

# Millennium Development Goals

## Rwanda

### Final Progress Report: 2013



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### List of abbreviations

9YBE	Nine Years Basic Education
AfDB	African Development Bank
AIDS	Acquired Immune Deficiency Syndrome
ART	Antiretroviral Treatment
ARVs	Antiretrovirals
CFCs	Chlorofluorocarbons
CHW	Community Health Workers
CIP	Crop Intensification Program
CO <sub>2</sub>	Carbon Dioxide
CPAF	Common Performance Assessment Framework
CPD	Continuous Professional Development
DAD	Development Assistance Database
DBS	Direct Budget Support
DDPs	District Development Plans
DHS	Demographic and Health Survey
DOTS	Directly Observed Treatment Short Course
DPs	Development Partners
DPCG	Development Partners Coordination Group
DRC	Democratic Republic of Congo
EDPRS	Economic Development and Poverty Reduction Strategy
EICV	Enquête Intégrale des Conditions de vie des Ménages/Integrated Household Living Conditions Survey
FAO	Food and Agriculture Organization
FONERWA	Fund for Environment and Climate Change
FSWs	Female Sex Workers
GBV	Gender-Based Violence
GDP	Gross Domestic Product
GGCRS	Green Growth and Climate Resilience
GMO	Gender Monitoring Office
GNI	Gross National Income
GoR	Government of Rwanda
HCFCs	Hydrochlorofluorocarbon
HIPC	Heavily Indebted Poor Countries
HIV	Human Immunodeficiency Virus
ICT	Information and Communication Technology
IEC	Information and Education Campaign
IMF	International Monetary Fund
IPAR	Institute of Policy Analysis and Research
IT	Information Technology
ITN	Insecticide Treated Net
ITU	International Telecommunications Union
JADFs	Joint Action Development Forums

LED	Local Economic Development
LLIN	Long Lasting Insecticide Net
M&E	Monitoring and Evaluation
MDGs	Millennium Development Goals
MDRI	Multilateral Debt Relief Initiative
MIGEPROF	Ministry of Family and Gender Promotion
MINAGRI	Ministry of Agriculture and Animal Resources
MINECOFIN	Ministry of Finance and Economic Development
MSM	Men having Sex with Men
MSMEs	Micro, Small and Medium Enterprises
NGOs	Non-Government Organisations
NISR	National Institute of Statistics of Rwanda
ODA	Official Development Assistance
ODS	Ozone Depleting Substance
OECD	Organisation for Economic Co-operation and Development
OLPC	One Laptop per Child
OVC	Orphans and other vulnerable children
PBHF	Performance-Based Health Financing
PEPFAR	Presidential Emergency Program for AIDS Relief
PMTCT	Prevention of Mother to Child Transmission
PPA	Participatory Poverty Assessment
PPP	Public Private Partnerships
PPP	Purchasing Power Parity
PRSP	Poverty Reduction Strategy Paper
RBC	Rwanda Biomedical Center
RDHS	Rwanda Demographic and Health Survey
REMA	Rwanda Environmental Management Authority
RWF	Rwandan Franc
SBS	Sector Budget Support
SSPs	Sector Strategic Plans
SWAp	Sector-Wide Approach
TB	Tuberculosis
TVET	Technical and Vocational Education and Training
TVs	Televisions
UN	United Nations
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children's Organisation Fund
VCT	Voluntary Counselling and Testing
VSAT	Very Small Arpeture Terminals
VUP	Vision 2020 Umurenge Programme
WHO	World Health Organization



## FOREWORD

The government of Rwanda recognizes Millennium Development Goals (MDGs) as benchmarks of the progress the country makes towards sustainable development. Rwanda has demonstrated how agreed goals and determined action can deliver real improvements for a country's citizens.

Focus provided by the MDGs has been vital in delivering positive outcomes and used as tool for framing policies and priorities to drive forward National Development Agenda.

The Millennium Development Goals have been translated into the Economic Development and Poverty Reduction Strategies (EDPRS I & II), which provide the framework for the budget allocation of priority sectors and actions identified to ensure that the MDG goals are met. In addition, the priority areas are also reflected in the national framework – Vision 2020 – which outlines the country's long-term development targets.

Currently, Rwanda is among a few countries at the forefront in achieving Millennium Development Goals. The country has made impressive progress on several MDGs, especially in universal primary education; gender equality and women empowerment; infant and maternal mortality; HIV prevalence; and environmental sustainability.

Many steps have been taken in bridging gender gaps through economic empowerment programmes for women; women guarantee fund, women entrepreneurship program and having rights to property and inheritance. The same spirit is captured in the constitution which guarantees that 30% of leadership positions in parliament must be held by women.

In the education sector, free education has been extended to cover 12 years of basic schooling from the original 9 years, thereby including the entire secondary school cycle. Introduction of performance-based financing in the health sector and community-based health insurance are among other key achievements realized.

Collaboration among public, private, and nongovernmental organizations (NGOs), has remained concrete, providing a common language and bringing together various actors. This collaboration has brought about positive advancement in governance, inclusive growth, economic transformation and the knowledge-based economy. Today, farmers benefit from the Crop Intensification Program (CIP) which immensely contributes to increased agricultural productivity and accrue the source of households' revenues.

Indeed, the existing progress is as a result of a participatory approach between the public and stakeholders by building partnerships to enhance mutual accountability. In the process, the country has produced supportive evidences of the requirements to develop the human and institutional capacities needed to deliver sustainable development for Rwanda.



As one of the countries piloting thematic areas of the post-2015 Sustainable Development Goals, Rwanda upholds building effective institutions, good governance and rule of law as key priorities for future development.

Rwanda recognizes the need to stay focused after the expiry of the Millennium Development Goals at the end of 2015. Our institutions, public and private sectors are obliged to keep up this commendable pace of economic transformation.

Amb. Claver GATETE

**Minister of Finance and Economic Planning**

## **PREFACE**

The Government of Rwanda has made achieving the Millennium Development Goals (MDGs) central to its policy framework, as defined in the long term development agenda, the Vision 2020, as well as the medium term strategies, EDPRS1 and EDPRS 2. The overriding long-term national development objective is to transform Rwanda into a middle-income country by 2020.

For the last decade, Rwanda's macroeconomic stability has been strengthened, and important steps have been made in establishing the base for sustained growth and further poverty reduction. These gains were particularly pronounced during the implementation of EDPRS1, and they are clearly reflected in the high levels of sustained and inclusive economic growth, expanded basic social services, significant poverty reduction, gender empowerment and an overall impressive progress towards most of the MDGs. This progress has been achieved not only thanks to the strong and sustained political commitment at the highest level, but also with a significant international support for well-designed and efficiently executed national scale programs.

This is the fourth progress report on the MDGs for Rwanda, and it documents the overall progress that the country is making towards reducing poverty and promoting human development. It also discusses the redistribution efforts made by the Government to address the spatial disparities observed in poverty alleviation and access to health and education services, especially for women and youth.

We are now only one year away from the set deadline of the Millennium development Goals, and the Consultations for the Post 2015 Development Agenda, in which Rwanda is an active participant, are already underway. The findings of this report give grounds for considerable optimism, not only for more progress towards the achievement of the MDG goals by the end of 2015, but also for the potential for success in the upcoming implementation of the post 2015 development agenda.

The UN family, together with other Development Partners, are indeed proud to be a strong partner of the Government in its determination to assure a bright future for the people of Rwanda.

**Lamin M. Manneh**

UN Resident Coordinator/ UNDP Resident Representative

# 1. Introduction and the MDG Status at a Glance

This report is the fourth MDG Progress Report for Rwanda. It assesses the country's achievements in relation to the Millennium Development Goals (MDGs), including a sub-regional disaggregation of data wherever possible and relevant. The country's generally impressive development performance has been tracked since the turn of the century. Rwanda has produced three MDG Country Reports to-date, one in 2003, another in 2007 and a third – still unofficial – in 2012, the latter based on 2010 data.

The 2013 Report draws on the data used in the first three reports and also presents data gathered from the National Institute of Statistics Rwanda (NISR) primarily in its Demographic and Health Survey (DHS) and Integrated Household Living Conditions Survey (EICV), reports on the Economic Development and Poverty Reduction Strategy (EDPRS), select sector ministry reports, donor reports, newspaper articles and a few independent documents<sup>1</sup>. It is especially important to point out that the Report includes select data from the 2012 Census but only as complementary information given that the Census does not directly track MDGs, and its purpose is different than that of the household surveys used as primary data sources here. In accordance with the Addendum to the Guidelines for the MDG Reports issued by the UNDP in 2013, it covers a broader set of issues than previous reports. Thus, in addition to the regular reporting on progress and challenges, it reflects on the national milestones around the MDGs in the Rwandan development context, and identifies the unfinished business that remains as well as emerging priorities.

The MDGs have played an important catalyzing role in the implementation of national development policies in Rwanda by providing specific universally accepted targets and indicators thus laying the foundation for a comparative perspective on the country's performance. They have informed and complemented national strategies as laid out in Vision 2020 and the Economic Development and Poverty Reduction Strategy (EDPRS1 and EDPRS2).

Rwanda's progress toward the MDGs is largely a story of success as recognized notably in 2013 by the United Nations' MDG Africa Report issued jointly by the African Union, African Development Bank, UN Economic Commission for Africa and UNDP<sup>2</sup>. In assessing country progress towards the MDGs, Rwanda among a handful of countries, stands out as being on track to achieve almost all the Goals by 2015. Some targets have already been reached and in reference to others Rwanda is likely to do so. Progress is especially notable in efforts to reduce the number of people living in poverty and in hunger as well as in relation to key indicators in the education and health sectors. Significant achievements have also been recorded in

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<sup>1</sup> For further information about methodological issues, see Annex 2.

<sup>2</sup> UNDP 2013. *Assessing Progress in Africa toward the Millennium Development Goals. Food Security in Africa: Issues, Challenges and Lessons*. New York: UNDP.

other sectors such as the environment. Even where there are no set targets, the trend is generally positive indicating that the country is moving in the right direction.

There are still areas that require enhanced efforts by the Government and other stakeholders. These include getting women and youth into off-farm employment, and in spite of general improvements in the health sector, reducing under-5 and infant mortality rates, increasing the number of four times antenatal care visits, getting more children to use antiretroviral drugs and, perhaps most of all, intensifying the fight against HIV/AIDS.

The Government of Rwanda is aware of these shortfalls and is ready to make a sustained effort to implement policies aimed at reaching these targets. Even if some of them will not be reached by 2015, there is convincing evidence both in existing data and current policy intentions that the country's development performance will continue to be going up rather than down.

Previous MDG reports have confirmed the progress that Rwanda has made but because they were issued much earlier their focus was primarily on whether the country was on track or not. It was more difficult in earlier reports to conclude with any degree of certainty whether or not it would reach MDG targets. This 2013 Report has been produced at a time when Rwanda is approaching the 2015 finish line. There is greater certainty in what is said in this report because there is more extensive longitudinal data available and with the finish in sight it is also easier to sketch what is likely to happen by 2015. Against this background, it is especially important to point out that this Report is the most positive of all the four MDG reports. In other words, Rwanda has done better than what was expected in previous years. The details of the country performance are shown at a glance below and are further discussed MDG by MDG in Chapter 4.

The Report uses three colours: "green" when a target has been achieved or exceeded; "yellow", when likely to be achieved; and "red" when not likely to be achieved.

<b>Target Assessment</b>	<b>Legend</b>
Not Likely to be Achieved	Red
Likely to be achieved	Yellow
Already Achieved/Exceeded	Green

## Status at a Glance

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>Goal 1: Eradicate Extreme Poverty and Hunger</b>					
<u>Target 1A:</u> Halve between 2000 and 2015 the proportion of people in poverty					
1.1a: Percentage of population below the National Poverty Line <sup>3</sup>	60,4%	56,7%	44,9%	30,2%	
1.1b: Extreme Poverty <sup>4</sup>	40%	36%	24,1%	20%	
1.2: Poverty Gap Ratio at \$1 a day (PPP), percentage	24.4%	22.3%	14.8%	12.2%	
1.3: Share of poorest quintile in national consumption		4,6%	5,2%	No Target	
<u>Target 1B:</u> Achieve full and productive employment and decent work for all, including women and young people					
1.5: Unemployment rate 16 years of age and older <sup>5</sup>	1,4%	1,6%	0,9%	No Target	
<u>Target 1C:</u> Halve, between 2000 and 2015, the proportion of people who suffer from hunger					
1.8a: Percentage of underweight children under five years.	24,3%	18%	11,4%	12,2%	
1.8b: Child malnutrition (% of under five children stunted) <sup>6</sup>	42,6%	51%	44,2%	24.5%	
1.8c: Child malnutrition (% of under five children wasted) <sup>7</sup>	6,8%	5%	2,8%	2%	
1.9: Proportion of population below minimum level of dietary intake.	40%	35,8%	24,1%	20%	
<b>Goal 2: Achieve Universal Primary Education</b>					
<u>Target 2A:</u> Ensure that by 2015 children everywhere, boys and girls alike will be able to complete a full course of primary schooling					

<sup>3</sup> The use of national poverty line is allowed and replaces the official MDG indicator of the % of the population under \$1.00 per day. It is based on the cost of buying the minimum food consumption basket plus an allowance for essential non-food consumption.

<sup>4</sup> Not an official MDG Indicators, but tracked by the Government of Rwanda

<sup>5</sup> The indicator used here is the % of unemployed over age 16 instead of the official indicator - Employment-to-population ratio

<sup>6</sup> Not an official MDG Indicator. The Government of Rwanda tracks progress on this indicator, which is related to UN MDG 1.8

<sup>7</sup> Not an official MDG Indicator. The Government of Rwanda tracks progress on this indicator, which is related to UN MDG 1.8

	<b>Baseline 2000</b>	<b>2005/6</b>	<b>2010/11</b>	<b>2015 Target</b>	<b>Target Status</b>
2.1: Net enrolment rate in primary school <sup>8</sup>	72,6%	86,6%	96,5 (2012)	100%	
2.2: Proportion of pupils starting grade one who reach last grade of primary school	22%	51,7%	72,7% (2012)	100%	
2.3a: Literacy rates of women and men aged 15 -24 years	57,4%	76,9%	83,7%	No target	
2.3b: Literacy rates of women and men aged 15 years and above <sup>9</sup>	52,4%	65,3%	69,7%	No target	
<b>Goal 3: Promote Gender Equality and Empower Women</b>					
<u>Target 3:</u> Ensure that gender disparity in primary and secondary education is eliminated, preferably by 2005, and in all levels for education no later than 2015					
3.1a: Ratio of girls to boys in primary school <sup>10</sup>	1,00	1,03	1,03	1,00	
3.1b: Ratio of girls to boys in secondary school <sup>11</sup>	0,51	0,81	0,93	1,00	
3.2: Share of women in waged employment in the non-agricultural Sector	7,6%	13,7%	18,1%	50%	
3.3: Percentage of seats held by women in national parliament	26%	48,8%	64% (2013)	50%	
<b>Goal 4: Reduce Child Mortality</b>					
<u>Target 4:</u> Reduce by two-thirds between 2000 and 2015 the under-five mortality rate					
4.1: Under-five mortality rate per 1000 live births	196,2	152	76	50.1	
4.2: Infant mortality rate per 1000 live births	107	86	50	28.2	
4.3: Proportion of one-year-old children immunized against measles	87%	85,6%	95%	100%	
<b>Goal 5: Improve Maternal Health</b>					
<u>Target 5A:</u> Reduce by three-quarters, between 2000 and 2015, the maternal					

<sup>8</sup>Rwanda only has % data available for this indicator. The formulas derived from UNESCO's Education Indicators Technical Guidelines

<sup>9</sup>Not an official MDG Indicator, but tracked by the Government of Rwanda, Related to Indicator 2.3a

<sup>10</sup>Gender Parity Index (GPI), is the ratio between the Gross Enrolment Ratio (GER) of girls and that of boys

<sup>11</sup>Ibid

	<b>Baseline 2000</b>	<b>2005/6</b>	<b>2010/11</b>	<b>2015 Target</b>	<b>Target Status</b>
mortality ratio					
5.1: Maternal mortality ratio - deaths per 100.000 live births	1071	750	476	268	
5.2: Proportion of births attended by skilled health professionals	31%	39%	69%	No target	
<u>Target 5B</u> : Achieve by 2015 universal access to reproductive health					
5.3a: Married Women 15–49 years using modern contraceptives	4,3%	10,3%	45,1%	No Target	
5.3b: All Women 15–49 years using modern contraceptives		5,6%	25,2%	No Target	
5.4: Adolescent birth rate (% total live births)	5,2%	4,2%	4,1%	No Target	
5.5a: Antenatal care coverage at least one visit	92,5%	94,4%	98%	100	
5.5b: Antenatal care coverage at least four visits	10,4%	13,3%	35,4%	100	
5.6: Unmet need for family planning for married women	36%	37,9%	18,9%	No Target	
<b>Goal 6: Combat HIV/AIDS. Malaria and Other Diseases</b>					
<u>Target 6A</u> . Have halved by 2015 and begun to reverse the spread of HIV/AIDS					
6.1: HIV prevalence rate amongst population aged 15–24 <sup>12</sup>		1,0%	1,0%	No Target	
6.1a: HIV prevalence rate amongst women 15-49 & men 15-54 <sup>13</sup>		3%	3%	No Target	
6.2: Use of condom last high risk sex					
Male	-	39.5%	66.2%	No Target	
Female	-	19,7% 26	28,5% 42%	No Target	

<sup>12</sup>This information stems from those who agreed to be tested during the DHS2 and DHS3 surveys

<sup>13</sup> Not an official MDG Indicator. This information from those who agreed to be tested during the DHS 2 and 3 surveys

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
6.3: Proportion of population aged 15–24 years with comprehensive correct knowledge of HIV/AIDS					
Male		53,6%	47,4%	No Target	
Female		50,9%	52,6%	No Target	
6.4: Ratio of school attendance of orphans to non-orphans aged 10–14 years	0,8	0,92	0,91	No Target	
<u>Target 6B:</u> Achieved by 2010 universal access to treatment for HIV/AIDS for all those who need it					
6.5: Proportion of population with advanced HIV infection using antiretroviral drugs				Target data was 2010	
Adults			86,6%	100%	
Children			53,9%	100%	
<u>Target 6C:</u> By 2015 have halted and begun to reverse the incidence of malaria and other major diseases.					
6.6a: Malaria incidence rates per 100.000		26	13	Halt and reverse	
6.6b: Malaria mortality rate over 5 years of age per 100.000	52	37,7		Halt and reverse	
6.6c: Malaria mortality rate children 0–5 years per 100.000		41			
6.7: Proportion of children under five sleeping under an insecticide-treated bed nets	5%	59,7%	69,6%	No Target	
6.9: Tuberculosis Mortality rate per 100.000	48	21	12	Halt and reverse	
6.10: Percentage of tuberculosis cases detected and cured under DOTS	23%	43%	60%	Halt and reverse	
<b>Goal 7: Ensure Environmental Sustainability</b>					
<u>Target 7A:</u> Integrate the principles of sustainable development into the country's policies and programmes and reverse the loss of environmental resources					
7.1: Proportion of land covered by forest.	12,4%	20%	24,5% (2013)	25	



	<b>Baseline 2000</b>	<b>2005/6</b>	<b>2010/11</b>	<b>2015 Target</b>	<b>Target Status</b>
7.2 CO2 emission per capita – parts per million	0,082	0,055	0,055	No Target	
7.3a Consumption of ozone depleting substances – CFCs – DOP Metric tons	30,1	12	0,0	0.0	
7.3b Consumption of ozone depleting substances – HCFCs - DOP Metric tons	0,3	3,1	4,4 <b>(2012)</b>	No Target	
<u>Target 7C:</u> Halve by 2015 the proportion of people without sustainable access to safe drinking water and basic sanitation					
7.8: Proportion of population using an improved drinking water source	64,1%	70,3%	74,2%	82%	
7.9: Proportion of population using an improved sanitation facility	51,5%	58,5%	74,5%	74,5%	
<b>Goal 8: Develop a Global Partnership for Development</b>					
<u>Target 8.D:</u> Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term					
8.12: Debt service as percentage of exports goods and services	No Baseline	8%	10,13%	10%	
<u>Target 8.F:</u> In cooperation with the private sector. Make available the benefits of new technologies - especially information and communications					
8.14 Telephones - percentage of households with either a land line or mobile phone	No Baseline		65% <b>(2013)</b>	No Target	
8.15 Internet users	No Baseline		20% <b>(2013)</b>	No Target	

## 2. Rwanda: Its development context

As the country is marking the 20<sup>th</sup> commemoration of the Genocide against the Tutsis, it is important to remember that twenty years ago Rwanda was a shell of a nation. In July 1994, approximately one million people or more<sup>14</sup> had been killed meaning more than 400 lives were lost every hour in the 100 days the genocide continued. In addition, millions of Rwandans were displaced from their homes as they fled, most to neighbouring countries. Its institutions and system of government had been destroyed, trust among its people lost. As Tony Blair, the former British Prime Minister, notes about the country: “Rwanda, desperately poor, without skilled labour and resources and the people demoralized and divided, found itself in an unprecedented situation”<sup>15</sup>. It had to start all over again.

The country’s post-genocide development strategy rests on the premise that security and stability must be sustained at whatever cost. In pursuing its development ambitions, initially slowly but in recent years in accelerated fashion, the Government believes that uniting its people behind the common cause of progress is the most effective way of creating a new national, *Rwandan*, rather than Tutsi, Hutu and Twa identity. Sustaining this unity has been crucial to its economic and social development.

Boosted by an average annual economic growth rate of more than 10% in the decade after 1995, this momentum has been sustained culminating in a perfect developmental "hat trick" of sustained economic growth, poverty reduction and a reduction in income inequality in 2012<sup>16</sup>. Despite the disruptions caused by the 2008-9 global financial crisis, during 2005-11, annual economic growth grew by a robust 8% on average, the headcount poverty and extreme poverty ratios both fell by nearly 12 percentage points, taking a million people out of poverty, and income inequality declined<sup>17</sup>.

The Government has undertaken a number of reforms and other initiatives including reforming the public financial system to make it comply with international good practice. These institutional reforms have set the framework for the country’s remarkable economic progress with high growth rates and investments flowing into the country. Despite having little in terms of natural resources, the country is economically vibrant. Public policy reforms don’t remain only on paper; they are being vigorously implemented.

The reforms and the political will that Rwanda has demonstrated in the last two decades have earned it the trust and confidence of its Development Partners (DPs) as

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<sup>14</sup>Tony Blair, "20 years after the genocide, Rwanda is a beacon of hope", *The Citizen* (Dar es Salaam), April 8, 2014

<sup>15</sup>.Ibid.

<sup>16</sup>Republic of Rwanda 2013a. *Economic Development and Poverty Reduction Strategy 2013-2018 (EDPRS2)*. Kigali: Ministry of Finance and Economic Planning, p. 1.

<sup>17</sup>Ibid, pp 3-4.

confirmed in the review of progress toward achieving its Paris Declaration targets ahead of the 2011 Busan meeting in which the country ended up as one of two top performers<sup>18</sup> and in the 2013 Africa MDG Report cited above in the Introduction<sup>19</sup>. Rwanda's achievements have also been acknowledged in NGO circles. In a 2013 report issued by ONE<sup>20</sup>, Rwanda is ranked first among 48 African countries that have registered substantial progress in achieving the MDGs<sup>21</sup>.

Because of the confidence that the DPs have shown in the Government, they have been ready to finance a considerable chunk of its development programs. The foreign aid component has at times covered up to 50% of the development budget but since the Government has made good use of these external funds it has been less of an issue than in other countries with no such sterling record. What is more, the Government has done its best to hold individual donor agencies and governments accountable for their own commitments ranking them according to how well they live up to the Paris Declaration targets.

Like every country, Rwanda faces its challenges as well as opportunities. The rest of this chapter, therefore, will address in greater detail the factors that facilitate or may hinder the country's development, especially as it relates to reaching the MDGs.

## **2.1 Enabling factors**

Enabling factors are those that facilitate the implementation of public policies. Perhaps most important is the presence of political will – a commitment by government leaders to act on its promises and commitments. Rwanda's development has benefitted tremendously from the existence of a strong political will. The country has taken pride in showing its ability to move ahead. Like its own Vision 2020, the MDGs serve as valuable catalysts for doing so. For a country that is so committed to avoid a repetition of its troubled past, registering progress on a set of global indicators is especially significant. Moving upward on these global scales helps generate approval by development partners and a willingness to fund Rwanda's policies. Needless to say, it also enhances the task of building the nation afresh.

While the political will to adhere to the MDGs is an integral part of the country's human development success, it is also attributable to strong institutions. An important mechanism for ensuring discipline and accountability in the public service has been the use of performance contracts (*imihigo*). These contracts are embedded in relevant local cultural norms and practices and thus relatively easy for officials to adopt.

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<sup>18</sup> OECD 2011. Evaluation of the Implementation of the Paris Declaration: A Synthesis Report. Paris: OECD-DAC.

<sup>19</sup> UNDP 2013.

<sup>20</sup> A global campaign and advocacy organization of more than three million people taking action to end extreme poverty and preventable diseases.

<sup>21</sup> *New Times* (Kigali), May 29, 2013.

Taken together, a “development state”, i.e. one that takes a strong and disciplined approach to steering progress in a certain direction, and community mobilization are cornerstones of Rwanda’s policy to transform the country toward a middle-income level by 2020. The political settlement that permits this comprehensive approach in which state and society both play an important role has been successfully upheld for some fifteen years. Although there have been incidents of opposition to this successful approach, the settlement has prevented Rwanda from turning back towards the “ethnicized” politics that characterized the country during its first three decades of independence.

### **Box 1: Imihigo at work in Kigali**

CEOs the world over seeking ways to boost their organizations’ productivity could do worse than take a look at the Rwandan concept of *imihigo*. An essentially untranslatable Kinyarwanda word, it’s usually rendered as “performance contract”; sometimes just “goal” or “target”. But none begin to do the idea justice. Signed *imihigos* carry far greater moral force and, increasingly prevalent in the public sector in Rwanda, they indicate an utterly unshakeable determination to succeed in one’s objective, come what may. To judge by the extraordinary level of civic pride in the streets not just of Rwanda’s capital, Kigali, but in other cities as well, they work. The spirit of *imihigo* seems visible in every immaculately manicured public garden, every mown verge, every neatly painted kerbstone, every storm drain into which not so much as a cigarette butt has been dropped. Kigali must surely be one of the most litter-free cities in the world. This all stems, Rwandans indicate, from their feeling that not much short of total perfection can atone for the country’s recent history and ensure it will be remembered for something other than the 1994 genocide.

<http://www.ifrc.org/ar/noticias/noticias/afrika/rwanda/rwanda--un-imihigo-pour-la-reduction-des-risques/#sthash.QI7UBZEr.dpuf>

Because of its unique history and the perceived inevitability to avoid a repetition of the 1994 Genocide against the Tutsis, the MDGs have been quite effectively mainstreamed into the country’s own development strategy. “Vision 2020” which was adopted just before the turn of the century, together with EDPRS1 and EDPRS2, offers policy perspectives identical to the MDGs. Although the national vision and strategy are broader, there is a mutual reinforcement between the global goals, on the one hand, and the national ones, on the other.

The trust and confidence that Rwanda has earned among its DPs is another enabling factor. Rwanda’s Aid Policy articulates a clear framework for coordination of development assistance, and the policy dialogue between Government and donors has been frank and regular. Several platforms exist to promote effective dialogue between government and the donor community. Development partners participated actively in the preparation of Rwanda’s poverty reduction strategies, and in the mechanisms to monitor its implementation. The Development Partners Forum, held annually, provides a high level platform to discuss economic developments, aid coordination as

well as progress in the implementation of the Government's development plans, including the MDGs. The Development Partners Coordination Group (DPCG),

*The MDGs are not a ceiling  
but a floor*

President Paul Kagame, New  
York, September 13, 2013

comprised of representatives of government and the development partners, meets every quarter to discuss routine aid coordination matters. Government, jointly with these partners, has developed a Common Performance Assessment Framework (CPAF) based on EDPRS indicators, which also provide

the triggers for review and assessment of the MDGs.

The target year for Rwanda's development ambitions tends to be perceived by national stakeholders as 2020 when the current policy vision comes to an end. 2015 is seen as a mid-term point. As President Kagame, who chairs the Global MDG Advocacy Group, said at its meeting in New York in September 2013: the MDGs are not a ceiling but a floor!<sup>22</sup> It is necessary to think beyond 2015 and adjust policies according to changes in the global and regional environment as well as lessons learned.

## 2.2 Challenges

Each country faces challenges as it undergoes change. Some are related to the tensions that arise as socio-economic conditions change; others to shortage of financial and staff resources. They can usually be handled in the political or managerial fields. The challenges that tend to be more difficult to tackle are those that are related to underlying structural conditions that only change slowly. Development in any African country is a long distance race, not on a smooth track but through difficult terrain. Rwanda, notwithstanding its achievements, is no exception. It has covered more distance than most other countries in Africa, but it faces several remaining challenges as seen through a MDG lens.

Rwanda's ambition to become a middle-income country by year 2020, which is laid out in Vision 2020, is challenged by a number of structural factors that Rwanda faces because of its geo-political situation. Five such challenges are especially significant.

The *first* is the country's landlocked position. Costs of imports and exports are aggravated by being located far from the sea. Rwanda is a champion of closer cooperation within the East African Community. More recently, it has worked closely with Kenya and Uganda to build a broad-gauge (1400 cms) railway from the port of Mombasa that would allow for larger volumes of goods to be transported faster. Rwanda also keeps the door open to possible railway links through Tanzania. These infrastructural investments will take time to materialize but are critical to Rwanda's ability to continue its remarkable progress.

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<sup>22</sup><http://rwandaun.org/site/2013/09/25/president-kagames-address-at-the-opening-of-the-special...>

The *second* challenge is its location in a region that in recent years has been plagued by conflict and violence. Eastern Congo, which borders Rwanda has suffered from civil war that has incurred a vast number of deaths and violence against innocent civilians, not least the women, many of whom have been raped by soldiers or militiamen. The insecurity in that part of DRC is in part a product of the events that followed the Genocide against the Tutsis with the exodus of large numbers of Rwandans to that country some of whom have taken up weapons to try to fight their way back to Rwanda. The Government of Rwanda has made every effort to ensure that the conflict does not spread to its own territory even if this has at times led to criticism from the international community. Being so close to the conflict zone and finding itself challenged by what is going on there has implications for how potential investors are likely to look at Rwanda. With the aim of increasing numbers of Rwandans in formal sector employment this is a significant challenge.

The *third* challenge is the country's high population density. With its 10,5 million people crowded on a small geographical territory, Rwanda has the highest population density in Africa. Household plots in the rural areas are often subdivided and too small to render sustainable cash incomes. Through its Crop Intensification Program (CIP) the Government is pursuing a policy of intensified terracing on the many hillsides around the country with the double aim of increasing agricultural productivity and enhancing sustainable land use. It is also encouraging forms of cooperative farming that would allow for more productive use of these small farm plots. Such measures notwithstanding, population growth and migration to urban areas are likely to be increasingly serious challenges for sustaining the gains already made toward the MDGs and Vision 2020 although a number of interventions have been introduced to tackle rapid population growth rate. For instance secondary cities have been pro-actively developed to serve as poles of growth thereby reducing pressure on Kigali City.

*“We appreciate support from the outside, but it should be support for what we intend to achieve ourselves. No one should pretend that they care about our nation more than we do; or assume that they know what is good for us better than we do ourselves. They should, in fact, respect us for wanting to decide our own fate.... While this is encouraging, we know the road to prosperity is a long one. We will travel it with the help of a new school of development thinkers and entrepreneurs, with those who demonstrate they have not just a heart, but also a mind for the poor.”*

President Paul Kagame on  
foreign aid, *Financial Times*,

May 8, 2009

The *fourth* challenge is to reduce dependence on foreign aid and increase the domestic revenue base and thus tax collection. Rwanda has benefitted considerably in its effort to reach the MDGs from support by the DPs. They have been an integral part of the

success, especially in the social sector programs. The DPs, however, have signalled that they will reduce their aid allocations and several of them have at times suspended their aid for political reasons delaying implementation of vital schemes.

