

COMMENTS ON THE UNFPA DRAFT COUNTRY PROGRAMME DOCUMENT FOR ESWATINI

First regular session 2021

Comments by Sweden	UNFPA country/regional office response
<p>The ‘Rights’ in SRHR is completely missing in outcome 1. Perhaps this is a sensitive issue in the country, however, we hope that UNFPA has plans to address this anyway. What is interesting is that sexual and reproductive rights are mentioned in outcome 2 that is focusing on Adolescents. The question would then be why not for outcome 1?</p>	<p>We thank the Government of Sweden for providing these strategic comments. The ‘Rights’ in SRHR are recognized and important in the country, and are articulated in the key strategic interventions for outcome 1. Section II, component A, paragraph 19, notes that <i>the programme will focus on strengthening institutional capacity to deliver equitable and quality integrated sexual and reproductive health and rights information and services.</i></p> <p>Other interventions in section A, paragraph 20, also emphasize ‘<i>social accountability to promote increased health seeking behaviour among women and young people for sexual and reproductive health and rights.</i>’ The overall programme will be delivered through a human rights lens.</p>
<p>There are several references to the fact that the outcomes in the CPD are in line with the UNSD Cooperation Framework, but no mention to the CPD alignment to the national development and health priorities of Eswatini. To what extent is it aligned?</p>	<p>The country office confirms that the new country programme is aligned to the National Development Strategy 2013-2022 (refer to line 1 of paragraph 11, and the Results and Resources Framework). The National Vision articulates that by 2022, the Kingdom of Eswatini will be in the top 10 per cent of the human development group of countries, grounded in sustainable development, social justice and political stability. Underlying the National Vision is the focus on poverty eradication, employment creation, gender equity, social integration and environmental protection, which are areas that the UN system will collectively support through the implementation of the UNSDCF, and to which the UNFPA country programme will contribute.</p>
<p>There is a lot of capacity building throughout the different output areas (that are the same as the outcomes, not sure if that is a typo), however, it is not clear whose capacity will be built and by whom. Does UNFPA have the necessary capacity?</p>	<p>UNFPA has expertise located in the regional office and HQ that will supplement the country office capacity to provide high-quality, integrated information and services for family planning, comprehensive maternal health, sexually transmitted infections and HIV, and combatting sexual and gender-based violence (SGBV) that are responsive to emergencies and fragile contexts.</p> <p>The capacity building efforts will target both governmental and non-governmental institutions, and will be delivered by the UNFPA country</p>

	office in collaboration with various units across the organization, including the regional office, headquarters as well as other UN agencies.
It is also not very clear to what extent UNFPA is going to work through the public sector as opposed to the implementing partners that are also mentioned in the document.	UNFPA partners with the public sector and non-government actors to ensure effective delivery of integrated SRHR services and information in the country. The new country programme is coordinated by the Ministry of Economic Planning and Development, and will be implemented by public sector entities and non-governmental organizations. The Ministry of Health is the lead agency for Outcome 1, which covers mainly SRHR interventions, while Outcome 2, which is mainly youth and adolescent interventions, is co-led by the Ministry of Sports, Culture and Youth Affairs, the Ministry of Education and the Ministry of Health. Outcome 3 is led by the Deputy Prime Minister’s Office, and focuses on gender equality and women empowerment. Outcome 4, focusing on data and population dynamics, is led by the Ministry of Economic Planning and Development through its National Population Unit.
The results framework alludes to working with other UN organizations but not very clear in the narrative.	Partnership with United Nations agencies is essential in delivering the country programme, and this is mentioned in section 2 (priorities and partnerships) paragraph 13. The Results and Resources Framework also explicitly identifies the UN agencies with which UNFPA will collaborate, along with the Government, civil society and other key partners to deliver the programme results. In the new country programme, UNFPA will continue to collaborate with WHO, UNICEF and UNAIDS on the SRH/HIV integration programme (2gether 4 SRHR) geared towards reducing the unmet need for family planning, improving access to integrated SRHR/HIV and sexual and gender-based violence (SGBV) services, increasing knowledge of SRHR/HIV and SGBV, preventing new HIV infections and ensuring initiation on treatment for those living with HIV, and with UN-Women on systems strengthening for gender-based violence data management and response.
In Output 2 we miss: a. the ‘informal’ or out of school reach. Most of the activities will target in school ‘formal’ as is stated in the CPD; b. The planned involvement of the communities, parents/caregivers and other sectors that are relevant for	The interventions in the new country programme will target both in-school and out-of-school young people. Section II, paragraph 24 highlights interventions that will strengthen <i>integration of gender equality, bodily autonomy, agency, non-violent masculinities and resilience building into life skills curriculum for in-and-out of school adolescents and youth and young</i>

