

Existing rates of: **Wasting: 2.2%** **Stunting: 37.9%** **Proportion of population underweight: 9.3%**

Source: Government of Rwanda (DHS, 2014-15)





















Strong Performance

- The Government of Rwanda has ensured tenure security for rural populations. Land titling is common and land markets function well. Policy promotes equitable access to common property resources.
- The Government encourages varied agricultural research and extension services, and local farmer organisations are involved in setting policy priorities. The extension system is effective and properly reaches out to poor farmers. Government policies, strategies and mechanisms seek to ensure gender equity in access to extension services.
- Relative to other HANCI countries, Rwanda's medium/long term national development policy (Economic Development and Poverty Reduction Strategy) assigns strong importance to nutrition.
- Rwanda instituted a separate budget line for nutrition, enabling transparency and accountability for spending.
- The National Nutrition Policy/Strategy identifies time bound nutrition targets and a multisectoral and multistakeholder policy coordination mechanism has been set up.
- Policymakers in Rwanda benefit from regular nutrition surveys that are statistically representative at national level. The last survey was published in 2014-2015.
- The Government of Rwanda promotes complementary feeding practices and has achieved two high doses of vitamin A supplementation for 96% of children in 2015.
- In Rwanda 99% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2014-2015.




Areas for improvement




- Spending on agriculture (7.5% of public spending in 2016) is close to, yet not fully meeting government commitments set out in the African Union's Maputo Declaration (10% of public spending).
- Rwanda's spending in its health sector (6.2% of public spending in 2015) does not fully meet (15%) commitments set out in the Abuja Declaration.
- In Rwanda, the law gives women and men equal economic rights and equal legal access to agricultural land. However, these laws are not effectively enforced and discriminatory practices against women continue, increasing their vulnerability to hunger and undernutrition.
- Weak access to improved sanitation facilities (62.3% in 2015) obstructs better hunger and nutrition outcomes.
- In Rwanda, constitutional protection of the right to food and the right to social security is weak.
- Civil registration rates are weak (63.2% in 2010) and potentially hold back children's access to critical public services such as health and education.




Hunger Reduction Commitment Index (HRCI)

Public spending	Score*	Year	HRCI Rank of 45
 Public spending on agriculture as share of total public spending ¹	 7.5%	2016	16th
 Public spending on health as share of total public spending ²	 6.2%	2015	26th
Policies			
 Access to land (security of tenure) ³	 Strong	2016	Joint 2nd
 Access to agricultural research and extension services ³	 Strong	2013	Joint 5th
 Civil registration system — coverage of live births	 63.2%	2010	29th
 Functioning of social protection systems ³	 Moderate	2016	Joint 3rd
Laws			
 Level of constitutional protection of the right to food ³	 Weak	2016	Joint 29th
 Equality of women's access to agricultural land (property rights) ⁴	 In Law, not in Practice	2014	Joint 1st
 Equality of women's economic rights ⁴	 In Law, not in Practice	2014	Joint 1st
 Constitutional right to social security (yes/no)	 No	2017	Joint 29th

























¹ Possible scores are:  <75% of agri. spending pledges (AU commitments set out in the Maputo Declaration)  >=75% & <100%  >=100%

² Possible scores are:  <75% of health spending pledges (AU commitments set out in the Abuja Declaration)  >=75% & <100%  >=100%

³ Possible scores are:  Very Weak/Weak  Moderate  Strong/Very Strong

⁴ Possible scores are:  Not in Law  In Law Not in Practice  In Law & Practice

Nutrition Commitment Index (NCI)

Public spending	Score*	Year	NCI Rank of 45
 Separate budget for nutrition (No/Sectoral only/Yes)	 Yes	2017	Joint 1st
Policies			
 Vitamin A supplementation coverage for children	 96%	2015	10th
 Government promotes complementary feeding (yes/no)	 Yes	2010	Joint 1st
 Population with access to an improved water source	 77.9%	2015	24th
 Population with access to improved sanitation	 62.3%	2015	7th
 Health care visits for pregnant women	 99%	2014-2015	2nd
 Nutrition features in national development policy ¹	 Strong	2013-2018	13th
 National nutrition policy/strategy (yes/no)	 Yes	2017	Joint 1st
 Multisector and multistakeholder policy coordination (yes/no)	 Yes	2017	Joint 1st
 Time bound nutrition targets (yes/no)	 Yes	2017	Joint 1st
 National nutrition survey in last 3 years (yes/no)	 Yes	2014-2015	Joint 1st
Laws			
 ICMSB [^] Enshrined in domestic law ²	 Few Aspects Enshrined	2016	Joint 28th

¹ Possible scores are:  Very Weak/Weak  Moderate  Strong/Very Strong (Note: Performance relative to other countries).

² Possible scores are:  Not Enshrined in Law  Few/Many Aspects Enshrined  Fully enshrined.

[^] International Code of Marketing of Breastmilk Substitutes