The Rwandan Government on its part is ready to find ways of reducing its relatively high level of aid dependency. The government has successfully increased the domestic revenues to GDP ratio in the past several years, but the level is still below the regional average<sup>23</sup>. Consequently, reductions in foreign aid constitute a challenge for sustaining the achievements made especially in the education and health sectors. A diversification of donor funding is taking place with additional partners in Asia and the Middle East interested to support programs in Rwanda. For example, President Kagame attended the Third Africa-Arab Summit in Kuwait in November 2013 confirming the growing interest that Gulf countries and their development funds have in African countries like Rwanda. In the longer run, however, increased domestic revenue collection is necessary. The Government is devising policies to do so but the narrow revenue base remains a challenge as long as the private sector is less developed.

The *fifth* challenge is turning the country into an IT-literate nation. The MDGs list Internet penetration as a key metric in efforts to reduce poverty and encourage rational development. Rwanda on its part has an ambitious national strategy to achieve such penetration focused on providing a modern communications infrastructure for public and private uses. As a result, Rwanda today enjoys increased nation-wide coverage of telecommunications networks and has deployed a versatile and high capacity national optic fiber backbone network and a national data center. Rwanda sees itself as now being well positioned to become a regional ICT hub that can offer a wide range of competitive ICT products and services.<sup>24</sup>

The supply side of ICT, therefore is well developed but the challenge is to make the ordinary Rwandan increasingly IT-savvy. This is a necessity as the country tries to transform itself into a middle-income one. The spread of smart phones is facilitating this. For example, cash transfers are now increasingly made by people without access to regular banking services through the use of such phones. The policy of providing a computer for each child is another important step in this direction. In the long run, this process will also be facilitated by increasing numbers of people being lifted out of poverty and many moving to urban centers. These factors notwithstanding, making people IT-literate is a matter of changing cultural and social attitudes, especially with regard to participation in e-governance, which is part of the national strategy.

### **2.3 Conclusions**

Rwanda is making its achievements toward the MDGs thanks to a strong political commitment, right policies and institutions that people can relate to. There is a

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<sup>23</sup>World Bank, *Rwanda Overview*, updated 4 April 2014  
(<http://www.worldbank.org/en/country/rwanda/overview>)

<sup>24</sup>Rwanda ICT Strategy 2013/2018 ([www.myict.gov.rw/ict/strategy/](http://www.myict.gov.rw/ict/strategy/))

national ownership involving stakeholders from all sectors that is not matched in many other African countries – or countries elsewhere in the world. These institutions constitute the basis for further enabling, wherever necessary and possible, gains towards a sustainable human development. The country is still to reach some of the MDG targets. Furthermore, there are many implementation hurdles to overcome such as limited infrastructure, insufficient skilled and technical staff in many sector ministries and in the districts, standards in schools that need further improvement, and low use of contraceptives. These hurdles, however, are not insurmountable and given trends to date, as this Report confirms in regard to the MDG targets, they are likely to be successfully overcome.



### **3. National Milestones around the MDGs**

The MDGs have played an important role in reinforcing and strengthening Rwanda's ability to implement its Vision 2020. This is evident at three levels. At the strategic level it relies on its Vision 2020 and EDPRS. At program level it relies on a series of flagship programs to implement the national strategy. At management level, it falls back on decentralization of responsibilities to district and lower levels to encourage a people-centered approach to development.

Rwanda has prioritized implementing and monitoring the MDGs ever since they were adopted and launched as evident in the progress reports from 2003, 2007 and 2012. In the first few years, the Government and its development partners relied significantly on the country's first Poverty Reduction Strategy Paper. Following its expiration in 2005 Government adopted EDPRS1 with a broader development objective combining both economic and social indicators. The strategy, since 2013 in its second phase (EDPRS2), has provided the framework within which domestic and external resources are channelled for accelerating the implementation of the MDGs.

#### **3.1. Vision 2020 and EDPRS**

Rwanda's long-term development goals are embedded in its Vision 2020, which seeks to transform Rwanda from a low-income agriculture-based economy to a knowledge-based, service-oriented economy by 2020. In moving forward the Vision emphasizes the importance for Rwandans to create an efficient state and the development of skilled human capital, a vibrant private sector, a world-class infrastructure, a modern agriculture and a system of accountable governance. Thus, the Vision covers all aspects of the country's development.

EDPRS puts the Vision into practice. It is sufficiently comprehensive and broader than the MDGs, which cover key aspects of the Vision and the EDPRS1 and EDPRS2, but focuses more on the social than the economic side of the country's development. The adoption of Vision 2020 in 2000 and the EDPRS1 in 2006 are national milestones that have had a direct bearing on Rwanda's success in moving forward toward the MDGs.

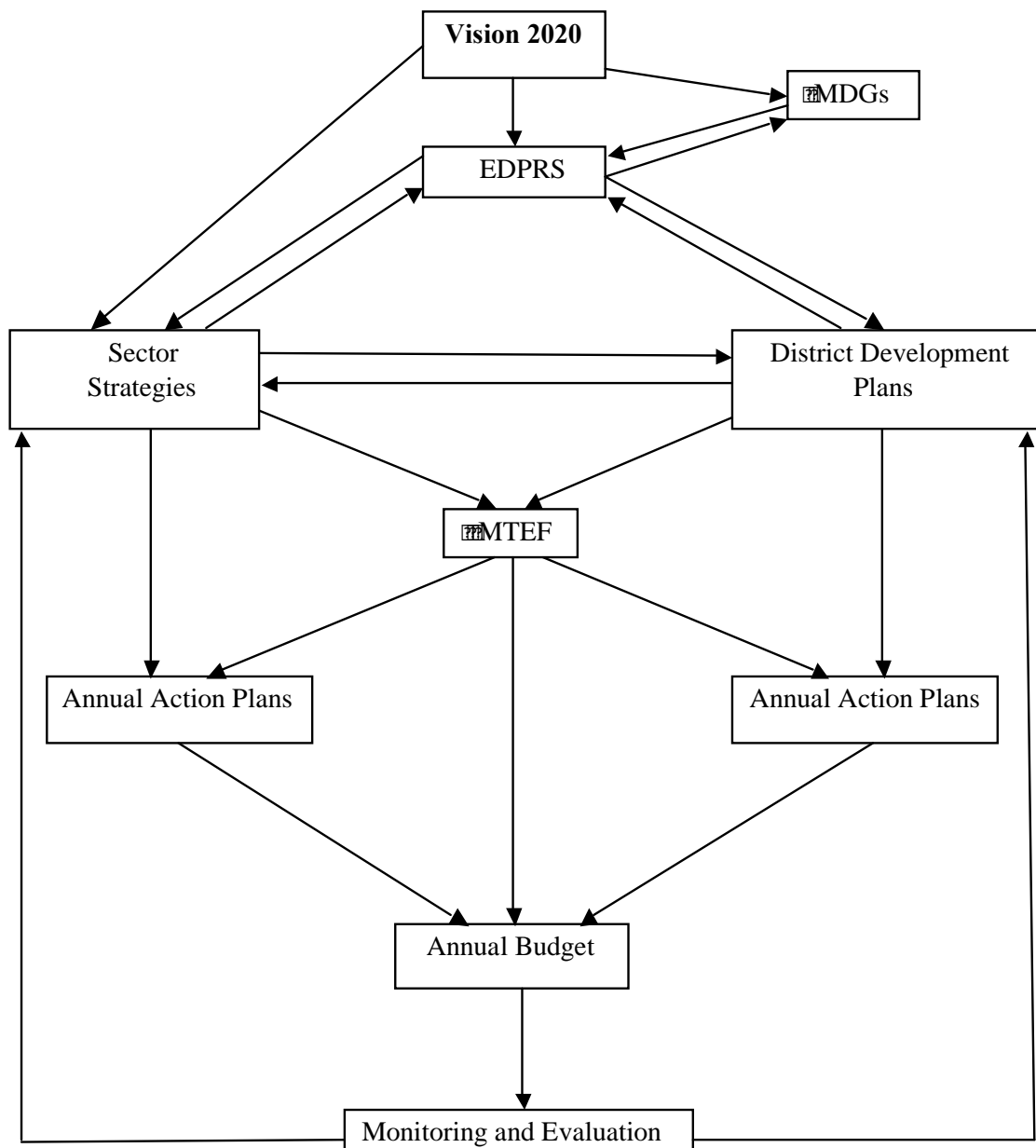
EDPRS1 was based on three pillars to accelerate economic growth and sustainable human development. The first pillar focused on investing in the improvement of the business climate to achieve private sector growth and an ensuing growth of jobs and exports. The second entailed strategies for the promotion of pro-poor rural development and social protection aimed at eliminating extreme poverty by 2020 and thus releasing the productive capacity of the very poor. The third, being good economic and accountable governance by creating a comparative advantage in "soft" infrastructure to compensate for the country's poor hard infrastructure and disadvantaged geographical location, EDPRS 2 is made up of four thematic areas of

Economic Transformation, Rural Development, Accountable Governance and Productivity and Youth Employment as well as foundational and cross cutting issues.

The Economic Transformation Thematic Area targets accelerated economic growth through restructuring of the economy towards more services and industry thereby enabling average growth rate of 11,5%. Rural Development focuses on ensuring that poverty is reduced from 44,9% to below 30% mainly through increased agricultural productivity and enhanced linkages of social protection programs. The main objective of Productivity and Youth Employment Thematic Area is the creation of at least 200.000 new jobs annually and ensuring that growth and rural development are under pinned by appropriate skills and productive employment. On the other hand, the Accountable Governance Thematic Area aims at improving the overall level of service delivery and ensures citizen satisfaction above 80%.

At an operational level EDPRS is implemented through a set of Sector Strategic Plans (SSPs) and District Development Plans (DDPs), which are both five-year strategic plans. They are detailed documents, which support implementation of national priority programs at sector and district levels. The SSPs contain sector level (national) priorities while DDPs contain district (local and grassroots) priorities. The DDP balances national with local development priorities. The SSPs help guideline ministries and agencies in elaborating their annual work plans while DDPs do the same for districts. Both SSPs and DDPs were developed through a participatory process engaging various stakeholders in Sector Working Groups (SWGs) and Joint Action Development Forums (JADFs) and do guide sector Ministries, Agencies and Districts during the annual planning and budgeting processes. These platforms have been used regularly to discuss development issues and promote dialogue at central and district levels in implementation of the Country's development plans. Thus, as illustrated in Figure 1, through these links between the overall national strategy document and more operational entities at ministerial and district levels, EDPRS serves as a key mobilization and management tool for also achieving the MDGs.

**Figure 1: The conceptual framework guiding implementation of MDGs and EDPRS**



Source: Republic of Rwanda 2013b.

### **3.2. Flagship programs**

Another important milestone is the adoption of a series of interrelated programs to tackle poverty reduction while also encouraging poor people to become increasingly self-reliant. These programs operate in tandem at local levels and are the main reason why the country has been able to move forward on so many fronts at the same time. Four such programs deserve special mentioning here.

The *first* is the Vision 2020 Umurenge Program that was launched in 2008 in 30 sectors (*umurenge*) beginning with the poorest such units. It has since expanded to cover 240 out of the country's 416 sector units. It is a multi-purpose program that combines social protection with economic tools of moving out of poverty while also providing technical advice on a number of issues from nutrition, family planning, disease control and prevention. It has three major components.

One is the direct support given to the two poorest household categories based on a traditional Rwandan classification system called *ubudehe*. It covers elderly and disabled as well as households that are unable to generate an income of their own. In early 2013 over 43.617 households benefitted from such direct support by the state, up from 6.850 in 2009. Another is public works. It benefitted some 89.011 households by early 2013, an increase from 17.886 in 2009. Each household can provide one member for these public works schemes that focus largely on building terraces for more productive agriculture or on roads maintenance and construction. This second component is meant to make wage income outside of subsistence farming available and thus allow households to buy food and other items to improve their livelihoods. A third component is for those who already have some money but are ready to move ahead earning more. Thus, the principal mechanism is a credit scheme. In early 2013 a total of 12.500 loans had been issued with 52.000 households as prospective beneficiaries.

The *second* flagship program is the One-Cow-per-Poor-Family Program (*Girinka*). It has been implemented since 2006 and places special emphasis on vulnerable groups like child-headed and female-headed households, disabled and genocide widows. By aiding to enhance nutrition among household members, it is an important mechanism

for tackling high malnutrition rates among under-5 children. It has received wide support from stakeholders and rural households throughout the country.

*"The main benefit of my goats so far is manure. It is enabling me to grow more food: cabbages, carrots, green peppers, maize and sunflowers. Once my family has eaten, I share my vegetables with my neighbours, and still have a surplus to sell. I will also sell my goats' kids when they are old enough."*

*Hosea Ngiruwonsanga, farmer, Rwanda*

<http://www.asfg.org.uk/successtories/>

The main activity under this program is the distribution of heifers that have been inseminated before being passed on to farmers. The

cattle are intensively managed (by zero grazing) and as soon as they deliver, the farmer has a ready source of income through the milk that is produced by the cow<sup>25</sup>. Furthermore, the first female calf is passed onto another beneficiary so the farmer gets to "pay" for the cow that was given to him or her. Complementary to the program, in

<sup>25</sup><http://www.minagri.gov.rw/index.php%3Fid%3D28.htm>

some instances depending on local circumstances, the livestock that is given out are dairy goats.

The *third* flagship program is the Crop Intensification Program (CIP), which is run by the Ministry of Agriculture and Animal Resources (MINAGRI). Started in 2007, CIP aims to improve agricultural productivity using a multi-pronged approach involving (a) distribution of new seeds, (b) provision of fertilizers, (c) land consolidation, (d) improved extension services and (e) better post-harvest handling and storage. Low productivity in Rwanda has been mainly attributed to minimal use of inputs. In a vicious cycle, the low productivity continues to prevent farmers from using inputs, as many farmers barely produce sufficient food to feed their family, and therefore have no income with which to purchase yield enhancing inputs. CIP tries to break this cycle by adopting a ‘supply-push’ approach whereby the government initially supplies the inputs and the farmers are persuaded to use them.

The CIP has been generally quite successful in its first years. For instance, an evaluation of the fertilizer input scheme indicates that the average fertilizer use per household went up from 8 Kg/Hectare in 2006 to 33 Kg/Hectare in 2010<sup>26</sup> Together with the relative success of the other components, crop yields have shot up: that of maize, wheat and cassava has tripled; that of beans doubled. These figures are significant because more than 80% of the MDG1 target group live in rural areas. Although land consolidation is a difficult and culturally sensitive issue progress has been made also in regard to this component.

The country has shown that it is fiscally manageable to achieve food security through input supply as the multiple CIP impacts confirm. It has turned Rwanda from being a food-insecure country to one with improved food security. The increased profitability through crop production has uplifted the economic well being of thousands of farmers and farm families. The consolidated use of land and synchronization of crop activities during the season have generated large-scale employment opportunities for men and women. CIP has spawned several microenterprises and small businesses in processing, trading, and transportation of farm inputs and produces in rural areas. Its future challenge is to transit from being a primarily aid-funded program to one that relies on market mechanisms to reproduce and sustain itself (see Box 2 next page).

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<sup>26</sup> Ministry of Agriculture 2011. *About Crop Intensification Programme*. Kigali: MINAGRI.

## Box 2: Private sector in agriculture

“Government has been prioritizing agriculture but we cannot do it on our own as there are other priorities like infrastructure development as well. We need the private sector to take over from what the government has so far achieved....The private sector should take advantage of the numerous investments the government has made to build smallholder capacity and benefits of consolidation of resources....We have demonstrated that agriculture can greatly reduce poverty. We have so far been able to reduce it by 12 per cent taking about a million farmers out of poverty (under EDPRSI). We are trying to see how we can interest the private sector to tap into and develop further what we have been creating in a sector where we have land to give to investors,

You can work with the small scale farmers in the country in value addition. You can invest in farmers and get produce from them as already there is consolidation and do what farmers cannot afford to invest in. We need people to invest in the value chain and are working to strengthen that position. In production dynamics, many a time the private investors know what’s best more than government,”

Minister Agnes Kalibata addressing the ”Cracking the Nut” Conference, *New Times*, 15 January 2014.

*“Today, local governments in Rwanda are capable of handling complex tasks, which were previously unheard of in local governments set up..... This is a result of capacity building initiatives since the start of decentralisation.”*

Commonwealth Report on the Aberdeen Principle to promote local democracy in Rwanda authored by the Rwanda Association of Local Government Authorities and the Ministry of Local Government, Kigali, May, 2013.

The *fourth* flagship program that is yet to have a similar impact because its lead time is inevitably longer is the “One Laptop per Child” (OLPC) Program. It was launched in 2008 with the aim of enhancing education through the introduction of technology in primary schools. It allows primary school students early access to computer skills

and computer science understanding while expanding their knowledge on specific subjects like Science, Mathematics, languages and Social Sciences through online research or content hosted on servers.

The current proposed target is to provide all students from P4 to P6 access to laptops. By the end of 2013, 203,000 laptops had been deployed to more than 407 schools across the country. Furthermore, 200 schools had each received one server to host digital courses and books, one wireless local area network and digital courses aligned

with the curriculum in key subjects<sup>27</sup>. In implementing the Program, the OLPC works hand-in-hand with both non-governmental organizations and educational institutions such as the National University of Rwanda and Kigali Institute of Science and Technology.

### **3.3. Decentralization**

Another milestone that has had a bearing on the achievements of the MDGs in Rwanda is the decentralization of responsibilities to local levels, which was first adopted in 2000. Rwanda's first phase of decentralization that ran from 2001 to 2005 saw the promulgation of enabling laws, establishment of service delivery structures, and the first ever democratically elected local government leadership. The second, from 2006 to 2010, was a turning point in the decentralization agenda where institutional and organizational restructuring of local governments was carried out to streamline better service delivery. The third phase, which runs from 2011-2015, is expected to improve and sustain the achievements made in the first two phases. The country's revised decentralization policy of 2012 is aimed at consolidating participatory governance and fast-tracking a citizen-centered development.<sup>28</sup> Thus, decentralization in Rwanda is not only about delegating fiscal authority to district level or to enhance service delivery but also about citizens actively participating in national development.

Decentralization has been an important avenue for women to enter public life and politics. While less than 10% of Rwanda's 30 mayors are women (although with Vice Mayors included the figure would be higher), effective decentralization throughout local government administration means that as of November 2013 38% of village, 43% of cell and 45% of sector Executive Committee members are female. District Councils, the major decision making body at district level, usually consist of more than 20 people of whom 45% are female<sup>29</sup>.

Twelve years after the introduction of decentralization, Rwandans now take part in their own governance. Many citizens have been enlightened and emboldened enough to ask why, and to debate on different issues affecting their communities at different platforms. These platforms include the monthly community work (*Umuganda*) forums where everything comes to a standstill so that valuable works are performed and discussions are held. Sometimes forums are devoted to a specific theme, for instance good governance where citizens are given opportunity to articulate how they want to be governed.

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<sup>27</sup>[http://wiki.laptop.org/go/OLPC\\_Rwanda](http://wiki.laptop.org/go/OLPC_Rwanda)

<sup>28</sup>[http://www.minaloc.gov.rw/fileadmin/documents/Minaloc\\_Documents/Revised\\_Decentralisation\\_Policy.pdf](http://www.minaloc.gov.rw/fileadmin/documents/Minaloc_Documents/Revised_Decentralisation_Policy.pdf)

<sup>29</sup><http://allafrica.com/stories/201311200877.html>

### **3.4. Conclusions**

The successful follow-up of strategies all the way to how individual sector programs are managed at central and local levels is the main factor why Rwanda has been able to move forward toward the MDGs targeting not only one but all of them in a systematic manner. Especially important to mention here is that service delivery has not only been generally effective but has reached the more difficult target populations such as the really poor households in the rural areas. An especially successful example of working with the people has been the fast-tracking of the 9-Year Basic Education policy which has allowed for the construction of additional classrooms and enabled academic years to start on a timely basis<sup>30</sup>.

There are still improvements to make, for example, data collection for facilitating monitoring of progress at the district level is in need of improvement. It can be said with some certainty therefore that as Rwanda has passed one national milestone after another, national aspirations as manifest in Vision 2020 and other relevant documents, on the one hand, and global development management ambitions through the MDGs, on the other, have effectively complemented each other in a catalytic fashion that is exceptionally successful.

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<sup>30</sup>Government of Rwanda 2013b. *EDPRS: Lessons Learnt 2008-2011*. Kigali: Ministry of Finance and Economic Planning.



## 4. Review of the MDG Performance

This chapter provides a detailed analysis of the eight MDGs, their respective targets and where available, individual indicators. Each section begins with a table showing the performance using the color code provided in the Introduction. The data presentation is followed by a discussion of factors contributing to sustained progress, key bottlenecks and emerging or new challenges.

### 4.1 MDG 1: Eradicate Hunger and Extreme Poverty

There are three targets associated with MDG 1: (a) halve between 2000 and 2015 the proportion of people in poverty, (b) achieve full and productive employment and decent work for all, including women and young people, and (c) halve between 2000 and 2015 the proportion of people who suffer from hunger. In Rwanda, the Targets 1A and 1C have been closely monitored. Select relevant data for Target 1B were identified and are incorporated in the Report. In addition to the trend data shown in Table 1, the Report also provides disaggregated data for sub-national units.

The main storyline here is that Rwanda has indeed succeeded in halving the proportion of people who suffer from hunger, and has made good progress toward halving the proportion of people living below the national poverty line. The same is true for reducing the number of people living in extreme poverty. It still has to raise the share of the poorest quintile in national income or consumption.

**Table 1: Progress in indicators, MDG 1<sup>31</sup>**

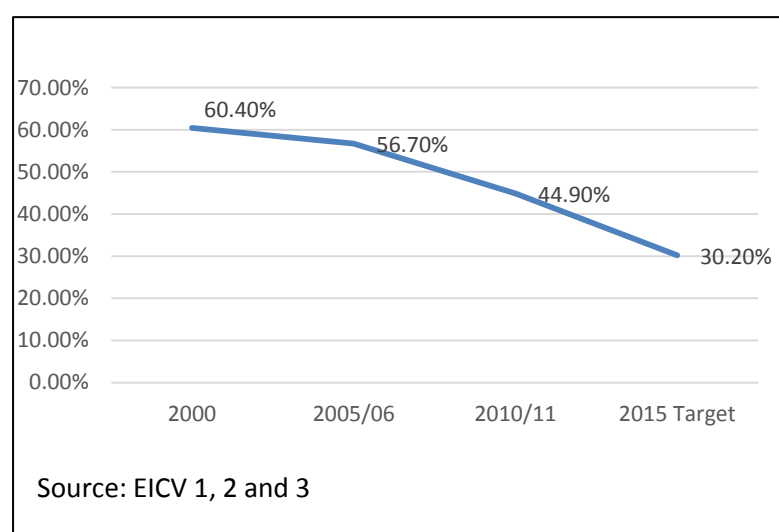
	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>MDG 1: Eradicate Extreme Poverty and Hunger</b>					
<b>Target 1A: Halve between 2000 and 2015 the proportion of people in poverty</b>					
1.1a: Percentage of population below the National Poverty Line	60.4%	56.7%	44.9%	30.2%	
1.1b: Extreme Poverty	40%	36%	24,1%	20%	
1.2: Poverty Gap Ratio at \$1 a day (PPP), percentage	24,4%	22,3%	14,8%	12,2%	
1.3: Share of poorest quintile in national consumption		4,6%	5,2%	No Target	

<sup>31</sup>Sources for Target 1A are: EICV 2 and 3, World Bank, 2013, Poverty ratio <http://mdgs.un.org/unsd/mdg/Data.aspx>, Target 1B: EICV 2 and 3, Target 1C: EICV 2 and 3, DHS 2000, 2005 and 2010.

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>Target 1B: Achieve full and productive employment and decent work for all, including women and young people</b>					
1.5: Unemployment rate 16 years of age and older	1,4%	1,6%	0,9%	No Target	
<b>Target 1C: Halve, between 2000 and 2015, the proportion of people who suffer from hunger</b>					
1.8a: Percentage of underweight children under five years	24,3%	18%	11,4%	12,2%	
1.8b: Child malnutrition (% of under five children stunted)	42,6%	51%	44,2%	24,5%	
1.8c: Child malnutrition (% of under five children wasted)	6,8%	5%	2,8%	2%	
1.9: Proportion of population below minimum level of dietary intake	40%	35,8%	24,1%	20%	

#### 4.1.1 Status and Trends: Target 1A (Poverty)

**Figure 2: Percentage of people living below the National Poverty Line**



Rwanda has been able to reduce the proportion of people living in poverty, especially between 2005/06 and 2010/11. As shown in Figure 2 the baseline figure for 2000 is 60,4%. From 2000 to 2005, a modest decline took place, followed by an accelerated reduction to

44,9% living in poverty in 2010/2011. The trend continues to be in the right direction and it is by no means impossible that Rwanda might get close to its target of 30, 2% by 2015.

Table 2 below demonstrates that there are clear differences between rural and urban areas, the latter showing significant lower proportions living in poverty. There are also differences among the provinces, although the poverty rate went down in all provinces between 2005/06 and 2010/11. Reduction rates are seen especially in Northern and Eastern Provinces. In 2010/11, the Southern Province had the highest percentage of poor people (56,5%), Kigali City the lowest (16,8%).

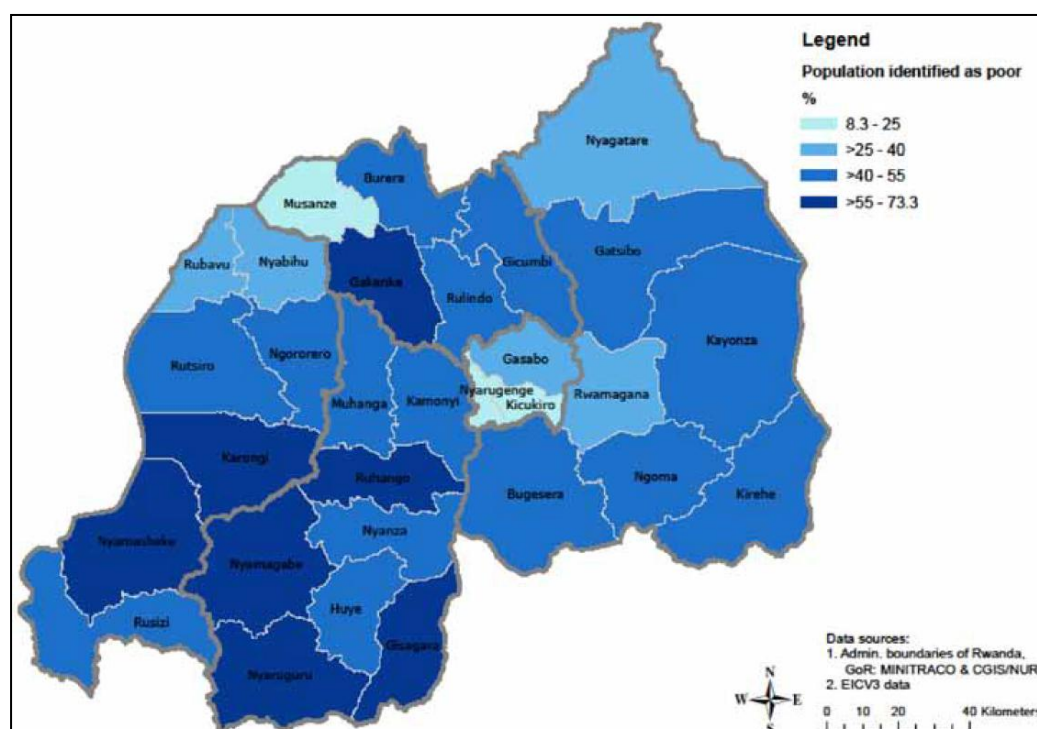
**Table 2: Proportion of population living in poverty; by Province**

Proportion of population living in poverty (%)					
	Baseline				2015
	2000	2000/01	2005/06	2010/11	Target
<b>National</b>	60,4%	60,4%	56,7%	44,9%	30,2%
<b>Kigali City</b>		22,7%	20,8%	16,8%	
<b>Southern Province</b>		65,5%	66,7%	56,5%	
<b>Western Province</b>		62,3%	60,4%	48,4%	
<b>Northern Province</b>		64,2%	60,5%	42,8%	
<b>Eastern Province</b>		59,3%	52,1%	42,6%	
<b>Urban</b>			28,5%	22,1%	
<b>Rural</b>			61,9%	48,7%	

Sources: EICV 1,2 and 3

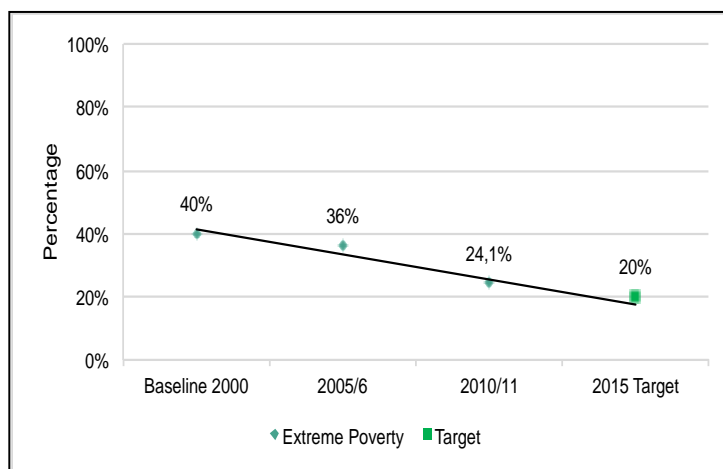
**Figure 3: Poverty rate, by District**

Further disaggregation of the data shows that while there are differences among districts within the same Province, district data confirm once more that Southern Province does indeed have the highest proportion of people living in poverty.



Source: EICV 3

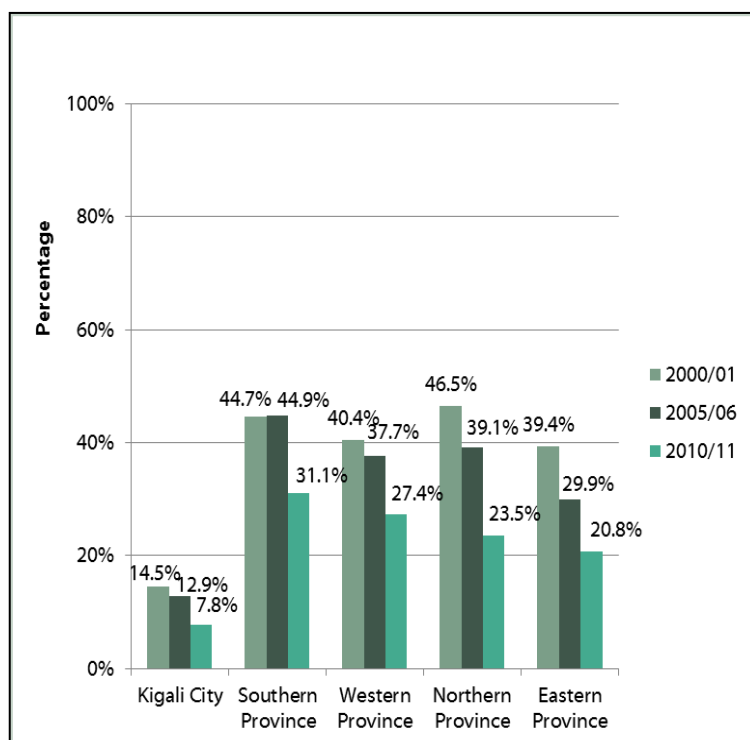
**Figure 4: Extreme Poverty**



Source: EICV 1, 2 and 3

The trends and figures for extreme poverty show the same pattern. The decline from 2000 to 2005 was relatively modest, but then accelerated from 2005/06 to 2010/11. It is likely that Rwanda will reach the 2015 target level of 20% in extreme poverty.

