

SAVING
LIVES

CHANGING
LIVES



Eswatini Annual Country Report 2019

Country Strategic Plan
2018 - 2019



World Food
Programme

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Summary

In 2019, WFP Eswatini concluded its Transitional Interim Country Strategic Plan (T-ICSP), which supported the Government in improving the food and nutrition security of the most vulnerable people. As a precursor to the Country Strategic Plan (CSP) 2020–2024, the T-ICSP was an intermediate step in WFP's shift from an operational to a strategic partner, focusing as it did on the provision of technical assistance and institutional strengthening.

In pursuit of Sustainable Development Goals 2 (Zero Hunger) and 17 (Partnerships for the Goals), WFP continued to support the national social protection system for vulnerable groups, including food-insecure populations affected by drought, orphans and vulnerable children (OVC), and people living with HIV and tuberculosis (TB).

WFP provided food assistance to 54,640 OVC under the age of 8 enrolled in 1,699 community-led Neighbourhood Care Points managed by local volunteers. Almost of 24,400 pupils in 50 primary and secondary schools also received locally procured food through a pilot Home-Grown School Feeding (HGSF) programme. Both activities aimed to strengthen food and nutrition security among pre-primary, primary and secondary schoolchildren, with a view to improving attendance and retention.

In September, WFP piloted the HGSF initiative, linking smallholder farmers to the school feeding programme. Eight farmers' groups comprising 331 smallholders – 145 of them women – were registered as vendors for the pilot. Almost 170 mt of food was procured from smallholders, with 115.7 mt of it supplied to schools, meeting 51 percent of the food requirements for final term of the year. WFP helped familiarise farmers and staff of the ministries of education and agriculture with its procurement processes. Local purchases reduced delivery lead times from an average of 32 days to fewer than ten.

WFP collaborated with the Ministry of Health and other United Nations (UN) agencies— the World Health Organization (WHO), the Joint United Nations Programme on HIV and AIDS (UNAIDS) and the United Nations Populations Fund (UNFPA)—to develop and implement an integrated nutrition, sexual reproductive health (SRH), antiretroviral therapy (ART) and TB treatment literacy programme. This aims to increase viral suppression through better nutrition, adherence to ART and TB medication and the availability of SRH services among women and others aged 15–49 years living with HIV. WFP supported 101 young people in 8 chiefdoms via community mobilisation and sensitisation, engaging another 60,000 through social media on the subjects of ART, TB, SRH and nutrition. However, having halted nutritional support to malnourished people living with HIV in 2018 for lack of funding, WFP was unable to resume it in 2019, for the same reason.

Together with UNAIDS, WFP helped the Ministry of Health conduct a study of the relationship between nutritional support and HIV and TB treatment outcomes. This found that nutrition may improve immunological outcomes. WFP presented the findings during the 2019 International Conference on AIDS and STIs in Africa in Rwanda.

WFP provided technical support to the Government in the areas of disaster preparedness and response, resilience-building and vulnerability analysis. This gave rise to an Integrated Context Analysis designed to strengthen the design, planning and implementation of longer-term resilience-building programmes.

The national response plan prioritised 168,600 of the estimated 232,000 people at risk of food insecurity and in need of immediate food assistance due to poor harvests, higher food prices, limited income opportunities and endemic poverty. WFP and partners implemented cash-based transfers (CBT), reaching 51,558 people in 7 constituencies in the Hhohho and Lubombo regions. With funding scarce, WFP prioritised populations facing “emergency” levels of food insecurity (Integrated Phase Classification Phase 4) and acute malnutrition.

The year also saw a deepening of the collaboration with government ministries and parastatal organizations, as well as with the private sector, academia, non-governmental organizations and other UN agencies.

130,590

Total Beneficiaries in 2019

of which 2,744 is the estimated number of people with disabilities (1,411 Female, 1,333 Male)

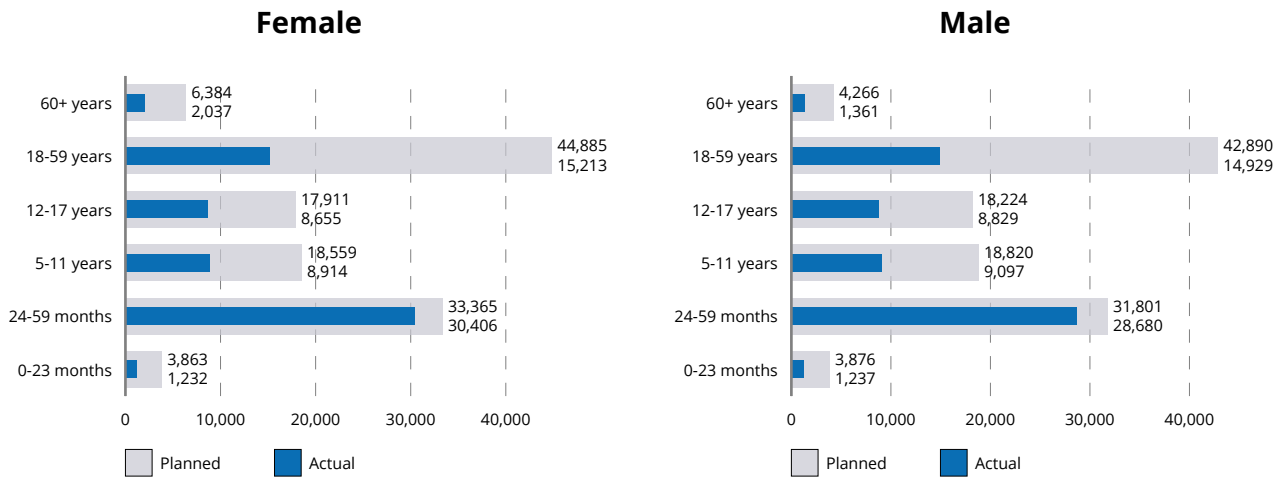


51% female

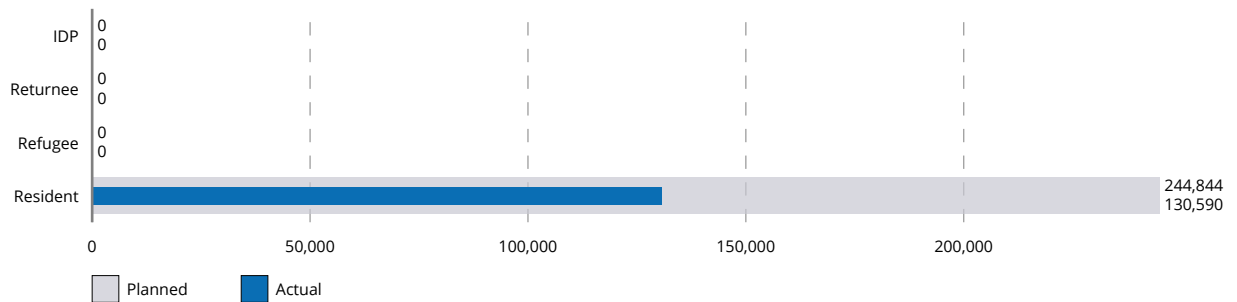


49% male

Beneficiaries by Sex and Age Group



Beneficiaries by Residence Status

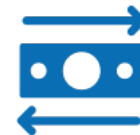


Total Food and CBT



2,466 mt

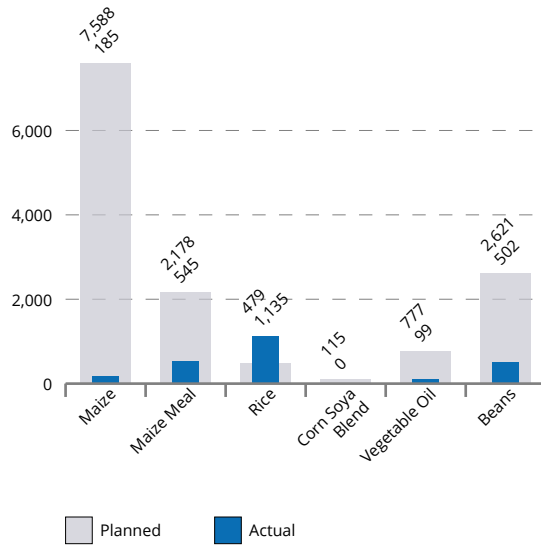
total actual food transferred in 2019
of 13,759 mt total planned



