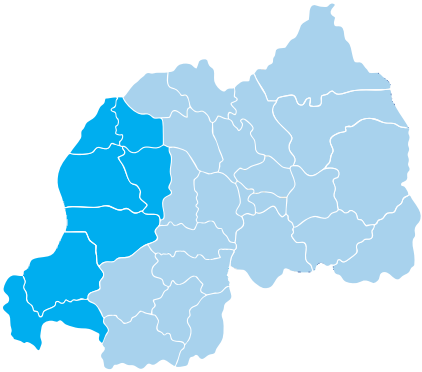
Republic of Rwanda

NISR
NATIONAL INSTITUTE OF STATISTICS OF RWANDA

The RWANDA DHS 7 DEMOGRAPHIC AND HEALTH SURVEY 2025



Western Province

District Profiles Booklet

November 2026

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Table of Content

General Introduction **5**

Key Provincial Indicators 10

Fertility 13

Family Planning 18

Maternal & Newborn care 23

Child Health & Nutrition 30

Adult Nutrition 37

HIV Knowledge 42

Women Empowerment 46

Domestic violence 49

Handwashing & Sanitation 55



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The RWANDA DHS 7 DEMOGRAPHIC AND HEALTH SURVEY 2025

General Introduction



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The RWANDA DHS 7 DEMOGRAPHIC AND HEALTH SURVEY 2025

Survey background

The RWANDA DHS 7 DEMOGRAPHIC AND HEALTH SURVEY 2025

01 History

The 2025RDHS is the 7th demographic and health survey following those conducted in 1992, 2000, 2005, 2010, 2014-15 and 2019-20 as part of The DHS Program.

02 Context

The 2025 RDHS is designed to provide estimates at the national level, urban and rural areas, provinces and for some indicators at district level.

Main Objective



The primary objective of the 2025 RDHS is to provide up-to-date estimates of basic demographic and health indicators.

Sample Design



Sampling Frame
From 2022 (Fifth) Rwanda Population and Housing Census (RPHC)



First Stage: 560 Clusters
Were selected in all districts: 198 in urban areas and 362 in rural areas.



Second Stage: 26 households
Were selected per cluster resulting to 14,560 households countrywide.



women
All aged 15-49
In all selected households.



men
All aged 15-59
In a half of selected households.



Anthropometry for children
All aged 0-59 months in all selected households.



Biomarkers and anthropometry for adult (men and women)
In selected households for men's interview.

Survey response rates by type of interview

Household Interviews

Households selected	Households occupied	Households interviewed	Response rate
14,560	14,434	14,427	99.9

Interviews for Women age 15-49

Eligible women	Women interviewed	Response rate
14,396	14,283	99.2

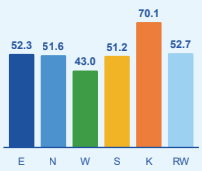
Interviews for Men age 15-59

Eligible men	Men interviewed	Response rate
6,667	6,548	98.2

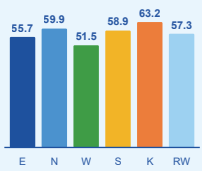
Key Provincial Indicators

Key Indicators Province-Level (RDHS, 2025)

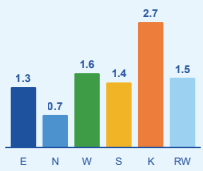
Comprehensive knowledge of HIV
Men 15–24 (%)



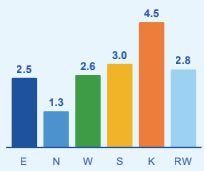
Comprehensive knowledge of HIV
Women 15–24 (%)



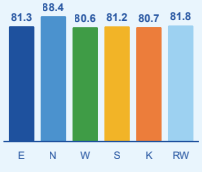
HIV Prevalence
Men (%)



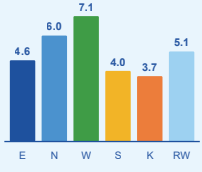
HIV Prevalence
Women (%)



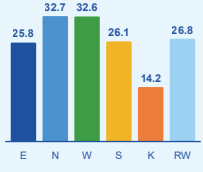
Exclusive breastfeeding
(%)



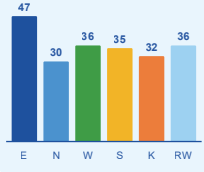
Overweight
Children under 5 (%)



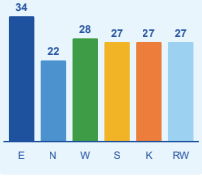
Childhood Stunting
(%)



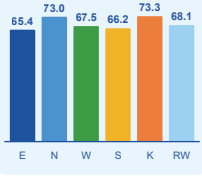
Under-5 Mortality Rate
per 1,000 live births



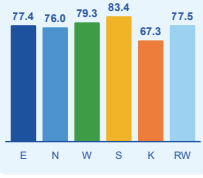
Infant Mortality Rate
per 1,000 live births



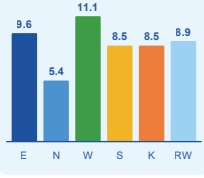
Postnatal Care (PNC)
within two days (%)



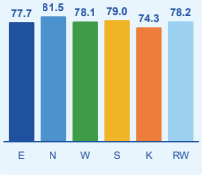
Antenatal Care
ANC 4+ (%)



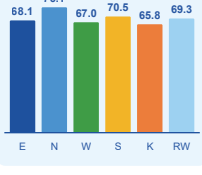
Unmet need for family planning
(%)



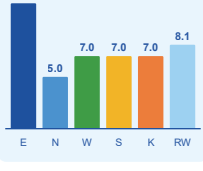
Total demand for family planning
(%)



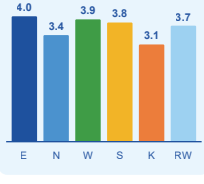
Contraceptive Prevalence Rate
CPR, any methods (%)



Teenage pregnancy
(%)

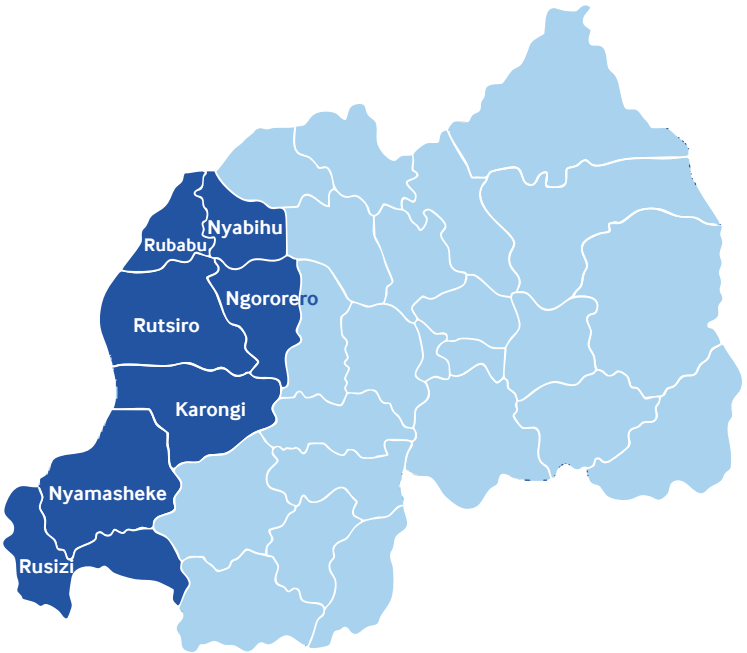


Total Fertility Rate (TFR)
children per woman



Eastern Province | Northern Province | Western Province | Southern Province | Kigali City | Rwanda

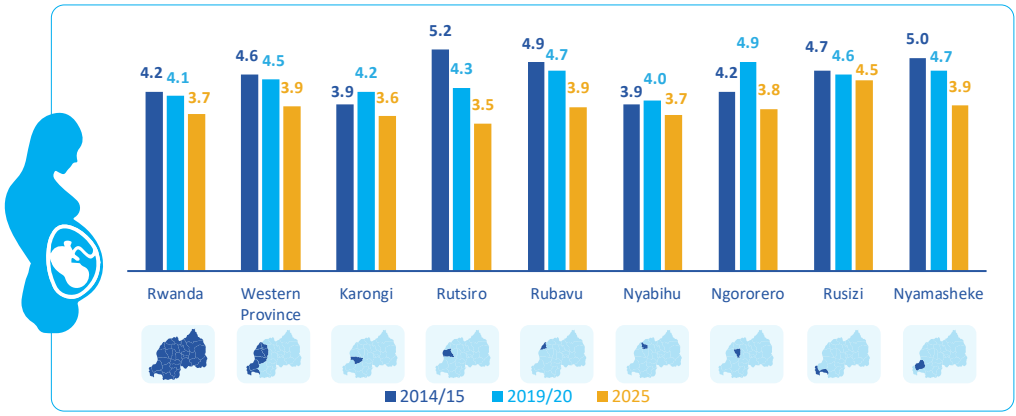
Western Province



Fertility

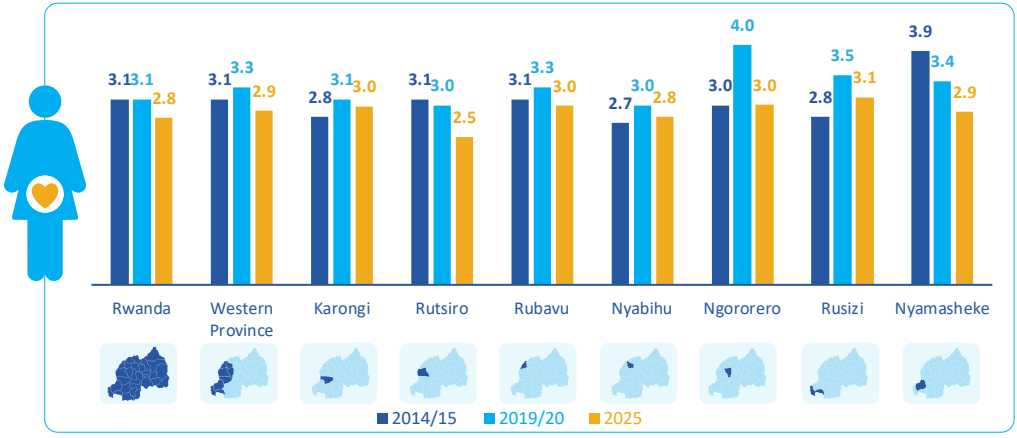


Total Fertility Rate (TFR)



