



World Food Programme

SAVING LIVES  
CHANGING LIVES

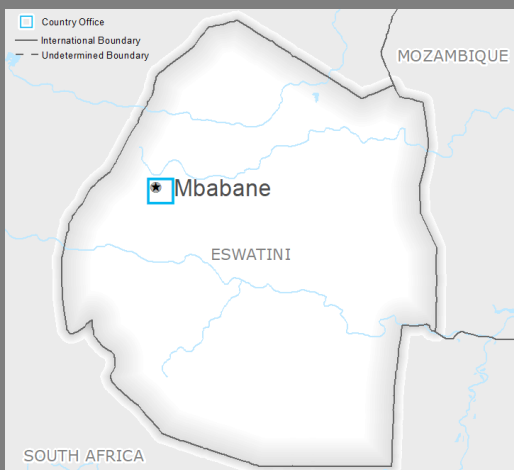
# WFP Eswatini Country Brief July 2019



## Operational Context

Despite its status as a lower middle-income country, 70 percent of the rural population live below the national poverty line and 25 percent are extremely poor. Eswatini has a very high HIV prevalence, affecting 26 percent of the population between the ages of 15-49. Life expectancy is 49 years, and 58 percent of children are orphaned or vulnerable. Chronic malnutrition is a main concern in Eswatini: stunting affects 26 percent of children under the age of five. Eswatini is vulnerable to drought in the south east. 4. Smallholder agriculture remains the backbone of rural livelihoods in Eswatini with over 70 percent of the country's total population, 60 percent of whom are women, relying on subsistence farming.

WFP's presence in Eswatini dates back to the late 1960s, providing emergency relief and introducing development projects aiming to strengthen the education and health sector. Today, WFP supports the Government of Eswatini in improving the food and nutrition security and creating safety nets for the most vulnerable people impacted by poverty and HIV/AIDS.



Population: **1.1 million**

2017 Human Development Index: **144 out of 189**

Income Level: **Lower middle**

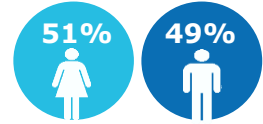
Chronic malnutrition: **26% of children between 6-59 months**

## In Numbers

**230.8 mt** of food assistance distributed

**US\$ 7.2 m** six months (Aug 2019 - Jan 2020) net funding requirements, representing 25% of total

**52,757 people assisted**  
In July 2019



## Operational Updates

### Social protection:

WFP targets the most food insecure and nutritionally vulnerable populations throughout the year, including in response to shocks.

Orphans and vulnerable children (OVC): WFP provides social safety nets for 55,000 OVC of pre-primary school age across Eswatini at 1,700 Neighbourhood Care Points (NCPs) through access to food and basic social services.

Home-Grown School Feeding (HGSF): WFP works with government to implement a sustainable, nutrition-sensitive, shock-responsive national school meals programme. The pilot for a HGSF project starts in September 2019 targeting 50 schools and 24,392 students. WFP works with the Ministry of Agriculture and FAO to empower local smallholder farmers to provide schoolchildren with food that is safe, diverse, nutritious and local.

### Crisis Response:

The 2019 Eswatini Vulnerability Assessment and Analysis (VAA) indicates that 25% (232,000) (IPC Phase 3+4) of the rural population will be faced with acute food insecurity challenges for the 2019/2020 consumption period. Funding provided by the German Federal Foreign Office (GFFO) and internal WFP resource allocation (the Strategic Resource Allocation Committee – SRAC) enables WFP Eswatini to reach 61,000 beneficiaries for 6 months with cash-based transfers, starting in October. A funding gap of about 84% remains.

### HIV and Nutrition:

Unified Budget Results and Accountability Framework (UBRAF) country envelope: WFP works with the Ministry of Health (MoH) to improve treatment and recovery outcomes of people living with HIV (PLHIV) and tuberculosis (TB). An impact study was finalized in June, which demonstrates nutritional support having a great positive effect on nutritional status of malnourished clients. WFP further collaborates with the Ministry of Health (MoH), UNAIDS, WHO, UNFPA and the Swaziland Network of Young PLHIV to conduct treatment literacy activities to empower communities to improve nutrition, uptake of and adherence to TB & antiretroviral therapy (ART) medication, and sexual & reproductive health services.