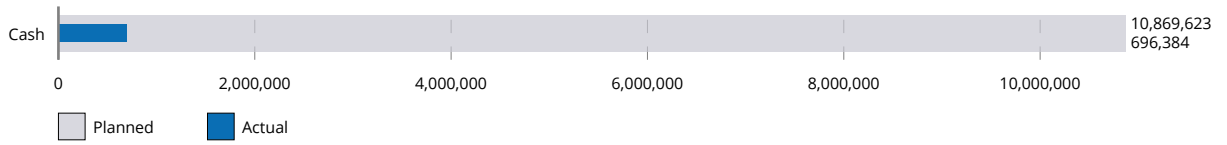
US\$ 696,384

total actual cash transferred in 2019
of \$US 10,869,623 total planned

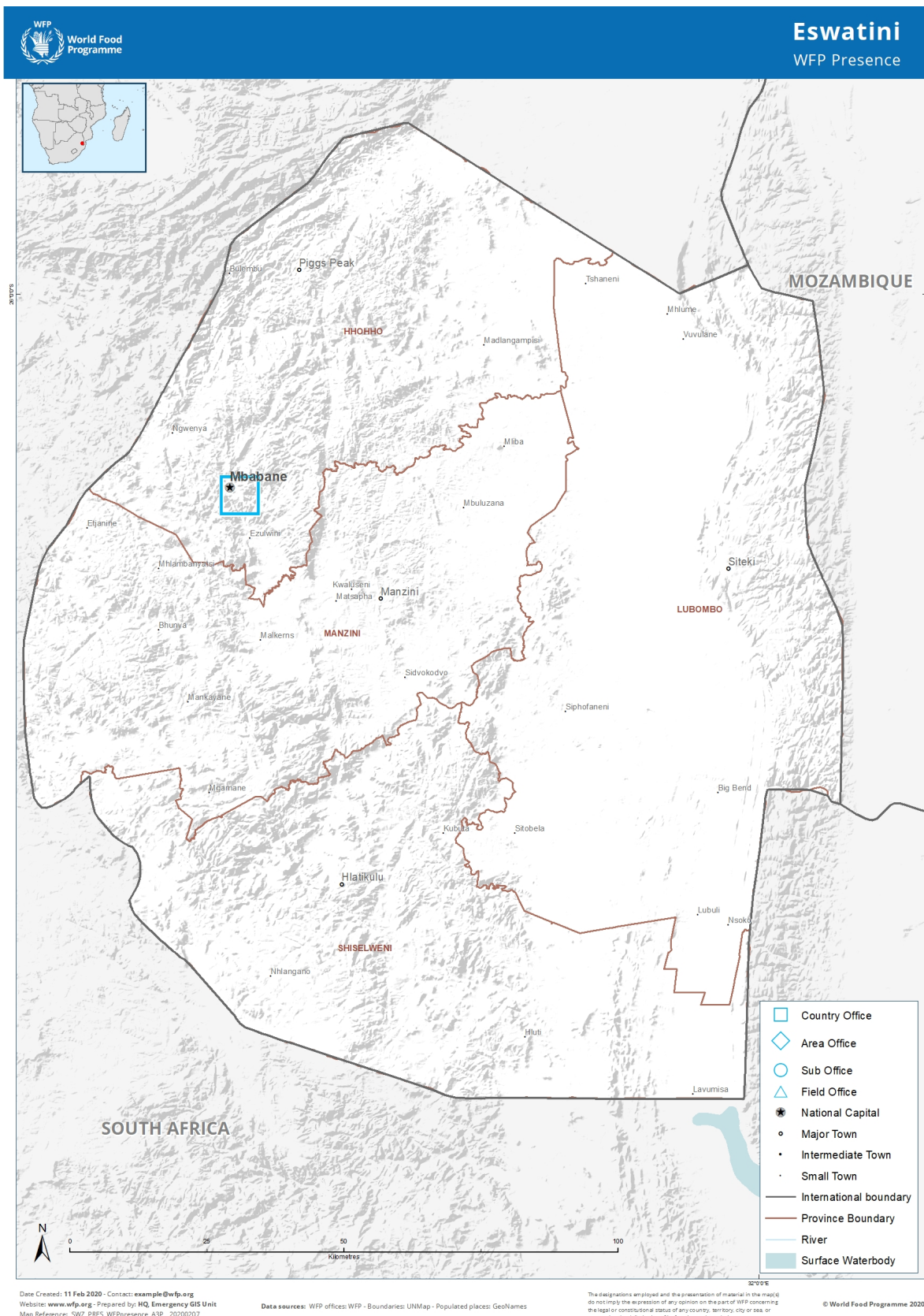
Annual Food Transfer



Annual Cash Based Transfer and Commodity Voucher



Context and Operations



Eswatini is a lower middle-income country with a population of 1.1 million, 46 percent under the age of 20. It ranked 144th out of 189 countries in the 2018 Human Development Index[1]. Poverty and income inequality remained high, with 58.9 percent of the population living below the national poverty line and a GINI coefficient of 51.5 – the tenth highest in the world[2]. While Eswatini in 2019 achieved the 90-90-90 targets in the fight against HIV, its prevalence remained the world’s highest, at 26.3 percent of those aged 15–49[3]. Women are disproportionately affected, at 35.1 percent, compared to 19.3 percent of men[4]. Life expectancy is 49 years, and 45 percent of children are categorised as orphaned or vulnerable, mainly due to the impact of HIV/AIDS.

Food insecurity is intrinsic to the high poverty levels, so the poorest – particularly in rural areas - are chronically vulnerable. Trend analysis of poverty and food insecurity has identified 25 percent of the population as both extremely poor and having experienced food insecurity in the past ten years[5]. High food prices and poor crop production due to recurrent drought and dry spells exacerbate food insecurity.

Following sharp declines in food production in 2018 and 2019 due to poor harvests, 232,000 people were projected to be food insecure during the October 2019–March 2020 lean season[6]. Eswatini ranked 74th out of 117 countries in the 2019 Global Hunger Index[7], its food insecurity classified as “serious”. Chronic malnutrition (stunting) is a primary concern, afflicting 26 percent of children aged 0–59 months. There is currently no comprehensive social protection policy to address the needs of the extremely poor and chronically vulnerable, potentially condemning future generations to vicious cycles of malnutrition.

The 2016 Sustainable Development Goal (SDG) country report, elaborated with United Nations (UN) support, noted that Eswatini aspires to “first world country” status by 2022[8]. However, growth rates have slowed down and were below the target of 5 percent a year said to be required to eradicate poverty by 2030[9]. Real gross domestic product (GDP) growth for 2019 was estimated at 1.4 percent, down from 2.4 percent in 2018 [10]. The slow growth has impacted government revenue, impeding service delivery in all sectors.

The fiscal deficit and public indebtedness grew in 2019, with the national debt equivalent to 41 percent of GDP year’s end, up from 35 percent in 2018. The continued deterioration poses a risk of macroeconomic instability and impedes the Government’s ability to invest in development and social services, notably health and education.

The UN in Eswatini continued to implement the Development Assistance Framework (UNDAF) 2016–2020 and initiated a Country Context Analysis (CCA) to provide the basis for the next UN Sustainable Development Cooperation Framework (UNSDCF), in line with the “Delivering as One” approach.

The Government’s Strategy for Sustainable Development and Inclusive Growth 2030 and the National Strategic Roadmap for 2018–2023 are to guide the economic recovery and development of Eswatini. WFP’s Transitional Interim Country Strategic Plan (T-ISCP) enhanced the Government’s capacity to manage food security and nutrition interventions through three strategic objectives and six activities.

Under Strategic Objective 1, WFP provided capacity strengthening and technical assistance to the Government to enable it better execute and coordinate the provision of nutrition assistance to children under five and people on antiretroviral therapy, tuberculosis treatment, and the prevention of mother-to-child HIV transmission.

Under Strategic Objective 2, WFP supported national social protection systems in identifying and assisting the most food-insecure and nutritionally vulnerable populations. The support included nutritious meals for orphans and vulnerable children in pre-primary Neighbourhood Care Points, and school meals for children in primary and secondary schools, including those served by the Home-Grown School Feeding programme. WFP engaged the Government on developing integrated registries for social protection programmes and provided technical assistance to state entities for the generation, management and use of food security monitoring and analysis.

Under Strategic Objective 3, WFP provided cash-based transfers to targeted food-insecure households in seven constituencies to enable them to meet their basic food requirements. It provided technical assistance in the areas of beneficiary targeting and the calculation of cash transfer values.

CSP financial overview

WFP received contributions of USD 5.9 million towards a Transitional Interim Country Strategic Plan (T-ICSP) needs-based plan of USD 24.1 million, 24 percent of the funding required. They were mainly single-year allocations earmarked for specific strategic outcomes and activities. A small proportion was multilateral funding, allocated to underfunded activities. Resourcing levels varied across individual strategic outcomes. While Strategic Outcome 2 was adequately funded, Strategic Outcomes 1 and 3 had significant shortfalls that necessitated prioritisation and the adjustment of activities. Despite the need for prioritisation, underfunded activities had a positive impact.

