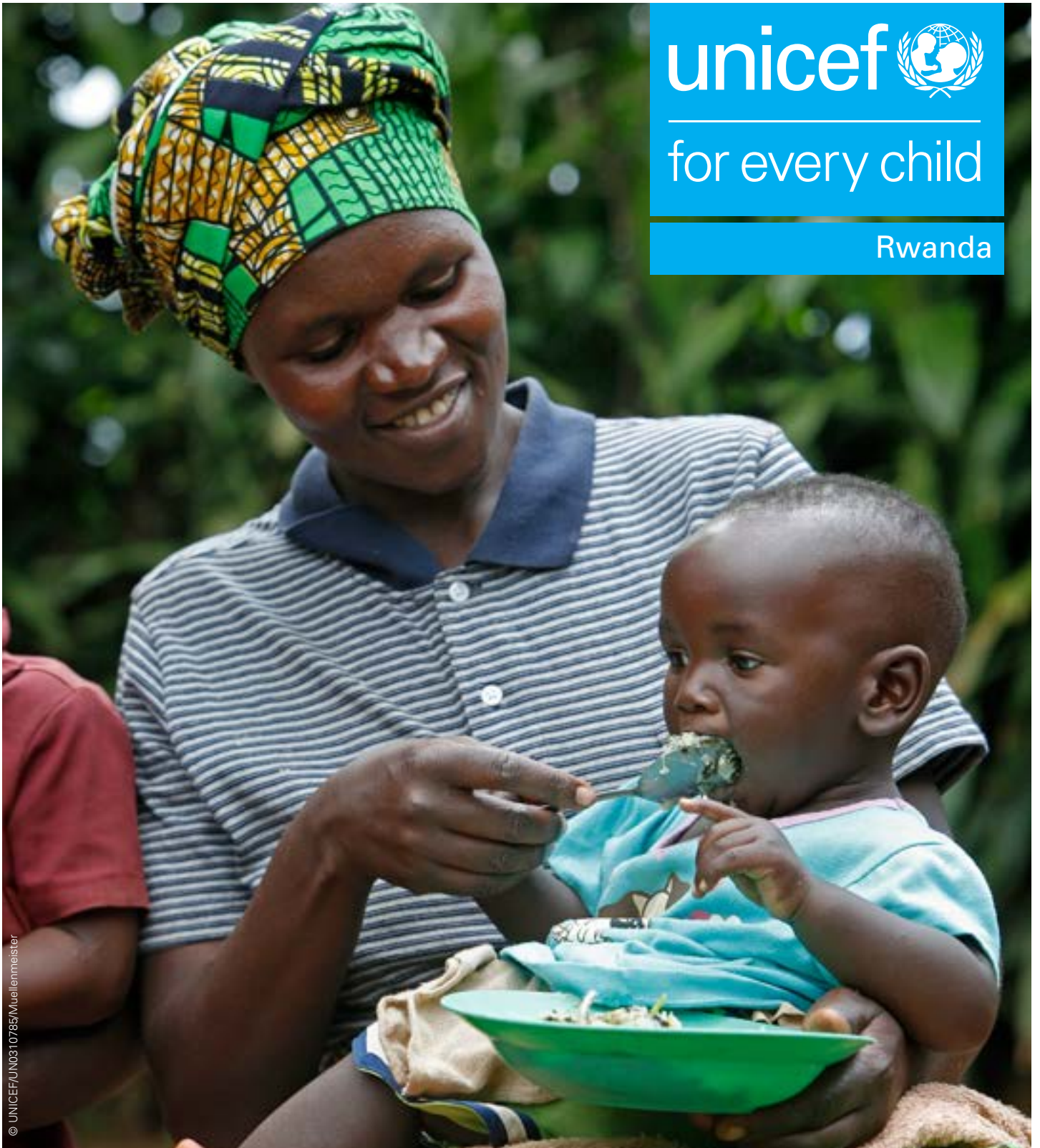


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Nutrition Budget Brief

Investing in Children's Wellbeing in Rwanda
2021/2022

Preface

This nutrition budget brief explores the extent to which the Government of Rwanda addresses the nutrition needs of children under five years of age and mothers in Rwanda. The brief analyses the size and composition of budget allocations to the interventions aimed at eliminating all forms of malnutrition amongst children in all Districts for the 2021/22 financial year. The aim of this budget brief is to synthesize complex budget information and offer recommendations to strengthen budgeting for nutrition. Financial data used in this analysis are drawn from the Law determining the state finances for the 2021/2022 fiscal year and the revised state finance laws for the previous years.