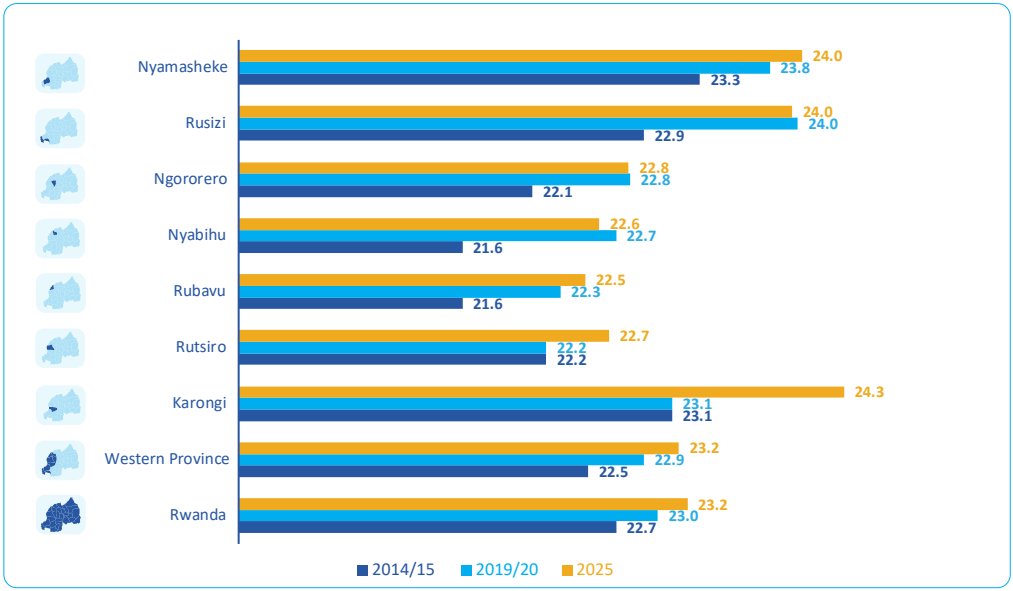
Note: Total Fertility Rate (TFR) is the average number of children a woman would have by the end of her reproductive years if current age-specific fertility rates remained unchanged. These rates are calculated from birth histories for the three years preceding the survey.

Wanted Fertility Rate

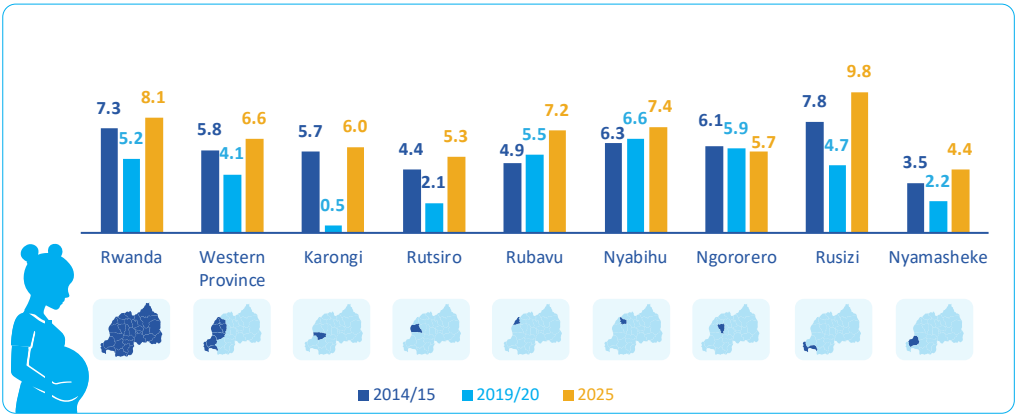


Note: Wanted Fertility rate means the average number of children a woman would have by the end of her reproductive years if she experienced the current age-specific fertility rates, excluding unwanted births

Median Age at First Birth (women 25-49)



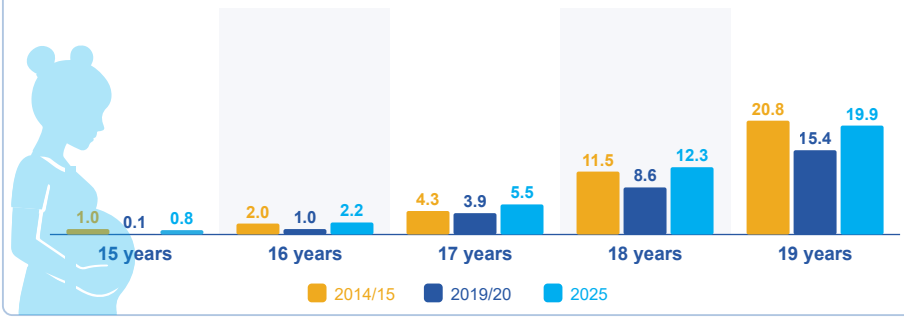
Teenage Pregnancy & Childbearing (women 15-19)



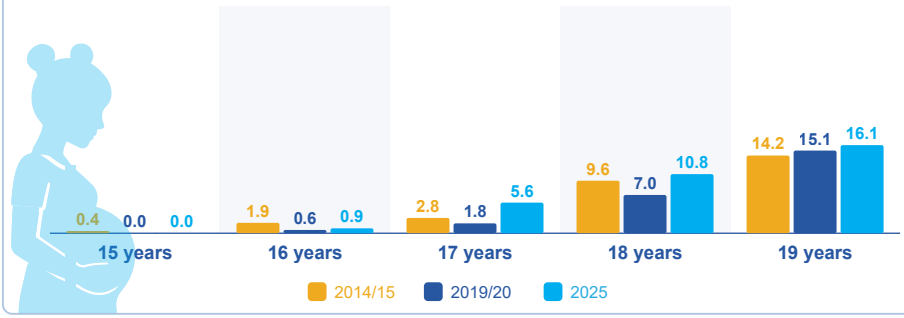
Teenage Pregnancy by Single Age

Percentage of women aged 15–19 years who have ever been pregnant

Rwanda

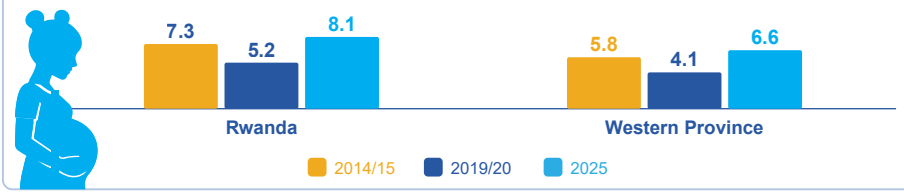


Western Province



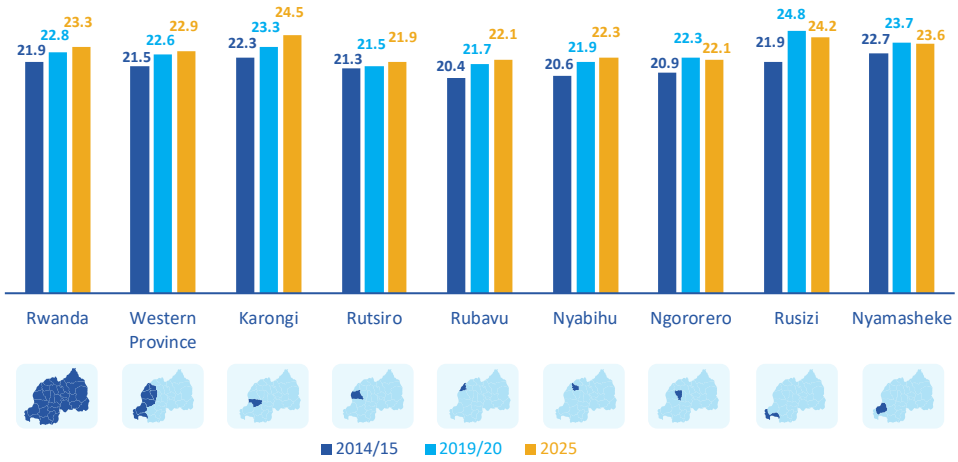
Teenage pregnancy, women 15–19

All ages 15–19 combined (%)

