



UNITED NATIONS
ESWATINI



UN ESWATINI COUNTRY RESULTS REPORT 2020



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CONTENTS

Foreword by Resident Coordinator	3
UN Country Team	4
Key development partners of the UN in Eswatini	5
CHAPTER 1: Key developments in the country and regional context	6
CHAPTER 2: UN in Eswatini support to national development priorities	8
2.1 Overview of Cooperation Framework results.....	8
2.2. Cooperation Framework priorities, outcomes and outputs	9
2.3 Support to partnerships and financing the 2030 Agenda.	18
2.4 Results of the UN working more and better together: UN coherence, effectiveness, and efficiency	19
2.5 Evaluation and lessons learned	21
2.6 Financial overview and resource mobilization.....	22
CHAPTER 3: UNCT key focus for 2021.....	24
ANNEXES	26

FOREWORD

In 2020, as the Kingdom of Eswatini entered the Decade of Action to achieve Agenda 2030, the country, along with the rest of the world, was struck by the devastating COVID-19 pandemic. The pandemic impacted all segments of society, hitting hardest the most vulnerable communities and individuals. The implementation of nationwide lockdowns to contain the spread of the virus resulted in a rapid economic downturn, particularly in the manufacturing, tourism, trade and other sectors.

The resultant effect was a contraction in economic output of 2.4 per cent in 2020. Compounded by a health crisis, food insecurity, increased gender-based violence, high unemployment and loss of livelihoods; the pandemic threatened to reverse the many gains made towards achieving the Sustainable Development Goals (SDGs).

As reflected in Eswatini’s Voluntary National Review (VNR) of 2019, the country was already lagging behind in achieving SDG 10; ‘Reduced inequalities within and among countries’, and SDG 12; ‘Ensure sustainable consumption and production patterns’. Poverty levels; reflected in SDG 1, ‘End poverty in all its forms everywhere’, proved exceptionally high at 58.9 percent in 2017, despite progress made.

The United Nations Development System (UNDS) in Eswatini, standing as the most trusted partner of the Government and people of Eswatini, therefore remained committed to delivering the priorities determined in UNDAF 2016-2020, whilst responding to the COVID-19 pandemic using the UN Secretary-General’s three-pronged approach to mitigate the effects of the coronavirus outbreak.

The UNDS in Eswatini worked to deliver as One UN a nationwide, coordinated, comprehensive, and people-centred response that addressed the health, socio-economic, humanitarian and human rights aspects of the crisis, whilst working on a recovery strategy to build back better.

This report therefore highlights the achievements of UNCT Eswatini in support of national efforts to respond to COVID-19 and sustain progress towards attaining Agenda 2030 under extremely challenging circumstances. As the pandemic persists, hope arises with the commencement of the COVID-19 vaccination roll-out: a hope that is built on solidarity and commitment to the people of Eswatini.

The UNDS in Eswatini continues to stand in unity with the Government of His Majesty King Mswati III and the nation’s people in their journey towards recovery and building back better. As reflected in the commitment made to the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2021-2025, signed on 22nd October 2020, the United Nations and Government of Eswatini remain determined to build “a prosperous, just and resilient Eswatini where no one is left behind,” no matter the circumstances.



Nathalie Ndongo-Seh
Resident Coordinator of the United Nations Development System in the kingdom of Eswatini

UN COUNTRY TEAM



UNCT configuration as at 1st January 2020 (10 signatories of UNDAF 2016-2020)

In 2016, the Food and Agriculture Organization (FAO), International Labour Organization (ILO), Joint United Nations Programme on HIV/AIDS (UNAIDS), United Nations International Children's Emergency Fund (UNICEF), United Nations Development Programme (UNDP), United Nations Population Fund (UNFPA), United Nations Educational, Scientific and Cultural Organization (UNESCO), United Nations Office on Drugs and Crime (UNODC), World Health Organization (WHO), and World Food Programme (WFP) signed UNDAF 2016-2020.

Throughout this cycle, UNCT Eswatini comprised these 10 agencies, supplemented by several agencies including the International Organization for Migration (IOM), the United Nations High Commissioner for Refugees (UNHCR), the United Nations Environment Programme (UNEP), the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), the United Nations Industrial Development Organization (UNIDO), the United Nations Office for the Coordination of Humanitarian Affairs (OCHA), the Office of the United Nations High Commissioner for Human Rights (OHCHR) and the United Nations Department for Safety and Security (UNDSS).



These Six agencies were added to the UNCT with the signing of UNSDCF 2021-2025 in October 2020 (making it a total of 16 Agencies, Funds and Programmes)

Further support and contributions to UN programmes and activities in the Kingdom of Eswatini were received from United Nations Economic Commission for Africa (ECA), the World Bank, International Fund for Agricultural Development (IFAD) and others.

In 2020, OHCHR, UN Women, UNEP, UNIDO, IOM, and UNHCR intensified their efforts in Eswatini in mitigation of and response to the impact of COVID-19. These agencies also contributed to the formulation of the 2020 Eswatini Common Country Analysis (CCA) and the design and development of the United Nations Sustainable Development Cooperation Framework (UNSDCF) 2021-2025. As a result, the UNSDCF was signed on 22 October 2020 by a total of 16 UN Agencies, Funds and Programmes.

KEY DEVELOPMENT PARTNERS OF THE UNDS IN ESWATINI

In order to achieve the 2030 Agenda for Sustainable Development, along with His Majesty's Vision 2022, in 2020 the UN Development System (UNDS) in Eswatini engaged extensively with several partners.

The UN in Eswatini remained a trusted development partner of His Majesty's Government in support of the implementation of national priorities articulated in the National Development Plan 2019-2022, the Strategic Roadmap 2019-2022, the Strategy for Sustainable Development and Inclusive Growth 2019-2022, and the National Development Strategy 1997-2022 based on His Majesty's Vision.

In this context, and compounded by the onset of COVID-19 in the country, the UNDS enhanced its engagements with line ministries, parastatals such as the National Disaster Management Agency (NDMA), civil society organizations such as the Coordinating Assembly of Non-Governmental Organisations (CANGO), research institutes, and incubators such as the Royal Science and Technology Park (RSTP), academia including the University of Eswatini (UNESWA), and other stakeholders to accelerate progress towards attaining the SDGs, national priorities and developing programmes and interventions in the last year of UNDAF 2016-2020.

UN Eswatini worked extensively with communities through partnerships with Caritas Eswatini, Save the Children, World Vision Eswatini, among others, for protection activities relating to persons of concern (POC) in Eswatini. Significant achievements in such partnerships were noted in:

- invitations to the RC/UNCT to participate in four Cabinet meetings to present key aspects of the reform of the UN Development System, progress in development of UNSDCF 2021-2025, as well as drafts of UNSDCF before signature on 22 October 2020;
- the convening of three Joint National Steering Committee (J-NSC) meetings co-chaired by the UN Resident Coordinator and the Minister of Economic Planning and Development to revive a non-operational J-NSC, adapt processes to changes stemming from the reform including new

UNSDCF and RC leadership role, enhanced M&E, and quarterly meetings to address joint delivery;

- the setting-up by the UN of the development partners platform for weekly meetings to share information and enhance collaborative efforts to respond to COVID-19;
- weekly humanitarian meetings co-chaired by NDMA/ Resident Coordinator taking place at technical level and between agencies and national counterparts to ensure focus on issues such as education, GBV, food security and resource mobilization, effective reporting and collaboratively agree on strategies.

Several strides were made through increased collaboration and engagements with development partners in the areas of GBV, health, HIV and AIDS, education, food security and nutrition, ICT, WASH and other COVID-19 related interventions. Thus, in 2020, the UNDS collaborated more extensively with diplomatic missions from the United States of America, the European Union, the Republic of China (Taiwan), the United Kingdom and India, as well as international financial institutions such as the African Development Bank, the World Bank and the International Monetary Fund (IMF). The Eswatini Development Cooperation Policy adopted by the Cabinet in November 2019 provided the impetus for enhanced collaboration and transparency between development partners. It is with this in mind that the UNDS established the development partners platform and supported meetings by providing secretariat services.

The UNDS takes pride in the strong partnerships built in 2019 with the private sector and the media. Business Eswatini, Woman Farmer Foundation, Eswatini Editors Forum and Eswatini Bankers Association are some of the most reliable partners of the UNDS. The UNDS also engaged extensively with communities including persons with disabilities, persons living with HIV, migrants and refugees, LGBTQI individuals, youth, rural women, and others.

CHAPTER 1 KEY DEVELOPMENTS IN THE COUNTRY AND REGIONAL CONTEXT



The Kingdom of Eswatini is a country in Southern Africa, that is small in size, with a population of 1.2 million people and an estimated median age of 21.7 years. The country has a dual governance structure: the King, as Head of State, holds supreme executive, legislative and judicial powers, while the Prime Minister, appointed by the King, is Head of Government and heads the Cabinet.

Eswatini is a lower middle-income country with a Human Development Index of 0.608 (2019) putting the country in the medium human development category, ranking 138 out of 189 countries. According to the Swaziland Household Income and Expenditure Survey (SHIES, 2016/17), about 59 per cent of Eswatini's people live below the national poverty line, and 57 per cent of children are multidimensionally poor. In 2020, the unemployment rate was estimated at 23.4 per cent and the Gini Coefficient was 51. Furthermore, Eswatini ranks low on the World Bank's Human Capital Index at 0.37 in 2020.

The low Human Capital score is attributable to poor health outcomes due to HIV and AIDS, and poor learning outcomes from a relatively well-funded system that struggles to deliver efficient and equitable education services.

Eswatini's economic growth performance remains low, with an average expansion of 1.7 per cent between

2014 and 2019, mainly due heavy reliance on the South African economy, increasing fiscal challenges, and the lingering effects of a serious drought in 2015/16. In 2019, GDP grew by 2.2 per cent, largely driven by recoveries in agriculture and the services sector.

However, due to the impact of the COVID-19 pandemic, estimates are that economic output contracted by 2.4 per cent during 2020; whilst the number of people living below the poverty line increased by 66,000.

Estimated life expectancy in Eswatini is 60.01 years. Eswatini is experiencing a double burden of disease: non-communicable diseases (NCDs) – particularly hypertension, diabetes and cancer – are growing problems. Eswatini also has the highest prevalence of HIV in the world, at 27 per cent among the 15-49-year-old population. The country has a high prevalence of tuberculosis which has been exacerbated by the HIV and AIDS epidemic.

