



Deputy Prime Ministers Office

THE KINGDOM OF ESWATINI'S COUNTRY PROGRESS REPORT
ON THE
IMPLEMENTATION OF THE BEIJING DECLARATION AND PLATFORM FOR ACTION

Prepared by Department of Gender and Family Issues

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KHANGEZIWE MABUZA

PRINCIPAL SECRETARY

Foreword

The kingdom of Eswatini like many other countries ratified the 1995 Beijing Declaration and Platform for Action in view of accelerating gender equality agenda at national level. The country further established a National Coordinating Office for gender mainstreaming, known as the Department of Gender and Family issues. It is upon the mandate of this arm of government to ensure the mainstreaming of gender across all sectors of development and to ensure that the policy and legislative framework is conducive for gender equality realization.

Just like the government of the Eswatini through this coordinating office, the Platform for Action imagines a world where each woman and girl can exercise her freedoms and choices, and realize all her rights, such as to live free from violence, to go to school, to participate in decisions and to earn equal pay for equal work. The Beijing process unleashed remarkable political will and worldwide visibility. It connected and reinforced the activism of women's movements on a global scale. The 1995 Conference participants went home with great hope and clear agreement on how to achieve equality and empowerment.

Since then, governments including Eswatini, civil society and the public have translated the Platform for Action's promises into concrete changes in individual countries. The Kingdom of Eswatini developed and adopted a National Gender policy in 2010, which cover 10 of the 12 critical areas of concern identified by the Declaration and Platform for Action.

These have ushered in enormous improvements in women's lives. More women and girls than at any previous point in time serve in political offices, are protected by laws against gender-based violence, and live under constitutions guaranteeing gender equality. Regular five-year reviews of progress on fulfilling Beijing commitments have sustained momentum and the last report Eswatini produce was in 2014/15.

Still, the Platform for Action envisioned gender equality in all dimensions of life—and no country has yet finished this agenda. Women earn less than men and are more likely to work in

poor-quality jobs. A third suffers physical or sexual violence in their lifetime. Gaps in reproductive rights and health care leave 800 women dying in childbirth each day.

In the mist of all the troubles there are some positive strides which Eswatini has made in the various critical areas of concern and some forward looking strategies for the future.

HON DEPUTY PRIME MINISTER

SEN. THEMBA N. MASUKU

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Acronyms

ANC	Antenatal Care		
ART	Antiretroviral Therapy	NETIP 11	National Education and Training Improvement Programme
ARV	Antiretroviral	NFIS	National Financial Inclusion Strategy
ASRH	Adolescent Sexual Reproductive Health	ODA	Overseas Development Assistance
AWPS	Africa Women Progress Scorecard	OECD	Organisation for Economic Co-operation and Development
AYC		OVC	Orphan and Vulnerable Child
BPfA	Beijing Declaration Platform for Action	PLHIV	People Living with HIV
CEDAW	Convention on the Elimination of All Forms of Discrimination Against Women	PMTCT	Prevention of Mothers to Child Transmission
CPR	Contraceptive Prevalence Rate	PRSAP	Poverty Reduction Strategy Action Plan
CSE	Comprehensive Sexuality Education	PWDs	Persons with Disabilities
DD	Demographic Dividend	SACU	Southern AFRICA Customs Union
DPMO	Deputy Prime Minister's Offices	SADC	Southern Africa Development Community
EBC	Elections and Boundaries Commission	SANU	Southern AFRICA Nazarene University
ECCDE	Early Childhood Care Development and Education	SARA	Swaziland Availability and Readiness Assessment
EHIES	Eswatini Household Income and Expenditure Survey	SCOT	Swaziland College of Technology
eNSF	Extended National Strategic Framework	SDG	Sustainable Development Goal

FINSCOPE		SEN	Special Education Needs
FP	Family Planning	SHIMS	Swaziland HIV Incidence Measurement Survey
FPE	Free Primary Education	SME	Small Medium Enterprise
GBV	Gender Based Violence	SODV	Sexual Offences and Domestic Violence
GBVIMIS	Gender Based Violence Information Management system	SOPs	Standard Operating Procedures
GCF		SRH	Sexual Reproductive Health
GoE	Government of Eswatini	SRH	Sexual Reproductive Health
GSI	Gender Status Index	SSDIG	Strategy on Sustainable Development and Inclusive Growth (SSDIG)
HIV/AIDS	Human Immunodeficiency Virus Infection /	STEM	Science Technological Engineering Mathematics
HSSP111	Health Sector Strategic Plan 111	SWAAGA	Swaziland Action Against Abuse
HTS	HIV Testing Services	TB	Tuberculosis
ICT	Information and Communication Technology	TOR	Terms of Reference
ILFS	Integrated Labour Force Survey	TSC	Teaching Service Commission
LLL	Life Long Learning	TVE	Technical and Vocational Education and Training
LPWA		TVET	Technical and Vocational Education and Training
LSE	Life Skills Education	UN	United Nations
LUCT	Limkokwing University College of Technology	UNESWA	University of Eswatini
MICS	Multiple Indicator Cluster Survey	UPR	Universal Peer Review
MNCH	Maternal Neonatal Child	VAW	Violence Against Women

	Health		
MoET	Ministry of Education and Training		
MSME	Micro Small and Medium Enterprises		
MSTE	Mathematics, Science, and Technology Education		
MTN	Mobile Technology Network		
NAP	National Action Plan		
NDS	National Development Strategy		

1 SECTION 1- PRIORITIES; ACHIEVEMENTS, CHALLENGES AND SETBACKS

1.0 Introduction

At the Fourth Global conference on women held in Beijing in September 1995, The United Nations acknowledged the voices of all women everywhere and took note of the diversity of women and their roles and circumstances in development. The Conference further recognized that whilst the status of women had advanced in some important respects in the previous decade, the progress had been uneven with inequalities between women and men have persisted and major obstacles remain, with serious consequences for the well-being of all people. Subsequently the conference adopted the Beijing Declaration and Platform for Action of 1995 which called on Governments, the private sector, civil society organizations, development partners and all concerned global citizens to end gender discrimination and promote women's rights. The Platform for Action continues to be regarded worldwide as a powerful agenda-setting instrument for the empowerment of women. It calls for mainstreaming gender in all policies, legislation, programs and projects while making concrete suggestions on measures to be taken to implement the twelve critical areas of concern¹. The attainment of gender equality remains an important area of focus in current global and regional development frameworks.

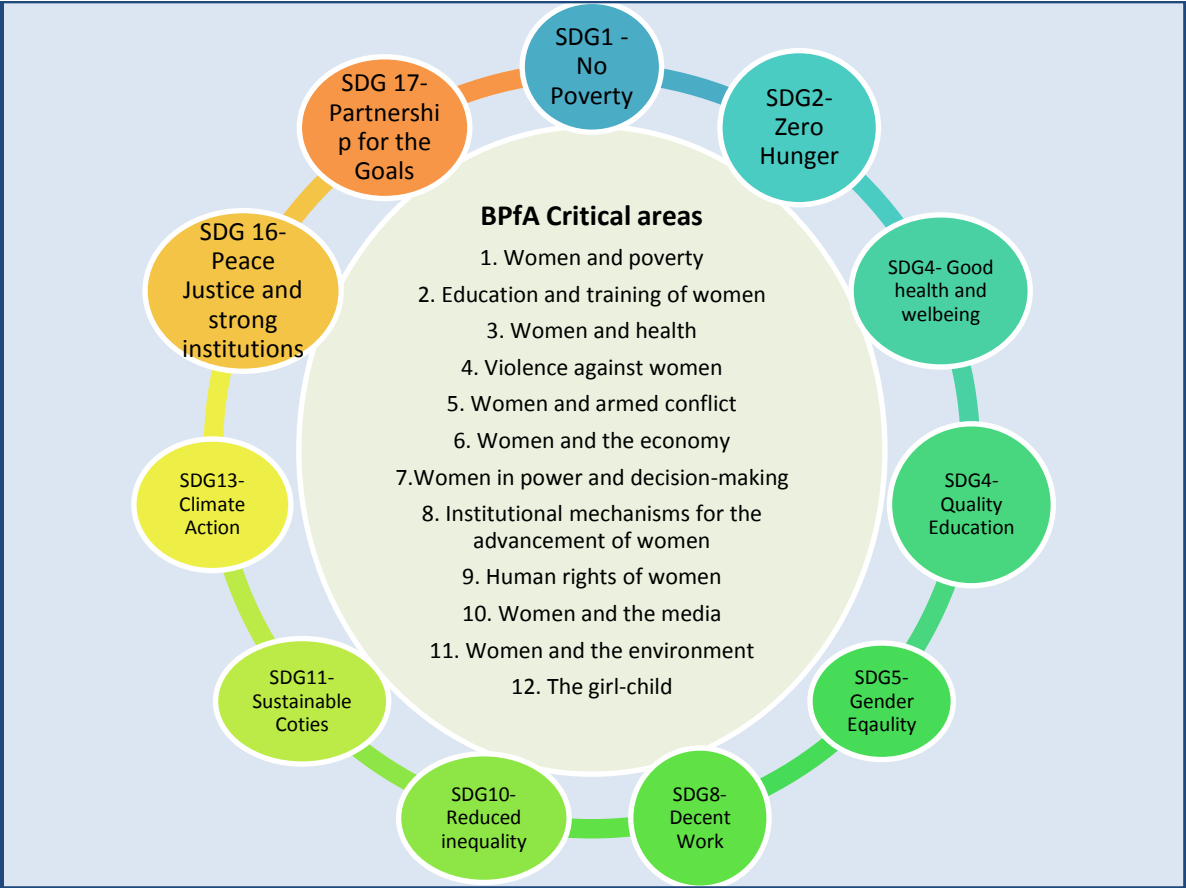
In 2015 the United Nations adopted a global sustainable development agenda with 17 ambitious goals that have to be collectively attained by 2030. The UN member states further recognized that delivering results at the national level depends on political mobilization, resource allocation and the implementation of gender-responsive policies and programmes. The 2030 Agenda, therefore, dedicates a specific goal to gender equality and the empowerment of all women and girls (SDG 5, achieve gender equality and empower all women and girls) with targets that resonate strongly with the expected results from the Beijing Platform for action (BPfA). Gender equality and empowerment of women and girls feature prominently as a cross-cutting element of the 2030 Agenda because of its catalytic nature as it

¹ United Nations, The Beijing Declaration and the Platform for Action, 1995

²Source: Government of Eswatini SDG Prioritization document, unpublished (2017)

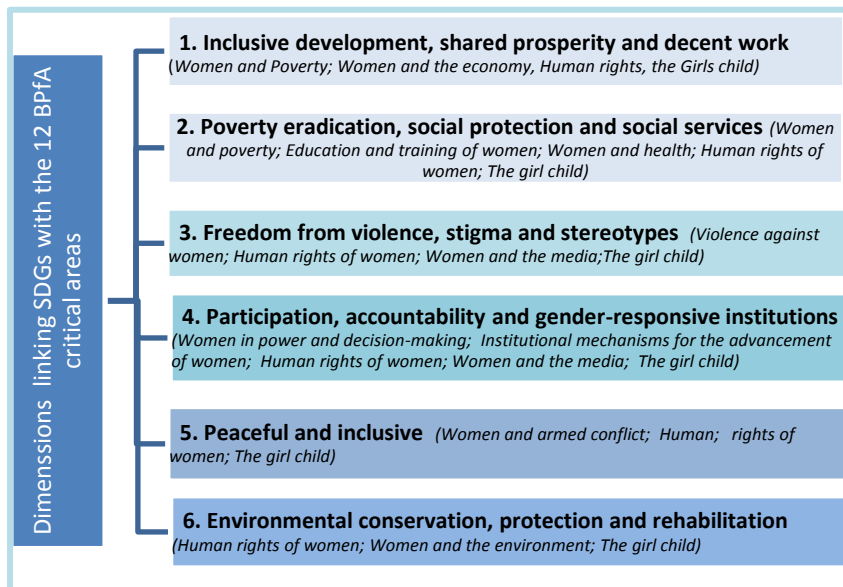
is demonstrated in the mutually reinforcing targets of the selected SDGs and the 12 critical areas of concerns of the BPfA as shown below.

Figure 1: Relationship between the BPfA 12 critical areas of concern and selected SDGs



In line with the dictates of the BPfA, UN member states are expected to report on national progress towards the attainment of gender equality every 5 years. For the first time in the 2020 review and going forward to 2030, both the Beijing Declaration & the Platform for Action and the 2030 Agenda for Sustainable Development will be used as a combined reporting framework. To facilitate this, the 12 critical areas of concern have been clustered into six overarching dimensions that highlight the alignment of the two frameworks. The six dimensions with their inter-linkages between the gender equality related SDGs and the BPfA 12 critical areas are presented in Figure 2 below.

Figure 2 : The Six Dimensions of the SDG based framework for reporting progress on the BPfA



This approach for the analysis of the BPfA progress is aimed at facilitating reflections about the implementation of both frameworks in a mutually reinforcing manner to accelerate progress for all women and girls.

as part of the United Nations, adopted the agenda 2030 Sustainable Development Agenda together with its 17 Sustainable Development Goals (SDGs), Targets and Indicators. In order to effectively operationalize the 2030 agenda the Government of Eswatini prioritized seven SDGs with the four other Goals as cross cutting and the remaining five as enablers. See Table 1 below.

Table 1: Matrix of the prioritization of the SDGs in the Kingdom of Eswatini²

Prioritized Goals	Cross cutting Goals	Enablers
Goal 8: Decent work and economic growth	Goal 5: Gender equality	Goal 15: Life on Land
Goal 4: Quality education	Goal 1: No Poverty	Goal 16: Peace Justice and Strong institutions
Goal 3: Good Health and wellbeing	Goal 12: Responsible Consumption and Production	Goal 17: Partnerships for the Goals
Goal 7: Affordable and clean energy	Goal 11: Sustainable cities and communities	Goal 10: Reduced inequalities
Goal 9: Industry Innovation and infrastructure		Goal 13: Climate action
Goal 2: Zero Hunger		
Goal 6: Clean water and sanitation		

²Source: Government of Eswatini SDG Prioritization document, unpublished (2017)

This categorization of the SDGs at the country purports that it would be difficult, if not impossible, to attain any of the SDGs by 2030 without giving due consideration to gender equality. As result of the cross cutting nature of gender issues, special indicators for women have also been woven into the majority of the other SDGs. Evidently the outcome of the outcome of the national prioritization process resonates with the given BPfA monitoring and reporting framework as stated in Figure 2 above.

1.1 Country Context

1.1.1 Gender equality

The country has made significant strides in addressing gender inequalities that exists in a number of spheres of socio economic life of the people in the country. Based on the Gender Status Index (GSI) and the Africa Women Progress Scoreboard (AWPS) which is an African Union measurement framework for ascertaining progress made towards the attainment of gender equality, Kingdom of Eswatini established the GSI at 75.5 percent in attainment of gender parity in all sectors of development. The highest score was attained in the social power block scoring 1.093 whilst the political power block had 0.331. The overall score for the AWPS was recorded at 65 percent with the social power block scoring the highest at 71.33 percent and the political power block the lowest at 55 percent. Of note is that the political power block lags in both the GSI and the AWPS³.

The Government acknowledges this gap and has endorsed and implemented the Beijing Declaration and Platform for Action, and other human rights conventions which call for countries to ensure gender equality for sustainable development. In order to operationalize these, the Government of Eswatini (GOE) included gender equality as a Principle in the National Constitution of 2005, the National Development Strategy (NDS), Vision 2022, the Poverty Reduction Strategy and Action Plan (PRSAP) and the National Action Programme (NAP) 2013-2018. In 2010 a National Gender Policy with a national programme, led by the Deputy Prime Minister's Office (DPMO), is being implemented. The Policy aims to address and reduce the barriers that hinder full and equal participation of men and women in development initiatives.

³ DPMO, Eswatini Gender and development index Report, 2017

Gender inequality takes roots from the existing way of life that has continued to permeate through socio-cultural norms and practices as well as economic, legal and political systems. Whilst women have been integrated into all aspects of social, cultural, political and economic life, they have remained behind in the full attainment of education particularly secondary and tertiary education including pursuing subjects in the pure science and engineering fields. Women and girls participation in economic activities and gainful employment is yet to be achieved. They also are lowly represented in positions of power and influence compared to their male counterparts.

1.1.2 Economic structures, participation in productive activities and access to resources

The Kingdom of Eswatini, although categorized a lower middle income country, the prevailing development situation is characterized by intertwined development challenges. These challenges include slow & non-inclusive economic growth, Poverty, food and nutrition insecurity, weak social protection policy environment, inadequate social services, climate change related shocks, low integration of ICT in development and the high burden of HIV and non- communicable diseases.

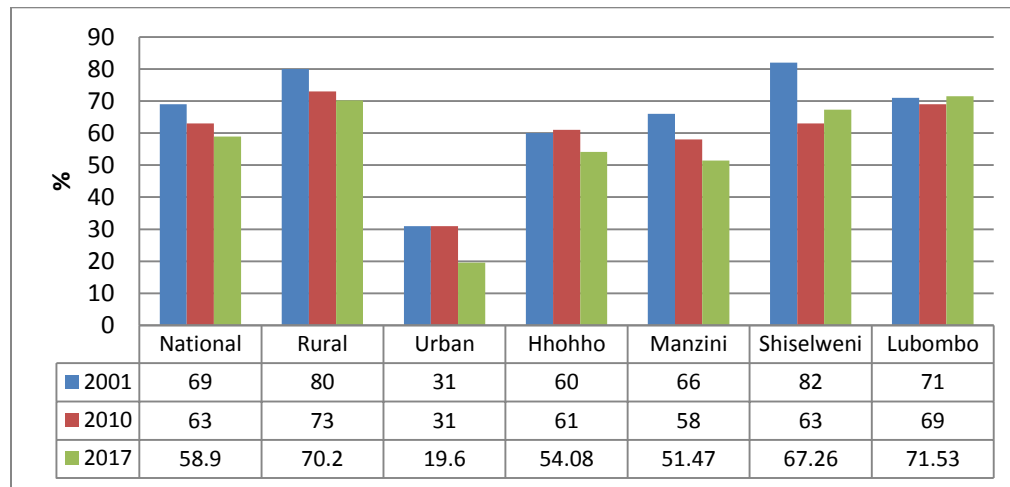
The country has been for a while trapped in slow economic growth. The growth rate declined from an annual average of 3.1 per cent in the 1990s to an average of 2.1 per cent from 2003 to 2012. According to the Economic Outlook report of 2019, the situation continues to be depressing as 'real GDP contracted an estimated 0.5% in 2018 after 1.9% growth in 2017. Growth is hampered by weak recovery in the raw materials extraction sector, a slowdown in the production sector, and contraction in the services sector'⁴. On the other hand, the aftermath of the 2015/16 drought and the declining mining sector continue to have negative effects on the economy. At this point the economic performance is expected to poorly perform as a result of the decelerating manufacturing which is impacted by the shrinking external demand especially as a result of the underperforming textile industry and the ban on selected eSwatini exports in September 2017 by the European Free Trade Association. Furthermore, the

⁴<https://www.afdb.org/en/countries/southern-africa/eswatini/eswatini-economic-outlook>

service sector is experiencing contraction associated with the decline in anticipated consumer and government spending⁵. Furthermore, the high dependency on SACU and the uncertainty in the flow of revenues from same remains a major challenge presenting the country with a fiscal challenge. For example, SACU revenue fell by more than E1.5 billion in 2016/17 contributing to a fiscal deficit of nearly E7.0 billion⁶.

Poverty, although declining, remains high in the country. The Eswatini Household Income and Expenditure Survey (EHIES, 2016/17) shows that 58.9% of the population continues to be in poverty, a decline from 63% in 2010⁷. The poverty trends are shown in figure 3 below.

Figure 3 : Proportion of the population living below the poverty line, 2001-2017 by rural/urban and region(*Source SHIES2010/EHIS 2017*)



Poverty affects more people in the rural areas, Lubombo and the Shiselweni regions. Whilst there is a slight decline in poverty levels in Manzini and Hhohho regions, there seem to be

⁵ Ibid

⁶ Ibid

⁷ EHIES, 2017

persistently high and somewhat increasing poverty in the Lubombo region. Further to this, 38.9% of the working population lives below the national poverty line (working poor)⁸.

Based on the foregoing, poverty is predominantly a rural phenomenon in the country and evidently affecting both males and females but more so females considering the Gini Coefficient of 49.30 and income inequality between males (54) and female (46). The high poverty rates in the population increases the dependency ratio which is estimated at 76.2% and it strains the economy's ability to provide adequate social services, such as health care and education.

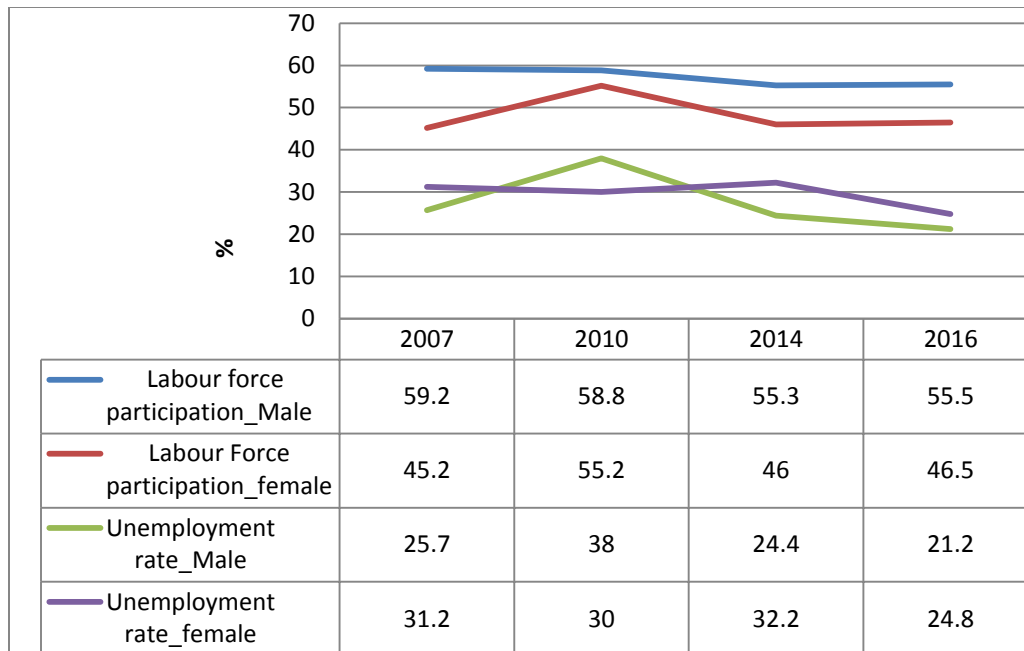
Employment plays an important role in reducing poverty levels at the same time it contributes to increased productivity and revenue which is necessary for economic growth⁹. Labour force participation has remained low and variable over the last decade. The male and female differentials show that women are at a disadvantage in terms of labour force participation and employment rates compared to their male counterparts (See Figure 4). The female curve is constantly below that of males indicating less opportunity for females to find work. Sometimes incline occurs for females in the ages 24 to 34 years, as they leave the labour force to have children. Whilst women make up about 52% of the total population¹⁰, their full potential in contributing to the national economic growth has not been maximized.