Support to malnourished HIV and TB clients under Strategic Outcome 1 had ended in 2018, and no funding was received in 2019 for either in-kind food or cash-based transfers for that purpose. However, Strategic Outcome 1 did receive 14 percent of the required resources (USD 151,980) through the Unified Budget, Results and Accountability Framework (UBRAF). This was channelled into capacity-strengthening efforts and support for integrated treatment literacy activities. WFP also had to further prioritise HIV and TB clients during the selection of crisis response beneficiaries, and 6,219 HIV and TB clients (12 percent of the planned number) received cash-based transfers totalling USD 101,500 for two months.

Thanks to Japan, South Africa and multilateral funding, WFP received USD 4.1 million of the required of USD 4.3 million for Strategic Outcome 2. Of that, USD 3.8 million was allocated for school meals in Neighbourhood Care Points, and the balance for the Home-Grown School Feeding (HSGF) pilot. The pilot started in the last quarter of the year after the finalisation of relevant agreements with the Government. The capacity-strengthening component under this strategic outcome was, however, under-resourced, resulting in the prioritisation of vulnerability analysis and the HGSF pilot.

WFP received a total of USD 818,006 – from Germany and in the form of multilateral funding – for Strategic Outcome 3, against a requirement of USD 16.5 million. The big funding gap meant the prioritisation of food assistance to households most in need, as identified in the National Response Plan, with WFP reaching 57 percent of those targeted. Limited funding also resulted in lower-than-planned cash-based transfer distributions.

The duration of the T-ICSP was extended from July to December. A budget revision allowed WFP to expand the scope of its operations and, with a second successive poor harvest presaging deeper food insecurity, add a strategic objective on crisis response. WFP also worked to strengthen government capacities in the areas of early warning, anticipatory action, vulnerability analysis and response planning.

Programme Performance

Strategic outcome 01

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

Needs-based plan	Implementation plan	Available resources	Expenditures
\$1,101,965	\$143,629	\$151,980	\$82,107

Given successive droughts and limited response coverage, chronic malnutrition is a growing public health concern in Eswatini. The 2019 Vulnerability Assessment and Analysis showed that the stunting rate rose to 26 percent, from 21 per cent in 2018. That increase broke a declining trend in previous years as measured by Multi-Indicator Cluster Surveys[1]. These showed stunting prevalence falling from 31 percent in 2010 to 25.5 percent in 2014.

People living with HIV (PLHIV) and/or tuberculosis (TB) are disproportionately affected by malnutrition, with some 12 percent undergoing antiretroviral therapy (ART) and about 33 percent TB treatment[2]. WFP had adopted the nutrition assessment, counselling and support (NACS) approach to improving ART adherence through the provision of in-kind food and cash-based transfers to malnourished PLHIV. However, the NACS process ended in 2018 for lack of funding. In 2019, WFP support focused on treatment literacy and the mainstreaming of nutrition education and awareness of HIV, TB and sexual and reproductive health rights (SRHR).

WFP supported the generating of evidence about the impact of nutrition assistance on clinical outcomes for PLHIV and TB clients. Together with the Joint United Nations Programme on HIV and AIDS (UNAIDS), it helped the Ministry of Health conduct a study on the relationship between nutritional support and HIV and TB treatment outcomes. This found that, among other factors, good nutrition can improve immunological outcomes. WFP presented the results during the 2019 International Conference on AIDS and STIs in Africa (ICASA) in Kigali, Rwanda.

Evidence on progress towards the third 95 of the 95:95:95 HIV treatment cascade indicated challenges arising from poor viral load suppression, poor treatment retention among PLHIV aged 20–29, a high rate of sexually transmitted infections among young women and low family planning coverage among young PLHIV. WFP worked with the Ministry of Health (the Eswatini National AIDS Programme and National TB Control Programme) and sister UN agencies—UNAIDS, the World Health Organization (WHO) and the United Nations Population Fund (UNFPA)— to develop an integrated ART/TB/SRHR/nutrition treatment literacy manual to help people make better decisions. The manual was used in trainings and campaigns to, among other things, encourage breastfeeding, improve infant and young child feeding practices and foster better dietary choices, particularly by PLHIV.

As part of its social and behaviour change communication (SBCC) strategy, WFP supported a training of trainers for 101 young people, including members of the lesbian, gay, bisexual and transgender (LGBT) community and sex workers, as well as women from the Eswatini Network of Young Positives (SNYP+). Participants from the SNYP+ in turn mobilised and sensitised eight communities, reaching 864 females and 619 males. This engagement with civil society and training of trainers improved the efficiency of WFP interventions.

WFP, through the Family Life Association of Eswatini, supported an interactive social media platform, the Tune Me site, which engages and educates more than 60,000 young people on a range of issues, including ART, TB, SBHR and nutrition. This support enabled the sharing of accurate, relevant and timely information to a key audience. An assessment of its impact was planned for 2020.

WFP gave technical assistance to mainstream nutrition across national documentation. This was important to ensure a holistic approach to the challenge of stunting and the design and implementation of response programmes. WFP provided technical inputs into an Extended National Health Sector Strategic Plan II (NHSSP II, 2019–2022) as well as to a Reproductive, Maternal, New-born, Child, Adolescent Health and Nutrition (RMNCAH&N;) Strategy.

WFP supported the integration of HIV and nutrition into the annual Eswatini Vulnerability Assessment and Analysis. This enabled the generation of evidence on vulnerability using HIV and nutrition indicators. Recent assessments show that food security outcomes are worse among PLHIV. In the year under review, WFP used HIV and nutrition variables to prioritise the inclusion of households with PLHIV and malnourished children in its crisis programme.

Given limited funding for nutrition assistance, WFP integrated the targeting of PLHIV with the cash-based transfer programme, with 6,219 PLHIV reached as a crisis response in November and December. At least partly as a result, the proportion of households registering acceptable food consumption rose from 56 percent in October to 72 percent in December.

Strategic outcome 02

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



Needs-based plan	Implementation plan	Available resources	Expenditures
\$4,371,297	\$317,981	\$4,068,931	\$2,440,699

Eswatini has the highest HIV prevalence in the world, with 26 percent of its adult population infected. Over 46 percent of the population under the age of 20[1] are classified as orphaned and vulnerable children (OVCs), with 59 percent of them so designated because of AIDS[2]. Having lost one or both parents, OVCs are the most vulnerable population group, particularly in rural areas, where some 38 percent of households have at least one orphan. Almost 6 in 10 children in Eswatini (56.5 percent) are multidimensionally poor, with limited if any access to healthcare, adequate nutrition, education, and clean water, sanitation and hygiene[3]. The multidimensional child poverty rate is more than twice as high in rural areas (65 percent) than in urban areas (23 percent).

OVCs are more likely to be abused and exploited. Eswatini has not developed an overall social assistance strategy, although the Government acknowledges the need for a framework. WFP and United Nations (UN) agencies supported its efforts to draft a Social Assistance Framework envisaging a comprehensive and consistent approach to safety nets. At present, the Government underscores its intention to ensure the food security of OVCs and their access to education through the National Food Security in Schools Framework and the Neighbourhood Care Points (NCP) Strategy. WFP supports these by providing meals to pre-primary, primary and secondary school children. In 2019, it ensured meals five days a week for 54,640 OVCs of pre-primary age (99 percent of the target) at 1,699 NCPs. NCPs are run by community volunteers.

WFP distributed 2,466 mt of food – cereals (maize meal and rice), beans and fortified vegetable oil – 57 percent of the volume planned. The shortfall was mainly due to fewer deliveries, particularly in June and October, because of logistical constraints. There were no distributions in September and October. Moreover, planning envisaged a higher number of school children under the pilot Home-Grown School Feeding (HGSF) programme over the course of the year. However, it only began in the last term of 2019 due to delays in finalising relevant agreements with the Government. In addition to meals and education, the WFP-supported schools gave children access to health care and other services. The numbers of targeted children and centres were reduced in 2019, compared with 2018, to avoid duplication with other organizations supporting the NCPs.

WFP partnered with Save the Children and the Adventist Development Relief Agency for third-party monitoring and the training of caregivers in food storage and preparation, nutrition practices, and gender and protection issues. More than 1,800 caregivers were so trained. Monitoring showed that food spoilage in the centres declined in 2019.

WFP and the Ministry of Education and Training (MoET) jointly commissioned an evaluation of the national school feeding programme that highlighted key areas for improvement: efficiency; the nutritional quality of meals; and monitoring and evaluation. WFP worked with MoET to develop an action plan to implement the recommendations.

The HGSF project was piloted in partnership with the Food and Agriculture Organization (FAO) and partly funded by the Government. WFP facilitated the establishment of an inter-ministerial committee responsible for coordinating pilot activities. It also provided training for government personnel and farmer organization members in WFP procurement processes. With FAO and Ministry of Agriculture support, 48 farmers were given guidance on how to boost their output and improve the quality of their produce. Some 330 farmers, 44 percent of them women, supplied food commodities for the pilot. It was the first time the women had participated in structured supply negotiations. The pilot encouraged women to participate in the programme. WFP planned to partner with the Women Farmers Foundation in 2020 to enable more of them access the HGSF market.