Eswatini is vulnerable to climate-change risks such as: droughts, storms, wildfires and seasonal flooding. Drought, in particular, impacts many livelihoods (due to the large proportion of emaSwati reliant on subsistence agriculture), and back-to-back droughts in 2014-15 and 2015-16 are considered to have quickly transformed the country from being food secure in 2012 to one-third of the population being food insecure by 2016.

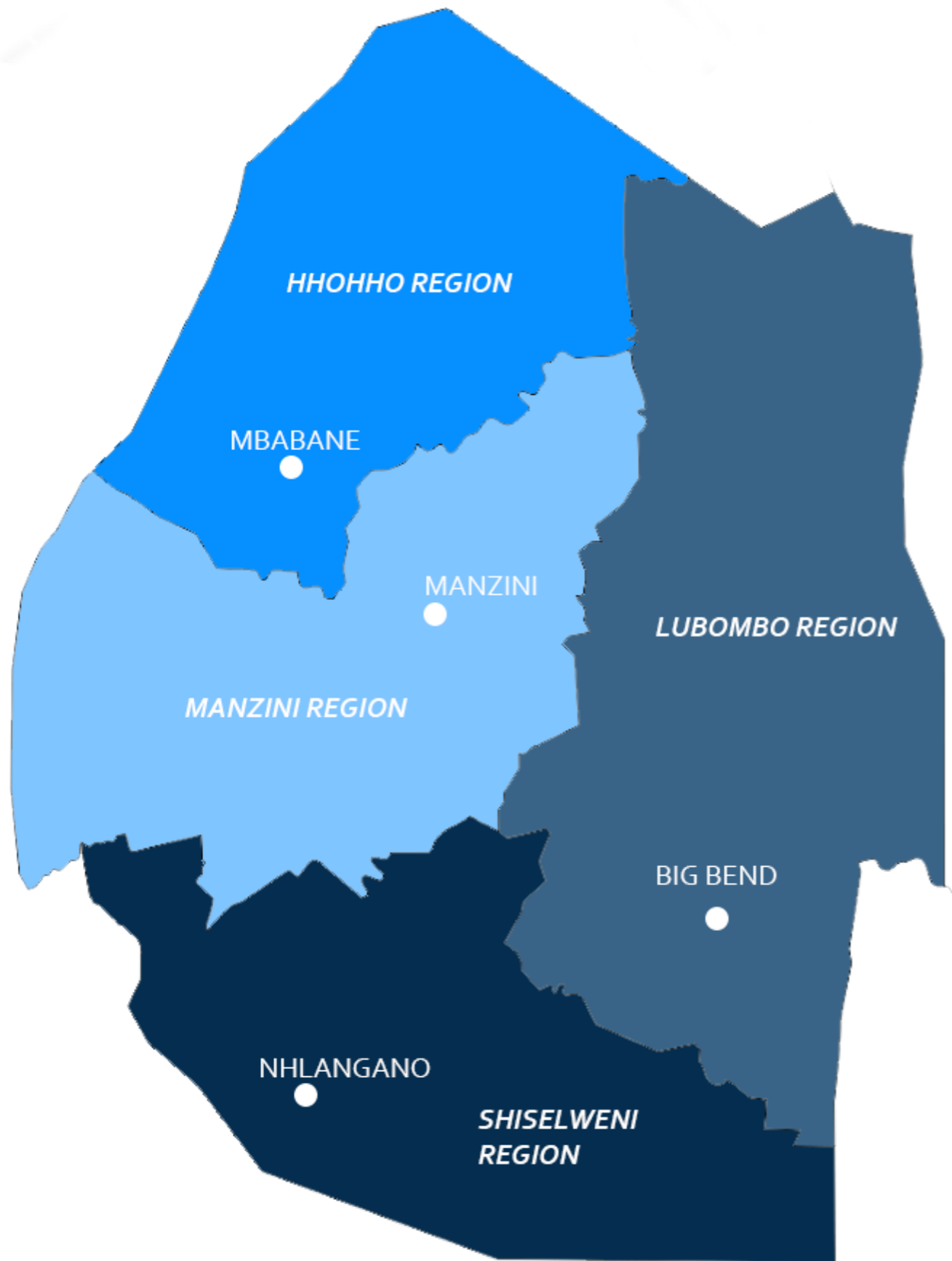
Against these challenges, Eswatini launched its current economic blueprints; the 2019-2023 National Development Plan (NDP) and the 2019-2022 Strategic Road Map. Both stress the priorities of economic recovery, financial stability and growth while pursuing improved quality of life, with education and ICT, mining and energy, tourism, manufacturing, agro-processing and agriculture promoted as strategic sectors for growth.

The Government also extended the National Development Strategy (NDS) through the Strategy for Sustainable Development and Inclusive Growth (SSDIG): the guiding framework for achieving Agenda 2030.

Thus, and as illustrated below, the country has identified 10 main SDGs to guide its development plans and policies during the decade: SDG 1 (no poverty); SDG 2 (zero hunger); SDG 3 (good health and wellbeing); SDG 4 (quality education); SDG 6 (clean water and sanitation); SDG 7 (affordable and clean energy); SDG 8 (decent work and economic growth); SDG 13 (climate action); SDG 16 (peace and justice, strong institutions); and SDG 17 (global partnership).



KINGDOM OF ESWATINI



Human Development	Eswatini Economic Growth	Unemployment rate	Population
Human Development index of 0.608 (2019) putting the country in the medium human development category, ranking 138 out of 189 countries	Human Development index of 0.608 (2019) putting the country in the medium human development category, ranking 138 out of 189 countries	The unemployment rate was estimated at 23.4 per cent and the Gini Coefficient was 51. Furthermore, Eswatini ranks low on the world Bank's Human Capital Index at 0.37 in 2020	The country has a population 1.2 million people and an estimated median age of 21.7 years
	Life Expectancy	Impact of the Covid-19 pandemic	
	Estimated life expectancy in Eswatini is 60.01 years	Economic output contracted by 2.4 per cent during 2020; whilst the number of people living below the poverty line increased by 66,000	

CHAPTER 2: UN ESWATINI SUPPORT TO NATIONAL DEVELOPMENT PRIORITIES



2.1 Overview of the Cooperation Framework results

Transition from UNDAF 2016 - 2020 to UNSDCF 2021 – 2025

2020 was the last year of implementation of the United Nations Development Assistance Framework 2016-2020 (UNDAF), which started in January 2016 with an estimated budget of US\$125 million for its five-year cycle to be implemented under the Delivering as One approach.

For 2020, the remaining programmes and activities under UNDAF 2016 – 2020, were to be implemented. However, as COVID-19 struck the world and Eswatini, UNDS priorities shifted to an emergency mode to contain the health pandemic and respond to its adverse impact on lives, livelihoods and the economy of the country. On 12 March, the UNDS adopted its One UN

Business Continuity Plan (BCP) which outlined the policies, procedures, and guidelines that the UN would follow during the COVID-19 emergency.

Priority attention was given, among others, to the provision of critical support to the Government of Eswatini (GoE) in response to COVID-19; the allocation of adequate resources and capability to maintain the continuity of critical programmatic functions in a coherent and integrated manner; and an orderly recovery from the COVID-19 pandemic.

Priority Area: Poverty and inequality redirection, Indicate growth and sustainable development	
Outcome 1.1	Youth, women and vulnerable groups' opportunities for employment and sustainable livelihoods improved by 2020
Outcome 1.2	Communities and national institutions management of natural resources improved by 2020
Priority area 2: Equitable and efficient delivery and access to social services	
Outcome 2.1	Children's and adolescents' access to quality and inclusive education and retention in school increased by 2020
Outcome 2.2	Families and communities' access to and uptake of quality health and nutrition services increased by 2020
Outcome 2.3	Youths' risky sexual behaviours reduced and citizens' uptake of HIV services increased by 2020
Priority area 3: Good governance and accountability	
Outcome 3.1	Access to and quality of priority public services delivery to citizens improved by 2020
Outcome 3.2	Citizen and Civil Society organisations participation in decision-making processes at all levels increased by 2020

2.2 Cooperation Framework priorities, outcomes and outputs

2.2.1 UNDAF RESULTS

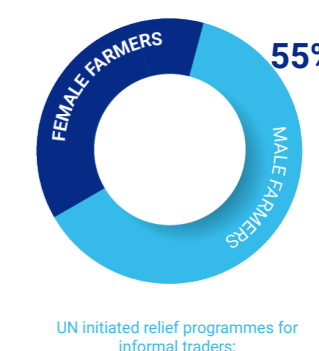
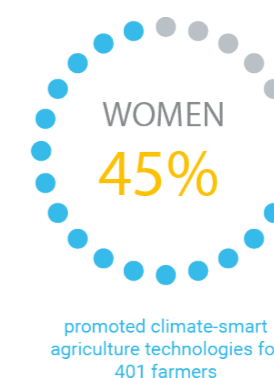
Priority Area 1: Poverty and inequality reduction, inclusive growth and sustainable development

Outcome 1.1: Youth, women and vulnerable groups' opportunities for employment and sustainable livelihoods improved by 2020

In 2020, the UN prioritized support for the Government's poverty reduction efforts by providing humanitarian assistance to households affected by COVID-19. The impact of the COVID-19 pandemic exacerbated unemployment as the lockdown resulted in significant job losses. In this regard, the UN initiated relief programmes for informal traders; provided seed capital for several start-ups delivering innovative solutions; created a revolving fund to directly support 271 farmers. (119 of whom were female); and promoted climate-smart agriculture technologies for 401 farmers (185 of whom were female).

In addition, the UNDP Accelerator Lab deployed

innovations such as an e-learning platform benefiting thousands of university students, and an online marketing platform for business continuity to informal traders, especially women.



The UN also contributed towards the improvement of food and nutrition security through innovative approaches such as the home-grown school feeding (HGSF) programme that links farmers to markets for school feeding programmes and to enhance food production, consumption and income among vulnerable households.



of integrated landscape plans for three sites and supporting climate-smart smallholder irrigation schemes across the country. This resulted in the increase in protected land areas from 3.9 per cent to 5.2 per cent, as 32,000 hectares of land under six rural communities were gazetted as informal protected areas. In addition, the UN implemented the Man and Biosphere (MAB) Programme, which saw Lubombo become the first Biosphere Reserve in the country.