Figure 4 : Labour force participation and Unemployment rates among Males and Females- 2007-2016 (*sources Integrated Labour force surveys 2007-2016*)

⁸⁸ Ibid

⁹

¹⁰ CSO, National Population and Household census report, 2017



Unemployment rates are higher among females are higher with marginal improvement over the years (see figure 4 above). Although there are variations by region, the Shiselweni region is hardest hit with 37.5%. The rural unemployment rate was 15 percentage points higher than the urban rate. Slightly over half (51.6%) of the young population (which include girls) is unemployed¹¹. In the country, women generally have lower economic status than men as the 2013-2014 the ILFS, 2013/14 indicates that male earnings are 67% higher than those of women¹².

Although the private sector- Micro Small and Medium Enterprises (MSME)- is small in the Kingdom of Eswatini compared to other countries in the sub region, the National Development Strategy (NDS) recognizes the potential it holds in transforming the economy considering its capacity to employ about 65% of the workforce. Currently the MSME employs about 92,000 people which constitute 21 percent of the workforce¹³. Most businesses are micro enterprises with limited employment capacity.

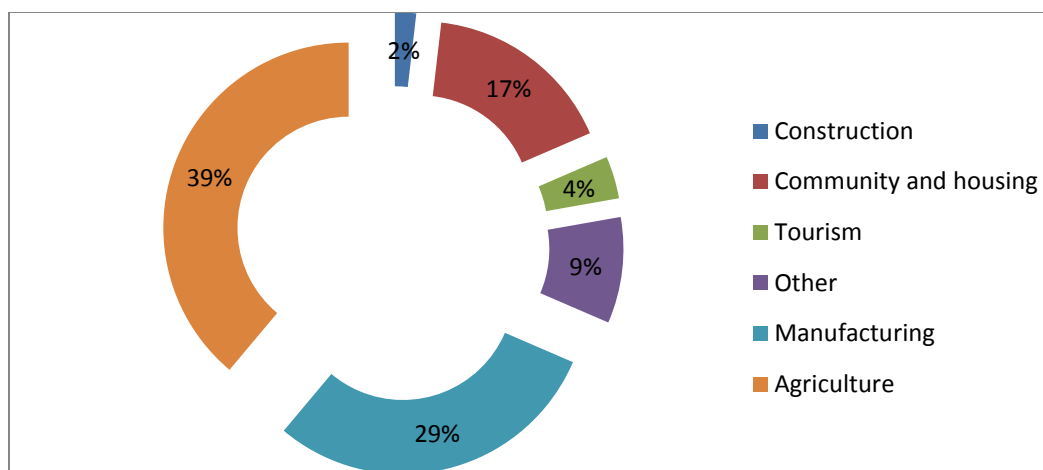
¹¹CSO,Swaziland Integrated labour force survey, 2013/14

¹² Ibid

¹³FinScope SMME Eswatini Report, 2017

The MSME sector is expected to play an important role in economic inclusion of both youth and women. The 2017 Incomes and expenditure survey found that 27.69% of the households had a household member who is entrepreneur and within these, 66.46% had a decision maker who is female¹⁴. About half of the MSME are owned by adults aged between 35 and 54 years whilst a quarter are owned by youth aged 18-34 years. MSME ownership along the gender lines show that 65% are owned by women and the rest by men. Of these, 60% own the micro enterprises which mean that these women own small size businesses and are likely to be self-employed. In this situation, they engage in business for the day-to-day survival and may lack the motivation and capacity for entrepreneurial motivation¹⁵.

Figure 5: Proportion of women MSME ownership by type of Business (Source: FinScope, 2017)



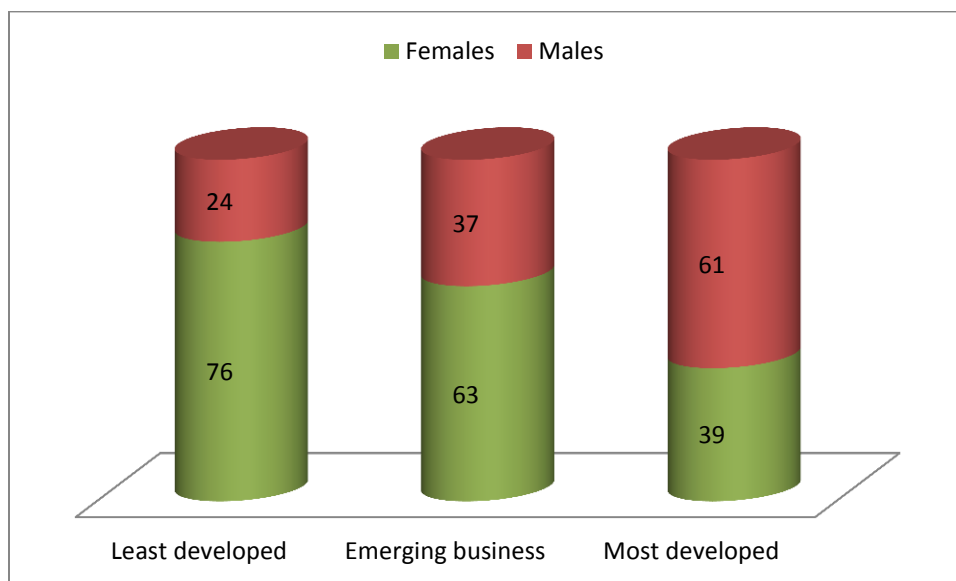
Women entrepreneurs are spread across businesses as shown in Figure 5 above. Notably women entrepreneurs are mainly in the agriculture, wholesale and manufacturing businesses but very few are in the construction industry. Whilst 74% of women own independent businesses, it is noted that whilst the businesses grow the proportion of women owners lowers to 40% of micro and 33% of small business. In terms of business development, males are more likely to own most developed businesses whilst the majority of women own least developed

¹⁴ CSO, EHIES, 2017

¹⁵ Ibid

businesses. This suggests that women are owners of less mature and less developed businesses (see Figure 6). Men are the main drivers of the MSME in the Kingdom where they predominantly (61%) own medium enterprises¹⁶.

Figure 6: Level of business development by Sex of owner (Source: FinScope, 2017)



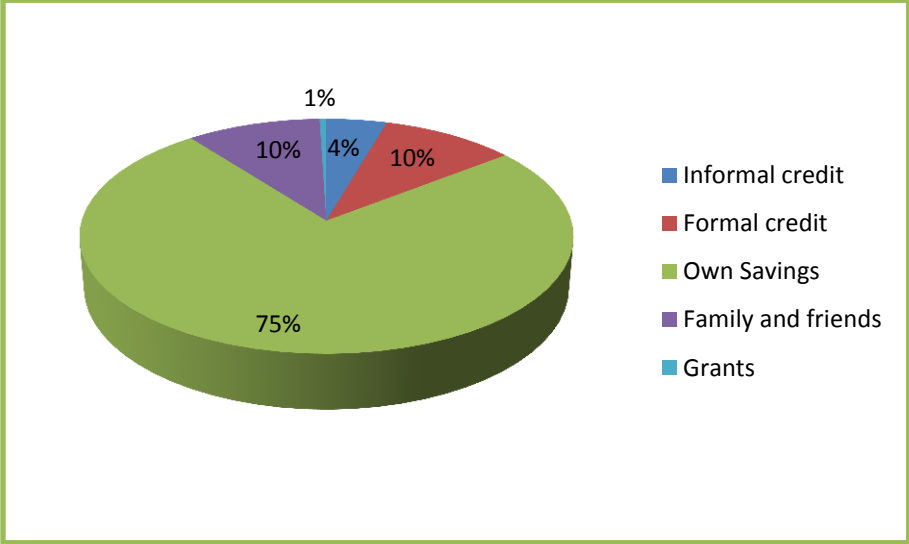
The role of education cannot be overemphasized in ensuring successful business that are technologically driven. Educated entrepreneurs are said to be better positioned to take advantage of opportunities and mitigate threats. The bulk of women business owners have lower educational attainment. Evidently, if the country is to ensure inclusive economic development, there is need to encourage girls to remain in school so that they can attain the highest levels of education with assurance of the necessary capacity for business management and development.

Access to and usage of finance is a critical factor in ensuring that a business is viable. In the Finscope study of 2017, found that poor access to credit is a major impediment to entrepreneurship and private sector development considering that sound financial availability is

¹⁶Finscope MSME Eswatini Report, 2017

necessary for effective business startup, growth and operations. The study further found that 90% of MSME owners start new business using either their own savings, borrow from family & friends or from informal sources including grants. The spread of sources of finance is as shown in Figure 7 below.

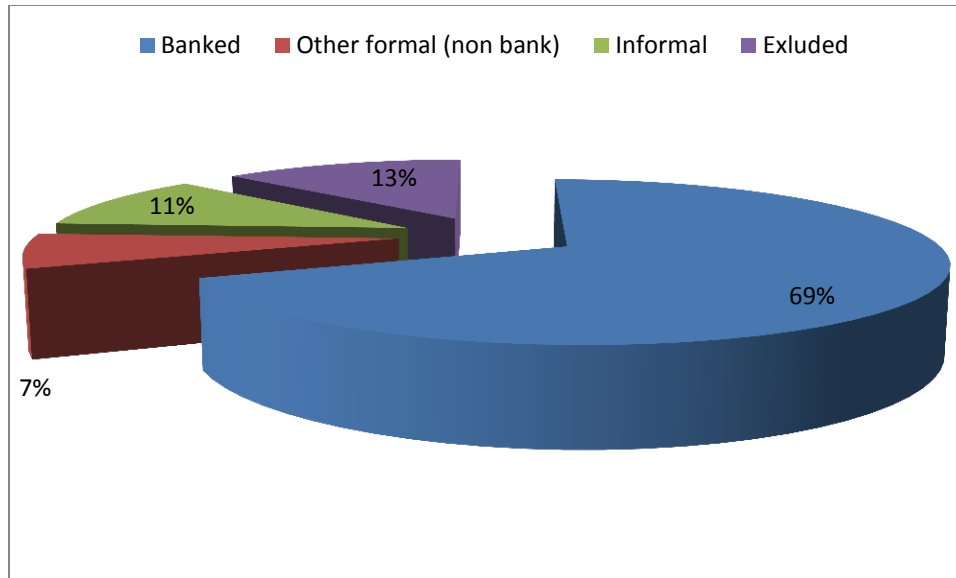
Figure 7: Proportion of business owners by source of startup funds (Source: FinScope, 2017)



In terms of financial inclusion, more than three quarters (75%) of businesses are banked and a further 7% have access to financial services from other formal institutions. The financially excluded business constitutes 13 percent of MSME population in the country¹⁷.

Figure 8: Financial access (Source: FinScope, 2017)

¹⁷ ibid



Within the framework for access to finance from formal sources of funds, a business needs to be registered before it can access credit. Only 25 percent of the businesses in the study were found to be registered and as such, 75% were not eligible to access credit from formal institutions. Unfortunately informal lending sources have their own challenges as they often provide small loans and charge high interest rates(see Table 2).

Table 2: Percent distribution of business owners by credit strands (Source:FinScope, 2017)

	Medium Businesses	Small Business	Micro Business	Independent entrepreneur
Borrow from Bank	22	15	8	3
Borrow from none bank	15	1	1	1
Borrow from informal mechanisms	0	0	0	5
Borrow from friends and family	0	0	0	2
Do not borrow	78	84	91	89

Evidently access to credit is a challenge for entrepreneurs in the country. All business groups are affected. This means that Women, who are likely to own the less matured, underdeveloped businesses and dominate the independent and micro businesses, are hugely affected by lack of access to credit.

1.1.3 Education and training

All countries, regardless of their national wealth, stand to gain from more and better education. The OECD Report of 2015 notes that ‘providing every child with access to education and the skills needed to participate fully in society would boost GDP by an average 28% per year in lower-income countries and 16% per year in high-income countries for the next 80 years’¹⁸. Furthermore, the direct and indisputable link between access to quality education and economic and social development does not only benefit the premised on knowledge-driven socio economic development where learners of all ages and gender need twenty-first-century skills, like critical thinking, problem solving, creativity, and digital literacy and must countries but also the individuals. The attainment of the 2030 sustainable development agenda is be familiar with new technologies if they are to cope with the rapidly changing workplaces¹⁹. Countries have to therefore ensure that girls also are allowed to access and complete education on the same footing as their male counterparts. Achieving gender parity in education is necessary if countries are to reap substantial benefits relating to health, equality and job creation. Opportunities for employment depend to a large extent on skilled workforce with tailored basic skills that meet the needs of the labor market. This calls for robust education systems which are underpinned by qualified, professionally trained, motivated, and well-supported teachers on one hand and the right frameworks and incentives for creating jobs as well as filling them on the other hand.

The Government of Eswatini is committed to improve human capital through, among other things, providing high quality and equitable education and training that will enable ‘all citizens to sustainably pursue their life goals, enjoy lives of value and dignity in a safe and secure

¹⁸<http://www.oecd.org/education/universal-basic-skills-9789264234833-en.htm>

¹⁹<https://www.weforum.org/agenda/2015/07/why-education-is-the-key-to-development/>

environment in line with the objectives of sustainable development'²⁰. In line with the SDGs, the country has expanded its focus from primary education level to basic education to also include lower secondary education level. In this regard, pupils have a right to timely enrollment into the school system, complete primary education and further transition to lower secondary – thus completing 10 years of education. The expected age of pupils in primary school level should not be older than 12 years whilst at the secondary level the age of the pupils should be between 13 and 15 years. Gender parity in the access to education is a core principle of the education and training policy of the country. In other words the country is committed to ensure that both boys and girls access education without and gender discrimination.

Over the years the country has made significant progress in improving equitable access to education. This is evidenced through high literacy levels in the general population, high enrolment rate and high gender parity particularly in primary school education level.

Setbacks and challenges in economic development

- Pervasive poverty is in society affecting women particularly in the rural areas.
- High Unemployment rate and low labour force participation among women and youth
- Financial exclusion of women and girls leading to their ineffective participation in private sector development

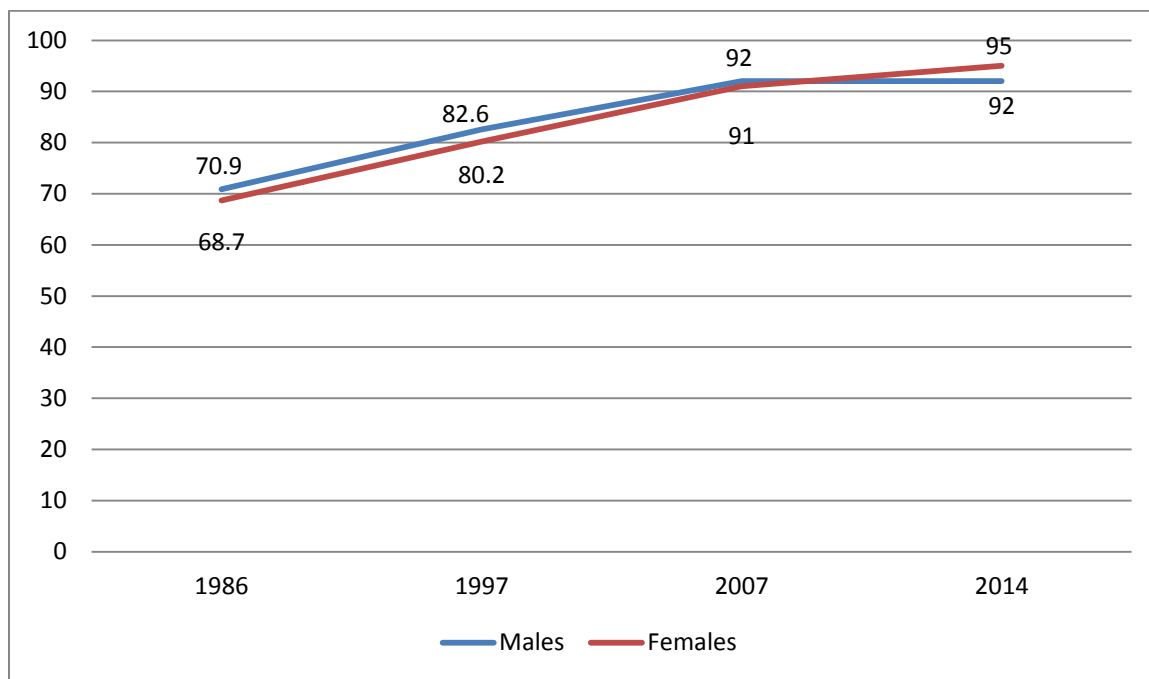
1.1.3.1 Literacy Levels

The Kingdom of Eswatini has made significant progress towards the attainment of universal literacy in the general population. The Population older than 10 years is very literate in the country. Literacy levels steadily grew over the last three decades from 70.1% in 1986 to above 90% in 2014. Differentials between men and women shows that whilst women literacy levels

²⁰ Strategy for sustainable Development and inclusive growth, 2017

were lower (68.7%) than their male counterparts (71.6%) in 1986²¹, the levels improved for the women and reached 95% in 2014 showing a three percentage points higher than men²². Figure 9 below shows the trend in literacy levels among women and men over the years²³.

Figure 9: Eswatini Literacy levels among the population aged above 10 years 1986-2014(Annual education stats reports)



The 2014 survey shows that although there are variations in levels of literacy based on rural / urban and geographical characteristics, these are minimal differences where the Lubombo region registered the lowest rate of 88% and the rural areas with 73%.

1.1.3.2. Enrolment rates

Primary school level

²¹ Swaziland Population and housing census 1997

²² MICS, 2014

²³ CSO, National Census reports, 1986-97 and SHDS, 2007 and MICS 2014

Primary education level covers the first seven years of school starting with Grade 1 through to Grade 7. The country introduced Free Primary Education in 2010 as part of conferring the constitutional rights of the citizen, particularly children, to free and compulsory primary education. Gross enrolments rates are high in primary schools although it favors boys more than girls in general with margins averaging about 6% lower for girls enrolments compared to boys (see Table 3 below). Of concern, however are the regional variations and the overall slight decline of about 2% between 2014 and 2017²⁴. These variations, is presumed to be more of a function of population dynamics than actual reduction in access to education by the targeted population. That as it may, the country has to put more efforts in increasing opportunities for girls to be enrolled in Primary schools across the regions with more focus on the Shiselweni and the Hhohho regions.

Table 3: Sex Parity Primary (Gross Enrolment Ratio) 2014 – 2017 (*Annual education stats reports*)

	Hhohho	Lubombo	Manzini	Shiselweni
2014	93.30%	92.00%	108.90%	93.70%
2015	93.40%	92.50%	94.20%	94.40%
2016	95.00%	92.90%	94.80%	95.30%
2017	91.60%	90.20%	92.90%	89.90%

Net enrolment rates in primary schools are also high and have remained more or less the same with a slight decline in 2017 for girls – see Table 4- Between 2014 and 2016 net enrollment rates for girls were higher compared to the boys at the primary school level but in 2017, net enrolment for boys was almost a percentage higher than that of girls.

Table 4: Net enrolment rates in primary school level by male and female pupils- 2014-2017 (*Annual education stats reports*)

²⁴GoE, MOET, Annual Education Census Report, 2017

Year	Primary school level	
	Females	Males
2014	94.4	93.7
2015	94.8	93.9
2016	94.9	93.4
2017	93.5	94.5

The available data show that Gross Enrolment Rate Parity favored boys slightly whilst the NER Parity showed the opposite, suggesting that there are more legible girls enrolled in the primary education level compared to boys. The primary school level is laden with over aged boys. From an efficiency point of view the data implies that girls are more efficient in the use of educational access and resources at primary levels compared to boys.

Lower secondary school level

Lower secondary school level is three years covering Forms 1 to 3. At this level net enrolment rates show that about a third of girls and a quarter of the boys in the country are enrolled in lower secondary level. There is an increasing trend, although marginal, in net enrolment rates with more girls enrolled in secondary schools compared to boys. On the overall net enrolment rates are much lower at the lower secondary school level compared to the primary schools level. The Table 5 below shows trends of Net enrolment rates at secondary school level between 2014 and 2017.

Table 5: Net enrolment rates in lower secondary school levels by sex of pupils- 2014-2017 (*Annual education stats reports*)

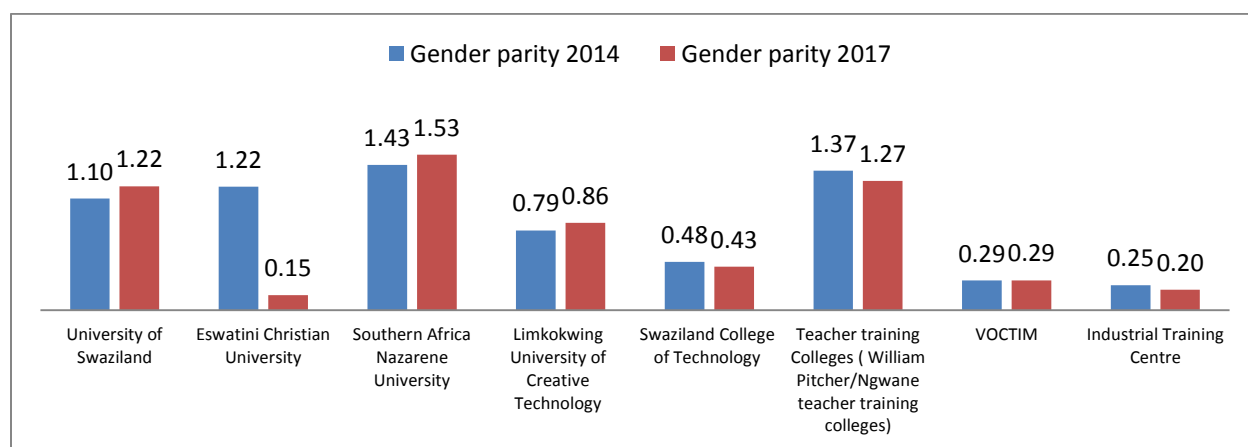
Year	Lower secondary level	
	Females	Males
2014	34.2	23.6

2015	32.1	23.7
2016	34.0	22.6
2017	38.7	26.0

Tertiary level enrolments rates

At tertiary levels data for 2017 on enrolments shows that parity between males and females is variable depending on the type of institution but overall 6% more females (6864) compared to males (6771) were enrolled in tertiary institutions in 2017 (see Table 6²⁵). Institution with fewer females were those offering technical subjects such as crafts- metal and woodwork, motor mechanic, electrical engineering, ICT, construction and pure sciences. The universities and the Teacher training colleges enrolled more females than males. Figure 10 shows the gender parity in tertiary institutions enrolment in 2014 compared to 2017.

Figure 10: Gender Parity in Enrolment rates in tertiary training institutions 2014 and 2017 Females as a proportion of males (*Annual education stats reports*)²⁶



²⁵ Ibid

²⁶ UNESWA, Vice Chancellor's Reports 2014 and 2017

Whilst the general enrolments data shows that the country has made progress towards the attainment of gender parity at almost all levels of the education system, gender disparities still exist in the science field. For example in the University of Eswatini more males than females were enrolled in the agriculture and natural sciences fields in between 2014 and 2018 (see Figure 10). Of note is the slight increase in female enrolment between the two periods. Be that as it may, there is need to ensure more females take up technical, vocational and natural science subjects.