Key Messages

Budget allocations for nutrition interventions have shown an increasing trend over the past five years, despite a slight budget reduction in 2021/22. The allocations to different nutrition-related interventions have increased from FRW 8.4 billion in 2017/18 to FRW 47.8 billion 2021/22 and the under-5 stunting rate has reduced from 38 per cent in 2014/15 to 33 per cent in 2019/20. However, more budget is needed for nutrition targeting through high-impact interventions, as well as new measures to tackle inequities in nutrition outcomes to achieve government targets of reducing the under-5 years stunting rate to 19 per cent by 2024.

Many nutrition interventions are implemented through the Health and Agriculture sectors, while other public agencies play an important role in implementing nutrition interventions, either through nutrition-specific or nutrition-sensitive approaches. Such a wide range of interventions brings about challenges related to oversight and coordination, and lack of clear institutional mandates and capacity to produce dedicated nutrition budgets or spending reports.

The National Child Development Agency (NCDA) should mandate the timely production of the nutrition budget and spending reports which, in turn, will strengthen budget monitoring, oversight, and advocacy for efficiency improvement among different public agencies contributing to malnutrition elimination. Furthermore, NCDA should ensure that adequate capacity for nutrition planning and budgeting are provided to key government officials across government agencies.

Nutrition has in recent years attracted substantially more external resources, with budget allocations increasing from FRW 900 million in 2017/18 to FRW 33.7 billion in 2021/22. Currently external resources account for 71.6 per cent of the total nutrition budget. While there is commendable progress in mobilizing both external and domestic resources for nutrition, overreliance on external resources increases risks to financial sustainability. *There is therefore a need to strengthen allocations from the domestic budget to support stunting reduction and other nutrition promotion efforts in a comprehensive and integrated manner.*



1. Introduction

Elimination of all forms of malnutrition (wasting, stunting, underweight, low birth weight, micronutrient deficiencies, overweight and obesity) features among the top priority areas in Rwanda's strategic policy and plans, in particular the National Strategy for Transformation (NST1) 2017-24 and Health Sector Strategic Plan (HSSP4). Addressing challenges around eliminating malnutrition cuts across different sectors such as Health, Education, WASH, Social Protection and Agriculture, the NST1 outlines three main policy actions which are being implemented by the Government of Rwanda (GoR) to achieve nutrition targets: (i) strengthening multi-sectoral coordination from central government to District level, (ii) ensuring and sustaining food security, and (iii) promoting the 1,000 days of good nutrition and antenatal care at the village level alongside stronger early childhood development services.

The GoR has recently made a number of reforms aiming at improving coordination of nutrition-related interventions and increased public investments for stunting reduction. One of the interventions aiming at ensuring food security as well as strengthening nutrition-sensitive social protection is the Nutrition Sensitive Direct Support (NSDS) programme. Many government agencies are engaged in nutrition promotion, such as the Ministry of Health, the Rwanda Biomedical Centre (RBC), the Ministry of Agriculture, the Ministry of Local Government (MINALOC), Local Administrative Entities Development Agency (LODA), the National Child Development Agency (NCDA), and Districts.

1.1. Strategic Documents and Targets Guiding Nutrition Promotion

There are several strategic instruments that guide the budgeting process for nutrition in Rwanda. **Table 1** illustrates the summary of the selected strategies, policy, and key associated interventions.