The UN also supported a business case for installation of a 1MW solar system at a hospital located in Manzini, the country's largest city, which will reduce annual energy costs by \$162,000; as well as reduce greenhouse emissions by offsetting the use of electricity generated from coal. The UN strengthened coordination, scaling-up and governance of conservation agriculture to support programmes on food security and nutrition. The Green Climate Fund (GCF) Readiness Programme was developed and submitted to GCF, laying the foundations for increased climate adaptation and mitigation in the Eswatini agricultural sector. In 2020, the UN launched Earth School Globally to ensure that health and productivity of freshwater and terrestrial ecosystems are institutionalized in education, monitoring and cross-sectoral and transboundary collaboration frameworks. Implementation of the Paris Agreement was supported by the revision of Eswatini's Nationally Determined Contributions (NDC). The revision will ensure integration of NDC targets into national strategic plans as well as the establishment of monitoring, reporting and verification systems.

Small-scale farmers were trained in financial literacy and cashflow management, and commercial farmers have been supported to increase vegetable production. In addition, the Ministry of Tourism and Environmental Affairs (MTEA) launched a campaign that limits the use of plastic bags as a means of environment protection, creating an opportunity for rural women to manufacture re-usable shopping bags.

Priority Area 2: Equitable and efficient delivery and access to social services

Outcome 2:1 Children's and adolescents' access to quality and inclusive education and retention in school increased by 2020

By 2020, Eswatini had achieved near-universal net enrolment primary education, but a very high proportion of adolescents were excluded from the secondary education system. Net enrolment stood at 32.3 per cent at lower secondary school level and 13 per cent in upper secondary education.

The households of persons living with HIV participated in various income-generating livelihood activities including small animal production, nutrition gardens and business management. Additionally, the UN supported the establishment of the Agricultural Sector Development Plans (SDPs), and the Eswatini Agriculture Development Fund (EADF). The UN in Eswatini in December commenced a Rapid Labour Market Diagnostic Analysis by a team of experts. This exercise will support the drafting of a national policy framework for linking unemployment protection with employment, macroeconomic and active labour market policies. Stranded and vulnerable migrants received assistance to voluntarily return to their countries of origin, particularly following the travel restrictions imposed due to COVID-19. Support was also provided for the reintegration of those migrants in their countries of origin. In 2020, the UN in Eswatini supported the revision of referral tools (National Referral Mechanism and Guidelines) that helped front-line officials to better identify and assist victims of trafficking. In addition, the UN contributed to the refurbishment of a shelter for victims of trafficking to ensure that they are well protected from perpetrators.

In 2020, the UN also started preparing an awareness-raising campaign to sensitize communities on how to better identify and report cases of trafficking in persons to the authorities. The campaign will be rolled out until the end of 2021. Refugee resettlement was further supported with farming inputs. Borders were strengthened with security measures through screening of travellers at entry and exit points.

Outcome 1.2: Community and national institution management of natural resources improved by 2020

In 2020, the UN prioritized strengthening the capacity of government and communities to improve natural resource management. This included the development

The closure of schools in March 2020 due to the pandemic affected about 400,000 learners, deepening the gap in access and quality already existing in the education sector: depriving learners of opportunities for growth and development, and channelling them more into the poverty cycle. Within the context of the UNDAF, the UN supported the Government of the Kingdom of Eswatini to introduce distance education through print, radio and television media to deliver lessons to students. However, the most vulnerable children were not reached as they had no access to the learning platforms.

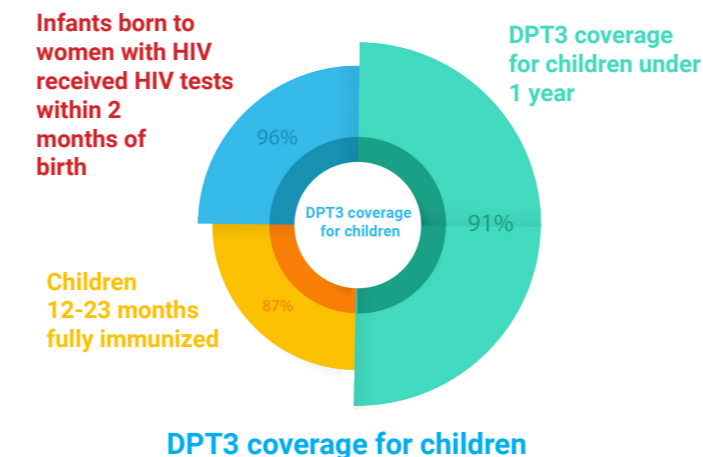
While most efforts during 2020 were geared towards limiting the impact of COVID-19 on education, the UN also focused on improving capacity for the design and implementation of in- and out-of-school life skills education programmes that promote human rights and gender equality. This included supporting the institutionalization of adolescent- and youth-friendly health services, life skills education, and building capacity among healthcare workers and teachers.

Outcome 2.2: Family and community access to and uptake of quality health and nutrition services increased by 2020

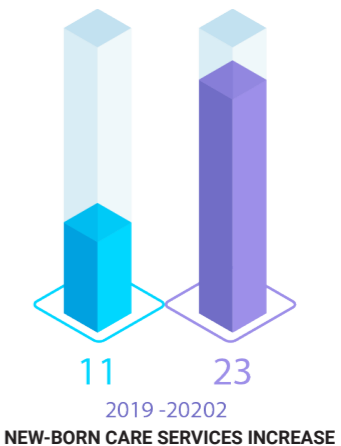
In 2020, the UN supported the Ministry of Health to procure vaccines through UNICEF Supply Division, resulting in cost savings. The UN supported the development of the Food and Nutrition Strategy and the Health Sector Nutrition Operational Plan, as well as the Elimination of Mother-to-Child Transmission operational plan to be implemented in 2021.

The nutrition information system and evidence generation were also supported, with a national assessment on maternal and new-born health services, and the child health annual report produced.

DPT3 coverage for children under 1 was 91 per cent, and 87 per cent of children 12-23 months were fully immunized, and 96 per cent of infants born to women living with HIV received virological tests for HIV within two months of birth.



With support from the UN and partners, coverage of essential new-born care services increased from 11 (2019) to 23 (2020) health facilities.



To ensure continuity of services, with support from the UN, the Ministry of Health received a consignment of family planning and maternal health lifesaving commodities including the development of technical guidelines on quality provision of maternal and new-born health services in the context of COVID-19. The UN also provided technical support for the roll-out of Pre-Exposure Prophylaxis (PrEP) from 22 to 162 health facilities. PrEP uptake increased to 6,263 in 2020 from 390 in 2017.

The UN partnered with non-governmental organizations (NGOs) in emergency WASH interventions, including the procurement of handwashing infrastructure and the placement of strategic handwashing points at 220 sites.

The UN also provided technical and financial support to the Ministry of Natural Resources to assist 56 communities on community-led total sanitation. As a result, 36 communities were certified as open-defecation free.

Outcome 2.3 Youth risky sexual behaviours reduced, and citizen uptake of HIV services increased by 2020

The UN supported the country on HIV treatment to reach the global AIDS targets of 95-95-95 (i.e., ending the AIDS epidemic by achieving The number of new HIV infections among adolescents and young people (15-24 years) declined by 44 per cent, from 3,700 in 2016 to 1,600 in 2020. The UN supported the country to develop the HIV prevention policy and provided support on HIV prevention. In 2020, 220,000 learners were reached with HIV prevention programmes through life skills education, and 100,000 youth were reached through the innovative HIV and sexual and reproductive health and rights (SRHR) online platform "tune me". The UN initiated an HIV testing campaign during the pandemic to ensure that HIV services would not be disrupted. A total of 81,000 people, including

adolescents and young people, were tested for HIV. The UN also provided treatment support to young people living with HIV.



95% diagnosed among all people living with HIV (PLHIV), 95% on antiretroviral therapy (ART) among diagnosed, and 95% virally suppressed (VS) among treated).

The UN supported the Ministry of Health with the revision of Dolutegravir guidelines to expand HIV treatment, including among children, while aiming for 95 per cent coverage of prevention for mother-to-child transmission of HIV. The UN further provided support to the review of the Key Population Implementation Guide and on HIV data, including epidemic data through HIV modelling, and expenditure tracking through National AIDS Spending Assessment.

Outcome 3.1 Access to, and quality of priority public service delivery to citizens improved by 2020



The UN supported public institutions, including Parliament, the Ministry of Justice and Constitutional Affairs, the Anti-Corruption Unit (ACC), the Commission of Human Rights, Integrity and Public Administration (CHRIA), and the Ministry of Tinkhundla Administration and Development (MTAD) to undertake key assessments required to curb corruption, enhance public sector delivery and increase human rights: a public service delivery perception study; a corruption perception survey; a human rights baseline survey and a participatory poverty assessment.

During 2020, the UN strengthened national capacity and coordination on Universal Periodic Review reporting, promoting an integrated approach for implementation of recommendations from all human rights mechanisms. Eswatini's UPR State report is due in July 2021 and stakeholder submission due in March 2021.

In collaboration with the Treaty Body Capacity Building Programme in Geneva, the UN supported capacity building for the Ministry of Justice and Constitutional Development and civil society organizations on State party reporting to international treaty bodies.

The UN strengthened policy, legal and accountability frameworks to advance gender equality and women's empowerment. The Sexual Offences and Domestic Violence Act (SODV) regulations were developed, and the national Sexual Harassment Policy was reviewed and updated in line with the SODV Act of 2018 and relevant international conventions.

Outcome 3.2 Citizen and civil society organizations' participation in decision-making processes at all levels increased by 2020

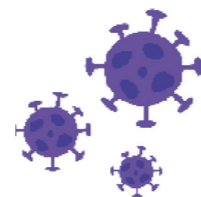
The onset of the COVID-19 pandemic in Eswatini in March 2020 further exacerbated pre-existing socio-economic inequalities. It also posed a threat to the realization of the 2030 Agenda pledge to leave no-one behind (LNOB). In 2020, the UN sought to especially include in programmes, interventions and decision-making processes people with albinism; people living with autism, people with disability, LGBTQI individuals, refugees and migrants, artists, sex-workers and others.

The UN conducted capacity building of regional referral networks on gender-based violence (GBV) and sexual and reproductive health (SRH). The purpose was to raise awareness and address issues of GBV and SRH during food distribution.