Figure 11: Student enrolment in agriculture and pure science at the University of Swaziland 2013/14 and 2017/18 by Sex (Source-UNESWA Report of the Vice Chancellor, 2017)

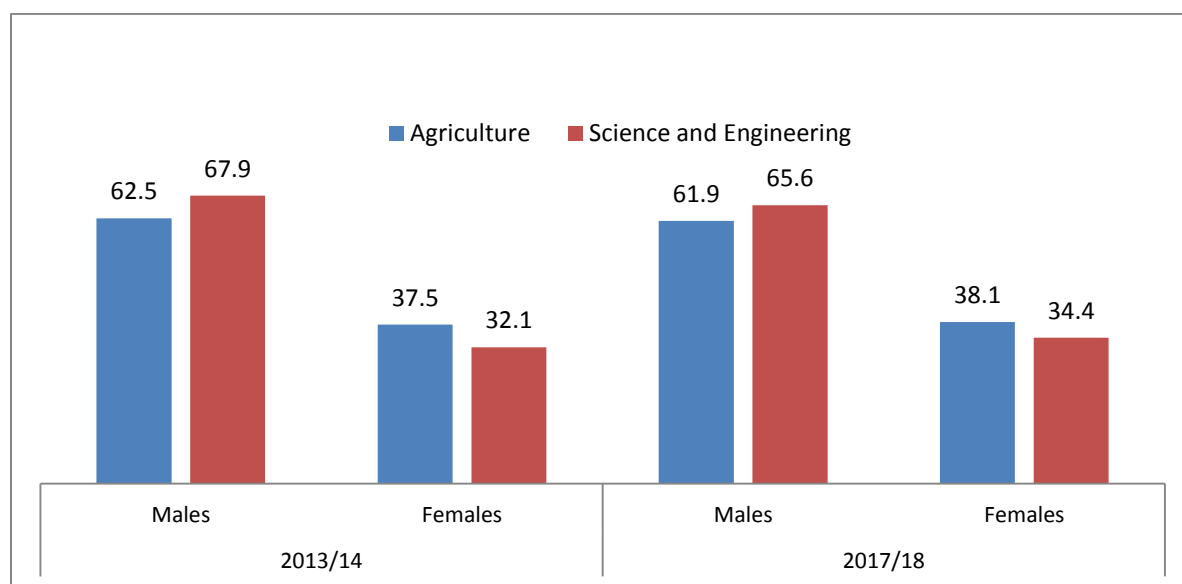
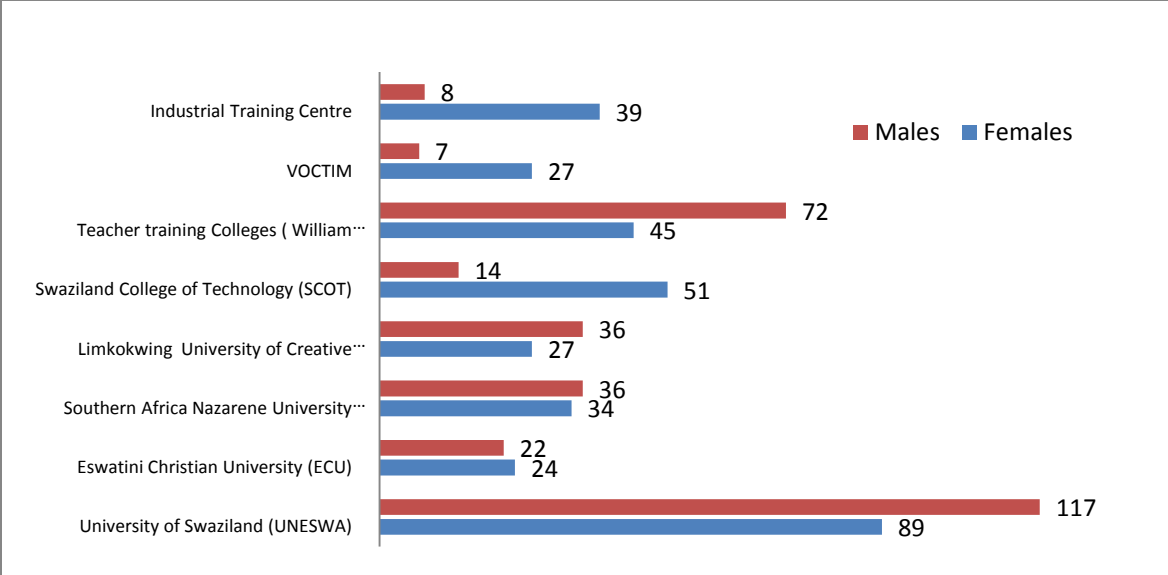


Figure 11²⁷ below shows the number of professional teaching staff at the tertiary institutions. The situation shows that whilst more females teach in these institutions, the technical and vocational colleges were male dominated. In the pure science at the University of Eswatini the proportion of female teaching staff increased slightly from 10% to 20% between 2014 and 2018 whilst males reduced from 90% to 80% respectively.

Figure 12: Number of professional Teaching staff in Tertiary training institutions in Eswatini by sex- 2017

²⁷ Ibid



Enrollment rates of pupils in Special Education Needs (SEN)

In order to ascertain the degree to which the school system meets the needs of all children including those with disability, the education statistics collects data on enrolment status of this group. The types of disabilities considered under this group include Hearing Impaired, Learning Disability, Physical Disability, Visually Impaired and Other Impairment. These disability statuses are not necessarily medically confirmed but are perceived by the teachers and therefore indicative. The data does not represent the magnitude of special needs in the general population.

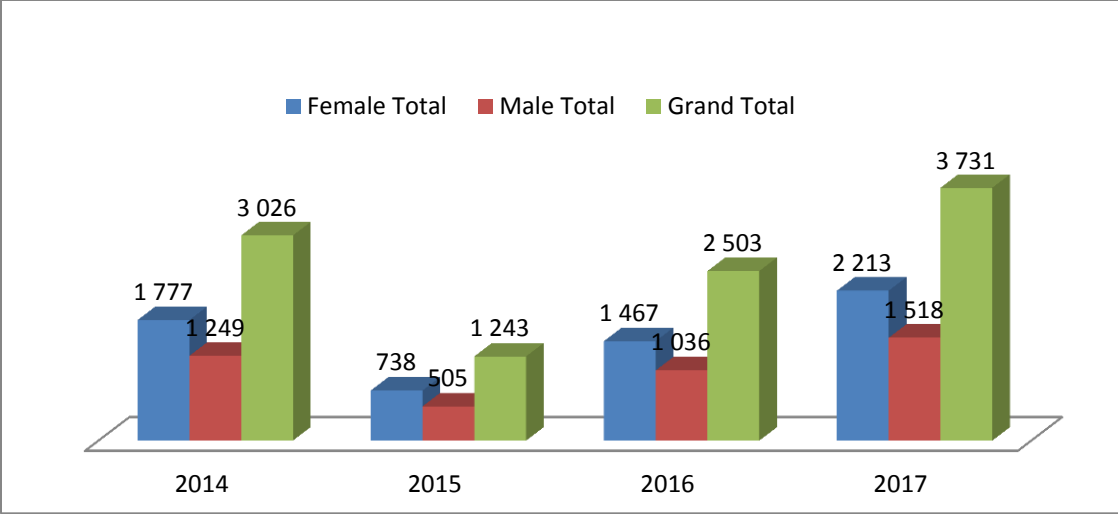
Data shows that the school system in the country does cater for children with special needs at both primary and secondary levels. The number of children increased over the period both in primary and secondary school levels (see Table 7 and Figure 12). Visual, hearing & impairment and learning disability are the most frequently observed forms of disabilities among children with special education needs in the school system

Table 6: Number of students with Special Education Needs enrolled in primary schools by Sex, and Year, 2014 to 2017

Sex of Pupil	Special education need _status	2014	2015	2016	2017	Total
Female	Hearing Impaired	780	540	718	942	2,980
	Learning Disability	680	636	840	837	2,993
	Other Impairment	143	97	158	175	573
	Physical Disability	165	115	147	181	608
	Visually Impaired	1,096	851	970	1,316	4,233
Female Total		2,864	2,239	2,833	3,451	11,387
Male	Hearing Impaired	673	493	657	865	2,688
	Learning Disability	1,058	1,064	1,414	1,443	4,979
	Other Impairment	152	146	212	274	784
	Physical Disability	272	173	166	246	857
	Visually Impaired	1,048	925	928	1,380	4,281
Male Total		3,203	2,801	3,377	4,208	13,589
Grand Total		6,067	5,040	6,210	7,659	24,976

An increasing trend is observed with the frequencies doubling up between 2015 (1243) and 2017 (3731). Figure 12 below shows that there were more female children with special needs enrolled at secondary school level over between 2014 and 2017.

Figure 13: Number of students with Special Education Needs enrolled in secondary schools by Sex, and Year, 2014 to 2017



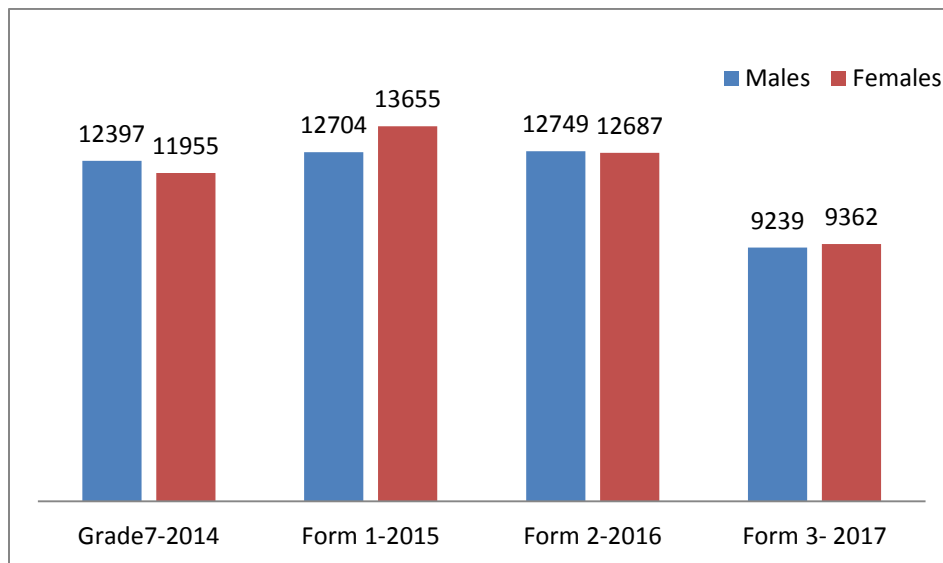
1.1.3.3 Barriers to completion of basics education

The education system in the country is confronted with low completion rates of basic education among school children. This is mainly caused by the fact that some of the pupils drop out of the school system before completing and they never rejoin the system. The Annual education report, 2017 show that about 8,000 pupils who register in the school system do not complete Grade 7. Children drop out from school because of a number of reasons that cut across a number of socio economic factors. These include health, family responsibilities, poor academic performance leading to repetition, age of the pupil, inability to pay fees, pregnancy and indiscipline. Inability to complete basic education contributes to low educational attainment which compromises the competitiveness of the individual to employment opportunities to decent work and low empowerment. It also widens the gender inequality gap in many of the development fronts with women affected more than their male counterparts.

Data from the Education Statistics Report shows that a significant proportion of pupils (both boys and girls) are not able to complete basic education. When we consider the number of the 2014 Grade 7 cohort of pupils enrolled in primary school (24,352), only 17,754 (66% of boys and 78%of girls) proceeded into Form 1 in 2015. In view of the high repetition rates particularly in Forms 1 and 2, the enrolment rates appear increased. If we discount those that repeat each

year thereafter including in Form 3, the proportion of the 2014 grade 7 pupils reaching Form 3 would be approximately less than 50%. Figure 13 shows the trend in the progression of the 2014 Grade 7 progression through secondary level.

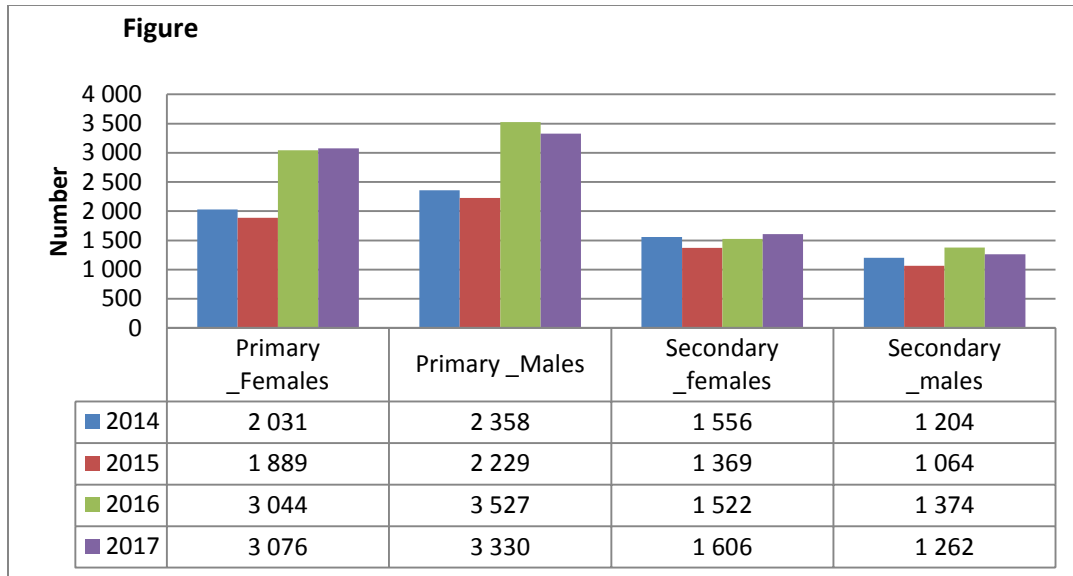
Figure 14: 2014 Grade 7 cohort progression to Form three between 2015 and 2017



Dropout rates

School dropout is a challenge that is prevalent among boys and girls in both primary and secondary school levels and it is more so for boys in primary school compared to girls and vice versa in secondary school level. See Figure 14. The number of drop out increased in primary school in 2016 and 2017 among both boys and girls in primary level. At secondary level a slight increase in the number of drop outs among girls.

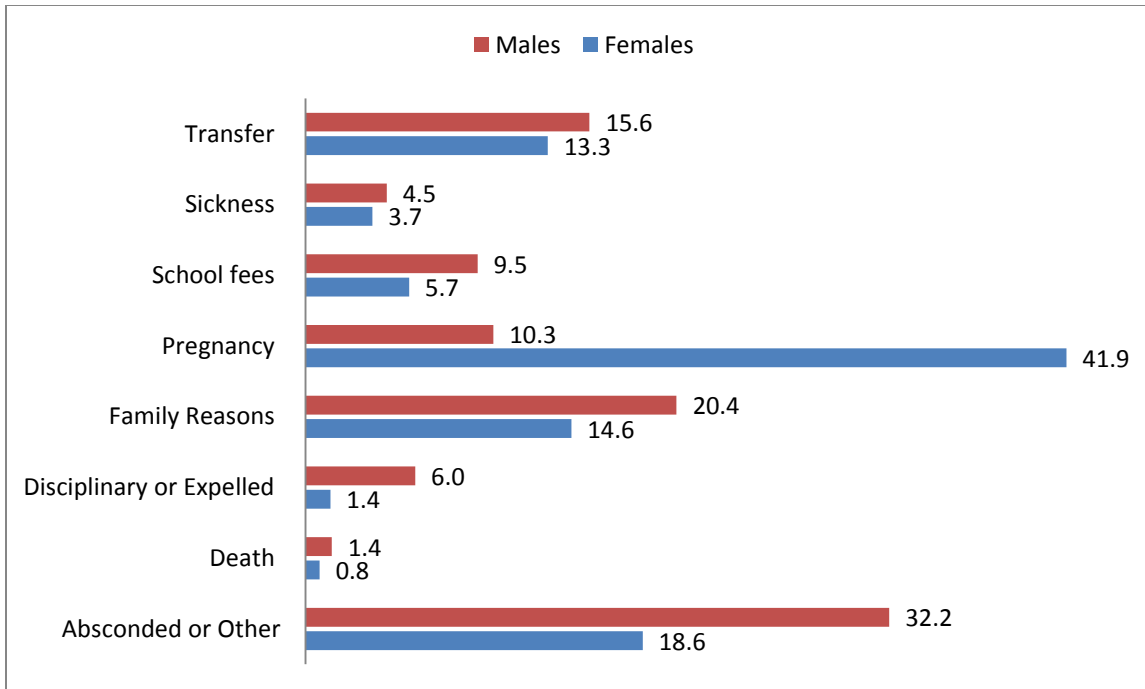
Figure 15: Frequency distribution of number of pupils dropping out of primary and secondary school level by Sex, 2014-2017



The major reasons girls drop out of secondary school in 2017 are pregnancy, absconding family issues and transfer. Boys on the other hand mainly absconded, family reasons and transferred to other schools (See Figure 15 below). Pregnancy accounted for 10% of the drop out among boys at this level followed by absconding, family reasons and transfer in that order. The proportion of girls dropping out due to pregnancy was high at about 42 percent in 2017.²⁸ The frequency of Pregnancy among girls at secondary level remain constant at around 41% between 2014 and 2016 whilst among boys the frequency averages 10% over that same period.

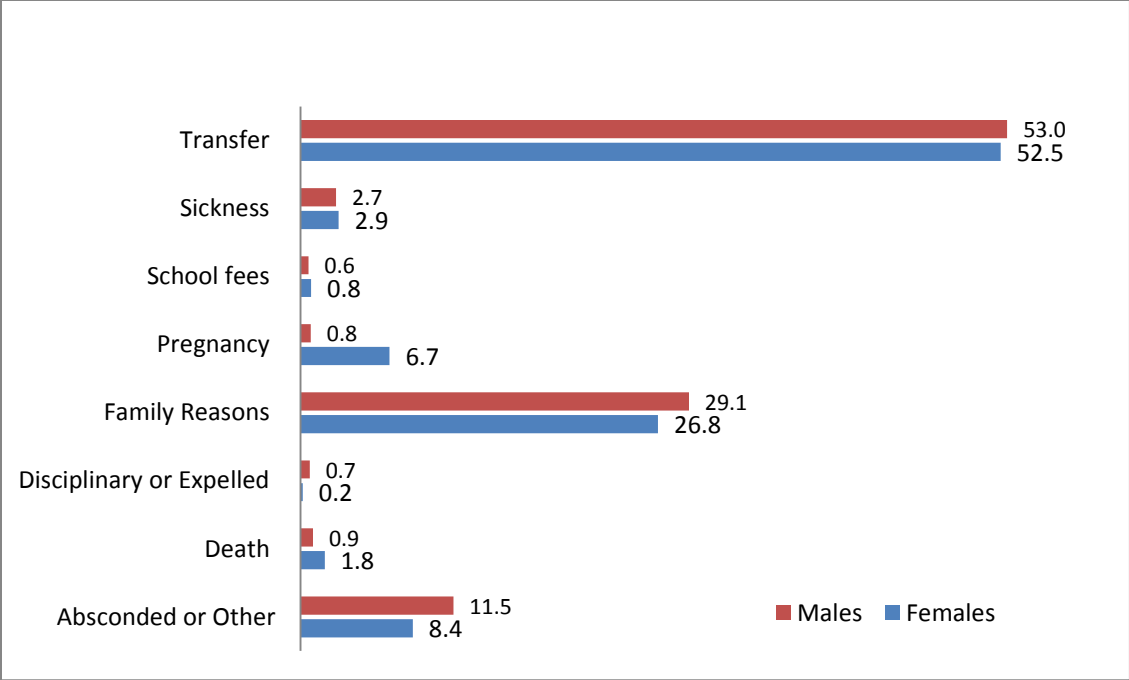
Figure 16:Percentage distribution of pupils who drop out from secondary level by sex and reason for drop out in 2017

²⁸ Ibid



At the primary school level the reasons for drop out are similar to those at secondary level and about half of the boys and girls who dropped out of school in 2017 transferred to other schools; about a third left because of family reasons and 10% absconded (see Figure 16). Pregnancy is also a challenge in primary school level as about 8% and 1% of the girls and boys respectively, dropped out because of pregnancy. Pregnancy appears to be declining from 10% in 2014 to 6.7% in 2017 among pupils at primary level.

Figure 17 : Percentage distribution of pupils who drop out from primary level by sex and reason for drop out in 2017



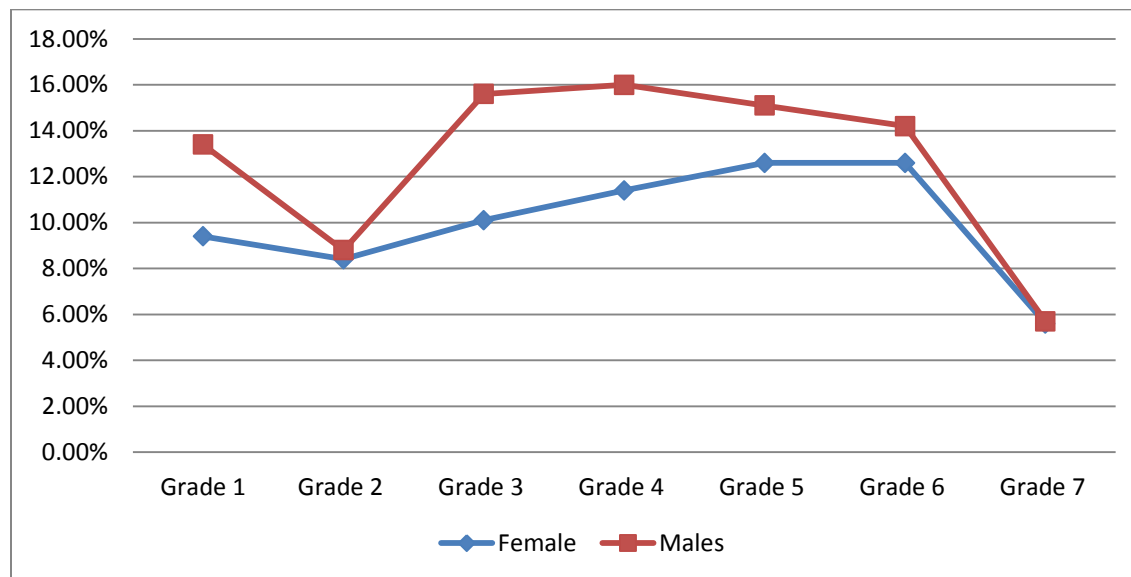
Repetition rates

The average repetition rate exceeds the national benchmark of 10 percent, and stands at about 15 percent in primary school level. The problem affects both boys and girls although boys are more affected than girls (See Figure 17) At the primary level repetition rates are higher between Grades 3 and 6 (see Table 8 and Figure 17 below).

Table 7: Repetition rates among pupils in Grades 1 to 7 in 2017

Grade	NO. of Repeaters 2017	Enrolment 2017	% repeaters of enrolment
Grade 1	3,884	32,543	12
Grade 2	4,028	32,493	12
Grade 3	5,372	35,837	15
Grade 4	5,573	36,764	15
Grade 5	5,739	36,021	16
Grade 6	5,460	34,938	16
Grade 7	1,879	28,855	7
Total	31,935	237,451	13

Figure 18: Repetition rates -primary school level by sex of pupil - 2017



At secondary level repetitions rates are high than the national benchmark. Table ... shows the distribution by region and it is evident that repetition rates are higher in the Shiselweni region among both males and females (see table...).

