Ephoise and her husband Andrew used to fall in Rwanda’s lowest poverty category. They struggled to survive in one of the poorest districts, Nyamagabe, where around half of people live under the poverty line. It was not surprising when a growth monitoring session in their village of Uwabumunyi flagged their daughter, Adelphine, as suffering from moderate acute malnutrition.

The family barely had enough income for food, much less a variety of vegetables, fruits and animal proteins. If they were lucky, they could fix a little cabbage once or twice a week to supplement a diet otherwise heavy on carbohydrates such as potatoes.

Today, the family’s situation has begun to transform, including in how they eat, and nourish and care for their children. This has required a broad network of support that is now available within their village. Nutrition and health workers, veterinarians, agronomists and community economic development specialists work together there to provide a range of services that support better care and feeding practices, from nutrition education to techniques for growing kitchen gardens that allow families to provide more diverse diets to young children.

In just over a year, Ephoise and Andrew are no longer classified as extremely poor, and Adelphine, now almost two years old, scores in the healthy green measure in growth monitoring. She has become a lively, well-nourished child who playfully helps her mother pick carrots, spinach, onions, Swiss chard and chayote squash from among the abundant vegetables growing in a kitchen garden next to their home. The family has learned to cook a variety of vegetables every day for meals, along with protein-giving beans, and eggs purchased in the market.

The family compound hosts goats—the first livestock they have ever had—which provide manure for higher yields from the kitchen garden as well as crops grown for income. A nearby farmer field school has introduced simple and common...
sense agricultural techniques, such as how to grow vegetables in tiers to boost productivity or even up walls not otherwise being used, and how to use ashes from cooking to reduce acidity in the soil. A pit in the ground conserves waste water for dry periods, and the family has a separate, enclosed latrine with a handwashing station outside, constructed from readily available sticks, string and a recycled plastic bottle.

Andrew speaks softly about his plans for the future, which go far beyond what he might once have imagined. “We had to be stable in terms of what we eat and what we earn,” he says modestly. He knows now how to nourish his daughter so she will continue to thrive, and he plans to continue improving production in his cash crops while breeding and selling offspring and manure from the goats. Being part of a local savings group will help the family fund their goals.

**BACKGROUND AND CONTEXT**

Nyamagabe is one of 18 districts where UNICEF and six partners have backed a multisectoral approach to nutrition to reduce stunting. The programme operates under the aegis of the Government of Rwanda’s national nutrition programme, and through funding from the Government of the Netherlands, the United States Agency for International Development (USAID), the Swiss Development Cooperation (SDC) and the IKEA Foundation. Funding in Nyamagabe also comes from the Government of Switzerland; interventions are coordinated by a team of UN partners in nutrition, including the World Food Programme, World Health Organization, Food and Agriculture Organization and UNICEF.

**A BRIEF OVERVIEW OF THE NUTRITION SITUATION IN RWANDA**

- 18% of children 6-23 months receive a minimum acceptable diet (up from 1% since 2010)
- 80% of households are food secure
- 54% have improved sanitation facilities (58% in 2010)
- 38% of children younger than five are stunted (down from 44% since 2010)
- 4% of households have access to an improved waterer source (75% in 2010)
- 37% of children younger than five are suffering from anemia (down from 38% in 2010)
- 87% of children 0-6 months are exclusively breastfed
- 73% of households have access to an improved waterer source (75% in 2010)
- 2% of children younger than five are wasted (down from 3% since 2010)

WHAT IS BEING DONE BY UNICEF

With support from the Dutch Government, SDC, the IKEA Foundation and USAID, UNICEF is implementing a multisectoral package of nutrition-specific as well as nutrition-sensitive interventions focusing on 19 out of 30 districts in the country. These interventions include:

**Support** to monthly community growth monitoring and promotion sessions, including cooking demonstrations, to teach caregivers on how to prepare a diversified diet from locally available ingredients.

**Distribution** of micronutrient powders, Vitamin A and deworming to improve the micronutrient status of children and reduce anemia.