**Figure 5: Proportion of population living in extreme poverty, by Province**



Source EICV 1,2 and 3

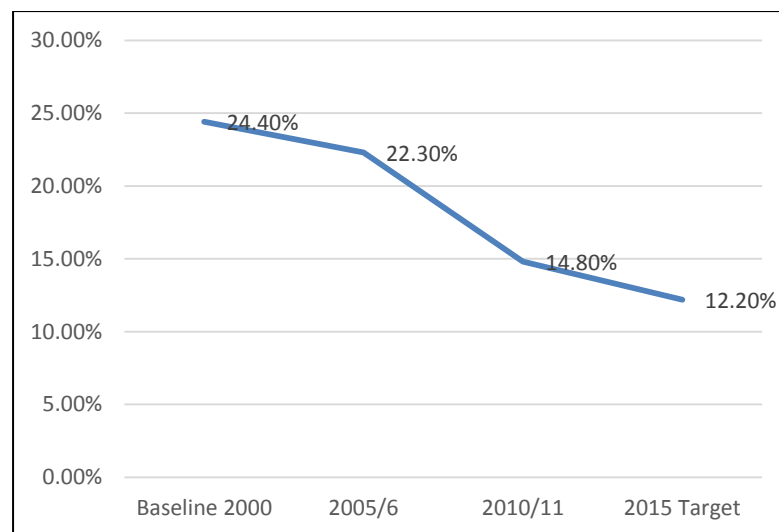
Figure 5 shows the proportion of the population that lives in extreme poverty by province. It confirms the provincial variations seen earlier. Kigali has the lowest percentage (7,8%), Southern Province the highest at 31,1%. Considerable progress was made between 2005/6 and 2010/2011 across the board, but, again, Northern Province demonstrates the fastest decline having halved the percentage of people living in extreme poverty. Kigali City and Eastern Province are

percentage of people living in extreme poverty. Kigali City and Eastern Province are

either below or around the level of the goal of 20% already and Northern Province is at 23,5%. Given the trend of accelerated reduction, it is quite possible that all provinces may reach the 20% level by 2015.

Finally, similar positive trends are observable with regard to the Poverty Gap Ratio, i.e. the mean figure for percentage of the total population that falls below the poverty line, and the share of the poorest quintile in national income or consumption. As can be seen in Figure 6, the poverty gap ratio at \$1 a day (PPP) has declined significantly especially since 2005/06. The target of 18,5% is possible to reach taking into account the accelerated trend from 2005/06 to 2010/11.

**Figure 6: Poverty Gap Ratio**

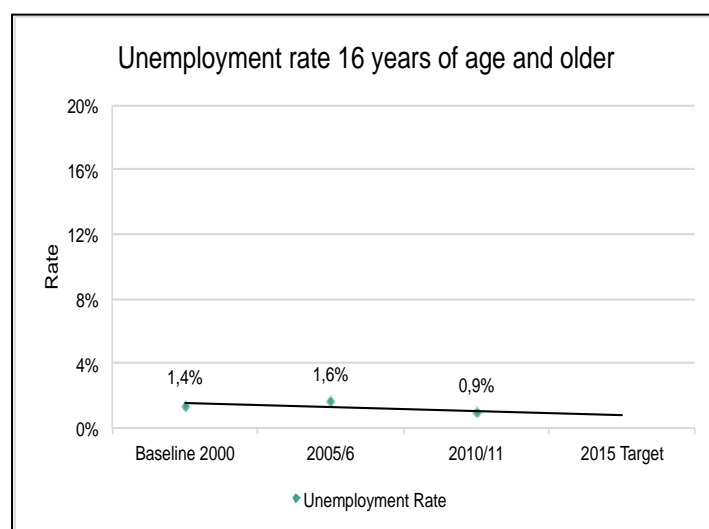


Source: Source EICV 1, 2 and 3

The challenge is still to lift a larger number of people in the lowest quintile into a greater share of national income and consumption. As the figures in Table 1 shows, the share of the poorest quintile in national consumption has increased from 4,6% in 2005/06 to 5,2% in 2010/11 so the trend is positive. Rwanda has set no target for this indicator.

#### 4.1.2 Status and Trends: Target 1B (Employment)

**Figure 7: Unemployment rate, 16 years of age and older<sup>32</sup>**



Source: EICV 1, 2 and 3

and 2010/11. The same is true for levels of employment, which have declined only marginally from 86,7% in 2000, 84% in 2005 and 84,2 in 2010<sup>33</sup>. This decline may reflect that a growing proportion of adults stay in schools or colleges. The trend, therefore, is an indication of Rwanda's modernization and how to create jobs for all will be a growing policy challenge as people leave subsistence agriculture.

The 2012 census data, which were released in April 2014 provide slightly different figures for unemployment as shown in Table 3. As can be read from the table the figures are slightly higher than the EICV figures illustrated in figure 7.

**Table 3: Unemployment rate (census figures)**

Unemployment rate (%) among the active population aged 16 years and above	Both male and female	Male	Female
<b>Rwanda National</b>	3,4%	2,8%	4%
<b>Kigali City</b>	9,4%	5,9%	14,3%
<b>Southern Province</b>	3,3%	2,7%	3,7%
<b>Western Province</b>	2,8%	2,4%	3,1%
<b>Northern Province</b>	1,9%	1,7%	2%
<b>Eastern Province</b>	2,6%	2,1%	3%

Source: NISR 2012e, Census and Population Survey

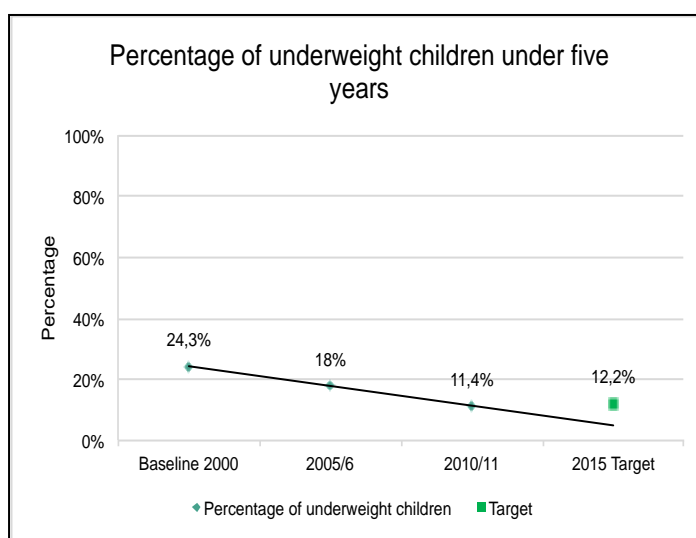
<sup>32</sup>The indicator used here is the % of unemployed over age 16 instead of the official indicator, which is Employment-to-population ratio

<sup>33</sup> NISR 2012e

Overall 4,3 million persons are in the Rwandan labor market, either working or looking for a job. Among them 3,4% were unemployed at the time of the census. Unemployment is mainly an urban phenomenon, the rate being three-four times higher in Kigali (9,4%) than in the rest of the provinces – the Northern Province having the absolute lowest at 1,9%. Women are the hardest hit with an unemployment rate of 4,0% as compared to 2,8% among males.

#### 4.1.3 Status and Trends: Target 1C (Hunger)

**Figure 8: Underweight Children under 5 years of age**

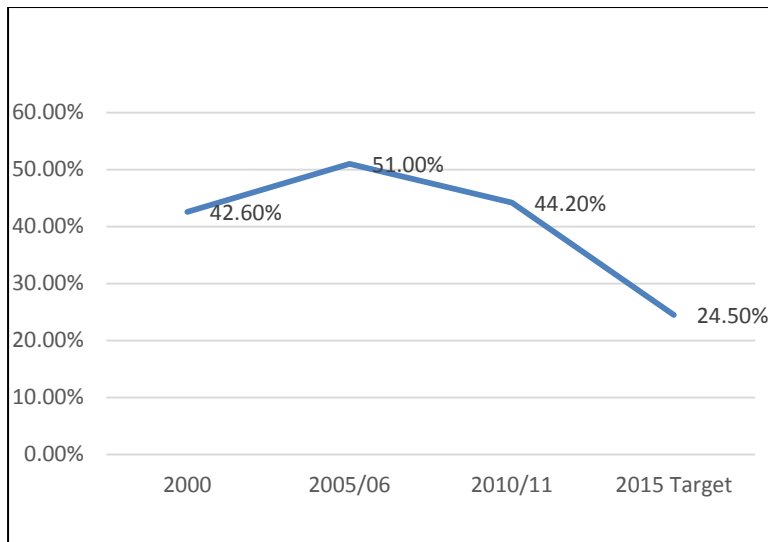


Sources: DHS 2000, 2005, 2010

Progress on Target 1C which measures the proportion of people living in hunger has been especially great. Rwanda has already reached and even gone below the 2015 target of 12,2% of children under-5 years of age being underweight, as Figure 8 shows. Progress with regard to child malnutrition as measured by percentage

of children less than five years that are stunted is more modest. As shown in Figure 9, the figure for 2010/11 is slightly above the 2000 baseline figure, and despite some progress in lowering the rate from 2005/06 to 2010/11, reducing the number of stunted children remains a challenge.

**Figure 9: Proportion of children under five years stunted**

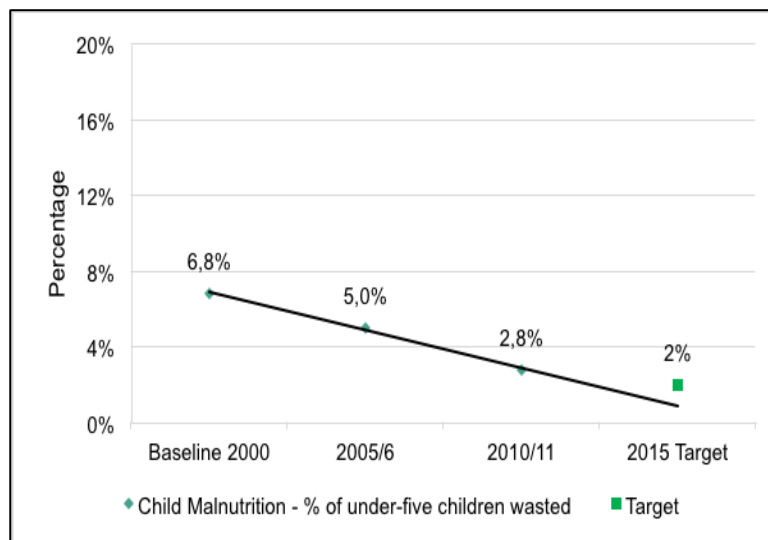


Source: DHS 2000, 2005, 2010

The World Health Organisation (WHO) has set a range of benchmarks for reaching specific health related goals by 2025. One of their goals is “40% reduction in the number of stunted children under-5”<sup>34</sup>. As shown above, the 2010/11 figure is as high as 44,2% and showing only a modest decline from five years earlier<sup>35</sup>. For Rwanda to reach the reduction of 40% by 2025, progress therefore has to be speeded up significantly.

Figures for wasted children under five years are more promising and have been steadily decreasing in the period 2000-2010/11. As Figure 10 illustrates, progress has been especially notable for the period 2005/06-2010/11.

**Figure 10: Proportion of children under five years wasted**



Source: DHS 2000, 2005, 2010

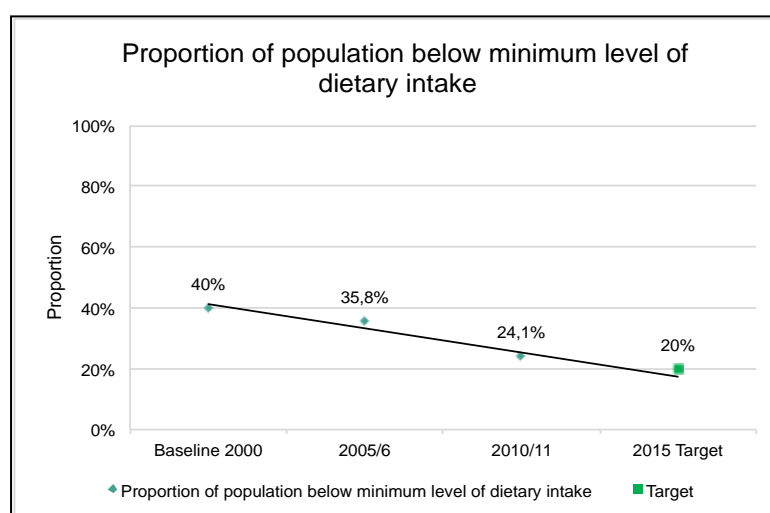
<sup>34</sup>[http://www.who.int/nutrition/topics/nutrition\\_globaltargets2025/en/](http://www.who.int/nutrition/topics/nutrition_globaltargets2025/en/)

<sup>35</sup>Source: DHS 2005 and 2010.



The proportion of people below minimum level of dietary intake as seen in Figure 11 shows a significant decline from 40% in 2000/01 to 24,1% in 2010/11. The 2015 Target of 20% is likely to be met, as the trend line in the figure indicates. According to the "Comprehensive Food Security and Vulnerability Analysis and Nutrition Survey" (2012) percentages of households with unacceptable food consumption are especially high in the rural areas bordering Lake Kivu (42%) and west and east of the Congo Nile Crest (43% and 29% respectively), where soils are less fertile and the land more susceptible to erosion. Western Province accounts for the largest numbers and highest rates of food insecure households (37%). Kigali has by far the highest proportion of households with acceptable food consumption (93%) followed by Eastern Province (86%), which is relatively better off than other provinces despite being most prone to rainfall deficit<sup>36</sup>.

**Figure 11: Proportion of people below minimum dietary intake**



Source:DHS 2000, 2005, 2010

### **Key factors contributing to sustained progress**

Rwanda is well equipped in terms of policy frameworks and institutional mechanisms to continue its progress towards reaching all MDG1 targets that it is tracking. Even though there still remains a lot to be undertaken, the government has a comprehensive and coordinated approach to national development. This means that poverty and hunger issues are not tackled only through either social or economic interventions but a combination of all. For example, the public works component of the VUP offers not only income to the poor but also helps intensifying the use of land and increase its productivity thus augmenting access to food at local levels. Similarly, the One-Cow-per-Poor-Family Program simultaneously provides income and nutrition to families living in poverty and suffering from hunger.

<sup>36</sup>The Comprehensive Food Security and Vulnerability Analysis and Nutrition Survey, 2012, p.2.

Another factor that contributes to the country's already rapid progress is the extent to which local communities participate in improving their living conditions. Drawing on a number of traditional idioms and practices that go back to pre-colonial times (for details see Annex 4) the Government has been able to situate the country's development challenges in a language that resonates with people. Casting the country's development ambitions in these terms enhances the prospect of local ownership. They help mobilize communities to participate in development activities both on a self-help basis and in collaboration with district and other local authorities.

### **Key implementation bottlenecks**

There are four key implementation bottlenecks: (1) a shortage of land, (2) a small private sector, (3) insufficient management capacity at district level, and (4) irregular disbursement of donor funds.

The first two of these bottlenecks are structural and will take time to tackle. The majority of households are still dependent on subsistence farming. Although there was a decline in such households from 84,9% in 2001 to 61,3% in 2011, this did not translate into wage-earned jobs only. Many of those without their own land went into working for other farmers with little chance of considerably improving their livelihoods<sup>37</sup>. The Government is doing its best to facilitate growth of the private sector but its ability to absorb the large numbers of jobless youth is still limited. Thus, although the Global Competitive Index ranks Rwanda in the top twenty countries in the world<sup>38</sup>, its attractive business environment has yet to deliver in terms of new jobs created. Being landlocked, it has to struggle extra hard to attract foreign investments compared to its neighbours to the East – Kenya and Tanzania.

The third bottleneck is inadequate management capacity in government ministries and especially in district offices. Service delivery has often fallen short of promise for this reason as confirmed, for example, in a study commissioned by the Ministry of Trade and Industry<sup>39</sup>. The evaluation of EDPRS1 also points to this bottleneck identifying weak Monitoring and Evaluation capacity and poor coordination and communication as implementation hurdles<sup>40</sup>.

The fourth bottleneck is both political and administrative. Some donor funds that have been committed are not disbursed as planned. Since the Development Partners (DPs) began to disburse their funds as direct budget support (DBS) development cooperation has become more political. The risks, therefore, for recipient governments have been that Partners may suspend their aid as a manifestation of their displeasure with what they see as a violation of good governance principles. In the

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<sup>37</sup> EICV 3.

<sup>38</sup> <http://www.weforum.org/issues/global-competitiveness>

<sup>39</sup> This study titled "An Assessment of Business Processes and Implementation of Reforms in Private Sector-Facing Institutions 2007-2011" was carried out by the Institute of Policy Analysis and Research (IPAR).

<sup>40</sup> Republic of Rwanda 2013b. EDPRS1 – Lessons Learnt 2008-2011. Kigali: MINECOFIN.

case of Rwanda this happened when these partners reacted negatively to what they perceived as Rwanda's involvement in the civil conflict in Eastern DRC.

In addition, despite efforts by both the Government of Rwanda and donors to facilitate the flow of funds there have been administrative delays that have caused problems with implementing specific policies and projects. Although the predictability gap, i.e. the difference between funds committed and disbursed, was reduced from one third in 2007 to one quarter of all ODA funds in 2010<sup>41</sup> it is an ongoing problem that affects government programs like the VUP to suffer implementation constraints and delays.

### **New challenges**

The theme of the 2013/14 Government Budget is "Self-Reliance and Dignity", a theme that indicates Rwanda's intention to reduce its dependence of foreign aid. Although Rwanda is likely to continue receiving aid for its vital sectors, there will be a twofold transition, involving first of all a decline in aid flows and second a shift in focus from poverty reduction to economic growth. The latter is going to be focused on an inclusive pro-poor approach but the transition is bound to raise issues about how well existing gains in the social sector can be sustained.

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<sup>41</sup><http://www.oecd.org/dac/effectiveness/42155403.pdf>

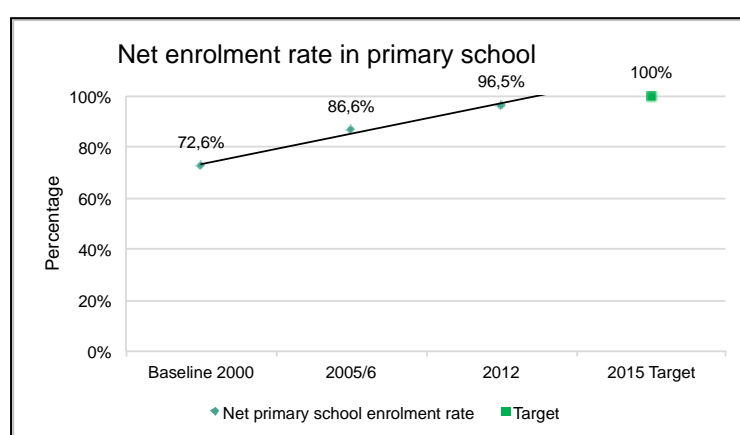
## 4.2 MDG 2: Achieve Universal Primary Education

There is only one target associated with MDG 2: Ensure that, by 2015, children everywhere, girls and boys alike, will be able to complete a full course of primary schooling. The goal is mainly concerned with primary education, but comprises also figures for youth literacy (defined as 15-24 years old). Disaggregated data is also presented for various indicators, ranging from sub-national levels to urban versus rural figures and male/female. The main storyline here is that Rwanda has come very close to the indicator of 100% primary enrolment rate, and that is on course to achieve both 100% rates for completion and literacy rates for 15-24 years old. Reaching the 100% target for literacy rates of women and men above the age of 15 years by 2015 is beyond what can be accomplished.

**Table 4: Progress in indicators, MDG 2<sup>42</sup>**

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>MDG 2: Achieve Universal Primary Education</b>					
<b>Target 2A: Ensure that by 2015 children everywhere, boys and girls alike will be able to complete a full course of primary schooling</b>					
2.1: Net enrolment rate in primary school	72,6%	86,6%	96,5 (2012)	100%	
2.2: Proportion of pupils starting grade one who reach last grade of primary school	22%	51,7%	72,7% (2012)	100%	
2.3a: Literacy rates of women and men aged 15-24 years	57,4%	76,9%	83,7%	No target	
2.3b: Literacy rates of women and men aged 15 years and above	52,4%	65,3%	69,7%	No target	

### 4.2.1 Status and Trends: Target 2 (Primary Education)



**Figure 12: Net Enrolment in Primary School**

Rwanda has made steady progress on primary school enrolment, which has increased from 72,6% in 2000, to

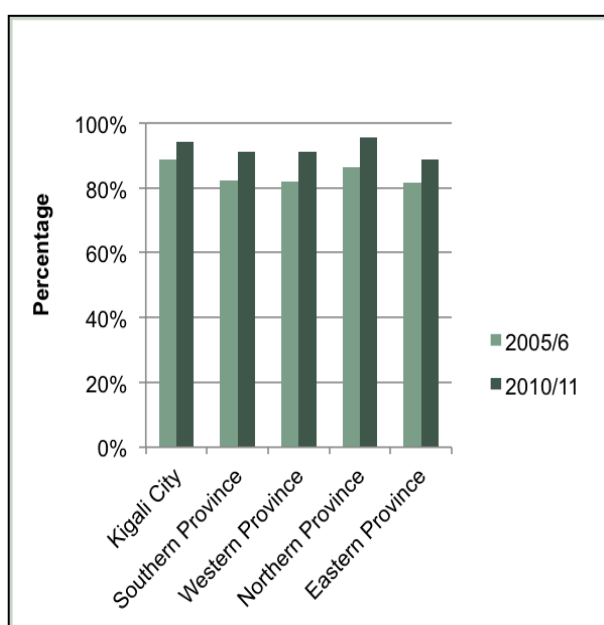
Source: EICV 1, 2 and 3, and NISR 2012 Statistical Year Book

<sup>42</sup>Sources for Target 2A are: EICV 2 and 3, and NISR Statistical Year Book 2012

96,5%<sup>43</sup> in 2012. There was a rapid increase in primary school attendance rates between 2000/1 and 2005/6, and although slightly slower, the steady upward trend has continued from 2005/06 to 2012. The figure for 2012 of 96,5% is very close to reaching the target of 100% in 2015.

With regard to sub-national variations, the EICV3 points to some slight differences across the country, showing that some provinces have better enrolment rates than others. These figures for 2005/06 and 2010/11 show that the highest enrolment rate is in Northern Province (96%) with Eastern Province recording the lowest figure (89%). These variations notwithstanding, the main point is that Rwanda has managed to ensure an almost equal access to primary education across the country.

**Figure 13: Net Enrolment Rate in Primary Education by Provinces**



Source: EICV 2 and 3

The EICV 3 also shows that enrolment rates are slightly higher for girls than for boys. This trend is confirmed by latest figures from the Ministry of Education's Statistics Yearbook (2012), which show that the net enrolment rate in primary school has seen a higher increase for girls than for boys in the past five years as shown in Table 5. Especially striking is that the disparity between rural (92%) and urban (93%) areas is virtually imperceptible.

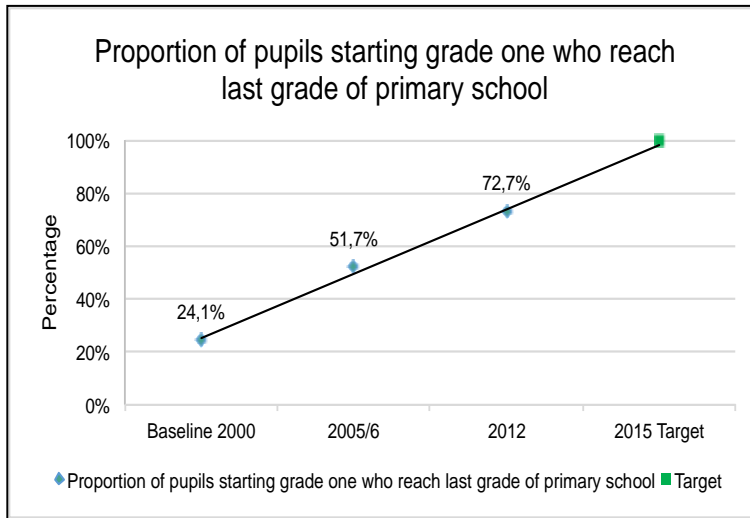
**Table 5: Net Enrolment Rates, Primary Education, 2008-2012**

Net Enrolment Primary Rate - Supplemental Data	2008	2009	2010	2011	2012
<b>National</b>	94,2%	92,9%	95,4%	95,9%	96,5%
<b>Boys</b>	93,3%	91,6%	94,2%	94,3%	95,0%
<b>Girls</b>	95,1%	94,1%	96,5%	97,5%	98,0%

Source: NISR 2013 Statistical Year Book

<sup>43</sup> According to the 2012 Ministry of Education Statistics Yearbook and the Rwanda 2012 Statistical Year Book, the rates were 95,4% in 2010, and 95,9% in 2011. Hence the administrative records show slightly higher figures than the national survey data in the EICV.

**Figure 14: Primary Completion Rate**



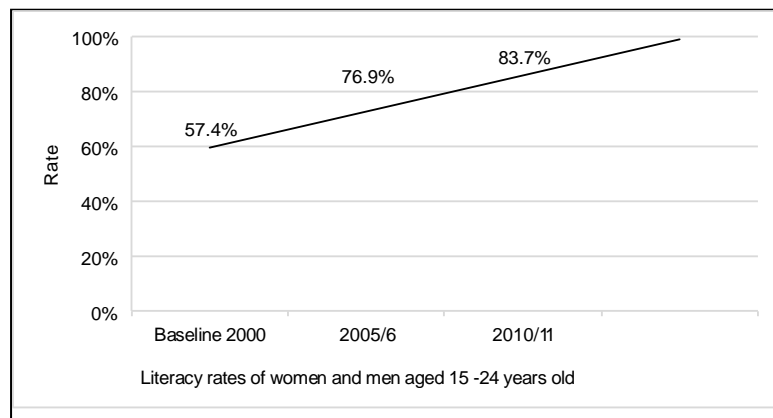
NISR 2012 Statistical Yearbook

Rwanda has also made notable progress in boosting primary school completion rates. The proportion of pupils reaching Grade 6 (last grade in primary) has increased from 24,1% in 2000 to 72,7% in 2012 a tripling of the rate during the period. In case the trend since 2000 continues its course, the MDG goal of 100% completion

rate will most likely be attained.

National literacy rates for the youngest age category (15-24 years old) show a marked improvement since 2000. Although progress has slowed down somewhat since 2005 the 100% target is not completely out of reach.

**Figure 15: Literacy Rate of 15-24 Years Old**



Source: EICV 1, 2 and 3

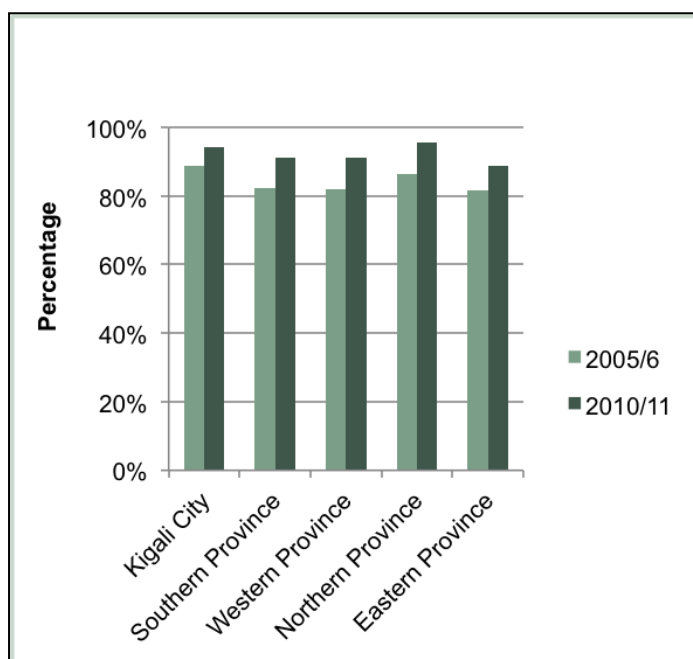
Table 6 and figure 16 provide disaggregated data showing the differences between the provinces, which are quite small with the exception of Kigali, which has a notably higher rate. The difference between urban and rural areas is only about 6 per cent thanks to an accelerated growth between 2005/06 and 2010/11 in the latter. Finally, it is important to note that women have slightly surpassed the men, since both categories were almost 77% in 2005/06, but five years later women stand at 84,7% and men at 82,5%.

**Table 6: Disaggregated Literacy Rates for 15 to 24 year olds**

	2005/6	2010/11
<b>Kigali City</b>	86,6%	89,3%
<b>Southern Province</b>	77,0%	81,5%
<b>Western Province</b>	75,7%	83,2%
<b>Northern Province</b>	76,2%	84,4%
<b>Eastern Province</b>	73,9%	82,8%
<b>Urban</b>	84,7%	88,8%
<b>Rural</b>	75,1%	82,6%
<b>Male</b>	76,9%	82,5%
<b>Female</b>	76,8%	84,7%

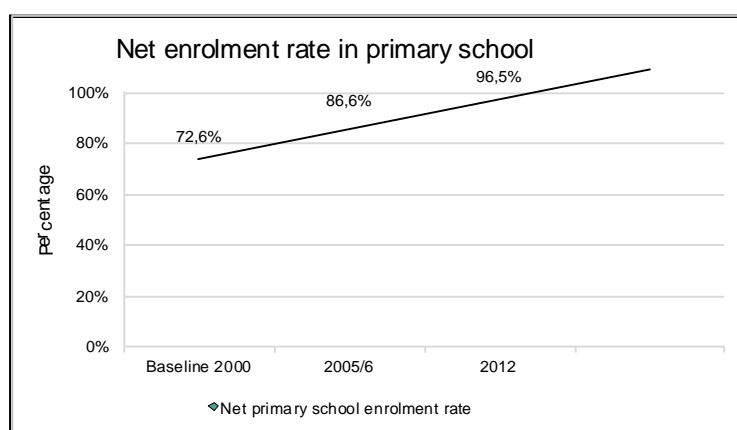
Source: EICV 2 and 3

**Figure 16: Disaggregated Literacy Rates for 15 to 24 year olds by provinces**



Source: EICV 2 and 3

**Figure 17: Literacy of women and men aged 15 years and above**



Source: EICV 1, 2 and 3

When looking at literacy rates for the whole population above 15 years of age, the trend is less promising. As Figure 17 illustrates, Rwanda is not going to be able to raise the literacy to 100 per cent for the population at large before 2015.

### **Key factors contributing to sustained progress**

Rwanda has the highest primary school enrolment rates in Africa, and it won the Commonwealth Education Good Practice Awards 2012, for the innovative fast-tracking strategies of the 9-Year Basic Education Programme. This is a recognition of the progress which Rwanda has made in increasing access to nine years basic education and an acknowledgement of the innovative and successful approaches taken to ensure that all children can access and complete quality basic education in Rwanda. The official age for completing primary school in Rwanda is 12 years, but compulsory education lasts 9 years, from age 7 to age 15. It covers primary and lower secondary education and is commonly known as “nine years basic education” (9YBE). The 9YBE programme was introduced in 2008, and it has recently been increased to 12 years. It should therefore be noted, that Rwanda has since 2008 implemented an education policy, which adds additional three compulsory years of basic education to the MDG goal of achieving universal primary education.

In 2003, Rwanda introduced free education as part of government policy to improve school enrolment in general and the attendance of deprived children in particular. The Rwandan government targeted achieving universal primary education in 2010, and nine years of basic education for all children in 2015. As stated in its Vision 2020 policy document, the government aims to transform Rwanda’s agriculture-based economy into a knowledge-based economy, for which human resource development is of vital importance. The government emphasizes gender equity in all segments of society and the economy, meaning that boys and girls should equally enrol in education.



### **Key implementation bottlenecks**

Educational research<sup>44</sup> on the remaining 8,3% of the children that were not enrolled in primary school according to the 2010/11 figures, describe a variety factors behind their non-enrolment. First of all, some parents do not enrol their children in school, because they rely on them for labour – at home or as paid labour outside the home. Parents in subsistence-oriented rural communities often think that it is more important to involve children in economic activities and equip them with the basic life skills for future survival than send them to school for formal education. Besides poverty, labour market conditions, gender roles, and cultural practices can also be barriers to enrolment and attendance. Finally, school attendance is also linked to other factors, such as place of residence, availability and accessibility of schools, and quality of education.

### **New challenges**

With Rwanda's success of achieving near universal access to primary education, a stronger focus has been placed in recent years on improving the quality of education and in building capacities to plan, implement and monitor programs and interventions aimed at ensuring equitable access to quality education, including early childhood education services. To further improve the completion rate, the Government needs to secure greater balance between interventions that focus on improving educational access and gender parity in enrolment, on the one hand, and those that address retention and completion rates, on the other. In addition, the country is faced with the issue of equal access for girls and boys at secondary and tertiary levels of education.

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<sup>44</sup>See: Nkurunziza et al 2012 "Free Education in Rwanda: Just One Step towards Reducing Gender and Sibling Inequalities" in *Education Research International*, Volume 2012, Article ID 396019. <http://www.hindawi.com/journals/edri/2012/396019/>

### 4.3 MDG 3: Promote Gender Equality and Empower Women

There is only one target associated with MDG 3: Eliminate gender disparity in primary and secondary education, preferably by 2005, and in all levels of education no later than 2015. The related indicators to assess the Goal go somewhat beyond the formulation of the Target, since they also look at female representation in parliament and share of women in wage employment in the non-agricultural sector.