Table 1: Nutrition related strategic documents and key interventions

Strategic documents	Key interventions/Targets
Draft Rwanda Nutrition Policy 2020	<ul style="list-style-type: none"> • Eliminate child stunting in all under-5 children with a focus on those below two years of age • Reduce anaemia and other micronutrient-related deficiencies with a focus on children, adolescent girls, and women of reproductive age • Improve the coverage and quality of the management of acute malnutrition • Reduce overweight and obesity
National Strategy for Transformation (2017-2024)	<ul style="list-style-type: none"> • Improve nutrition for children under 5 via targeted interventions to reduce the stunting rate from 39 per cent in 2014/15 to 19 per cent in 2024 • Ensuring food security, decentralization of good nutrition and antenatal care services, strengthening multi-sectoral coordination.
Health Sector Strategic Plan IV 2018-24	<ul style="list-style-type: none"> • Use community and village-based ECD services as an entry point for education and provision of health services • Improve one-on-one nutrition counselling for target groups (pregnant women, adolescents and under-5 children)
Sustainable Development Goals	<ul style="list-style-type: none"> • By 2030, end all forms of malnutrition, including achieving the internationally agreed targets on stunting and wasting in children under-5 • Address the nutritional needs of adolescent girls, pregnant and lactating women, and older persons

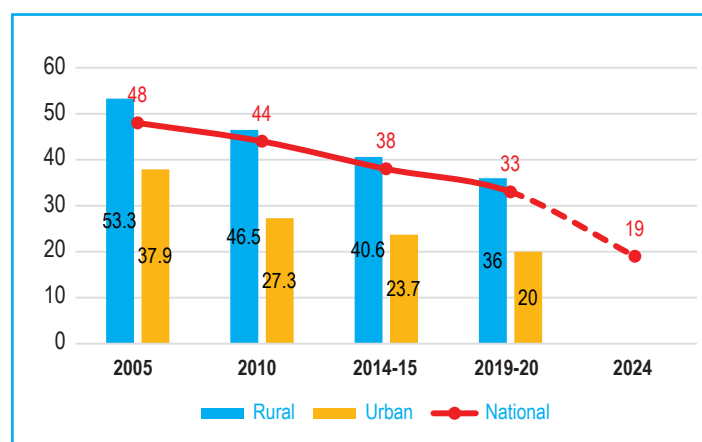
1.2. Recent Country Performance around Nutrition

Despite a high stunting rate, the nutrition status among children under-5 has progressively improved over the past 10 years. The DHS6 (2019/20) shows a reduction in the stunting rate in children under-5 from 38 per cent in 2014/15 to 33 per cent in 2019/20 (Figure 1). Further analysis shows that stunting generally increases with age, with the peak at 40 per cent among children between 24-35 months. There are also large gaps between rural and urban children and high and low income households. The DHS6 (2019/20) shows that 36 per cent of children under-5 living in rural areas are stunted against 20 per cent within urban areas, and 49 per cent of children in the lowest wealth quintile are stunted against 11 per cent within the highest income quintile. As outlined in NST1, the GoR aims to reduce the stunting rate to 19 per cent by 2024, and has therefore strengthened coordination of various efforts in stunting reduction through a multisectoral approach. However, more public investments are needed to accelerate poverty reduction, enhance food security, and increase households' income to achieve better nutrition outcomes at scale.

1.3. Recent Trends on Food Prices

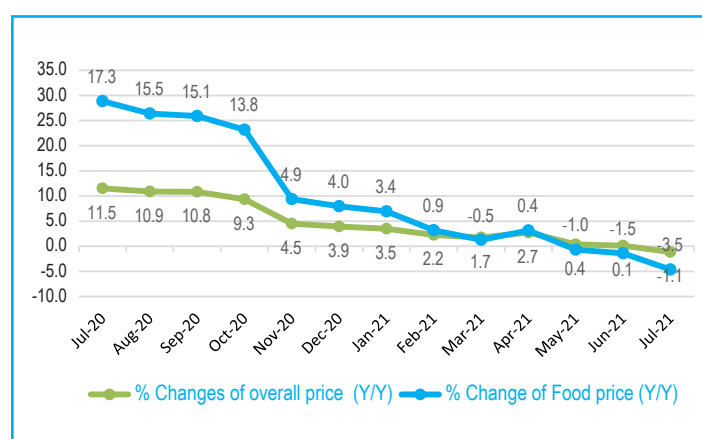
While the year 2020 was characterized by high food prices, these decelerated from the onset of 2021 (as measured by the Consumer Price Index- CPI) when measured year on year (y/y) or month on month (m/m). The changes in the food price indexes dropped from 17.3 per cent in July 2020 to -3.5 per cent in July 2021, while the overall index dropped from 11.5 per cent to -1.1 per cent during the same period (Figure 2). The lower level of food prices is attributed to good weather contributing to improved agricultural harvests recorded in agriculture season A and B.