**Support** to the management of severe acute malnutrition in children, including screening, referral and treatment.

**Training** of caregivers of young children in establishing kitchen gardens and small livestock rearing to supplement the family’s diet.

**Establishment** of community saving and lending groups for caregivers of young children to increase access to financing and income generating activities.

**Support** to coordination, monitoring and evaluation, learning and knowledge management at district and national levels through training in DevInfo to track district plans to eliminate malnutrition, support to learning visits between districts and training in and support to operational research to capture lessons learned and best practices and identify drivers and barriers for effective nutrition interventions.

The multisectoral approach (see Figure 1) builds on the recognition that narrowly focused interventions, typically within the health-care system alone, are unlikely to fully solve malnutrition and stunting, which are fueled by a variety of factors. In Rwanda, these include poverty, small-scale agriculture focused primarily on income, poor sanitation, child-care and feeding practices and gender inequality, among others. The multisectoral approach combines both nutrition-specific interventions, such as counselling on how to cook the right foods and supplements such as micronutrient powders,

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**FIGURE 1**

**Conditions for improving nutrition in Rwanda**

<table>
<thead>
<tr>
<th>BASIC</th>
<th>UNDERLYING</th>
<th>IMMEDIATE</th>
<th>OPTIMAL NUTRITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Adequate format &amp; informal infrastructure</td>
<td>Social protection</td>
<td>Adequate nutrient intake</td>
<td></td>
</tr>
<tr>
<td>High political commitment</td>
<td>Hygiene &amp; sanitation</td>
<td>Disease prevention &amp; management</td>
<td></td>
</tr>
<tr>
<td>Effective resources mobilization</td>
<td>Access to &amp; use health care</td>
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<td></td>
<td>Education</td>
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<td></td>
<td>Emergency</td>
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<tr>
<td></td>
<td>Household food security</td>
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<tr>
<td></td>
<td>Family nutrition (MYCN) &amp; care practices preparedness</td>
<td></td>
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</tbody>
</table>

Figure 1 reproduced from the Rwanda National Food and Nutrition Strategic Plan 2013-18 illustrating the multisectoral nature of the conditions underlying nutrition in Rwanda.
LESSONS LEARNED AND RECOMMENDATIONS

People respond well to holistic approaches that cover the multiple issues they face

People respond well to holistic approaches that cover the multiple issues they face. For many families, the nutrition programme seemed to be an opportunity to begin addressing multiple obstacles—poorly nourished children due to insufficient and inadequately diverse food intake, the lack of knowledge on how to prepare a nutritious meal from locally available ingredients, the lack of income in some cases, the lack of access to financial services, family conflict that disrupts appropriate care and feeding choices, and so on. Supported through the UNICEF nutrition programme, because it was relatively comprehensive, felt like much more of a life change than a one-off intervention.

Evidence for this came from the many women and men, some from very deprived backgrounds, who spoke with hope and confidence about what they have been able to do with new knowledge about nutrition as well as new opportunities from raising small livestock or accessing small loans. This seemed to introduce a level of basic stability and longer term thinking that left people more equipped to consider and actually achieve goals like a diversified diet for their children, which to some extent depends on an orientation extending beyond an everyday struggle for survival. In communities where the programme has been particularly successful, people reported that mothers will come from neighbouring communities asking for similar support.

Some partners predicted that the multisectoral approach, while initially complex and time-consuming, could dramatically accelerate impact, achieving in a few years what otherwise might require a decade or more.

“Before we did not know what fish are. Now we know how to cultivate them, how to feed them to our children so they are well nourished, and how to sell them so we can make some income.”

—JEAN-BOSCO LYAMUGEMA, PRESIDENT

METHODOLOGY

As part of identifying some lessons learned in Rwanda, UNICEF commissioned five briefs on themes central to the programme: behaviour change, multisectoral approaches to ending malnutrition, decentralization, monitoring and innovation.