The UN supported review of the National Population Policy. The visibility of the International Conference on Population and Development (ICPD) agenda amidst COVID-19 was improved through continued undertaking of advocacy activities such as the World Population Day, the launch of the State of World Population report as well the celebration of the first anniversary of the Nairobi Summit on ICPD25.

In partnership with the Ministry of Health, CSOs and the SADC Parliamentary Forum, the UN also reached out to female textile workers in Eswatini's main industrial town, Matsapha, where awareness raising was carried out on SRH and other health services, including support for GBV and legal counselling services.

2.2.2 COVID-19 RESPONSE



At the onset of the COVID-19 pandemic, the Government established a national Emergency Management Task Force comprising 11 subcommittees including on health; education; security; water and sanitation; ICT; agriculture and food security; and social protection to organize the COVID-19 response across the country.

While the RC sat at ministerial level in the National Emergency Management Committee (NEMC), the UN was represented in all subcommittees.

2.2.2.1 Health first

On 14 March 2020, Eswatini experienced its first case of COVID-19, and on 16 April, the country recorded its first COVID-19 death. By 31 December 2020, the number of COVID-19 infections in Eswatini had reached 9,358 with 205 people reported to have died from the disease. The COVID-19 epidemic curve was showing an increase with the Manzini and Hhohho regions having the highest number of infections.

The GoE noted that the increase in the number of deaths was a result of co-existing medical conditions such as diabetes mellitus, hypertension, cardiac disease and asthma.

Although the recovery rate from COVID-19 was high, at about 76 per cent as of 31 December 2020, the health systems in Eswatini were already stretched beyond capacity with limited availability of ventilators and PEP, as well as facilities for admission for those infected.

The UN supported the Government's health response to the COVID-19 pandemic to contain the spread of the virus and enhance the health system's response capacity. Specific attention was also given to ensuring that the country does not regress on other non-COVID health and welfare priorities.

Efforts to contain the spread of COVID-19 were based on the WHO Strategic Preparedness and Response Plan (SPRP); a plan consisting of six objectives: limiting transmission (as well as secondary infections); early identification, isolation and care for patients; addressing clinical complexity; communication of critical risk and public messaging to counter misinformation; and minimizing the social economic impact through multi-sectoral partnerships.

Technical support was facilitated through 11 pillars, including: coordination, planning, financing and monitoring; risk communication, community engagement and info-demic management; surveillance, epidemiological investigation, contact tracing and adjustment of public and social measures; surveillance, epidemiological investigation; laboratories and diagnostics; infection prevention and control; protection of the health workforce; case management, clinical operations and therapeutics; operational support, logistics and supply chains; and maintaining essential health services and systems.

A health sector COVID-19 pandemic response plan

was developed and costed, covering the period July 2020 to June 2021. An intra-action review of the response was conducted, and the findings were used to update the response plan and mobilize additional funds. The Incident Management System was also activated in July to improve response coordination.

The UN, in partnership with NGOs, the private sector, municipalities as well as regional task teams, conducted COVID-19 awareness and social mobilization campaigns in urban, peri-urban and rural settings across the country. In total 240 community volunteers conducted door-to-door community engagement, distributed over 15,000 educational and visited more than 12,000 homesteads. The door-to-door visits included distribution of face masks and hand sanitizers. To date 90 per cent of the country's population has been reached through those campaigns for sensitization on infection prevention and control, as well as behavioural change.

PPE was procured, including gowns, gloves and masks to be used in health facilities and during community outreach health service delivery, and 320 health care workers who work in maternity units in 14 health facilities on COVID-19 related infection prevention and control (IPC) were trained to better manage the pandemic in the maternity units. The UN contributed to awareness-raising on COVID-19, HIV and tuberculosis through mass media and social media. The campaigns targeted people living with HIV, faith-based communities, adolescents and young people. Furthermore, the UN successfully advocated for persons living with HIV during the COVID-19 pandemic and mobilized \$99,120 from the Global Fund for nutrition-sensitive cash-based transfers targeting malnourished people living with HIV and those with tuberculosis.

The UN deployed 16 Rapid Response Teams and 4 field epidemiologists across all regions to enhance COVID-19 case investigation, contact tracing and follow up. This was accompanied by the establishment of the Educating, Finding, Testing, Treating, Isolating cases and Tracing contacts (EFTTIT) campaign and contact tracing kiosks to enhance case finding during the peak of the outbreak.

With the support of partners, 10 treatment centres for management of mild to severe cases of COVID-19 were set up, accompanied by the deployment of 23 international critical care experts including doctors, nurses and biomedical technicians to build the capacity of local health care workers and establish oxygen supply systems. This led to reduced mortality among persons with COVID-19 requiring critical care as well as improved case finding, with test positivity rates as high as 30 per cent.

The UN also strengthened the capacity of health facilities to limit interruptions to essential health care services due to COVID-19's scale and scare. This included training frontline health care workers, and delivery of integrated, equitable and high-quality family planning services with national and regional government institutions.

Efforts were also made to enhance the capacity of health care workers on sexual and reproductive health and rights, adolescent sexual and reproductive health, maternal, neonatal and child health, family planning integration, logistics management information system and cervical cancer through mentoring, supportive supervision and onsite training.

In addition, through UN advocacy, asylum-seekers and refugees requiring secondary and tertiary medical attention were made eligible for health referral mechanisms. The Government reinforced the medical clinic in the Malindza Refugee Reception Centre (MRRC) by providing additional nurses; screening all residents within the facility; and maintaining testing and screening.

The UN also focused on improving HIV testing and treatment coverage and reducing service disruption during the pandemic. In this regard, the UN provided technical guidance to the Government for the development of HIV testing services (HTS) community guidelines, and the launch of a self-testing campaign that expanded community testing.

2.2.2.2. Socio-economic response



At the onset of the COVID-19 pandemic, based on a series of Secretary General briefs, and under the technical lead of UNDP, UN Eswatini carried out assessments to support Government efforts to develop policy options in response to the crisis.

In June 2020, the UN undertook a Rapid Socio-Economic Impact Assessment (RSEIA) to assess the impact of COVID-19 in Eswatini. The RSEIA contributed to the Government's roll out of COVID-19 mitigation measures such as food distribution to the most vulnerable; temporary cash grants for laid-off employees; tax deferments for loss-making companies; a **US\$400,000** revolving fund for micro, small and medium enterprises (MSMEs), and the Government's development of a post-COVID-19 economic recovery plan led by the private sector.

The UN assessed at national level the impact of COVID-19 on the food system and food security to support nutrition-sensitive agriculture policy and investment. This informed the development of strategic documents and Sector Development Plans (SDPs) for prioritized value chains.

The UN also supported the national agro-food system to prevent market disruptions by adopting e-solutions and supply chain platforms to ensure continued access to markets and incomes. Smallholder farmer groups were provided with inputs to continue production; while actors in the agriculture value chain were mobilized into the newly established Agricultural Marketing Information System (AMIS) to facilitate ease of marketing agricultural produce.

The closure of schools in March 2020 affected about 400,000 learners in Eswatini, thereby deepening the already existing gap in access to quality education in the country. Consequently, the UN provided technical and financial support to the Ministry of Education to review and upgrade the Education Management

Information System (EMIS) system to real-time, while educators were trained for COVID-19 preparedness and response and school re-opening. The UN also supported distance learning interventions reaching learners across all grades. In addition, the UN supported the review of the Technical Vocational Education and Training (TVET) policy, and Early Childhood Care and Development (ECCD) through the rolling out of a grade zero syllabus in 80 primary schools around the country.

The UN facilitated an exceptional waiver from the established criteria for educational assistance to various persons of concern (POCs) with full support for tuition fees for vulnerable POCs. Furthermore, communal devices and equipment for virtual learning for refugee children residing in Malindza Refugee Reception Centre (MRRC) were provided to ensure they benefited from the learning programmes provided by the Kingdom during the partial lockdown period.

The UN leveraged innovative solutions to mitigate the impact of COVID-19 on vulnerable and key

populations in the country. Through the UN's Accelerator Lab, an online marketing platform was established to ensure business continuity for informal traders, especially women, and partnership with the University of Eswatini led to development of an e-learning platform for students.

Vulnerable populations in shock-affected areas were supported to meet their basic food and nutrition needs during the COVID-19 crisis through the provision of food and/or cash-based transfers as well as farming inputs. The UN supported the emergency needs of those at high risk of food insecurity due to loss of employment, high food prices and declining incomes. Beneficiaries receiving assistance included orphaned and vulnerable children; urban poor households; smallholder farmers; small businesses, refugees, and malnourished HIV and tuberculosis clients.

One area in which the UN as One distinguished itself in 2020 was through the provision of ICT services to Government, Parliament, key partners and the people, whether in schools or for the resettlement of migrants, refugees and asylum seekers. In this regard, with UN support, Parliament was able to continue its operations. The UN, through virtual communication, maintained regular engagement with implementing partners such as Caritas Eswatini and ADRA to advance social solutions for asylum-seekers and refugees. Remote technical support was also provided to the Government to develop the capacity of Refugee Status Determination (RSD) bodies to establish national RSD systems that are fair, efficient, adaptable, have integrity and produce quality decisions.

2.2.2.3 Humanitarian response

In 2020, the National Disaster Management Agency (NDMA) and the UN Resident Coordinator, acting as UN Humanitarian Coordinator a.i., established and convened, on a bi-weekly basis, the Humanitarian Partners platform which was intended to enhance individual and joint preparedness to mitigate the humanitarian impacts of COVID-19 and ensure that maximum available capacities and resources are used in the most effective and efficient manner.

The UNDS, with support from OCHA regional office, developed the "Who does What, Where, and When" (4Ws) matrix used by the Government to map out contributions received, vulnerable groups and communities, locations of support, gaps and needs to address COVID-19 in the country.

With over 366 00 people (32 per cent of the population) at risk of food insecurity and requiring immediate food assistance from September 2020

to March 2021, the UN supplemented Government efforts through the provision of emergency food assistance to 133,000 people affected by climatic shocks and the COVID-19 pandemic with cash and in-kind food transfers. Through pre-primary on-site feeding, the UN provided food assistance to orphaned and vulnerable children (OVCs) under the age of 8 enrolled in 1,661 community led Neighbourhood Care Points (NCP). The UN, with assistance from caregivers, also ensured that GBV allegations in NCPs were reported to the police, and community counsellors attended to children affected by GBV.



