirth remaining unchanged for more than a decade; and the increasing rate of neonatal deaths in facilities. It is also linked to serious gaps in the coverage and quality of primary healthcare services for mothers and children. For example, the number of zero-dose children almost doubled between 2019 and 2024, contributing to outbreaks of measles across the nation.<sup>8</sup>

9. South Africa is home to the highest total number of people living with HIV globally.<sup>9</sup> In 2022, an estimated 28 per cent of pregnant women, 5 per cent of youth aged 15–24 and 2 per cent of children aged 0–14 were living with HIV.<sup>10</sup> HIV is also a major contributor to the adolescent mortality rate, which was 13 deaths per 1,000 adolescents in 2022.<sup>11</sup> High rates of early and unintended pregnancy, declining use of condoms,<sup>12</sup> low knowledge of HIV transmission and a notable decline in first antenatal visits (a decline of more than 14 per cent in three provinces)<sup>13</sup> demonstrates that health services are not sufficiently available or responsive to the needs of adolescents.

10. South Africa faces a worsening triple burden of malnutrition. The prevalence of wasting among children under 5 doubled from 2.5 per cent (2016) to 5 per cent (2024) and 3 out of 10 children are stunted, with prevalence rates largely unchanged over the past 30 years. Child food poverty is the most significant driver of stunting and

<sup>5</sup> UNICEF and Joint SDG Fund, *An Update Study on the Exclusion Error Rate for Children who are Eligible to Receive the Child Support Grant: final report*, May 2022.

<sup>6</sup> UNICEF, *Situation Analysis of Children and Adolescents in South Africa 2024: summary report*, UNICEF, Pretoria, 2024, p. 79.

<sup>7</sup> Children's Institute, *South African Child Gauge*, University of Cape Town, 2024, p. 58.

<sup>8</sup> National Department of Health, *District Health Information System data*, 2024.

<sup>9</sup> Joint United Nations Programme on HIV/AIDS (UNAIDS), "UNAIDS Executive Director encouraged by South Africa's continued leadership in responding to HIV", Geneva and Johannesburg, 20 June 2025.

<sup>10</sup> UNICEF, *Situation Analysis of Children and Adolescents in South Africa 2024: summary report*, UNICEF, Pretoria, 2024, pp. 87–88.

<sup>11</sup> *Ibid.*, p. 96.

<sup>12</sup> Human Sciences Research Council, *The Sixth South African National HIV Prevalence, Incidence and Behaviour Survey 2022*, HSRC Press, Cape Town, South Africa, 2022, p. 22.

<sup>13</sup> Health Systems Trust, *District Health Barometer 2023/24: section A, chapter 1 – Reproductive, maternal, newborn and child health*, Health Systems Trust, Durban, South Africa, 2025, p. 16.

wasting, affecting 60 per cent of children under 5 years of age, 23 per cent severely.<sup>14</sup> Undernutrition is often combined with micronutrient deficiencies, with three national surveys reporting anaemia in children at 28.9 per cent, 10.7 per cent and 61.3 per cent, respectively.<sup>15</sup> The prevalence of overweight/obesity among under-5 children increased from 13 per cent (2016) to 23 per cent (2023). For girls and boys aged 10–19 years, the rates have increased to 32 per cent and 20 per cent, respectively, since 2016.<sup>16</sup> Addressing this requires a multi-system approach, including enforcing policies on food labelling and marketing, improving food environments, expanding intersectoral efforts to make nutritious foods affordable and accessible, and linking vulnerable families to community-level nutrition counselling and social protection.

11. Although South Africa adopted the National Integrated Early Childhood Development Policy in 2015, attendance in early learning programmes (ELPs) has remained low and stagnant over the past 11 years. Just 34 per cent of children aged birth to 4 years are enrolled in ELP centres, preschools, nurseries or Grade R, meaning that 58 per cent of young children remain at home with parents or caregivers.<sup>17</sup> Moreover, challenges in quality persist, with less than half (45 per cent) of children in ELPs aged 4 to 5 years on track for learning. While 55 per cent were on track in emergent literacy and language, far fewer achieved expected levels in numeracy (34 per cent) and fine motor skills (30 per cent).<sup>18</sup> Children from poor households and children with disabilities are at a higher risk to be excluded, while children in Free State, Northern Cape and KwaZulu-Natal are most likely to be falling far behind. Barriers to expanding early childhood education for all include low investment, an outdated funding model, and challenges integrating ELPs into the formal system, with common policies, data systems and career paths for educators.