The briefs are based on a review of documents outlining the scope of the programme and reporting on results, as well as over 75 semi-structured interviews with key informants, including national and local government counterparts, partners, men and women participating in the programme, and UNICEF staff in Kigali and New York. The interviews were designed to elicit both technical information and expertise on which interventions were most effective and which required improvement, as well as to capture and document the lived experiences of people who have benefited from project interventions.

The process was based on the pause, learn, share methodology developed by the National Aeronautics and Space Administration (NASA), the US space agency. Aimed at eliciting knowledge based on real-world experiences, it stresses taking time to reflect on recent events, which helps people learn what happened and why.
Developing local resources can empower people and sustain change

Some local officials and community members appreciated the programme’s emphasis on food, agricultural practices, savings and other resources available within localities rather than a reliance on external support. In some cases, this has galvanized people to think beyond the project and even pursue their own innovations. One community, for example, developed a child-care centre linked to a site used for cooking demonstrations and a community garden.

External support has however been key in introducing the multisector approach, brokering initial consensus around core priorities and convening different people to work together, many of whom hoped the programme would continue. While recognizing that less would probably be done without outside assistance, due to resource and capacity constraints, they stressed how a ‘critical mass’ of new thinking and practices is now in place and would likely be sustained.

The multisector approach can offer positive spillover effects

Immediate benefits come from interventions such as micronutrient powders, regular growth monitoring and changes in feeding practices. But part of the strength of the multisectoral approach may be when it balances interventions like these with others, such as kitchen gardens and savings and loan groups, that offer a broader set of tools to maintain momentum over the longer term, and even deepen resilience to setbacks.

Some impacts contribute to development goals beyond nutrition. People in farmer field learning schools set up to teach basic agricultural techniques appreciated these as a source not only of knowledge for kitchen gardens that can transform family diets, for example, but also of new and more productive practices that they apply to growing crops for income, a double benefit. The saving and lending groups help people meet unexpected or larger expenses, such as for health insurance. Loans are used for small businesses that generate income and can contribute to moving people out of poverty.

Moving forward, the savings and loan groups could in some cases place greater emphasis on financial literacy, since many of the people involved lack the longer-term planning skills that support a steady income and systematic attention to a healthy diet (see the box on links to income for a discussion of how this was done through private service providers in one district). This could build on existing work over time, particularly once savings and loan groups are functioning well.

More people involved means more opportunities to prevent and catch malnutrition

The multisectoral approach involves many more people in planning and implementing actions to catch and prevent malnutrition and stunting. While the level of involvement varies substantially, there was a sense that having ‘all eyes of the community’ looking out for malnutrition increases the likelihood of preventing and catching cases.

Sensitized agricultural extension workers, for instance, report potential cases to community health workers. Some local leaders have personally agreed to ‘follow’ a child who had been caught in the dangerous yellow category in growth monitoring, including through regular check-ins with the family and community health workers.

If momentum and engagement are sustained, this may allow a level of regular follow-up and monitoring that some people felt would be an important guard against regression. It would support the continued adoption of new feeding and other practices over the longer term, and could embed new social norms around everyone having well-nourished children.

Likewise, while work on women’s empowerment was built into the UNICEF nutrition programme and has taken place through mechanisms such as savings and loan groups for mothers, many partners found they had to proactively manage gender dynamics in ways that went beyond what was originally anticipated. In particular, efforts around mitigating family conflict seemed imperative in some communities, where it is a leading cause of neglect of children that in

“The beauty of the multisectoral approach is that it involves different sectors in working towards one goal—the reduction of stunting. It also allows more calibrated strategies based on the reality that stunting is a complex problem, and its origins and drivers vary from place to place. You have to be able to adjust accordingly.”

—PASCAL GATETE, WORLD VISION
At the same time, another perspective is that adding too many sectors at the start can overburden the programme, so it may make sense to gradually add these over time as was done with the increased focus on integrating early childhood development into the nutrition program. Child care-related practices in some cases explain the infrequent provision of meals and the choice of non-diverse diets. Many mothers have few options for child care and no choice but to work for an income outside the house. This results in leaving even young children at home, often with a pot of precooked food and a slightly older sibling to look after them. In one district, according to the hospital director, mothers leave children for turn results in malnutrition. Involvement of men in nutrition and caring practices may therefore provide further strengthen social norms around good nutrition.