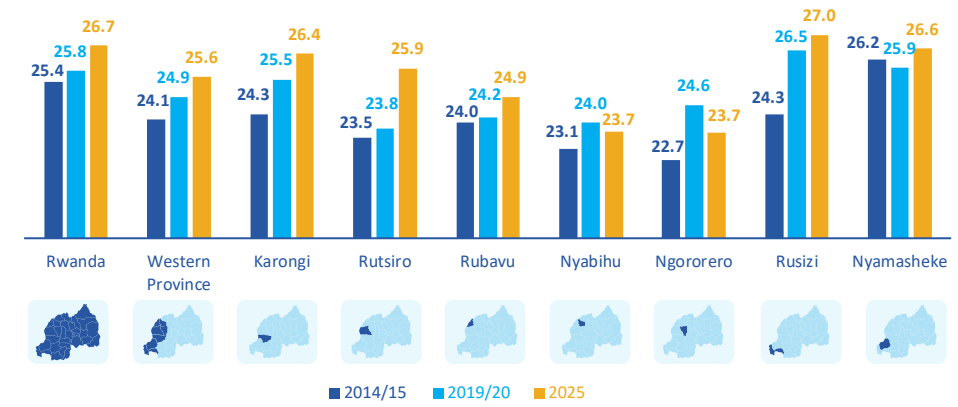


Median Age at First Marriage

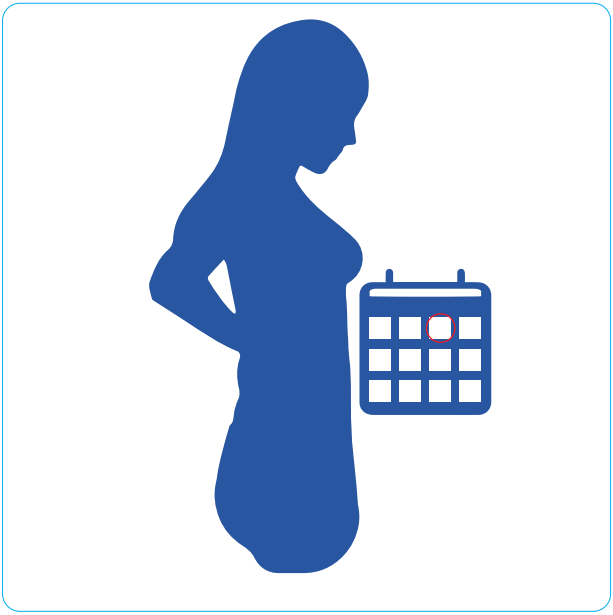
Women (25-49 years)



Men (30-59 years)

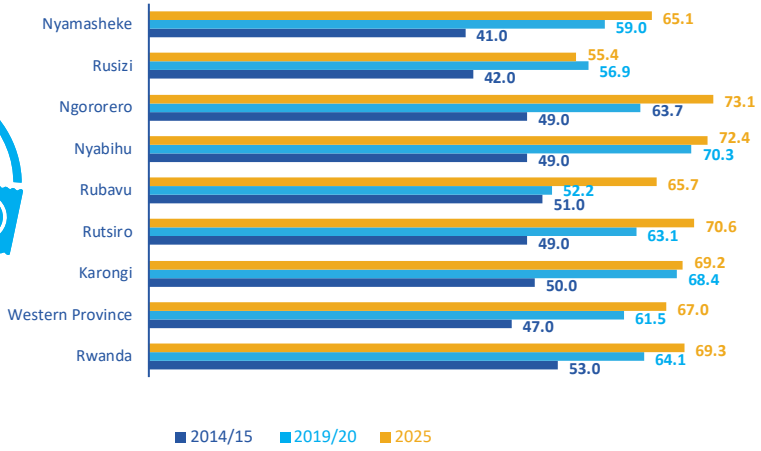


Family Planning



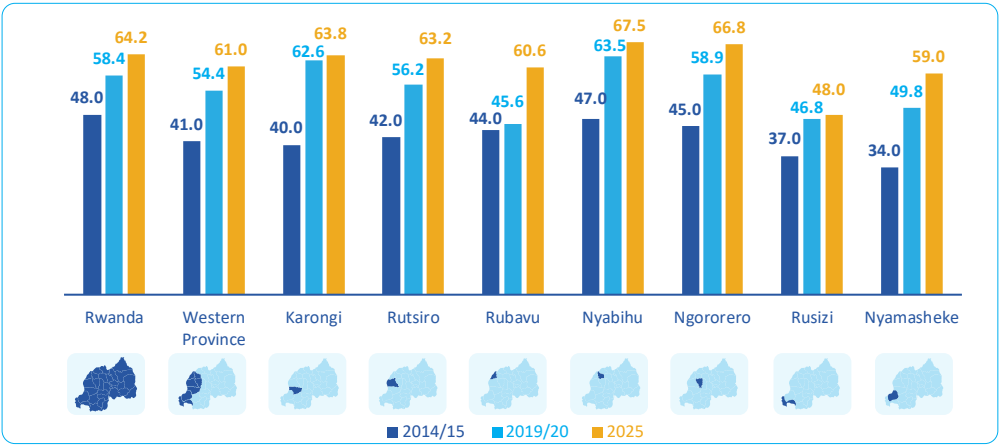
Contraceptive Prevalence Rate (CPR, any method)





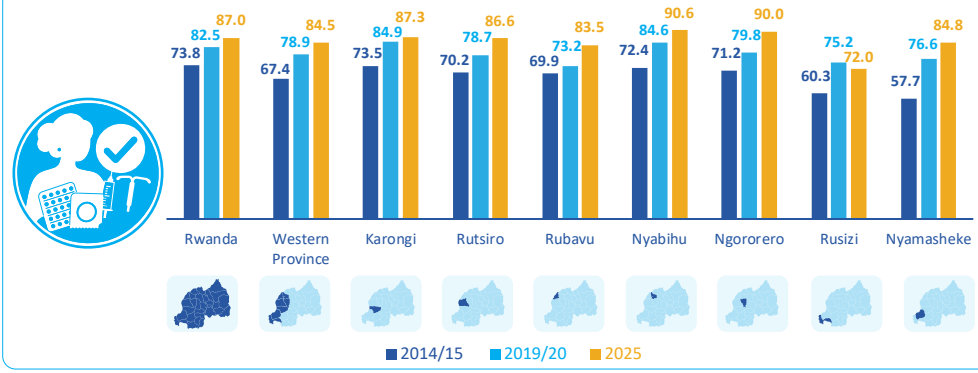
Note: Any method inlcudes: male and female sterilization, intrauterine devices (IUDs), implants, injectables, male and female condoms, contraceptive pills & emergency contraception, the standard days method, the lactational amenorrhea method, Rhythm and Withdrawal.

Currently using modern method (currently married women 15-49)

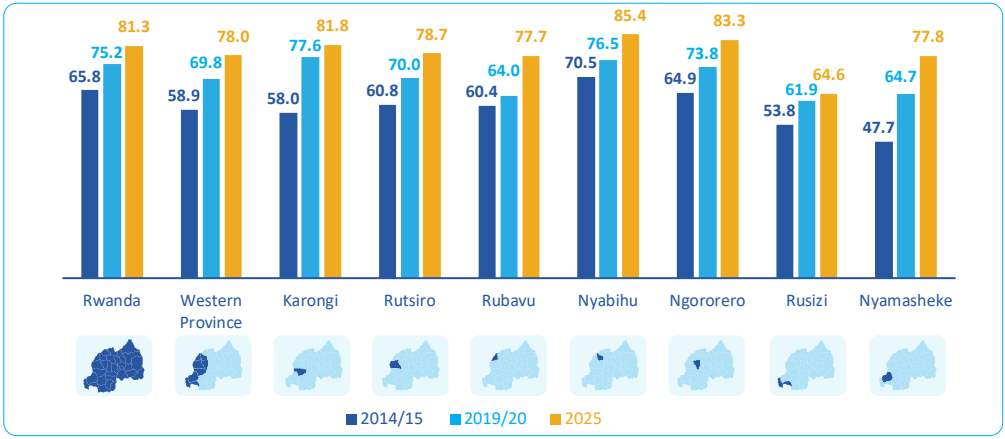


Note: Modern methods Include male and female sterilization, intrauterine devices (IUDs), implants, injectables, male and female condoms, contraceptive pills & emergency contraception, the standard days method, and the lactational amenorrhea method.

Demand Satisfied: Any Method

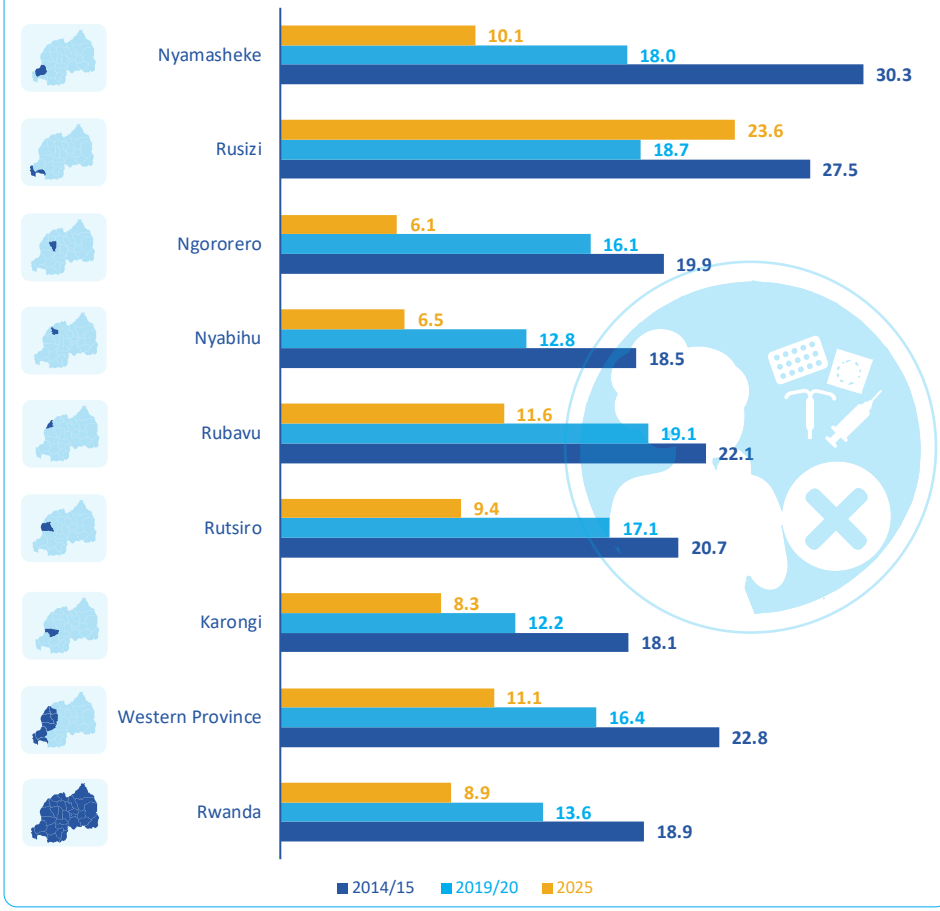


Demand Satisfied: Modern Method



Note: Modern methods Include male and female sterilization, intrauterine devices (IUDs), implants, injectables, male and female condoms, contraceptive pills & emergency contraception, the standard days method, and the lactational amenorrhea method.