Within the framework of the HGSF pilot, WFP delivered 228.48 mt of food (maize, rice, beans, and cooking oil), 115.7 mt of it (maize and beans) sourced from smallholders. Rice served at schools was part of an in-kind contribution from Japan, while the cooking oil used was purchased elsewhere in the region. Overall, the pilot ensured the provision of healthy meals to 24,392 children in 50 primary and secondary schools. The Government committed to funding and procuring vegetables and eggs worth SZL 3.3 million (USD 224,500) for the pilot in 2020.

The HGSF programme involved capacity-strengthening activities for government personnel, cooks and teachers. WFP provided training in food management and storage and meal preparation for 100 teachers, and in partnership with FAO, in climate-smart agriculture, marketing, post-harvest loss reduction, commodity storage and warehouse management for 47 female and 41 male smallholders. The HGSF pilot is a “proof of concept” project to last two years, with overall management then to be assumed by the Government, which is to scale it up.

WFP continued to give technical assistance to government entities to strengthen food security monitoring and analysis for better informed disaster preparedness and response, as well as improved resilience and social transfer programming. Working with FAO, WFP engaged the Government in strengthening early warning systems by providing guidance on data collection, analysis and report writing. WFP also provided technical training ahead of an Integrated Context Analysis to inform the design of future resilience-building programmes. Support for the implementation of a functional food and nutrition security monitoring system slowed owing to limited partner commitment.

WFP continued to support the mainstreaming of nutrition, gender and protection analysis into food security assessments. Training sessions were organized for 42 government officials involved in the country's Vulnerability Assessment and Analysis and in Integrated Phase Classification (IPC) analysis.

WFP engaged in dialogue with the National Disaster Management Authority (NDMA), the Deputy Prime Minister's Department of Social Welfare, MoET and Tinkhundla Administration and Development authority (MTAD) on ways to make social protection programmes more shock responsive. The engagement opened the way for WFP's involvement in the country's social protection discourse.

Strategic outcome 03

Targeted food insecure households in Eswatini are able to meet their basic food requirements in times of shock

Needs-based plan	Implementation plan	Available resources	Expenditures
\$16,533,379	\$1,167,573	\$818,006	\$818,006

The 2019 Eswatini Vulnerability Assessment projected that 232,000 people, 25 percent of the rural population, would experience "crisis" or "emergency" levels of food insecurity (Integrated Phase Classification (IPC) phases 3 or 4) between October 2019 and March 2020. A national humanitarian response plan prioritised 168,600 of them for emergency food assistance. Prolonged dry spells, extremely high temperatures and erratic rainfall contributed to a 22 percent decline in crop production. So, too, did the fact that the area under cultivation declined by 23 percent [1].

The only contribution of in-kind assistance for Strategic Outcome 3 was a 330 mt donation of rice from Taiwan, which was to be available for distribution in 2020. Through the National Disaster Management Agency (NDMA), the Government requested the support of humanitarian actors for populations prioritised by its response plan. Under the Transitional Interim Country Strategic Plan (T-ICSP), WFP planned to reach 165,722 people with in-kind and cash-based transfers in 2019. This target was set prior to the mid-year release of the vulnerability analysis results and the elaboration of the Government's response plan, which prioritised 168,600 people for immediate assistance. Of the 104,000 people projected to be in IPC Phase 3 or worse, WFP proposed to support at least 90,000 (87 percent).

WFP reached 51,558 people with cash-based transfers in 7 of the 13 constituencies identified as top priority. The limited coverage – 57 percent of the top priority caseload and just 31 percent of the T-ICSP's target for the year – was due to funding constraints. Among those assisted were 952 pregnant and lactating women, 6,219 people living with HIV and 6,703 children under five years of age. Cash-based transfers assisted an additional 2,130 people with disabilities and 3,833 households hosting orphans.

WFP provided SZL 120 (USD 7.79) per person in households reached via mobile money transfers, covering 70 percent of basic monthly food needs for the months of November and December. That was 10 percent up on the amount provided during the 2016/17 response, reflecting food price inflation between the two periods [2].

Resource mobilisation efforts to address the limited funding for cash-based support yielded an additional donation from the European Civil Protection and Humanitarian Aid Operations (ECHO) at year's end, facilitating an operational scale-up in January-March 2020, the peak of the lean season.

Monitoring results indicated that the food security of recipients improved. The proportion of households reporting acceptable food consumption scores rose from 65 percent in October to 72 percent in December. They were also better able to cope with limited food for consumption.

WFP supported the development of a Zero Hunger Strategy, which used vulnerability and poverty analysis to better understand food insecurity. Findings showed that over the past ten years, some 35,400 households were identified as at risk, and a similar number as extremely poor. The underlying chronic vulnerability highlights the imperative of mobilising sufficient emergency resources.

Cross-cutting Results

Progress towards gender equality

Improved gender equality and women's empowerment among WFP-assisted population

Eswatini ranked 141 out of 162 countries in the 2018 Gender Inequality Index, with a score of 0.569 [1]. Pervasive structural inequalities inform gender disparities that disproportionately affect women and girls. The legal system affords them little protection, as underscored by their generally limited access to productive assets, agriculture value chains, education, healthcare and economic opportunity[2]. Poor access to land and a high joblessness rate—25 percent of women and 50 percent of young women are unemployed[3]—exacerbate food insecurity. Women are also disproportionately affected by HIV, with a prevalence of 35 percent among them, compared with 19 percent for men.

Despite the prominent role of women in the food system (60 percent of smallholder farmers are women), their access to and control over the benefits accruing from the production process remained limited. Women are under-represented in leadership and decision-making positions in the public and private sectors. Gender-based violence (GBV), sexual abuse and discriminatory sexual behaviour and practices affect 1 in 3 women and girls, with almost half of them reporting having been abused before the age of 18 [4].

The design and implementation of WFP's Transitional Interim Country Strategic Plan (T-ICSP) mainstreamed gender into its assessment, programme approaches and technical assistance. In the treatment and literacy behaviour change communication for medication adherence, both women and men were included in trainings on good nutrition.

Advice on the role of women in decision-making on the use of WFP cash transfers was shared during beneficiary targeting and registrations exercises, and during distributions. For the crisis response, 53 percent of those registered as recipients of the cash were women. Post-distribution monitoring in December indicated that 87 percent of those who withdrew the cash were women, as were 81 percent of the primary household decision-makers on the use of the cash.

Given the prominence of women in agriculture, the pilot Home-Grown School Feeding programme prioritised the empowerment of women by promoting their participation as food suppliers. Women constituted 43 percent of the membership of the farmer groups registered as WFP vendors, while 60 percent of the groups had women in leadership positions.

In the school feeding programmes and at Neighbourhood Care Points (NCPs), WFP promoted gender equality by encouraging equal access to education for both boys and girls. The Government's provision of free primary education enables girls and boys from poor families to be schooled. The ratio of boys:girls receiving assistance in schools and NCPs was 52:48 percent.

WFP encouraged Eswatini's Vulnerability Assessment Committee to incorporate gender into its analyses.

Protection

Affected populations are able to benefit from WFP programmes in a manner that ensures and promotes their safety, dignity and integrity

In 2019, WFP continued to promote the safety and dignity of populations assisted by its programmes. Interventions were executed in ways that protected individuals and communities, with assistance provided in a safe and dignifying manner.

The main protection issues in Eswatini are gender-based. One in three women/girls experiences some form of sexual abuse before the age of 18. WFP and cooperating partner personnel (28 people) received training in the prevention of sexual exploitation and abuse in humanitarian contexts. This helped raise awareness among field staff of appropriate conduct to enable safe, secure and dignifying assistance. Sensitisation and awareness-raising sessions allowed beneficiaries to know their rights and to report any concerns via a toll-free phone line put in place in October. WFP's complaints and feedback system did not register any protection issues from beneficiaries.

During the crisis response, mobile money was used to the extent possible to minimise risks and mitigate potentially negative effects associated with the distribution of either in-kind food or physical cash. Monitoring indicated that 98 percent of households did not experience any protection challenges during the year, 97 percent said assistance was distributed in a dignifying way, and 100 percent said they enjoyed safe access to WFP programmes.

The Neighbourhood Care Points (NCPs) supporting orphans and vulnerable children are located within 5 km of their communities, to minimise travel. Local volunteers staffing NCPs were trained in child protection, with cooperating partner monitors trained to recognise and report untoward incidents. No domestic abuse arising from WFP interventions was reported in 2019.

Accountability to affected populations

Affected populations are able to hold WFP and partners accountable for meeting their hunger needs in a manner that reflects their views and preferences



To promote accountability to affected populations, WFP routinely briefed intended food and cash assistance recipients on eligibility criteria, entitlements and project duration before and during distributions. Cooperating partner monitors tracked recipients' understanding of those matters, correcting any misperceptions. As a result, 98 percent of recipients reported having been adequately informed about project selection criteria, entitlements and the duration of assistance. The establishment of a complaints and feedback mechanism (CFM) – two toll-free hotlines – further enhanced the ability of recipients to hold WFP and its partners accountable.

