



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

Source: Gov. of Rwanda (DHS, 2015)

Strong Performance

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 2012.

The Government of Rwanda promotes complementary feeding practices.

In Rwanda 98% of women aged 15-49 were visited at least once during pregnancy by skilled health personnel in 2010.

Areas for improvement

Spending on agriculture (7.99% of public spending in 2013) is close to, yet not fully meeting government commitments set out in the African Union's Maputo Declaration (10% of public spending).

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.

The Government of Rwanda has not enshrined the International Code of Marketing of Breastmilk Substitutes into domestic law.

The Government of Rwanda has only achieved two high doses of vitamin A supplementation for 3% of children in 2012.

Weak access to improved sanitation facilities (63.8% in 2012) 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	 7.99%	2013	10th
 Public spending on health as share of total public spending ¹	 22.1%	2012	1st
Policies			
 Access to land (security of tenure) ²	 Strong	2013	Joint 2nd
 Access to agricultural research and extension services ²	 Strong	2013	Joint 4th
 Civil registration system — coverage of live births	 63.2%	2010	22nd
 Functioning of social protection systems ²	 Moderate	2014	Joint 2nd
Laws			
 Level of constitutional protection of the right to food ³	 Weak	2011	Joint 20th
 Equality of women's access to agricultural land (property rights) ⁴	 In Law, not in Practice	2014	Joint 4th
 Equality of women's economic rights ⁴	 In Law, not in Practice	2011	Joint 1st
 Constitution recognises the right to social security (yes/no)	 No	2006	Joint 31st

¹ Possible scores are:  <75% of agriculture (Maputo) and health (Abuja) spending pledges  >=75% and <100%  >=100%

² Possible scores are:  Weak  Moderate  Strong

³ Possible scores are:  Weak  Moderate  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	2014	Joint 1st
Policies			
 Vitamin A supplementation coverage for children	 3%	2012	45th
 Government promotes complementary feeding (yes/no)	 Yes	2010	Joint 1st
 Population with access to an improved water source	 70.7%	2012	28th
 Population with access to improved sanitation	 63.8%	2012	9th
 Health care visits for pregnant women	 98%	2010	4th
 Nutrition features in national development policy ¹	 Strong	2013-2018	13rd
 National Nutrition Policy/Strategy (yes/no)	 Yes	2014	Joint 1st
 Multisector and multistakeholder policy coordination (yes/no)	 Yes	2014	Joint 1st
 Time bound nutrition targets (yes/no)	 Yes	2014	Joint 1st
 National nutrition survey in last 3 years (yes/no)	 Yes	2012	Joint 1st
Laws			
 ICMSB [^] Enshrined in domestic law ²	 Not Enshrined in Law	2014	Joint 38th

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

² Possible scores are:  Not Enshrined in Law  Voluntary Adoption  Fully enshrined.

[^] International Code of Marketing of Breastmilk Substitutes