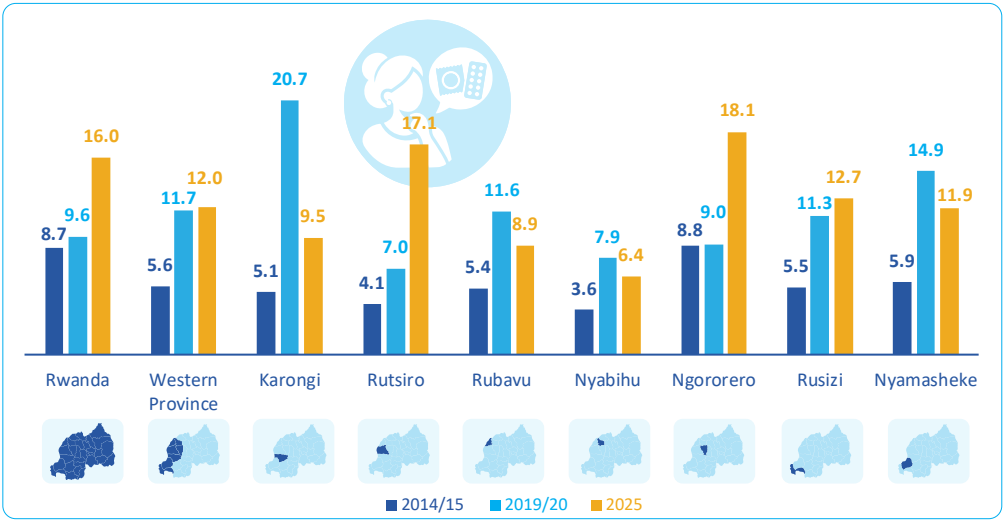
Unmet Need for Family Planning



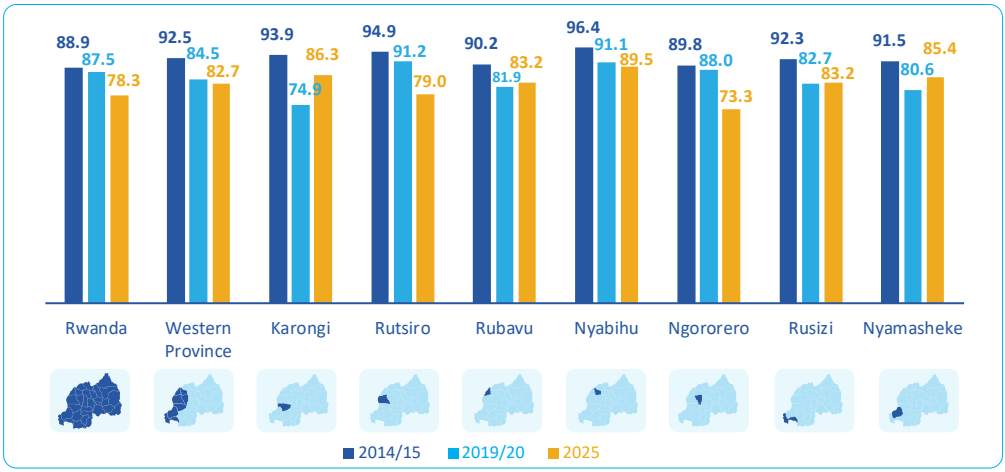
Note: Unmet need for family planning: The percentage of women who are not using contraception but want to delay their next birth by at least two years, are unsure whether or when to have another child, or do not want any more children. It also includes women who are pregnant or have recently given birth when the pregnancy or birth was mistimed or unwanted

Decision Making about Family Planning (currently married women 15-49)

Mainly Wife



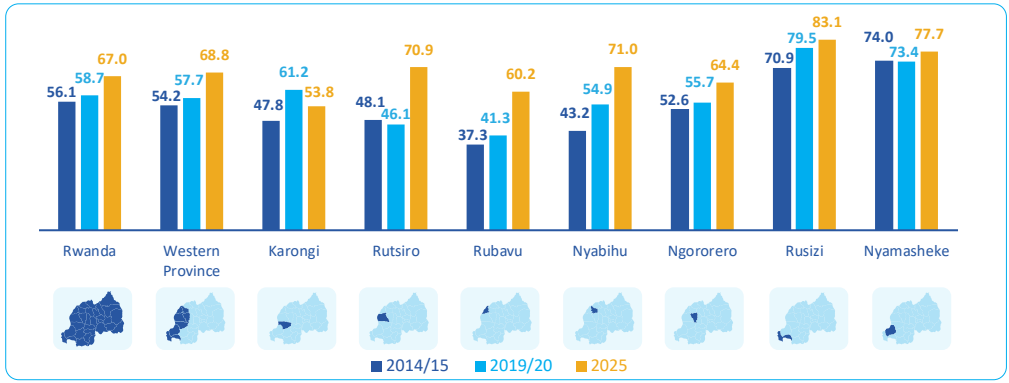
Wife and husband/partner jointly



Maternal & Newborn care

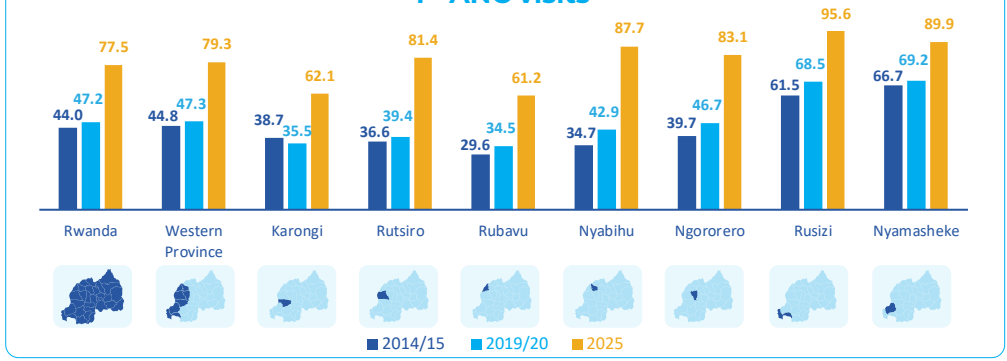


Antenatal Care Visits in First Trimester (<4 months)