12. Although enrolment in compulsory schooling is almost universal (98.9 per cent), there is evidence that students are not actually acquiring the foundational literacy and numeracy that they need for school and the future. In 2023, only 19 per cent of Grade 4 students reached the minimum proficiency for reading; 41 per cent for mathematics and 36 per cent for science.<sup>19</sup> Also worrisome, more than 40 per cent of South African students do not matriculate. Close to 3 per cent of 15-year-olds and nearly 10 per cent of 17-year-olds dropped out of school in 2023, primarily due to poor performance, money, disability or illness.<sup>20</sup> The need for better-quality, more relevant and competency-based education, which can build skills that are needed for school, life and the labour market, is an underlying cause. Despite the Government's progressive Three Stream Model, the education system faces resource constraints, a serious teacher gap and a digital divide that isolates many schools in poorer provinces. By 2030, 428,000 new teachers must be recruited and supported to provide quality teaching in science, technology, engineering, math and the competency-based skills that equip students for the future.

<sup>14</sup> UNICEF, *Child Food Poverty: nutrition deprivation in early childhood*, *Child Nutrition Report 2024*, UNICEF, New York, June 2024.

<sup>15</sup> Turawa, Eunice, et al., 'Prevalence of Anaemia, Iron Deficiency, and Iron Deficiency Anaemia in Women of Reproductive Age and Children under 5 Years of Age in South Africa (1997–2021): A Systematic Review', *International Journal of Environmental Research and Public Health*, vol. 18, no. 23, 2021, p. 11.

<sup>16</sup> UNICEF, *Situation Analysis of Children and Adolescents in South Africa 2024: summary report*, p. 28.

<sup>17</sup> Statistics South Africa, *General Household Survey*, report no. P0318, Pretoria, 2023.

<sup>18</sup> UNICEF, *Situation Analysis of Children and Adolescents in South Africa 2024: summary report*, pp. 42–43.

<sup>19</sup> Department of Basic Education (South Africa). *Spotlight on Basic Education Completion and Foundational Learning: South Africa*, Pretoria: Department of Basic Education, 2024, pp. 19–20.

<sup>20</sup> UNICEF, *Situation Analysis of Children and Adolescents in South Africa 2024: summary report*, p. 48.

13. Violence, including gender-based violence, remains pervasive in South Africa and is anecdotally referred to as the “second pandemic” after the coronavirus disease (COVID-19) pandemic. Some 23.9 per cent of South African women experience some form of physical and sexual intimate partner violence in their lifetime and crime statistics show that 40 per cent of the reported sexual crimes are against children.<sup>21</sup> Children with disabilities are disproportionately affected.<sup>22</sup> With gaps in legislation, regulatory capacity, codes of conduct for technology companies and the knowledge of Internet users, online threats to children are rapidly outpacing control measures. Some 70 per cent of children use the Internet without parental supervision, exposing them to risks of online violence, commercial sexual exploitation<sup>23</sup>

14. Positively, there has been a significant drop in corporal punishment in schools, and more than 90 per cent of South Africans are aware that corporal punishment is illegal.<sup>24</sup> However, corporal punishment persists at home, amid multiple social burdens borne by parents and caregivers,<sup>25</sup> and the country lacks a coherent and consolidated approach to promoting positive parenting at scale. Diverse family structures also pose challenges to providing care: just 35 per cent of children live with both parents; 42 per cent of children live with only their mother; 19 per cent live with neither parent. Although the country has done a commendable job supporting family-based care for children that are unable to live with their parents, foster care grants remain low and placements, oversight and case management remain challenging due to high caseloads and insufficient social workers. Some 9 per cent of births were registered late in 2023, meaning that 200,000 children face undue administrative hurdles and limited access to social services.<sup>26</sup>

