

## Predictions on Stunting in Rwanda (2015-2020)

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### Rwanda Demographic & Health Indicators Between 2015 and 2020

#### Achievements and Priority Issues

##### Trends in Nutritional Status of Children

*(Rwanda DHS 2000 – DHS 2019/20)*

- **Percent of Children Under 5 Years of Age**
  - **Stunted (Too Short for Age):** An average decrease of 1.5 percentage points per year.
    - 2000: 48%
    - 2005: 33%
- **Underweight (Too Thin for Age):**
  - 2000: 20%
  - 2010: 18%

#### Key Findings:

- On average, a reduction of 1.2 percentage points in stunting was observed annually from 2005 to 2020, although the rate of reduction has been slowing down.

#### Trends in Stunting Prevalence (2015-2020)

1. **By Age Group:**
  - Overall stunting decreased from 37.9% in 2015 to 33.1% in 2020.
  - Significant reductions were observed in:
    - Children aged 12-17 months: 8.8 percentage points
    - Children aged 18-23 months: 10.4 percentage points
  - The prevalence of stunting among children under 6 months increased to 16.2%.
2. **By Province:**
  - The Northern Province showed a slight increase in stunting prevalence.
  - The highest prevalence was in the Western and Northern Provinces, while significant reductions occurred in the Southern Province (7.8 percentage points).
3. **By Gender:**
  - Higher stunting rates in boys compared to girls, with a greater reduction in boys (5.7 percentage points).
4. **By Birth Interval:**
  - Stunting reduction was most significant among children born more than 48 months apart (5.6 percentage points).
5. **By Size at Birth:**
  - Children born smaller were more likely to be stunted, with significant reductions noted.

6. **By Maternal Factors:**
  - Lower maternal BMI is linked to higher stunting rates; significant reductions observed among children born to mothers with lower BMI (11 percentage points).
7. **By Residence:**
  - Higher stunting rates were noted in rural areas.
8. **By Education Level:**
  - Lower maternal education levels correlate with higher stunting rates.
9. **By Wealth Quintile:**
  - Poverty plays a significant role, with stunting reduction highest among children in the wealthiest quintile (10.2 percentage points).

### **Predictions for Future Trends**

- **Continued Reduction:** If the current annual reduction rate of 1.2 percentage points continues, stunting rates could decrease to approximately 30% by 2025.
- **Focus on Younger Age Groups:** Increased interventions targeting children under 2 years could further accelerate stunting reductions in the most vulnerable age group.
- **Maternal Health Improvement:** Continued investments in maternal health and nutrition are essential; improving maternal BMI could lead to greater reductions in stunting rates.
- **Education and Awareness:** Enhancing maternal education and awareness regarding nutrition could further decrease stunting prevalence, especially in rural areas.
- **Economic Support:** Continued efforts to alleviate poverty will be crucial, particularly in rural communities, to further reduce stunting rates.