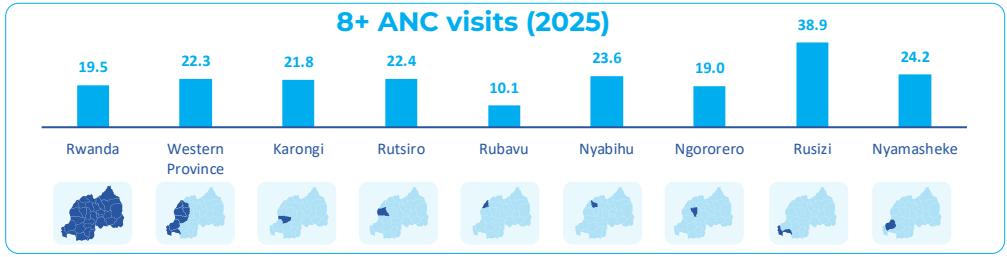


Number of Antenatal care Visits

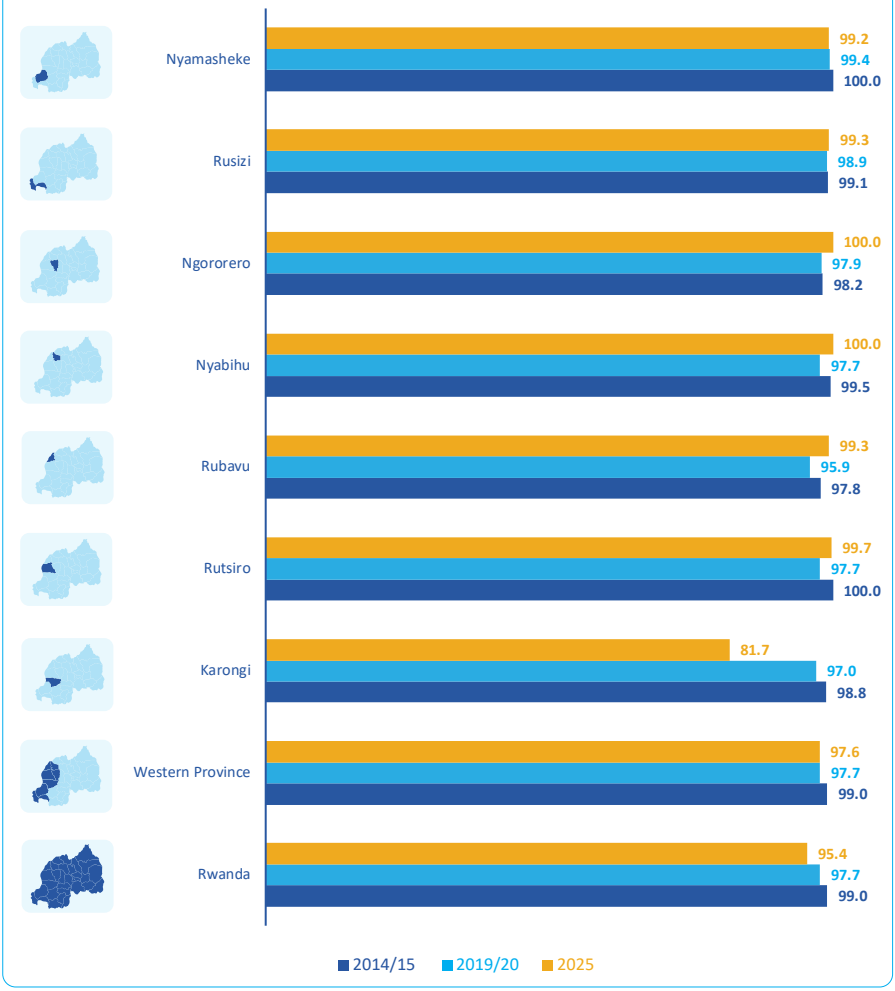
4+ ANC visits



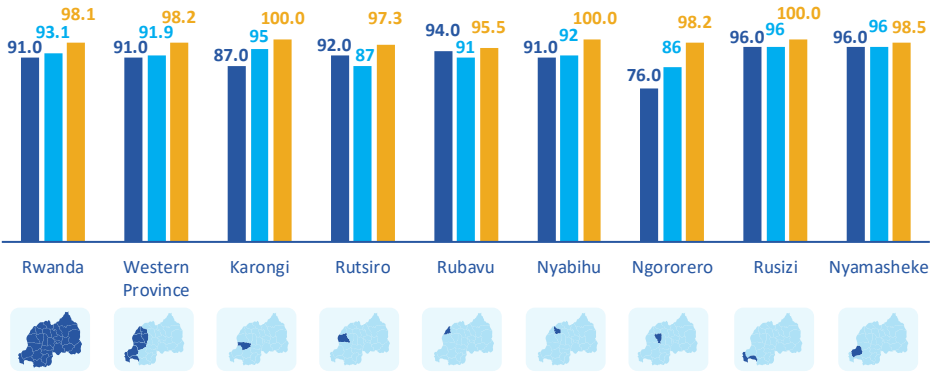
8+ ANC visits (2025)



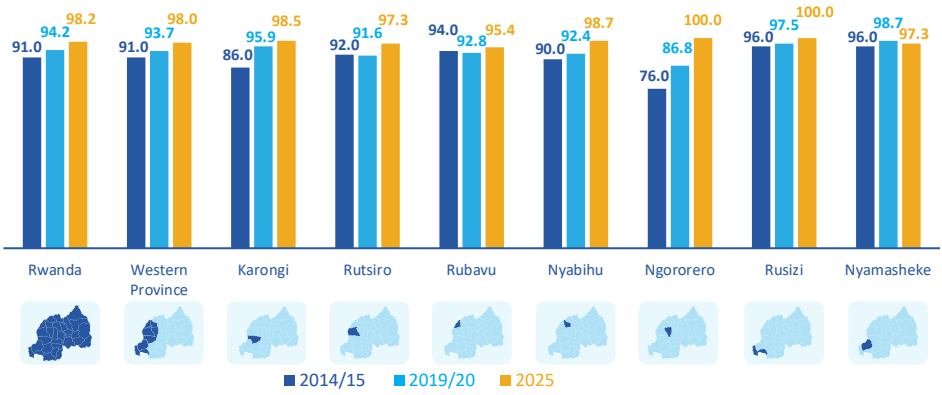
Antenatal Care from a Skilled Provider



Percentage of live births delivered in a health facility



Skilled Assistance at Delivery



Postnatal Care (PNC) within 2 Days

Percentage of mothers and newborns receiving care within 2 days (48 hours) of delivery

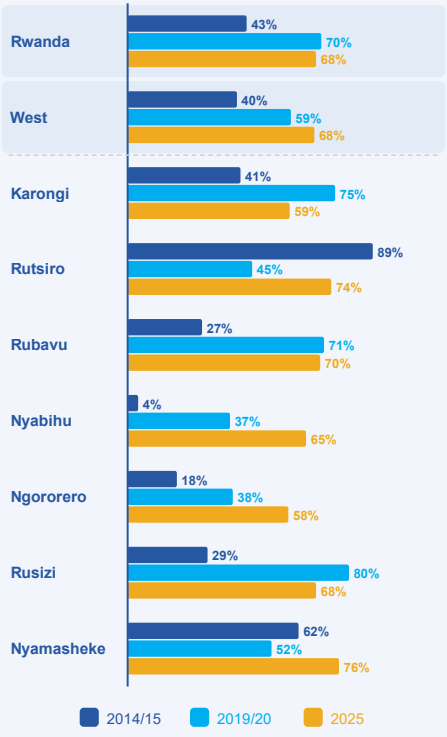
Western Province
2025
Rwanda for comparison

Mother PNC
68%
Rwanda: 68%

Newborn PNC
67%
Rwanda: 72%

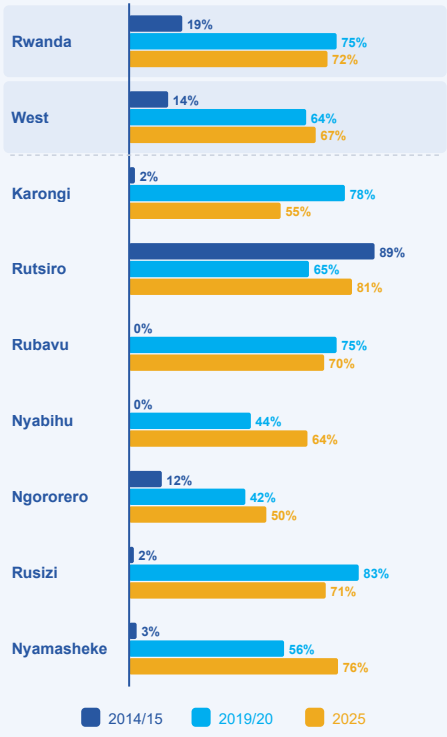
Mother PNC

% receiving care within 2 days of delivery



Newborn PNC

% receiving care within 2 days of birth



1 Strong gains since 2014/15

Newborn PNC in the West rose from 14% to 67%, and mother PNC from 40% to 68%.

2 Still rising since 2019/20

Mothers 59% to 68%, newborns 64% to 67%. Rwanda: 68% and 72%.

3 Top performers

Nyamasheke (76% mothers, 76% newborns) and Rutsiro (74%, 81%) lead in 2025.

4 Districts to watch

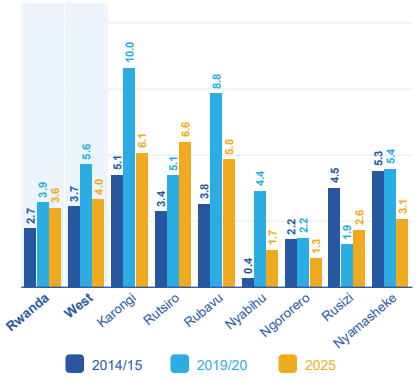
Ngororero (58% mothers, 50% newborns) and Karongi (59%, 55%) have the lowest levels in 2025.

Problems Accessing Health Care

Percentage of women reporting barriers, by province/district and year

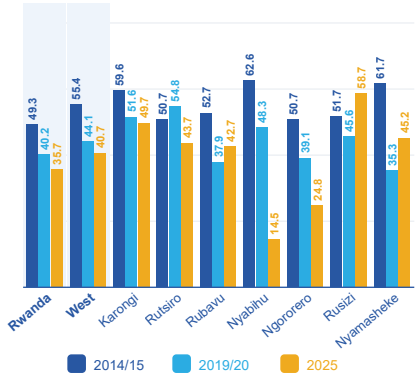
Getting permission to go

% of women reporting this barrier



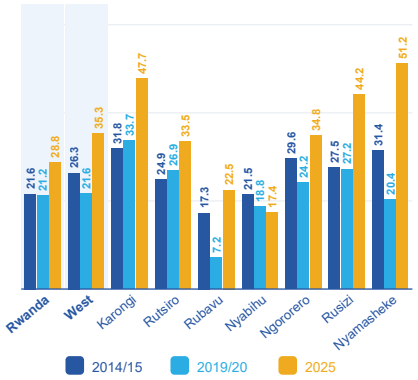
Getting money for treatment

% of women reporting this barrier



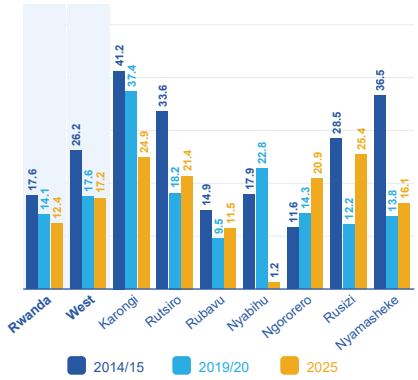
Distance to facility

% of women reporting this barrier



Not wanting to go alone

% of women reporting this barrier



1 Money is the main barrier

40.7% in the West (Rwanda 35.7%). Highest in Rusizi (58.7%), the only district above 2014/15.

2 Distance is rising

35.3% in 2025, up from 21.6% in 2019/20. Nyamasheke 51.2%, Karongi 47.7%.