Table 8: Percentage Repetition in junior secondary school level by Year, Sex, Region and 2014 – 2017

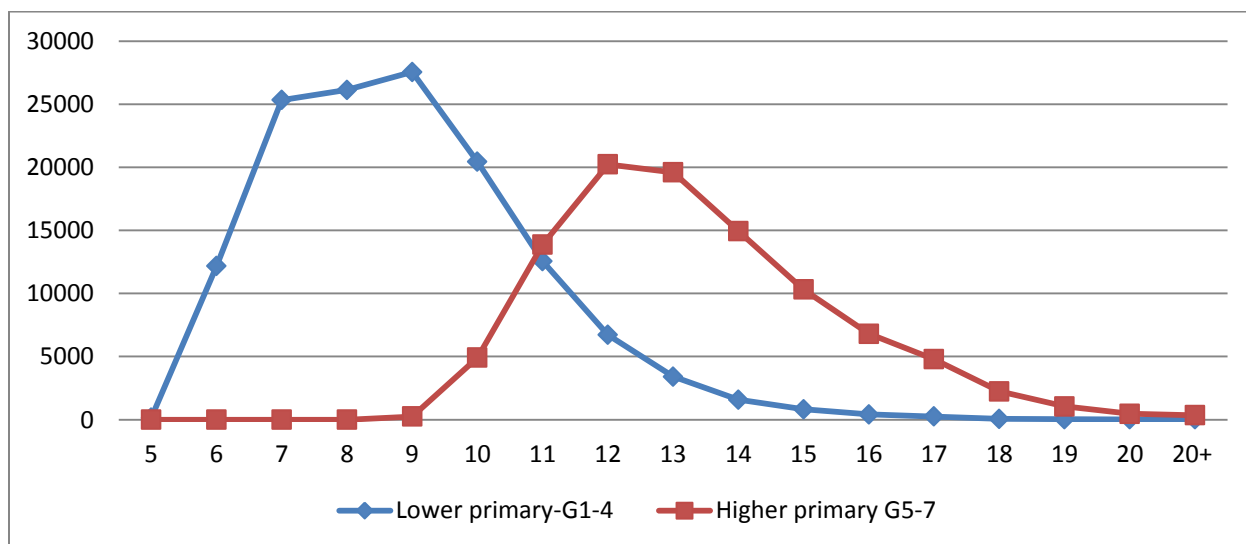
Sex	Region	2014	2015	2016	2017	Total
Female	Hhohho	12.5%	12.6%	11.1%	9.8%	11.4%
	Lubombo	13.1%	12.8%	14.0%	11.8%	12.9%
	Manzini	13.0%	7.4%	7.0%	8.1%	8.8%
	Shiselweni	17.4%	16.1%	17.8%	15.1%	16.6%
Female Total		13.8%	11.8%	11.8%	10.7%	12.0%
Male	Hhohho	13.8%	15.1%	12.5%	12.5%	13.4%
	Lubombo	16.3%	13.3%	15.0%	15.0%	14.9%
	Manzini	14.6%	8.2%	8.3%	9.5%	10.0%

	Shiselweni	18.3%	18.5%	19.9%	16.8%	18.4%
Male Total		15.5%	13.4%	13.2%	12.9%	13.7%
	Grand Total	14.7%	12.6%	12.5%	11.8%	12.9%

Delayed entry into the school system

Evidence from the education statistics show that in all the levels of education there are over aged pupils. According to official age limits, the majority of pupils in primary level should be 12 years and less whilst at the secondary level pupils should be 13 to 15 years. Data shows that old but there are pupils as old as 23 years old in both primary and secondary levels. It is this over agedness that compromises enrolment rates and other efficiency indicators at this level of education. Over agedness is a result of repetition at primary levels. Data suggested that there we children as young as 12 years old in form 1, to as old as 25+ in form 3. It suggested that in some grades the age difference could be more than 10 years. This is worrisome as offers challenges to some content maybe taught because of these varying ages. Figure 18 below shows the distribution of pupils by single year age in primary level where whowere (over aged- 10 to 20+ years) pupils in Grades 1 to 4 where the expected age is nine (9) years or younger. The Annual Education Statistics Report of 2017 notes that over aged pupils are more likely to repeat a grade and in turn repetitions contribute to the high dropout rates.

Figure 19: Number of pupils enrolled in primary school levels by age in 2017



1.1.3.4 Wash situation in schools

The quality of the school environment plays an important role in determining the quality of the education. The factors include, among others, availability of basic amenities (water and electricity) learning materials and availability of qualified staff to teach.

Availability of safe water to drink is important in ensuring that the learners have that access. Water is required to facilitate adequate hygiene and nutrition. For the girl child it further ensures hygiene during school hours particularly during menstruation.

At national level there has been very minimal change in terms of coverage of adequate safe water in the schools as the situation improved by only 2% over that last four years. The Shiselweni region, whilst it had the lowest coverage, there coverage declined by 2 percentage points. See Table 10

Table 9: Availability of Safe drinking water in Primary schools in the country by region 2014-2017

Region	2014		2015		2016		2017	
	No	Yes	No	Yes	No	Yes	No	Yes
Hhohho	24	76	20	80	19	81	18	82
Lubombo	18	82	20	80	19	81	17	83
Manzini	15	85	14	86	13	87	13	87
Shiselweni	34	66	34	66	32	68	36	64
Total	22	78	21	79	21	81	20	80

Setbacks and challenges in education and training

- Low basic education coverage with fewer women completing the 10 years of basic education. The majority of women leave school without the necessary level of educational attainment that enables them to effectively compete in the job market
- Few women are enrolled in the ICT/Science fields of study including at the tertiary level of education.
- inadequate quality of school environment to adequately meet the needs of women and girls
- Entrenched beliefs and practices that perpetuate gender stereotype.

1.1.4 Health including SRH and rights

The Kingdom of Eswatinini prioritized health and has put in place a health policy framework that seeks to ensure universal health coverage for all. According to the Service Availability and Readiness Assessment (SARA) report of 2017, the country had 327 health facilities which were found to have differences between themselves regarding service availability and readiness. The report shows that 81% of facilities had basic amenities for general services available, of which, 74% were ready to provide the service; 74% of health facilities had basic equipment available, only 81% were ready to use the equipment; 75% of facilities had standard precautions for infection control

available, of which 81% were ready to use, 60% of health facilities had diagnostic capacity, of which 60% had it ready to use and 60% of health facilities had on average all essential medicines in

Maternal, neonatal, adolescent and Family planning

- *Adolescent and youth SRH&R*
- *Family Planning*
- *Abortion and post abortion care*
- *STI, HIV and AIDS*
- *Infertility*
- *Cancer of the reproductive health*
- *Gender and SRH including GBV*

the facility, of which 33% were ready to use. This means that access to services is compromised by availability and readiness to provide the services.

The Sexual Reproductive health and rights Policy framework focuses on the areas as shown in the Box 1. Access to SRH services improved as health facilities providing SRH services increased from 227 in 2013 to 253 in 2017

Health services sites that

provide Family Planning *Box 1: Policy focus for the Eswatini SRH Policy-2013*

increased from 190 in 2013 to 189 in 2017 and service availability was found in 75% of the sites. Service availability differed by regions as follows: Shiselweni-87% Lubombo-80% while Hhohho-71% Manzini-74%. In terms of readiness for family planning services 38% of the facilities were found to have all the items required for providing the service. Overall the readiness score was 82%. Whilst most of the facilities were ready to provide FP options, fewer reported having the appropriate trainings, guidelines and a complete set of items for family planning services availability.

1.1.4.1 Contraceptive prevalence rate

Over the last 10 years the contraceptive prevalence rate (CPR) steadily increased from 50.6% in 2007 to 66.1% in 2017. The CPR by age group is shown in Table 11 below. Whilst the CPR is increasing for all the age groups it still remains lower for the women below 20 years and those older than 44 years, in the rural areas and particularly women residing in the Shiselweni Region, with low educational attainment and poor.

Table 10: Contraceptive prevalence rate among women who are married or in a union, aged 15-49 (Any method) 2007-2014

	Periods
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Age group	2007 ²⁹	2010 ³⁰	2014 ³¹
15-19	42.8	54.2	48.9
20-24	46.7	67.1	68.4
25-29	53.7	68.9	74.1
30-34	64.9	74.3	73.3
35-39	56.0	71.2	73.3
40-44	42.3	63.0	56.7
45-49	34.4	36.6	40.6
National	50.6	65.2	66.1

1.1.4.2 Unmet need for Family planning

The proportion of women of reproductive age (aged 15-49 years) who have their need for family planning satisfied with modern methods is high (66.1%) in the Kingdom of Eswatini. However the total unmet need for family planning remains relatively high at 15%³². The Unmet need for family planning increased from 13% in 2010 to about 15.2% in 2014. Based on the 2014 data, the total unmet need for family planning was higher among women in the Lubombo region (16.7%), among adolescents (24.3%), no education (22.4%) and primary education (18.7). in terms of the wealth Unmet need was above the national average for all the quintiles save for the richest groups³³. The older women in the age groups 40-44 and 45-49 the unmet need for family planning is higher than the national average at 18.1% and 21.8% respectively. Older women have a need for limiting which the younger women have a need for spacing (See Figure 20).

Figure 20: Unmet need for limiting births and spacing pregnancies by age group - 2010 and 2014

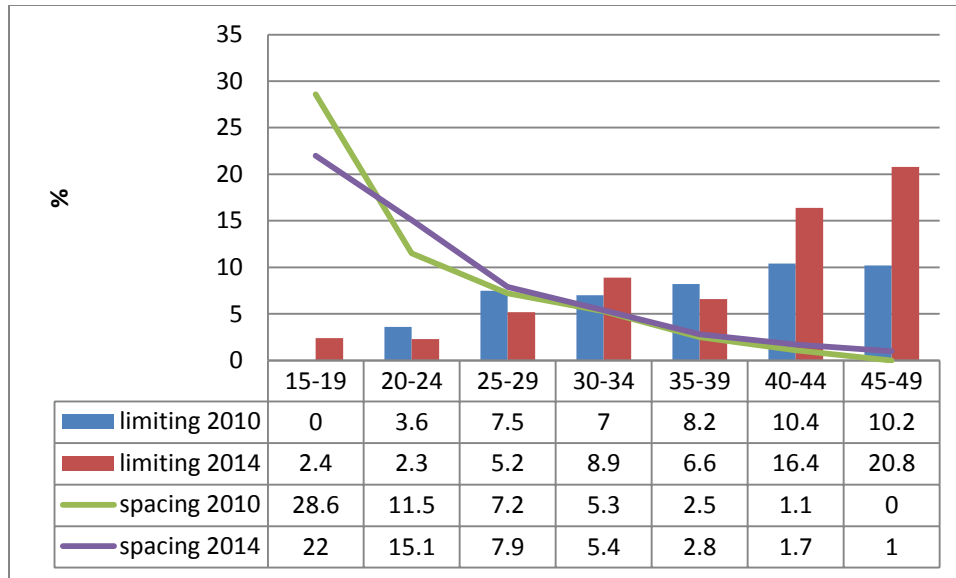
²⁹ Swaziland Demographic and Health survey, 2007

³⁰ MICS, 2010

³¹ MICS, 2014

³² Ibid

³³ MICS, 2014

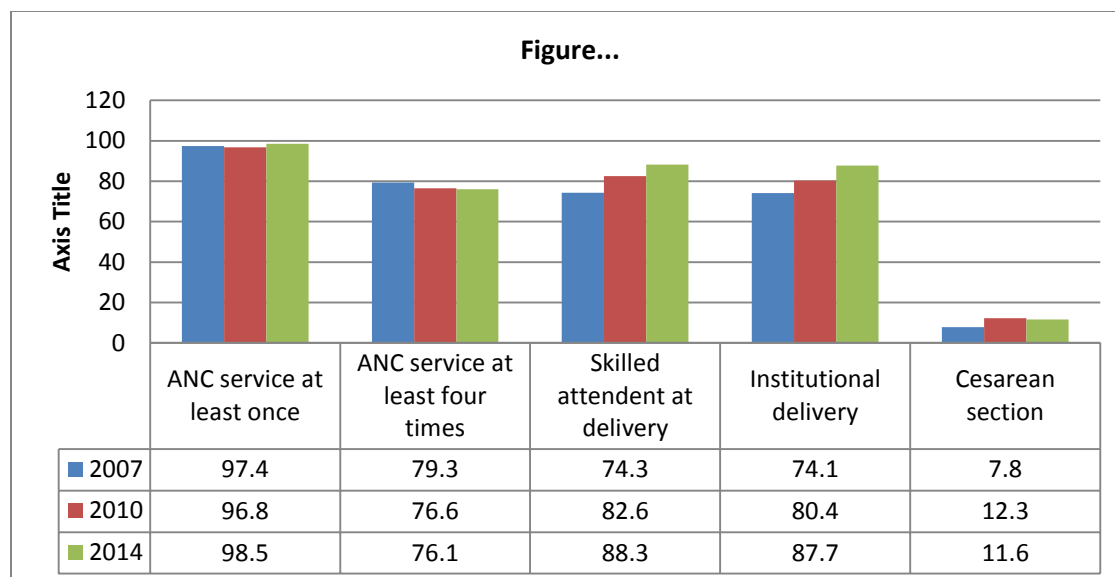


Notably, the need for spacing appears reducing between the two periods save for women 20 - 29 years. Of concern is that the need for spacing appears increasing for the women older than 40 years.

Maternal health

The country has made significant progress in sustain high and increasing access to maternal health services by women and adolescent girls. The figure below shows the trends in utilization of ANC, Health facility delivery and availability of skilled attendant at birth.

Figure 21: Maternal health indicators by year- 2007-2014 - Sources-SDHS (2007), MICS (2010&2014)



The maternal mortality ratio in Swaziland is has remained high at 593 per 100 000 live births (CSO, 2012). The contributing factors to the high maternal mortality include delay in seeking medical attention during emergency delivery, delay in providing emergency delivery assistance, post abortion complication and effects of HIV and AIDS. Maternal deaths among HIV positive women are high and it is referenced at 60%. Generally data on maternal mortality that is disaggregated by age, parity, place of residence and socioeconomic status is not available.

1.1.4.3 Adolescent and young girls

Health services are open for access by any person who requires them. The SRH policy provides a policy option that covers the SRH needs of adolescents. Of the total health facilities, 83% offer adolescent SRH services which include contraception, maternal services, ART services and SRH information. The 2017 Service Availability and Readiness Assessment (SARA) found that - On average, 72% of the 209 facilities that provided adolescent health care services were ready to provide the services based on availability of tracer items - only 36% had all tracer items. Facilities had lower readiness for guidelines for adolescent service provision (48%) and trained staff (60%). Regional differentials for availability of services and readiness for provision of services varied and were shown in the table below.

Table 11: Availability and readiness of Adolescent SRH services in the Kingdom of Eswatini (SARA, 2017)

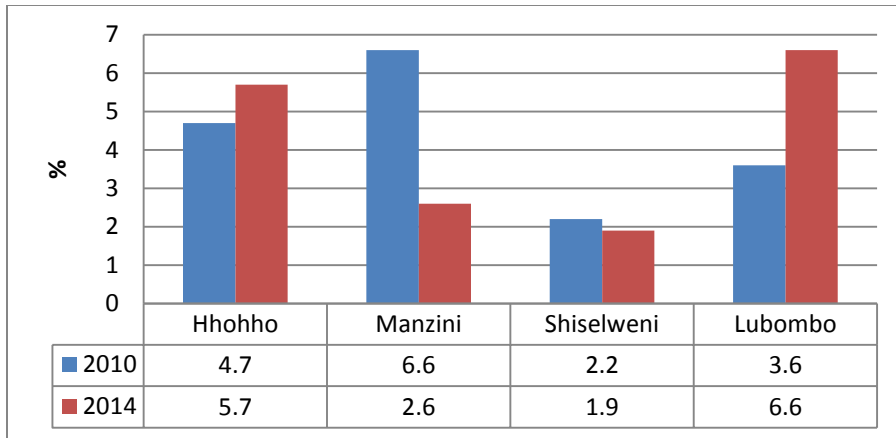
Region	Availability	Readiness
Lubombo -	90%	81%
Shiselweni -	90%	76%
Hhohho-	81%	70%
Manzini-	77%	65%

1.1.4.4 Early marriage

Child marriage is low and on the decline at 4% in 2014 from 10.9 % in 2010. In the rural areas child marriage is higher but is declining as well from 13% to 4.1% in 2010 and 2014 respectively. In urban areas it reduced by almost half from 6.3% to 3.4% in the same period. Children who have no education are at higher risk of being married early as 7.8% were married in 2014³⁴. Early marriage is not a problem among boys. Figure 21 below presents the situation in the country among girls 2010 compared to 2014.

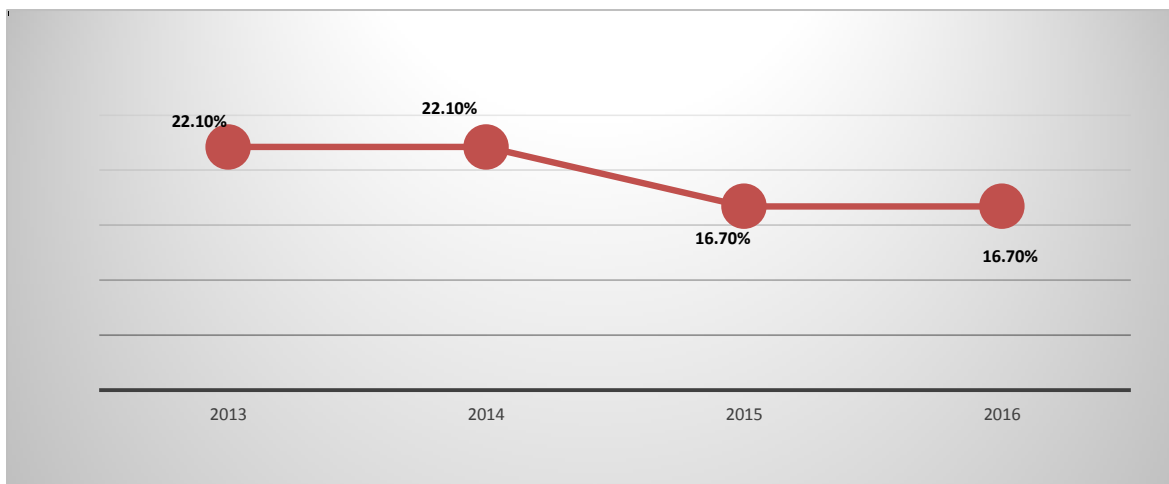
Figure 22: Early marriage (Marriage before 18 years) among women (2010-2014) - Sources MICS

³⁴ MICS, 2010 and 2014



Early child bearing is somewhat a challenge in the country. In 2010 and 2014 the proportion of young girls who had stated child birth remained the same at about 17%. It is however higher among the poorer (25%) and lowly educated young girls (26%). In 2014 more affluent girls (17.4%) in the 4th quintile had stated child birth. Adolescent fertility rates are high in the country in 2014 the adolescent birth rate was 87 per 1000 women aged 15 – 19 years (MICS, 2014). Of the total births among women, about 20% are contributed by adolescents in the country. The unmet need for family planning and particularly for child spacing is highest among this group. The Figure 22 below shows the proportion of adolescents giving birth over the referenced period.

Figure 23: Percentage of pregnancies among adolescents (programme data 2013-2016)



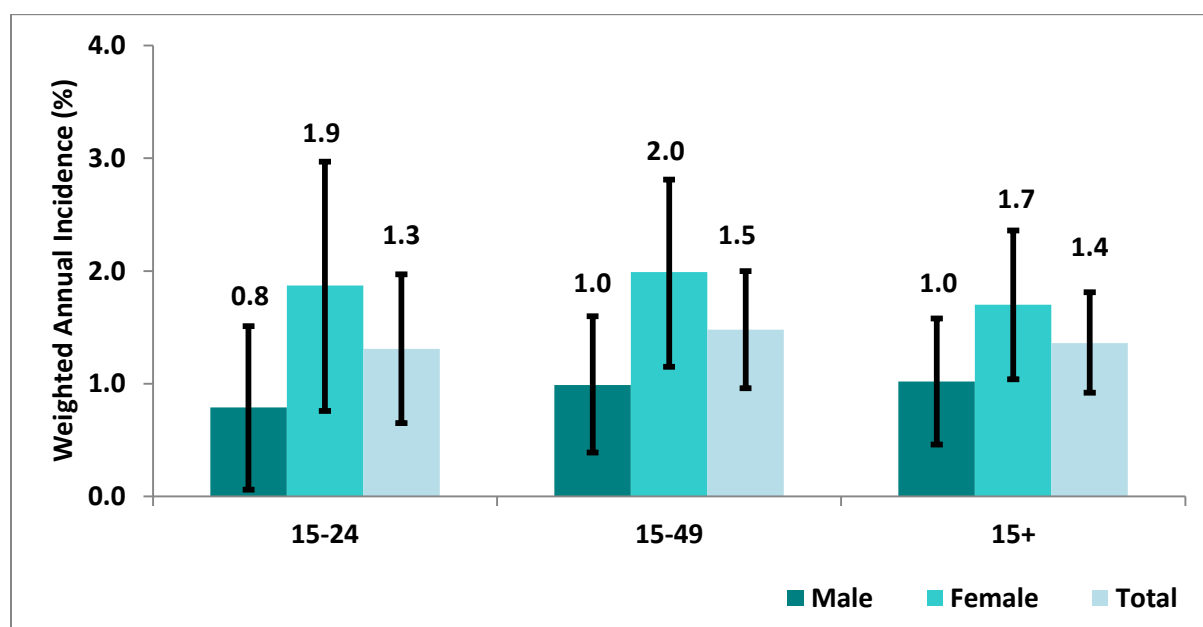
1.1.5 Women aged 15-49 and HIV and AIDS situation

The coverage of HIV services has increased immensely over the last couple of years with more investments made towards the implementation of the HIV information and services in both the Community and the health sector response. The health sector decentralized HIV service delivery with more health facilities offering comprehensive HIV services over the past few years. By the end of 2017 there were more than 221 health facilities providing HTS, 151 health facilities providing PMTCT services, and 176 health facilities providing ART services. About 111 health facilities were providing HIV/TB collaborative services.

1.1.51 HIV incidence and new infections

The country has made significant strides in reducing the burden of HIV in the general population. Overall among 15-49 years population HIV incidence declined from 2.9% (2011) to 1.36% (2016-17) which represents a 40% reduction. Among women 15 and above the incidence reduced to 1.7% and 1.02% among men. The figure below (Figure 23) shows HIV incidence by age group and sex for people 15 years and above.

Figure 24: HIV incidence by age and sex (SHIMS 2, 2016-17)

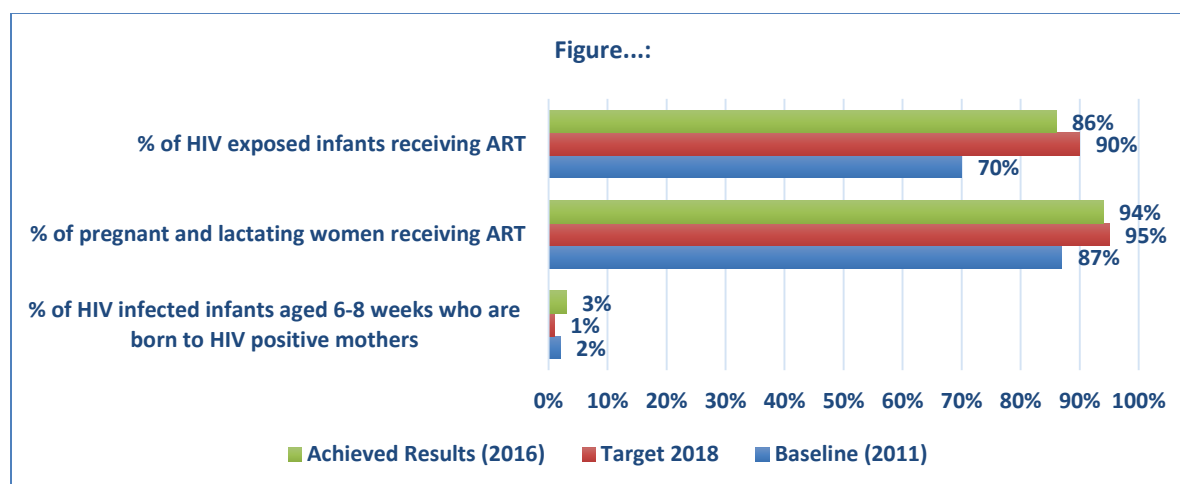


1.1.5.2 Prevention of Mother to Child Transmission

The PMTCT services include HIV testing and counselling, prevention of HIV transmission among pregnant and lactating women, ARV prophylaxis to both infected women and exposed infants; counselling and support for safe breastfeeding practices; and referral for long term ART for the child and the mother.