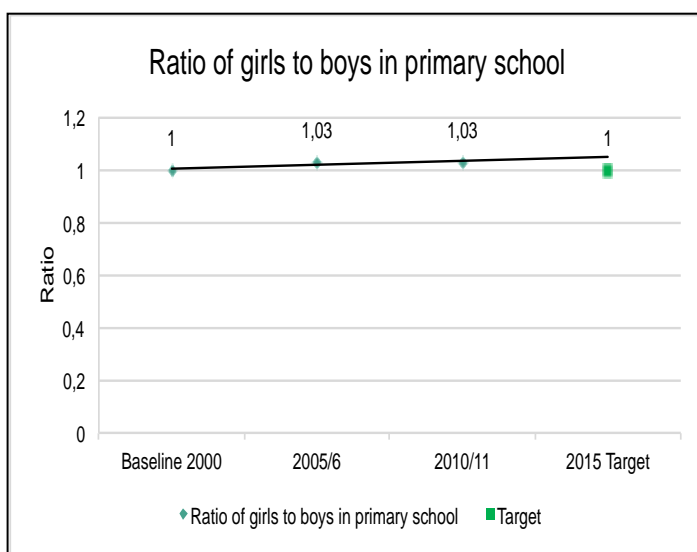
Available figures on the progress made are listed in Table 7 below. Rwanda has reached two of the four indicators, and even surpassed them. The main storyline here is that as of 2013 Rwanda has 64% female representation in Parliament, more girls than boys are enrolled in primary education, and women also do better than men in the literacy ratio for 15-24 years old. The only indicator that shows Rwanda still has some way to go is the share of women in wage employment in the non-agricultural sector.

**Table 7: Progress in indicators, MDG 3<sup>45</sup>**

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>MDG 3: Promote Gender Equality and Empower Women</b>					
<b>Target 3: Ensure that gender disparity in primary and secondary education is eliminated, preferably by 2005, and in all levels for education no later than 2015</b>					
3.1a: Ratio of girls to boys in primary school	1,00	1,03	1,03	1,00	
3.1b: Ratio of girls to boys in secondary school	0,51	0,81	0,93	1,00	
3.2: Share of women in waged employment in the non-agricultural Sector	7,6%	13,7%	18,1%	50%	
3.3: Percentage of seats held by women in national parliament	26%	48,8%	64% (2013)	50%	

<sup>45</sup>Sources for MDG 3 are: EICV3, NISR 2012 Statistical Yearbook.

### 4.3.1 Status and Trends: Target 3 (Gender Equality)



Source: NISR 2012 Statistical Yearbook

**Figure 18: Ratio of Girls to Boys in Primary Education**

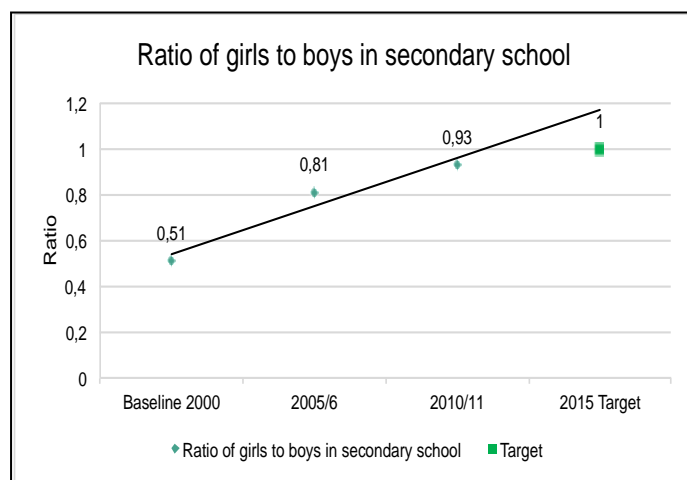
Figure 18 shows that the ratio of girls to boys in primary school has historically been high in Rwanda. The baseline rate of girls to boys in primary school was actually already at target level in 2000, and the figure for 2010/11 has reached slightly above target. The trend line from 2005/06 to 2010/11

remained the same. Newer data from the Ministry of Education shows that the rate of 1,03 has stayed the same also throughout the 2011-2012 period as shown in Table 8.

**Table 8: Net Enrolment Rates, Primary Education, 2008-2012**

Net Primary Enrolment Rates - Supplemental Data	2008	2009	2010	2011	2012
<b>National</b>	94,2%	92,9%	95,4%	95,9%	96,5%
<b>Boys</b>	93,3%	91,6%	94,2%	94,3%	95,0%
<b>Girls</b>	95,1%	94,1%	96,5%	97,5%	98,0%

Source: NISR 2013 Statistical Year Book



Source: NISR 2012 Statistical Yearbook

**Figure 19: Ratio of Girls to Boys in Secondary Education**

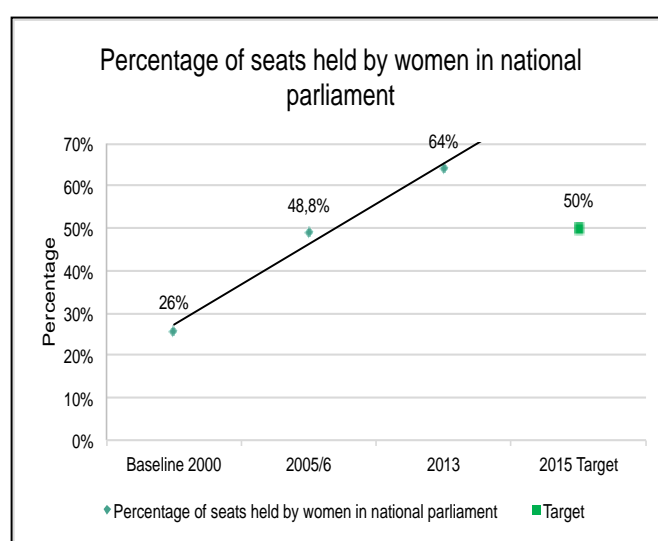
The trend for secondary education is slightly different for the period 2000-2010. Figure 19 shows that the rate of girls significantly rose from 2000 to 2010, going from only one girl per two boys, to an almost equal rate in

2010/11 (0,93). With the help of additional and more recent data from the Ministry of Education the Report also shows progress since 2010. Whereas the information from the EICV3 indicates that more boys than girls were in secondary school in the years between 2000 and 2010, the Ministry data presented in Table 9 covering the years 2008-2012 suggest that Rwanda has already reached this MDG indicator level. The girls to boys ratio moved above the target level in 2010 and has grown even higher since.

**Table 9: Net Enrolment Rates, Secondary Education, 2008-2012**

Year	2008	2009	2010	2011	2012
<b>Net Enrolment Rate, Secondary</b>	13,9%	13,2%	22,6%	25,7%	28
Boys	13,8%	12,8%	21,6%	24,2%	26%
Girls	13,9%	13,7%	23,7	27,2%	30%
Percentage of girls (compared to boys)	47,8%	49%	50,7%	51,5%	52,2
Girls to Boys Ratio in Secondary School	0,91	0,96	1,03	1,06	1,09

Source: Republic of Rwanda 2013c



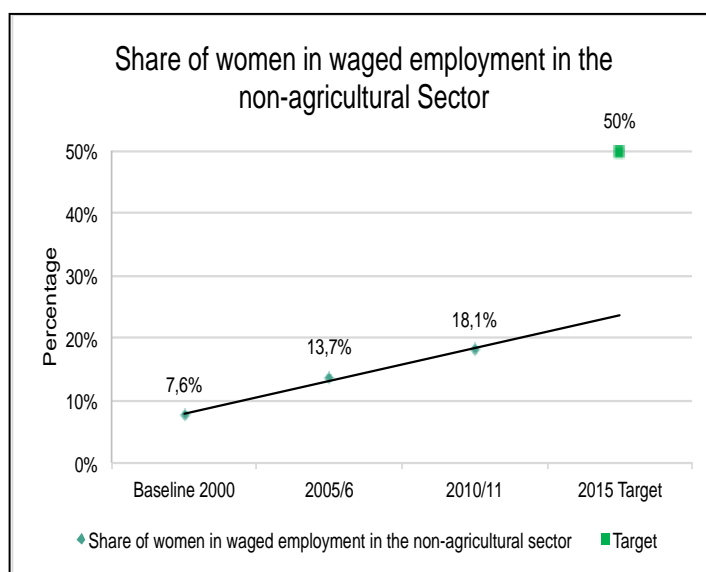
Source: NISR 2013 Statistical Yearbook

**Figure 20: Proportion of Seats Held by Women in National Parliament**

Figure 20 shows the developments in Rwanda in terms of female representation in Parliament since 2000. Rwanda remains the only country in the world with a female dominated parliament, having first achieved the feat in the 2008 elections when

women took up 56% representation in the House of Representatives - a world leading figure. The 2013 parliamentary elections handed women an overwhelming majority in Rwanda's Parliament, an unprecedented 64% of the seats in the Chamber of Deputies. Besides the 24 exclusive women seats, which were decided in the indirect election, women also won 26 of the 53 open seats in the latest general election. This means that Rwanda is already now (2013) ahead of the MDG indicator of 50% representation.

**Figure 21: Women’s Share in Wage Employment**



Source: EICV 1,2 and 3

The only indicator, which Rwanda will not meet in relation to MDG 3, is with regard to women’s share in wage employment in the non-agricultural sector. As Figure 21 shows, the distance to the target is indeed very long. While the share for men has gone up from 16,5% in 2000 to 38,7% in 2010/11, the same rate for women rose only from 7,6% in 2000 to 18,1% in 2010/11.

### **Key factors contributing to sustained progress**

Rwanda has made great strides in promoting gender equality driven by a strong political will and commitment to gender equality and the empowerment of women by the country’s leadership, from the highest level. According to President Paul Kagame; “*in Rwanda today, gender equality is no longer a matter for debate, it is a given...*”<sup>46</sup> He further notes that “good governance, good economic management, and respect of human rights” require gender equality and that men and women have to be “true partners and beneficiaries” for sustainable development.

This political will and commitment have facilitated the establishment of a highly gender-responsive legal and policy framework. The national Constitution of 2003 guarantees equal rights for women and men in all fields and provides for a minimum 30% of women representation in all decision-making positions as well as other rights to participation, economic and legal rights. The constitution has also formed a firm foundation for the promulgation of gender-responsive laws and the review of others so as to entrench the respect of women’s rights, notably in areas such as political, inheritance, land and property rights, as well as protection against gender-based violence (GBV). This positive legal framework has made it possible to make gender equality and the empowerment of women in all development instruments, including the long-term development Vision 2020, the Economic Development and Poverty Reduction Strategies, and the two Government 7-year programmes.

<sup>46</sup>Ministry of Gender and Family Promotion 2014. *Celebrating Gender Equality for sustainable Development: 20 years of Liberation*. Kigali: MIGEPROF.

In order to ensure that the above commitment are translated into concrete action and gender equality results, a strong institutional framework has been put in place that includes a Ministry of Gender and Family Promotion (MIGEPROF), responsible for coordination of the gender sector; Gender Monitoring Office (GMO) that ensures gender accountability and a National women's council to provide space for women's participation in all areas of development from the grass root to national level.

With the above legal and political environment, the stage is set for the women of Rwanda to realize their rights, potential and aspirations and be full partners and beneficiaries in development.

### **Key implementation bottlenecks**

Although significant achievements have been registered in the promotion of gender equality and the empowerment of women, challenges still exist. There remains a gender gap in public sector higher education, especially in science and engineering, but women are taking advantage of the opportunities to study in the private higher education institutions. However, the majority of women, especially poor women in rural areas have yet to benefit.

### **New challenges**

Men are more likely than women to be in paid employment and women are more likely than men to work as unpaid (family) farm workers. Male non-farm employment growth between 2000/1 and 2010/11 outstripped the growth in non-farm employment for women. Increasing employment opportunities for women, therefore, is the main challenge for meeting the MDG 3 goal in Rwanda.

#### 4.4 MDG 4: Reduce Child Mortality

There is only one target associated with MDG 4: Reduce by two-thirds, between 2000 and 2015, the under-five mortality rate. The goal is assessed in relation to rates for infant and under-five mortality, as well as proportion of children immunized against measles. This exercise has generated a set of trend data that also allows for a sub-regional disaggregation. Available figures on the progress made are listed below in table 10.

The main storyline here is that Rwanda shows positive trends with regard to all three indicators. Notably the under-five mortality rate is expected to meet its target, and the other two indicators (infant mortality and proportion of one-year-old children immunised against measles) also have good probabilities of reaching their targets, or getting very close.

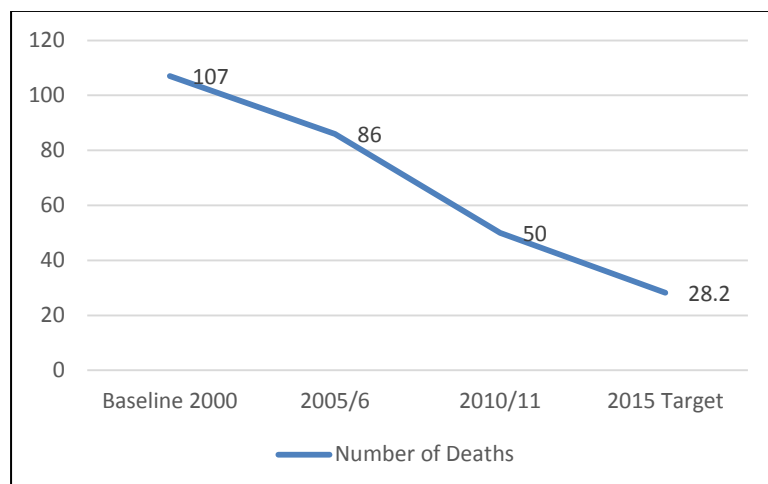
**Table 10: Progress in indicators, MDG 4<sup>47</sup>**

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>Goal 4: Reduce Child Mortality</b>					
<b><u>Target 4: Reduce by two-thirds between 2000 and 2015 the under-five mortality rate</u></b>					
4.1: Under-five mortality rate per 1000 live births	196,2	152	76	50,1	
4.2: Infant mortality rate per 1000 live births	107	86	50	28,2	
4.3: Proportion of one-year-old children immunized against measles	87%	85,6%	95%	100%	

<sup>47</sup>Sources for MDG 4 are: DHS 2000, 2005, 2010

#### 4.4.1 Status and Trends: Target 4 (Child Mortality)

**Figure 22: Infant Mortality Rate**

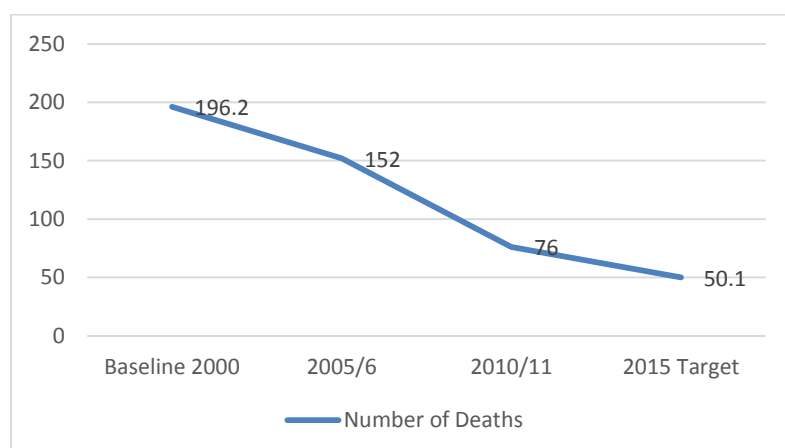


Sources: DHS 2000, 2005, 2010

The latest survey data available on infant mortality in Rwanda is from 2010/2011. The data show that infant mortality is 50<sup>48</sup>, which represents a notable decline and an approximate halving of the figure in one decade since 2000/01, when the figure was 107.

As Figure 22 illustrates, the trend line since 2000 suggests that the MDG indicator might reach the target of 35 in 2015. The census data from 2012 provides an updated figure on Infant Child Mortality: as of 2012, the rate had come down to 48,6 (boys 53,3 and girls 43,7). This suggests a slowdown compared to the trend based on the DHS data; without, however, leading to the conclusion that the target is out of reach.

**Figure 23: Under-5 Mortality Rate**



Sources: DHS 2000, 2005, 2010

<sup>48</sup>The Infant mortality rate figure indicates number of infants per 1000 live births who die before their first year.



Figure 23 shows that under-five mortality has decreased at an even faster rate than infant mortality.<sup>49</sup> By 2010/11, the rate had been halved from 152 to 76 per thousand. The 2012 census data show that the figure for under-five mortality had gone further down to 72,7 per thousand (78,1 for boys, 66,1 for girls). The trend suggests that Rwanda is quite likely to meet the target for this indicator.

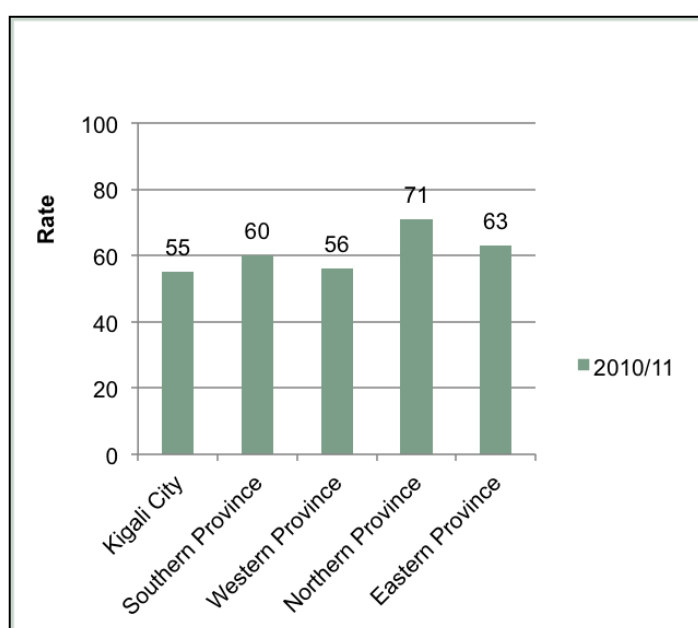
**Table 11: Variations in infant and under-5 mortality rates (2010/11)<sup>50</sup>**

Infant Mortality Rate per 1000 Live Births,		Under-five mortality rate per 1000 Live Births	
	2010/11		2010/11
<b>Kigali City</b>	55	<b>Kigali City</b>	79
<b>Southern Province</b>	60	<b>Southern Province</b>	96
<b>Western Province</b>	56	<b>Western Province</b>	88
<b>Northern Province</b>	71	<b>Northern Province</b>	107
<b>Eastern Province</b>	63	<b>Eastern Province</b>	125
<b>Urban</b>	55	<b>Urban</b>	81
<b>Rural</b>	62	<b>Rural</b>	105
<b>Male</b>	67	<b>Male</b>	107
<b>Female</b>	55	<b>Female</b>	97

Source: DHS 2010

Table 11 above shows that both infant and under-5 mortality rates are higher in rural than urban areas. They are lower in Kigali than in the provinces, although with regard to infant mortality there is little difference between Kigali and Western Province. The highest rate for infant mortality is in Northern Province, whereas it is the Eastern Province, which holds the highest rate for under-five mortality.

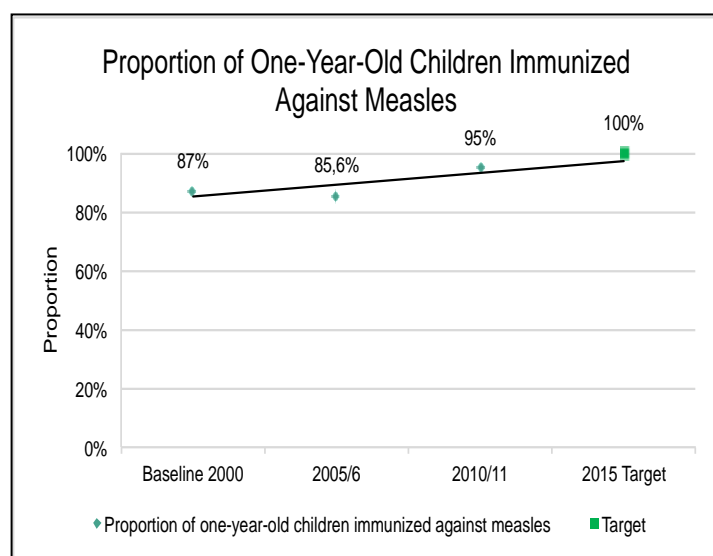
**Figure 24: Infant Mortality, By Province**



Source: DHS 2010

100 live births do not survive to their  
the past ten years.

**Figure 25: Proportion of one-year-old Children Immunized against Measles**



Sources: DHS 2000, 2005, 2010

There has been a steady rise in the number of children immunized against measles as shown in Figure 25. Although there was an initial decline between 2000 and 2005/06 the proportion of children has since increased from 85,6% in 2005/06 to 95% in 2010/11. The trendline therefore shows that target will not necessarily be reached, although Rwanda may come very close to reaching 100 per cent by 2015.

**Table 12: Children immunized against measles, disaggregated**

Children immunized against measles (12-23 months old)	
	2010/11
<b>Kigali City</b>	98,2%
<b>Southern Province</b>	97,6%
<b>Western Province</b>	91,1%
<b>Northern Province</b>	97,4%
<b>Eastern Province</b>	94,2%
<b>Urban</b>	97,3%
<b>Rural</b>	94,8%
<b>Male</b>	95,0%
<b>Female</b>	95,0%

Source: DHS 2010

There is relatively little variation in measles vaccination rates across provinces. As Table 12 shows, the lowest rate is found in Western Province (91%), whereas the highest is in Kigali City (98%). Across various categories (provinces, urban/rural and male/female) all rates are above 90% and it can be concluded that Rwanda has managed to provide measles vaccination to a very large percentage of the population regardless of social and economic background.

**Key factors contributing to sustained progress**

Rwanda stands out as one of few countries in Africa on track to achieve the Millennium Development Goals of reducing child mortality. Rwanda has made efforts to encourage women to breastfeed their children, since malnutrition is one of the killers of children under the age of five. Families have also been encouraged to have kitchen gardens where they plant vegetables, fruits and other foodstuffs to offer balanced diets to the family. In addition, Community Health Workers (CHW's) have played a big role in the reduction of child mortality rates. The CHW's bring health services closer to the population, and, among other things, they diagnose and treat Malaria, Diarrhoea and Pneumonia.

Six million mosquito nets have been distributed since 2009 and over 90% of all households in the country have at least three mosquito nets. According to the 2010 DHS results, 82% of the population have at least one Long Lasting Insecticide Net (LLIN), and 72% of pregnant women and 70% of children under-five years were using bed nets. The involvement of CHWs in early diagnosis and treatment of children under five years of age have also had an impact on malaria incidence throughout the country. Pneumococcal vaccine has also helped reduce Pneumonia among children. Diarrhoea accounts for 19% of all deaths in children under the age of five and is a major contributor to child mortality. Rotavirus vaccine was recently introduced to reduce diarrheal deaths among children in Rwanda.

*Mutuelle de santé*, the community health insurance scheme, has helped reduce the financial barrier. Through this scheme, all children, including those from poor families have access to quality medical care. More women are also delivering from proper health facilities unlike in the past when many women delivered from home with the help of traditional birth attendants.

**Key implementation bottlenecks**

The 1994 genocide in Rwanda against the Tutsis destroyed much of the socio-economic fabric of country as well as its health infrastructure. The healthcare system is still suffering in its aftermath, and there are still health inequalities between urban and rural areas. Training health workers to advanced levels has taken time and has not been fast enough to meet the needs of the Rwandan population.

## 4.5 MDG 5: Improve Maternal Health

There are two targets associated with MDG 5: (1) Reduce by three-quarters, between 2000 and 2015, the maternal mortality ratio, and (2) Achieve by 2015 universal access to reproductive health. Both targets apply to Rwanda. As in previous sections of this Chapter, the Report shows trend data as well as data disaggregated by sub-region. Table 13 shows the general trend with regard to these two targets.

The main storyline here is that Rwanda shows positive trends with regard to maternal mortality rate, and to most indicators in relation to Reproductive Health.

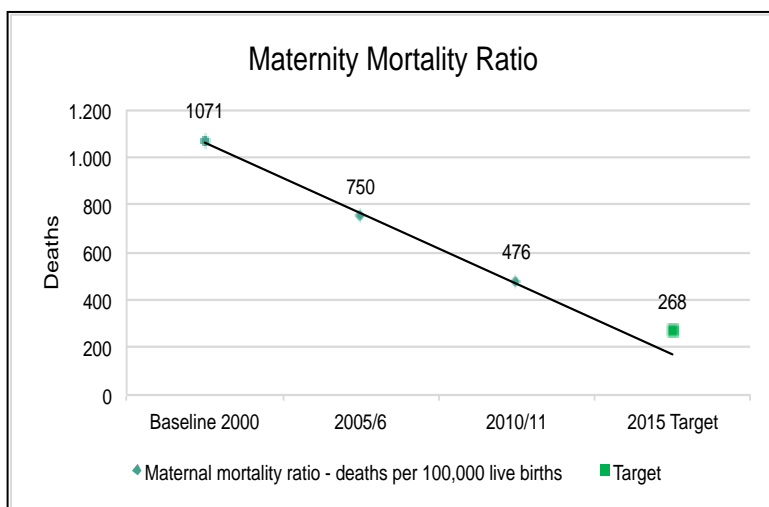
**Table 13: Progress in indicators, MDG 5<sup>51</sup>**

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>MDG 5: Improve Maternal Health</b>					
<b><u>Target 5A: Reduce by three-quarters, between 2000 and 2015, the maternal mortality ratio</u></b>					
5.1: Maternal mortality ratio - deaths per 100,000 live births	1071	750	476	268	
5.2: Proportion of births attended by skilled health professionals	31%	39%	69%	No target	
<b><u>Target 5B: Achieve by 2015 universal access to reproductive health.</u></b>					
5.3a: Married Women 15–49 years using modern contraceptives	4,3%	10,3%	45,1%	No Target	
5.3b: All Women 15–49 years using modern contraceptives		5,6%	25,2%	No Target	
5.4: Adolescent birth rate (% total live births)	5,2%	4,2%	4,1%	No Target	
5.5a: Antenatal care coverage at least one visit	92,5%	94,4%	98%	100	
5.5b: Antenatal care coverage at least four visits	10,4%	13,3%	35,4%	100	
5.6: Unmet need for family planning for married women	36%	37,9%	18,9%	No Target	

<sup>51</sup> Sources for MDG 5 are: DHS 2000, 2005, 2010

#### 4.5.1 Status and trends: Target 5A (Maternal Mortality)

**Figure 26: Maternal Mortality Ratio**

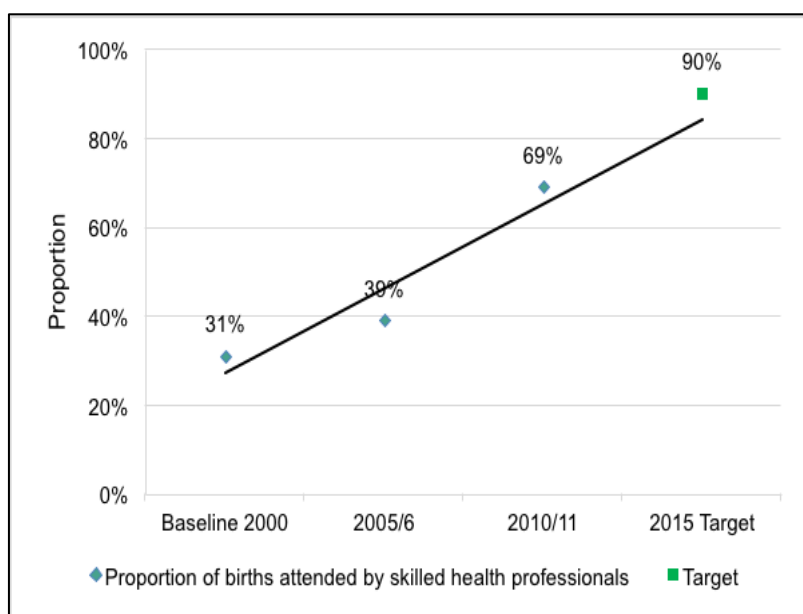


Sources: DHS 2000, 2005, 2010

As Figure 26 illustrates, maternal mortality has gone down drastically since 2000 in Rwanda. The baseline figure in 2000 was 1071 and the target of 268 is very likely to be attained assuming the trend continues.<sup>52</sup> It is not out of question that the target may even be

surpassed.

**Figure 27: Births attended by Skilled Health Personnel**



Sources: DHS 2000, 2005, 2010

There has been a steady increase since 2000 in the proportion of births attended by skilled health personnel, with 69% of mothers (2010/11 data) being cared for by a skilled health care worker during delivery (see Figure 27). Assuming the trend continues the 90% target could be

attained by 2015.

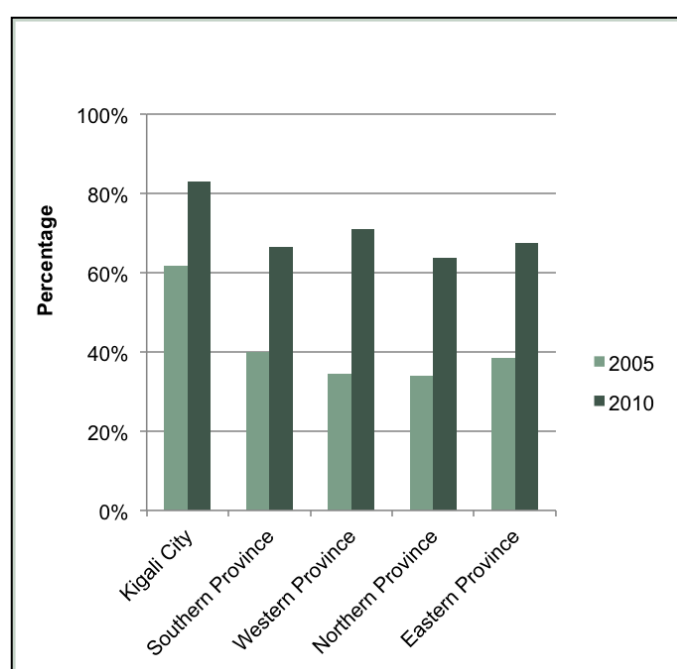
<sup>52</sup>Figures between DHS and MoH Annual Booklet 2011 are very different. MoH reports that the proportion of maternal deaths was 92 per 100,000 live births in 2010 and 87 per 100,000 live birth in 2011 (MoH Annual Booklet, 2011, p. 28).

**Table 14: Birth attended by skilled health personnel over the last 5 years**

Birth attended by skilled health personnel over the last 5 years	2005/06	2010/11
<b>Kigali City</b>	62%	83%
<b>Southern Province</b>	40%	66%
<b>Western Province</b>	34%	71%
<b>Northern Province</b>	34%	64%
<b>Eastern Province</b>	39%	68%
<b>Urban</b>	63%	82%
<b>Rural</b>	35%	67%

Source: DHS 2005, 2010

**Figure 28: Birth attended by skilled health personnel, the last 5 years, by province**



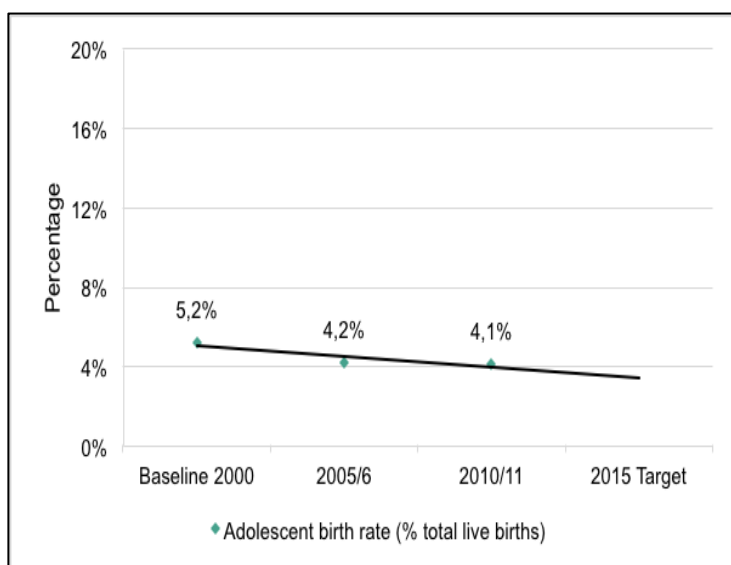
Source: DHS 2005, 2010. NISR 2012 Statistical Yearbook.