Outreach awareness campaigns reached 90 per cent of the population, targeting primarily women and children, vulnerable groups, including persons with disabilities and the visually impaired. The UN continues to advance support in the fight against sexual and gender-based violence, and as such to support victims of abuse through psycho-social and counselling services. A review of the sexual harassment policy was undertaken. Child-headed household projects were carried out, aimed at lifting them out of poverty, restoring dignity and self-esteem. Support is also provided to children in residential childcare facilities. Child protection services continued to be supported as mental health was also given priority during COVID-19.

Awareness raising on healthy living during the second wave of COVID-19 for persons living with HIV and tuberculosis was facilitated through World AIDS Day. Community dialogues were held, and hygiene kits distributed to persons living with HIV. Crop and poultry production initiatives were undertaken for persons living with HIV. The National Risk Communication Campaign was launched for social and behavioural change and community engagement was enhanced, along with advocacy for increased condom uptake during this era.

The UN supported the review of Differentiated Service Delivery (DSD) Standard Operating Procedures (SOP) to include multi-month dispensing of antiretrovirals and community refills during COVID-19. Consequently, 20 per cent of persons living with HIV accessed HIV treatment at community distribution points. The UN provided technical guidance for the roll-out of the national Linkage Case Management guidelines and 90 per cent of all people diagnosed with HIV were successfully linked to treatment services.

Whilst the country was still under lockdown, the national plan for re-opening of schools began. Early Childhood Care and Development (ECCD) guidelines for preschool opening were prepared. Distance learning information, education and communication (IEC) materials were developed on wearing of face masks, including hygiene awareness. IEC material was developed on child-friendly messages to raise awareness on COVID-19. Protective clothing was procured for teachers to ensure safety for both pupils and teachers.

Health care continued to be promoted. Eswatini established three national COVID-19 isolation centres to accommodate affected COVID patients. Intensive care units were fitted with required emergency equipment. A COVID-19 Introduction Readiness Assessment was conducted using the WHO tool and the World Bank Vaccine Readiness Assessment Tool to support Eswatini readiness.

The UN also contributed to life-saving emergency cash grants and vouchers that were made available to new arrivals at Malindza Refugee Reception Centre for a period beyond the initial three months, with food provision extended to last throughout 2020. The delivery of sanitary and hygiene items as well as personal protective equipment to MRRC at least once a month ensured that the population adhered to the COVID-19 restriction measures and did not engage in unnecessary movement for the procurement of such essential items.

Through the repurposing of programme funds and the allocation of fresh funds, successful grant applications such as the Multi-Partner Trust Fund and the Human Security Trust Fund, from April until 31 December the UN supported the Eswatini response to COVID-19 to the sum of US\$8.4 million in the following eight main areas: health, ICT, protection, prevention-communications and advocacy, social protection, coordination of UN operations, assistance, resource mobilization, institutional strengthening, economic recovery, WASH, education, nutrition, agriculture and food security and the socio-economic impact of COVID-19.

It should be noted that UN personnel in Eswatini have been teleworking since March 2020 while the country remains on partial lockdown.

2.2.3 DEVELOPMENT OF THE ESWATINI UNSDCF 2021-2025

In 2019, the UN system began implementing a wide-ranging repositioning and reform process intended to make the organization more transparent, accountable, decentralized and effective. The components of the reform include strengthening the UN Resident Coordinator (RC) function, the Mutual Accountability Framework and the United Nations Sustainable Development Cooperation Framework (UNSDCF).

The UNSDCF is the most important instrument for planning and implementing UN development system activities at country level in support of achieving the 2030 Agenda for Sustainable Development. Another key instrument in the UN's ongoing reform is the Funding Compact, which is intended to increase financial transparency, accountability and efficiency.

The Funding Framework is the UN Country Team's main financial planning tool for the UNSDCF and is intended to increase UNDS coherence in raising and managing resources for implementing agreed CF results areas.

The Eswatini UNSDCF 2021 - 2025 is Eswatini's first negotiated and signed UNSDCF. It was developed under challenging circumstances in the context of a system-wide response to COVID-19.


The overall goal of the United Nations' support to Eswatini from 2021-2025 is to contribute to **"A prosperous, just and resilient Eswatini where no one is left behind"**. Inspired by the 2030 Agenda for Sustainable Development, and particularly to its Prosperity, People, Planet components, the UNSDCF sets out the UN's programmes and interventions through partnerships in the following four interlinked outcomes:



Priority I: Prosperity

The overarching themes of this strategic priority are enabling environment; private sector investment; small and medium sized enterprise creation, sustainable agriculture, job creation including a just transition into new sectors that address climate change, decent work, food security and social protection

Outcome 1: Promoting Sustainable and Inclusive Economic Growth



Priority II: People

The overarching themes of this strategic priority are health; education and vocational training; accountable governance, gender equality and human rights:

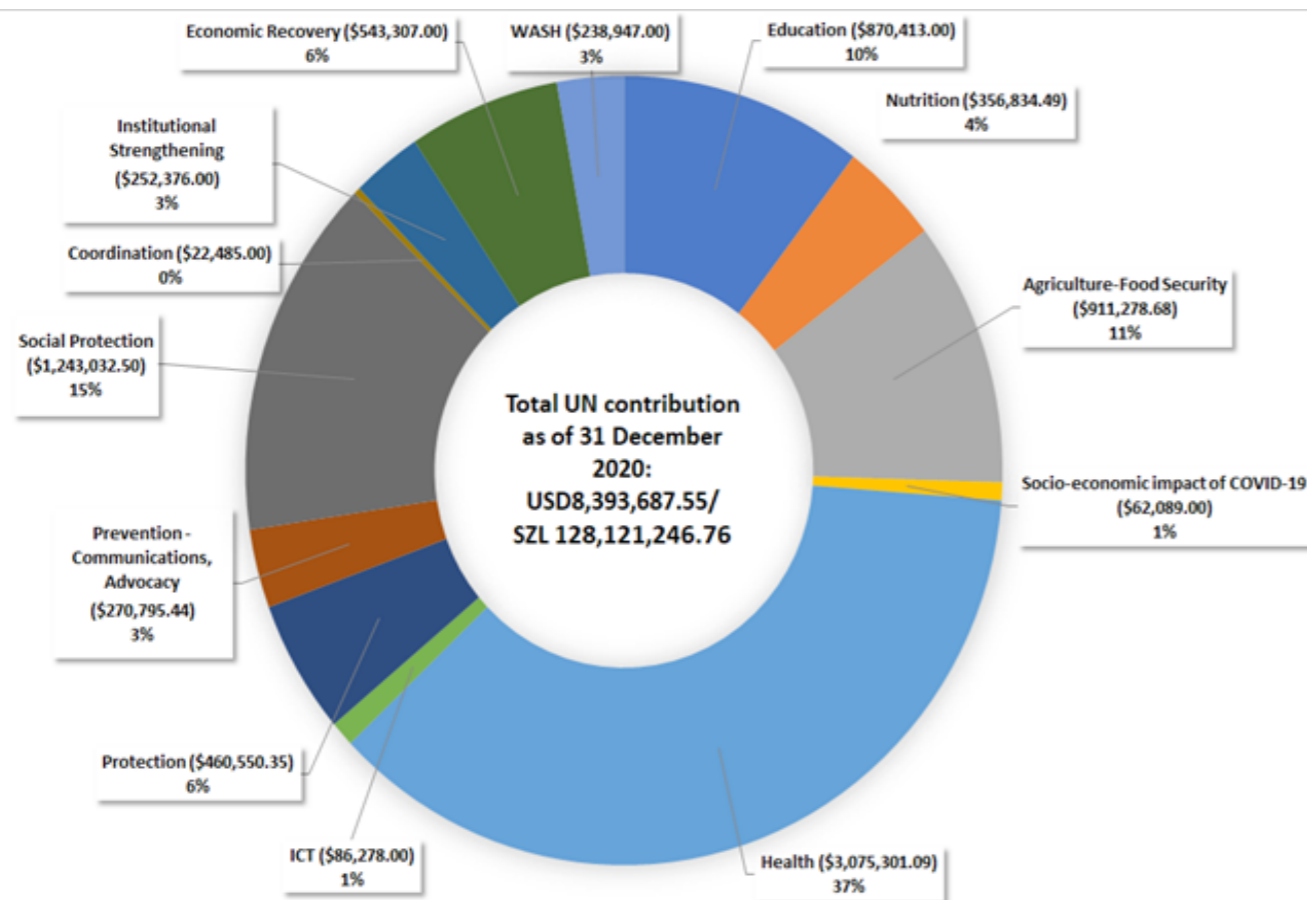
Outcome 2: Investing in Human Resources and Social Development
Outcome 3: Accountable Governance, Justice and Human Rights



Priority III: Planet

The overarching themes in this Outcome are climate change resilience and adaptation; water management; food security and renewable energy and just transition to environmental sustainability

Outcome 4: Strengthening Natural Resource Management, Climate Resilience and Environmental Sustainability



The identification of the outcomes for the 2021-2025 was informed by the priorities articulated in the Government's National Development Plan and sector strategies and plans; the goals and targets of the SDGs; the UN's overall normative agenda; the comparative advantages of UN agencies; the findings of the 2020 UN-commissioned Common Country Assessment (CCA) and the evaluation of the current UNDAF; the international commitments and charters to which the Government of Eswatini is a signatory; and the UN's consultations with the Government, development partners, the private sector, academia, civil society and other stakeholders during the UNSDCF formulation period.

UN Eswatini's implementation strategy for the 2021-2025 UNSDCF is based upon the Delivering as One (DaO) approach. This approach involves joint programming between multiple agencies in critical areas, including saving lives, economic transformation, resilience building, food security and climate resilience and environmental sustainability, while leveraging the comparative advantages of specific agencies, funds and programmes. As undertaken during UNDAF cycle 2016-2020, UNDS Eswatini's main areas of intervention will focus on:

- policies development
- knowledge management
- capacity building
- data management and analysis
- advocacy

Indicative activities include:

- Supporting the development of policies, regulatory systems and incentive frameworks to create a more enabling environment for business and to

2.3 Support to partnerships and financing the 2030 Agenda

During the year 2020, the UNDS in Eswatini, under the leadership of the Resident Coordinator, continued efforts towards promoting and advancing Agenda 2030 across the range of development partners and stakeholders, the private sector, civil society, academia, and organizations representing vulnerable groups and communities.