## Programme priorities and partnerships

15. The UNICEF country programme is aligned with the Mid-Term Development Plan, the National Development Plan 2030, Africa’s Agenda for Children 2040 and the Africa Agenda 2063. It responds to the concluding observations of the Committee on the Rights of the Child and recommendations from the African Committee of Experts on the Rights and Welfare of the Child. It is aligned with select Impact Results in the UNICEF Strategic Plan, 2026–2029 and with outcome 2 (expanding human capabilities and equitable opportunities) and outcome 4 (for a safe and enabling society) in the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2026–2030. Strategic planning was informed by a series of consultations with national authorities, United Nations system organizations, local development partners, members of the private sector, and civil society, including children, adolescents and young people.

16. UNICEF will accompany the Government in its efforts to ensure that, by 2030, the most vulnerable children, adolescents and young people in South Africa will live in a safer and more equitable environment, get a fair chance in life and realize their rights to survive, thrive and reach their full capacity. The theory of change states that

<sup>21</sup> Human Sciences Research Council, *The First South African National Gender-Based Violence Study, 2022: a baseline survey on victimisation and perpetration*, Human Sciences Research Council, Cape Town, South Africa, 2023.

<sup>22</sup> United Nations Country Team in South Africa, *Country Analysis: South Africa*, July 2025, p. 29.

<sup>23</sup> ECPAT, INTERPOL and UNICEF, *Disrupting Harm in South Africa: evidence on online child sexual exploitation and abuse*, 2022.

<sup>24</sup> Statistics South Africa, ‘Governance, Public Safety, and Justice Survey 2019/20’, Statistics South Africa, Pretoria, 2020.

<sup>25</sup> Richter, L.M., et al., ‘A longitudinal perspective on violence in the lives of South African children from the Birth to Twenty Plus cohort study in Johannesburg-Soweto’, *South African Medical Journal*, vol. 108, no. 3, 2018, pp. 181–186.

<sup>26</sup> Statistics South Africa, *Recorded Live Births, 2023 (Statistical Release P0305)*, Statistics South Africa, Pretoria, 2024, p. 1.

children and adolescents will progressively realize their rights if they can more fully utilize social assistance and basic social services supported by: (i) Government implementation of legislation with greater accountability, more strategic use of evidence, better interdepartmental coordination and more effective public finance management; (ii) a “whole-of-society” approach to leveraging investments in children, mobilizing support from the public and private sectors, as well as civil society; (iii) parents, caregivers and front-line service providers that deliver integrated programmes to reduce harmful practices and promote optimal behaviours for children’s and adolescent’s development and well-being; and (iv) empowerment to participate in decisions that affect their lives and communities.

17. The evaluation of the UNSDCF 2020–2025 recommended deepening alignment with the Government and reinforcing joint planning, budgeting and delivery of programmes for greater system coherence. The evaluation of the UNICEF country programme, 2020–2025, recognized the organization’s critical role in convening stakeholders to further child rights and recommended stronger cross-sectoral collaboration to strengthen the Government’s interdepartmental efforts to integrate social protection and basic social services. UNICEF has learned that to support the Government to have greater impact and scale, it must further sharpen the UNICEF programme and ensure that strategies are appropriate to the upper-middle-income context.

18. The country programme has four programme outcomes: investing in children; child survival and adolescent well-being; education; and child protection. The programme will maximize opportunities to advance child rights, presented by the global stature of South Africa, rooted in the legacy of Nelson Mandela and its leadership in development and human rights. Specifically, the programme will:

(a) Build on the country’s strong democratic institutions to further entrench and safeguard child rights, with a focus on the most vulnerable.

(b) Leverage the knowledge and influence of South Africa in regional, continental and global platforms, (e.g. Group of Twenty, African Union) and the robustness of its markets to secure additional public and private investments for children and further South-South technical cooperation for child rights programming.

(c) Advocate at the highest levels to enhance government accountability in delivering results and addressing the root causes of child rights violations, including inequity, multidimensional child poverty and violence.

(d) Generate evidence in partnership with renowned academia in South Africa and promote its strategic use in decision-making for children.

(e) Strengthen public finance management to boost and safeguard investments in social services and ensure that they are more efficiently and equitably allocated for greater impact.