As Table 14 and Figure 28 illustrate, notable progress has taken place since 2005/06 with regard to births attended by skilled health personnel in all the five provinces as well as in both urban and rural settings. Women who live in urban areas are more likely to give birth in a health care facility than those who live in rural areas, 82% compared to 67%. For instance, women in Kigali are significantly more likely to give birth in a health care facility than those living outside the city. Yet, the key message from

these figures is that it has risen significantly everywhere and in fact doubled in some provinces.

#### 4.5.2 Status and trends: Target 5B (Maternal Health)

**Figure 29: Adolescent birth rates, 2000/01-2010/11**



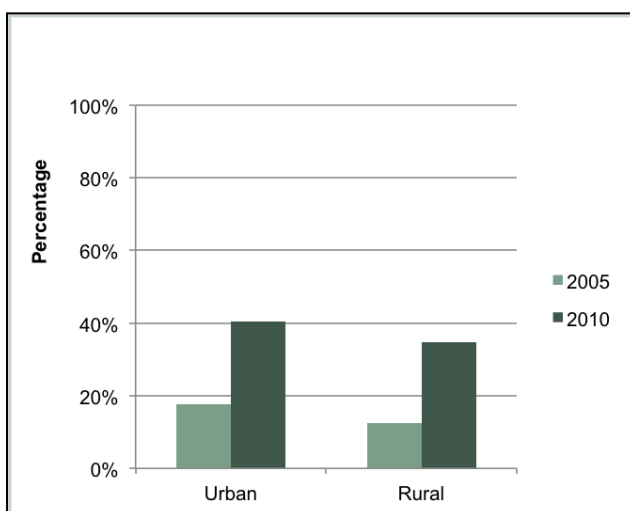
Sources: DHS 2000, 2005, 2010

As Figure 29 illustrates adolescent birth rates<sup>53</sup> have been relatively stable since 2000, going down from 5,2% in 2000/01 to 4,2% (2005/06) and further down to 4,1% in 2010/11.

Many health problems are particularly associated with negative outcomes of pregnancy during adolescence. These include anaemia, malaria, HIV and other sexually transmitted infections, postpartum haemorrhage and mental disorders, such as depression<sup>54</sup>. This figure puts Rwanda in a position of having one of the lowest rates of adolescent birth rates in Sub-Saharan Africa, which has the world's highest level of adolescent childbearing<sup>55</sup>.

Many health problems are

**Figure 30: Antenatal care coverage – four visits, urban versus rural**



Sources: DHS 2005, 2010

98% of women receive antenatal care by making at least one visit, whereas the figure is much lower (35,4%) for antenatal care at four visits as recommended by the World Health Organisation. Thus, Rwanda is likely to attain the indicator based on one visit but fall short with regard to the WHO standard of four visits. Looking at the same

<sup>53</sup>Defined as births by girls in the age of 15-19 years.

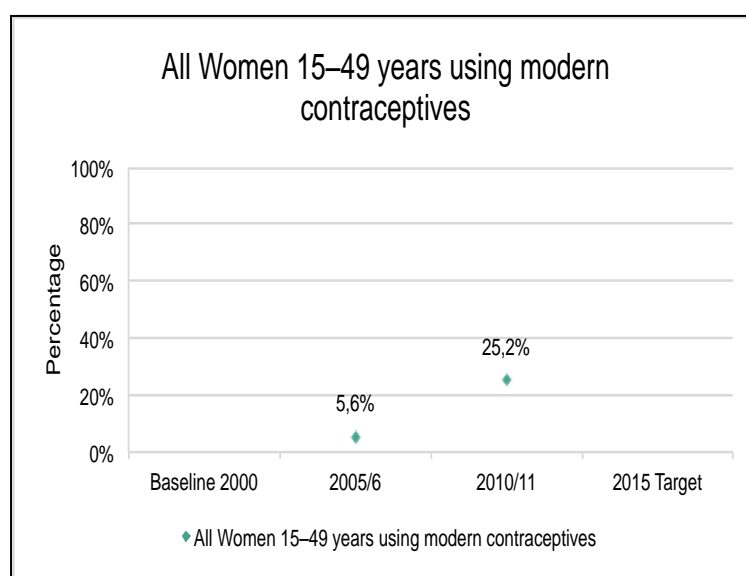
<sup>54</sup>[http://www.who.int/maternal\\_child\\_adolescent/topics/maternal/adolescent\\_pregnancy/en/](http://www.who.int/maternal_child_adolescent/topics/maternal/adolescent_pregnancy/en/)

<sup>55</sup>Estimates from the UN Population Division indicate that adolescent fertility in Sub-Saharan Africa declined from 134 live births per 1.000 women ages 15 to 19 in 1995-2000 to 115 in 2005-2010.

trends in urban versus rural settings (Figure 30), notable progress has been made in both settings in the period 2005/06-2010/11.

Finally, as Figure 31 confirms, the use of contraceptives shows a steep increase in the period for which data exists: it has almost five-doubled in the period 2005/06 – 2010/11.

**Figure 31: Contraceptive Prevalence Rate**



Source: DHS 2005, 2010

When looking at sub-national levels, the use of modern contraceptives is highest in Northern Province (52%) followed by Kigali City and Southern Province (both at 48%), Eastern Province (46%), and finally Western Province, which drops at 36%. The difference between urban and rural is very small (47% versus 45%). This is an encouraging figure since use of modern contraceptives elsewhere tends to be more prevalent in urban areas.

**Table 15: Married Women 15-49 years using modern contraceptives**

Married Women 15–49 years using modern contraceptives			
	2000	2005	2010
<b>Kigali City</b>	14,0%	23,2%	47,5%
<b>Southern Province</b>		8,4%	48,3%
<b>Western Province</b>		10,3%	35,5%
<b>Northern Province</b>		9,8%	52,0%
<b>Eastern Province</b>		8,5%	45,9%
<b>Urban</b>	14,0%	21,2%	47,0%
<b>Rural</b>	3,0%	8,6%	44,9%

Sources: DHS 2000, 2005, 2010



There has been steady progress made on meeting the unmet need of married women in terms of assistance with family planning. Since 2000, the percentage of unmet need has almost been cut in half, from 36% to 18,9%.

### **Key factors contributing to sustained progress**

There is a range of key factors behind the reasons for the improvement in maternal health but it is primarily due to the increasing number of women giving birth in a health care facility attended by qualified health care professional and the introduction of maternal death audit.

The rise in numbers of women giving birth in a health care facility is due to a very effective public education campaign on its importance for mother and child health. In Rwanda a range of quality in service delivery has been addressed: health centers stay open 24 hours; levels of hygiene appear good; and staff are generally respectful towards patients. Monitoring and supervision visits by superior authorities (hospitals) actually take place. CHWs have been trained extensively and are provided with incentives to reach maternal and child health targets. Rwanda combines regular supervision with Performance-Based Health Financing (PBHF), alongside moral rewards and sanctions under the *imihigo* system of performance targets where local officials pledge publicly to achieve certain objectives. This system includes local officials with health responsibilities as well as health professionals. Public sector workers are forbidden to run private health care facilities. Voluntary community health workers (CHWs) have been issued with specially programmed mobile phone messages (Rapid SMS) so they can contact health facilities for referrals. Also, the increasing availability of ‘waiting wards’ for expectant mothers at rural Rwandan health centres makes accidental home births less likely and enables the swift diagnosis of complicated deliveries.

Policy reforms in Rwanda have been mutually reinforcing. The use of voluntary CHWs alongside strong encouragement to subscribe to the nationwide health insurance scheme has been critical to local uptake of maternal health services. And government-led sector-wide planning has ensured donor support plugs real resource gaps.

The Ministry of Health, with the financial and technical support of WHO and UNFPA, introduced the Maternal Death Audit approach for reducing maternal mortality in 2008 in all district and referral hospitals. All the maternal deaths that occurred were audited for the cause. The audit in 2008 showed that the two main causes of maternal mortality, accounting for 72% of all deaths, were postpartum haemorrhage and obstructed labour.

**Key implementation bottlenecks constraining progress**

According to the Rwanda Society of Obstetrics and Gynaecologists, there are only 30 specialists in Rwanda, which constitutes a huge challenge in terms of having sufficient specialised staff to cover needs all over the country.

On the other hand, one of the main challenges related to maternal health in Rwanda is that many pregnant women delay to seek antenatal services from health care facilities. Some women, even after seeing signs of complications; they ignore visits to health centres. There is still need to educate women and to have them receive services from health facilities.

#### 4.6 MDG 6: Combat HIV/AIDS, Malaria and other Diseases

There are three Targets linked to MDG6: (a) have halted, by 2015, and begun to reverse the spread of HIV/AIDS, (b) achieve, by 2010, universal access to treatment for HIV&AIDS for all those who need it, and (c) by 2015 have halted and begun to reverse the incidence of malaria and other major diseases. All three have been tracked in Rwanda. With the exception of five out of the 10 indicators none has a specified numerical endpoint so the main criterion is in which direction the trend goes: up or down?

The main story here is that progress is being made in combating HIV/AIDS, malaria and other main diseases like tuberculosis and malaria. This progress is in deferring proportions. On one hand, there is moderate progress in combating HIV/AIDS. On the other hand, there is considerable progress in the battle to reverse the incidence of malaria and tuberculosis.

**Table 16: Progress in indicators, MDG 6<sup>56</sup>**

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>Goal 6: Combat HIV/AIDS. Malaria and Other Diseases</b>					
<b>Target 6A: Have halved by 2015 and begun to reverse the spread of HIV/AIDS</b>					
6.1: HIV prevalence rate amongst population aged 15–24		1,0%	1,0%	No Target	
6.1a: HIV prevalence rate amongst women 15-49 & men 15-54		3%	3%	No Target	
6.2: Use of condom last high risk sex, ages 15-24					
Male	No figure	39,5%	66,2%	No Target	
Female	No figure	26%	42%	No Target	
6.3: Proportion of population aged 15–24 years with comprehensive correct knowledge of HIV/AIDS					
Male		53,6%	47,4%	No Target	
Female		50,9%	52,6%	No Target	

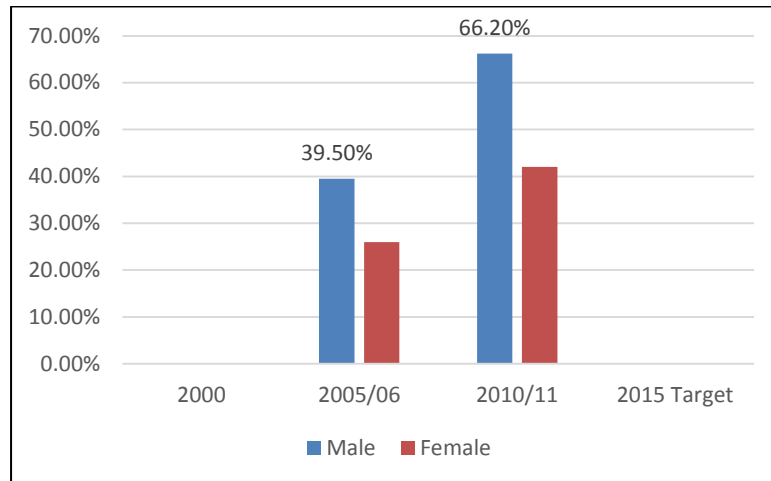
<sup>56</sup>Sources for MDG 6 are: DHS 2000, 2005, and 2010

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
6.4: Ratio of school attendance of orphans to non-orphans aged 10–14 years	0,8	0,92	0,91	No Target	
<b>Target 6B: Achieved by 2010 universal access to treatment for HIV/AIDS for all those who need it</b>					
6.5: Proportion of population with advanced HIV infection using antiretroviral drugs				Target data was 2010	
Adults			86,6%	100%	
Children			53,9%	100%	
<b>Target 6C: By 2015 have halted and begun to reverse the incidence of malaria and other major diseases</b>					
6.6a: Malaria incidence rates per 100.000		26	13	Halt and reverse	
6.6b: Malaria mortality rate over 5 years of age per 100.000	52	37,7		Halt and reverse	
6.6c: Malaria mortality rate children 0–5 years per 100.000		41			
6.7: Proportion of children under five sleeping under an insecticide-treated bed nets	5%	59,7%	69,6%	No Target	
6.9: Tuberculosis Mortality rate per 100.000	48	21	12	Halt and reverse	
6.10: Percentage of tuberculosis cases detected and cured under DOTS	23%	43%	60%	Halt and reverse	

#### 4.6.1 Status and Trends: Targets 6A & 6B (HIV/AIDS)

This sub-section combines the discussion of Targets A and B since they are closely related. The HIV/AIDS prevalence rate among people 15-24 years old has not changed between 2005 and 2010. It has remained at 1% in the five year interval. Prevalence rate among men and women between the ages of 15-49 and 15-54 respectively also has been constant at 3% in the same period of time. Containing HIV/AIDS at constant rates has been attained as a result of Rwanda's great effort in investing in a combination of HIV/AIDS clinical and prevention measures.

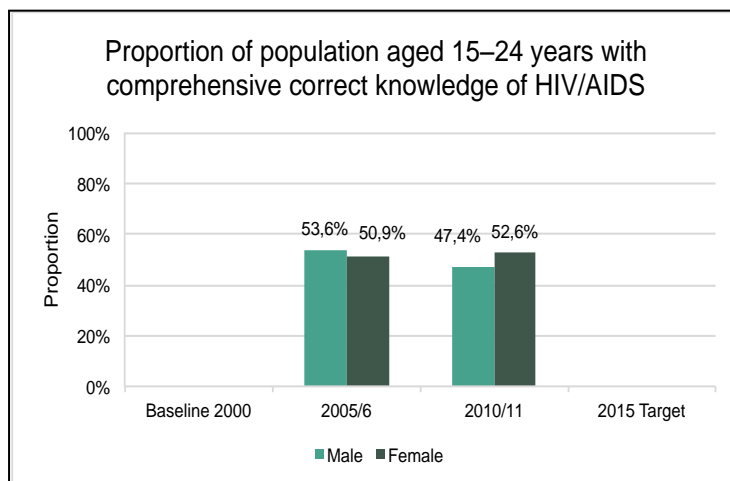
**Figure 32: Condom Use at Last High Risk Sex**



Source: DHS 2000, 2005 and 2010

The 2000, 2005 and 2010 Demographic and Health Surveys data show that condom use among young males and women aged 15-24 has developed differently between 2005 and 2010/11 for women and men respectively. Figure 32 shows that condom use among men is generally decreasing, whereas for women it has been steadily increasing. The upward trend in the use of condom for women is an indication that they are taking greater responsibility for their own lives, and also a good indication that the uptake of HIV/AIDS messages is gradually influencing behaviour among female youth in Rwanda. It also indicates that action has to be taken towards the men in order to ensure that the negative of declining use among them be reversed.

**Figure 33: Proportion of Population Aged 15-24 with Comprehensive Correct Knowledge of HIV/AIDS**

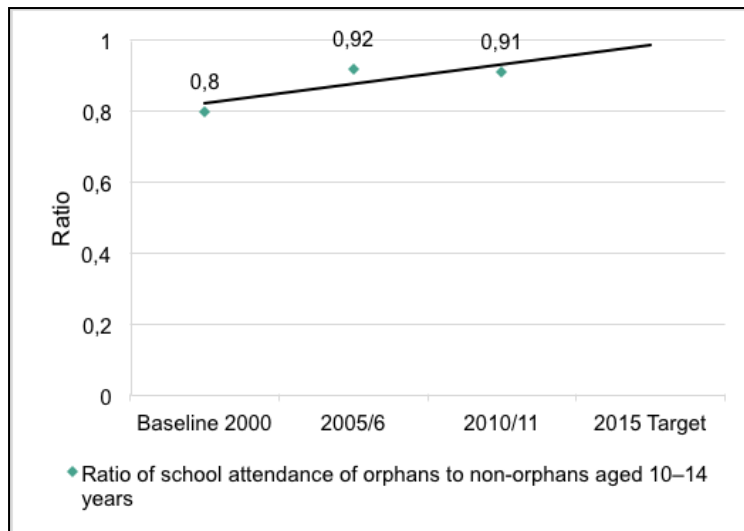


Source: DHS 2000, 2005, 2010

Correct knowledge of HIV among men (15-24) went down from 53,6% to 47,4% between year 2005/6 and 2010/11 as opposed to women whose percentage increased from 50,9 to 52,6 in the same period. The lack of progress on this indicator reflects the

underlying challenges that exist in the national efforts to promoting knowledge of valid HIV prevention methods, and to reducing misconceptions about the disease, which ultimately contribute to the decrease in the risk of transmission.

**Figure 34: Ratio of school attendance of orphans to non-orphans aged 10–14 years**

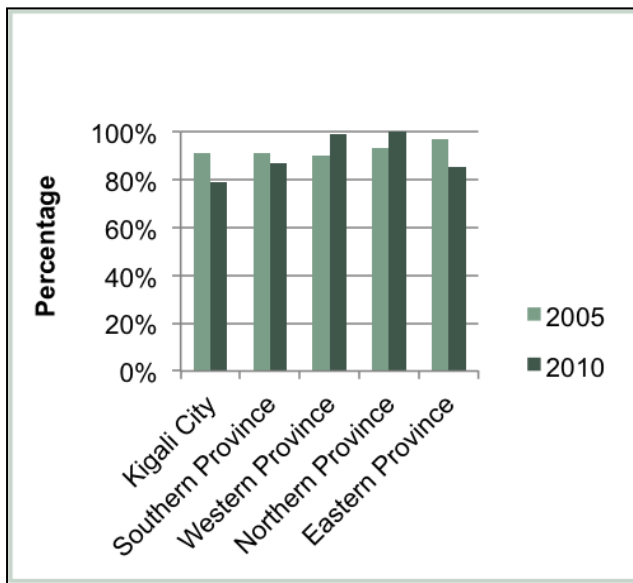


Source: DHS 2005 and 2010

This indicator measures the impact of HIV/AIDS on orphans by taking the ratio of the current school attendance rate of children aged 10–14 both of whose biological parents have died and compare it to the current school attendance rate of children aged 10–14 both of whose parents are still alive and who currently live with at least one biological parent.

As Figure 34 above shows, the difference in ratio of school attendance of orphaned to non-orphaned children 10-14 years of age is very small and even decreasing in the period between 2005/06 and 2010/11. Even if this indicator measurement does not directly distinguish the cause of orphan hood, it is built on an underlying assumption that high proportions of deaths of adults with school-age children (10-14) in areas of HIV epidemics are likely to be related to AIDS. The somewhat equal ratios of orphans-non orphans in school and improvements in these ratios over time from 0,8 in 2000 to 0,91 in 2010/11 show the extent to which AIDS support programs and possibly other social safety net and support programs in Rwanda have succeed in securing educational opportunities for orphaned children.

**Figure 35: Rates of school attendance of orphans to non-orphans aged 10-14 years; by Province**

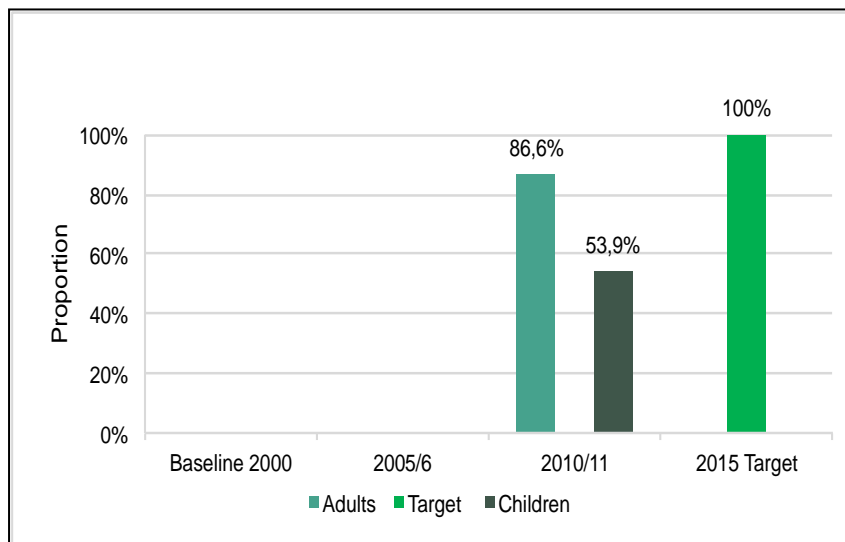


Source: DHS 2005, 2010

Figure 35 indicates that there are uneven ratios of school attendance of orphans across provinces. Kigali city has the lowest ratio that has been decreasing over time. Decreasing trends in ratios are also seen in the Eastern and Southern provinces. The Northern and Western provinces have the highest ratios. In these two provinces the school attendance by orphans (10-14 years)

was equal to that of non-orphans in 2010. The disparities in gains by provinces come as a result of differences in the gravity of the problem and/or the differences in implementation of OVC programs.

**Figure 36: Proportion of population with advanced HIV infection using antiretroviral drugs**



Source: DHS 2005, 2010

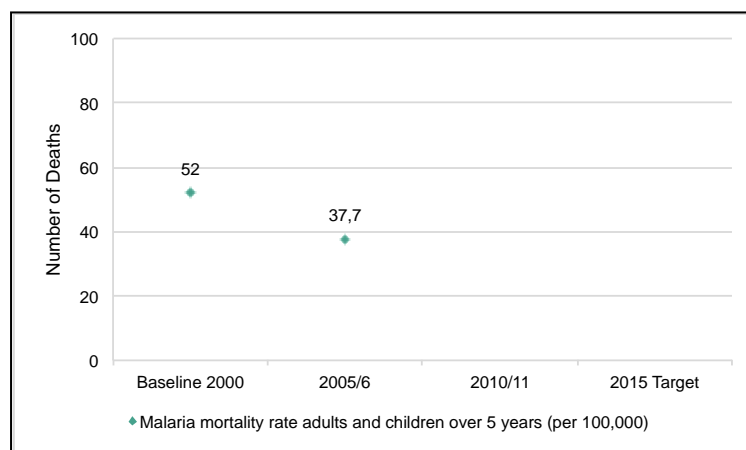
Antiretroviral treatment is free in Rwanda but not all those eligible access treatment. This is especially the case for children. In 2010 antiretroviral treatment coverage was

estimated to be 86,6% for eligible adults and 53,9% for children.<sup>57</sup> 465 health facilities out of the total population of health facilities in Rwanda by end of 2013 provided ART services. However, a couple of other reports have cited the challenges Rwanda faces in the provision of this service to its people. For instance, the 2007 survey of the health sector found that only about one third of the health facilities that offered ART had had uninterrupted supplies of ARVs in the previous six months<sup>58</sup>. Seven of the total number of facilities with an HIV testing system offered a youth-friendly service for HIV testing and clearly, there is insufficient information and clinical follow-up for those with HIV/AIDS and a number of those on ART are lost. In addition, the Ministry of Health has also reported that HIV-positive children are diagnosed at a late stage, possibly increasing morbidity and mortality<sup>59</sup>.

#### 4.6.2 Status and Trends: Target 6C (Malaria and TB)

Rwanda has made good progress in reducing the burden of the malaria disease, with the emphasis being on prevention. Yet, malaria remains the main cause of death in children under five years of age and the second cause after HIV/AIDS for adults<sup>60</sup>. Malaria indicators have not been regularly measured in Rwanda making it difficult to establish trends over a long span of time. Between 2005 and 2011, the malaria incidence rate per 100.000 was reduced by half, and mortality also declined considerably with in the period where data is available.

**Figure 37: Malaria Mortality Rate for adults and children over 5 years per 100.000**



Source: DHS 2000 and 2005

Data on mortality rates related to malaria is incomplete for the whole period, but it shows that it declined considerably from 52 to 37,7 per 100.000 inhabitants between 2000 and 2005 as indicated

<sup>57</sup> National AIDS Control Commission 2010. *United Nations Special Assembly Special Session on HIV and AIDS: Country Progress Report, January 2008–December 2009*. Kigali: National AIDS Commission.

<sup>58</sup> National Institute of Statistics of Rwanda, Ministry of Finance and Economic Planning, Ministry of Health, Macro International USA 2008. *Rwanda Service Provision Assessment Survey*. Kigali: NISR.

<sup>59</sup> Republic of Rwanda 2009a. *Rwanda National Strategic Plan on HIV and AIDS 2009-2012*. Kigali: Ministry of Health.

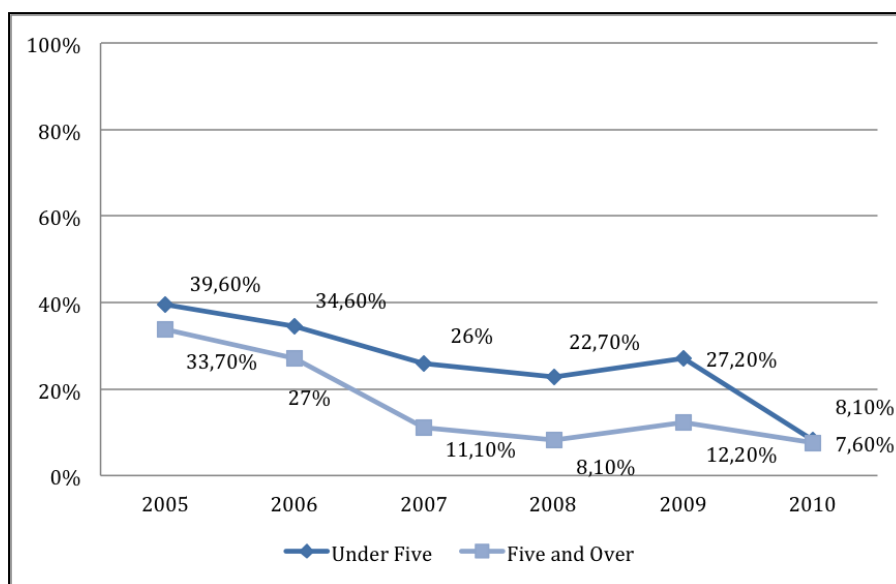
<sup>60</sup> Republic of Rwanda 2009b. *Health Sector Strategic Plan January 2009-December 2012*. Kigali: Ministry of Health.



in Figure 37.

Comparing mortality rates for children below and those above 5 years, two things stand out. One is that mortality is higher among the under-5 than the above-5. The other is that, there is a declining trend for both groups – a clear sign of progress being made by Rwanda in this area (see figure 38 below).

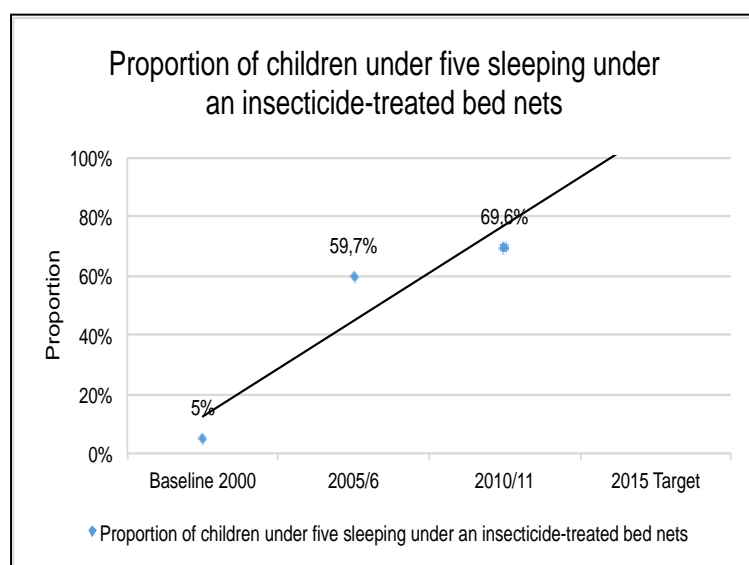
**Figure 38: Malaria Mortality Rates among Children under-5 and over-5 years**



Source: NISR 2012 Statistical Yearbook, Ministry of Health Data

The use of long-lasting insecticide nets (LLIN) to prevent malaria has been one of the many preventive measures used by the Government of Rwanda in its fight against malaria. Figures for under-5 children show that the percentage that sleeps under such types of new nets grew from only 5% in 2000 to 69,6% in 2010 (see Figure 39).

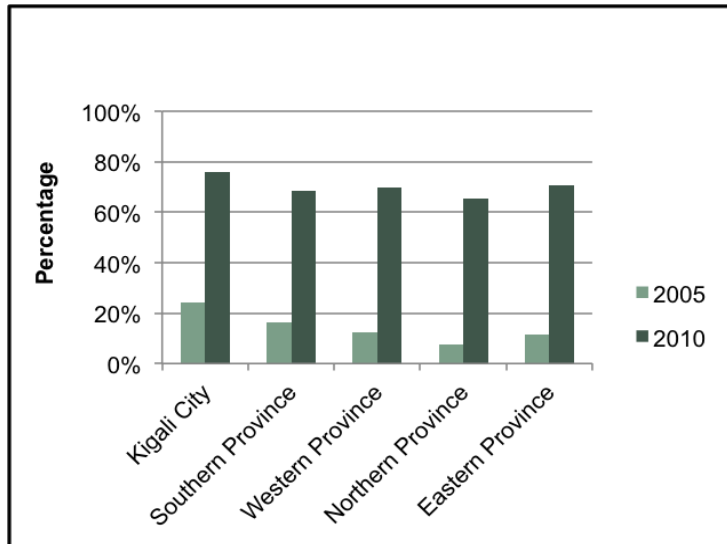
**Figure 39: Proportion of children under-5 sleeping under insecticide-treated nets**



Source: DHS 2000, 2005 and 2010

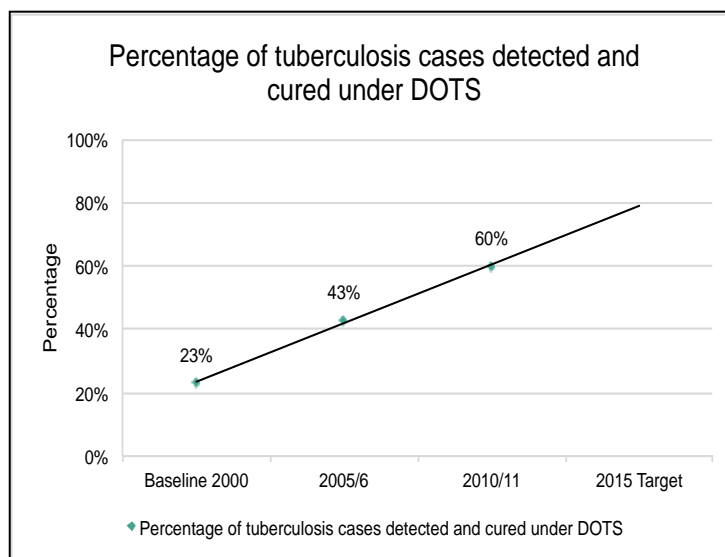
The rapid growth in use of these insecticide-treated nets has been the same in all provinces. As Figure 40 shows, the disaggregated data confirm a similar trend everywhere with all provinces having made a giant step forward in the use of such nets.

**Figure 40: Children Under-5 sleeping under an ITN net; by Province**



Source: DHS 2005, 2010

**Figure 41: Percentage of tuberculosis cases detected and cured under DOTS**



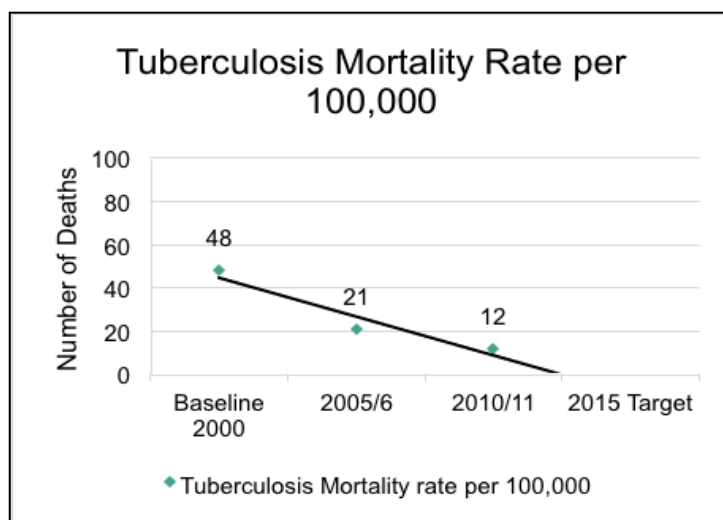
Source: DHS 2005, 2010

Tuberculosis data show that there has been a marked improvement in detecting and treating cases of tuberculosis thanks to

Community-based Directly Observed Treatment Short Courses (DOTS). As shown in Figure 41, the percentage rose from 23% in 2000 to 60% in 2010. There is no ultimate target for this indicator but the

country's progress reflects the improvements that have been made in the health sector in the battle against TB since the turn of the century.