The Development Partners platform was established in 2020, coordinated by the Office of the UN Resident Coordinator, and met virtually twice a month to share information, ensure a cohesive and coordinated response to the COVID-19 pandemic, while enhancing joint planning, programming and delivery, and leveraging further opportunities for partnerships.

•Developing new mechanisms for climate financing, including access to international sources of climate finance

•Strengthening health surveillance systems to detect and respond to emergencies.

•Strengthening the capacity of extension services, development actors and communities to implement climate smart agriculture interventions that promote household food and nutrition security.

The Government of Eswatini and the United Nations Development System in Eswatini will coordinate closely in the implementation, monitoring and evaluation of the 2021-2025 UNSDCF. The Ministry of Economic Planning and Development (MEPD) is the primary national counterpart for the UNSDCF while the UN Resident Coordinator is the Government's primary UN counterpart.

UNSDCF processes at macro level will be led by the UN Resident Coordinator and the Principal Secretary of the MEPD, who are jointly accountable for the strategic oversight of UNSDCF results. The UNSDCF will be operationalized by Results Groups, jointly led by the Heads of the lead UN agencies and the Principals of the lead government ministries.

Lessons learned from the 2016-2020 UNDAF, including its wide-ranging but under-resourced interventions, as well as the uncertain post-pandemic financing environment, informed the UNDS Eswatini's decision to initially to prioritize 10 of the 16 CF outputs during the first two years, of the Cooperation Framework cycle.

Furthermore, the private sector (COs and captains of industry) participated actively in the development of the UNSDCF 2021-2025, and UNSDCF JWPs for 2021 and 2022, leading to the formulation of specific programmes and activities under Outcome 1 (Prosperity) and Outcome 4 (Planet).

Eswatini's status as a lower-middle income country (LMIC) has implications on the assistance it receives, as it is assumed that LMICs can finance their own development priorities or share development costs with Development Partners, this is not the case in the Kingdom of Eswatini.

Several sources of bilateral assistance have significantly decreased over the past 5-year period. However, the total volume of official development assistance has continued to grow through multilateral aid.



External assistance to Eswatini amounted to US\$278.5 million in 2019/20, an increase of 34 per cent over the previous year 2018/19. Bilateral contributions stood at US\$254.1 million, with multilateral contributions at US\$67.8 million.

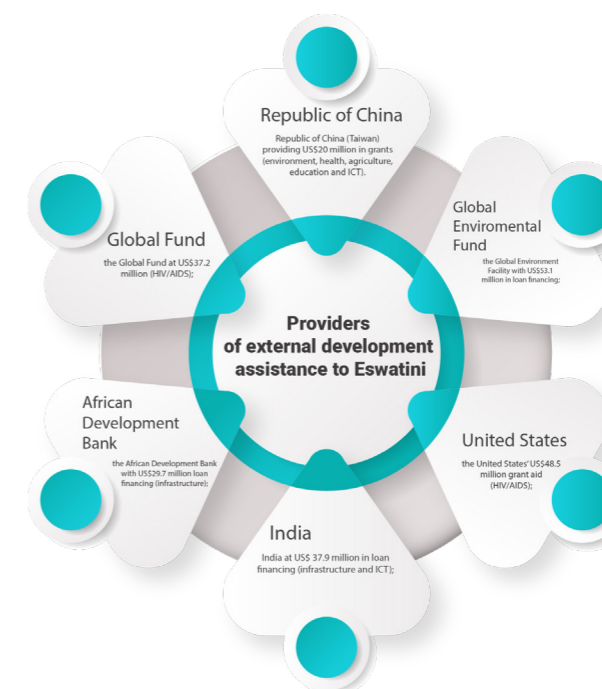
In 2019/20, the largest providers of external development assistance to Eswatini were the *Global Environment Facility* with US\$53.1 million in loan financing; followed by the *United States'* US\$48.5 million grant aid (HIV/AIDS); *India* at US\$ 37.9 million in loan financing (infrastructure and ICT); the *Global Fund* at US\$37.2 million (HIV/AIDS); the *African Development Bank* with US\$29.7 million loan financing (infrastructure); the *European Union* with US\$28.9 million (social protection); and *Republic of China (Taiwan)* providing US\$20 million in grants (environment, health, agriculture, education and ICT). By comparison, the contribution of the UN development system in the same year amounted to US\$12.2 million.

Overall, the health sector received the highest proportion of Eswatini's external aid receiving (35.1 per cent); followed by climate change (19.2 per cent); agriculture (18.1 per cent); and water and sanitation (18 per cent). In contrast, priority sectors for Government budget resources of US\$ 1.9 billion were education (17.3 per cent of government expenditure); security (14.5 per cent); health (10.9 per cent); infrastructure (10.4 per cent); and agriculture (8.3 per cent).

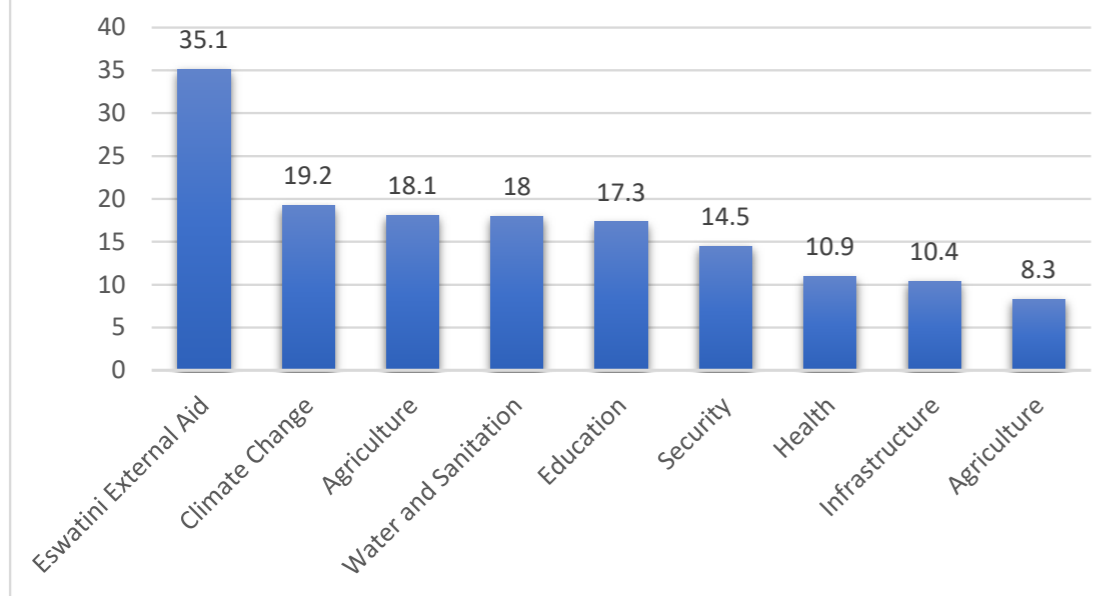
The 2020 Common Country Analysis suggested that South-South cooperation and private sector engagement could be a promising resource mobilization modality for SDG financing in the country. During 2020, the UN initiated work towards a Development Finance Assessment, intended to assist Eswatini to identify resource mobilization opportunities and areas for improvement in its management of financing for the SDGs.

Financing the SDGs requires mobilizing new resources (public and private, domestic and international) and realigning current expenditures towards the SDGs, freeing up resources for investment in essential areas, and ensuring the effective delivery of financial resources.

The Government of Eswatini has a key role to play in this regard through taxes, subsidies and regulatory frameworks to align incentives. The UN is supporting the Government in formulating its SDG resource mobilization strategy through the development of an Integrated National Financing Framework (INFF).



contribution of the UN development system in the same year amounted to US\$12.2 million.



2.4 Results of the UN working more and better together: UN coherence, effectiveness and efficiency

The Delivering as One modality, initiated by the UN Country Team since 2008 and formally endorsed by the Government in 2014, is increasingly showing positive results in efficiency gains and effectiveness. In 2020, under the leadership of the Resident Coordinator, the UNCT provided overall guidance, technical and financial support for effective and efficient implementation of the UNDAF.

The UNCT facilitated partnerships for UNDAF 2016 - 2020 with the Government, civil society, development partners, and the private sector. The UNCT also mobilized resources required to implement programmes, interventions and activities during the last year of UNDAF, and respond to the COVID-19 emergency through the Resource Mobilization and Partnership Strategy.

The UNCT ensured adherence to the One Programme principle to enhance opportunities for Delivering as One and was supported by internal structures to increase efficiency and effectiveness, including the Policy and Programmes Support Group (PPSG), the Monitoring and Evaluation Group, (M&E) the Results Groups (RG), the Operations Management Team (OMT) and the UN Communications Group (UNCG).

In 2020, the effectiveness of some of these internal structures remained limited, including as a result of teleworking modalities. Joint planning and delivery among UN Agencies, Funds and Programmes for UNDAF was therefore limited to a few activities, with a greater focus on the development of the UNSDCF 2021-2025, the formulation of UNSDCF Joint Workplans for 2021/2022, UNDS response to COVID-19 and enhanced communication as One.

ONE UN response to COVID-19

In March 2020, the UNCT developed a ONE UN Contingency Plan, ONE UN Business Continuity Plan, and a Three-Phase Activation Plan to address the impact of COVID-19, and ensure the continuity of UN Operations during the pandemic as well as continued support to the people, the Government, and partners of the Kingdom of Eswatini.

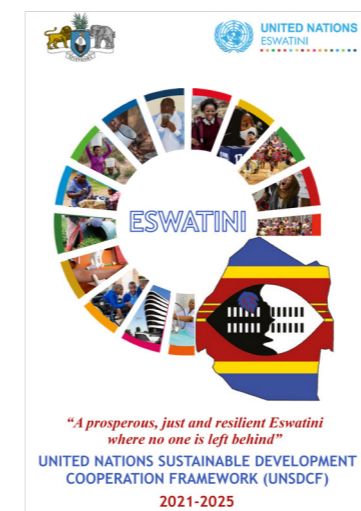
The ONE UN response was aligned with the briefs issued by the UN Secretary-General on COVID-19, with a focus on three main pillars of health first, socio-economic response and humanitarian response.