Figure 1: Stunting reduction trends among children under 5 years



Source: NISR¹, Demographic and Health Survey reports

Figure 2: Food and non-alcoholic drink price changes



Source: Data generated using National Institute of Statistics-Price index data



1.4. Scope of the Budget Brief for Nutrition

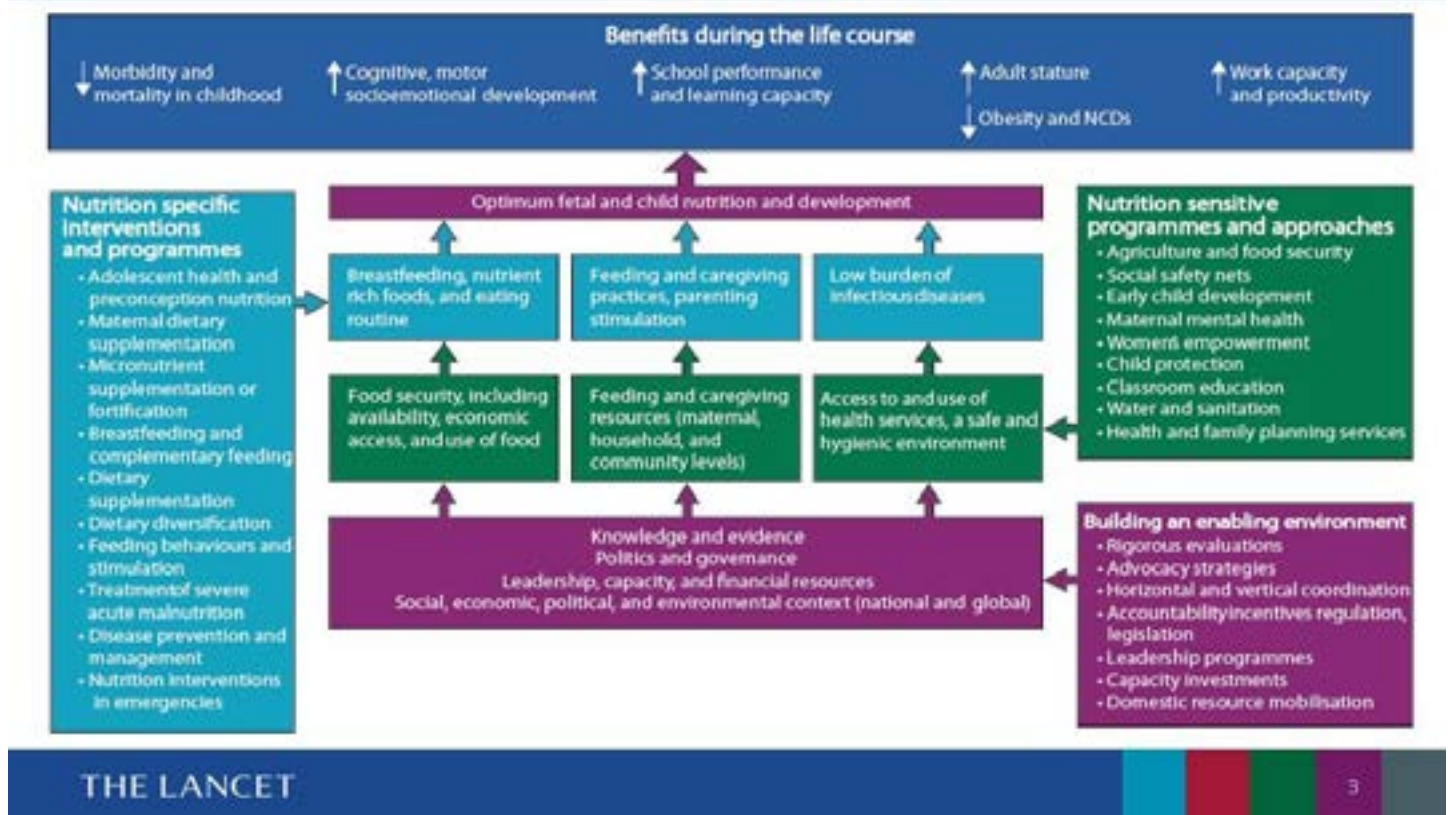
The analysis of nutrition budget allocations considers the different programmes directly contributing to nutrition outcomes, as indicated in the budgets of; (i) the Ministry of Health (MINISANTE), (ii) Rwanda Biomedical Centre (RBC), (iii) the Ministry of Agriculture (MINAGRI), (iv) Rwanda Agriculture Board (RAB), (v) the Ministry of Local Government (MINALOC), (vi) the Ministry of Gender and Family Promotion (MIGEPROF) and (vii) the National Child Development Agency (NCDA). Identification of institutions contributing to nutrition outcomes was guided by the Lancet Framework as illustrated under **Figure 3**.