3 Going alone

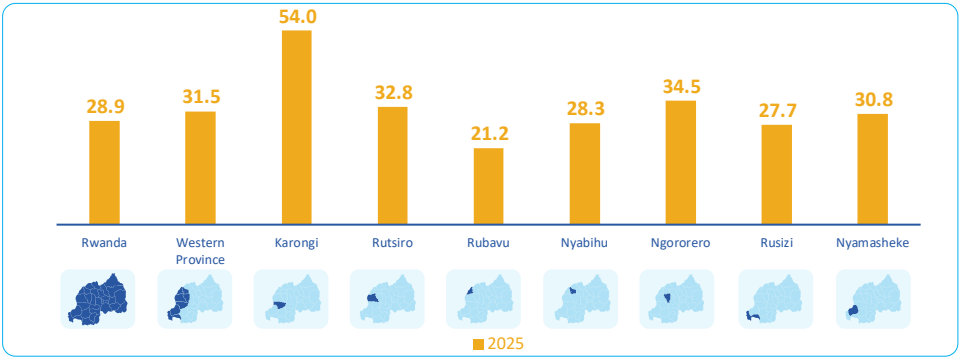
17.2% in the West; highest in Rusizi (25.4%) and Karongi (24.9%), lowest in Nyabihu (1.2%).

4 Permission is less common

4.0% in the West, but 6.6% in Rutsiro and 6.1% in Karongi.



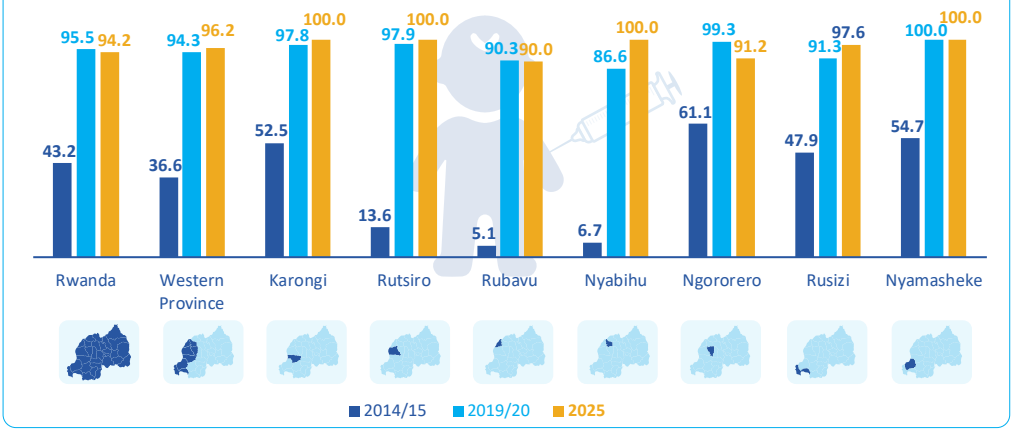
Distance from health facility (1-2 hours / 60-119 minutes).



Child Health & Nutrition

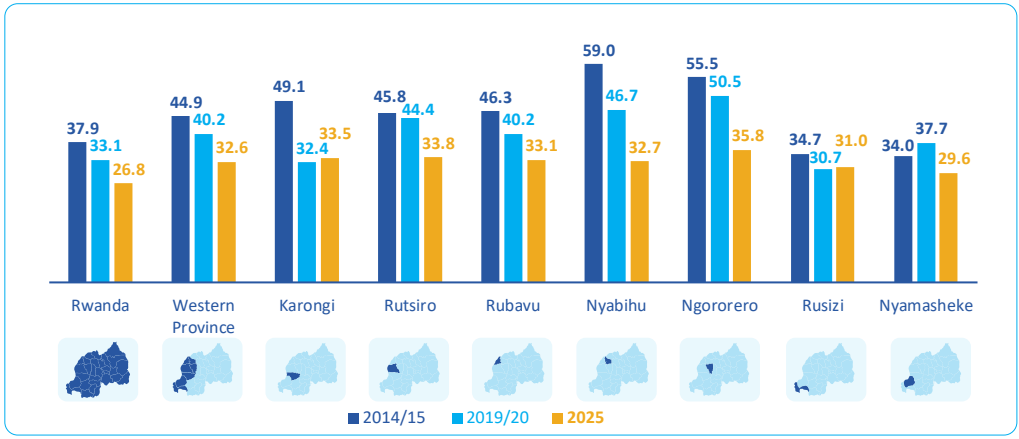


Vaccination Coverage (full basic vaccination)



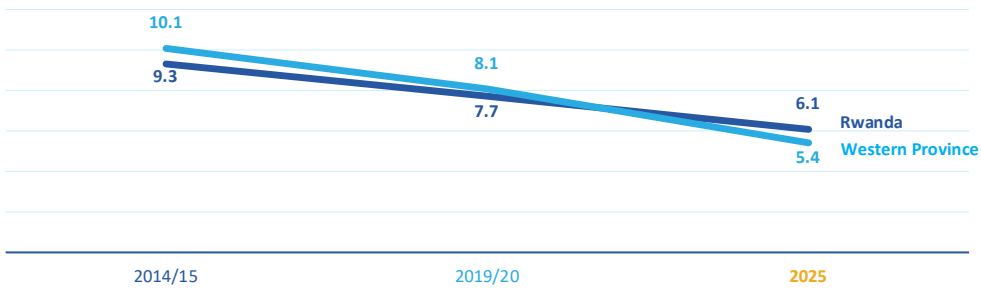
Note: Basic Vaccinations: BCG, three doses of DPT-HepB-Hib, three doses polio vaccine (excluding polio vaccine given at birth), and one dose of measles and rubella

Childhood Stunting (under 5)



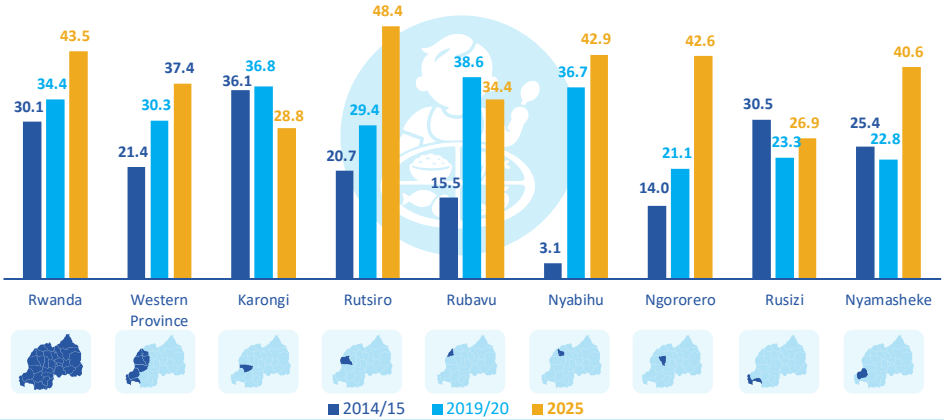
Note: Stunting means too short for their age

Childhood Underweight (under 5)



Note: Underweight means that a child weighs too little for their age

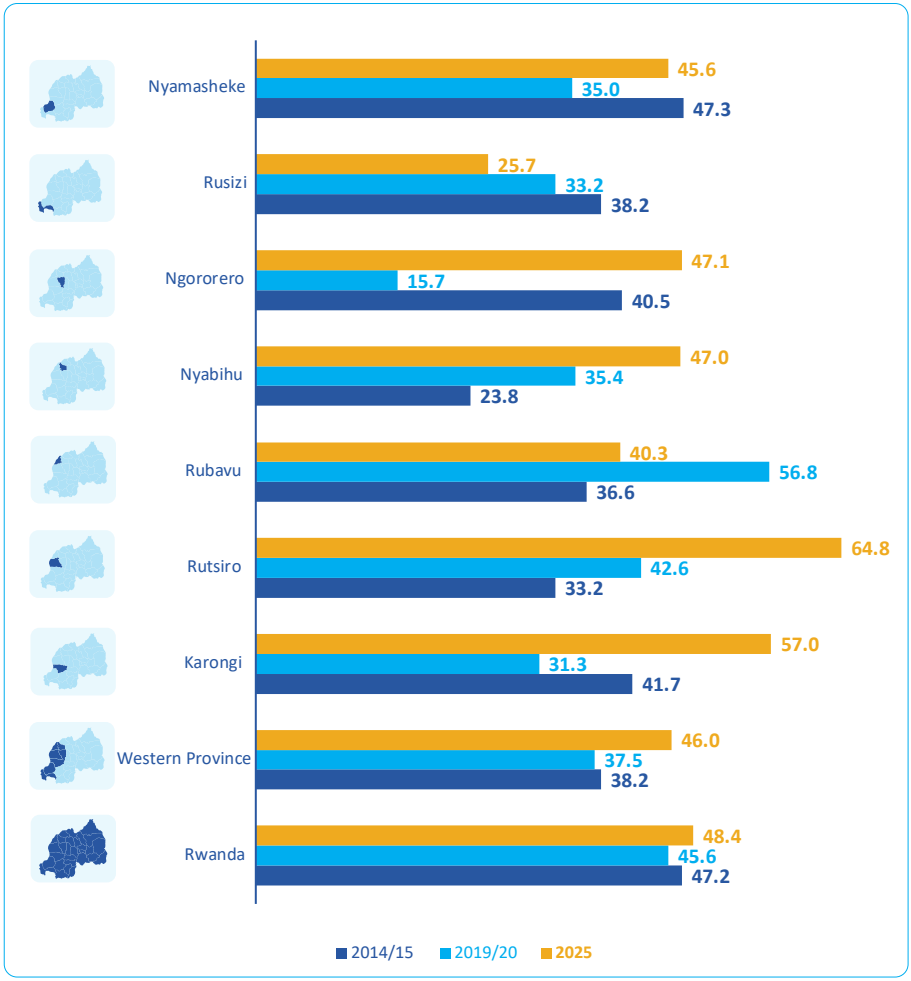
Minimum Dietary Diversity (MDD, children 6-23 months)



Note: MDD: Among youngest children age 6–23 months living with their mother, percentage who consumed foods from at least 5 of 8 food groups in the past 24 hours, whether breastfed or nonbreastfed: 1) breast milk; 2) grains, roots, tubers & plantains; 3) pulses, nuts & seeds; 4) dairy products; 5) flesh foods; 6) eggs; 7) vitamin A–rich fruits & vegetables; 8) other fruits & vegetables.