**Figure 42: Tuberculosis Mortality Rate per 100.000**



<http://mdgs.un.org/unsd/mdg/Data.aspx>  
[www.who.int/tb/country/global tb database](http://www.who.int/tb/country/global_tb_database)

Figure 42 shows that overall the number of cases dying from TB-related illnesses has gone down considerably between 2000 and 2010 at a pace which suggests Rwanda is on track to eliminate almost all such deaths by 2015. This is a very encouraging development that confirms the general finding that the health sector has expanded its

coverage and provides effective services.

### **Key factors contributing to sustained progress**

Several key factors have contributed to the progress made in relation to the various targets under MDG 6. These include: First is the commitment by the top level political leadership which has been heavily engaged in the fight against HIV/AIDS. Rwanda launched the Couple Counselling and Testing Campaign in the country and has been a strong advocate for the campaign to combat HIV/AIDS worldwide. This commitment to combat deadly diseases and other priority areas has helped lay a strong foundation for accountability not only for use of funds but also for results in the public health sector.

The second factor is the decentralized system of delivering health services. More than 90% of the health facilities in Rwanda have full packages of HIV services. This means that one can get an HIV test, Prevention-of-Mother-to-Child-Treatment (PMTCT) services for pregnant mothers and Anti Retroviral Treatment (ART) in every sector (*umurenge*) of the country. In terms of numbers, out of 495 health facilities in the country by the end of 2013, 493 such facilities provide testing and counselling services, 488 provide PMTCT services while 465 provide ART services<sup>61</sup>. Access to these services has helped people to get earlier and more effective treatment as well as making it possible to conduct follow-up treatment of the patients.

The third factor is the coordinated response to combat HIV/AIDS and other deadly diseases. The Government of Rwanda has laid this out in its policy and strategic documents. Development partners e.g. the Global Fund, One UN and PEPFAR who

<sup>61</sup>Rwanda Biomedical Center 2013. Annual Report on HIV & AIDS July 2012-June 2013. Kigali: RBC.

are extensively involved in this sector, have adopted this approach for a more effective use of their technical expertise, technology and financial inputs. At the decentralised levels, achieving the MDG6 targets has been facilitated by district plans that are coordinated through an effective joint planning mechanism – Joint Action Development Forum.

The fourth factor is the expansion of medical insurance schemes, especially the *Mutuelle de santé*, which have made it easier for ordinary citizens to access treatment against opportunistic diseases and secondary infections.

### **Key implementation bottlenecks**

There are at least three key implementation bottlenecks. The first is how to help those that are hard to reach and those persons most at risk. The hard to reach are those living with HIV and AIDS but have neither tested nor started Anti Retroviral Treatment, and individuals who know their HIV status but are not linked to any HIV facilities. They include commercial female sex workers (FSWs) and their clients, men having sex with men (MSM), and Injecting Drug users.

The second bottleneck is insufficient funds for the health infrastructure. The expansion that has taken place in providing access to public health services has been driven not only by available supply of funds but also by demand through campaigns aimed at raising community awareness. The result is that it has not always been easy to keep pace with the growing demand, especially when it comes to building health centres and providing them with equipment and medicine.

The third bottleneck is weak monitoring and evaluation. Success in the health sector which relies quite heavily on local government capacity has been held back in part by weak monitoring and evaluation capacity at that level<sup>62</sup>. The link between central and local governments has not always yielded the desired results because of delays caused by shortage of experienced and trained staff at district and other lower levels.

### **New Challenges**

There are a number of factors that can help accelerate progress in the battles against deadly diseases. More specifically in relation to HIV/AIDS, as noted in the 2012 MDG Report<sup>63</sup>, more can be done to better target messages contained in Information, Education and Counselling (IEC) and Behaviour Change Campaign that are delivered during community outreach sessions or prepared for key target populations. Yet another challenge is to mobilize more internal funding for the health infrastructure amidst decreasing ODA. Finally, there is need to strengthen monitoring and evaluation to ensure accountability for results and finances.

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<sup>62</sup>Republic of Rwanda 2012b. *EDPRS: Lessons Learnt, 2008-2011*. Kigali: Ministry of Finance and Economic Planning.

<sup>63</sup>UNDP 2012. *Millennium Development Goals Progress Report: Rwanda Country Report 2010*. Kigali: UNDP Country Office.

## 4.7 MDG 7: Ensure Environmental Sustainability

MDG 7 has four targets: (a) Integrate the principles of sustainable development into country policies and programme and reverse the loss of environmental resources, (b) Reduce biodiversity loss, achieving, by 2010, a significant reduction in the rate of loss, (c) Halve, by 2015, the proportion of people without sustainable access to safe drinking water and basic sanitation, and (d) Achieve, by 2020, a significant improvement in the lives of at least 100 million slum dwellers. Table 17 presents the data for some of the indicators that have been tracked over years and the targets, where available.

The emerging trend is that Rwanda is doing well overall on MDG 7. Rwanda achieved the zero-target on consumption of the CFCs in 2009. It is likely to achieve or even exceed the 2015 target on access to safe drinking water and sanitation facilities. However, Rwanda needs to do more to halt carbon dioxide emissions and consumption of HCFCs that continue to increase in absolute terms.

**Table 17: Progress on indicators, MDG 7<sup>64</sup>**

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>MDG 7: Ensure Environmental Sustainability</b>					
<b><u>Target 7A: Integrate the principles of sustainable development into the country's policies and programmes and reverse the loss of environmental resources</u></b>					
7.1: Proportion of land covered by forest	12,4%	20%	24,5% (2013)	25%	
7.2 CO2 emission per capita – parts per million	0,082	0,055	0,055	No Target	
7.3a Consumption of ozone depleting substances – CFCs – DOP Metric tons	30,1	12	0,0	0,0	
7.3b Consumption of ozone depleting substances – HCFCs - DOP Metric tons	0,3	3,1	4,4 (2012)	No Target	
<b><u>Target 7C: Halve by 2015 the proportion of people without sustainable access to safe drinking water and basic sanitation</u></b>					
7.8: Proportion of population using an improved drinking water source	64,1%	70,3%	74,2%	82%	
7.9: Proportion of population using an improved sanitation facility	51,5%	58,5%	74,5%	74,5%	

<sup>64</sup>Sources for MDG 7 are: EICV 2 and 3, World Bank 2013, EDPRS 2, UNEP 2013, DevInfo Rwanda

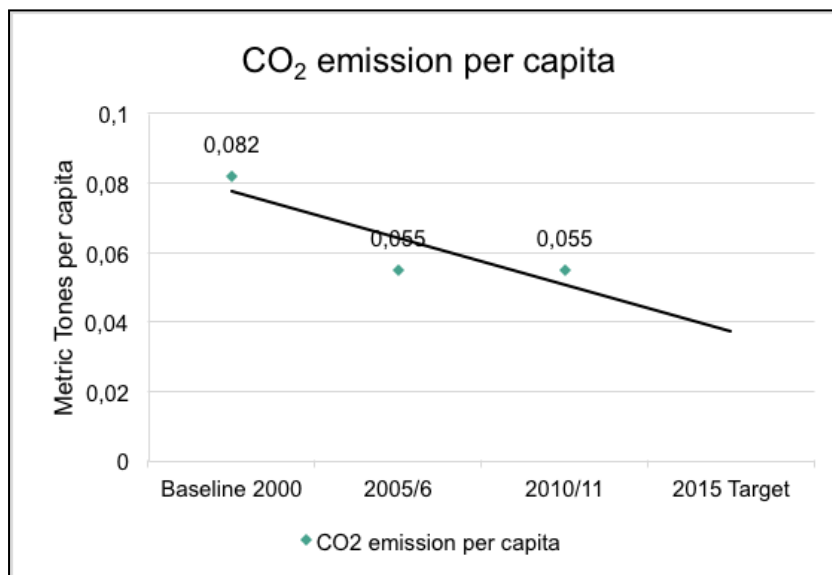
#### 4.7.1 Status and Trends: Target 7A (Sustainable development)

This section discusses Rwanda's progress on carbon dioxide emissions, land area covered by forests and ozone depleting substances consumption.

In terms of carbon emissions, Rwanda emits low CO<sub>2</sub> implying the country has a considerable reserve of ecological space<sup>65</sup>. Carbon dioxide emissions come mainly from the burning of fossil fuels and the manufacture of cement.

Rwanda's CO<sub>2</sub> emission (in metric tons) increased in absolute terms each year in the last ten years while CO<sub>2</sub> emissions per capita decreased from 0,082 in 2000 to 0,055 in 2010. The decrease in CO<sub>2</sub> emissions per capita was due to increase in population that rose at an average annual growth rate of 2,6%<sup>66</sup> in the same period.

**Figure 43: CO2 Emission Per Capita**



Source: World Bank, 2013

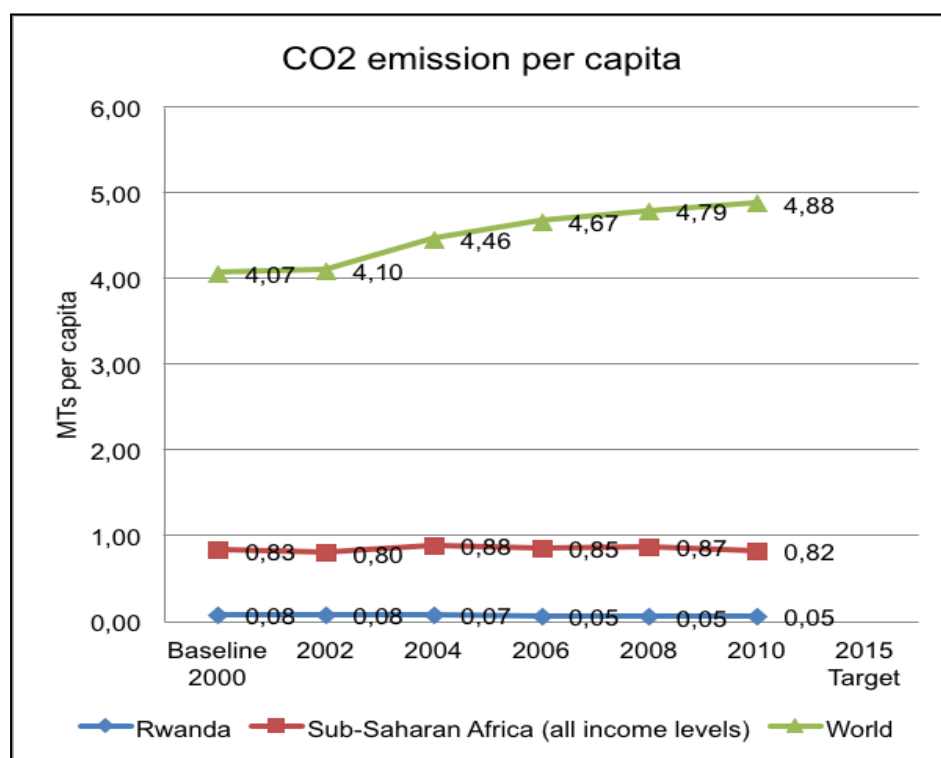
Other countries in the region have almost the same amount of CO<sub>2</sub> emissions except Kenya that emits slightly higher CO<sub>2</sub>. Rwanda CO<sub>2</sub> emissions per capita averaged at 0,07 between the year 2000 and 2010, far below the sub-Saharan Africa and world averages of 0,87 and 4,49 respectively within the same period<sup>67</sup> (see Figure 44 below).

<sup>65</sup>Ecological space refers to a country's emissions; the higher the CO<sub>2</sub> emissions the lower the ecological space and vice versa.

<sup>66</sup> NISR: 2012a. *Population and Housing Census, PROVISIONAL RESULTS*, November 2012.

<sup>67</sup><http://data.worldbank.org/indicator/EN.ATM.CO2E.PC> accessed on 21st November 2013

**Figure 44: CO2 emissions per capita – a regional and global comparison**



Source: World Bank, 2013.

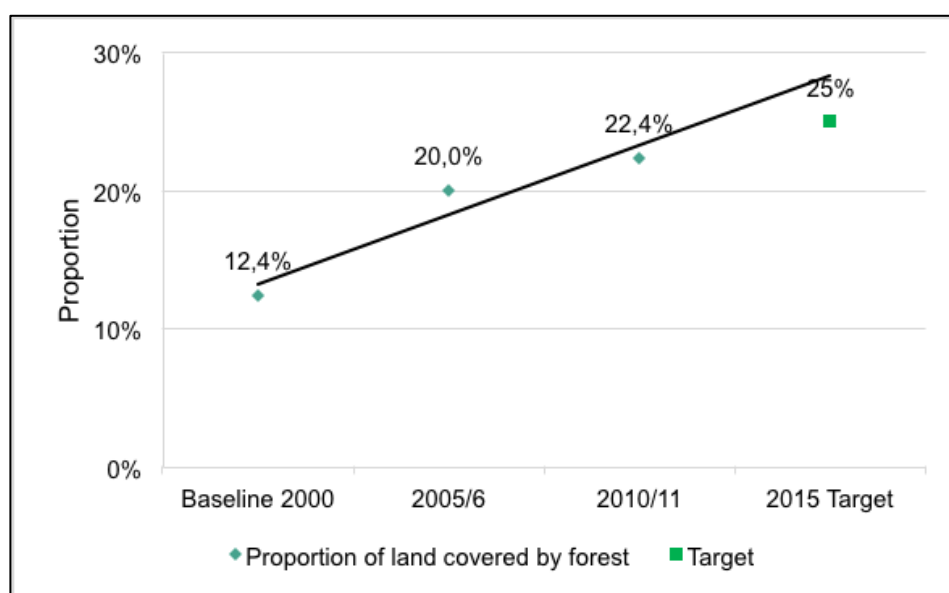
Regarding land under forest cover, Rwanda lost much of its forests between 1960s and 1990s mainly due to human activities. The loss was estimated at 1,3% per year<sup>68</sup>. Since 2000, the government put in place stringent protectionist measures against encroachment and deforestation. Together with accelerated tree-planting programs, Rwanda has made consistent progress in regaining its forest cover in the last decade. Between 2000 and 2010 the proportion of land covered by forests increased by 10% (see Figure 45). With a continuation of the existing policies, Rwanda is very likely to achieve the MDG target of 25% on the “Land area covered by forests” indicator.

Rwanda’s natural forests which include Nyungwe and Cyamudongo Forests, Volcanoes National Park, Akagera National Park and Eastern Savannah and Forest Gallery, Gishwati Forest, Mukura Forest and Busaga Forest are all protected areas by law. The Forest Department under the Ministry of Natural Resources collects data for forests that fall under the Food and Agriculture Organization’s (FAO) definition of forests<sup>69</sup> and plantations that do not qualify for the FAO definition but are categorized as forests at the national level.

<sup>68</sup> Rwanda Environmental Management Authority 2009. *Rwanda: State of Environment and Outlook Report*. Kigali: REMA.

<sup>69</sup> Forest is land spanning more than 0,5 hectares with trees higher than 5 metres and a canopy cover of more than 10 percent, or trees able to reach these thresholds.

**Figure 45: Proportion of land covered by forest**



Source: EICV 2, 3, SYB 2013 and EDPRS2

Rwanda signed and ratified the Vienna Convention for the Protection of the Ozone Layer and its Montreal Protocol on Substances that Deplete the Ozone Layer dedicated to the protection of the earth's ozone layer. Ozone depleting substance (ODS) is any substance containing chlorine or bromine, which destroys the stratospheric ozone layer that absorbs most of the biologically damaging ultraviolet radiation.

According to the Ozone Secretariat of the United Nations Environment Programme, Rwanda imported two ODSs, namely chlorofluorocarbons (CFCs) and hydro chlorofluorocarbon (HCFCs)<sup>70</sup>. These are refrigerants used for making or repairing gadgets such as refrigerators, A/C systems or heat pumps. The Government sensitized relevant stakeholders and the general public on the dangers of using CFCs<sup>71</sup> and later implemented a ban on importation of CFCs leading to the achievement of the zero importation targets in 2009<sup>72</sup>. This has not been the case for HCFCs, which have instead increased between 2004 and 2011, albeit followed by slight decrease in 2012 as shown in Figure 46.

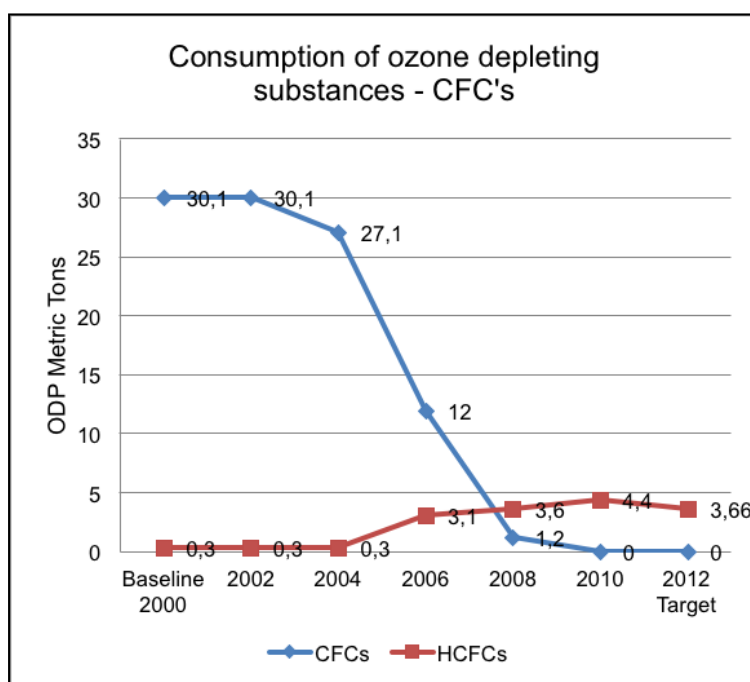
<sup>70</sup>[http://ozone.unep.org/new\\_site/en/index.php](http://ozone.unep.org/new_site/en/index.php)

<sup>71</sup>[http://ozone.unep.org/new\\_site/en/index.php](http://ozone.unep.org/new_site/en/index.php)

<sup>72</sup>[http://www.rema.gov.rw/rema\\_doc/Newsletters/REMA%20MAGAZINE%208.pdf](http://www.rema.gov.rw/rema_doc/Newsletters/REMA%20MAGAZINE%208.pdf)



**Figure 46: Consumption of Ozone Depleting Substances**



Source: [http://ozone.unep.org/new\\_site/en/index.php](http://ozone.unep.org/new_site/en/index.php)

### **Key factors contributing to sustained progress**

There is no single factor that can explain the progress made by Rwanda in regard to this target. A combination of factors played their part but key among them are (a) Rwanda's adherence to international protocols and treaties, (b) the establishment of strong legal and institutional frameworks, and (c) a strong political will across government.

Rwanda is party to various international treaties including Biodiversity, Climate Change, Climate Change-Kyoto Protocol, Desertification, Endangered Species, Hazardous Wastes, Ozone Layer Protection, and Wetlands and has also signed the Law of the Sea<sup>73</sup> all of which have significantly contributed to ensuring environmental sustainability.

The Government has established a legal and institutional framework to coordinate the environment sector and implement environment-related activities, including various laws and decrees passed, and institutions such as Ministry of Natural Resources and Rwanda Environmental Management Authority (REMA). This has paved the way for a holistic environmental planning under which the environment is highlighted as a cross-cutting concern in leading strategic and policy documents, including Vision 2020, EDPRS 1, EDPRS 2, and various high-profile government programs. Through this planning framework, the environment has been mainstreamed. For example, the Budget Call Circular released each year by the Ministry of Finance and Economic

<sup>73</sup><https://www.cia.gov/library/publications/the-world-factbook/geos/rw.pdf>.

Planning requires each sector to apportion part of its budget to financing environment and climate change related activities.

There has been a strong political will to combat climate change and ensure environmental sustainability coupled with a great sense of ownership of environmental programs across government. This has been reflected in the high levels of effectiveness of decentralized environmental protection programming and implementation. Each of the 30 districts prepares their own environment strategy and plans reflecting national and international targets. Implementation of these strategies and plans attract increased participation by grass-roots communities and groups through *Ubudehe* and *Umuganda* programs and accountability is ensured through performance contracts. Another example of the strong political will of Rwanda to ensure environmental sustainability is the ban on plastic bags, which Rwanda introduced in 2008. The strong official resoluteness coupled with community participation in environmental management has put Rwanda on a steady path to sustainable development.

#### **Key implementation bottlenecks**

There are two major challenges to the implementation of the MDG targets related to the environment: (a) pressure from increasing population and (b) an inadequate Monitoring and Evaluation system.

Rwanda's population has increased at an average rate of 2,6% in the last ten years. Already, the country is the most densely populated in Africa. This increases pressure on resources such as forests, land, water and ecosystems resulting in increased deforestation, loss of biodiversity, land degradation through erosion and loss of soil fertility. Increased population also very much relates to accelerating urbanization which causes greater amounts of waste and carbon emission and thus increased levels of pollution.

Another challenge is the inadequacy of the existing M&E system that does not adequately track some of the relevant environment-related information like weather. It is also true that environment indicators, including some MDG indicators like fish stocks, proportion of species threatened with extinction and urban dwelling are not sufficiently captured. With this weak routine monitoring effective evaluations of what is happening is hampered.

#### **New Challenges**

Going forward, Rwanda will have to (a) encourage greater investment in environment-related projects and (b) establish robust Monitoring and Evaluation systems.

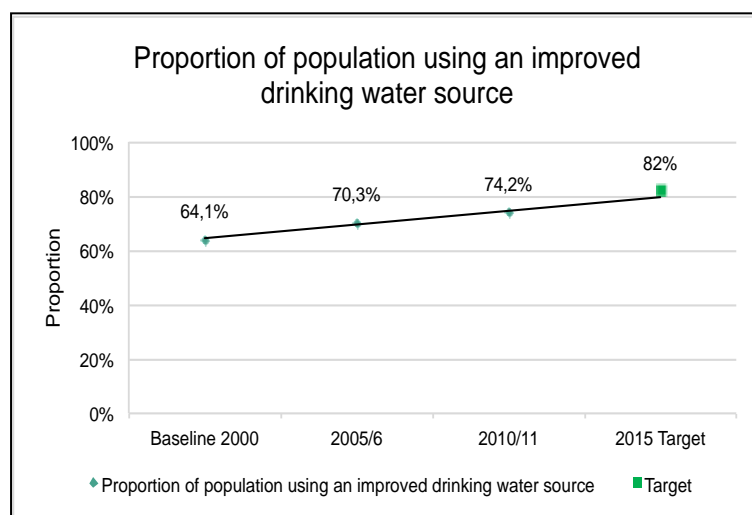
Rwanda is pursuing a “green economy approach” to economic transformation<sup>74</sup>. This will require doing more in terms of investments particularly in research and innovation, skill development, and financing for big environment projects. The private sector has to be engaged to participate in providing funds to environment related project. Public Private Partnerships (PPP) is one framework through which intervention/projects aimed at sustainably extracting natural resources such as energy, gas and water as well as investing in technologies to improve livelihoods of present and future generations can be accessed.

Rwanda will have to strengthen the existing monitoring and evaluation system to improve efficiency and effectiveness in producing all relevant and up-to-date environment and climate change data. This needs to be complemented with periodic evaluations that use monitoring data to better inform policies, strategies and plans. This should go hand-in-hand with strengthening capacity in special areas of importance to climate change mitigation and environment management, notably meteorology, hydrology, sanitation and energy. The capacity building efforts ought to be holistic in a sense that it includes capacity creation, utilization and retention.

#### 4.7.2 Status and Trends: Target 7C (Water and Sanitation)

As shown in Figure 47, there has been a steady increase in access to clean drinking water sources since 2000. If the current level of effort is maintained, it is very likely the 82% target set for 2015 will be achieved.

**Figure 47: Proportion of population using an improved drinking water source**



Source: EICV 2 and 3

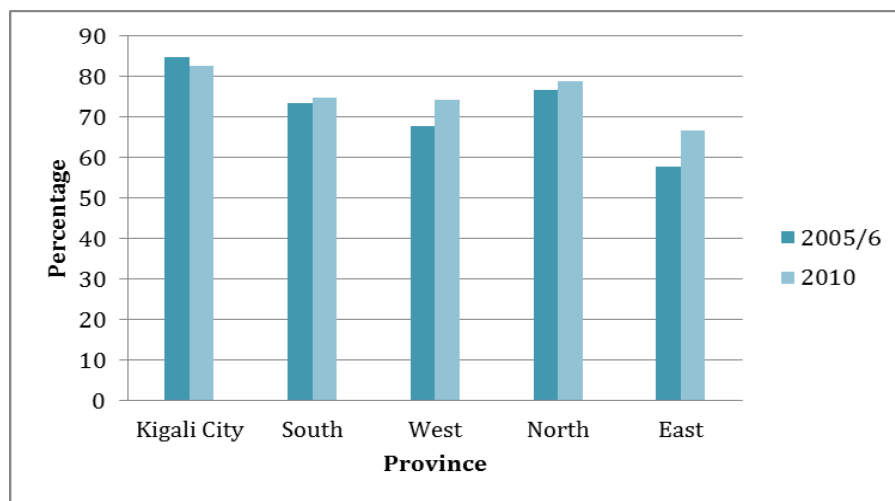
There are however sharp discrepancies in access between regions and between rural and urban areas. Figure 48 shows Kigali City, which is predominantly urban with higher safe drinking water access levels than the other four provinces, which are predominantly rural. Further evidence of differences in rural/urban is seen at the

<sup>74</sup>EDPRS2 p.33

District level where the urban districts of Gasabo, Nyarugenge, Huye, Rubavu and Gicumbi as shown in Figure 49 present better access figures than rural districts such as Nyagatare, Rutsiro, Ruhango.

Much as there is better access in urban areas, more gains have actually been made in the rural areas; provincial comparisons show Eastern Province, which is predominantly rural as having made the most gains in access between 2005 and 2011, followed by Western and Northern Provinces which also are largely rural. This is a clear sign of the success of the rural targeting that has characterized the implementation of EDPRS1.

**Figure 48: Access to Safe Drinking Water by Province**



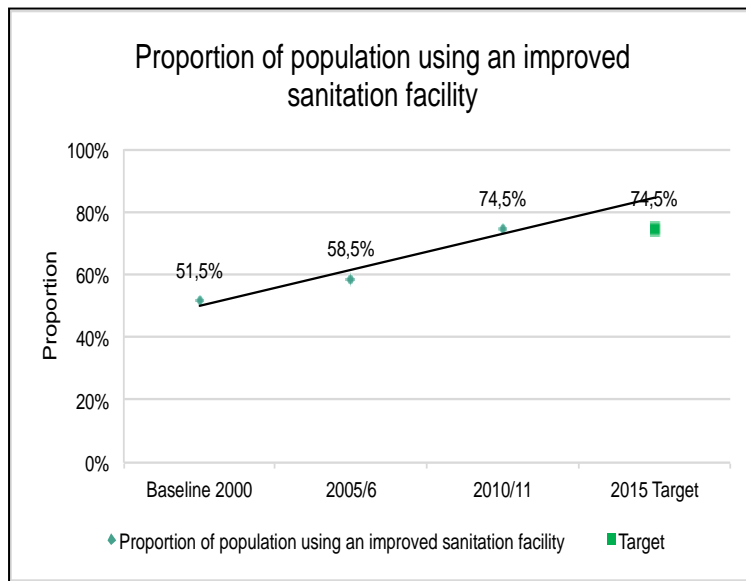
Source: DevInfoRwanda

**Figure 49: Access to Safe Drinking Water by District**



Source: DevInfoRwanda

**Figure 50: Proportion of population using an improved sanitation facility**

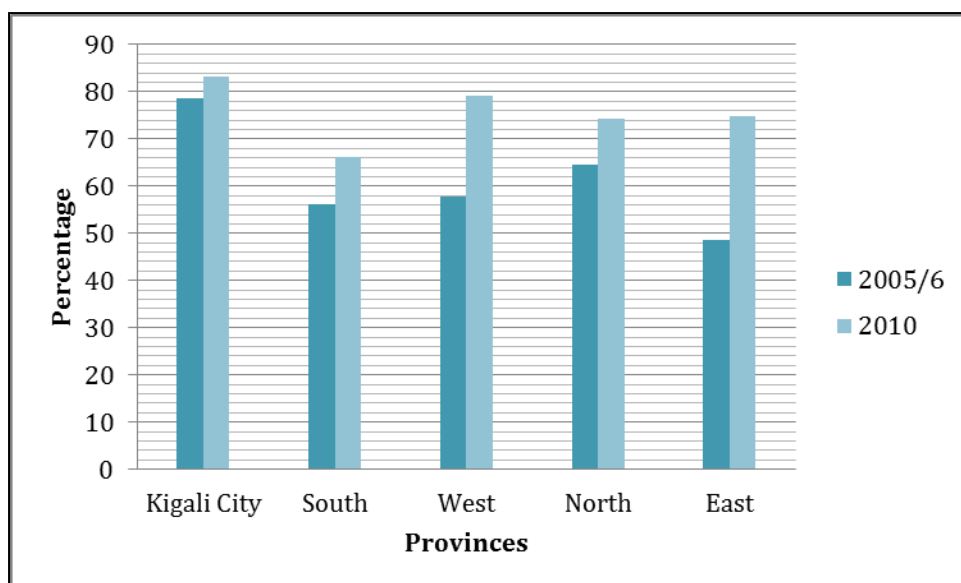


Source: DevInfoRwanda

When it comes to sanitation, there has been a significant improvement nationwide as shown in Figure 50. Urban areas generally showed better levels than the rural areas in 2010/11, but the rural areas have been catching up with the urban ones, which are shown in Figure 51. Between 2005

and 2010 greater gains were made in regions that are predominantly rural compared to Kigali City that is predominantly urban. Looking at provincial data for 2005 and 2010, the access levels gap between provinces has narrowed down due to significant gains made by Eastern, Western, Northern and Southern Provinces. The conventional notion, therefore, that urban areas always are better than the rural ones when it comes to sanitation does not seem to hold in Rwanda. What all this points to, is that the rural/urban traditional pattern has narrowed down due to pro-poor policies deployed by the government throughout the EDPRS1 period.

**Figure 51: Access to Improved Sanitation Facilities by Province**



Source: DevInfoRwanda

**Key factors contributing to sustained progress**

Major factors that have contributed to Rwanda's impressive performance in water and sanitation are the sizable public investment in the sector and the localization of the water and sanitation services. Most water and sanitation infrastructure has been managed and distributed by Districts. Through the *imihigo* system, all districts, both rural and urban, have since 2006 been planning and monitoring their own performance in regard to management and distribution of water as well as provision of sanitation facilities. These efforts, together with a strong community uptake of the efficient water resources management, hygiene and sanitation messages have increased penetration of safe drinking water and sanitation services to mostly rural areas.

**New Challenges**

The main challenge facing the Government will be to ensure universal access to water and sanitation by bridging the still outstanding differences in access between the rural and urban areas. It requires an active complementary engagement by the private sector in the distribution and management of water and sanitation services.

## 4.8 MDG 8: Global Partnership for Development

MDG8 has a greater number of targets than any of the others: (a) develop further an open, rule-based, predictable, non-discriminatory trading and financial system, (b) address the special needs of the least developed countries, (c) address the special needs of landlocked developing countries and small island developing States, (d) deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term, (e) in cooperation with pharmaceutical companies, provide access to affordable essential drugs in developing countries, (f) in cooperation with the private sector, make available the benefits of new technologies, especially ICT.

MDG 8 is quite different from the other seven in that the burden of proof lies less with individual low-income countries than with their development partners in the North. As Ravi Kanbur has put it: this Goal is more a means to achieve the other seven goals than an end in itself<sup>75</sup>. Being as much political as distinctly developmental, the Global Partnership targets do not have the same precision and stand in sharp contrast with the strict, time-bound targets in the other MDGs. Tracking of these targets in Rwanda, therefore, has been confined to targets 8D and 8F.