WFP provided information and guidance about its CFMs. Feedback received was processed, assessed and addressed. Most of the concerns raised by beneficiaries related to alleged non-receipt of all or part of entitlements, which was sometimes due to household member registration errors and sometimes to mobile money accounts being rendered inactive by the financial service provider. Complainants received detailed feedback via call-backs from CFM agents. Communities were heavily involved in the identification and selection of vulnerable households for cash-based transfers. Information on Protection from Sexual Exploitation and Abuse (PSEA) was shared with partners and communities to raise awareness and establish community-based reporting systems.

At Neighbourhood Care Points (NPCs), field monitors routinely advised caregivers on accountability requirements, although their high turnover remained a challenge in that regard. Any problems were relayed by the monitors in monthly reports, and could be raised by cooperating partners for requisite action during their regular meetings with WFP. WFP also consulted community leaders through focus group discussions about areas of its programme that might warrant improvement.

Environment

Targeted communities benefit from WFP programmes in a manner that does not harm the environment

Eswatini is particularly vulnerable to climate change, yet less likely than most countries to be able to leverage private or public sector investment for adaptive actions, according to the 2017 Notre Dame-Global Adaptation Index[1].

The Integrated Context Analysis (ICA) highlighted that the country's high levels of chronic food insecurity are interlinked with exposure to climatic shock and environmental degradation.

Food insecurity is highest in lowland areas - particularly in the Lubombo and Shiselweni regions – where rainfall is very limited and land degradation is advanced. They are highly vulnerable to climate shocks, and even minor shocks can result in households becoming food insecure and adopting high-cost negative coping strategies.

Summary

Notes to Tables:

Beneficiaries by Residence Status: Funding constraints in various activities resulted in reaching significantly less beneficiaries than planned.

Total Food and CBT: Funding constraints in various activities resulted in distributing significantly less food and cash than planned.

Context and operations

[1] United Nations Development Programme. Human Development Indices and Indicators. 2018 Statistical Update. http://hdr.undp.org/sites/default/files/2018_human_development_statistical_update.pdf.

[2] Eswatini Central Statistical Office. 2018. 2016/2017 Eswatini Household Income and Expenditure Survey (EHIES): Key findings report.

[3] Joint United Nations Programme on HIV and AIDS. 2018. Eswatini HIV Estimates and Projections Report

[4] Ibid footnote 2

[5] Data from reports of the Swaziland vulnerability assessment committee from the period 2009–2018 and from the 2017 household income and expenditure survey. http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/Eswatini_VAC_Annual_Assessment_Report2018.pdf.

[6] Eswatini vulnerability assessment committee. Annual Vulnerability Assessment and Analysis Report 2018. http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/Eswatini_VAC_Annual_Assessment_Report2018.pdf.

[7] Eswatini (Swaziland). (2020). Retrieved from <https://www.globalhungerindex.org/eswatini.html>

[8] Report developed with support of the UN in Eswatini

[9] Ibid.

[10] Eswatini Economic Outlook. (2020). Retrieved from <https://www.afdb.org/en/countries/southern-africa/eswatini/eswatini-economic-outlook>

Strategic outcome 01

[1] Eswatini vulnerability assessment committee. Annual Vulnerability Assessment and Analysis Report 2018. http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/Eswatini_VAC_Annual_Assessment_Report2018.pdf.

[2] Multiple Indicator Cluster Survey Reports 2010 and 2014

[3] Malnutrition Prevalence Survey Report, 2014

Notes to Tables:

Activity 01, Output A, A.1 and A.2: No funding was secured in 2019 for either in-kind food or cash-based transfers. However, some resources were received for capacity-strengthening activities.

Activity 01, Output A, A.1 and A.3: No funding was secured in 2019 for either in-kind food or cash-based transfers. However, some resources were received for capacity-strengthening activities.

Activity 02, Output C, C.4: The approach of engaging with the civil society, as well as the cascaded training through trainer of trainers, improved the efficiency of WFP intervention, resulting in reaching more participants than planned for SBCC.

Activity 02, Output E, E.4: The approach of engaging with the civil society, as well as the cascaded training through trainer of trainers, improved the efficiency of WFP intervention, resulting in reaching more participants than planned for SBCC.

Strategic outcome 02

- [1] Eswatini Central Statistical Office. 2017 Population and Housing Census, Preliminary Results. (Not available online.)
- [2] Joint United Nations Programme on HIV and AIDS. 2018. Eswatini HIV Estimates and Projections Report.
- [3] Multiple Overlapping Deprivation Analysis, 2018.

Notes to Tables:

Activity 04, Output A, A.1 and A.2: Implementation of the school feeding programmes started late in the term due to delays in finalising agreements. Lesser school children reached was due to reduction in targets and centres in 2019 to avoid duplication of assistance with other organizations supporting the NCPs. The lower tonnage was mainly due to reduction in deliveries as a result of logistical constraints, with fewer centres receiving food in June and October. Additionally, the planning of tonnage included a higher number of school children under the pilot Home-Grown School Feeding (HGSF) programme for a year.

Strategic outcome 03

- [1] Eswatini vulnerability assessment committee. Annual Vulnerability Assessment and Analysis Report 2018. http://www.ipcinfo.org/fileadmin/user_upload/ipcinfo/docs/Eswatini_VAC_Annual_Assessment_Report2018.pdf.
- [2] Transfer Value Determination Paper 2019

Notes to Tables:

Activity 06, Output A, A.1 and A.2: The low coverage was due to funding constraints. The significant funding gap resulted in a prioritisation of food assistance to the most in need households.

Activity 06, Output A, A.1 and A.3: Delayed confirmation of resources resulted in lower-than-planned achievement for cash-based transfers. Additionally, received resources will be utilised to scale up support at the peak of the lean season in January to March 2020.

Progress towards gender equality


- [1] UNDP Gender Inequality index 2018. Eswatini.
- [2] Vulnerability Assessment and Analysis Report 2018, Eswatini VAC, July 2018.
- [3] ILO STAT accessed on 18 March 2019.
- [4] <http://www.swagaa.org.sz/gender-based-violence/>

Environment

- [1] Rankings // Notre Dame Global Adaptation Initiative // University of Notre Dame. (2020). Retrieved from <https://gain.nd.edu/our-work/country-index/rankings/>

Figures and Indicators

WFP contribution to SDGs

 SDG 2: End hunger, achieve food security and improved nutrition and promote sustainable agriculture										
WFP Strategic Goal 1: Support countries to achieve zero hunger					WFP Contribution (by WFP, or by governments or partners with WFP Support)					
SDG Indicator	National Results			SDG-related indicator		Direct			Indirect	
		Female	Male			Overall		Female		Male
Prevalence of undernourishment	%			20.6	Number of people reached (by WFP, or by governments or partners with WFP support) in the context of emergency and protracted crisis response	Number	26,528	25,030	51,558	
					Number of people reached (by WFP, or by governments or partners with WFP support) to improve their food security	Number	66,601	63,989	130,590	
Prevalence of moderate or severe food insecurity in the population, based on the Food Insecurity Experience Scale (FIES)	%			63.5	Number of people reached (by WFP, or by governments or partners with WFP support) in the context of emergency and protracted crisis response	Number	26,528	25,030	51,558	
					Number of people reached (by WFP, or by governments or partners with WFP support) to improve their food security	Number	66,601	63,989	130,590	
Prevalence of malnutrition among children under 5 years of age, by type (wasting and overweight)	% overw eight	15.2	12.6	13.9	Number of people reached (by WFP, or by governments or partners with WFP support) with interventions to prevent and treat malnutrition (micronutrient programmes)	Number	32,025	30,657	62,682	
					Number of people reached (by WFP, or by governments or partners with WFP support) with interventions to prevent and treat malnutrition (moderate acute malnutrition)	Number	32,025	30,657	62,682	
Prevalence of stunting among children under 5 years of age	%	22	30.6	26.3	Number of people reached (by WFP, or by governments or partners with WFP support) with stunting prevention programmes	Number	28,150	26,490	54,640	

Prevalence of malnutrition among children under 5 years of age, by type (wasting and overweight)	% wasting	1.7	1.3	1.5	Number of people reached (by WFP, or by governments or partners with WFP support) with interventions to prevent and treat malnutrition (moderate acute malnutrition)	Number	32,025	30,657	62,682	
					Number of people reached (by WFP, or by governments or partners with WFP support) with interventions to prevent and treat malnutrition (micronutrient programmes)	Number	32,025	30,657	62,682	
Average income of small-scale food producers, by sex and indigenous status	US\$			130	Number of small-scale food producers reached (by WFP, or by governments or partners with WFP support) with interventions that contribute to improved incomes	Number	145	186	331	
Proportion of agricultural area under productive and sustainable agriculture	%				Number of people reached (by WFP, or by governments or partners with WFP support) with interventions that aim to ensure productive and sustainable food systems	Number	226	155	381	