The “**nutrition-specific**” budget line items are those reflecting a nutrition department, programme, or intervention. The interventions under this stream address the immediate determinants of foetal and child nutrition and development, such as those ensuring adequate food and nutrient intake, feeding, caregiving and parenting practices, and low burden of infectious diseases.

To be “**nutrition-sensitive**”, budget line items need to include a programme that addresses the underlying causes of malnutrition, one especially beneficial to the most vulnerable populations including children and women. The interventions under this category address the underlying determinants of malnutrition such as agriculture, food systems, education, social protection, and mode of delivery of nutrition-specific interventions such as supply chains of micronutrients.

Figure 3: Lancet Framework for Nutrition

Framework for Actions to Achieve Optimum Fetal and Child Nutrition and Development

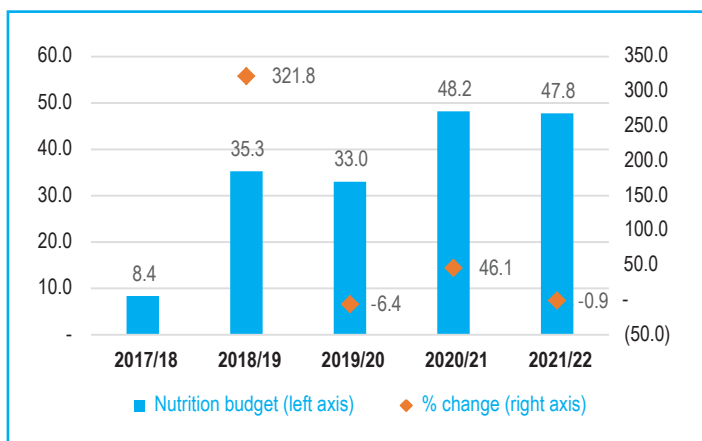


Source: Lancet 2013

2. Trends in Government Spending for the Nutrition Thematic Area

Allocations to nutrition interventions have recorded an upward trend over the past five years. The government's budget allocations to different nutrition-related interventions have increased from FRW 8.4 billion in 2017/18 to FRW 47.8 billion in 2021/22 (Figure 4). The recent increase in budget allocations to nutrition interventions demonstrates a strong commitment by the GoR to invest in actions to eliminate malnutrition, including stunting reduction. The expenditure and institutional review conducted by the World Bank (2020) suggests a need for more budget specifically targeting high-impact interventions to accelerate stunting reduction at scale. As indicated by the World Bank (2020), more focus should be put on; (i) strengthening Vitamin A supplementation among pregnant