The country has made significant progress in reducing vertical transmission of HIV from mother to baby. Infants receiving ART have increased from 70% in 2011 to 86% while pregnant and lactating women on ART have increased from 87% to 94% which reflects the scale up of PMTCT services over the years. However, there has been an increase of HIV infected infants at 6-8 weeks from 2 to 3% between 2011 and 2016. Refer to Figure 24 below.

Figure 25: PMTCT Coverage and service outcomes, Source-2016 program data

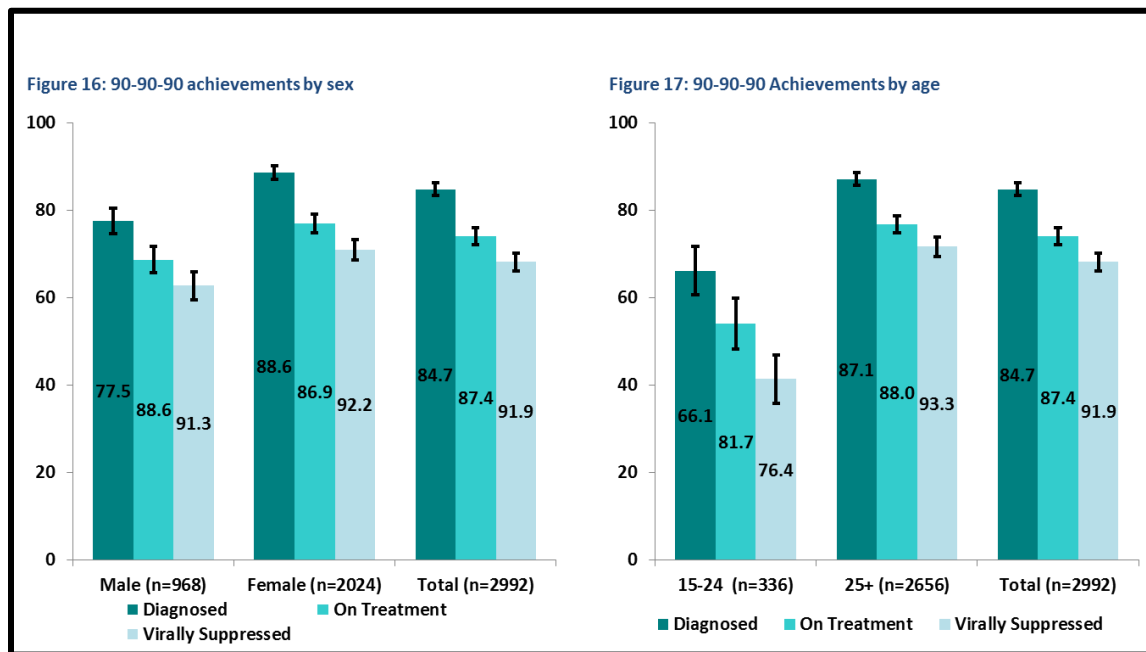


1.1.5.3 Treatment care and support

In terms of coverage of HIV testing and people knowing their status as well as taking up treatment, more women than men report access to services. In 2017, The Swaziland HIV Incidence Measurement Survey found that 84% of the PLHIV 15 years and above report knew their HIV status (88.6% females and 77.5% males). Of these 87.4% self-reported to be on ART (86.9% females and 88.6% males). Further evidence show that among the PLHIV 15 years and above who self-report to be on ART, 91.9% were virally

suppressed including 92.2% of HIV positive females and 91.3% of HIV positive males. When based on all PLHIV with viral load results (irrespective of HIV-positive status and ART status, a total of 73.1% of PLHIV are virally suppressed. These comprise 67.6% men and 76.0% women (See Figure 25).

Figure 26: The ART treatment cascade situation by age and sex (SHIMS 2016-17).



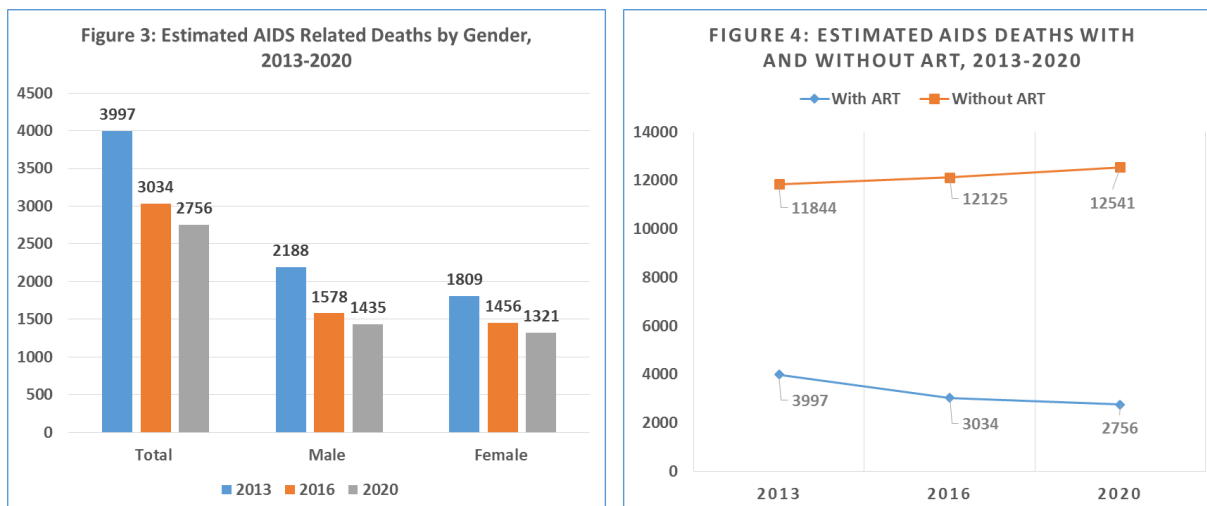
Evidently the national HIV response is making an impact on improving the quality of life for the population including women and young girls, although more work needs to be done to sustain the results. The results among men and among adolescents and young people 15-24 are lower compared to other groups. These two groups should be prioritised.

1.1.5.4 HIV related deaths

The evaluation of the Extended Strategic Framework on HIV (eNSF) notes that ‘Deaths from AIDS remain high although a declining trend is observed. Annual AIDS related deaths declined from 3,997 in 2013 to 3,034 in 2016 (Spectrum, 2015), a 24% reduction. If this trend is maintained up to 2020, annual AIDS related deaths decline by 31%. Cumulatively, about 63,000 lives have been saved between the ART program launched in 2003 and 2015’. The report further notes that AIDS deaths are higher among men primarily because men often report late for initiating ART. There is further evidence to show that ART has reduced AIDS related deaths. Figure 26 shows the projection of death overtime comparing AIDS

deaths with and without ART. Without ART, AIDS deaths assume an increasing trend which means that antiretroviral therapy improves the survival of PLHIV over time.

Figure 27: Projected AIDS related deaths 2013-2020 and estimated death with or without ART – 2013-2020

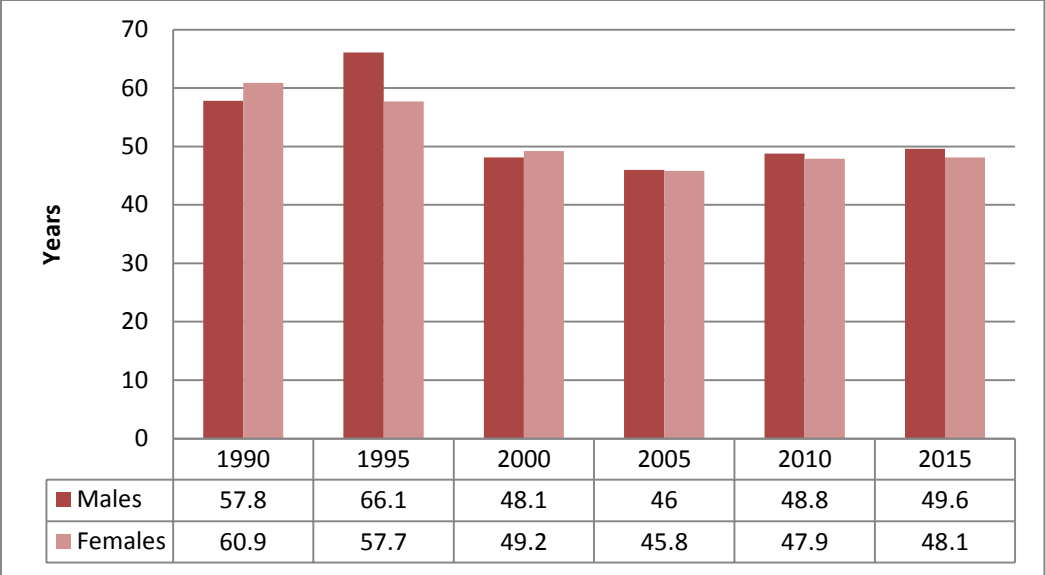


1.1.5.5 Life expectancy

The HIV epidemic has adversely affected the country's social and economic gains, including reversing life expectancy in the last 2 decades. Life expectancy decreased by 10.6 years between 1990 and 2015, however, in the last 8 years the decline in life expectancy appears to have been on halt and marginal gains are being observed. Life expectancy for men increased from 48.8 years in 2010 to 49.6 years in 2015 while for women the years increased from 47.9 to 48.1 in the same period³⁵.

Figure 28: Life expectancy by sex 1990-2015 (Source- Human Development report, 2016 quoted in the eNSF evaluation report, 2018)

³⁵Human Development Report, 2016



Setback and challenges in Health (SRH and Rights)

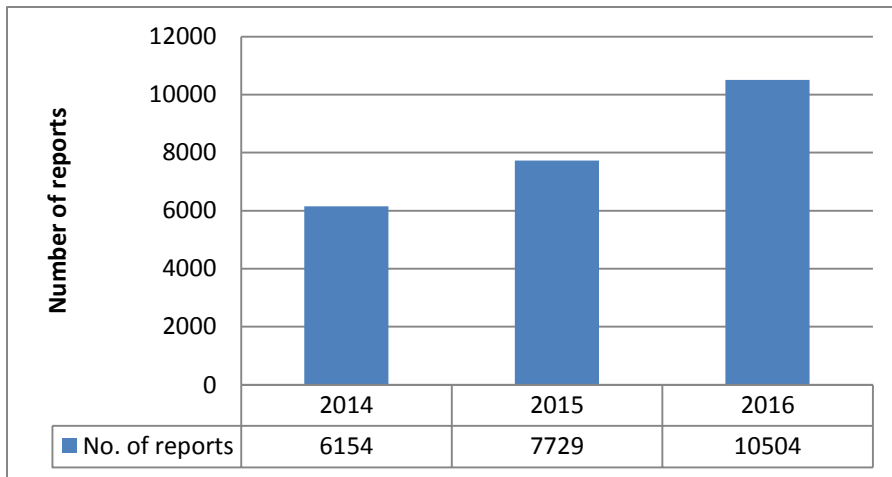
- Inadequate access to SRH service for women and youth particularly the poorer and less educated adolescents girls in the rural area
- High levels of new HIV infections among younger women aged 15-24 years
- Low readiness of Health service points for SRH services
- Entrenched beliefs and practices leading to preteen and teenage child birth.
- Limited access to SRH and Rights services

1.1.6 Gender base violence

Violence, in all forms, continues to be a challenge affecting mainly women, children and other vulnerable groups in the country. Although there is no recent national population based survey data that is available to quantify the prevalence of Violence in the country, a National Surveillance System on Violence which routinely collects data on reported cases of violence exists. The system

collects data from a few service points in all the regions of the country. The data shows that reports on violence are increasing over the years, albeit underreporting and about 650 cases are reported every month. More women (73%) than men (27%) report incidences of violence. The figure below presents data from 2014 to 2016

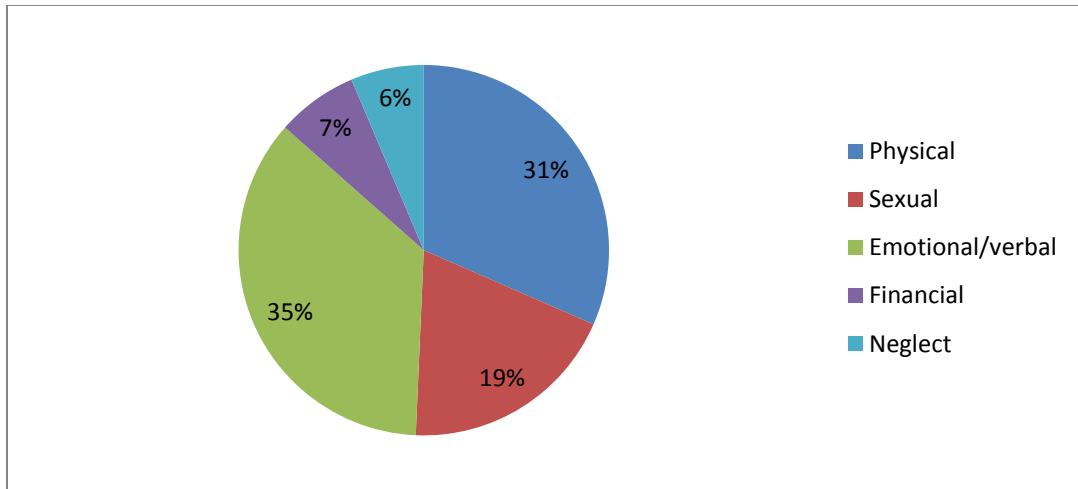
Figure 29: No. of cases of violence reported through the National Surveillance system - reports



It is also worth noting that Sexual violence, physical and emotional violence remain high according to the Surveillance report³⁶, Below Figure 29 shows the proportion of cases by type/form of violence and the distribution of reported cases by sex of the survivor

Figure 30: Percent Distribution of GBV case reports by type of violence. 2017

³⁶National Surveillance System Annual Report, 2016



Most acts of violence are perpetrated by intimate current or former partners who account for 46% of all cases, followed by other family member/relative (16%) and then mother/father (9%). Strangers accounted for only 8% of reported cases. Most acts of violence occur within the home setting.

Setback and challenges in the response to Gender based violence

1. High gender base violence affecting women and children
2. In adequate legal framework and programmes to prevent and respond to the high GBV prevalence
3. Weak systems for reporting and monitoring of GBV
4. Entrenched beliefs and practices that perpetuate violence in society

1.2 PRIORITIES FOR ACCELERATING PROGRESS FOR WOMEN AND GIRLS,

The country implemented a number of initiatives aimed at accelerating progress for

Box 2: *Guiding Principle:*

women and girls over the past five years with special focus on policy & legal reforms and strengthening of sectoral programmes. Some of the areas prioritised areas include: Political participation and representation; Digital and financial inclusion for women; Quality education, training and life-long learning for women and girls and Access to health care, including sexual and reproductive health and reproductive rights.

1.2.1 Quality education, training and life-long learning for women and girls

The Government of Eswatini revised and adopted the Education and Training Sector Policy in 2018. The revised Policy contextualizes and operationalizes other associated instruments such as the United Nations 2030 Agenda for Sustainable Development and its Goals. The policy focuses mainly on four of the SDGs which are: Quality education (SDG 4), Gender equality (Goal 5) and protection from violence (Goal 16). The Policy further operationalizes regional cooperation and integration instruments such as the African Union's Agenda 2063 for Africa's socio-economic transformation, the SADC Revised Regional Indicative Strategic Development Plan 2015-2020 and the SADC Industrialization Strategy and Roadmap 2015-2063. At the national level the revised policy draws the National Development Strategy (NDS), Strategy for Sustainable Development Inclusive Growth (SSDIG) and related sector strategies. These national frameworks prioritise and promote equal accessibility and availability of quality education to boys and girls.

Equality and protections: ' Every Swazi citizen has equal rights, opportunities and responsibilities and shall be protected from all forms of stigma and discrimination, including those based on faith, culture, gender, disability, orphan-hood, economic vulnerability or HIV status

The policy embodies the country's commitment to inclusive Life Long Learning (LLL) as well as, but it also aspires to ensure access, quality, equity, relevance, efficiency and effectiveness of the education service delivery. The policy goal is " The provision of an equitable and inclusive education and training system that affords all learners access to free and compulsory basic

education and senior secondary education of high quality, followed by the opportunity to continue with life-long education and training, so enhancing their personal development and contributing to Eswatini's cultural development, socio-economic growth and global competitiveness"³⁷. Equality and Protection is one of its guiding principles. The education for sustainable development policy objectives on gender equality purports that – 'To ensure that education and training establishments promote women and girls' empowerment and are peaceful, effective and accountable'. All programmes in the education sector are guided by the Education and Training Sector Policy of 2018 and the Education Sector Strategic Plan 2010-2022. Some of the programs under the strategy include: the Schools as centres of care and support programme (INQABA), The National Education and Training Improvement Programme 2018/19-2020/21 (NETIP 11) and the Comprehensive Life Skills Education (LSE) programme.

The NETIP II seeks to equitably improve skills development in crucial areas of economic growth by continuing to provide and sustain educational grants (FPE and OVC grant) at primary and secondary levels as well as tertiary education scholarship award systems. In addition, efforts have been intensified towards improving access to ECCDE, Secondary, TVET and tertiary education levels. In the last five years the country has sustained implementation of the programme with annual coverage increasing from grade three (3) in 2014 to grade seven (7) in 2018. Currently over 95% of age eligible children have had access to primary education. The country also scaled up scholarships/subsidies for all deserving students enrolling in public TVET colleges. The TVET enhancement project seeks to modernize the TVET programme, including professional development of lecturers, improved infrastructure and equipment to ensure graduates are relevant to the industry

There are policy emphasis on Science, Technology, Engineering and Mathematics (STEM) and this addresses the acutely under-representation of girls and women in those critical areas that matter in development of human capital capacity fit for the 21st Century skills. These skills are critical in driving the knowledge-based economy and the achievement of the socio-economic development of all Swazis. In an effort to increase demand for enrolment in STEM, campaigns are continuously conducted to

³⁷National Education and Training Sector Policy, 2018

sensitize girls to be enrolled in the STEM programmes in all the education levels. Public Private Partnership also facilitates exposure and induction of girls in the STEM fields. Government has prioritized the provision of resources (laboratories, furniture and equipment, qualified teachers and inspections) for effective teaching of STEM.

1.2.2. Eliminating violence against women and girls

The Government of the Kingdom of Eswatini recognizes the need to eradicate violence especially gender based violence (GBV) at all levels for the better quality of life for people in the country. Drastic measures have been taken to address GBV through the enactment of the Sexual Offences and Domestic Violence (SODV) Act of 2018. This act gives effect to international adopted treaties and also gives effect to the national constitution of 2005. The SODV Act deals with sexual offences and domestic violence issues in a non-discriminatory manner by eliminating gender inequalities and providing protection across board but more so for vulnerable persons such as women, children, persons with disabilities. It provides stiffer sentences to deter sexual offences and domestic violence offences in all spheres. Since the 1st August 2018, the courts have received about 203 cases under this Act, and 160 were rape cases. Out of these cases 11 have been concluded and 150 awaiting trial but having received bail, to mention just a few. The law is currently being popularised through awareness raising activities targeting all population groups.

In 2015, the country further conducted a National Study on the Drivers of Violence against Children to determine the drivers of violence against children with a view to inform programming for a national response to violence against children. The study is qualitative and it triggered the ever increasing statistics on violence against children which is 1 in every 3 children raped before the age of 18 years.

In 2016, the country launched the National Multi-sectoral Strategy to End Violence in Swaziland 2017 -2022. It is an overarching framework to guide the different actors in identifying key priorities to be addressed in the fight to reduce the overwhelmingly high prevalence of VAW in the Swazi

population. Subsequently developed and costed Plan of Action on the National Strategy to End Violence in Eswatini 2017-2022.

1.2.3 Access to health care, including sexual and reproductive health and reproductive rights

The government of Eswatini takes priority of all health issues including increasing universal coverage in access to SRH services and rights by women and girls. The Sector has reviewed its Health Sector Strategic Plan (HSSP) 11 and is in the process of finalising the HSSP111 which seeks to accelerate universal coverage of high quality health care services. Although the maternal mortality ratio remains high (593/100 000) the country has performed very well in MNCH related indicators, such as high (88%) skilled birth attendance, 87.8% hospital delivery rate, 98% and 77% ANC attendance by pregnant women at least once and or four times respectively as well as high (89%) coverage of prevention of mother to child transmission of HIV Program³⁸. The impact of HIV and AIDs on women and girls, although effectively mitigated, retards the progress towards the vision of the health sector.

The country continues to implement its SRH and Rights policy which focuses on maternal and neonatal health services (MNH) which includes antenatal care (ANC), obstetric emergencies, family planning (FP) and adolescent youth health services³⁹. The National SRH Strategy 2014-2018 provides a national roadmap in the provision of MNCH services at national, regional and health facility levels. The strategy envisions a “A healthy and well informed population with universal access to quality SRH services that are sustainable and which are provided through an efficient, effective and rights based system”⁴⁰. In the last five years the Ministry of Health, with its partners scaled up SRH and Rights programmes for women and adolescents. The adolescent SRH & R subcomponent was strengthened with tools and evidence to ensure the general SRH services are youth and adolescent friendly.

³⁸ SRH Annual report, 2017

³⁹ Swaziland SRH Policy, 2013

⁴⁰ SRH strategy 2014-18

As a result of the increased risk of HIV transition among particularly adolescents, the health sector continued to scale up Integration of HIV/AIDS into SRH services and vice-versa. In an effort to systematically implement the integrated services a number of guidelines on maternal, neonatal child, adolescent health service provision were developed and rolled out to all health facilities. Standards for delivering adolescent and youth friendly health services were also developed and health service providers were trained on the application of the standards. To ensure that age appropriate and culturally sensitive adolescent services and information are provided, research on the Socio-cultural factors affecting or promoting adolescent and youth SRHR service uptake was undertaken to inform the development of the standards

1.2.4. Political participation and representation

Women's participation and representation in politics and positions of influence remains a major national priority of the country considering the fact that women's representation in parliament over the last few parliaments failed to meet the target of 30% as provided for in the national constitution. In this regard, the country then enactment of The Election of Women Members to the House of Assembly Act, 2018 that gives effect to Section 86 and 95 of the 2005 National Constitution which states that if it appears that the female members of the parliament are less than thirty percent (30%), the house shall elect not more than four women on a regional basis in accordance with the provision of Section 95 of the constitutions. In the 2018 elections, women's representation in parliament was low at 20% and the Elections and Boundaries Committee then evoked the law and the due process resulted in an increase to 22% representation of Women in Parliament in 2018. As such, women's presentation in parliament has shown increase from 14% to 22% between the previous (10th) and the current (11th) parliaments respectively.