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**Main Photo**

**Credit:** © WFP/Theresa Piorr  
**Caption:** Children enjoying a nutritious meal at one of Eswatini's Neighbourhood Care Points.

**Transitional Interim Country Strategic Plan (2018-19)**

Total Requirement (in USD)	Allocated Contributions (in USD)	Six Month Net Funding Requirements (in USD)
<b>29.2 m</b>	<b>8.3 m</b>	<b>7.2 m</b>

**Strategic Result 2: No one suffers from malnutrition**

**Strategic Outcome 1:** Children under five, ART, TB and PMTCT clients in Eswatini have improved nutritional status in line with national targets by 2022

- Activities:**
- Provide nutrition treatment services to malnourished clients on ART, TB, and/or PMTCT treatment and provide cash transfers to households of malnourished clients on ART, TB and/or PMTCT treatment
  - Provide capacity strengthening and technical assistance to government entities responsible for the coordination and provision of nutrition services

**Strategic Result 5: Countries have strengthened capacities to implement the SDGs**

**Strategic Outcome 2:** The National Social Protection System in Eswatini is able to target and assist the most food insecure and nutritionally vulnerable populations throughout the year including in response to shocks

- Activities:**
- Provide capacity strengthening and technical assistance to government entities involved in social protection
  - Provide nutritious meals to orphans and vulnerable children in pre-primary Neighbourhood Care Points (NCPs), primary and secondary schools, including through a Home-Grown School Feeding programme
  - Provide capacity strengthening and technical assistance to government entities that manage and use food security monitoring and analysis

**Strategic Result 1: Access to food**

**Strategic Outcome 3:** Targeted food insecure households in Eswatini are able to meet their basic food requirements in times of shock

- Activities:**
- Provide food and cash-based transfers to targeted food insecure populations affected by shocks

- Vulnerability drivers include dry spells during the start of the previous season coupled with early warning messages on the possibility of an El Nino drought, that led to a high proportion of farmers choosing not to plant their fields. This resulted in a significantly reduced area planted, limited agricultural casual labour opportunities, and drastically compromised food production.
- Food insecurity is likely to deteriorate rapidly in areas where there is limited or no humanitarian assistance and limited social safety nets. Many households are still failing to meet their food requirements heightening the need for urgent food support. Current support programmes are not adequate to meet the current demand.

**Economic Forecast:**

- Macro-economic challenges: The growth rate of the country's economy has been very weak over the last 3-5 years, affecting several productive and social sectors.
- Medium-term prospects of speedy recovery remain bleak owing to the persistent fiscal challenges experienced by government, thus resulting in reduced economic activity. Growth in the country has remained constrained since the 2015/2016 drought.
- The impact of a combination of factors has resulted in the gradual reduction in the revenue from the Southern African Customs Union (SACU) and further increased public debt.
- To stimulate economic growth and recovery, the Government has launched the Kingdom of Eswatini Strategic Road Map 2019 – 2023 and identified key strategic sectors: Agriculture, Energy, Tourism, ICT & Education, and Manufacturing & Agro-processing.

**Shortfalls and Operational Impact:**

- Nutrition assessments, counselling and support (NACS) services to PLHIV and TB were halted due to a lack of funds in April 2018 leaving 24,000 people without vital support, including 4,000 malnourished ART/TB clients who were receiving specialized nutritious food. (Activity 1)
- Due to increasing food insecurity and poverty nationwide, beneficiary numbers at NCPs gradually increase. (Activity 4)
- A funding gap of about 84% remains for Crisis Response. (Activity 6)
- WFP continues to engage in extensive resource mobilization efforts through government, traditional and non-traditional donors (e.g. private sector).

**Monitoring and Evaluation**

- 174 out of 195 (89%) planned NCP sites were monitored.
- The National School Feeding Programme Evaluation is in the final stages. The final draft will be submitted in August.

**Challenges**

**Food Insecurity:**

- Results of the 2019 Eswatini Vulnerability Assessment and Analysis (VAA) indicate that 25% (232,000) of the rural population will be faced with acute food insecurity challenges (Integrated Phase Classification, IPC, Phase 3 + 4) for the 2019/2020 consumption period (October 2019 – March 2020).
- Of these, 5% (47,000) are found in IPC Phase 4 and will likely be in an emergency. Chronic food insecurity challenges are projected.

**Donors**

Japan, Germany, Multilateral Funds