**Coordination between nutrition and some sectors lagged behind**

There were several suggestions that more could have been done to link the nutrition work with water and sanitation, early childhood development and social protection programmes. The emphasis was clearly on agriculture through the kitchen gardens and farmer field schools, income generation through savings and loan groups, and to some extent initiatives around family conflict.

**BOX 1**

**LINKING INCOME AND A BALANCED DIET**

In all 18 UNICEF-supported districts, community savings and loan groups are nested within a system of supportive nutrition interventions. As the partner in Muhanga and Karongi districts, Catholic Relief Services has introduced a well-established model for the groups, premised on combining aspects of formal financial services, such as well-defined regulations, with the benefits of being located in an informal community setting, including convenience and flexibility. Trained members of the community known as private service providers support the groups.

In the village of Kivomo, participants in the savings and loan group said that this was the first model employed in the community that worked effectively. They appreciated the transparency and reliability provided by consistent rules, and a system where members contribute based on their capacity, rather than a set amount. Emmanuel is the local private service provider who supports the group. He visits once a month to check on whether or not contributions are being entered correctly into registers, and follows up with members who have taken loans to see if they are investing the money effectively. Basic financial education stresses how to set future goals and plan the use of resources, helping to develop a culture of savings and investment.

Emmanuel believes that economically empowering people through the group puts them in a much better position to purchase foods that close nutrition gaps. An equally important element, however, is the fact that he works in close partnership with community health workers and agricultural promoters to reinforce nutrition messages, including at meetings with the savings group and individual members. The local community health worker, Jumah, concurs, noting “An integrated effort contributes to a better nutrition outcome.”

While the link between saving groups and nutrition is already being made through the UNICEF-supported work in 18 districts, an earlier evaluation of savings groups in other areas unrelated to the UNICEF programme found that while people spent more money on health, education and household materials, many were still not practicing sound nutrition. A more recent evaluation from 2015 of the private service providers programme in Rwanda as a whole suggested that nutrition sensitization and messaging become part of their training to strengthen links between income and a balanced diet.
the day at border posts along the frontier with a neighbouring country because these are perceived as ‘secure’.

One option is to strengthen community-based child day care services. This may entail an approach where community members take turns in either looking after the young children of the village in their own house or in a centre constructed by the community with some inputs such as metal sheets for roofing and water tanks for rain water harvesting as was done by several of the UNICEF partners.

**Broader scope of activities under the programme brings challenges**

Both partners and the districts had priorities that at times tested the scope of the programme, even though it allowed room for flexibility and innovation, and was designed to support district nutrition efforts. Despite a clear elaboration of the multisector nature of nutrition work in the original programme, in reality, connecting a few sectors can lead to connecting many more, and it can be challenging to define the limits.

For example, did water and sanitation include just awareness-raising and the installation of tippy-taps, or could it extend to drilling tube wells in an area with insufficient water? (The answer was no.) In one district, health officials stressed reproductive health care, which was not part of the programme. They pointed to the difficulties of large, poor families in adequately feeding all of their children, and what they saw as a significant problem, when women use modern contraceptives, of men simply finding new partners willing to have more children.

**Working across sectors takes more time**

Partners repeatedly emphasized that the multisector approach requires a long time to prepare for implementation of activities and to build relationships with district and local level authorities, particularly when it is new to the many people involved. Where people in different sectors have not worked together before, time needs to be allowed for introducing them, building relationships understanding how they can work together. Many people commented that the three-year programme period was too short, given the initial relationship/knowledge-building phase. There was a general sense that the programme will be hitting its stride and beginning to produce strong results about the time it is scheduled to end.