SDG 17: Strengthen the means of implementation and revitalize the global partnership for sustainable development

WFP Strategic Goal 2: Partner to support implementation of the SDGs		WFP Contribution (by WFP, or by governments or partners with WFP Support)			
SDG Indicator	National Results	SDG-related indicator		Direct	Indirect
	Overall			Overall	
Number of countries reporting progress in multi-stakeholder development effectiveness monitoring frameworks that support the achievement of the sustainable development goals	Number	Number of partners participating in multi-stakeholder partnerships (including common services and coordination platforms where WFP plays a leading or coordinating role)	Number	14	
Dollar value of financial and technical assistance (including through North-South, South-South and triangular cooperation) committed to developing countries	US\$	Dollar value (within WFP portfolio) of technical assistance and country capacity strengthening interventions (including facilitation of South-South and triangular cooperation)	US\$	358,020	

Beneficiaries by Age Group

Beneficiary Category	Gender	Planned	Actual	% Actual vs. Planned
Total Beneficiaries	male	119,877	64,133	53%
	female	124,967	66,457	53%
	total	244,844	130,590	53%
By Age Group				
0-23 months	male	3,876	1,237	32%
	female	3,863	1,232	32%
	total	7,739	2,469	32%
24-59 months	male	31,801	28,680	90%
	female	33,365	30,406	91%
	total	65,166	59,086	91%
5-11 years	male	18,820	9,097	48%
	female	18,559	8,914	48%
	total	37,379	18,011	48%
12-17 years	male	18,224	8,829	48%
	female	17,911	8,655	48%
	total	36,135	17,484	48%
18-59 years	male	42,890	14,929	35%
	female	44,885	15,213	34%
	total	87,775	30,142	34%
60+ years	male	4,266	1,361	32%
	female	6,384	2,037	32%
	total	10,650	3,398	32%

Beneficiaries by Residence Status

Residence Status	Planned	Actual	% Actual vs. Planned
Resident	244,844	130,590	53%
Refugee	0	0	-
Returnee	0	0	-
IDP	0	0	-

Annual Food Transfer

Commodities	Planned Distribution (mt)	Actual Distribution (mt)	% Actual vs. Planned
Everyone has access to food			
Strategic Outcome: Strategic Outcome 03			
Maize	6,629	0	0%
Vegetable Oil	597	0	0%

Commodities	Planned Distribution (mt)	Actual Distribution (mt)	% Actual vs. Planned
Beans	1,657	0	0%
No one suffers from malnutrition			
Strategic Outcome: Strategic Outcome 01			
Maize	0	0	0%
Corn Soya Blend	115	0	0%
Vegetable Oil	0	0	0%
Beans	0	0	0%
Countries have strengthened capacity to implement the SDGs			
Strategic Outcome: Strategic Outcome 02			
Maize	959	185	19%
Maize Meal	2,178	545	25%
Rice	479	1,135	237%
Vegetable Oil	181	99	55%
Beans	964	502	52%

Annual Cash Based Transfer and Commodity Voucher

Modality	Planned Distribution (CBT)	Actual Distribution (CBT)	% Actual vs. Planned
Everyone has access to food			
Cash	10,351,568	696,384	7%
No one suffers from malnutrition			
Cash	518,055	0	0%

Strategic Outcome and Output Results

Strategic Outcome 01		Children under five, ART, TB and PMTCT clients in Eswatini have improved nutritional status in line with national targets by 2022							- Root Causes		
Activity 01	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	Beneficiary Group	Activity Tag		Planned	Actual					
Output A	Households of malnourished ART, TB-DOTS and PMTCT clients receive cash based transfers in order to meet their basic food and nutrition requirements										
A.1	Beneficiaries receiving food transfers	All	HIV/TB Care&treatment;	Female Male Total	0 0 0						
A.1	Beneficiaries receiving cash-based transfers	All	HIV/TB Care&treatment;	Female Male Total	5,939 5,605 11,544						
A.2	Food transfers			MT	115	0					
A.3	Cash-based transfers			US\$	518,055						
Activity 02	Provide capacity strengthening and technical assistance to government entities responsible for the coordination and provision of nutrition services	Beneficiary Group	Activity Tag		Planned	Actual					
Output C, E, E*	At risk populations, including children under 5, TB and HIV clients benefit from the government's improved ability to coordinate, integrate and implement nutrition services and interventions in order to address nutritional requirements and enhance access to health services										
C.3	Number of technical support activities provided										
	Number of technical assistance activities provided		Institutional capacity strengthening activities	unit	4	2					
C.4*	Number of people engaged in capacity strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)										
	Number of government/national partner staff receiving technical assistance and training		Institutional capacity strengthening activities	individual	24	101					
E*.4	Number of people reached through interpersonal SBCC approaches										
	Number of people reached through interpersonal SBCC approaches (male)		Institutional capacity strengthening activities	Number	494	619					

	Number of people reached through interpersonal SBCC approaches (female)		Institutional capacity strengthening activities	Number	624	864		
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Strategic Outcome 02		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		- Nutrition Sensitive - Resilience Building				
Activity 03	Provide capacity strengthening and technical assistance to government entities involved in social protection	Beneficiary Group	Activity Tag		Planned	Actual		
Output C	Food-insecure people benefit from increased capacity of government to implement well-targeted, evidence based, nutrition-sensitive and expandable safety nets in order to meet their basic food requirements							
Output C, E, E*	School children benefit from improved government capacity to design and implement a sustainable, nutrition-sensitive, shock responsive national school meals programme that helps meet their basic food and nutrition needs and contributes to improved access to education							
C.1	Number of people trained							
	Number of direct beneficiaries receiving Capacity Strengthening transfers (Female)		Institutional capacity strengthening activities	Number	300	226		
	Number of direct beneficiaries receiving Capacity Strengthening transfers (Male)		Institutional capacity strengthening activities	Number	300	155		
C.4*	Number of people engaged in capacity strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)							
	Number of government/national partner staff receiving technical assistance and training		Institutional capacity strengthening activities	individual	5	68		
C.5*	Number of capacity strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)							
	Number of training sessions/workshop organized		Institutional capacity strengthening activities	training session	2	4		
E*.4	Number of people reached through interpersonal SBCC approaches							
	Number of people reached through interpersonal SBCC approaches (female)		Institutional capacity strengthening activities	Number	1,494	2,965		
	Number of people reached through interpersonal SBCC approaches (male)		Institutional capacity strengthening activities	Number	166	309		

Activity 04	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	Beneficiary Group	Activity Tag		Planned	Actual		
Output A	Targeted orphans and vulnerable children receive adequate and sufficient food in order to meet their basic food and nutrition needs and access quality early childhood development and pre-primary education							
Output N*	Targeted primary and secondary school children receive adequate and sufficient food in order to meet their basic food and nutrition needs and access quality education							
A.1	Beneficiaries receiving food transfers	All	School feeding (on-site)	Female Male Total	17,543 18,777 36,320	11,780 12,612 24,392		
		Children (pre-primary)	School feeding (on-site)	Female Male Total	22,667 21,333 44,000	28,150 26,490 54,640		
		Students (primary schools)	School feeding (on-site)	Female Male Total	5,668 5,332 11,000			
A.2	Food transfers			MT	4,761	2,466		
A.6	Number of institutional sites assisted							
	Number of existing schools assisted with infrastructure rehabilitation or construction works		School feeding (on-site)	school	1,660	1,699		
A.8	Number of rations provided							
	Number of rations provided		School feeding (on-site)	ration	5	5		
N*.6	Number of children covered by Home-Grown School Feeding (HGSF)							
	Number of children covered by Home-Grown School Feeding (HGSF)		School feeding (on-site)	Number	24,392	24,392		
Activity 05	Provide capacity strengthening and technical assistance to government entities that manage and use food security monitoring and analysis	Beneficiary Group	Activity Tag		Planned	Actual		
Output C	Food insecure people benefit from government's increased capacity to manage and utilize food security monitoring and analysis in zero hunger programming in order to meet basic needs throughout the year and strengthen resilience to shocks							
C.4*	Number of people engaged in capacity strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)							
	Number of government/national partner staff receiving technical assistance and training		Climate adaptation and risk management activities	individual	58	148		
C.5*	Number of capacity strengthening initiatives facilitated by WFP to enhance national food security and nutrition stakeholder capacities (new)							