(f) Scale the implementation of evidence-based social and behaviour change programmes that promote positive parenting and optimal health-seeking behaviours through planning and capacity-building of the social service workforce.

(g) Harness the power of the dynamic private sector in South Africa to strengthen innovations, digital transformation and the use of new technologies to enhance supply chains, services and programming for children.

(h) Strengthen the resilience of systems and communities by fostering a more enabling environment for child-sensitive climate adaptation, including by

influencing policy, budgets and governance in the water, sanitation and hygiene sector.

(i) Strengthen existing child participation platforms within the Government to empower children and adolescents to ensure their meaningful participation in policymaking, budgeting and service provision that affect their lives.

### **Investing in children**

19. This programme component is aligned primarily with UNSDCF outcome 2 (for expanded capabilities and equitable opportunities). It seeks to ensure that existing public and private investments for children are used more effectively and efficiently; identifies areas of underinvestment, and advocates for more strategic investments in children. To achieve this, UNICEF will actively support the Department of Social Development in developing and monitoring the National Plan of Action for Children, use approved sectoral plans to hold the Government and partners to account and ensure the timely submission of State party reports to human rights treaty bodies. UNICEF will also strengthen the capacity of government institutions, private sector partners and civil society stakeholders to mobilize and manage public and private resources for children, including using innovative financing mechanisms.

20. UNICEF will also strengthen the evidence base for social assistance targeting by updating the multiple and overlapping deprivation analysis and further institutionalizing the measurement of children's monetary and multidimensional poverty. Working with partners, UNICEF will also support the expansion of social assistance, including "cash-plus" services with partners to integrate disability-inclusive, shock-responsive and adaptive social protection in key social sectors. The programme also seeks to enhance child and adolescent participation in policymaking and budgeting, expand public finance literacy and support youth-led initiatives, including through Generation Unlimited.

### **Child survival and adolescent well-being**

21. This programme component aims to ensure that the most disadvantaged mothers, children, and adolescents have increased access to high-quality, equitable and age-appropriate primary healthcare and nutrition services, aligning primarily with UNSDCF outcome 2. UNICEF will leverage evidence and resources from the public and private sectors to address equity gaps and to influence policies, plans and innovative programmatic approaches. Specifically, the programme will support the Department of Health to enhance the quality of care in facilities; expand early detection and screening of children with developmental delays and disabilities; and improve delivery of immunization, HIV prevention and treatment, nutrition and environmental health services through primary healthcare and community health systems. UNICEF will also promote stronger planning, financing, forecasting and supply chain management. The programme will also strengthen the collection, management and strategic use of disaggregated data for programming through more robust and integrated information systems, while building the capacity of community health workers on pandemic prevention, preparedness and response.

22. This programme component also seeks to enhance government capacity to convene, coordinate and implement priority nutrition interventions to address all forms of malnutrition by strengthening the five key systems: food, health, water and sanitation, education and social protection. Together, these systems can boost access to nutritious diets, essential nutrition services and positive care practices that support the growth and development of children, adolescents and mothers. The programme will strengthen the fiscal policies, regulatory frameworks and standards that protect children from unhealthy foods; promote healthy food environments for children

where they live, learn, eat, play and meet; and improve food and feeding practices for children. UNICEF will also generate evidence to improve nutrition and social protection systems, addressing child food poverty.

23. UNICEF also aims to ensure that the Government has the evidence, technical capacity and partnerships to improve access, quality and trust in adolescent-responsive services covering mental, nutrition, health and HIV prevention, including for adolescents with disabilities. It will strengthen information systems that track adolescent health and well-being; generate and use disaggregated data; enhance adolescent-responsive services through the Integrated School Health Programme; and scale innovative, tech-enabled solutions with government and private sector partners.

### **Education**

24. This programme component contributes to UNDSCEF outcome 2 and responds to the recommendations made by the Committee on the Rights of the Child to allocate more sufficient financial resources for the expansion of early childhood education and to strengthen the quality, equity, relevance and inclusive nature of education for all children and adolescents, including those with disabilities and those affected by disasters and other shocks.