<p>Adolescents e.g. Gender, sports, education (could be more or different). There is a list of different sectors in the results framework but unclear the extent of their involvement and funds allocated do not indicate the possibility of meaningful engagement with all of them.</p>	<p><i>key populations</i>. The results framework also includes an indicator under Outcome 2 (page 10), which focuses on out-of-school life skills education. Through partnerships with civil society and community-based organizations, the programme will engage with communities across various outcome areas. Key interventions are geared towards <i>deepening community mobilization to address gender inequality and gender-based violence</i>;</p> <p>With respect to the various sectors involved, the Ministry of Health, provides overall leadership in the provision of ASRH/HIV/GBV services and information to young people.</p> <p>The Ministry of Education and Training, provides overall leadership in the implementation of in-school life skills education, including secondary, primary and teacher training institutions.</p> <p>The Ministry of Sports Culture and Youth Affairs and the Eswatini National Youth Council provides leadership in the implementation of out-of-school youth activities.</p> <p>The CSO Youth Consortium provides leadership and functions as secretariat for the provision of integrated SRHR/HIV information and services as well as provision of comprehensive adolescent and youth sexual reproductive health and rights information at community level and during the traditional events. In addition, it provides adolescent girls and young men with leadership and empowerment skills at communities and implements the parent to child communication initiative.</p> <p>While the resource envelope is not large, UNFPA funds will serve as catalytic resources and leverage other funding sources, including domestic resources, to deliver the results of the programme. UNFPA will also participate in joint resource mobilization initiatives with the UNCT and joint efforts with other middle-income countries to meet financing gaps.</p>
<p>Since Eswatini is the 6th most unequal country in Africa, I would have expected more efforts to reach those in most need. Since there is no elaboration on that I am not sure if that is the case</p>	<p>UNFPA recognizes the prevailing inequalities in the country; as guided by the Common Country Analysis and UNSDCF, the programme has prioritized addressing gender inequalities, which limit equitable access to high-quality SRH, HIV and GBV interventions. These are intended to be addressed at policy, institutional, community, household and individual levels.</p> <p>The country programme will also target rural, less educated, poor girls and young women (aged 15-24 years), rural and urban women, key populations, persons living with HIV and persons with disabilities in targeted communities</p>

	across the four administrative regions, in order to ensure that the initiatives reach those furthest behind.
There are some other comments like expectation of domestic funding given that the GDP shrank by more than 4% in a period of 6 years and could be worse after the COVID-19 pandemic.	This comment is noted. Strategies to ensure availability of funds for the implementation of the country programme will be prioritized. UNFPA will collaborate within the UN system, with the Government to improve domestic resources mobilization and allocation for SRHR interventions through tailored actions. This is integrated in the country programme, section III, paragraph 36.
Comments by European Union	UNFPA country/regional office response
The planned programme continues the priority focus on SRHR, adolescents, gender equality, and population dynamics. This is sensible and appropriate in light of country priorities and strategies and the pressures created by Covid-19; Investing in the reduction of preventable mortality is the only viable way to build an affordable health system and improving women's and girls' status and rights is key to this.	We thank the European Union for the comments provided, and for re-affirming the strategic direction of the new country programme.
It would be helpful for UNFPA to identify how it will work with other UN agencies and partners to accelerate specific improved outcomes for women and girls (for example reducing HIV prevalence or adolescent pregnancy).	Partnership with United Nations agencies is essential in delivering the country programme. Section 2 (priorities and partnerships), paragraph 13 highlights the collaboration with United Nations agencies in delivering the country programme. The Results and Resources Framework, in particular, indicates partnerships with UNICEF, WHO and UNAIDS in delivering results for Outcome 1; partnerships with UNAIDS, UNICEF, UNESCO, WHO, UNDP on Outcome 2; partnerships with UNDP, UNICEF, WHO, UNESCO on Outcome 3, and partnerships with UNICEF, WHO, UNAIDS, the World Bank, UNDP, WFP, UNESCO on Outcome 4. Through the implementation of the UNSDCF and through joint programming initiatives, UNFPA will work closely with these agencies to support delivery of the agreed collective results.
Adolescent rights and access to services are highly relevant as an area of focus. It would be important in our view to focus very carefully on these long-term socio-economic/ rights-based drivers of better health in the Eswatini context. Actual results related to adolescents should be tracked in terms of improved outcomes not the numbers reached with training which is a weak measurement of anything.	In consultation with the Government of Eswatini and key partners, the country programme has prioritized life skills education. UNFPA will partner with relevant institutions (public and private) in addressing the key socio-economic challenges affecting young people, including HIV, GBV and teenage pregnancy, and in reducing the maternal mortality ratio. The country programme interventions will strengthen young people's capacities to make informed choices about their sexual and reproductive

	<p>health and rights and their well-being, and will contribute to improved demand, access to and use of high-quality SRHR services by young people. The RRF includes an outcome level indicator on the ‘number of adolescents and youth who have utilized integrated sexual and reproductive health services’, which is an important measure of improved outcomes for young people, and to which the UNFPA programme will contribute.</p>
<p>Given the recommendations of the Country Programme Evaluation, at least some efforts need to be more upstream, based on the underlying drivers of continued poor outcomes for women and girls. It will be important to identify tangible tracking measures to monitor investment at this level beyond service delivery</p>	<p>Many of the new country programme interventions will remain upstream, with an emphasis on reducing maternal mortality, including a focus on amplifying evidence-based advocacy to strengthen the enabling policy and legislative environment, secure increased sustainable financing for sexual reproductive health and rights to reduce the maternal mortality ratio, and improving demographic intelligence to improve targeting of delivery models, among other key areas. There are indicators in the Results and Resources Framework that will track this upstream work, including <i>existence and implementation of a national system to collect and disseminate disaggregated data on the incidence and prevalence of gender-based violence</i>.</p>
<p>How will Eswatini engage with Phase 3 of the Supplies Partnership which is also shifting to a more strategic level to reposition reproductive health as a central strategy for national development?</p>	<p>While the UNFPA Eswatini country office is not currently a recipient of the global UNFPA Supplies partnership programme, it will continue to engage with the Government and its partners in promoting reproductive health commodity security in the country and related supply-chain management systems. Discussions will also be pursued internally on phase 3 of the Supplies Partnership.</p> <p>In addition, UNFPA is undertaking a major change process to strengthen its supply chain. As part of this process, key supply chain functions will be revised and a new unit, responsible for providing coordination and oversight to the entire supply chain at country, regional and global level, will be established. It is expected that the process will result in strengthened systems at country level and more effective last-mile capabilities in countries covered by UNFPA Supplies as well as countries currently not directly supported by the UNFPA Supplies Partnership.</p>