UNSDCF 2021-2025

The Development of the UNSDCF 2021-2025 began with the UN Common Country Analysis (CCA) formulated by an interagency team of 17 staff coordinated by the RCO and supported by a consultant. Subsequently, UNCT members actively engaged in all stages of the UNSDCF development process, including in meetings with the Cabinet, with members of the Joint National Steering Committee, with partners and stakeholders, leading to the formulation of 3 main priority areas, 4 outcomes, and 16 outputs. Following the signing of UNSDCF 2021 - 2025 on the 22 October 2020, in November and December, the same stakeholders met to formulate JWPs for 2021/2022 under 4 Results Groups, co-Chaired by UN Heads of Agencies and national counterparts.

Significantly, the UNCT, through commitment and active contributions from all Heads of Agencies/ Heads of Office, demonstrated vision and leadership in the mobilisation of resources and partners under each outcome area, as well as in the formulation of the following strategic instruments: CCA, UNSDCF 2021 - 2025, UNSDCF JWPs, UNSDCF Funding Framework.

Under the leadership of the UN RC, UNCT members leveraged financial, analytical and planning capacities to develop a quality UNSDCF 2021 - 2025, the implementation of which started on 1 January 2021.



ONE Operation

The 2020 nationwide lockdown did not have severe impact on the functioning of the UN House which hosts all UN AFPs, except for those located in South Africa, and two embedded in Government Ministries. Informed by national regulations, and with technical guidance from WHO, the UNCT put in place preventative measures, including teleworking

arrangements for staff, informational materials through videos and brochures, the disabling of the finger printing system for staff protection, the installation of hand sanitizers throughout the building, security and health checks, additional operational support, through the provision of PPE kits to staff, ensured that the minimum safety requirements needed to protect staff from COVID-19 infection were met.

In 2020, vacant office space was rented to the Indian High Commission and a private company, Mechanical Consulting, leading to a cost saving of approximately SZL 55,000 (US\$ 3,700) on monthly rent at the UN House. Through support from the UNCT, and while working in close collaboration with WHO and UNDS, the RCO developed the gradual phased return-to-office protocol that addresses safety and security concerns for essential staff performing their responsibilities from the UN House rather than their homes.

Through strong advocacy from the UNRC, with UNCT, Government Officials, Regional Directors and Principals at UNHQ, the UNDS in Eswatini received financial support from "First Line of Defence" (FLOD) funding in an amount of US\$99,998. Additionally, through an inter-agency cost sharing arrangement, an amount of US\$156,000. the UNDS Eswatini initiated the setting up of a UN isolation house/clinic for 149 UN personnel and over 400 dependents, to ensure timely, safe and efficient provision of isolation facility, testing, basic medical care and psychosocial services for staff. The facility is also expected to provide assistance in medevac procedures and the administration of the COVID-19 vaccine, once available in Eswatini

The UN in Eswatini also started the process to move to the Business Operations Strategy (BOS) 2.0, which will be completed in 2021.

Existing challenges at the UN House include outstanding vacant space which continues to incur extra costs to UNCT members; a continued slow response from the Developer to attend to structural defects on the premises; uncertainties as to the financing schemes for the construction work at the UN House and the UN's financial liability in this regard; slow progress on the BOS, and ineffective pooling of agencies' resources towards joint programming and delivery.

Communicating as ONE

In 2020, UN Communications activities focused on promoting the Sustainable Development Goals, the UN 75th Anniversary, as well as risk communication and community engagement in response to COVID-19. In 2020, the UN Resident Coordinator issued a total of 12 op-eds that were published in the Swazi Observer newspaper and shared on UN platforms,

based on the SDG Goal of the Month. In addition, the RCO published monthly UN Eswatini coordination reports with inputs from agencies. The latter actively contributed articles to the Sisonkhe bi-annual bulletin, which reports extensively on the work of the UN as One against Agenda 2030 in Eswatini.

Following the Secretary General's launch of UN75 dialogues on "The Future We Want, The UN We Need," the UN in Eswatini led 23 dialogues with different groups including the marginalized ones. Dialogues were held both virtually and face-to-face with persons with disabilities, persons living with HIV, migrants, children, youth, women, entrepreneurs, farmers as well as policy makers including Members of Parliament and the country's late Prime Minister, Ambrose Dlamini. In partnership with the Times of Eswatini, the UN also conducted the UN75 Essay Competition for which a total of 193 entries were received from young people via email, with visions of the future for Eswatini, in which issues of governance, human rights, gender equality and employment opportunities for young people featured prominently.

Additionally, digital media platforms continued to be updated daily showcasing the latest work of the UNDS in partnership with a wide range of actors. Joint advocacy took place to commemorate International Women's Day, 16 days of activism, UN Day and World AIDS Day.

In response to COVID-19, the UN Communications Group was part of the National Technical Working Group for Risk Communication and Community Engagement, where awareness and social mobilization campaigns were developed and implemented reaching more than 90 per cent of the population.



2.5 Evaluations and lessons learned

2.5.1 EVALUATION OF UNDAF 2016 - 2020

An end term assessment of the UNDAF 2016-2020 was conducted in November 2020 to inform learning, decision-making and lay the foundation for the design of the UNSDCF. The assessment examined the relevance, effectiveness, efficiency, and sustainability of the UN's joint programming efforts and their contribution to the UNDAF outcomes in November 2020 (please see link to UNDAF mid-term and final assessment report). The assessment concluded that:

- The three priority areas, outcomes, and outputs of UNDAF 2016 - 2020 were relevant and in line with national needs and priorities and several interventions were implemented, though these were done primarily through individual agencies.

- Though UNDAF 2016 - 2020 management and implementation structures were well defined, the effective implementation of UNDAF faced many challenges due to issues of commitment by UNCT members, poor coordination of Results Groups, and ineffective leadership within Results Groups.

- Insufficient joint monitoring review and reporting due to lack commitment, focus, delivery on respective responsibilities and lack of accountability.

- There was limited involvement of other key stakeholders such as civil society, media, private sector and academia.

- The performance indicators on human rights, and gender equality and the empowerment of women were not well documented and measured due to lack of capacity within the UNCT in Eswatini.

2.5.2 LESSONS LEARNED

- Effective leadership and coordination of Results Groups by different UN agencies and Government counterparts promote greater synergy, efficiency, and accountability.

- Data collection, documentation and reporting should be treated as a priority function.

- To avoid duplication of roles and responsibilities, there is a need for UN agencies to openly dialogue and agree on what the DaO approach means.

- Stronger UN agency collaboration is required to advance the DaO agenda.

- Improved UN agency COVID-19 collaboration is needed for efficient allocation of resources.

- There is a need for a strengthened UNCT/CSO collaboration to build their capacity on issues such as human rights and gender and for stronger engagement and integration of the rights of vulnerable groups/populations (e.g., persons with disabilities, persons in detention in the COVID-19 response).

- Stronger involvement of Government, civil society, donor partners in the implementation of the Joint Work Plans (JWPs) through scheduled/regular UN Result Groups meetings under the leadership of respective Heads of UN Agencies.

- Need to promote more joint planning and joint fundraising as evidenced by funds generated under MPTF for COVID-19 response.

- Ensuring continuous mapping of resources for the implementation of UNDAF 2016 - 2020/ UNSDCF 2021 - 2025, to identify the gaps, and inform resource mobilization will allow UN Agencies to allocate more resources for the COVID-19 response and facilitate better resource allocation for joint work plans implementation.

- It is important that impact, outcome, and output indicators for JWPs are measurable, and data should be available through the regular/scheduled convening of the Monitoring and Evaluation (M&E) team.

- It is important to strengthen M&E tools (use of standard templates) to improve coordination on reporting and avoid duplication of reports required by different agencies.

- The UNCT should encourage and strengthen joint programming to help agencies deliver on Joint Work Plans.

- The promotion of innovative approaches such as exploring alternative strategies for continuity of service, (e.g., multi-month dispensing of ART and community distribution of condoms) is crucial.

- The UNCT should look for ways to continuously collect, update and share needed data and information to support the government's policy and decision-making process.

- Overall, 2020 resulted in increased collaboration among both resident and non-resident UN agencies, reflecting ONE UN leadership and solidarity and joint undertaking in the COVID-19 response.

2.6. Financial overview and resource mobilization

2.6.1. FINANCIAL OVERVIEW

2.6.1.1 UNDAF 2016-2020

The planned budget for implementation of UNDAF 2016-2020 was approximately US\$125 million, with only US\$80 million reported as being available at its inception. There was therefore a funding gap of around US\$45 million that the UN was expected to mobilize collectively with the Government and other partners in the intervening period. About US\$74 million in funding is reported by the Government to have been made available to Eswatini by the UN development system in the first four years of the UNDAF.

At the time of reporting, data was not yet available for the final year of UNDAF implementation. However, measured linearly, the UN in Eswatini appears to have been off-track to deliver against its budgeted expenditure over the UNDAF period, nonetheless, this does not take into account the other resources mobilised by UNDS in Eswatini during the 2015/2016 drought/El Nino episode in the country (approximately US\$ 40 million).

Notably, delivery and value-for-money could not be determined with certainty due to a lack of consolidated financial reports and clear mechanisms for financial reporting and accountability.

2.6.1.2 UNSDCF 2021-2025

The preliminary estimate is that total resources required to implement the 16 prioritized UNSDCF outputs would be approximately US\$128,769,372 throughout the full 2021-2025 UNSDCF cycle.

On 1 January 2021, the total indicative resources required to deliver the 10 prioritized outputs for the first two years of the 2021-2025 UNSDCF were estimated at US\$24 million. Of this amount, approximately US\$10.5 million is estimated to currently be available, leaving a funding gap of US\$13.5 million. Across the four priority areas, the breakdown is as follows:

Table 1: Planned Budget and Funding Gap for UNSDCF, 2021 and 2022 (US\$)

Results Area	Estimated Budget (US\$)	Available Resources (US\$)	Funding Gap (US\$)
Outcome 1: Promoting Sustainable and inclusive Economic Growth	5,090,530	1,236,150	3,854,379
Outcome 2: Investing in Human Resources and Social Development	6,574,930	2,865,869	2,629,169
Outcome 3: Accountable Governance, Justice and Human Rights	3,196,600	2,055,800	1,862,800
Outcome 4 Strengthening Natural Resource Management, Climate Resilience, and Environmental Sustainability	8,405,848	2,270,000	6,135,848

2.6.2 Resource mobilization

UNDS Eswatini joint resource mobilisation efforts include its participation in three successful fund-raising exercises covering social protection, health, and disability from the Secretary General's Multi-Partner Trust Fund (MPTF), along with successful resource mobilisation with the European Union, the United Kingdom, and through agencies internal mechanisms. As an example, those efforts resulted in the mobilisation of US\$1.8 million from the MPTF.