25. It will focus on ensuring that all children aged birth to 9 years old gain holistic foundational skills through quality, play-based early learning, laying the groundwork for better educational outcomes and reduced dropouts. It prioritises emergent literacy and numeracy from birth to five years old and learning-through-play pedagogies to improve school readiness. UNICEF will support the Department of Basic Education to further integrate early learning programmes into the formal education system based on evidence of what works, train and support the early learning workforce, engage parents as active partners and foster better inclusion of children with disabilities.

26. UNICEF will focus on two pillars that provide the foundation for enhancing the transition from learning to earning: (i) scaling evidence-based foundational literacy and numeracy, and (ii) fostering twenty-first century competencies. UNICEF will support Department of Basic Education to address learning poverty, implement the Reading Literacy Strategy for 2023–2030; enhance the measurement of learning, data management and strategic use; and support the scaling of successful evidence-based models. It will also enhance curriculum relevance for science, technology, engineering, arts, mathematics and innovation; expand coding, robotics and digital skills; and integrate both the nurturing and measurement of transferrable skills and leadership to prepare children and adolescents in and outside of classrooms, for higher education, life and the labour market.

### **Child protection**

27. This programme component contributes to UNDSCEF outcome 4 (a safe and enabling society) and furthers momentum to eradicate all forms of violence against children, including by addressing root causes such as social and gender norms. First, UNICEF will work with a variety of child rights stakeholders to mobilize and leverage political influence and resources to address violence against children, ensuring that the issue is prioritized in intergovernmental plans and budgets. Second, UNICEF will support national and district-level capacity-building for social service professionals, educators and allied workers to address violence. This includes engaging strategically with tech companies, national institutions and civil society to promote online safety. UNICEF will also support Statistics South Africa and various government departments to integrate child protection indicators, including the identification of children with disabilities, into routine and community-based data systems for stronger monitoring and response.

28. Lastly, UNICEF will enhance the capacity of the Department of Social Development to convene a multisectoral coordination body for parenting support and family strengthening, leveraging public and private financing for more coherent, consolidated and universal parenting programmes. It will help to define a multisectoral workforce development framework, implement evidence-based programmes to prevent violence in homes, strengthen family-based care, scale community-based prevention and early intervention programmes, and support the Department of Home Affairs to improve staff capacity and streamline late birth registration policies and procedures. These changes will be made possible with more meaningful participation of children in policy and advocacy platforms.

### Programme effectiveness

29. This component will be achieved through results-based planning, monitoring and evaluation, strategic communications, and coordination of priority strategies, including community engagement, social and behaviour change and innovation. Programme coordination will be reinvigorated through multisectoral approaches, intersectionality, geographic focus, and enhancing alignment with the UNSDCF.

### Summary budget table

<i>Programme component</i>	<i>(In thousands of United States dollars)</i>		
	<i>Regular resources</i>	<i>Other resources*</i>	<i>Total</i>
Investing in children	2 298	1 388	3 686
Child survival and adolescent well-being	651	13 480	14 131
Education	651	16 578	17 229
Child protection	651	6 939	7 590
Programme effectiveness	2 249	3 045	5 294
<b>Total</b>	<b>6 500</b>	<b>41 430</b>	<b>47 930</b>

\* Other resources-emergency funding may be mobilized, as required, through humanitarian appeals processes.

### Programme and risk management

30. This CPD serves as the primary unit of accountability to the Executive Board for results achievement and resources assigned to the programme. Accountabilities of managers at country, regional and headquarters levels for country programmes are prescribed in the organization's programme and operations policies and procedures. The programme is implemented in consultation with the Government and upon the request of relevant government authorities through multi-year workplans. As part of the United Nations country team, UNICEF will drive implementation of the UNSDCF, leading on key results groups such as education, while contributing substantially to others.

31. UNICEF mainstreams disaster risk reduction and climate-adaptive approaches into its programming and ensures preparedness to deliver the Core Commitments for Children in Humanitarian Action. Several focused risk responses are conducted through the United Nations system, in line with its business operations strategy. For example, UNICEF uses the harmonized approach to cash transfers; strengthens accountability to affected populations; implements zero-tolerance measures to

prevent sexual exploitation and abuse; and supports efforts to promote greater environmental sustainability in its operations.