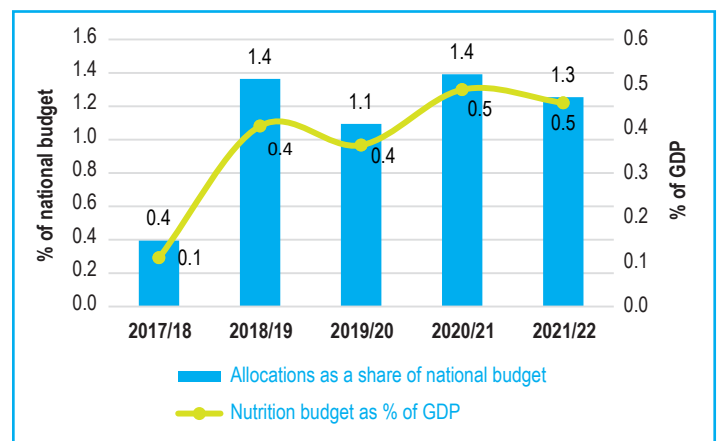
Figure 4: Nutrition budget allocation trends



Source: Calculated using state finance law

mothers, (ii) infant and young child feeding (IYCF) nutrition counselling, and (iii) high-impact behaviour change interventions. **The budget allocated to nutrition as a share of the total national budget shows a fluctuating trend between 2018/19 and 2021/22.** In the current fiscal year, the Nutrition budget accounts for 1.3 per cent of the total national budget (slightly down from 1.4 per cent allocated in 2020/21), while the budget allocation as a share of GDP increased from 0.4 per cent in 2018/19 to 0.5 per cent in 2021/22 (Figure 5). The share of the budget allocated to nutrition needs to be further increased in the medium term to ensure that adequate resources are available to support households achieving best nutrition outcomes.

Figure 5: Nutrition budget trends as % of GDP and of the National budget

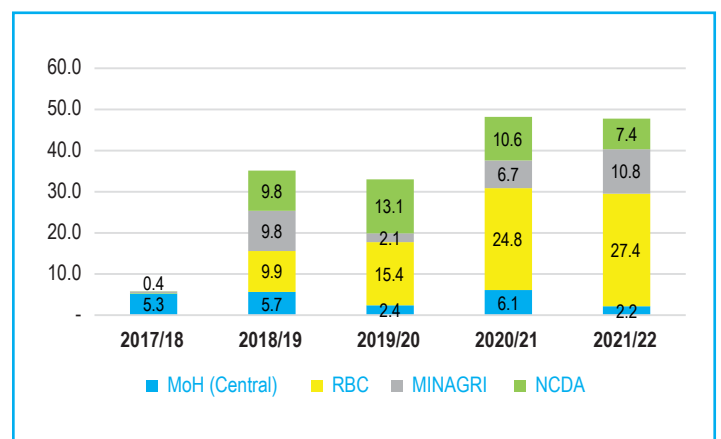


Source: Calculated using State finance laws

3. Composition of the Nutrition Budget

The data show that the majority of the nutrition budget (60 per cent) is allocated under the health sector. In 2021/22, the RBC was allocated FRW 27.4 billion for nutrition interventions including stunting reduction. Further budget for nutrition under health is explained by the fact that most stunting reductions interventions are delivered through health systems; the NCDA was allocated FRW 7.4 billion, down from FRW 10.6 billion in 2020/21. Allocations for the Ministry of Agriculture amount to FRW 10.8 billion, up from FRW 6.7 billion in 2020/21 (Figure 6). While many agencies play an important role in implementing nutrition interventions, either specific or sensitive, the World Bank report (2020) shows an existing coordination challenge to producing dedicated nutrition budgets or spending reports. By leveraging its mandate, the NCDA can help ensure the timely delivery and monitoring of nutrition budgets and spending reports, to drive the efficiency of different public agencies contributing directly to elimination of all forms of malnutrition.