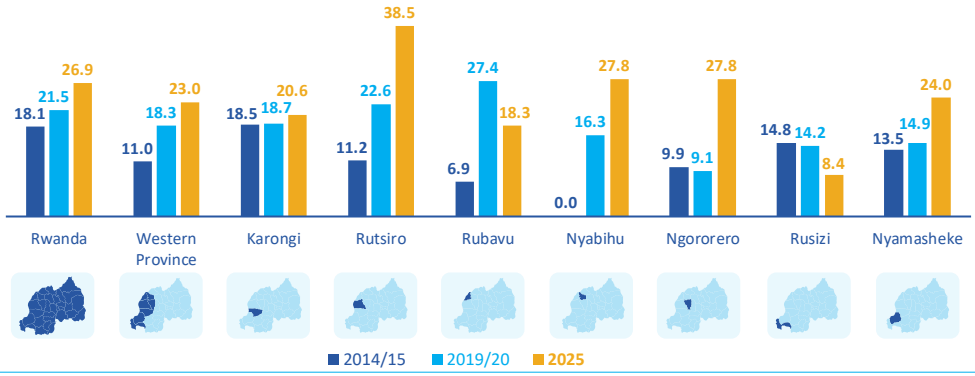


Minimum Meal Frequency (MMF, children 6-23 months)



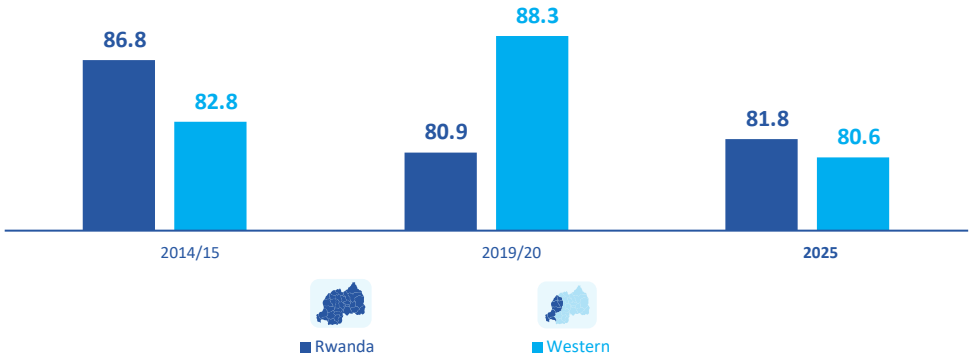
Note: MMF: Among youngest children age 6–23 months living with their mother, percentage fed the minimum number of times per day: ≥2 times (6–8 months) or ≥3 times (9–23 months) of solid, semisolid, or soft food for breastfed children; ≥4 milk or solid/semisolid/soft feeds, including ≥1 solid/semisolid/soft feed, for nonbreastfed children.

Minimum Acceptable Diet (MAD, children 6-23 months)



Note: Among youngest children aged 6–23 months living with their mother, percentage receiving a minimum acceptable diet: defined as meeting both MDD and MMF for breastfed children; and meeting MDD, MMF, and receiving at least 2 milk feeds per day for nonbreastfed children.

Exclusively breastfed



Percentage with symptoms of Respiratory Infection (ARI) Prevalence (under 5)



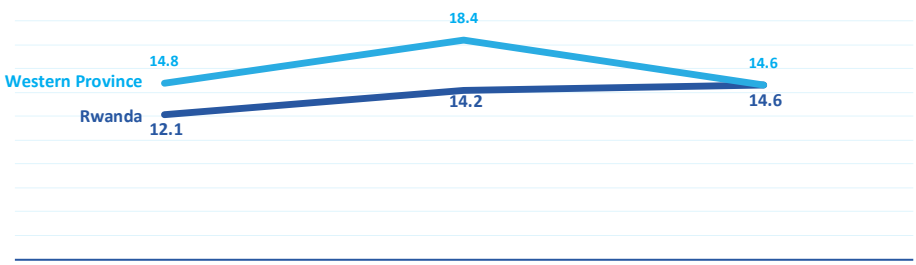
Note: Symptoms of ARI include short, rapid breathing that is chest related and or difficult breathing that is chest related.

Fever Prevalence (under 5)





Diarrhea Prevalence (under 5)



Adult Nutrition



Nutritional Status of Women 15–49

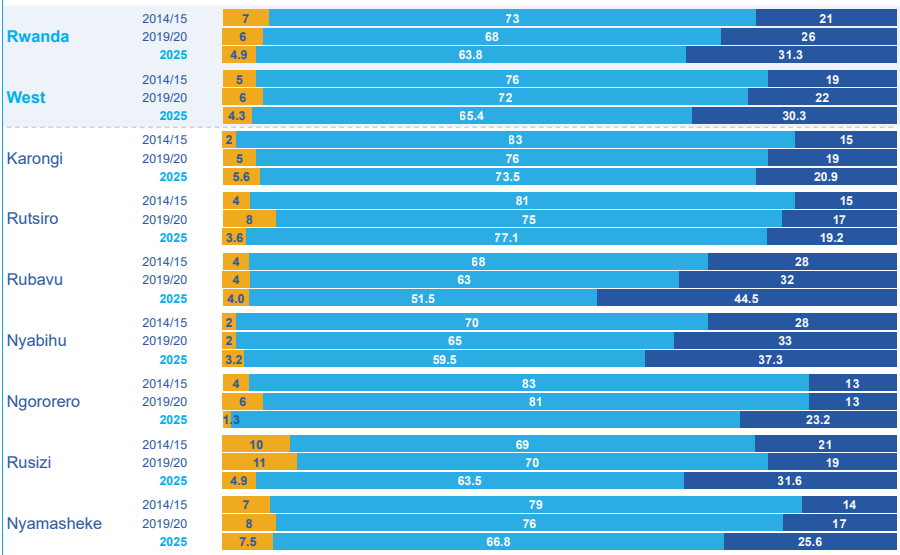
Western Province by district: distribution of women by body mass index (BMI) category

Thin
5% → 4.3%
▼ −0.7 percentage points
Rwanda: 7% to 4.9%

Normal
76% → 65.4%
▼ −10.6 percentage points
Rwanda: 73% to 63.8%

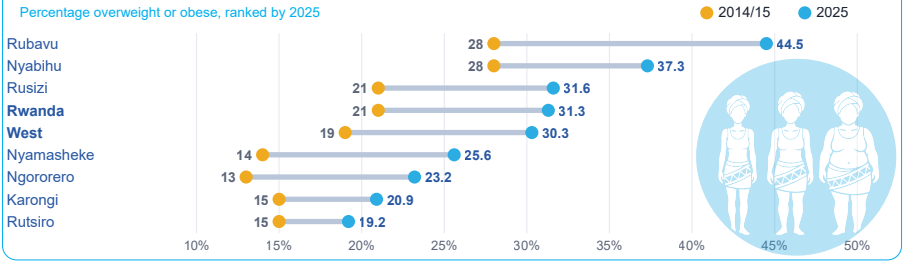
Overweight/obese
19% → 30.3%
▲ +11.3 percentage points
Rwanda: 21% to 31.3%

How the BMI mix has shifted, by area and survey round



Overweight/obesity rose in every district

Percentage overweight or obese, ranked by 2025



Nutritional Status of Men 20–49

MEN

Western Province by district, 2025: distribution of men by body mass index (BMI) category