	Number of training sessions/workshop organized		Climate adaptation and risk management activities	training session	2	5		
Outcome results				Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Children in the school (Both Primary and Secondary); Eswatini; Food								
Number of people assisted by WFP, integrated into national social protection systems as a result of WFP capacity strengthening (new)								
	Act 04: 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	School feeding (on-site)	Overall	24392	=36320	=36320	24392	
Government staff; Eswatini; Capacity Strengthening								
Number of national food security and nutrition policies, programmes and system components enhanced as a result of WFP capacity strengthening (new)								
	Act 05: Provide capacity strengthening and technical assistance to government entities that manage and use food security monitoring and analysis	Institutional capacity strengthening activities	Overall	0	=2	=2	2	
Orphaned Vulnerable Children in the NCPs; Eswatini; Food								
Number of people assisted by WFP, integrated into national social protection systems as a result of WFP capacity strengthening (new)								
	Act 04: 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	School feeding (on-site)	Overall	54280	=55000	=55000	54640	

Strategic Outcome 03	Targeted food insecure households in Eswatini are able to meet their basic food requirements in times of shock	- Crisis Response						
Activity 06	Provide food and cash-based transfers to targeted food insecure populations affected by shocks	Beneficiary Group	Activity Tag		Planned	Actual		
Output A	Food insecure populations targeted by WFP receive sufficient food and cash-based transfers to enable them to meet their basic food requirements							
A.1	Beneficiaries receiving food transfers	All	General Distribution	Female Male Total	28,422 26,819 55,241			
A.1	Beneficiaries receiving cash-based transfers	All	General Distribution	Female Male Total	56,846 53,636 110,482	26,528 25,030 51,558		
A.2	Food transfers			MT	8,883	0		
A.3	Cash-based transfers			US\$	10,351,568	696,384		
Outcome results				Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value

Food Consumption Score

Percentage of households with Acceptable Food Consumption Score	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	63	≥77	≥77	70
			Male	67.60	≥77	≥77	74
			Overall	65.20	≥77	≥77	72
Percentage of households with Borderline Food Consumption Score	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	24	≤20	≤20	19.45
			Male	20.70	≤20	≤20	16.70
			Overall	22.40	≤20	≤20	18.10
Percentage of households with Poor Food Consumption Score	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	13	≤3	≤3	10.50
			Male	11.70	≤3	≤3	9.45
			Overall	12.40	≤3	≤3	10
Consumption-based Coping Strategy Index (Average)							
	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	17.82	≤10	≤10	9.39
			Male	16.26	≤10	≤10	8.55
			Overall	17.08	≤10	≤10	9

Cross-cutting Indicators

Affected populations are able to benefit from WFP programmes in a manner that ensures and promotes their safety, dignity and integrity								
Proportion of targeted people accessing assistance without protection challenges								
Target group, Location, Modalities	Activity Number	Activity Tag	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Resident (in Lubombo and Hhohho); Eswatini; Cash	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	0	=100	=100	100	
			Male	0	=100	=100	97	
			Overall	0	=100	=100	98	
Proportion of targeted people having unhindered access to WFP programmes (new)								
Target group, Location, Modalities	Activity Number	Activity Tag	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Resident (in Lubombo and Hhohho); Eswatini; Cash	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	0	=100	=100	100	
			Male	0	=100	=100	100	
			Overall	0	=100	=100	100	
Proportion of targeted people receiving assistance without safety challenges (new)								
Target group, Location, Modalities	Activity Number	Activity Tag	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Resident (in Lubombo and Hhohho); Eswatini; Cash	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	0	≥90	≥90	100	
			Male	0	≥90	≥90	100	
			Overall	0	≥90	≥90	100	
Proportion of targeted people who report that WFP programmes are dignified (new)								
Target group, Location, Modalities	Activity Number	Activity Tag	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Resident (in Lubombo and Hhohho); Eswatini; Cash	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	0	≥90	≥90	94.70	
			Male	0	≥90	≥90	100	
			Overall	0	≥90	≥90	97	

Improved gender equality and women's empowerment among WFP-assisted population									
Proportion of households where women, men, or both women and men make decisions on the use of food/cash/vouchers, disaggregated by transfer modality									
Target group, Location, Modalities	Activity Number	Activity Tag	Category	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value

Resident (in Lubombo and Hhohho); Eswatini; Cash	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Decisions made by women	Overall	44	≥60	≥60	81
			Decisions made by men	Overall	30	≤30	≤30	6
			Decisions jointly made by women and men	Overall	26	≥90	≥90	13

Type of transfer (food, cash, voucher, no compensation) received by participants in WFP activities, disaggregated by sex and type of activity

Target group, Location, Modalities	Activity Number	Activity Tag	Category	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Resident (in Lubombo and Hhohho); Eswatini; Cash	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution		Female	100	≥100	≥100	100	
				Male	100	≥100	≥100	100	
				Overall	100	≥100	≥100	100	

Affected populations are able to hold WFP and partners accountable for meeting their hunger needs in a manner that reflects their views and preferences

Proportion of assisted people informed about the programme (who is included, what people will receive, length of assistance)

Target group, Location, Modalities	Activity Number	Activity Tag	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Resident (in Lubombo and Hhohho); Eswatini; Cash	Act 06: Provide food and cash-based transfers to targeted food insecure populations affected by shocks	General Distribution	Female	90	=100	=100	96	
			Male	87.70	=100	=100	100	
			Overall	88.90	=100	=100	98	

Proportion of project activities for which beneficiary feedback is documented, analysed and integrated into programme improvements

Target group, Location, Modalities	Activity Number	Activity Tag	Female/Male/Overall	Baseline	End-CSP Target	2019 Target	2019 Follow-up value	2018 Follow-up value
Resident (in Lubombo and Hhohho); Eswatini; Cash			Overall	0	=100	=100	100	

World Food Programme

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Smallholder farmer groups in Lubombo region supplied beans for Home-Grown School Feeding.

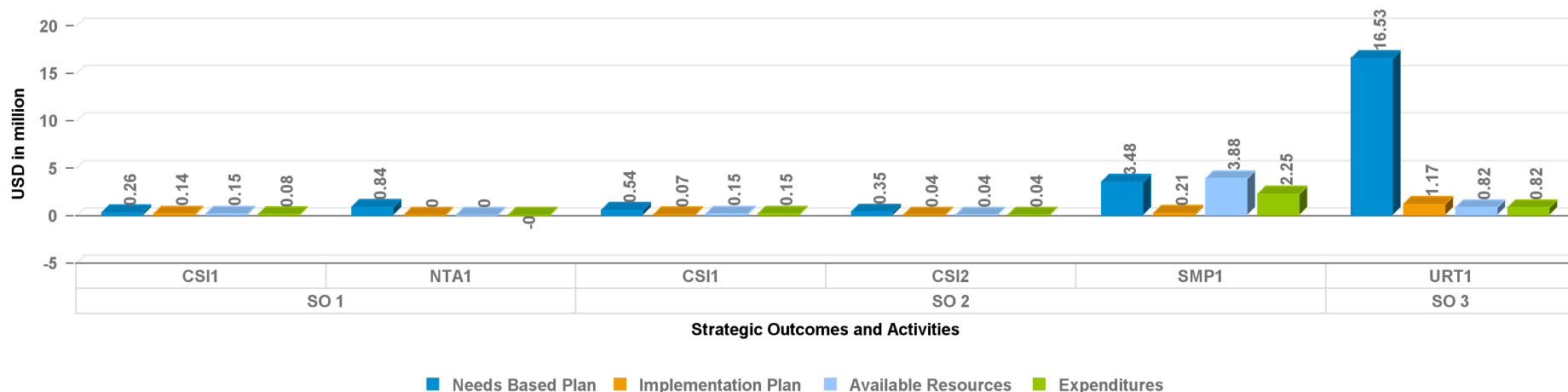
<https://www.wfp.org/countries/eswatini>

Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Annual Financial Overview for the period 1 January to 31 December 2019 (Amount in USD)

Annual CPB Overview



Code	Strategic Outcome
SO 1	Children under five, ART, TB and PMTCT clients in Eswatini have improved nutritional status in line with national targets by 2022
SO 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
SO 3	Targeted food insecure households in Eswatini are able to meet their basic food requirements in times of shock
Code	Country Activity Long Description
CSI1	Provide capacity strengthening and technical assistance to government entities involved in social protection
CSI1	Provide capacity strengthening and technical assistance to government entities responsible for the coordination and provision of nutrition services
CSI2	Provide capacity strengthening and technical assistance to government entities that manage and use food security monitoring and analysis
NTA1	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
SMP1	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
URT1	Provide food and cash-based transfers to targeted food insecure populations affected by shocks

Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Annual Financial Overview for the period 1 January to 31 December 2019 (Amount in USD)

