





# **USAID GIKURIRO KURI BOSE**

# INCLUSIVE NUTRITION AND EARLY CHILDHOOD DEVELOPMENT

This activity supports high-quality, integrated, and inclusive nurturing care services through interventions from the household to the national level, and every level in between.

These services include adequate nutrition, responsive caregiving, economic security, and opportunities for early learning, and they incorporate disability services as an integral part of community-based care.

### **OBJECTIVES**

- Strengthen governance, coordination and implementation of the National Strategic Plan for the National Child Development Agency (NCDA) at national, district, sector, cell and village levels:
- Improve access to and availability of quality services that promote inclusive nurturing care; and
- Increase household resources and skills to provide optimal nurturing care and promote healthy growth and development in communities and health facilities.

#### **EXPECTED RESULTS**

- Increase capacity of local civil society for inclusive integrated services;
- Strengthen quality of inclusive health, nutrition, rehabilitation and early childhood services provided through community-based platforms;
- Increase capacity of individuals and families to support healthy behavior that contribute to nurturing care;
- Support a total of 820,000 women of reproductive age with nutrition services; and
- Reach a total of 720,000 children under six years of age with nutrition and early childhood development services.

# **RESULTS ACHIEVED**

- Supported the revision of the District Plan to Eliminate Malnutrition (DPEM) guidelines and scorecard that will guide the coordination, implementation and monitoring of DPEM interventions:
- Supported the development and dissemination of the national multisectoral two-year plan to accelerate the reduction of stunting;
- Supported monthly coordination meetings of Parents Lumières to provide continuous capacity building, ensure monitoring of progress made towards agreed goals, identify good practices, provide coaching, and document key learnings;
- Provided a child scorecards materials package to 2,756 villages across six districts to quickly identify households and areas at risk of child stunting and defining necessary nutrition interventions;
- Developed guides to assist caregivers in conducting parenting sessions and toy-making production;
- Supported the review and revision of existing national Community Based Inclusive Development (CBID) guidelines;
- Provided technical support to develop the Simplified Tool for Early Detection (STED) of impairments with the Rwanda Biomedical Center (RBC);
- Continued livelihoods activities aimed at increasing household resources by creating more Savings and Internal Lending groups, supporting 218,043 members in 8,540 groups;
- Introduced the Community Action Cycle (CAC) in 5 districts with high stunting rates to engage communities to take action to prevent malnutrition and stunting; and
- Distributed 15,594 storybooks and 11,074 different teaching and learning materials to 226 ECD centers in the ten districts.

**BUDGET:** US \$44.4 million: US \$38.7 million from USAID, and US \$5.7 million Catholic Relief Services (CRS) cost-share

#### **DURATION**

October 2021 – September 2026

#### **ACTIVITY LOCATIONS**

Nyabihu, Burera, Rulindo, Nyanza, Nyamasheke, Ngoma, Kayonza, Rwamagana, Kicukiro, and Nyarugenge districts

## **IMPLEMENTING PARTNER**

Catholic Relief Services (CRS) Rwanda

#### **KEY COUNTERPARTS**

Humanity & Inclusion, Umuhuza, Three Stones International, University of Global Health Equity, Caritas Rwanda, YWCA Rwanda, DUHAMIC-ADRI, AEE

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