Three points stand out. The first is that development in Rwanda has benefitted tremendously from a mutually respectful relationship with its DPs. Although the Government of Rwanda is working hard to reduce aid dependence – and domestic funding now amounts to 60% of the national budget – donor funding has at times been as much as half of the national budget. The second is that the Government has laid the institutional foundation for making access to affordable essential drugs possible. The third is that when it comes to use of ICT, Rwanda is making progress but use of computer and internet is still confined to a minority, typically urban-based younger persons. The future will depend on how fast and effectively the flagship program – One Laptop per Child – can be implemented.

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<sup>75</sup>Kanbur, Ravi 2004. "Growth, inequality and poverty - some hard questions", January; [www.people.cornell.edu/pages/sk145](http://www.people.cornell.edu/pages/sk145)

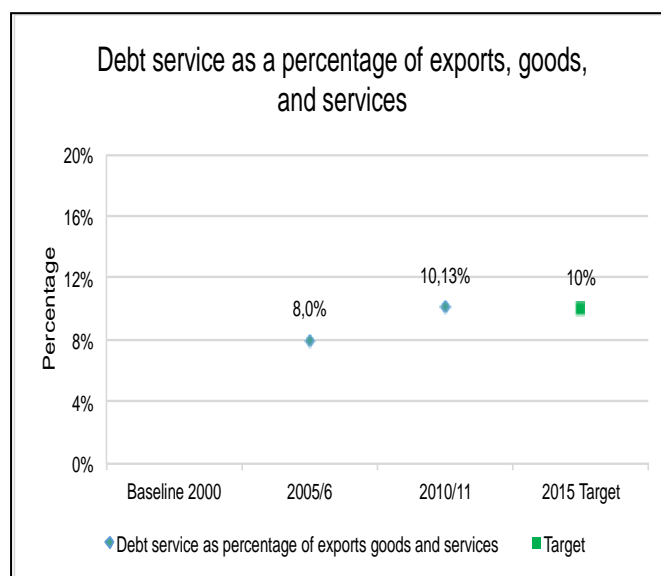
**Table 18: Progress in indicators, MDG 8<sup>76</sup>**

	Baseline 2000	2005/6	2010/11	2015 Target	Target Status
<b>MDG 8: Develop a Global Partnership for Development</b>					
<b>Target 8.D: Deal comprehensively with the debt problems of developing countries through national and international measures in order to make debt sustainable in the long term</b>					
8.12: Debt service as percentage of exports goods and services	No Baseline	8%	10,13%	10%	
<b>Target 8.F: In cooperation with the private sector. Make available the benefits of new technologies. especially information and communications</b>					
8.14 Telephones - percentage of households with either a land line or mobile phone	No Baseline		65% (2013)	No target	
8.15 Internet users	No Baseline		20% (2013)	No target	

#### 4.8.1 Status and Trends: Target 8D (Debt problems)

The MDG target for debt service as a percentage of exports goods and services is 10%. As shown in Figure 52, Rwanda slightly exceeded that level in 2010/11 by registering a debt service ratio of 10,13. The target is clearly attainable by 2015<sup>77</sup> if measures are put in place to reduce or maintain the 2011 level.

**Figure 52: Debt Service as a Percentage of Exported Goods and Services**



Source: EICV 2 and 3, NISR 2012 Statistical Yearbook

Rwanda has been a beneficiary of the HIPC Initiative that was started in 1996 by the IMF and World Bank with the aim of ensuring that no poor country faces a debt burden it cannot manage. It qualified for debt relief in 2005/06 and has since also benefitted from the complementary Multilateral Debt Relief Initiative (MDRI) that allows for 100% relief on eligible debts by three

<sup>76</sup>Source: EICV 2 & 3, NISR 2012 Statistical Yearbook

<sup>77</sup>National Institute of Statistics Rwanda 2013a. *Statistical Year Book 2012*. Kigali: NISR.



multilateral institutions – the IMF, the World Bank, and the African Development Bank (AfDB) – for countries completing the HIPC Initiative process. Rwanda is one of several African countries that has reached the completion point for these initiatives, i.e. established a track record of good performance under programs supported by loans from the IMF and the World Bank, implemented satisfactorily key reforms agreed at the decision point, and adopted and implemented its PRSP for at least one year.

Because Rwanda has been a trusted recipient of Official Development Assistance, its share of the Gross National Income (GNI) has been comparatively high. It was 17,9% of Gross National Income in 2009, rose to 18,5% in 2010 but was down to 12,5% in 2012. This compares in 2012 with other members of the East African Community as follows: Burundi 21,2, Kenya 6,5, Tanzania 10,1 and Uganda 8,5%<sup>78</sup>.

Given that donors have designated their assistance in different ways, e.g. some social sector support falls under the multi-sector label, the MDGs, in combination with the HIPC and MDRI initiatives, have led to an increase in support of education and health across the African continent. In Rwanda, 32,7% or nearly one third of the 2012/13 budget was allocated to the social sector with Infrastructure coming second with 23%.

In recent years Rwanda has experienced fast economic growth and socio-economic progress, being recognized as the tenth fastest growing economy in the world during the last decade from 2000. This performance notwithstanding, Rwanda has continued to be extensively dependent on foreign aid. For the first time, the 2013/14 Budget projects that domestic revenue will surpass 60% of total income, indicating that the Government also realizes that this high level of aid dependence is not sustainable in the light of donor signals that their ODA commitments may be cut<sup>79</sup>. Because of this development it is no coincidence that the Government chose the theme “Striving for self-reliance and dignity” for its 2013/14 national budget.

### **Key factors determining performance**

The development partnership has worked well for Rwanda because its Government has demonstrated not only willingness but also capacity to deliver results. At the same time, the Government has realized that it cannot necessarily rely on the donors to deliver on their commitments. Hence, despite the donor commitment to the Paris Declaration principles of national ownership and predictable disbursements of funds, such predictability has been unreliable. One independent study shows that most donors failed to reach all their performance targets 2009/10 and 2010/11, only two of them – percentage of technical cooperation provided through coordinated

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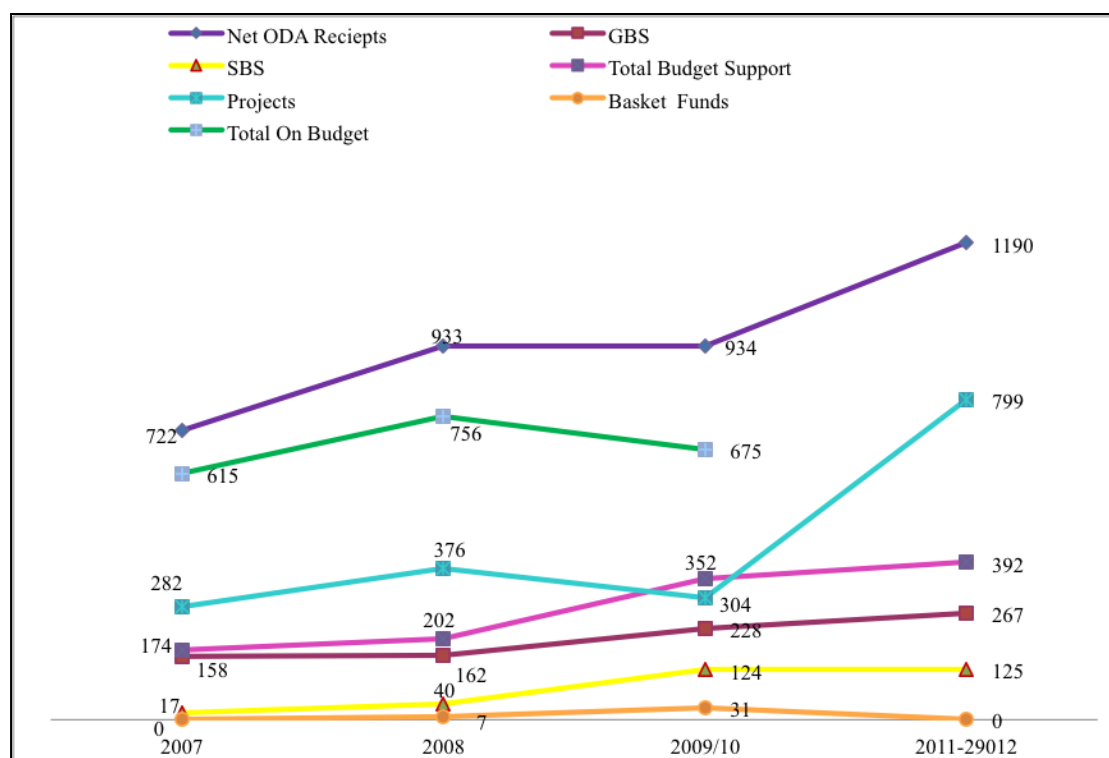
<sup>78</sup><http://data.worldbank.org/indicator/DT.ODA.ODAT.GN.ZS>

<sup>79</sup><http://gov.rw/Domestic-revenue>.

programmes and percentage of total joint missions – being met in aggregate<sup>80</sup>. This issue has become especially salient when there have been political disagreements between individual bilateral donors and the Government.

This renewed emphasis on self-reliance and dignity is at least in part a reaction to these disagreements with several, but by no means all of the DPs. This has led to a unique situation in Rwanda where the Government now no longer sees Direct Budget Support (DBS) as the preferred modality. Although this modality has never been dominant, as shown in Figure 53, it was for many years embraced by both the Government and its DPs as most progressive because it provides funds that go straight into the national budget. The modality, however, also leads to more high-profile disruptions if donors for political or technical reasons decide to suspend their disbursements. Because this had happened in Rwanda, the Government is now leaning more toward sector-wide support (SWAps) that are seen as less prone to such disruptions.

**Figure 53: Donor support by modality compared to total ODA 2007–2009/10 in million US\$.**



Source: Republic of Rwanda, 2011, Republic of Rwanda 2013d.

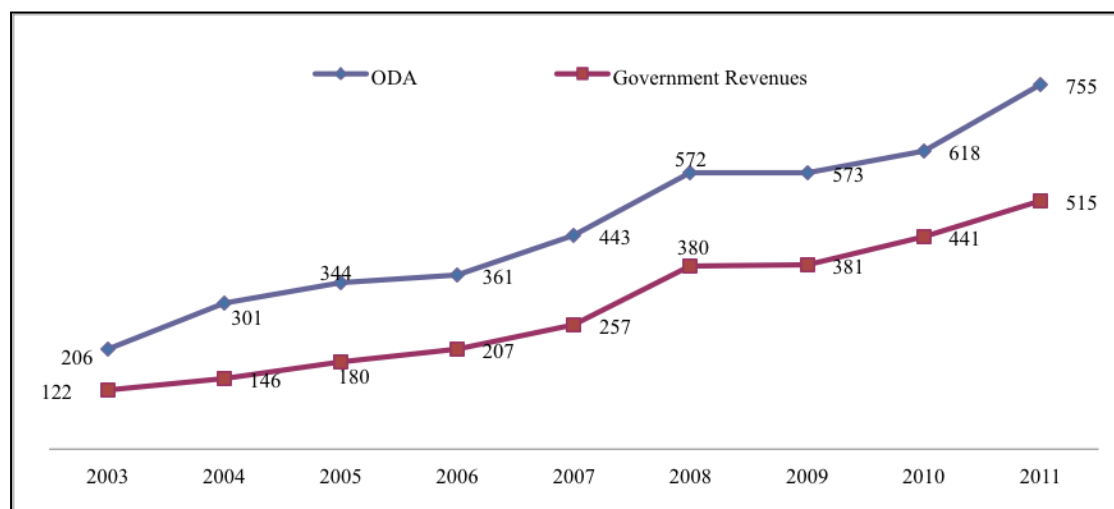
Government confidence on this issue comes from recognition of its own track record in implementing the Paris Declaration. It has taken several necessary measures to pave the way for a mutually accountable relationship with the DPs, notably reforming

<sup>80</sup> Abbott, Pamela and John Rwirahira 2012. Aid Effectiveness in Rwanda: Who Benefits? Kigali: ActionAid

its public finance system so that it complies with international good practice, establishing a Single Project Implementation Unit in each ministry and a single project account in the Ministry of Finance as well as establishing its own Development Assistance Database (DAD). Its readiness to implement these reforms was rewarded in the progress review made prior to the 2011 Busan Meeting where Rwanda was identified as one of two top performers in reaching the Paris Declaration targets<sup>81</sup>.

Rwanda’s ability to raise domestic revenue continues to be relatively low – some 13% of GNI – which is lower than the ODA ratio. It has managed to diversify its sources of aid but it remains alarmingly high given the anticipated decline in providing aid especially among OECD countries. Figure 54 shows that the gap between ODA and domestic revenue remained considerable in 2011.

**Figure 54: ODA and Domestic Revenues 2003–2011 in RWF Billions**



Source: Rwanda Macroeconomic Variables Public Data Set 06/08/12, Ministry of Finance and Economic Planning 2013. <http://www.minecofin.gov.rw/node/523>.

South–South cooperation has been expanded in Rwanda, but continues to be given primarily in the form of project support, which means it is not automatically channelled through the government or being reported to the DAD. The Government estimates that the main South–South partners disbursed 21,8 million US\$ in 2011/12. Although this assistance provides a small share of total ODA, it constitutes a high proportion of preferential loans<sup>82</sup>.

The Government of Rwanda is aware of many of its own shortcomings when it comes to implementing national and MDG policy goals. The self-assessment of the EDPRS1

<sup>81</sup>OECD 2011. *Aid Effectiveness 2005-2010: Progress in Implementing the Paris Declaration*. Paris: OECD.

<sup>82</sup>Republic of Rwanda 2013d. *Official Development Assistance Report FY 2011-2012: Aid for Development*. Kigali: Ministry of Finance and Economic Planning.

2008-2011 aimed at providing information on achievements, constraints and lessons learnt identified several issues that it must address as it moves forward with the EDPRS2<sup>83</sup>. Since the MDGs fall within the EDPRS framework, these lessons indicate the bottlenecks and challenges that exist on the government side. The challenges may be summarized as (1) inadequate coordination, (2) weak Monitoring and Evaluation systems, and (3) need to further mainstream regional integration, disaster management and climate change in national programs.

### **New Challenges**

A special challenge but also opportunity lies in working closer with the private sector and civil society. Rwanda has made great headway by relying on home-grown initiatives but as the country moves forward in an increasingly complex regional and global environment, the role of business enterprises and individual entrepreneurs will take on growing importance, not the least in creating jobs for the large number of unemployed youth or the many operating in the informal sector. Much of this can be tackled by local operators but it will increasingly rely on developing partnerships with other businesses, be they located in the East Africa region or beyond.

#### **4.8.2 Status and Trends: Target 8F (Access to ICT)**

Like with the previous target, there is no consistent data for all the indicators listed under this Target in Table 18. Since the number of fixed telephone lines per 100 inhabitants has become an increasingly invalid indicator it has been merged here with cell phone subscriptions into one category indicating phone subscriptions per 100 persons. The figures in Table 18 are likely to primarily indicate growth in use of mobile cellular phones.

There has been a considerable growth in the number of cell phone users – up from 23% in 2005/06 to 65% in 2013<sup>84</sup>. Thus, there is a clear upward trend. Yet, there are significant differences between rich and poor, urban and rural households. Urban households, especially in Kigali are much more likely to have a mobile phone than those in rural areas – 80% in Kigali and 72% in urban areas compared with 41% in rural areas. 74% of households in the top consumption quintile have a mobile phone compared with 18% in the lowest.

In 2005/06 only 0,6% of the population had access to computers. This figure had shot up to 7,7% by 2010/11<sup>85</sup>. Access is still uneven with 11% of households in Kigali having a computer (9% in all urban areas) compared with only 0,5% in rural areas. ICT penetration, ICT awareness and literacy rate at community level remains at very low level. Generally, statistics show that citizens living in rural areas have a limited

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<sup>83</sup>Republic of Rwanda 2012b.*EDPRS: Lessons Learnt 2008-2011*. Kigali: Ministry of Finance and Economic Planning.

<sup>84</sup>National Institute of Statistics of Rwanda 2012. *EICV3 Thematic Report: Utilities and Sanitation, Water and Sanitation, Energy, Housing, Transport and ICT.*; also Republic of Rwanda 2012. *Rwanda ICT Sector Profile 2012*.

<sup>85</sup>EICV3.

ownership of ICT devices, be it computers, smartphones or TVs. This partially affects broadband uptake in the country. In addition, citizens (especially rural citizens) have a very limited awareness of how ICT can improve their productivity and socio-economic welfare.<sup>86</sup>

Rwanda's ambition is to move from being an agrarian country to a middle-income knowledge economy by 2020 as stated in its Vision 2020. Notwithstanding the strong political commitment, which includes providing computers to all schools and extension of a functional ICT infrastructure to all health centers, Rwanda has a long way to go<sup>87</sup>.

It is clear that with regard to access to computers Rwanda is still behind many other countries in the world, including Africa. At the same time, it is important to take note of the rapid technological developments, especially with smartphones that are quickly becoming very popular among youth. It is likely that it is through these devices rather than the conventional computer (which was a valid indicator in 2000 but hardly is any longer) that is going to make a difference when it comes to moving toward middle-income status. This does not mean that the original indicators from 2000 are totally invalid. For instance, there is a case for building an ICT culture and certainly at the technical level extending broadband facilities.

There is also an issue about bridging the gap between urban and rural areas and between rich and poor. Those living in Kigali are most likely to have heard of the internet (79%) with 30% using the service. Only 17% in the rural areas have heard of the service with 4,3% ever making use of the service<sup>88</sup>. Knowledge and use continues to be heavily concentrated amongst the better off, 54% of those in the top quintile have heard of the service and 26% use it and 23% have heard of the service and 4% use it among those in the second top quintile. The figures for the bottom quintile are, not surprisingly, even lower with just 8% having heard of the service and 4,4% ever having used it. The main reason for not using the service in rural areas is lack of knowledge (85%) whereas in Kigali, the main reason for not using internet service is that they feel they do not need to make use of it (67%)<sup>89</sup>.

These challenges notwithstanding, there have been significant investments in ICT infrastructure, and the country's progress has been acknowledged, e.g. in the ICT Development Index published by the International Telecommunications Union (ITU). Progress continues as evident, for example, in the expansion of the National Broadband Backbone and the installation of very small aperture terminals (VSAT) in the districts to facilitate the use of telephony as well as digital transmissions of public

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<sup>86</sup>Ministry of Youth and ICT 2012, p 11.

<sup>87</sup>Ibid.

<sup>88</sup>EICV3.

<sup>89</sup>Ibid.

and private information<sup>90</sup>. Second, internet connection times for uploading and downloading documents are improving and generally faster than in many other African countries. The main challenges are twofold: that there are still not enough technicians to assist in expanding networks and advising users and there is still not enough awareness amongst potential customers, especially in the private sector, of the benefits offered by broadband technologies<sup>91</sup>.

An especially important contribution to overcome computer illiteracy would be to expand the country's ambitious "One Laptop per Child" Program, an initiative outlined in Vision 2020 that aims to enable every child to have access to world-class education, to the world's body of knowledge and to each other by providing them with inexpensive computers. This program is a crucial input into making Rwanda approach becoming a knowledge economy in 2020.

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<sup>90</sup> Nsengiyumva, A. and E. Habumuremyi 2009. *A Review of Telecommunications Policy Development and Challenges in Rwanda*. Association for Progressive Communications.

<sup>91</sup> Ibid.

## 5. The unfinished business of MDGs and emerging priorities

Despite its remarkable progress toward the MDGs, Chapter 4 has indicated that there is still some unfinished business. Rwanda has already reached some MDGs, is on target to reach others, may come close to doing so with regard to yet others and is still a considerable distance away with regard to a few. The latter are not many, yet crucial for the country's future progress. Getting women in wage employment is an important part of achieving not only greater gender equality but also reduced levels of poverty. Getting men to take HIV/AIDS seriously and regularly use condoms is another issue that calls for more concerted efforts. The same goes for ensuring wider use of antiretroviral drugs. None of these issues are easy to tackle for either cultural or economic reasons, and it is no coincidence that these issues stand out on the unfinished MDG agenda in Rwanda. The structural factors inherent in a peasant economy like that of Rwanda's and the cultural attitudes it sustains take time to tackle effectively. The challenge when it comes to reducing poverty is also confirmed by the continuing disparities, albeit not as big as in many other countries, that exists between urban and rural parts of the country. Even within the latter, there are gaps with the northern and eastern districts generally being better off than those in the western and southern parts of the country.

At the same time, new priorities are emerging and competing for resources. In the light of its experience in implementing Vision 2020 under the auspices of EDPRS1 (2008-2012), the Government of Rwanda decided to revise the targets contained in its Policy Vision to better reflect progress made and obstacles encountered. The revised targets are not only raising the ambitions but also reflecting the new thinking at global level that has been generated by the preparations of the United Nations' Post-2015 Global Development Agenda with its emphasis on economic transformation, inclusive pro-poor growth, increased private sector participation, sustainable use of resources, and improved governance<sup>92</sup>.

As part of Rwanda's participation in the Post-2015 process, UNDP, together with stakeholders from government, private sector and civil society, organized a nationwide consultation to obtain the views of people<sup>93</sup>. It provided a wide range of opinions but a considerable part were voices from the youth about lacking employment, and poor women finding it hard to make a living.

The revised targets for its Policy Vision indicate that the Government is well aware of these outstanding issues as emerging priorities. Job creation, gender equality and greening the economy are among the top priorities in the revised Vision 2020. The

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<sup>92</sup>United Nations 2013. *A New Global Partnership: Eradicate Poverty and Transform Economies through Sustainable Development: The Report of the High Level Panel of Eminent Persons on the Post-2015 Development Agenda*. New York: United Nations.

<sup>93</sup> UNDP 2013. *Rwanda Post-2015 National Consultation*. Kigali: UNDP Country Office.

new key targets are shown in Table 19 and discussed in greater detail in the rest of this chapter.

**Table 19: Current Key Vision 2020 Targets.**

Objectives	Key Vision 2020 Targets
<b>Rapid Economic Growth to Become Middle Income Country</b>	<ul style="list-style-type: none"> <li>➤ GDP per capita of US\$1240</li> <li>➤ Average GDP growth of 11,5%</li> <li>➤ Poverty reduced to 20%</li> <li>➤ Extreme poverty eliminated</li> </ul>
<b>More Off-Farm Jobs, More Urbanization</b>	<ul style="list-style-type: none"> <li>➤ 1,8 million new off-farm jobs</li> <li>➤ 35% of population urban</li> </ul>
<b>Reduced External Dependency</b>	<ul style="list-style-type: none"> <li>➤ Export growth of 28% per annum</li> </ul>
<b>Private Sector as Engine of Growth</b>	<ul style="list-style-type: none"> <li>➤ Private sector takes dominant share of investment</li> </ul>

Source: Republic of Rwanda 2013a, EDPRS2, p. 2.

## 5.1 Combating poverty

The unfinished business with regard to poverty reduction in Rwanda relates first and foremost to continuing discrepancies between urban and rural areas and between men and women. Although poverty declined more in rural than in urban areas between 2006 and 2011, poverty in rural areas, according to the most recent household survey, still stands at 48,7%, compared to 22,1% in urban areas<sup>94</sup>. Although all provinces experienced reductions in poverty during EDPRS1, there was variation in the level of poverty reduction between different districts and in all provinces.

The depth of poverty indicators, i.e. the proportion by which poor households fall below the poverty line, show that despite improvements, many households in rural areas continue to be below the poverty line while others remain vulnerable to shocks particularly in the agriculture sector. For example, in the country's poorest district, Nyamagabe, almost three quarters of the population (73%) live below the poverty line. The country's poverty profile as of 2012 also shows that women tend to be more adversely affected by poverty than their male counterparts. Although the difference is not dramatic as many as 47% of female-headed households are poor compared to 44,9% of all households<sup>95</sup>.

## 5.2 Reducing Hunger

Prevalence of hunger is related to levels of extreme poverty. Rwanda's strategy to reduce hunger involves an extension of the Vision 2020 *Umurenge* Program as well

<sup>94</sup>EITG3 see <http://www.statistics.gov.rw/survey/integrated-household-living-conditions-survey-eicv>

<sup>95</sup>EDPRS2, p.9.



as investments in education and job creation. The target for the end of EDPRS2 (2018) is to have less than 10% of Rwandan households living in extreme poverty, down from the figure of 24% for 2015. Those who experience hunger tend to be in larger households with livelihoods predominantly based on waged farm work. Children living in these households are at higher risks of malnutrition (stunting).

Poverty and education levels, especially of the mother, are important factors for chronic malnutrition, but stunting is a multi-faceted problem and for some districts the high levels of stunting in Rwanda can still not be fully explained. An underlying factor is the feeding practice where 78% of children between 12-23 months are fed on low-nutrient diets. The cycle of malnutrition often continues through generations. Furthermore, the physical and mental damage associated with poor foetal growth and stunting are irreversible after the age of two. As the EDPRS 2 emphasizes, intervention to minimize the impact of malnutrition needs to start from conception and continue until the child is two years old<sup>96</sup>. Hence, the policy emphasis is on the early 1000 days of a child's life.

Empowering women in the household and in the community is particularly important. This depends not only on protective measures but also on the potential for employment and income generation in agriculture and non-agriculture activities in rural areas.

The target for the flagship Vision 2020 *Umurenge* Program is to enable the poor to stabilize their assets and incomes, and accumulate savings. The coverage and targeting of the extreme poor through core social protection interventions such as VUP Direct Support and VUP Public Works will be increased. Government will seek to scale up and improve the targeting of the core social protection programs to double, from 5% to 10% of the population, the number of those in extreme poverty receiving direct support and public works<sup>97</sup>.

### **5.3 Creating Employment**

Of the total working population in Rwanda, 84% are in employment – formal or informal – while the remainder is not working<sup>98</sup>. 3,5 million people – 60% of the working population – list farming as their main occupation. They are mostly poor, live in rural areas, have low education, and are underemployed, working an average of around 26 hours per week.

Informal workers make up 17% of the population or roughly 1 million people. They carry out a variety of activities, the largest portion of which is retail or petty trade. Other prominent service industries include maids and tailors, construction workers, and drivers. Most informal sector workers have not completed primary school. Their

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<sup>96</sup>EDPRS 2, p 79.

<sup>97</sup>They exit from the VUP's direct support or public works programs once they move out of Ubudehe category 2 (a proxy for movement out of extreme poverty).

<sup>98</sup>The profiles below are all taken from the EDPRS 2, p. 56

income is generally higher than farm workers but not as high as formal sector workers.

Workers in the formal private sector are only 4% of the population or about 250,000 people. Just under half of them live in cities. They are most likely to be high income and have secondary and tertiary education. They work in similar industries and services as those in the informal sector, but are typically employed by slightly larger formal sector firms. Typical occupations include drivers, mining workers, retail, and construction. This category includes some professional white-collar workers but these are small in number. For example, there are around 4,000 accountants working in Rwanda.

Workers in the public sector make up 3% of the population. This group is mostly made up of teachers, nurses, the military, and government officials. These workers also tend to have relatively high income and levels of education.

The overarching goal in this thematic area is to move Rwanda from an agriculture-based economy to an industry and services-based economy. Vision 2020 aims for half of the Rwandese workforce to be working off-farm by 2020, up from just 28% today. The majority of new off-farm jobs are likely to be in micro, small, and medium sized enterprises (MSMEs) in the informal sector. Over 90% of firms in Rwanda are informal, and have three or fewer employees<sup>99</sup>. The sectors with the largest non-farm job growth in the past five years have been retail (30,000 net new jobs per year), construction (16,000), government (14,000), and transport (7,000). This reflects rising incomes and increased demand for goods and services, increased urbanization fuelling housing demand, and a large expansion in government provided education and healthcare. Despite being non-farm, most of these jobs (82%) have been created in rural areas.<sup>100</sup>

#### **5.4 Improving Education**

Education, skills and technology are the key drivers of productivity. There is strong evidence of a causal relationship between skills and growth in incomes. This evidence reveals that it is not just the years of education that contribute to economic growth, but the quality of the education that is received and the skills that people acquire. The resources allocated to improving the quality of education throughout the entire school system are of vital importance. Measuring learning outcomes are as important as school enrolment.

As Rwanda moves towards universal secondary education and 12 full years of basic education, it is crucial that those graduating from secondary school are equipped with

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<sup>99</sup>NISR 2012.

<sup>100</sup>Republic of Rwanda 2013b. *EDPRS: Lessons Learned, 2008-2011*. Kigali: Ministry of Finance and Economic Planning.

the right skills to ensure that they can obtain productive work after graduation. This will require a careful review of the school curriculum to ensure that the key transferable soft skills that employers need are being provided to all secondary graduates, academic skills as well as communication and team-work skills.

While basic literacy and numeracy is important, skills are a key driver of productivity and wage increases. What is more, skills development is essential for staffing the business requirements of emerging sectors of the economy. The Technical and Vocational Training (TVT) program under the Workforce Development Agency has a critical role to play in building critical skill for economic transformation in sectors such as transport, energy, mining, hospitality, IT, and trade logistics. Other sectors will require the development of basic skills for massive job creation such as skills related to trade, construction, transport, agro-processing and light manufacturing. Improved literacy and numeracy can contribute to better access to skills and information for farmers. A more informed citizenship will contribute to strengthening means of holding public officials accountable.

The attitude of young people is also a driver of their productivity. Although many youth are changing there is still a lack of a culture of entrepreneurship. This sometimes translates into a negative attitude towards learning skills related to those perceived as blue-collar jobs.

### **5.5 Strengthening Gender Equality**

Rwanda has made great strides in promoting gender equality driven by a strong commitment by the Government. Gender equality is enshrined in the constitution and Rwanda was the first country in the world to have more than 50% female members of parliament. Women have continued to make progress by occupying political positions at lower government levels. However, traditional patriarchal attitudes continue to dominate<sup>101</sup>. Rates of domestic violence continue to be high and so does the tolerance level of such violence<sup>102</sup>.

There is a Ministry for Gender and Family Promotion, a gender monitoring office (GMO), a commitment to gender-based budgeting and in recent years there has been a strong emphasis on fighting gender-based violence. Women have the same rights to inherit land as men. Girls are more likely to attend school than boys at primary level and as likely as boys at secondary level thanks to a Girls Education policy and implementation plan. There remains a gender gap in public sector higher education, especially in science and engineering, but women are taking advantage of the opportunities to study in the private higher education institutions. Still, the majority of women, especially poor women in rural areas have yet to benefit. The gap between men and women employed in non-farm work is widening and the Indicator of 50% of

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<sup>101</sup>[http://www.gmo.gov.rw/uploads/media/GENDER\\_BEST\\_PRACTICES.pdf](http://www.gmo.gov.rw/uploads/media/GENDER_BEST_PRACTICES.pdf)

<sup>102</sup>National Institute of Statistics Rwanda 2012c. Statistical Year Book 2011. Kigali: NISR.

those in paid non-agricultural employment being women by 2015 is unlikely to be met.

As part of the priorities to accelerate gender equality key interventions must be planned and implemented specifically on programs for women's economic empowerment and for support of women to start their own enterprises and move into non-farm jobs; programs to train teachers and lecturers so that the curriculum in schools, vocational and technical and higher education is engendered; programs to tackle gender-based violence and negative cultural attitudes to women. In order to ensure sustainability, men should be involved in all the process, making them a responsible part in reaching a gender-equal society in Rwanda. Involving men in training and skill building for gender equality so they understand the benefits to all of the empowerment of women is also important.

## **5.6 Fighting diseases**

Rwanda is on track to achieve the health-related MDGs, which has been part of the success story of EDPRS1. Under EDPRS2, they remain a priority for the country<sup>103</sup>. Access to health has been a major achievement with over 90% of the population now covered by medical health insurance (*Mutuelle*). A major focus of the EDPRS 2 will be on improving the quality of health care services, including the management of hospitals, while continuing to expand geographical and financial accessibility through construction of health centers, support to the most vulnerable or extremely poor through social protection mechanisms, and increased availability of drugs, vaccines and consumables. The growing private sector and non-profit organizations, which combined contribute about 33% of total health facilities, will continue to play an important role.

Accessibility in remote areas has been improved with the development of community health programs. However, 27% of the population still needs more than an hour to reach the closest health facility (<5km). Around 51 out of 416 sectors (12%) are still without a health centre and 15% of health centers still have no electric power.<sup>104</sup>

Geographical accessibility will continue to be improved by investing in the expansion of health infrastructure, including equipping health centers and hospitals, construction of new health centers, and developing the feeder road networks to facilitate transportation and electrification of remaining such centers. Community level access will also be supported with the training of community health workers (CHW), strengthening CHW cooperatives, mobilizing communities for their full participation in healthcare provision through, e.g. dialogue with religious leaders and engagement of civil society organizations in key health-related issues like contraceptive use and personal and environmental hygiene.