Strategic Result	Strategic Outcome	Activity	Needs Based Plan	Implementation Plan	Available Resources	Expenditures
1	Targeted food insecure households in Eswatini are able to meet their basic food requirements in times of shock	Provide food and cash-based transfers to targeted food insecure populations affected by shocks	16,533,379	1,167,573	818,006	818,006
Subtotal Strategic Result 1. Everyone has access to food (SDG Target 2.1)			16,533,379	1,167,573	818,006	818,006
2	Children under five, ART, TB and PMTCT clients in Eswatini have improved nutritional status in line with national targets by 2022	Provide capacity strengthening and technical assistance to government entities responsible for the coordination and provision of nutrition services	263,815	143,629	151,980	82,201
		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	838,150	0	0	-94
Subtotal Strategic Result 2. No one suffers from malnutrition (SDG Target 2.2)			1,101,965	143,629	151,980	82,107

Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Annual Financial Overview for the period 1 January to 31 December 2019 (Amount in USD)

Strategic Result	Strategic Outcome	Activity	Needs Based Plan	Implementation Plan	Available Resources	Expenditures
5	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	Provide capacity strengthening and technical assistance to government entities involved in social protection	540,354	67,655	152,441	148,202
		Provide capacity strengthening and technical assistance to government entities that manage and use food security monitoring and analysis	346,981	41,155	40,235	39,798
		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	3,483,962	209,171	3,876,255	2,252,699
Subtotal Strategic Result 5. Countries have strengthened capacity to implement the SDGs (SDG Target 17.9)			4,371,297	317,980	4,068,930	2,440,698
		Non Activity Specific	0	0	286,802	0
Subtotal Strategic Result			0	0	286,802	0
Total Direct Operational Cost			22,006,640	1,629,182	5,325,718	3,340,811
Direct Support Cost (DSC)			699,442	330,425	527,875	484,368
Total Direct Costs			22,706,082	1,959,607	5,853,593	3,825,180
Indirect Support Cost (ISC)			1,475,895	127,374	65,724	65,724

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Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Annual Financial Overview for the period 1 January to 31 December 2019 (Amount in USD)

Strategic Result	Strategic Outcome	Activity	Needs Based Plan	Implementation Plan	Available Resources	Expenditures
Grand Total			24,181,978	2,086,982	5,919,317	3,890,904



Brian Ah Poe
Chief
Contribution Accounting and Donor Financial Reporting Branch

Columns Definition

Needs Based Plan

Latest annual approved version of operational needs as of December of the reporting year. WFP's needs-based plans constitute an appeal for resources to implement operations which are designed based on needs assessments undertaken in collaboration with government counterparts and partners

Implementation Plan

Implementation Plan as of January of the reporting period which represents original operational prioritized needs taking into account funding forecasts of available resources and operational challenges

Available Resources

Unspent Balance of Resources carried forward, Allocated contribution in the current year, Advances and Other resources in the current year. It excludes contributions that are stipulated by donor for use in future years

Expenditures

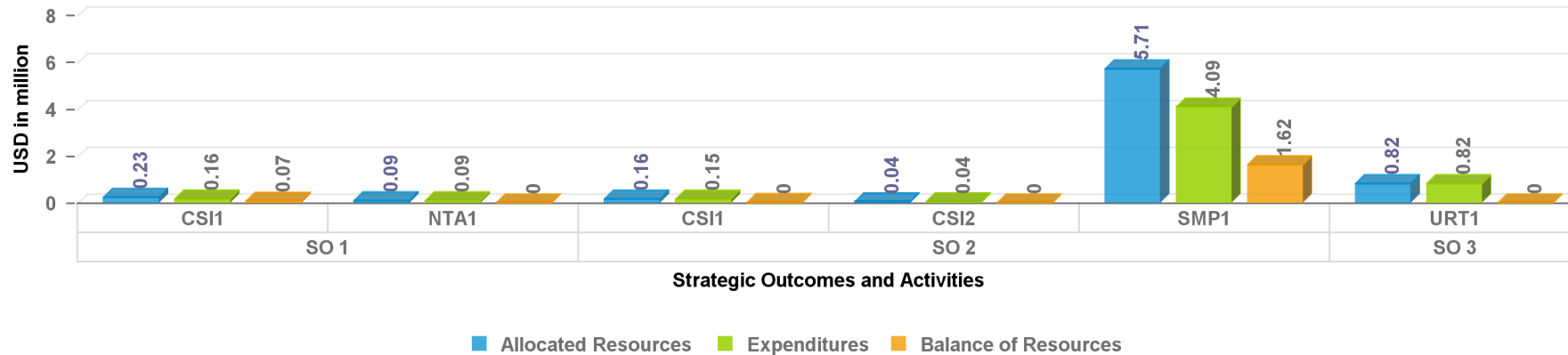
Monetary value of goods and services received and recorded within the reporting year

Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Cumulative Financial Overview as at 31 December 2019 (Amount in USD)

Cumulative CPB Overview



Code	Strategic Outcome
SO 1	Children under five, ART, TB and PMTCT clients in Eswatini have improved nutritional status in line with national targets by 2022
SO 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
SO 3	Targeted food insecure households in Eswatini are able to meet their basic food requirements in times of shock

Code	Country Activity - Long Description
CSI1	Provide capacity strengthening and technical assistance to government entities involved in social protection
CSI1	Provide capacity strengthening and technical assistance to government entities responsible for the coordination and provision of nutrition services
CSI2	Provide capacity strengthening and technical assistance to government entities that manage and use food security monitoring and analysis
NTA1	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
SMP1	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
URT1	Provide food and cash-based transfers to targeted food insecure populations affected by shocks

Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Cumulative Financial Overview as at 31 December 2019 (Amount in USD)

Strategic Result	Strategic Outcome	Activity	Needs Based Plan	Allocated Contributions	Advance and Allocation	Allocated Resources	Expenditures	Balance of Resources
1	Targeted food insecure households in Eswatini are able to meet their basic food requirements in times of shock	Provide food and cash-based transfers to targeted food insecure populations affected by shocks	16,533,379	620,880	197,126	818,006	818,006	0
Subtotal Strategic Result 1. Everyone has access to food (SDG Target 2.1)			16,533,379	620,880	197,126	818,006	818,006	0
2	Children under five, ART, TB and PMTCT clients in Eswatini have improved nutritional status in line with national targets by 2022	Provide capacity strengthening and technical assistance to government entities responsible for the coordination and provision of nutrition services	644,507	232,157	0	232,157	162,378	69,779
		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	1,980,694	86,616	0	86,616	86,522	94
Subtotal Strategic Result 2. No one suffers from malnutrition (SDG Target 2.2)			2,625,201	318,773	0	318,773	248,901	69,873

Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Cumulative Financial Overview as at 31 December 2019 (Amount in USD)

Strategic Result	Strategic Outcome	Activity	Needs Based Plan	Allocated Contributions	Advance and Allocation	Allocated Resources	Expenditures	Balance of Resources
5	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	Provide capacity strengthening and technical assistance to government entities involved in social protection	984,536	158,055	0	158,055	153,816	4,240
		Provide capacity strengthening and technical assistance to government entities that manage and use food security monitoring and analysis	570,922	42,263	0	42,263	41,827	437
		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	5,594,194	5,709,966	0	5,709,966	4,086,410	1,623,556
Subtotal Strategic Result 5. Countries have strengthened capacity to implement the SDGs (SDG Target 17.9)			7,149,652	5,910,284	0	5,910,284	4,282,052	1,628,232
		Non Activity Specific	0	286,802	0	286,802	0	286,802
Subtotal Strategic Result			0	286,802	0	286,802	0	286,802

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Annual Country Report

Eswatini Country Portfolio Budget 2019 (2018-2019)

Cumulative Financial Overview as at 31 December 2019 (Amount in USD)

Strategic Result	Strategic Outcome	Activity	Needs Based Plan	Allocated Contributions	Advance and Allocation	Allocated Resources	Expenditures	Balance of Resources
			26,308,232	7,136,740	197,126	7,333,866	5,348,959	1,984,907
			1,160,589	869,955	0	869,955	826,448	43,506
			27,468,821	8,006,695	197,126	8,203,821	6,175,407	2,028,414
			1,785,473	473,095		473,095	473,095	0
			29,254,294	8,479,790	197,126	8,676,916	6,648,502	2,028,414

This donor financial report is interim



Brian Ah Poe
Chief

Contribution Accounting and Donor Financial Reporting Branch

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Columns Definition

Needs Based Plan

Latest approved version of operational needs. WFP's needs-based plans constitute an appeal for resources to implement operations which are designed based on needs assessments undertaken in collaboration with government counterparts and partners

Allocated Contributions

Allocated contributions include confirmed contributions with exchange rate variations, multilateral contributions, miscellaneous income, resource transferred, cost recovery and other financial adjustments (e.g. refinancing). It excludes internal advance and allocation and contributions that are stipulated by donor for use in future years.

Advance and allocation

Internal advanced/allocated resources but not repaid. This includes different types of internal advance (Internal Project Lending or Macro-advance Financing) and allocation (Immediate Response Account)

Allocated Resources

Sum of Allocated Contributions, Advance and Allocation

Expenditures

Cumulative monetary value of goods and services received and recorded within the reporting period

Balance of Resources

Allocated Resources minus Expenditures