Government, in collaboration with partners, developed and launched a Media advocacy strategy in May 2018 coordinated by the Department of Gender and Family Issues. The strategy was implemented with a view to sensitise and educate the population, particularly women to actively engage in the parliamentary elections process from an informed base. The main strategies used in to implement the strategy was an interactive electronic media (television) based program dubbed Embili Kanye Kanye. The show managed to reach out to masses in the country and it provided an

opportunity for the population to reflect together and openly on the social issues that have an influence on the women's participation in the parliamentary elections. Although fewer women were ultimately voted into parliament, it was encouraging to observe that compared to the previous (2013) primary elections results, more women were nominated to stand in for elections into parliament in 2018.

1.2.5. Digital and financial inclusion for women

The Kingdom of Eswatini developed and adopted the Swaziland National Financial Inclusion Strategy (2017 – 2022) that is set to contribute to poverty alleviation by enabling alternative channels to serve the poor. The major aim of the Strategy is to ensure the “delivery of financial services and products in a way that are available, accessible and affordable to all segments” of the country's populace. The target is to “grow adult access from 43% to 75% and reduce the excluded from 27% to 15% by 2022. The target will be achieved by expanding mobile money services (e-money) increasing usage of banks, reducing risks in management of financial services and devising alternative ways of serving the poor. The strategy targets the un-served or underserved in rural areas, women & the youth and Micro, Small & Medium Entrepreneurs including in the agriculture sector. Currently women, rely on friends and relatives to obtain loans for their businesses or and make savings through cooperatives and saving scheme to create revolving funds to support their businesses

The Strategy will facilitate the participation of Women and the Youth Entrepreneurs in economic activities, particularly women in the Informal sector of the economy who often lack access credit for business start-ups and growth. Studies reveal that the Informal sector provides employment to 40.2 percent women compared with about 25.5 percent men⁴¹.

The strategy also purports to establish Mobile Money Services for the unbankable sector/informal sector of trade that will facilitate savings and procurement of services and products including the remittance of money in-country and across borders. Cross border remittances benefit vulnerable groups (including women and girls) who receive money from family members who could be working away from home and outside the country.

⁴¹FinScope Survey, 2014

According to the National Financial Inclusion Strategy, the future plan is to disaggregate data and monitor impact of access to financial services by women.

Furthermore, the country crafted the **Citizens Economic Empowerment Bill** to enable equal participation of women and men in economic transformation. The Bill seeks to among other issues, “promote gender equality in accessing, owning, managing, controlling and exploiting economic resources”.

Groups of women experiencing multiple and intersecting forms of discrimination

1. Women living with disabilities
2. Young women
3. Widows rights

1.3. Prevention of multiple and intersecting forms of discrimination and promoting the rights of women and girls

In the last five years the country took special measures to prevent discrimination and promote rights of women and girls who experience multiple and intersecting forms of discrimination as follows: Women living in remote and rural areas (*urban/rural divide and low opportunities for*

employment), Women with disability (*disability and being female*), younger women (*age*), Older women (*age*) and women in humanitarian settings (*crisis*). The measures taken cut across legal and policy reforms and implementation of programmes

1.3.1 Women with disabilities

The Kingdom of Eswatini enacted The Persons with Disabilities Act of 2018 and a National Disability Policy which seek to protect persons with disabilities (PWD) in line with section 30 (1) and (2) of the National Constitution. The Constitution provides that Persons with disabilities have a right to respect and human dignity and charges government and the society to take appropriate measures of ensuring that those persons realize their full mental and physical potential.

With the Act therefore, the country seeks to take appropriate non-discriminatory measures to improve the socio-economic status of all groups especially women with disabilities and ensure that all persons with disabilities have equal access and opportunities to education, health and other services at all levels. The Act further establishes a National Directorate which is an institution that will manage, coordinate and mainstream issues including skills development specifically for those with disability. The country is in the process of developing regulations and guidelines for this Act.

The Disability Act 2018 section 30 ensures that persons with disabilities (especially women) shall have access to assistance including in humanitarian settings. Whereas section 31 ensures that PWDs (especially women) shall have access to public facilities, amenities and services and buildings. Section 32 on the other hand assures PWDs (especially women) shall have access to transport facilities provided to the public and section 33 assures access to health on an equal basis. Section 34 assures access to education and Section 35 access to employment on equal basis including just and favourable conditions of work, including equal opportunities and equal remuneration for work of equal value, safe and healthy working conditions. Furthermore, section 36 provides for PWDs to access information, communication and Technology, whilst section 37 provides for access to cultural life on an equal basis and lastly section 38 providing for access to recreation, leisure and sporting activities on an equal basis with the rest of the population.

In line with the National Disability Policy of 2013, Government has developed a costed National Plan of Action for a programme covering the period 2018-2022. These provide a systematic and structured framework for effectively addressing the needs and rights of Persons with Disabilities in the country.

Furthermore, the Government continues to support education and training including vocational training in government institutions to persons living with disabilities as well as promote their economic empowerment. In 2017, the government in partnership with private sector conducted a series of trainings for women with disabilities on entrepreneurship.

The rights of Persons with Disabilities are also protected under the Sexual Offences and Domestic Violence Act (2018), sections 31, 32 and 44 provides that any person found guilty of an offence under this act against persons with disability will be prosecuted and sentenced with no option of a fine.

1.3.2. Younger women

The Kingdom of Eswatini has a young population age structure with about 75% of the population below 25 years where children below the age of 15 years account for about half of these⁴². For the purposes of this report young women will be

Investing in high-level education to develop a well-educated, skilled and innovative labour force; and education and empowerment of women; Provision of high-quality health services to nurture a healthy and productive labour force; Enabling economic reforms to accelerate economic growth, increase productivity, incentives for household savings, and job creation for the rapidly expanding labour force; and Good governance and accountability measures to ensure the rule of

Box3: *Demographic Dividend investment areas investment in infrastructure, and to attract foreign direct investment (FDI).*

considered to be the female population between 10 and 24 years. The country has taken keen interest in understanding how the demographic profile of the country could be brought into perspective in stimulating economic growth in the country. In this regard the country conducted a Demographic Dividend Study (DD) in 2017 which is premised on the notion that a population with high numbers of the children and youth transitioning into the working age population stands a chance to yield economic benefits from the this transition. The opportunity to benefit from the population transition is only possible if the country invest in higher level education; provides high quality health services; puts in place enabling economic reforms and ensures good governance and accountability measures⁴³. The study found that for the Kingdom of Eswatini has multiple windows of opportunity and the first one is already open. However the returns from this window will begin to decline after 2020. That as it may, the report further notes that the country still has an opportunity to effect policy actions that can both prolong the window of opportunity beyond 2020. This can be realized only if careful and targeted investment is effected in critical areas targeting the young population group

⁴²CSO, *Population and Housing census preliminary report, 2017*

⁴³*Demographic Study Report, 2017*

population. The recommended investment areas in the social sectors and those areas that can and improve the labour market outcomes can significantly⁴⁴.

In the last five years the country has continued to improve the policy, legal and program environment targeting young people including young women. The country's development framework emphasis gender equality and equity of initiative as cross cutting principle. These include: The Strategy for Sustainable Development and Inclusive Growth, 2017, The Education Policy, 2018, The Health sector strategic plan¹¹¹, 2019; The Kingdom of Eswatini Strategic Road Map (2019-2022) and other sectoral policies that are key in generating the economy of the country. Programme targeting young women are implemented through the Education sector such as the FPE, STEM, and TVET; the Health sector prioritised adolescent girls through the Adolescent and Youth SRH programme and the HIV/ AIDs related adolescent and youth programmes. In terms of enabling economic reforms and inclusive growth the country developed and adopted the Financial Inclusion Strategy, which has a special focus on women as well and the revitalisation of the Youth fund in 201 and the review of the youth policy. These instruments if well implemented are like to impact the young women of this country.

1.3.3 Widows Rights

Widows constitute one of the vulnerable groups which the country continues to pay special attention to. Following the demise of their husbands, widows and their children, particularly their daughters, often suffer the most discrimination, direct and indirect through a number of forms of maltreatment. This results in extreme poverty, marginalization and exposure to violence. In response to this need Government has are in the process of reviewing the pieces of legislation to protect their rights to inheritance. These include the Marriage Act of 1963, the Interstate Succession Act and the Administration of Estate Acts. Further to this to improve access to services, Government decentralized the services of the Masters Office that administers estates of the deceased to the four regions of the country.

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Umhluma woman and youth foundation, an NGO was established in 2016 with a membership of 3000 people from 15 Tinkhundla. The main objective is to advocate for widows rights and provide legal advice and assistance; empowerment towards self-reliance, self-sustenance. It is envisaged that the programme will assist build resilience, alleviate loneliness of widowhood, and rebuild self-identity through provoked capabilities. The organization provides counseling services; skills building on economic empowerment assist members start small business. There are also encouraged to join burial societies.

1.4 Effects of humanitarian crises on the BPfA

It is worth noting that the kingdom of Eswatini does not experience humanitarian crises caused by armed conflicts instead the country experiences humanitarian crisis from extreme weather conditions. The Disaster Management Department which falls under the Deputy Prime Minister's Office coordinates response to humanitarian situations. In order to ensure a humanitarian crisis that is gender responsive, in 2017 the Government with its partners, adapted the United Nations Standard Operating Procedures (SOPs) for prevention and management of Gender Based Violence and also for the protection of sexual reproductive health and rights in humanitarian situations. These SOPs were developed through a collaborative process that includes UN agencies, government and non-governmental organizations, community-based organizations, and representatives of the community affected by the events.

1.5 FUTURE PRIORITIES FOR ACCELERATING PROGRESS FOR WOMEN AND GIRLS

At the policy level the country will fast track the review the National Gender Policy with a view to integrate and incorporate the aspirations of global, regional and national frameworks. The frameworks include the 2030 Sustainable Development Agenda, 2030 and its Goals, African

Eswatini Future Priorities for accelerating progress for women and girls

1. Quality education, training and lifelong learning For women and Girls
2. Poverty eradication, agricultural productivity and food security
3. Eliminating violence against women and girls
4. Access to affordable quality health care , including sexual reproductive health and reproductive rights

Union Agenda 2063; CEDAW, Protocol to the African charter on human and People’s rights and on the rights of women in Africa (Maputo Protocol), SADCC protocol on Gender and development; UN Resolutions 1325, 60/2 and others. The Policy will draw from the National development strategy, the Eswatini Strategy on Sustainable Development and Inclusive Growth with related programmes. Other sectoral priorities that will be focused on in the quest accelerate progress on women and girls include: Quality education, training and life-long learning for women and girls; Poverty eradication, agricultural productivity and food security; Eliminating violence against women and girls;

Access to affordable quality health care, including sexual and reproductive health and reproductive rights and Digital and financial inclusion for women.

1.5.1. Quality education, training and life-long learning for women and girls

The country has prioritized Quality education (SDG 4) as part of its commitment to the attainment of the 2030 Global Agenda and has subsequently adopted a new policy in 2018. The policy focuses on improving its harmonization and commitment to the implementation of

education for sustainable development at the regional and national level; Sustaining gender parity on learner enrolments and staffing in schools to ensure that all pupils (boys and girls), irrespective of their social or economic circumstances, have access to quality education. Special focus will put on programmes targeting girls and women empowerment. The sector will ensure a high quality and inclusive education that is able to produce skills sets, (particularly among girls and women) that meet the demands of the rapidly changing global economy with its new technologies for a transformative development agenda as well in line with the socio-economic needs of the country .

1.5.2. Poverty eradication, agricultural productivity and food security

The Kingdom of Eswatini is concerned about the high prevalence of poverty that affects more of the population residing in the rural areas particularly women. Whilst women in the rural areas derive their livelihoods from agriculture and food security activities, fewer women participate in the higher levels of the value chain. Women smallholder farmers are also negatively affected by weak access to technical and financial support in the form of high quality extension services and loans. The country also recognises the many cross-cutting factors underlying the poverty and agricultural productivity, such as issues of gender equality, climate change, micro-economy and the development policy frameworks.

Considering the multi-entry points for eradicating poverty, the country will continue to operationalize the National Development Strategy (NDS), the Strategy on Sustainable Development and Inclusive Growth (SSDIG) and the Kingdom of Eswatini Strategic Road Map (2019-2022) through strengthening the Policy and legislative framework for the agriculture and Commerce & Trade sectors. The Ministry of Agriculture will lead in ensuring that women are equally represented as smallholder farmers and are provided with support to pursue higher levels of productivity along the value chain. The capacity of smallholder farmers for (including women) export led agriculture that exploits climate smart technologies.

1.5.3 Eliminating violence against women and girls

The country will scale up implementation of the National Strategy for ending violence, particularly focusing on populating the SODV act to ensure increased knowledge and understanding of the law at all levels. Lobby for policy and law reforms including (Administration of Estates Act, Marriage Act, Deeds Registry Act, Education Act, School Rules and Regulations, Regulations on Children's Protection Act, CP & E Act, Girls and Women Protection Act, and the Legal Aid Bill.

Government has also prioritised the development of Regulations and Guidelines for The SODV Act 2018; massive mobilisation of the public on the SODV; strengthening monitoring and evaluation of the Strategy and other international treaties that have a bearing on the reduction of violence in the country; capacity strengthening of the coordinating mechanism including institutional (systems, Human resource skills) capacities required for the smooth management of cases

1.5.4 Access to affordable quality health care including SRH and rights

The young people in the country continue to be challenged by early sexual debut with low levels of comprehensive knowledge on HIV and SRH related issues. Other national challenges include the prevalence of TB /HIV coexistence and the low integration of these services to SRH. Whilst ART coverage is high, there continues to be the need to escalate universal coverage across age and gender lines towards the attainment of the 90-90-90 targets. Evidently young people are lagging behind in the coverage of ART and the viral suppression. The unmet need for family planning has remained high in the Kingdom and mainly high unmet need for spacing among young women and unmet need for limiting among older women.

In order to improve access to SRH and Rights services the Government under the leadership of the Ministry of Health and in collaboration with other ministries will ensure effective implementation of the HSSP111 which targets universal coverage of services. The strategy seeks to ensure both the demand and supply sides of the service delivery will be the main focus. On the supply side the Strategy seeks to ensure increased readiness of service sites and

availability of SRH/ TB/ HIV information and Services in all facilities at all times. Considering the high prevalence of violence targeted at women girls and children the Ministry will strengthen integration of SGBV Management in other SRH/ HIV programmes. The health Sector will work with the Ministry of education and training to strengthen the capacity for the Life skills education in both primary and secondary school to ensure increased comprehensive knowledge on SRH and reduce early sexual debut as well reduce pre- and teen age pregnancies. The sector will also focus on strengthening systems for provision of youth friend adolescent services and integrate technology to maximise coverage and increase demand. The programme will ensure involvement of parent and community traditional structure to reach out to more adolescents and young peoples. More involvement and in the quest for scaled up information service delivery. The main focus will be all youth both in an out of school with special focus to preteen and teenagers, those who are less educated, poorer and in the rural areas.

1.5.5 Digital and financial inclusion for women.

The National development Strategy and the Strategy for Sustainable Growth and Inclusive Development purports to “Increase the depth of Financial Inclusion, growing the percent of adults with access to two or more formal products from 43% to 75%, and reducing the excluded from 27% to 15%, by 2022 by growing mobile money and remittances, deepening bank reach, getting credit basics right, ensuring risk management products are available, and enabling alternative channels to serve the poor”. The key financial inclusion focus for the country is the rural, micro finance, SMEs,

The NFIS will promote mechanisms such as E-money, agent and mobile banking and support the financial literacy and consumer empowerment programs to empower the rural population to have information. Rationalize and re-align government lending/grant programs targeting entrepreneurs to address poverty reduction and the interface with the mainstream finance to avoid market distortion.

Establish the coordination mechanism for the implementation of the Strategy. These will include a **Financial Inclusion Council that will have an oversight** function; the **Financial**

Inclusion Technical Committee will provide technical guidance and the **Financial Inclusion working groups** that will assist in the implementation of the key activities.

SECTION 2: PROGRESS ACROSS THE 12 CRITICAL AREAS OF CONCERN

I. INCLUSIVE DEVELOPMENT, SHARED PROSPERITY AND DECENT WORK

Q6. Actions taken by the country to advance gender equality in relation to paid work and employment are:

- **Introduced/strengthened gender-responsive active labour market policies (e.g. education and training, skills, subsidies)**
- **Measures to prevent sexual harassment, including in the workplace**
- **Improved financial inclusion and access to credit, including for self-employed women**

A detail of the measures taken are as follows:

6.1 Introduced/strengthened gender-responsive active labour market policies (e.g. education and training, skills, subsidies)

The Kingdom of Eswatini developed **A National Human Resource Development Policy (2017-2030)** to ensure that the country has in place, a human resource with relevant skills and competencies for an improved economic and human development. The policy seeks to ensure the development of good legislative and regulatory framework that will influence the review of laws, regulations and governance structures responsible for human resource development in the country. The Human Development Resource Policy will advance gender equality since women will be empowered with the relevant skills and competencies to compete with their male counterparts and will effectively and efficiently participate in the labour market. The rate of unemployment and poverty among women will be reduced.

6.2 Measures to prevent sexual harassment, including in the workplace

The Kingdom of Eswatini conducted a study on Sexual Harassment in the workplace in 2017 which focussed on the private sector and non – governmental organisations. The main aim of the study was to establish the magnitude of the sexual harassment the workplace; How sexual harassment affects women and men; Whether employees understand what constitute sexual harassment and the cultural factors that impinge on reporting .

The study revealed that only 40% of organisations and companies have a policy on Sexual Harassment and where they existed, some were not comprehensive enough to cover all the facets of sexual harassment. There was also low understanding of what constitutes sexual harassment at the work place among employers and employees⁴⁵. In this regard, the private sector is being mobilised to develop and strengthen their policies to create safe and conducive work environment that protects the human rights of all workers (in particular for women). The findings from the study have been disseminated in various forums in support of the advocacy and mobilisation of employers to develop workplace policies as well as empowering the employees to create demand for such policies. This activity continues to be implemented.

It is worth mentioning that the Kingdom of Eswatini passed the Sexual Offences and Domestic violence Act of 2018, which criminalizes sexual offences in the work place.

6.3 Improved financial inclusion and access to credit, including for self-employed women

The Kingdom of Eswatini developed the 2017 – 2022 Swaziland National Financial Inclusion Strategy. The major aim of the Strategy is to ensure the “ delivery of financial services and products in a way that is available , accessible and affordable to all segments” of the country’s populace. The target is to “grow adult access from 43% to 75% and reduce the excluded from 27% to 15% by 2022. The target will be achieved by expanding mobile money services (e-money) increasing usage of banks, reducing risks in management of financial services and devising alternative ways of serving the poor. A large proportion of Swati people

⁴⁵ Financial inclusion Strategy, 2018

rely on friends and relatives to obtain loans for their businesses, make savings through stokvels and they keep money in their homes

The major financial focus is the un-served or underserved in rural areas, women, the youth, Micro, Small and Medium Entrepreneurs, the agriculture sector and micro finance. The Strategy will facilitate the participation of Women and the Youth Entrepreneurs in economic activities, particularly women in the Informal sector of the economy who often lack the collaterals for business start-ups and growth. Studies reveal that the Informal sector provides employment to 40.2 percent women compared with about 25.5 percent men”.

According to the National Financial Inclusion Strategy, the future plan is to disaggregate data and monitor impact of access of financial services for women.

Some of the initiatives that have been created in the country include the establishment of the Mobile Money Services for the unbankable sector/ informal sector of trade. Mobile money services enable savings and the payment of services and products for instance, transfer of money in country and across borders. Cross border remittances benefit vulnerable groups who receive money from family members who work outside the country.

Furthermore, the country crafted the Citizens Economic Empowerment Bill to enable equal participation of women and men in economic transformation. The Bill seeks to among other issues, “promote gender equality in accessing, owning, managing, controlling and exploiting economic resources”.

Q7. Actions taken by the country to recognize, reduce or redistribute unpaid care and domestic work

The following is a list of actions taken

- **Expanded support for frail elderly persons and others needing intense forms of care**
- **Introduced or strengthened maternity/paternity/parental leave or other types of family leave**
- **Promoted decent work for paid care workers**

7.1 Expanded support for frail elderly persons and others needing intense forms of care

The Government of Eswatini has initiated a plan that seeks to provide support for the frail elderly persons and people with disabilities. An estimated budget of about E5M, local currency has been set aside for the construction of a Retirement Home for Elderly Persons at Mankayane for the 2019/2020 fiscal year. Initially, government will purchase forty –eight (48) beds for the elderly who will be accommodated in the facility. It is anticipated that in 2020, the retirement village will be fully operational. The construction of a Retirement Home for the Elderly will reduce the burden of women who have the responsibility to perform triple roles in society. The women will then be relieved from caring for the elderly and they will effectively participate in income generation activities and other productive roles for their livelihood.

7.2 Strengthened maternity/paternity/parental leave

Government is currently reviewing the Employment Act (1980). The Employment Bill 2018 has introduced a provision on paternity leave as well as increasing the number of days for maternity from 3 months with one month fully paid to 3 months with full pay. This, it is hoped, will foster shared family responsibilities and household tasks within the family with a view to reduce the burden on the woman.

7.3 Promoted decent work for paid care workers.

The country is reviewing the Decent Work Country Programme (2010-2015), which was extended to 2019, focusing on certain thematic areas to ensure decent work for all. The ongoing review of the Decent Work Country Programme (2019-2024) prioritizes pillars on; Social security, Social Dialogue and Employment. These pillars focus on the terms and conditions of employment for all categories of workers including the migrant workers. Successful implementation of the decent work programme guarantees decent work for all. Challenges identified in the previous programme included weak coordination and poor monitoring and evaluation and as such its objective was not achieved.

Q8. Has your country introduced austerity/fiscal consolidation measures, such as cuts in public expenditure or public sector downsizing, over the past five years?

YES.

The country introduced austerity/fiscal consolidation measures that included cuts in public expenditure since this year (2019) as outlined in the recently released The Kingdom of Eswatini Strategic Road Map for 2019-2020. These stringent measures are currently being implemented and are meant to, among other things, 'grow the economy of Eswatini for the benefit of all who live in it'⁴⁶. In the process the Country aspires to ensure inclusive growth and to restore macroeconomic stability with effective social safety nets to protect the vulnerable citizens with no one being left behind. However its impact on women and men, have not yet been ascertained.

II. POVERTY ERADICATION, SOCIAL PROTECTION AND SOCIAL SERVICES

Q9. Action taken by the country to reduce poverty among women and girls

In this regard the country focused on the following actions:

- Supported women entrepreneurship and business development activities
- Introduced or strengthened social protection programmes for women and girl (example cash transfers)

The country's investment in the last 5yrs focused on improving the life of a girl child through strengthening the capacity of the Youth related institutions such as the department of Youth

⁴⁶The Kingdom of Eswatini strategic road map 2019-2020

and the Eswatini National Youth Council. The Youth Policy of 2009 was reviewed to provide a current framework for youth engagement in line with the Agenda 2030. The review aimed to identify potential opportunities to improve outcomes for youth including non-discrimination against girls in areas such as access to land, labour force participation and private sector development. Needs of youth were also addressed in the revised education and training, health and employment. The long-term national development frameworks, such as the National development strategy, the Strategy for sustainable development and inclusive growth, 2017, provide a framework that focus on youth , women and girls as special groups.

