The Total Fertility Rate

The Total Fertility Rate (TFR) has declined from 6.1 children per woman in the 2005 RDHS to 3.7 children per woman in the 2025 RDHS. Fertility rates continue to be higher among rural women than among urban women. Rural women are expected to have approximately 0.5 more children during their reproductive years compared to their urban counterparts (with TFR of 3.9 and 3.4, respectively). The TFR is the highest in the East province (4.0) and the lowest in Kigali (3.1).

Teenage pregnancy

Overall, 8% of women aged 15-19 have ever been pregnant. Among these, 6% have had a live birth, less than 1% have experienced a pregnancy loss, and 2% were pregnant at the time of the interview. The proportion of teenagers who have ever been pregnant rises rapidly with age, rising from less than 1% at age 15 to 20% at age 19. Teenagers in the lowest wealth quintile tend to start childbearing earlier than other teenagers.

Family Planning

Overall, 69% of currently married women use a method of family planning, with 64% using modern method and 5% using traditional method. Among currently married women, the most popular methods are implants (34%), injectables (14%), and the pill (7%). The contraceptive prevalence rate (CPR) among married women varies with age, rising from 38% among women aged 15-19 to a peak of 75% among women aged 25-29 before declining to 71% among women aged 40-44, and 53% among women aged 45-49.

In Rwanda, 80% of households have access to an improved water source, with urban households having much better access (96%) than rural households (77%).

The most common sources of drinking water in urban households are water piped into the household’s dwelling, yard, plot, or neighbor yard (50%) and public taps or standpipes (26%). Rural households obtain their drinking water mainly from protected wells or springs (36%) and public taps or standpipes (31%).

Sanitation

Nearly three quarters (72%) of households in Rwanda have access to an improved sanitation facility, although access to such facilities is higher in urban (88%) than rural (69%) areas; 25% of households use unimproved sanitation facilities. Nearly two-thirds (64%) of households use a pit latrine with a slab (an improved facility), and 23% use a pit latrine without a slab or an open pit.

Nearly all households in Rwanda with a toilet/latrine facility use a facility that is not in their dwelling but is either in the yard/plot of the dwelling (60%) or elsewhere (37%).

Nutrition

At least 33% of Rwandan children age 6-59 months are stunted (short for their age), 1% are wasted (thin for their height), 8% are underweight (thin for their age), and 6% are overweight (heavy for their height).

Breastfeeding: Nearly all (99%) children born in the 2 years before the survey were breastfed at some point; 81% of children under age 6 months are exclusively breastfed.

Minimum acceptable diet: Only 22% of children age 6-23 months were fed a minimum acceptable diet during the previous day.

Anemia: 37% of children age 6-59 months and 13% of women age 15-49 are anemic.

Nutritional status of women: 6% of women age 15-49 are thin (a body mass index [BMI] below 18.5), while 26% are overweight or obese (BMI ≥ 25.0).

Food security

Results from the 2022 CFSVA have indicated that 20.6 percent of the population in Rwanda is food insecure, of which 18.8 percent are moderately food insecure and 1.8 percent are severely food insecure. National stunting rates have significantly decreased from 34.9 percent in 2018 to 32.4 percent in 2021. Out of this 24.0 percent of children under 5 years of age are moderately stunted and 8.4 percent are severely stunted.

In Rwanda, food insecurity and malnutrition are mainly caused by limited consumption of nutritionally diverse foods. Only 19.5 percent of children aged

between 6 to 23 months receive a minimum acceptable diet (an increase of 2.5 percent compared to 2018), 32.8 percent reach the minimum meal frequency and 42.3 percent obtain the minimum dietary diversity of four food groups consumed.

The Food Balance Sheets (FBS)

In 2024, Rwanda's Dietary Energy Supply (DES) reached 2,328.9 kcal per capita per day, up from 2,289.6 kcal in 2023, representing an increase of approximately 1.7% and reflecting a steady improvement in national food energy availability.

Data sources

Demographic and Health Survey (2025)

Rwanda Food Balance Sheets (FBS) - 2023-24

Comprehensive Food Security & Vulnerability Analysis (CFSVA) - 2024

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