CHAPTER 3: UNCT KEY FOCUS FOR 2021

In 2021, as the UN enters a new cycle with UNSDCF 2021 - 2025, the UNCT will focus on:

SDG implementation through effective implementation of the UNSDCF

Operationalizing the UNSDCF 2021-2025 through the implementation of the JWPs for 2021 which was developed across four results groups and ten output areas. A joint resource mobilization strategy will be developed to mobilize additional funding to support the implementation of the UNSDCF JWPs. This will include the exploration of additional and innovative sources of funding, given Eswatini's middle income status. The current CCA will be reviewed to provide evidence-based implementation of the JWPs.

Integration of Eswatini's Socio-Economic analysis on COVID-19 impacts and COVID-19 Response Needs Assessment (CRNA) in the JWP 2021-2022 will be a priority for the UNCT. The UNCT will work to support the implementation of the Voluntary National Review (VNR) recommendations in close collaboration with the GoE and stakeholders, focusing on areas such as SDG progress tracking and financing.

This will ensure mutual accountability for the implementation of the UNSDCF through the operationalization of UN/Government UNSDCF Joint Steering Committee reporting and coordination mechanism.

Operationalizing the SG's prevention vision

Targeted capacity development of institutions identified in the UNSDCF JWPs including CSOs, to better support the GoE in prevention, planning, management and recovery from extreme weather effects and natural disasters such as floods; focusing on the most vulnerable and mobilizing efforts to support the youth agenda in Eswatini. UNDS Eswatini will also ensure that it is equipped with necessary expertise and capacities such as a Peace and Development Adviser, Human Rights Adviser, and a Humanitarian Officer for greater analysis and advice on the risk and threats to the achievement of Agenda 2030 in this last Decade of (accelerated) Action.

Strategic financing and partnerships

Enhancing its cooperation and partnerships with development partners, particularly the European Union, IFIs such as the World Bank and the African Development Bank, and the private sector to strategically partner with the Government and other actors for the successful implementation of the UNSDCF and SDG acceleration.

LNOB, human rights, and gender equality and women's empowerment (GEWE) in the 2030 Agenda

Meeting the minimum corporate requirements on human rights and GEWE through strategic and systematic capacity development across all agencies and within the UNSDCF implementation process will be a key priority for UNDS Eswatini. In fulfilment of the LNOB principle, the UNCT will work to mainstream issues such as disability in UN operations, policies and programmes and focus on upholding UN's responsibilities regarding prevention and responding to serious violations of human rights.

Business innovation

Strengthening business operations through sustained capacity development with a focus on Operations and Management technical working teams to effectively lead the BOS implementation (common premises, CBO, mutual recognition; costing and pricing and client satisfaction measurement). The UNCT will ensure that a strong UNSDCF communications strategy is in place and effectively implemented. The UNCT will focus its normative agenda on mainstreaming disabilities, gender, and human rights in the UN's operations and ensure that the UN Isolation House/ clinic and medical support and psychosocial services for UN personnel are readily and successfully in place.

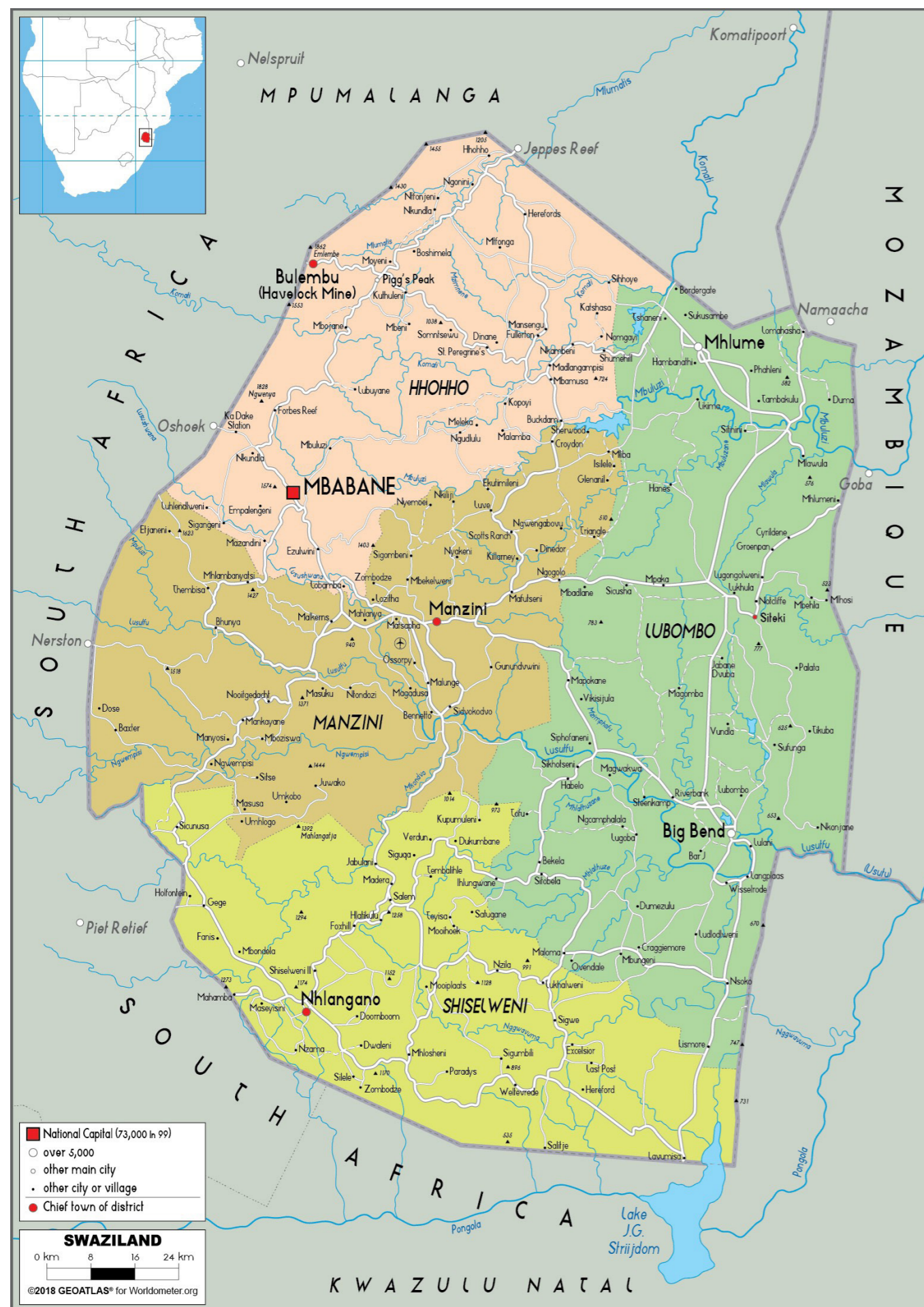
Accountability for results:

Implementation by the UNCT of all provisions of the Management and Accountability Framework of the UN Development and Resident Coordinator System.



ANNEXES

Annex I: Map of the Kingdom of Eswatini



Annex II: Important documents

Document	Link
Eswatini COVID-19 Situational Analysis	http://www.gov.sz/index.php/covid-19-coronavirus/situational-analysis
Eswatini Strategic Roadmap 2018 to 2023	http://www.gov.sz/images/CabinetMinisters/STRATEGIC-ROADMAP-2018-2023---MAY-2019.pdf
Eswatini Voluntary National Review (VNR)	https://sustainabledevelopment.un.org/content/documents/24651Eswatini_VNR_Final_Report.pdf
National Development Plan (NDP) 2019 to 2022	http://www.gov.sz/images/CabinetMinisters/NDP-2019-20-to-2021-22-final.pdf
National Development Strategy (NDS)	http://www.snat.org.sz/New%20Page/The-National-Development-Strategy.pdf
United Nations Common Country Analysis (CCA) of the Kingdom of Eswatini	https://eswatini.un.org/en/115429-united-nations-common-country-analysis-kingdom-eswatini-april-2020
United Nations Development Assistance Framework (UNDAF) 2016 to 2020	https://eswatini.un.org/en/17762-united-nations-development-assistance-framework-2016-2020
United Nations Sustainable Cooperation Framework (UNSDCF) 2021 to 2025	https://eswatini.un.org/en/115424-united-nations-sustainable-development-cooperation-framework-unsdcf-2021-2025
Integrated Food Security Phase Classification Snapshot, June 2019 to March 2020	Source: https://reliefweb.int/report/eswatini/eswatini-integrated-food-security-phase-classification-snapshot-june-2019-march-2020

Annex III: Consolidated BCP Priorities for the Year 2020

Lead the development of the UNSDCF (2021-2025) and facilitate coordination of the UNSD and development partners to support the GoE's COVID-19 response and operationalize the four pillars of UN development reform.

Ensure strategic communication to internal and external audiences/stakeholders on relevant aspects of UN Eswatini efforts to address COVID-19 and strengthen risk communication and community engagement on COVID-19, promoting awareness and preventive behaviours.

Ensure food and nutrition security (deliveries to orphan and vulnerable children, cash transfers to food insecure populations and provision of agricultural inputs and vegetable seedlings).

UN support to the Government to address the social economic impacts of COVID-19 (with a special focus on revitalization of SMEs) and support to government business continuity including humanitarian border management in key points of entry.

Health system strengthening, focusing on the protection of health care providers delivering maternal health and addressing sexual and gender-based violence and capacitate curriculum developers on COVID-19 for incorporation into school's curriculum under health education and capacity building of career guidance teachers and officers on COVID-19.

Emergency response in support of logistics and supply chain management and ensuring – to the extent possible – the uninterrupted supply of health commodities and pharmaceutical supplies.

Supporting continuous access to critical social services (including water, hygiene and sanitation adequate health care and access to continuous learning) to children, particularly those vulnerable, including social protection measures and strengthen systems for access to continuous child protection services, including GBV prevention and response and prevention of sexual exploitation and abuse.

Support country capacity in surveillance, case management, infection prevention and control, contact tracing, port health and provide administrative support to administration, logistics, IT, finance, HR, procurement, transport in COVID-19 preparedness and response, and GoE COVID-19 preparedness for HIV, planning for Global Fund COVID-19 emergency funds and utilization and GFATM application process for HIV/ TB.