Figure 6: Allocation (%) by spending agency at central level



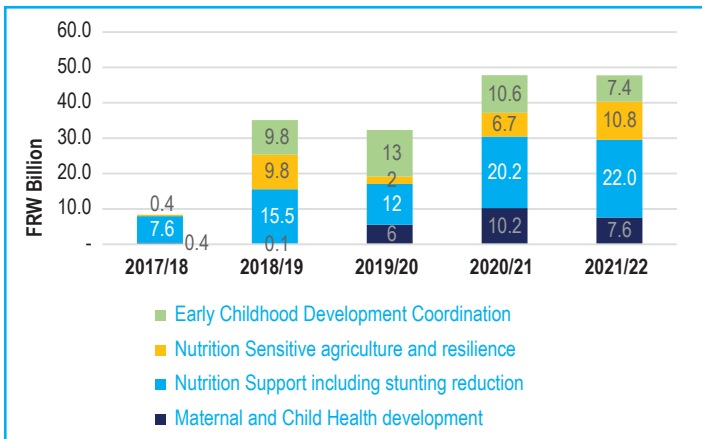
Source: Calculated using state finance law

In 2021/22, the Nutrition support budget programme, which mainly focuses on stunting reduction, was allocated FRW 22 billion, up from FRW 20.2 billion in 2020/21. The budget for Nutrition Sensitive Agriculture and Resilience has also recorded an increase over the past two years, from FRW 6.7 billion in 2020/21 to FRW 10.8 billion in 2021/22. However, allocations for Maternal and Child Health Improvement and Early Childhood Development programmes recorded a reduction. The budget for Maternal and Child Health improvement decreased from FRW 10.2 billion in 2020/21 to FRW 7.6 billion in 2021/22, while the budget for Early Childhood development coordination reduced from FRW 10.6 billion in 2020/21 to FRW 7.4 billion in 2021/22 (Figure 7).

More budget was allocated to nutrition-specific interventions.

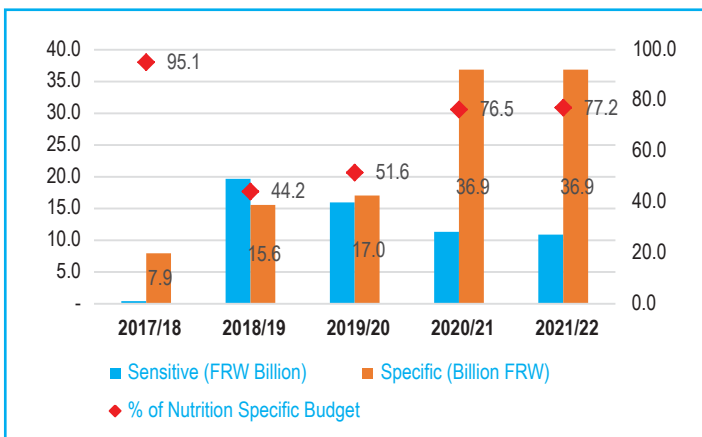
In 2021/22, the GoR has allocated FRW 36.9 billion for nutrition-specific interventions representing 77.5 per cent of the total nutrition budget. The same amount was allocated in the 2020/21 revised budget (Figure 8). The budget for nutrition-specific interventions covers interventions implemented by RBC and NCDA. Integrated planning, budgeting, and reporting needs to be strengthened to ensure that both nutrition-specific and sensitive interventions are allocated adequate budgets to eliminate stunting among children under-5, and nutrition practices are improved among the Rwandan population.

Figure 7: Nutrition programmes (FRW Billion)