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<sup>103</sup>EDPRS2, p 86.

<sup>104</sup>Ibid, p 87.

To improve financial accessibility, some key interventions will be: reducing fragmented implementation of health insurance, continuing to improve allocation and targeting of financial subsidies to the poorest, as well as ensuring that charges reflect ability to pay. Strengthening of health personnel capacity, including training and recruitment of health personnel in hospital management, specialized treatments, financial and procurement management, are important aspects of continued health sector development. In 2011 the doctor to population ratio was estimated at 1 doctor for 17.240 people. The gap to attain the doctor to patient norm is estimated to be 930 additional doctors. To bridge this gap, the program on Continuing Professional Development (CPD) will be strengthened and extended to all health professionals, and the quality of the training institutions will be further improved by reinforcing international partnerships with external training institutions. Performance based financing will be reviewed with a view to further improvements stimulated by other forms of incentives, financial and non-financial<sup>105</sup>.

### **5.7 Greening the Environment**

Rwanda's economy is heavily dependent on its environment and natural resources, and the livelihoods of rural (and increasingly urban) communities depend on access, use and management of such resources. Without sound environmental management, development activities in key sectors such as agriculture, industry, infrastructure, commerce, and energy can lead to significant environmental degradation that can undermine economic growth. Economic impacts are likely to be exacerbated by climate change, which through increased floods, landslides and droughts, is likely to increase damage to infrastructure and property. Terracing, therefore, is a priority. Research has estimated that climate change could result in additional net economic costs (on top of existing climate variability) for Rwanda that are at least equivalent to a loss of almost 1% of GDP each year by 2030.

Achieving sustainable economic growth in Rwanda will require the prudent use of natural resources and ensuring that climate resilience is built into economic planning. Mainstreaming environmental sustainability provides an opportunity for improved and sustained livelihoods of present and future generations of Rwandans. The Government of Rwanda has made significant progress towards mainstreaming environmental sustainability, for example through the Budget Call circular that has included environment and climate change mainstreaming guidelines for sectors, the increasing use of strategic environmental assessment, and successful pilots of rural 'climate proofed' settlement development. However, there is need for improvement, particularly in terms of the capacity to implement and enforce environmental policy, and to factor in complex, cross-cutting environment and climate change issues into strategic planning<sup>106</sup>.

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<sup>105</sup>Ibid, p 86-87.

<sup>106</sup>EDPRS2, p. 91.

The national Green Growth and Climate Resilience Strategy (GGCRS), approved by Cabinet and developed with various sectors, promotes cross sector interventions to mainstream environment and climate change while addressing national priorities. The strategy is supported by a fund for environment and climate change (FONERWA) to facilitate access to sustainable financing and support implementation. The EDPRS 2 considers these strategic tools as entry points for guiding specific interventions within national sector strategic plans and their implementation. Attention is also placed on robust monitoring and evaluation systems, such as the green accounting framework, which will be essential in ensuring more effective policy implementation and to demonstrate the economic benefits of environmental protection.

Priority areas for environment and climate change as cross cutting issues are (i) mainstreaming environmental sustainability into productive and social sectors; (ii) reducing vulnerability to climate change and (iii) preventing and controlling pollution. Key sectors expected to deliver on these include agriculture, energy, environment and natural resources, infrastructure, health, private sector and financial sector.

### **5.8 Promoting Accountable Governance**

The first pillar of Vision 2020 is good governance and a capable state. Social and economic transformation, it argues, is equally about the state as it is about markets. The role of the state and the way it governs and accounts for itself is indispensable in creating the service culture and values for wealth-creation and quality of living. The main objective of the EDPRS 2, therefore, is to advance a prioritized approach to governance that is capable of promoting and strengthening accountable governance in Rwanda. The Government of Rwanda is committed to strengthening public accountability, transparency and efficiency in deploying resources and delivering services.

Over the period of EDPRS 1 and the PRSP, promoting good governance has been central to Rwanda's development strategies. Accountable governance is even more central now because of its ability to facilitate citizens' participation and empowerment whereby local communities are enabled to participate meaningfully in making decisions on issues and projects that most affect them, and thereby help ensure that development is sustainable and poverty is reduced.

Evidence from citizen score cards shows that one of the main weaknesses under EDPRS 1 was that little effort was put into mainstreaming citizen participation for the purpose of empowering citizens to ask questions, especially of their elected, decision making representatives. Service delivery was also identified as an area for improvement in the future with general satisfaction measured at below 70%<sup>107</sup>.

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<sup>107</sup>EDPRS 2, p 70.

EDPRS2 will target selected priority areas to address these challenges in the next five years. The main task is to ensure the accountability of institutions by allowing citizens more free access to information and providing and enabling the right forums for raising questions, thereby strengthening the relationship between citizens and the institutions that affect their lives. To achieve the broad objective and high level outcomes of Accountable Governance, the proposed strategy prioritizes two accountability and decentralization.

Rwanda's revised National Decentralization Policy of 2011 seeks to establish and empower decentralized administration through a combination of devolution, delegation and de-concentration. The overall goal is the deepening and sustaining of grassroots-based democratic governance and the promotion of equitable local development. This will be done by enhancing citizen participation and strengthening the local government system, while maintaining effective functional and mutually accountable linkages between central and local government entities, thereby forming an important element of Accountable Governance.

EDPRS2 has identified the following issues to be tackled in the next five years:(i) building fiscally stronger Local Governments through locally owned Local Economic Development (LED) strategies; (ii) deepening participatory, democratic and accountable local governance systems (iii) building capacity for effective local service delivery and ensuring efficient services delivery through further sectoral decentralization (iii) leveraging regional integration to expand opportunities for youth employment creation, local economic empowerment, cross-border trade and security (iv) consolidating national unity, cohesion and peace through resilient, synergetic local systems; (v) using ICT to deliver services efficiently and effectively, increasing citizen's empowerment through participation, as well as promoting transparency and accountability.

## **5.9 Conclusions**

Looking forward to 2020 and beyond, it is clear that Rwanda faces new challenges. As the EDPRS2 confirms, however, the Government has a plan that addresses these challenges. With the same political will and commitment to get things done that has characterized Rwanda during the MDG period there is reason to assume that these challenges can be largely met. Some will obviously be more challenging than others.

In this concluding summary, it may be worth following the intentions of the international community to adopt 2030 as its next target year. If given another fifteen years, the ambitions spelled out in this chapter are given a fair chance of coming to fruition. Thus, in Table 21 there is a comment linked to each theme indicating whether it is "attainable" or "hard to attain". Based on the trends to date and the qualities of implementing policies that the Government and other stakeholders possess, the near to medium future in Rwanda, despite many challenges, looks quite bright.

**Table 20: Summary of Unfinished Business and Emerging Priorities 2015-2030**

Priority area theme	National/sub-national priorities	Stated objectives, indicators, timeline	Source documents	Comments
Poverty	Reduce gap between urban and rural areas	People employed in off-farm jobs; lower Gini coefficient ratio	EDPRS 2, Vision 2020	Hard to attain
Hunger/Nutrition	Reduce extreme poverty; educating women; social protection	Levels of nutrition; Female school enrollment; percentage in two lowest <i>ubudehe</i> categories	EDPRS 2 Vision 2020 <i>Umurenge</i> Program	Attainable
Employment	Move toward industrial and service-based economy;	Percentage of off-farm jobs created; professionalization of work force	EDPRS 2, NISR Year Books	Hard to attain
Education	Improve quality of education and strengthening skills for jobs	Graduation rates; skills formation; curricular reforms;	EDPRS 2 Vision 2020	Attainable
Gender, Equality, Women's Empowerment	Broadening women's participation in politics and economic life	Women in off-farm jobs, in business, and in politics	Ministry of Gender and Family Life; NISR Year Books	Attainable
Health/ Disease	Improving access to healthcare; reduce inequalities in provision;	Availability of drugs; distance to health center; number of condom users	NISR Year Books, Ministry of Health statistics	Attainable
Environment	Green growth and climate resilience	Terracing: mainstreaming environmental sustainability measures	EDRPS 2; Global Fund	Attainable
Governance	Accountability; decentralization; community participation	Quality of service delivery; level of community participation; functions controlled by local authorities	EDPRS 2; Afro-Barometer: various global governance indices	Attainable



## **Annex 1: Note on Data Sources**

### **Information on Data Sources**

Whenever possible, the data used came from official Rwandan Government sources. The two main sources for this report are survey data from the *The Integrated Household Living Conditions Survey - EICV 1 2000/1, EICV2 2005/6 and the EICV 3 2010/11 and the Rwanda Demographic and Health Survey (RHDS)* from 2000, 2005, 2010. Complementary information has been obtained from the released 2012 Census report. Other statistics used are from administrative ministerial data from the National Institute's *Statistical Yearbooks 2012*. In addition, we consulted the Thematic Reports written as part of the EICV3 2010/11 survey. For two MDG 1 poverty indicators data came from the World Bank data. In the section on the environment in Chapter Four, some of the data also came from non-governmental sources.

### **Integrated Living Conditions Surveys**

#### **EICV1**

Department of Statistics, Ministry of Finance and Economic Planning (2002). *Integrated Household Living Conditions Survey in Rwanda 2000/1*. Kigali: Republic of Rwanda.

#### **EICV2**

National Institute of Statistics of Rwanda. (2006). *Preliminary Poverty Update Report: Integrated Living Conditions Survey 2005-6*. Kigali: Republic of Rwanda.

#### **EICV3**

National Institute of Statistics of Rwanda (2012a) *The Third Integrated Household Living Conditions Survey (EICV3): Main Indicators Report*. Kigali: Republic of Rwanda.

#### **EICV3 Thematic Reports**

National Institute of Statistics of Rwanda (2012c) *EICV3 Thematic Report: Economic Activity*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda (2012d) *EICV3 Thematic Report: Education*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda (2012e) *EICV3 Thematic Report: Environment and Natural Resources*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda (2012f) *EICV3 Thematic Report: Gender*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda (2012g) *EICV3 Thematic Report: Social Protection*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda (2012h) *EICV3 Thematic Report: Utilities and Amenities , Water and Sanitation, Energy, Housing, Transport and ICT*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda (2012i) *EICV3 Thematic Report: Patterns of Consumption*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda (2012j) *EICV3 Thematic Report: Income*. Kigali: Republic of Rwanda.

National Institute of Statistics of Rwanda *The Evolution of Poverty in Rwanda from 2000 to 2011: Results from the Households Surveys (EICV), 2012*, Republic of Rwanda.

### **Rwandan Demographic and Health Surveys**

#### **RDHS 1992**

Barrere, B., Schoemaker, J Barree, M., Habiyakare, T., Kabagwira, A. and Ngendakumuna, M. (1994). *Enquete Demographique et de Sante 1992*. Office National de la Population and Demographic and Health Surveys Macro International Inc.

#### **RDHS 2000**

Office National de la Population et ORC Macro (2001). *Enquete Demographique et de Sante Rwanda 2000*. Kigali et Calverton: Ministere de la Sante, Office National de la Population et ORC Macro.

#### **RDHS 2005**

National Institute of Statistics of Rwanda, Ministry of Finance and Economic Planning and ICF International (2005). *Rwanda Demographic and Health Survey 2010*. Calverton: NISR, MOH and ICF International.

#### **RDHS 2010**

National Institute of Statistics of Rwanda, Ministry of Health and ICF International (2011). *Rwanda Demographic and Health Survey 2010*. Calverton: NISR, MOH and ICF International.

### **Other Data Sources**

#### **Rwanda Population and Housing Census 2012**

National Institute of Statistics of Rwanda and the Ministry of Finance and Economic Planning, Kigali, Rwanda.

#### **Statistical Yearbook 2012**

National Institute of Statistics of Rwanda, Kigali Rwanda.

#### **World Bank**

Development Data Group, The World Bank, 1818 H Street, NW, Washington, DC 20433 USA, 2013

## Annex 2: Methodological Note

Over the last several MDG Progress Reports there has been a difference of opinion in the baseline dates for the MDGs, Targets and Indicators. There are three MDGs being tracked by Rwanda which have an official UN specified baseline of 1990: MDG 1 Poverty, MDG4 Child Health and MDG 5 Maternal Health. The 2003 report used 1990, the 2007 report used 2000. Most government reports on the MDGs use 2000. Clearly there is a case to be made that in Rwanda using 2000 as a baseline is fair and that is what we have done in our report.

Some indicators have no baseline data available and others where we were unable to identify a 2015 target. Where applicable, we use linear trendlines to help determine the likelihood of Rwanda reaching the 2015 MDG Targets. A linear trendline helps us see the degree to which an MDG indicator is either increasing or decreasing at a steady rate. Where we do have a target, we use colors to provide insight into the likelihood that the 2015 Target will be achieved.

The analysis has also been informed by documents that provide information about the intentions of the Government of Rwanda in regard to the MDGs and the post-2015 Global Development Agenda. In addition, the report has been informed by material on the situation in Rwanda that is relevant to the country's development.

Furthermore, the Report is based on interviews carried out with officials in the Government and the UNDP Country Office, other UN agencies, donor representatives, and academics. These interviews were made at two separate country visits, the first in early November, the second in early December 2013. The production of this Report benefitted tremendously from the well-attended Validation Workshop that was held in Kigali on June 26, 2014. Some forty officials representing different government ministries and agencies provided useful comments both at the Workshop in emails written after it.

A final comment on the data refers to their quality and reliability. As Carlos Lopes, the Executive Secretary of the U.N. Economic Commission of Africa, has noted with reference to GDP figures, census data and labor statistics, there is room for improving the quality and reliability of statistics in African countries<sup>108</sup>. The Government of Rwanda acknowledges weaknesses in the collection of statistical information, more specifically in the 30 districts, and their effects on monitoring and evaluation<sup>109</sup>.

These observations notwithstanding, Rwanda has made exceptional progress in tracking a broad range of indicators measuring the country's national development. The Government has also encouraged participatory community-based exercises,

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<sup>108</sup>Interview with Carlos Lopes, *AfricaRenewal*, August 2013, pp 18-20

<sup>109</sup>Republic of Rwanda 2012b. *EDPRS: Lessons Learnt 2008-2011*. Kigali: Ministry of Finance and Economic Planning, p 27.

especially in the field of public health, aimed at making statistical data a tool of local self-evaluation and empowerment<sup>110</sup>. We are convinced, therefore, that the data used in this Report provide as accurate a picture as circumstances permit.

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<sup>110</sup>Ashish Shah 2012. "Participatory statistics, local decision-making, and national policy design: Ubudehe community planning in Rwanda" in John Holland (ed.) *The Power of Participatory Statistics*. Falmer, Sussex: Institute of Development Studies.

### Annex 3: List of persons interviewed

Name	Institution	Role / Position
Dominique Habimana	National Institute of Statistics, Rwanda (NISR)	Director of Statistical Methods, Research and Publication (Member of MDG Steering Com.)
Appoline Mukanyonga	NISR	Principal Research Statistician in charge of Demographic Statistics
Donath Nkundimana	NISR	Senior Computer Scientist in charge of Data Processing & Ag Director of ICT
J. Claude Nyirimanzi	NISR	Principal Statistician/Research, Publications and Documentation
Juvenal Ntambara	NISR	Principal Research Statistician in charge of Quality Assurance of Administrative Data
Richard Mushabe	Ministry of Finance and Economic Planning (MINECOFIN)	Acting Director of Policy Evaluations and Research
Francois Sekamondo	MINECOFIN	Social Sector Policies and Programs Expert
Thomas Mazuru	MINECOFIN	Development Policy Analysis and Research Expert & MDGs Focal point.
Ronald Nkusi	MINECOFIN	Director of External Finance
ZephyMuhirwa	MINECOFIN	External Resource Mobilisation Expert
Justine Gatsinzi	Min. Local Government / Rwanda Local Development Support Fund (RLDSF)	Deputy Director general in charge of Social Protection (Member of MDG Steering Committee)
Amata S. Diabate	United Nations Development Program (UNDP)	Senior Economist / Policy & Strategy Unit
Evard Havugimana	UNDP	Research Associate / Policy & Strategy Unit
Schadrack Dusabe	UNDP	DIM Project Manager / Policy & Strategy Unit
Modeste Mugiraneza	Ministry of Gender / Gender Monitoring Office (GMO)	Gender Analyst
Emma Carine Uwantege	UN-WOMEN	GRB Technical Advisor
Solange Mudahogora	UN-WOMEN	Program Manager Gender Statistics
Janvière Mukantwali	UN-WOMEN	Program Manager Gender Support Machinery
Joakim Molander	Swedish Embassy, Kigali	Governance Advisor
Tom Bundervoet	World Bank	Micro Economist
Michael Hammond	DFID	Head of Mission
Delanyo Dovlo	WHO	Country Representative
Friday Nwaigwe	UNICEF	Deputy Country Representative

## **Annex 4: Terms used to describe Rwanda's homegrown development**

As part of its efforts to reduce poverty and accelerate growth, the Government of Rwanda has drawn on aspects of Rwandan culture and traditional practices to enrich and adapt its development programs to the country's needs and context. The result is a set of culturally owned practices translated into sustainable development programs. The following are associated with the country's progress in achieving the MDGs.

### **UMUGANDA**

The word *Umuganda* literally means 'coming together in common purpose to achieve an outcome'. In traditional Rwandan culture, members of the community would call upon their family, friends and neighbours to help them complete a difficult task. *Umuganda* was a communal act of assistance and a sign of solidarity. In everyday use, the word 'umuganda' refers to a pole used in the construction of a house. The pole typically supports the roof, thereby strengthening the house.

In the period immediately after independence in 1962, *Umuganda* was only organized under special circumstances and was considered as an individual contribution to nation building. During that time, it was often referred to as *umubyizi*, meaning 'a day set aside by friends and family to help each other'. *Umuganda* became an official government program far back in 1974, and was organized on a more regular basis – usually once a week.

*Umuganda* – community work – as it is used today was reintroduced in 1998 as part of efforts to rebuild the country after the 1994 Genocide against the Tutsi. The program is implemented nationwide but there was initially no institutional structure for the program. In 2007, Organic Law Number 53/2007 Governing Community Works was passed and later in 2009, Ministerial Order Number 58/03 (determining the attributions, organization, and functioning of community work supervising committees and their relations with other organs) institutionalized *Umuganda*.

*Umuganda* now takes place on the last Saturday of each month from 8 a.m. and lasts for at least three hours. Supervising committees have been established at the village level and up to the national level. These committees are responsible for organizing what work is undertaken as well as supervising, evaluating and reporting what is done.

Rwandans between 18 and 65 are obliged to participate in *Umuganda*. Those over 65 are welcome to participate if they are willing and able. Expatriates living in Rwanda are also encouraged to take part. Those who participate cannot be compensated for their work – either in cash or in kind.

While the main purpose of *Umuganda* is to undertake community work with an aim of contributing to overall national development, it also serves as a forum for leaders at each level of government (from the village up to the national level) to inform citizens about important news and announcements. Community members are also able to discuss any problems they or the community are facing and to propose solutions together. This time is also used for evaluating what they have achieved and for planning activities for the next monthly *Umuganda* event.

## **GIRINKA**

The word *Girinka* literally translates to ‘may you have a cow’. It is a centuries old cultural practice in Rwanda whereby a cow was given by one person to another, either as a sign of respect and gratitude or as a marriage dowry.

*Girinka* was initiated in 2006 by a cabinet decision to respond to the alarmingly high rate of childhood malnutrition and as a way to improve livelihoods and accelerate poverty reduction through integration of livestock and crop farming.

*Girinka* is construed as a culturally-inspired social safety net program because of the way it introduces a productive asset (a dairy cow) which can provide long-term benefits to the recipient.

Beneficiaries are identified by the community. Those identified are given a pregnant dairy cow. That person benefits from its milk and manure production. Beneficiaries are then obliged to give the first born female calf to another worthy beneficiary in their community. This is known as the ‘pass on’ principle, or ‘*Kuziturirana/Kwitura*’. The *Girinka* Program was originally aimed to reach 257,000 beneficiaries but this target was revised upwards in 2010 to 350,000 beneficiaries to be reached by 2017. The Government of Rwanda was initially the sole funder of the program but development partners have since become involved in it. This has led to an increase in the number of cows being distributed.

By October 2013, more than 180,000 beneficiaries have received cows and the program.

## **IMIHIGO**

*Imihigo* is the plural version of the Kinyarwanda word *Umuhigo*, derived from the root, *Higa*, and the verb *Guhiga*, which means to vow to deliver, and *Guhiganwa*, which means to compete among one another. *Imihigo* is a pre-colonial cultural practice in Rwanda where an individual sets targets or goals to be achieved within a specific period of time. The person must complete these objectives by following guiding principles and be determined to overcome any possible challenges that arise. Leaders and chiefs would publicly commit to achieving certain goals. In the event that they failed, they would face shame and embarrassment from the community.

*Imihigo* was re-initiated by the Rwandan Government in March 2006 starting with the Districts. This was as a result of the concern about the speed and quality of execution of government programs and priorities. The government's decentralization policy required a greater accountability at the local level. Its main objective was to make public agencies and institutions more effective and accountable in their implementation of national programs and to accelerate the socio-economic development agenda as contained in the Vision 2020 and Economic Development and Poverty Reduction Strategy (EDPRS) policies as well as the Millennium Development Goals (MDGs).

Today, *Imihigo* is used across government as performance contracts and to ensure accountability. All levels of government, from the local district level to ministries and embassies, are required to develop *Imihigo* on which they are evaluated against. Members of the public service also sign such contracts with their managers or head of institution.

At the local government level, each District determines its own objectives in accordance with the District Development Plans (DDPs) – with measurable indicators – taking into account national priorities as highlighted in the national as well as international strategy and policy documents such as the MDGs, Vision 2020, EDPRS and Sector Development Plans (SDPs). The *Imihigo*, at both planning and reporting phases, are presented to the public for the purpose of accountability and transparency. The mayors and province governors sign *Imihigo* or a performance contracts with Rwanda's President committing to achieving set targets outlined in these documents.

## **UBUDEHE**

*Ubudehe* refers to the long-standing Rwandan practice and culture of collective action and mutual support to solve problems within a community. It is not known when the concept was first practiced, but it is thought to date back more than a century. The practice was often employed for cultivation whereby a community would work the fields together to make sure everyone was ready for the planting season. *Ubudehe* was inclusive and because everyone participated, the practice often led to increased solidarity, social cohesion, mutual respect and trust.

*Ubudehe* was reintroduced into Rwandan life in 2001 and it is a Government of Rwanda poverty reduction initiative, which provides communities with the skills and support necessary to engage in problem-solving and decision-making for their development.

Contemporary *Ubudehe* can be described as a process whereby members of the community come together to assess their current situation and decide on the ways to most effectively and efficiently improve their livelihoods. It is based on a Participatory Poverty Assessment (PPA) whereby citizens self-identify themselves as poor or otherwise are identified by the community according to a set of criteria. This



allows for the community and poor households to create their own problem-solving strategies.

*Ubudehe* is a highly decentralized program based at the village (*Umudugudu*) level. It is coordinated and monitored by the *Ubudehe* committee at the village with guidance and oversight from the District and Ministry of local government.

## **Annex 5: References and Sources**

- Abbott, Pamela and John Rwirahira 2012. *Aid Effectiveness in Rwanda: Who Benefits?* Kigali: ActionAid.
- Blair, Tony "20 years after the genocide, Rwanda is a beacon of hope", *The Citizen* (Dar es Salaam), April 8, 2014.
- International Center for Soil Fertility and Agricultural Development 2010. Evaluation Report on Crop Intensification Program. Kigali: Ministry of Agriculture and Animal Sources.
- Institute of Policy Analysis and Research 2012. "An Assessment of Business Processes and Implementation of Reforms in Private Sector-Facing Institutions 2007-2011". Kigali: IPAR.
- Kagame, Paul 2009. "Africa has to find its own road to prosperity", *Financial Times* (London), May 8.
- Kanbur, Ravi 2004. "Growth, inequality and poverty – some hard questions", Cornell University, January.
- Ministry of Agriculture 2011. *About Crop Intensification Programme*. Kigali: MINAGRI.
- Ministry of Finance and Economic Planning 2011. *Annual Report for the Fiscal Year 2010-11*. Kigali: MINECOM.
- Ministry of Finance and Economic Planning 2013. *Annual Report for the Fiscal Year 2012-13*. Kigali: MINECOM.
- Ministry of Gender and Family Promotion 2014. *Celebrating Gender Equality for sustainable Development: 20 years of Liberation*. Kigali: MIGEPROF.
- Ministry of Health 2011. *Annual Booklet*. Kigali: Ministry of Health.
- National AIDS Control Commission 2010. *United Nations Special Assembly Special Session on HIV and AIDS: Country Progress Report, January 2008–December 2009*. Kigali: National Aids Commission.
- National Institute of Statistics Rwanda 1992. *Demographic and Health Survey (DHS)*. Kigali: NISR.
- National Institute of Statistics Rwanda 2000. *Demographic and Health Survey (DHS)*. Kigali: NISR.
- National Institute of Statistics Rwanda 2005. *Demographic and Health Survey (DHS)*. Kigali: NISR.
- National Institute of Statistics Rwanda 2010. *Demographic and Health Survey 2010*. Kigali: NISR.
- National Institute of Statistics Rwanda 2000. *Integrated Household Living Conditions Survey (EICV1)*. Kigali: NISR.
- National Institute of Statistics Rwanda 2005. *Integrated Household Living Conditions Survey (EICV2)*. Kigali: NISR.
- National Institute of Statistics Rwanda 2011. *Integrated Household living Conditions Survey (EICV3)*. Kigali: NISR.
- National Institute of Statistics Rwanda 2012a. *Population and Housing Census (Provisional data)*. Kigali: NISR.
- National Institute of Statistics Rwanda 2012b. *2011 Enterprise Survey*. Kigali: NISR.
- National Institute of Statistics Rwanda 2012c. *Statistical Yearbook 2011*. Kigali: NISR.
- National Institute of Statistics Rwanda 2012d. *Integrated Household Living Conditions Survey (EICV3)*. Kigali: NISR.
- National Institute of Statistics of Rwanda and the Ministry of Finance and Economic Planning, 2012e. *Rwanda Population and Housing Census 2012*, Kigali, Rwanda

- National Institute of Statistics Rwanda 2013a. *2012 Statistical Yearbook*. Kigali: NISR.
- National Institute of Statistics of Rwanda, Ministry of Finance and Economic Planning, Ministry of Health, Macro International USA 2008. *Rwanda Service Provision Assessment Survey*. Kigali: NISR.
- New Times* (Kigali), several articles on development published in 2013-14.
- Nkurunziza, Joseph, Annelet Broekhuis and Peter Hooimeier 2012. "Free Education in Rwanda: Just One Step towards Reducing Gender and Sibling Inequalities" in *Education Research International*, Volume 2012, Article ID 396019.
- Nsengiyumva, A. and E. Habumuremyi 2009. *A Review of Telecommunications Policy Development and Challenges in Rwanda*. Kigali: Association for Progressive Communications.
- OECD 2011. *Evaluation of the Implementation of the Paris Declaration: A Synthesis Report*. Paris: OECD-DAC.
- Republic of Rwanda 2007. *Economic Development and Poverty Reduction Strategy, 2008-2012 (EDPRS1)*. Kigali: Ministry of Finance and Economic Planning.
- Republic of Rwanda 2009a. *Rwanda National Strategic Plan on HIV and AIDS 2009-2012*. Kigali: Ministry of Health.
- Republic of Rwanda 2009b. *Health Sector Strategic Plan January 2009-December 2012*. Kigali: Ministry of Health.
- Republic of Rwanda 2011. *Annual Booklet 2011*. Kigali: Ministry of Health.
- Republic of Rwanda 2012. *Rwanda ICT Sector Profile 2012*. Kigali: Ministry of Youth and ICT in cooperation with National Institute of Statistics Rwanda.
- Republic of Rwanda 2013a. *Economic Development and Poverty Reduction Strategy 2013-2018 (EDPRS2)*. Kigali: Ministry of Finance and Economic Planning.
- Republic of Rwanda 2013b. *EDPRS: Lessons Learned, 2008-2011*. Kigali: Ministry of Finance and Economic Planning.
- Republic of Rwanda 2013c. *2012 Education Statistics Yearbook*. Ministry of Education, February.
- Republic of Rwanda 2013d. *Official Development Assistance Report FY 2011-2012: Aid for Development*. Kigali: Ministry of Finance and Economic Planning.
- Rwanda Association of Local Government Authorities 2013. *Report on the Aberdeen Principle to promote local democracy in Rwanda*. Kigali, RALGA and Ministry of Local Government, May.
- Rwanda Biomedical Center 2013. Annual Report on HIV & AIDS July 2012-June 2013. Kigali: RBC.
- Rwanda Environmental Management Authority 2009. *Rwanda: State of Environment and Outlook Report*. Kigali: REMA.
- UNDP 2003. *Human Development Report 2003: Millennium Development Goals: A Compact between Nations to End Human Poverty*. New York and Oxford: Oxford University Press.
- UNDP 2012. *Millennium Development Goals Progress Report: Rwanda Country Report 2010*. Kigali: UNDP Country Office.
- UNDP 2013. *Rwanda Post-2015 National Consultation*. Kigali: UNDP Country Office.
- United Nations 2013. *A New Global Partnership: Eradicate Poverty and Transform Economies through Sustainable Development: The Report of the High Level Panel of Eminent Persons on the Post-2015 Development Agenda*. New York: United Nations.

World Food Programme 2012. *Comprehensive Food Security and Vulnerability Analysis and Nutrition Survey*. Kigali: National Institute of Statistics, Rwanda.  
World Bank 2013. *World Development Indicators 2013*. Washington DC: The World Bank.

**On-line sources:**

<http://www.ifrc.org/ar/noticias/noticias/afrika/rwanda/rwanda--un-imihigo-pour-la-reduction-des-risques/>  
<http://rwandaun.org/site/2013/09/25/president-kagames-address-at-the-opening-of-the-special...>  
<http://www.minagri.gov.rw/index.php%3Fid%3D28.html>  
<http://www.asfg.org.uk/success-stories/the-one-cow-per-poor-family-programme-in-rwanda.html>  
<http://www.asfg.org.uk/successtories/html>  
<http://allafrica.com/stories/201311200877.html>  
[http://www.minaloc.gov.rw/fileadmin/documents/Minaloc\\_Documents/Revised\\_Dece ntralisation\\_Policy.pdf.html](http://www.minaloc.gov.rw/fileadmin/documents/Minaloc_Documents/Revised_Dece ntralisation_Policy.pdf.html)  
[http://wiki.laptop.org/go/OLPC\\_Rwanda.html](http://wiki.laptop.org/go/OLPC_Rwanda.html)  
<http://mdgs.un.org/unsd/mdg/Data.aspx.html>  
<http://www.weforum.org/issues/global-competitiveness/>  
<http://www.oecd.org/dac/effectiveness/42155403.pdf.html>  
<http://www.hindawi.com/journals/edri/2012/396019/>  
<http://data.worldbank.org/indicator/EN.ATM.CO2E.PC/>  
[http://ozone.unep.org/new\\_site/en/index.php.html](http://ozone.unep.org/new_site/en/index.php.html)  
[http://www.rema.gov.rw/rema\\_doc/Newsletters/REMA%20MAGAZINE%208.pdf.html](http://www.rema.gov.rw/rema_doc/Newsletters/REMA%20MAGAZINE%208.pdf.html)  
<https://www.cia.gov/library/publications/the-world-factbook/geos/rw.pdf.html>  
[http://statistics.gov.rw/indicators/devinfo \(DevInfoRwanda\)](http://statistics.gov.rw/indicators/devinfo)  
[www.people.cornell.edu/pages/sk145.html](http://www.people.cornell.edu/pages/sk145.html)  
[http://www.data.worldbank/indicators/...](http://www.data.worldbank/indicators/)  
<http://gov.rw/Domestic-revenue.html>  
<http://www.minecofin.gov.rw/node/523.html>  
<http://www.statistics.gov.rw/survey/integrated-household-living-conditions-survey-eicv.html>  
[http://www.gmo.gov.rw/uploads/media/GENDER\\_BEST\\_PRACTICES.pdf.html](http://www.gmo.gov.rw/uploads/media/GENDER_BEST_PRACTICES.pdf.html)

## **Annex 6: Composition of the Evaluation Team**

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