## **Monitoring and evaluation**

32. Programme monitoring will be based on the results and resources framework, which is annexed to this document. As the co-chair for the UNSDCF monitoring and evaluation working group, UNICEF will promote joint work planning, field monitoring, use of UN-Info, performance reviews and joint evaluations with United Nations entities and the Government.

33. The programme effectiveness component coordinates with the United Nations, Statistics South Africa and various departments to strengthen census, survey and administrative data systems, enhancing the collection and strategic use of data for children, disaggregated by sex, age, disability, location and other determinants. UNICEF will leverage its international expertise to strengthen the evaluation function, the digitization of data systems, and the use of innovations to enhance child and adolescent participation.

## Annex

### Results and resources framework

#### South Africa – UNICEF country programme of cooperation, March 2026–December 2030

<p><b>Convention on the Rights of the Child:</b> Articles 4–7, 11–13, 16–17 24, 27–29, 39</p> <p><b>National priorities:</b> Sustainable Development Goals 1, 2, 3, 4, 10, 16; National Development Plan</p>
<p><b>UNSDCF outcomes involving UNICEF:</b></p> <p>1. Outcome 2: Expanded human capabilities and equitable opportunities achieved through improved access to skills, quality education, health and decent livelihood</p> <p>2. Outcome 4: A safe, enabling society which fosters participation, ethics, and rights-based values</p>
<p><b>Related UNICEF Strategic Plan, 2026–2029 Impact Result Areas: 1–5</b></p>

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
2	1. By 2030, South Africa leverages more adequate, predictable and sustainable public and private investments for children that are deployed more effectively and efficiently in line with a broad-based societal compact, leading to greater accountability among duty bearers and the accelerated and equitable realization of children's rights, particularly for the most marginalized.	1.1. Percentage of children reached through cash transfer programmes (social assistance programmes)  B: 65.4% T: 68%	South African Social Security Agency statistical reports	1.1. Strategic public and private sector partnerships are forged and sustained to mobilize, coordinate and manage adequate and predictable resources, including through innovative financing mechanisms.	Government, United Nations, civil society and private sector  Generation Unlimited	2 298	1 388	3 686
		1.2. Percentage of children who live in multidimensional poverty  B: 62.1% T: 50%	Statistics South Africa child poverty report					
		1.3. Number of active child-focused partnerships leveraged to contribute to the	UNICEF reports					

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		<p>establishment of child-friendly policies or strategic investments for children</p> <p>B: 0 T: 5</p>						
		<p>Number of institutionalized mechanisms that enable children and young people to influence policies, programmes and decision-making processes that impact their lives and communities</p> <p>B: 2 T: 5</p>	UNICEF reports					
2	2. By 2030, South Africa's most disadvantaged children, mothers and adolescents have increased access to high-quality primary healthcare and nutrition services, including those from strengthened food systems that fully integrate interventions to	<p>Number of districts with at least 80% coverage of the first dose of the diphtheria/tetanus/per tussis (DTP1)-containing vaccine for children aged &lt; 1 year</p> <p>B: 23 districts with &gt; 80% DTP1 coverage (2024)</p> <p>T: 47 districts with &gt; 80% DTP1</p>	District Health Information System (DHIS)	2.1. The Government has the evidence, resources and technical knowledge necessary to revise and implement health sector policies and deliver more inclusive, integrated and quality health and nutrition services, including through food systems, especially in vulnerable communities, before and during public health crises.	Government, United Nations, universities, civil society, youth-led organizations, private sector	651	13 480	14 131

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
	promote good health, nutrition, HIV prevention and treatment, nurturing care practices and optimal health-seeking behaviours.	Percentage of children aged: A) 0–14 years and B) adolescent girls and boys aged 15–19 years living with HIV receiving antiretroviral therapy  B: A) 66% of children B) 55% of adolescent girls and 59% of adolescent boys  T: A) 95% of children B) 95% of adolescent girls and boys	DHIS	2.2. The Government has enhanced capacity to improve access to, quality and trust in the integrated package of adolescent-responsive services that promote mental, nutrition and health, including HIV prevention.				
Percentage of health facilities implementing pre-exposure prophylaxis for pregnant women  B: 78% T: 100%		DHIS						
Number of children aged 6–59 months affected by severe acute malnutrition who are admitted into treatment (whether or not supported by UNICEF)  B: 13 500 (5%) T: 130 000 (45%)		DHIS						