Source: Calculated using state finance law

Figure 8: Budget allocations to nutrition-sensitive and- specific interventions



Source: Calculated using state finance laws

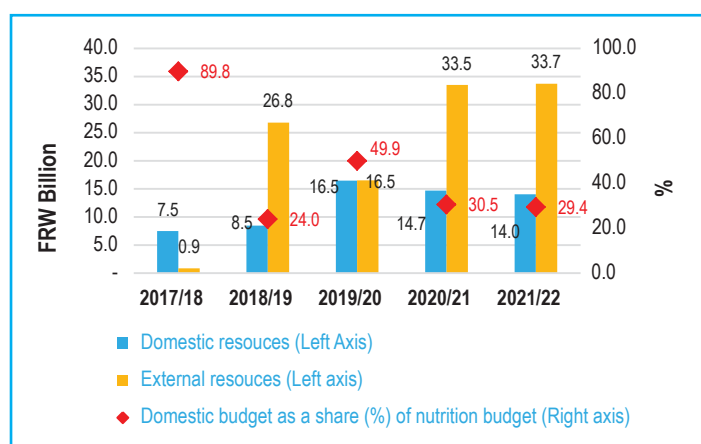


4. Sources of Financing of the Nutrition Budget

For the past four years, the Government of Rwanda has been able to mobilize significant external resources to support nutrition interventions. External financing for nutrition increased from around FRW 900 million in 2017/18 to FRW 33.7 billion in 2021/22, and accounts for 71.6 per cent of the nutrition budget. Domestic resources have nominally increased from FRW 7.5 billion in 2017/18 to FRW 14.0 billion in 2021/22, reflecting an increase of 87.0 per cent (Figure 9). While there has been commendable progress in mobilizing external resources for nutrition, there is a need to mobilize more domestic resources allocated to stunting reduction to strengthen the sustainability of interventions and mitigate the phasing out of external financing.

The main development partners supporting nutrition in Rwanda are the World Bank, USAID, JICA, the Netherlands, Switzerland, the UK Foreign, Commonwealth and Development Office (FCDO), the European Union, UN Agencies and Non-Government organizations.

Figure 9: Financing sources of the nutrition budget

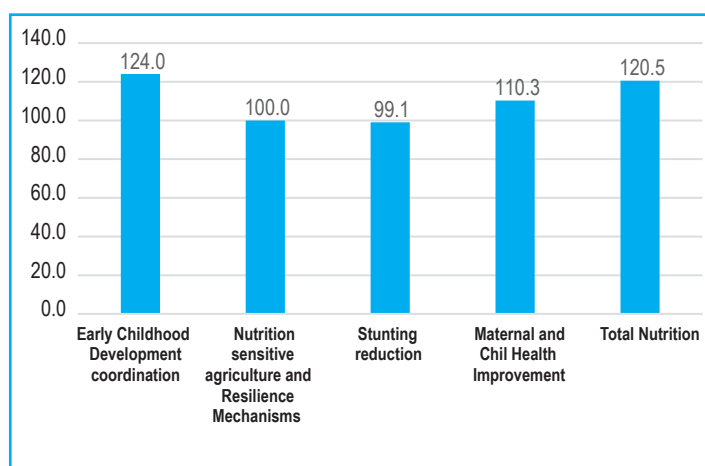


Source: Calculated using state finance law

5. Execution of the Nutrition Budget

There is a high budget execution rate across nutrition-related programmes. The available data on budget execution show that, in total, the budget for nutrition interventions was executed at 120.5 per cent in 2020/21. The Early Childhood Development coordination programme recorded overspending up to 124.0 per cent, the Maternal and Child Health improvement programme budget was executed at 110.3 per cent, the Nutrition Sensitive Agriculture budget at 100 per cent, and the Stunting Reduction budget at 99.1 per cent (Figure 10).

Figure 10: National budget execution rate (%)



Source: MINECOFIN budget execution reports



6. Recent Policy Issues around Nutrition

In August 2020, the National Early Childhood Development Programme (NECDP) was merged with the National Children Council (NCC) to form the National Child Development Agency. The NCDA is mandated by the Government of Rwanda to; (i) to coordinate efforts for stunting reduction and elimination of all forms of malnutrition with focus on young children, (ii) coordinate early childhood development (ECD) programmes, and (iii) protect children and eliminate all forms of violence.

In July 2021, the Ministry of Gender and Family Promotion finalized the development of guidelines for nutrition budget tagging and monitoring which aims to mainstream Nutrition into institutional budgets and easily track budget allocation to nutrition interventions

across different implementing agencies, including the Districts. The Ministry of Finance and Economic Planning has also issued an instruction to all Chief Budget Managers to ensure that the nutrition budget is properly mainstreamed in their plans and that proper budget tags are assigned.

Along with requirements for Institutional reforms, nutrition budget tagging has increased the demand for reporting and coordination. This will require adequate capacities at NCDA and within social sector ministries and Districts to achieve the target for nutritional outcomes, and more investments are needed to build capacity amongst key government officials from social sectors and decentralized entities.



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