Long-term development frameworks – is built on the country’s Vision 2022, which aims to position it amongst the top 10% of middle-income countries in terms of human development by 2022.³⁰³ The vision is being implemented through a national development plan and the Swaziland Poverty Reduction Strategy and action plan which aims to, amongst other things, reduce poverty, create employment, promote gender equality, and deliver improvements in the overall quality of life in Swaziland. This is to be achieved through the strategy’s six pillars including macro-economic stability, inclusive growth, improvements in governance and pro-poor income distribution. Youth employment is a high priority.

Employment and labour relations – Revised employment act has provisions to protect workers, particularly through the introduction of what is described as an ‘unemployment benefit fund’. Amongst other aspirations, this fund aims to ensure the compensation of workers if a company is closed without due process. This provision appears likely to benefit young people, particularly in the context of mass retrenchments during economic upheavals. In addition to the Employment Act, two other labour laws – the Industrial Relations Act (IRA) (2000, as amended) and the Occupational Health and Safety Act (2001, as amended) influence employment practice in Swaziland. The IRA provides for collective negotiation of terms and conditions of employment, for the provision of dispute resolution mechanisms, and for other matters incidental thereto. The Occupational Health Safety Act on the other hand, provides for the safety and health of persons at work and the workplace. It requires employers to ensure a safe working environment. The national youth policy, which serves as the overarching policy

framework for youth in Swaziland, makes specific provisions for youth employment. In particular, it makes provisions for investing in an education curriculum that is responsive to the requirements of the labour market; developing a youth service scheme based on voluntary participation which will serve the purpose of enabling young people gain the required skills; expanding public works and infrastructure projects to provide youth with work; investing in technical and vocational education, and regulating the wage system to improve minimum wage, among other important provisions.

Skills Development and Training - As a measure to address the problem of skills, the government elaborated the Education and Training Sector policy (Ministry of Education and Training – MoET, 2011). The policy aims in part to develop technical and vocational education and training (TVET) programme to develop the necessary human capital and position Swaziland for global competitiveness.

Furtherance of this goal, TVET has now been prioritized in educational development in the country. Both cost and lack of gender sensitivity act as barriers to TVET for youth from lower socio-economic backgrounds and young women. However, these issues have been acknowledged in the new education and training sector policy, which promotes gender mainstreaming as one of its core principles. This has seen the development and implementation of comprehensive sexuality education in secondary schools (where Eswatini is a champion for the SADC countries), as well as the Education and Improvement program 2018 – 2021 which targets the girl child on academic re-integration to education system for those that had dropped out as well as tertiary.

Investment and Enterprise Regulations - In recognition of the importance of entrepreneurship in stimulating productivity and creating new jobs, the government of Swaziland has put in place a Small and Medium Enterprise (SME) Development Policy. The policy sets out to encourage youth to become entrepreneurs with the key aims of providing training, stimulating lending through established financial institutions, and providing critical support to individuals

interested in establishing private businesses. Policy focuses on revising the government's procurement policies in order to make room for local enterprise – such as those led by young people – to benefit from contracts that will enable them to thrive. The SME policy makes a number of critical proposals including expediting business registration processes through the establishment of a 'one-stop-shop/centre.' In addition, it proposes to deal with property rights by increasing the security of land tenure, including the revocation of the minority status of women. This vision has been expanded by the establishment of *Junior Achievement Eswatini* in 2015 to assist young people find suitable job shadowing, in country and international based on their career goals and ambitions. It also provides "smart" capital for budding entrepreneurs that goes with advice, mentorship and creating to ensure growth and stability for all funded start up business for young people. The Junior Achievement Eswatini complements the National Youth Enterprise Fund established in 2008.

Q10. Actions taken in the last five years to improve access to social protection for women and girls

The country continued to strengthen social protection mechanisms for a number of vulnerable groups including women and girls. Social protection activities include the extension of Free primary education all children for the first seven year of basic education. Orphaned and vulnerable secondary school going girls are covered through special subsidy towards costs for education. Elderly women receive regular grants through the Elderly grant programme and this grant was raised in 2018.

With support from the World Bank the country piloted a Cash Transfer Programme targeting OVCs through quasi-experimental operations researches approach. The methodology coopted a treatment and control groups whose source of livelihoods were wages from salaried employment. Over and above that the treatment group was given cash grants. The cash grant *'decreased the gap between the poorest and other community groups and restored the dignity of the most vulnerable members of society. Statistically is was evident that the cash transfer had an impact on the treatment group especially regarding the ability to buy food, education (buying uniforms and stationery and paying school fees that allowed children to attend school) and transport to health centres. Livelihoods improved*

significantly for children and the families in general, while the communities also benefitted from the cash inflow and the general welfare benefits.

On the part of welfare indicators;. Social grants became very important during the end line, especially for the treatment group. In the treatment group 13% of the participants reported an increase in short term savings (30days) compared to 4% of controls. For long term savings 19% more of the treatment participants reported saving in the past 12 months compared to 10% of the control group. The number of meals consumed by the treatment group was more than that of the control group for most of the age groups. There were statistically significantly more meals consumed by the treatment groups for the females aged 18 and older and boys 6 to 13 years. The main types of food groups consumed mostly included vegetables, legumes and cereals for both treatment and control groups at end line. The treatment group (both males and females) consumed more red meat, white meat and sugar than the control group. Female groups also consumed more milk and males more legumes than the control groups. This was more than 2% in the treatment group across all the age groups. On average the treatment group spent E 233 and the control group E 183 on food. The availability of food also contributed to children being able to attend school and were more attentive in class as they have breakfast before going to school.

On education, the project had a positive impact on school attendance as illustrated by the increase of household members attending school (1.2% more for treatment group, statistically significant: $p=0.030$). There was also a trend of children remaining in school longer and transitioning from primary to secondary school for the treatment group. The latter was statistically significant. There was a change in education spending in that fewer households in the treatment group reported non-spending. More households were spending on books/stationery, uniforms/shoes and transport in the treatment group.

The health status (as perceived and reported by the household head) of both the treatment and control groups was better at end line. Health visits were significantly more for the treatment group at end line. Reported HIV testing and positive diagnosis for those household members younger than 18 year remained similar from baseline to end line. The main finding

was the statistically significant increase in access to ARV medicine for the treatment group from baseline to end line. Reported sexual behavior was not difference between treatment and control groups for any of these variables. Immunization frequency of the children remained similar to baseline (highest frequency between 1 and 4 visits). Growth visits were highest for 1 to 3 times, but some reported more than 10 visits. There was no difference between the treatment and control groups at baseline or end line. More attention is needed to enable parents and other caregivers to provide adequately for the very young child (less than 10 months old). The household expenditure on health was significantly less than on education. The most significant difference in spending was the treatment group spending more money on transport for health (E55 vs E45).

The project made a difference in motivating and informing participants in the treatment group to obtain IDs or PINs. Another motivation would be the access to the cash transfer being dependent on having the correct documentation. However, this motivational effect of the project was the same for the treatment and control groups⁴⁷

Q11. Actionstaken by the country to improve health outcomes for women and girls in your country

- Expansion of universal coverage services for women and girls- health sector strategic plan, evaluation of the SRH strategic plan development of the national Health sector strategic plan111, Developed guidelines and protocols
- Expanded SRH services for women and girls-SRH, Maternal Health and HIV- Integration of HIV in SRH/ strengthened adolescent SRH, training staff, creating demand for ASRH services, Maternal death inquiry , PMTCT plus, strengthened, ANC guidelines, quality assurance for maternal services , developed manual for ASRH service p[rovision; Adolescent Reproductive health programmes- Assessment
- Strengthened Comprehensive sexuality education in schools signed a collaborative framework between the Ministries of Health, education & training and the Ministry of

⁴⁷GoE/ World Bank Cash transfer pilot project Report, 2017

youth; – online training of teachers on LSE, developed a LSE manual for use in-school; developed a curriculum on LSE for primary and secondary schools.

Q12.Actions takenby the country to improve education outcomes and skills for women and girls

12.1 Taken measures to increase girl's access to retention in and completion of education, LSE

The government of Eswatini through the Ministry of Education and Training ensures access to education for children in Eswatini through the provision of primary school education grant, OVC grant, learning materials (e.g.: free exercise books, textbooks, stationery, equipment, furniture, etc.), school facilities and infrastructure at primary school level. At secondary and higher education level, expansion of access entailed the expansion of physical structures in existing schools or institutions. In addition it covered the diversification of the secondary curriculum and introduction of new programmes at post secondary education level to provide opportunities and increased participation. Finally the expansion of access at TVET and Higher Education was enhanced through the provision of government scholarships targeting all learners who have performed well at secondary level and those poor socio-economic backgrounds.

According to the National Education and Training improvement Programme (NETIP 1) access to TVET continues to be limited in terms of available programmes and equity. Hence, there is need to increase the number of TVET institution in the country to ensure equity. There is a need to expand and diversity programmes offered by the TVET institutions in order to meet the demand by the industry.

12.2 Increased access to skills and training in new and emerging field, especially STEM (Science, Technology, Engineering and Maths) and digital fluency and literacy

The government of Eswatini has in place the Mathematics, Science, and Technology Education (MSTE)Policy as well as the National Education and Training Policy 2018 which encourages the

participation of men, women, girls and boys into these fields, emphasizing more on women and girl's participation.

The Ministry of Education and Training in collaboration with partners such as MTN, University of Eswatini, Eswatini Electricity Company, Eswatini Investment Promotion Authority also host Science fairs, Maths contest, Maths Symposium, ICT fairs , were boys and girls at primary and secondary level participate equally. These activities are held annually and encourage them to research and come up with new innovations in the Science and Technologic fields. In 2017 the University of Eswatini, in partnership within partnership with the Ministry of Information & Technology and Royal Eswatini Technology Park launched a Science and Technology fair which brings together students and ICT players to display their services and for the exchange of information and skills. This activity is now held annually. Furthermore, other partners' including the private sector collaborates and host essays and poster designs competitions related to the field of Science and Technology for boys and girls aged 13-19 years.

For training purposes the Government of Eswatini provides scholarships for all citizens interested in pursuing studies in these fields emphasizing more on participation of women and girls. A communiqué from the Ministry of Labor on critical skills emphasized on STEM and also indicated external training under STEM. Deserving girls are also eligible to apply for this training. In line with capacity building and training a cadre of female doctors have been trained in Taiwan as an effort to increase numbers of doctors.

In schools, the Ministry of Education and Training hires ICT teachers and inspectors who are specialized in the Field of ICT to teach and monitor the teaching of this field. Often they are taken for refresher courses around emerging technologies.

12.3 Promoted safe, harassment-free and inclusive educational environments for women and girls

The Government of Eswatini enacted the Sexual Offences and Domestic Violence Act, 2018 prohibiting violence in all sectors in the country. In addition the government enacted the Teaching Service Commission (TSC) Act of 1982 which addresses the misconduct of teachers

including acts of harassment or student-teacher affair. Further, through the Ministry of Education and Training, government developed the National Education and Training Sector Policy 2018, which is an all-inclusive policy that promotes the full participation of both boys and girls in the education sector and also promotes the school a violence free environment.

Strengthened measures to prevent adolescent pregnancies and to enable adolescents girls to continue their education in the case of pregnancy and/or motherhood. The Government of Eswatini under the Ministry of Education and Training enacted a policy on Reintegration Policy of Pregnant Learners 2018, which allows the students to retained in their school or another after delivery (teen mother). The Career Guidance and Counseling Department trains learners on issues of SRH, early sexual debut and consequences of early pregnancies for both boys and girls. This is done to prevent early pregnancies and sexually transmitted infections including HIV.

III. FREEDOM FROM VIOLENCE, STIGMA AND STEREOTYPES

Q13. In the last five years, which forms of violence against women and girls, and in which specific contexts or settings, have you prioritized for action?

The following were prioritized

- Intimate partner violence/ domestic violence including sexual violence.
- **Sexual harassment and violence in employment**

13.1 Intimate partner violence/ domestic violence including sexual violence.

The recently enacted Sexual Offences and Domestic Violence Act 2018 criminalise intimate partner violence / domestic violence including sexual violence. The Act respond to the outcry on the escalation of sexual offences and domestic violence against women and children including infants, which has accelerated the HIV and AIDS pandemic, by imposing high terms of

imprisonment on convicted persons. Due to increased advocacy and awareness raising campaigns reported cases of violence seem to be on the rise. This is to be expected in the short to medium term of the implementation of the SODV Act 2018 and awareness raising campaigns.

13.2 sexual harassment and violence in employment

The SODV Act 2018 criminalises and clearly defines sexual harassment and exploitation in the work place. The private sector has thus taken the issue seriously by collecting data to understand the scale and prevalence of sexual harassment in the work place. Sexual harassment in the Workplace (2017)⁴⁸, On the rate of sexual harassment incidences in the workplace, the study found that 16.2% of workers in the private sector indicate to have experienced it against 17.6% of employees in the NGO sector suggesting a slightly higher prevalence rate in the NGO sector. The study found that women are at greater risk compared to males. A total of 19.6% females compared to 13.8% of males indicate to have experienced sexual harassment in the workplace. The most common cases involve employees between the ages 20 and 50 with the age groups 40-44 years (23.8%), and 30-34 years (19.9%) experiencing disproportionately higher number of sexual harassment encounters.

However, in view of all this with the enactment of this Act in the long run we envisage a decrease in the prevalence of this form of sexual abuse in the work place. It is in the research agenda of the coordinating department to establish the prevalence of this form of violence in the public sector (government employees). It is also worth noting that the government has establish within the ministry of public service a wellness coordinating body – Public sector wellness committee⁴⁹ which ensures that the Government for the Kingdom of Eswatini has a healthy and proactive workforce that is free of HIV / AIDS, Violence and Stress related issues and effectively delivers public services.

13.3 Child, early and forced marriages.

⁴⁸Sexual Harassment in the Workplace Swaziland, Baseline Report,2017

⁴⁹Public Sector HIV/AIDS Coordinating Committee

The SODV Act has increased the age of maturity from 16 years to 18 years⁵⁰. This is in line with the National Constitution and the Children’s Protection and Welfare Act of 2012. The Act also criminalises abduction, “unlawfully taking a child out of the control of the custodian of that child or a person in charge of that child with the intention of marrying or enabling someone else to marry that child or with the intention of performing a sexual act or sexual violation with that child⁵¹. National Statistics show very insignificant number of children married before the age of 18 (child marriage), and there is no evidence relating to forced marriages as since 2005 the national constitution provided protection for all persons intending to marry under section 27 (2) “Marriage shall be entered into only with the free and full consent of the intending spouses”. This has thus informed marriage structures and practice under the Swazi Law and Custom to ensure that consent is sought from both parties as opposed to previous traditional practices.

The MICS (2014)⁵² reports 8.8% women and 1.7% men aged 20-49 years were married before the age of 18 Eswatini. The report also reflects that only 4% women/females aged 15-19 years are currently married or in a union. This data reveals the need for the fast tracking in reviewing the marriage Act 1964 which is currently under review and undergoing consultations before being tabled in parliament. This review will ensure that child is married Eswatini under both customary and civil rights.

13.4. Violence against women and girls facilitated by technology

Any person who unlawfully stalks another person commits an offence and is on conviction, liable to pay a to a fine of fifteen thousand Emalangeni or to a term of imprisonment not exceeding three years or to both. © For purposes of this section, unlawful stalking shall be conduct- ii) contacting a person in any way, including but not limited to, by telephone, mail, fax, email or through the use of technology⁵³. The SODV Act also criminalizes possession and distribution of phonographic materials and also benefitting from phonographic materials

⁵⁰ Sexual Offences and Domestic Violence Act 2018

⁵¹ Sexual Offences and Domestic Violence Act 2018 Section 42, (1) a, b.

⁵² Multiple Indicator and Cluster Survey, 2014

⁵³ Sexual Offences and Domestic Violence Act 2018 Section 10 (2) c ii

including the use of children in phonographic material. The use of children and benefitting from children phonographic materials attracts stiffer sentences.

Q14. What actions has your country prioritized in the last five years to address violence against women and girls?

The country prioritised the following

- Strengthened laws against violence and their enforcement and implementation
- Strengthened services to Survivors of violence
- Strengthened strategies to prevent violence against women and girls

14.1 Strengthened laws against violence and their enforcement and implementation

The Kingdom of Eswatini has intensely prioritized law review and reform as evident in the enactment of the SODV Act 2018 addressing all forms of violence, Human and people trafficking and smuggling prohibition Act 2009 as well as the Children protection and Welfare Act 2012 (CPWA).

The existence of all these laws is crucial however they all need regulations to guide implementation, interpretation and enforcement. The government is in the process of developing regulations for the CPWA and later the SODVA. The Judiciary has been extensively trained on these laws (SODV and CPWA) to enhance their understanding as enforcers of the law and delivering justice to those who need justice to be served. The magistrates and the police Officers especially from the Domestic Violence Child Protection and Sexual Offences Unit have been and are being continuously trained on the new SODVA to enhance their understanding of the highly contentious law among the citizenry. In addition the judiciary in 2015/16 was trained on Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) to enhance their work in presiding over cases involving the discrimination of women at any level. an evaluation of these trainings is yet to be conducted to ascertain the impact of such in the judiciary. The Ministry of Justice and Constitutional Affairs is in the process of putting in place an electronically recording mechanism for cases of violence to enhance monitoring and

evaluation of cases in the bid to provide full protection, respect and fulfillment of human rights of women and the girl child.

14.2 Strengthened services to Survivors of violence

The government has established One Stop Centers housed within Health Centers at regional level. The purpose of these centers is to provide comprehensive services to all survivors of GBV who are majority women and children. The services range from health, counseling (psychosocial) and legal (police and justice) services. These are all delivered under one roof to eliminate secondary victimization of survivors of GBV and ensure that they get all the help they need to rehabilitate and reintegrate them to society and families. The government also has toll free lines housed with law enforcement (police) 999/9999 which is reachable 24/7 and from any mobile network operator in the country. Non-governmental organizations also play their part in the help lines, the Swaziland Women Action Group Against Abuse (SWAGAA) also has a toll free 951 available for reporting or seeking legal advice or counseling. This one is operational 5 days a week and well known to be very effective nationwide. The education sector has also been identified to be critical in ensuring children have access to help line for them to report or receive any kind of assistance. The country is in the process of finalizing a national child line which will connect to all service providers to help children in need of support especially under child protection from violence.

14.3 Strengthened strategies to prevent violence against women and girls

A costed national strategic plan was developed with a monitor evaluation framework was developed and launched in 2018. Established a National Task Force on Violence that constitute Controlling Officers from government, Faith Based Organizations represented by the gender consortium and children's consortium, private sector and traditional structures represented by chiefs. The national surveillance system is a mechanism that monitors and manages issues of violence in the country. An annual report on surveillance presents statistics in a disaggregated manner in terms of types of violence, age, sex location and many more.

Research was undertaken to understand the drivers of violence among children and this report informed the strategy on the causes and consequences of violence against children specifically and women in general. The Ministry of Justice and Constitutional Affairs is in the process of putting in place an electronically recording mechanism for cases of violence to enhance monitoring and evaluation of cases in the bid to provide full protection, respect and fulfillment of human rights of women and the girl child.

Q15. Strategies used in the last five years to prevent violence against women and girls

The strategies were:

- Working with men and Boys
- Public Awareness raising and changing attitudes and behaviours
- Grassroots and community-level mobilization

15.1 Working with men and Boys

The country continues to prioritise the engagement of men in social programmes with a view to increasing their knowledge and shaping attitudes about challenges faced by society in responding to all forms violence. In the last five years, the Kingdom of Eswatini maintained its affiliation to the Men Engage Network International through the Men Engage Network Eswatini where the department responsible for gender equality sits in the steering committee. This network is an alliance of organisations working in the gender equality space for prevention of violence and the protection of rights of vulnerable groups against violence. The main aim of the network is to strengthen capacity of implementing organisations on designing prevention programmes targeting men and boys as agents of change and partners in ending violence. In 2017 about 30 organisations were trained on organizations with the capacity to design and implement programmes to engage men and boys on gender equality (including gender-based violence) and sexual and reproductive health and rights. The outcome of the programmes is the attainment of a crop of men and boys who are inspired, respectful and responsible

community members⁵⁴. This network has worked with church leaders, men and boys through father and son booth camps and boys clubs across the country.

One of the Organisations that is part of the Men engage network Eswatini and implements this transformative programme is Kwakha Indvodza whose mandate is solely dedicated to programming for gender equality men and boys. The vision of the organisation is a country that has boys and men who are resilient, healthy, gender-equal change-makers who will in turn mentor and grow women and other men in their communities. Their projects are innovative in their attempts to engage men through capitalizing on and strengthening the perceived role of men as providers and the positive masculinity entrenched in the desire to provide for and protect one's family, without the use of violence or abuse. Key strategies are: Information and education, mentoring and coaching; advocacy; Life skills development; counselling and educational relaxation such as movies, debates and discussion groups. The project activities range from Community Chapters, Social Entrepreneurship and Income generating projects, Lihawu Male Mentoring Camps amongst others⁵⁵. The organisation operates three successful community chapters and is in the process of opening a fourth, each able to reach 100 clients with their intensive behaviour change model. The results of the project have not yet been evaluated to ascertain to understand its impact.

15.2 Public Awareness raising and changing attitudes and behaviours

The kingdom has embarked on numerous advocacy and awareness raising activities focusing on knowledge sharing, changing attitudes and behaviours ultimately. These activities are implemented mainly by civil society including the private sector. Through World Vision Eswatini and all other stakeholders the country has kick started a national campaign titled "It Takes Eswatini to End Sexual Violence Against Children", 2017 -2022. These actions include; The capacity of law enforcement/ legal personnel for specialized skills for addressing child sexual violence strengthened, National capacity for robust policy and law reform for better protection of children strengthened, National capacity for the coordination, evidence generation and

⁵⁴[Khwakhaindvodza.com/about us](http://Khwakhaindvodza.com/about-us)

⁵⁵<https://www.kwakhaindvodza.com>

surveillance of VAC, including child sexual violence strengthened, National child abuse response systems (including toll free services) for the reporting of VAC, including child sexual violence, are strengthened and Strong, vibrant and consistent engagement of communities (C4D) for prevention and response to child sexual violence.

15.3 Grassroots and community-level mobilization-

Government in collaboration with stakeholders employed numerous strategies on advocacy towards mitigating violence against women and girls at the grass root level. The activities have often been organized around internationally declared commemoration of special days. These commemorations include: International Women's Day, International Day of the Girl Child, International Men's Day, Breast Cancer Day, Human Rights Day, Disability Day, Widows Day, the 16 Days of Activism against Violence, National Population Day and International AIDS Day. On these days Government and civil society conducted at community level meetings and celebrations to raise community awareness on specific issues affecting women and girls as well as creating a community platform for engagement on the same. Some of the themes related to violence and the need for communities to act.

These commemorations (with themes that relate to violence and human rights) created a space for collective reflection on progress and challenges the country is making and addressing the challenges. **In the last five years** these forums availed an opportunity to create awareness on the need for an effective legal and policy framework that will facilitate prevention of violence. As a result of increased awareness at the community level demand for the enactment of the law increased hence the Sexual Offences and Domestic Violence Act, 2018 was eventually enacted. The law came into effect on the 1st August 2018 and its impact is already felt on the ground. 203 cases have been reported and charged under SODV Act 2018. This has created a high demand for learning on the provisions of the legislation for people to be protected from committing a crime.

What actions has your country taken in the last five years to prevent and respond to violence against women and girls facilitated by technology (online sexual harassment, online stalking

The provisions of the SODV Act, 2018 covers these forms of violence in Part IV, subsections 10, 23, 33 and 32 covers offences in line with, online stalking and non-consensual sharing of intimate images. Online sexual harassment is not covered but can be inferred in the other sections of the Act. Implementation of the law has started but not evaluation has been done yet. The Ministry of Justice and the Department of Gender are leading awareness raising meeting to create awareness about the Act.