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		<p>Number of school-age children and adolescents who benefit from a comprehensive package of nutrition interventions and policies (diets, services and practices) for the prevention of overweight and other forms of malnutrition</p> <p>B: 2 500 000 T: 10 000 000</p>	UNICEF reports					
2	3. By 2030, children and adolescents in school (pre-primary to secondary) have access to quality and inclusive early learning and basic education that provide them with the foundational knowledge and skills fit for the twenty-first century for life and work.	<p>Proportion of 4-year-old children attending early learning programmes who are “on track” for their age for emergent literacy and emergent numeracy</p> <p>B: Emergent literacy: 55% Emergent numeracy: 33%</p> <p>T: Emergent literacy: 65% Emergent numeracy: 45%</p>	Thrive By Five Index	<p>3.1. The Government has increased capacity to ensure that young children receive quality and age-appropriate early learning opportunities through play-based pedagogical principles in ELPs and at home with the engagement of parents and caregivers.</p> <p>3.2. The Government has enhanced capacity to deliver quality foundational learning and competency-based education, creating opportunities and preparing children and adolescents for life in and beyond school.</p>	Government, United Nations, universities, civil society	651	16 578	17 229
		<p>Proportion of children in Grade 4 achieving at least a minimum proficiency level in (i) reading and writing and (ii)</p>	National and international assessments (Systemics, Funda Uphumelele					

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
		<p>mathematics and science, disaggregated by sex</p> <p>B: (i) 19% (girls: 28%; boys: 16%) (ii) 25% (girls: N/A; boys: N/A)</p> <p>T: (i) 40% (girls: 40%; boys: 40%) (ii) 40% (girls: 40%; boys: 40%)</p>	<p>National Survey, Progress in International Reading Literacy Study, and Trends in International Mathematics and Science Study)</p>					
		<p>Level of institutionalization of holistic skills development to support learning, personal empowerment, environmental sustainability, active citizenship, social cohesion and/or employability and entrepreneurship</p> <p>B: 1.5 T: 3.5</p>	<p>UNICEF/Department of Basic Education data</p>					
4	4. By 2030, South Africa's most vulnerable children, adolescents and caregivers have improved access to the services and programmes that prevent and address	<p>Percentage of learners who experienced corporal punishment at school</p> <p>B: 8% T: 5%</p>	<p>General Household Survey</p>	4.1. Duty bearers have improved capacity and resources to prevent and respond to violence against children in schools, communities and online.	Government, United Nations, civil society and technology companies	651	6 939	7 590
		<p>Percentage of children in family-</p>	<p>Department of Social</p>	4.2. The Government has enhanced capacity to				

UNSDCF outcomes	UNICEF outcomes	Key progress indicators, baselines (B) and targets (T)	Means of verification	Indicative country programme outputs	Major partners, partnership frameworks	Indicative resources by country programme outcome: regular resources (RR), other resources (OR) (In thousands of United States dollars)		
						RR	OR	Total
	all forms of violence against children.	based care of the total number of children in all forms of formal alternative care  B: 95% T: 98%	Development administrative data	finance, consolidate and scale efforts to address violence in the home with equitable access to identity and care.				
		Percentage of health facilities with interoperability between the health system and civil registration system to facilitate birth registration at the service delivery point  B: 34% T: 50%	Departments of Health and Home Affairs administrative data					
1-5	5. The country programme is efficiently and effectively coordinated and managed to achieve results for children	Percentage of management and programme indicators on track  B: 90% T: 100%	Internal UNICEF reports	5.1. Programme coordination  5.2. Communications  5.3. Planning, monitoring, reporting and evaluation  5.4. Engage families and communities on social norms	United Nations, media, South African Monitoring and Evaluation Association	2 249	3 045	5 294
<b>Total resources</b>						<b>6 500</b>	<b>41 430</b>	<b>47 930</b>