**Embedding the multisector approach in training for technicians might extend its application**

Agronomists and veterinarians repeatedly pointed out that they had received relatively little information on nutrition in their academic preparation, and had not made it part of their routine activities until they came in contact with the UNICEF-supported programme. Having seen its importance, some have become nutrition champions in activities not covered by the programme, for example, by speaking about nutrition in training for members of agricultural cooperatives that is otherwise mainly dedicated to production. A more systematic approach to nutrition education for all agricultural technicians would make practices like these more routine and widely applied.

**A multisectoral approach may require more knowledge—or at least ready access to it**

Staff at UNICEF, who mostly come from public health and nutrition backgrounds, and some partners acknowledged that one of the challenges of the multisectoral approach is engaging with unfamiliar sectors in the context of designing, managing and monitoring a complex programme. While recognizing that they were playing primarily a coordinating role, some described struggling with quality assurance—such as knowing the right questions to ask to assess kitchen gardens. It could be difficult to ascertain, for instance, whether or not the most appropriate vegetables were being cultivated, or the most productive agricultural techniques were being used.

One partner, faced with this issue, addressed it by hiring a mix of staff specialized in nutrition, agronomy, social protection, monitoring and evaluation, and income generation. They worked as a multidisciplinary team to routinely exchange knowledge and share solutions, mirroring the structure of the district multisectoral committees to eliminate malnutrition.

Techniques used for the kitchen gardens are relatively simple, however, suggesting that even where this approach is not possible, a basic knowledge bank oriented towards non-specialists could be developed. UNICEF might better build on its access to agricultural expertise within the United Nations and elsewhere, including through nutritionists at the Food and Agricultural Organization.
CONCLUSION

A multisectoral nutrition programme can be a challenging, complex undertaking. It requires people to work together who may never have done so before, and to learn about issues they may not have previously considered. It can take more time and require more initial groundwork, including to build relationships and knowledge among people carrying it out. Yet the results may be more powerful and last longer, because the approach reflects the reality that different development issues are strongly interconnected, and must be addressed as such. The multisectoral approach responds to need, but also builds demand as communities come to understand what they can do and what services they should call for to improve children’s nutrition.

KEY RECOMMENDATIONS

In developing the programme, consider to first focus on a discrete number of sectors with the greatest impact on nutritional outcomes. At the same time, build in the scope to engage other sectors over time, based on emerging needs, and as the initial effort gets firmly off the ground.

Analyse the choice of sectors by context, since it may vary, for instance, between rural and urban areas.

Factor in extra time required to build relationships across people in different sectors, which has implications for programme length and the pace of activities.

Recognize that all forms of expertise required for a multisectoral programme may not be available within a given organization. Develop a strategy in the early stages to secure this expertise, such as through building it into staffing or establishing technical partnerships.

Since success in a multisectoral programme largely depends on effective coordination of multiple issues and actors, put in place adequate management capacities, and clearly define roles and responsibilities at the beginning. Have a strategy to detect where coordination may need strengthening.

Plan to regularly bring all programme managers together to discuss intersections across the sectors, identify challenges, make course corrections, and share knowledge and innovation.

Develop a business plan that could help the poorest families to generate income and manage activities implemented in their communities. Invest the generated income to promote the sustainability of interventions and link social protection schemes with nutrition-related outcomes.
**SOME QUESTIONS TO CONSIDER FOR FUTURE WORK**

1. Which sectors deliver the greatest impact? What mix of community members and technicians should be involved in defining those sectors?

2. What is required to ensure effective coordination across different sectors?

3. What is needed to make these relationships systematic and sustainable?

4. If work in an important sector lags behind, what mechanisms should be in place to catch the shortfall and close the gap?

5. What additional ‘sector specific’ expertise is needed beyond the core team and partners managing the programme? Where can this be obtained?

**ALSO IN THIS SERIES...**

For more on nutrition work in Rwanda, see:

1. Brief on behaviour change [insert proper title]

2. Brief on the multisectoral approach [insert proper title]

3. Brief on monitoring [insert proper title]

4. Brief on innovation [insert proper title]

5. Summary brief [insert proper title]

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