Q17. What actions has your country taken in the last five years to address the portrayal of women and girls, discrimination and/or gender bias in the media?

The Kingdom of Eswatini continues to advocate for gender sensitive reporting and censored depiction of pictures and cases especially of gender based violence or those that portray and reinstate the patriarchal system in our societies. The Editors Forum, a body of all the media houses in the country has been sensitized on this matter and the gender consortium continues to engage them on this matter as more work still needs to be done.

Q18. Has your country taken any action in the last five years specifically tailored to address violence against specific groups of women facing multiple forms of discrimination?

YES

See section 1.3

IV. PARTICIPATION, ACCOUNTABILITY AND GENDER RESPONSIVE INSTITUTIONS

This section presents the progress in the key critical areas of concern in the BPfA and these are: Women in power and decision-making; Institutional mechanisms for the advancement of women; Human rights of women; Women and the media and The girl child.

Q19. What actions and measures the country has taken in the last five years to promote women's participation in public life and decision-making?

In August 2018, the government enacted the Election of Women into the House of Assembly Act which gives effect to Section 86 and 95 of the 2005 National Constitution which states that if it appears that the female members of the parliament are less than thirty percent (30%) quarter provided by the constitution, the house shall elect not more than four women on a regional basis in accordance with the provisions of Section 95⁵⁶. This law is an affirmative action following the failure to meet the 30% quota of women elected at constituency level. The government then elected the four (4) women from the four regions of Eswatini. Women's representation improved from 20% to 22% in 2018 parliament

In 2018 the government in collaboration with partners conducted more sensitization campaigns on the election of women into positions of decision making. Focus was more on mentorship for women potential candidates, training in leadership, decision-making, public speaking, self-assertion and political campaigning skills. The Elections and Boundaries Commission (EBC) also conducted civicvoter education for all people in the country in all the constituencies before the elections. This included topics on the electoral system, legislations, campaigning skills, resource mobilization among other. The voter education sessions targeted both women and men at the constituency level.

Furthermore, the government in collaboration with partners in May 2018 developed and later launched a Media advocacy strategy for an effective advocacy on issues of gender equality including the elections. Following that the Government through the Department of Gender and Family Issues in June, 2018 developed a media sensitization programme on Eswatini TV, known as Embili Kanye Kanye. This show aimed at reaching out masses of the Eswatini populace on social issues affecting them including women's participation in the elections.

During the process of the election, data was collected indication lists of individuals nominated at both the primary and the secondary stages of the election process. The data was published in the media. At the end of the process the data was announced by the EBC. Although a formal report of the outcome of the election is not yet published, the EBC presents the organized data

⁵⁶ Constitution of Swaziland 2005

in a report and interested organizations, particularly civil society and the media analyses the data.

Lesson Learnt

There continues to be a need to strengthen efforts that aim at inculcating positive attitudes and deeper understanding of the importance of women's participation and representation in decision making and politics. The family needs to be equipped for gender sensitive socialization instilling the notion of equal opportunities between women and men.

The momentum for mobilization of women to participate in the parliamentary election needs to be sustained throughout the period targeting both the voters and the women with interest to participate.

Women aspiring to go to parliament in particular, lack financial means to mobilize voters through organized and focused voter campaigns hence their failure in succeeding in the elections.

Q20. What actions has your country taken in the last five years to increase women's access to expression and participation in decision-making in the media, including through information and communication technologies (ICT)?

None found to have been done under this subsection

Q21 Do you track the proportion of the national budget that is invested in the promotion of gender equality and the empowerment of women (gender-responsive budgeting)?

YES – the budget is being tracked

If YES, what is the approximate proportion of the national budget that is invested in the promotion of gender equality and the empowerment of women?

The National Gender machinery tracks the proportion of the national budget that is invested in the promotion of gender equality and the empowerment of women and the approximate budget allocated to the department is .008%the national budget-

Q22 Does your country track the proportion of ODA invested in the promotion of gender equality (gender responsive budgeting)

No. The country has not yet tracked ODA invested in promotion of gender equality

Q2.3 Does your country has a valid national strategy or action plan for gender equality?

The country has a National Gender Policy, National Plan of Action of the Policy and its Monitoring and Evaluation Plan which were launched in 2010. The National Action plan was not costed. However these frameworks are under review. The review will consider alignment of agenda 2030, 2063, long term CEDAW Concluding Observations and Recommendations, Maputo Protocol, Solemn Declaration on Gender and Development, African Union Gender Policy, SADC Protocol on Gender and Development. The envisaged plan of action and its monitoring and evaluation tool will consider indicators in respective frameworks.

Q24.Does your country have an action plan and timeline for implementation of the recommendations of the Committee on the Elimination of Discrimination against Women (if a State party), or of the recommendations of the Universal Periodic Review or other United Nations human rights mechanisms that address gender inequality/discrimination against women?

YES: there is an action plan for implementation of the recommendation of the UPE and Committee on the Elimination of Discrimination against Women and other Human rights mechanism.

If YES, please provide some highlights of the action plans and timeline for implementation.

The country does has a work plan on the implementation of the 2014 recommendation from the CEDAW Committee.The recommendations were presented to all stakeholders and tasks

were assigned to respective institutions with respective reporting time frames. This was done in 2014 in preparation for the 2016 and 2018 reports respectively.

In addition to this, the country has established an institutional mechanism responsible for treaty reporting. This mechanism is chaired by the Ministry of Justice and Constitutional Affairs and deputized by the Deputy Prime Minister's Office and Ministry of Foreign Affairs. Part of the terms of reference for this mechanism is to draw a plan of action on reporting on all the UN, continental, Regional and sub regional treaties including UPR and CEDAW.

Q25. Is there a national human rights institution in your country?

YES, the Commission exists, named 'The Commission on Human Rights and Public Administration Integrity'. It was appointed by HIS MAJESTY KING MSWATI 111, on the advice of the Judiciary Service Commission, through Legal Notice no.143/2009. The Commission consists of six (6) members; The Commissioner /Chairperson and five (5) deputy commissioners. The mandate of the Commission is to promote and protect human rights for all and ensure equitable access to public services and the existence of a leadership that is transparent in its activities and accountable to the people it represents and serves. It is established by section 163 of the Constitution, commissioners were initially appointed by HIS MAJESTY KING MSWATI 111, on the advice of the Judiciary Service Commission, through Legal Notice no.143/2009 and subsequently through legal notice no. .../2014. The Commission consists of six (6) members; The Commissioner /Chairperson and five (5) deputy commissioners.

Some of the functions of the Commission fall within the human rights domain where it is empowered to investigate complaints concerning alleged violations of fundamental rights and freedoms under the constitution. The commissioner is to take appropriate action for remanding, correction or reversal of instances complained of through such means as appropriate and effective⁵⁷.

⁵⁷<http://www.gov.sz/index.php/ministries-departments/ministry-of-justice/human-rights>

V. PEACEFUL AND INCLUSIVE SOCIETIES

In this category the report seeks to document progress in line with the following areas of concern for the BPfA: Women and armed conflict; Human rights of women and The girl child

Q26. What actions has your country taken in the last five years to build and sustain peace, promote peaceful and inclusive societies for sustainable development and implement the women, peace and security agenda?

The Kingdom of Eswatini does not experience armed conflicts however experience a plight of violence and abuse. Subsequent to Eswatini adoption of resolution 1325 (2000), 2022 (2013) 2242 (2015), Swaziland has implemented these resolutions having achievements and challenges.

Q27. What actions has your country taken in the last five years to increase the leadership, representation and participation of women in humanitarian action crisis settings?

Nothing done in this area

Q28. What actions has your country taken in the last five years to enhance judicial and non-judicial accountability for violations of international humanitarian law and violations of the human rights of women and girls in situations of armed and other conflicts or humanitarian action and crisis response?

Nothing done in this area

Q29. What actions has your country taken in the last five years to eliminate discrimination against and violations of the rights of the girl child?

The country recognizes the plight of the girl child and has included the girl child population among the recognized vulnerable groups. The country is signatory to a number of UN treaties that seeks to ensure the rights of the girl child are protected. The country has taken action on all the areas listed below which are:

Box 1: Areas where measures were taken to eliminate discrimination against and violations of the rights of the girl child?

- ✓ Taken measures to combat negative social norms and practices and increased awareness of the needs and potential of girl children
- ✓ Strengthened girls' access to quality education, skills development and training
- ✓ Tackled disadvantages in health outcomes due to malnutrition, early childbearing (e.g. anemia) and exposure to HIV/AIDS and other sexually transmitted diseases
- ✓ Implemented policies and programmes to reduce and eradicate child, early and forced marriage
- ✓ Implemented policies and programmes to eliminate violence against girls, including physical and sexual violence and harmful practices
- ✓ Implemented policies and programmes to eradicate child labour and excessive levels of unpaid care and domestic work undertaken by girl children
- ✓ Promoted girls' awareness of and participation in social, economic and political life

The Rights of Children in the country are protected under the Children's Protection and Welfare Act, 2012; The People's trafficking and people smuggling prohibition Act 2009, The Disability Act, 2018; the Sexual Offences and Domestic Violence Act, 2018. A number of social policy frameworks are in place and they provide mechanism for eliminating discrimination and violence among girl children. These include The Children's Policy, Disability policy, The gender policy, the health policy, the SRH policy, the youth policy, the social welfare policy, the social protection policy, HIV preventions policy.

There are a number of programmes that are implemented to empower the girl child with knowledge and skills sets that would enable them to make informed decisions as well as take advantage of opportunities to participate in positions of influence. There are also programmes that offer a myriad of information and services including protection services. The services include the one stop center for address violence related crimes perpetrated against them. There is also a toll free line which girls can report incidents of violence as it happens, in or out of school. The Police Services have a special unit dedicated to sexual offences and domestic violence crimes. A number of implementing partners of Government (Civil society and Development partners) are implementing programme that focus on the needs of the girl child. Government in collaboration with partners continuously runs programmes to increase awareness on the needs and potential of girl children. Annual commemorations on the

International Day of the Girl Child are commemorated in schools, as another way of raising awareness on the potentials, skills, and challenges faced by the Girl Child

In the last five years Government has strengthened coordination mechanisms for children through the revitalizing the Children's department with continues to implement the National plan of Action for children. Currently the pillars of the Action plan have been expanded to include Parenting and Early childhood care & development. An M&E framework is being elaborated to guide the implementation of the National Children's programme action plan.

Also the Schools as centres of care an support programme (INQABA) continues to be rolled out in schools which ensures that schools continues to be centres of care and support particularly the most vulnerable ones through the provision of education and other essential services, including health care, nutrition, psychosocial support, safety and protection.

Through partners, the Ministry of Education and Training developed girl's empowerment clubs in schools where girls are taught on their growth and development, violence, and their sexual and reproductive health rights. The Ministry of Education and Training carries out various programmes such as career expos/fairs, Math and Science fairs, among other to expose students (girls and boys) to different career choices. Girls also get an opportunity to be oriented around male dominated professions. Different institutions carry out Job Shadowing for girls to orient them around their area of interest with major focus on Science, Technology, Engineering and Maths. The media also enhances with a wider outreach through its educational program e.g. MTN EDUCARE a live broadcast of Maths and Science class.

Government renewed its commitment to ensure collaboration between the ministries of education, youth and health in the implementation of comprehensive sexuality education (CSE) in and out of school settings. The national framework for the implementation of CSE was approved by cabinet. A manual, Guidelines and standards were developed. A CSE training module for pre-service tertiary module for teacher training for teachers was developed and it is currently being piloted. In 2014, an online training course on CSE for in-service teachers was introduced and 100 teachers in 271 secondary schools were trained. In order to increased capacity to deliver CSE programmes in out of schools settings 98 Health care workers, 94 youth

leaders 14/52 Tinkhundla were trained on CSE and about 40,000 young people were reached with CSE information within the first 3 years of the programme. In order to ensure that the CSE content is age appropriate and culturally sensitive the following research was conducted: Socio Cultural study affecting and or promoting uptake of ASRH services by young people study- 2014, National assessment of adolescents and youth friendly health services-2018; State of the youth report- 2014 and the Demographic dividend study 2018

VI. ENVIRONMENTAL CONSERVATION PROTECTION AND REHABILITATION

Q30. What actions has your country taken in the last five years to integrate gender perspectives and concerns into environmental policies?

The Government of Eswatini recognizes that gender equality and the empowerment of women and girls is essential to protect natural resources and the planet, and has mainstreamed gender in the Swaziland National Climate Policy of 2016. The policy acknowledges that women depend on the national environment for their livelihood and are disproportionately impacted by climate change; have invaluable knowledge on management of natural resources which can be utilised for climate adaptation, mitigation and for disaster reduction strategies.

Furthermore, the country supported women's participation and leadership in environmental and natural resource management and governance through the Ezulwini Water Supply and Sanitation Delivery project which aims to provide potable water and sanitation services to communities across Ezulwini Valley, and has begun construction of dams, laying of pipes and use of ablution facilities.

Project outcome:

- Improved access to water and sanitation facilities /Reduction of time women spend to fetch water
- Women in management of the Corporation
- Inclusion of female hydrologist engineers
- Women trained as plumbing technicians

- Women benefiting from the management of community water kiosks and sanitation facilities
- Internship program to attract more women in the workforce
- Improved community health and hygiene

Supported women's participation and leadership in environmental and natural resource management and governance

The Government of Eswatini established a Climate Change Unit - Ministry of Tourism and Environmental Affairs which is responsible for mainstreaming climate change issues across all sectors prioritizing the participation of women. The unit is leading by example in ensuring that women have decision making roles in climate change adaptation and mitigation. It is led by a woman and the office has an equal representation of men and women. The unit ensures the participation of women and other vulnerable groups during stakeholder engagement processes.

The Ministry of Tourism and Environmental Affairs has made efforts to enhance climate change mainstreaming across all sectors through the National Climate Change Policy. The high vulnerability of women and youth to climate change impacts is acknowledged by the policy and the following policy statements are in place to ensure gender participation in building climate resilience and climate change mitigation:

1. Consider gender in the design of adaptation and mitigation strategies and programmes
2. Engage women and youth in climate change decision making and planning
3. Develop, compile and share practical tools, information and methodologies to facilitate the integration of gender in to all climate change related policies, programs and plans.

The implementation of the policy is still in progress since it was adopted in 2016 meaning that there is still work to be done in ensuring women participation in decision making processes.

The Ministry is also implementing the Eswatini Green Climate Fund Readiness Support and the Building Capacity to Advance National Adaptation Planning (NAP) in Eswatini projects funded by Green Climate Fund (GCF). Projects funded by the GCF have to abide to the GCF's gender policy which has the following objectives:

1. To ensure that by adopting a gender-sensitive approach, the Fund will achieve greater, more effective, sustainable, and equitable climate change results, outcomes and impacts, in an efficient and comprehensive manner in both its internal and external procedures and activities;
2. To build equally women and men's resilience to, and ability to address climate change, and to ensure that women and men will equally contribute to, and benefit from activities supported by the Fund;
3. To address and mitigate against assessed potential project/programme risks for women and men associated with adaptation and mitigation activities financed by the Fund;
4. To contribute to reducing the gender gap of climate change-exacerbated social, economic and environmental vulnerabilities.

The National Adaptation Planning (NAP) process will ensure that all activities are not only gender-balanced but also gender-responsive to the differentiated needs and capacities of women and men within the national context. Training will take place to ensure that both men and women will engage meaningfully in national adaptation planning and decision-making.

Q31. What actions has your country taken in the last five years to integrate gender perspectives into policies and programmes for disaster risk reduction, climate resilience and mitigation?

Nothing in this area

SECTION 3: NATIONAL INSTITUTIONS AND PROCESSES

National Machinery for Gender Equality

In 2014, the Government of Eswatini elevated the Gender Coordination Unit and renamed it the Department of Gender and Family Issues in the Deputy Prime Minister's Office with two added staff. The National Gender Policy of 2010 is currently under review to incorporate agenda 2030, 2063 and the SADC Protocol on gender and development and respective indicators. The National Gender Policy is effectively implemented through the following structures:

Gender Focal Teams (GFTs)

In view of the fact that gender is crosscutting, the government created Gender Focal Teams in all government Ministries to deal with gender related issues as well as report progress to the department of gender and Family Issues for public and international benefit.

The gender focal teams served as the critical link between their ministries and the National Gender Machinery and other national gender structures. Gender Focal Teams are coordinated by the Department of Gender and Family Issues on gender related issues⁵⁸.

The Gender Consortium

The Gender Consortium is composed of non-governmental organisations that deal with gender related issues. It collaborates closely with the national gender machinery, Development Partners and other stakeholders to bring about gender equality through mainstreaming gender into all programmes of national development. The Department of Gender and Family issues provides policy guidance and direction on gender issues at national level⁵⁹.

High Level Task Force on Violence and the Multi sectoral Task Team on Violence

Government established an institutional mechanism on violence in 2015 following the Concluding Observations and Recommendation by the CEDAW Treaty Body in Geneva in 2014. A High-Level Task Force on Violence was set up comprising of Principal Secretaries in key Ministries and Directors from key Civil Society Organisations, a representative from the Traditional Leaders (Chief) and Faith Based Organisations to advise government on policy issues pertaining to violence in the country. This structure is chaired by the Principal Secretary of the Ministry responsible for Gender and Family Issues the Deputy Prime Ministers' Office. A Multi-

⁵⁸ Swaziland Progress Report on the Implementation of Beijing Declaration and Platform for Action 20TH Review 2014

⁵⁹ Swaziland Progress Report on the Implementation of Beijing Declaration and Platform for Action 20TH Review 2014

Sectoral Technical Team on Violence was also established, for a more coordinated GBV response with the similar representation⁶⁰.

The objective of the Task Force is to provide policy guidance on violence related programmes; to mobilise resources; to commission research and statistics; integrate gender dynamics of violence; facilitate the approval of pending legislations and policies; and provide an oversight on technical committees. It is proposed that the Task Force will meet on a semi-annual basis.

At technical level, a Multi-Sectoral Coordination Committee was established with clear Terms of Reference (TORs). The committee consist of members/representatives from Government, Civil Society and Private Sector organisations. This committee feed into the High Level Task Force on Violence.

Regional Referral Networks

Government further established the Regional Referral Networks at District level for a more decentralised approach towards easy access and benefit from government services, facilities and information on ending violence in the country.

Q33. Is the head of the national machinery a member of the institutional process for SDG implementation (e.g. inter-ministerial coordinating office, commission or committees)?

SDG Committee

The national process for the SDG implementation is led by the Poverty Reduction Unit in the Ministry of Economic planning and Development and comprises of multisectoral stakeholders. The Head of the national Gender Machinery for Gender in Eswatini leads the implementation of the social sector of the SDGs including the reporting aspect but does not form part of the inter-ministerial coordinating Office, commission or committee.

⁶⁰ National Guidelines for the Multi-Sectoral Response to Gender Based Violence Eswatini, 2018, DPMO

Q34. Are there formal mechanisms in place for different stakeholders to participate in the implementation and monitoring of the Beijing Declaration and Platform for Action and the 2030 Agenda for Sustainable Development?

STEM Committee

YES. The Deputy Prime Minister's Office established a quarterly reporting mechanism on the implementation of the National Gender Policy which operationalises the Beijing Declaration and Platform for Action. Due to financial constraints, reporting time frames were reduced to Twice a year.

The mechanism is composed of amongst others the gender focal points from all government ministries, civil society organisations, women's rights organisations, academia and think tanks, Faith Based Organisations, Parliamentary committees that includes Women's Parliamentary Caucus, Gender Sector Committee, private sector , United Nations System, persons with disabilities.

SECTION 4: DATA AND STATISTICS

Q 36 (top three areas in which the country has made most progress over the past five years when it comes to gender statistics at the national level?)

Greater utilization and or improvement of administrative based or alternative data sources to address gender data gaps

The gender coordination department has successfully and is continuously advocating for the usage of local or national data to inform programming and project design. Evidence based programming has been identified as key to advance in addressing specific gender disparities for Emaswati as opposed to generalizing and treating people as homogenous subjects. Administrative data records and sources are being improved and aligned; the national

surveillance system on violence being assessed for improvements and transformation paper based to electronic moving towards an information management system (GBVIMS)

Establishment of inter-Agency coordination mechanism on gender statistics;

The department responsible for gender coordination has successfully established a High Level task Force, which is a high level body (Principal Secretaries) for the purpose of providing oversight on gender issues being undertaken as well as commissioning of the Gender research agenda at national level. Furthermore, the Office established a National Multisectoral task Team which is responsible for among other issues advocating for knowledge generation and evidence based programming and planning. This body has provided oversight for a number of research in the area of gender (gender research agenda), “study on the drivers of violence against children in Swaziland 2017”, ‘strategy to end violence in Swaziland with a Costed action plan 2017-2022” to mention but a few.

Conduct of new surveys to produce national baseline information on specialized topics;

The department responsible for gender has successfully conducted some research on gender issues in the country. This involves the Study on the Drivers of Violence Against children in Swaziland, A National Study on violence against children and young women in Swaziland 2007, a study on women in politics and decision making positions 2013 and the Swaziland Gender and Development Index 2017. These reports have greatly informed programming and interventions in the specific areas of focus and thus all sectors have been encouraged to use the available sources of data to inform their planning and interventions. Other research institutions have even commissioned their own sector based and need based research in the gender area which is also greatly encouraged to increase the pool of data and evidence for effective programming and intervention design.

Q37 (top three priorities for the country for strengthening National gender statistics over the next five years?)

Greater utilization and or improvement of administrative based or alternative data sources to address gender data gaps;

The gender coordination department is continuously advocating for the usage of local or national data to inform programming and project design. Evidence based programming has been identified as key to advance in addressing specific gender disparities for Eswatini as opposed to generalizing and treating people as homogenous subjects. Administrative data records and sources are being improved and aligned; the national surveillance system on violence being assessed for improvements and transformation paper based to electronic moving towards an information management system (GBVIMS)

Establishment of inter-Agency coordination mechanism on gender statistics;

The department responsible for gender coordination has established a National Multisectoral task Team which is responsible for among other issues advocating for knowledge generation and evidence based programming and planning. This body has provided oversight for a number of research in the area of gender (gender research agenda), “study on the drivers of violence against children in Swaziland 2017”, ‘strategy to end violence in Swaziland with a Costed action plan 2017-2022” to mention but a few.

Conduct of new surveys to produce national baseline information on specialized topics;

The Department of Gender and Family Issues spearheaded the development of the National Gender and Development Index and a Women’s Score Card in 2017 that culminated to the African Gender and Development Index and a African Women Score Card. These frameworks serve as baselines for policy, planning and programming.

Q38 Have you defined a national set of indicators for monitoring progress on SDGs

Yes

The Swaziland Gender and Development Index have the set of Indicators for monitoring gender and development.

Q39. Has data collection and compilation on SDG indicators and on gender specific indicators and under other SDGs begun?

Yes data collection and compilation has begun.

The prioritization has been in such a way that the goals have been grouped into three categories; (1) Priority goals, (2) Cross cutting goals and (Enablers) hence the Indicators follow that format as well. SDG 5 indicators have been put under the cross cutting category.

Q40 which disaggregation is routinely provided by major surveys in country?

- Geographic location; region, Inkhundla (in some cases),
- Area; Urban, Rural
- Income /expenditure
- Sex
- Age
- Education level
- Marital Status
- Disability (where possible)
- Religion

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