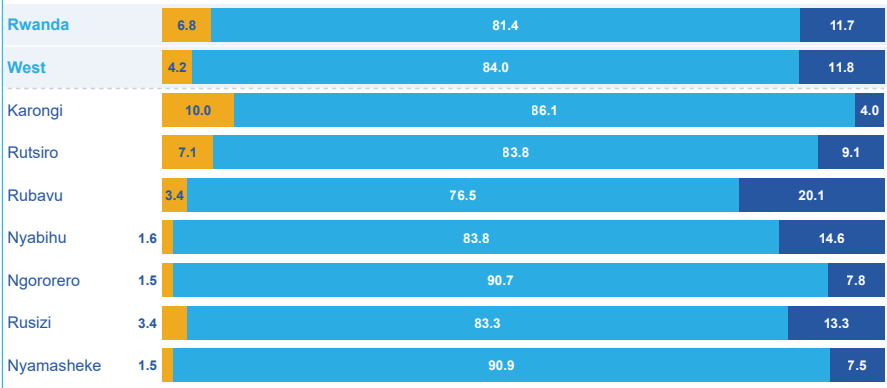
WESTERN PROVINCE AT A GLANCE · 2025

Thin
4.2%
Rwanda: 6.8%

Normal
84.0%
Rwanda: 81.4%

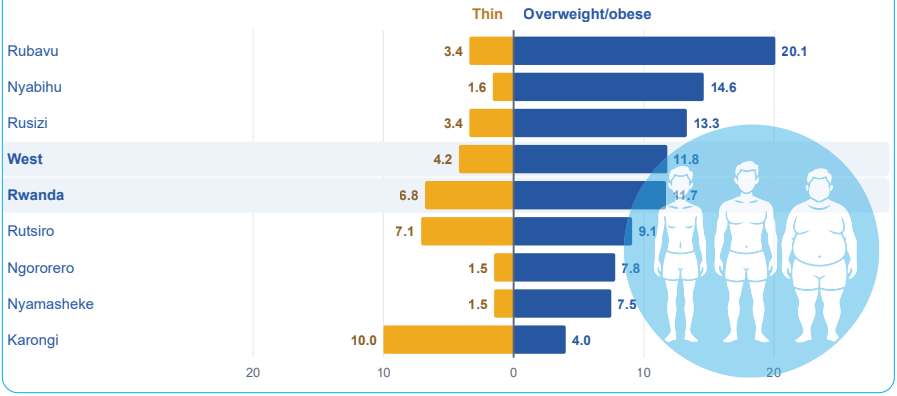
Overweight/obese
11.8%
Rwanda: 11.7%

The BMI mix in each area

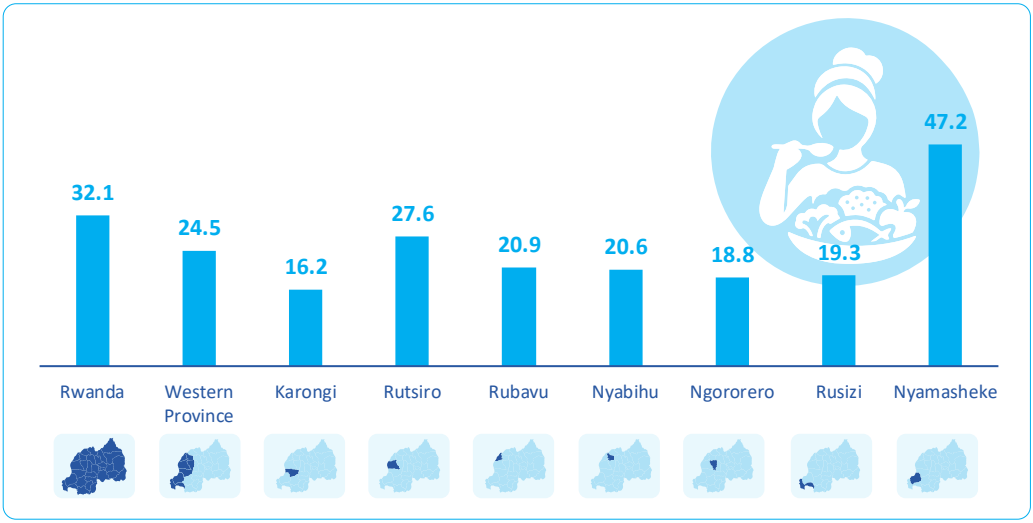


Thin vs overweight/obese, side by side

Karongi is the only district where more men are thin than overweight or obese. Ranked by overweight/obese.

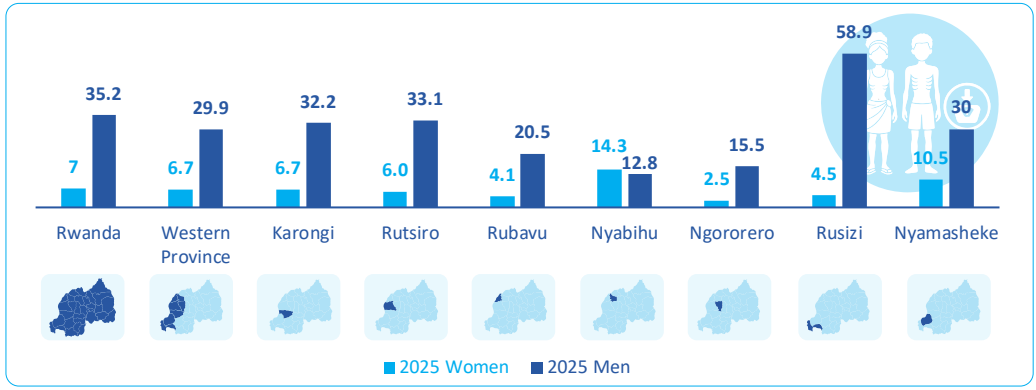


Minimum Dietary Diversity (MDD-W) Women 15-49 (2025)

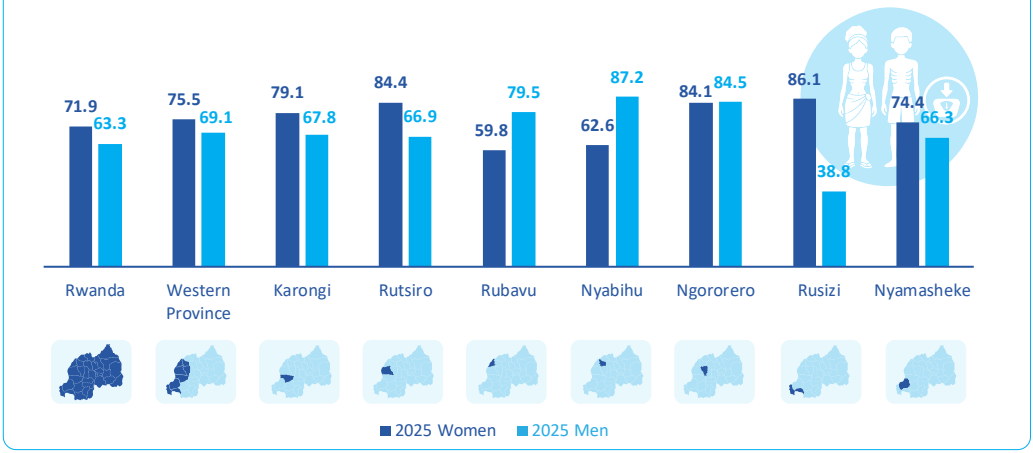


NOTE: Percentage of women consuming at least 5 of 10 defined food groups in the past 24 hours: 1) grains, starchy roots, tubers & plantains; 2) pulses; 3) nuts & seeds; 4) dairy; 5) flesh foods; 6) eggs; 7) dark green leafy vegetables; 8) vitamin A–rich fruits & vegetables; 9) other vegetables; 10) other fruits

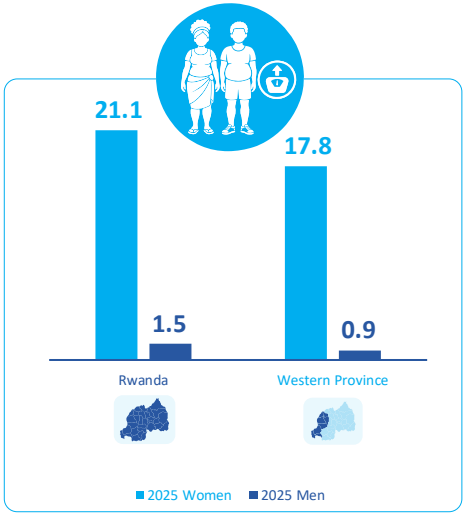
Nutrition Status of Adolescent Women and Men aged 15-19: Thin (BMI <18.5)



Nutrition Status of Adolescent Women and Men aged 15-19: Normal, BMI (18.5-24.9)



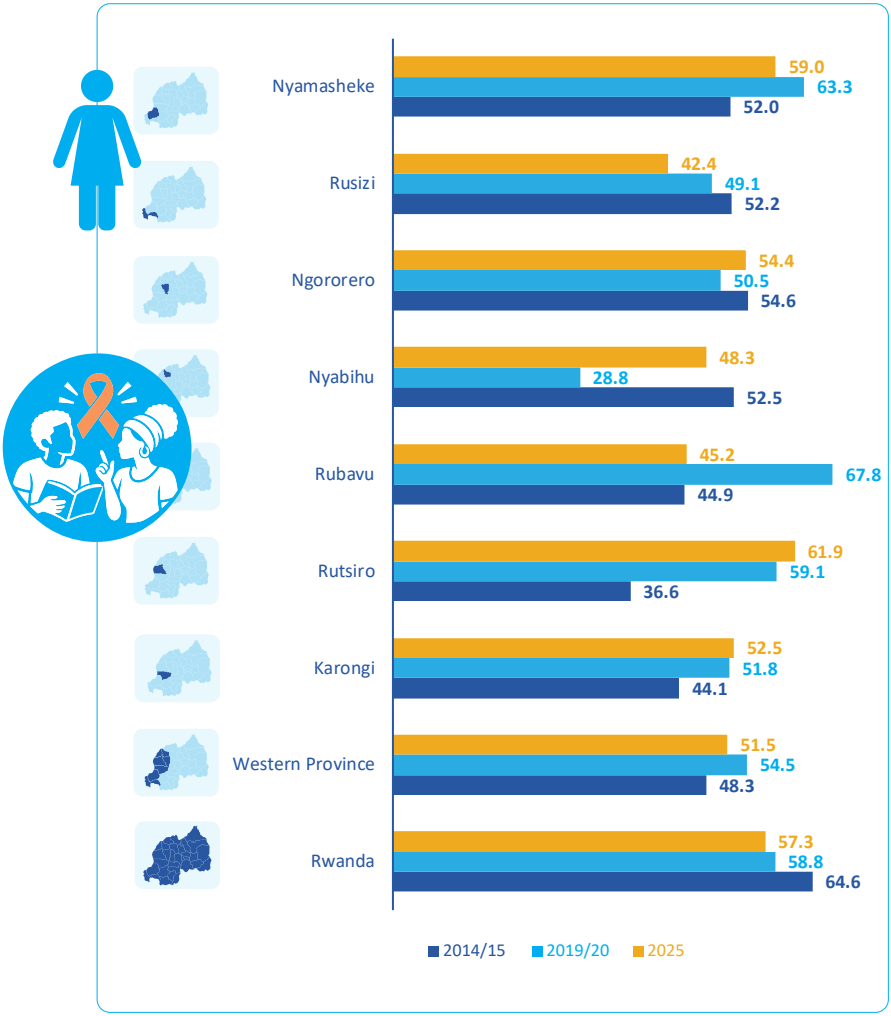
Nutrition status of Adolescent Women 15-19: Overweight/Obese



HIV Knowledge

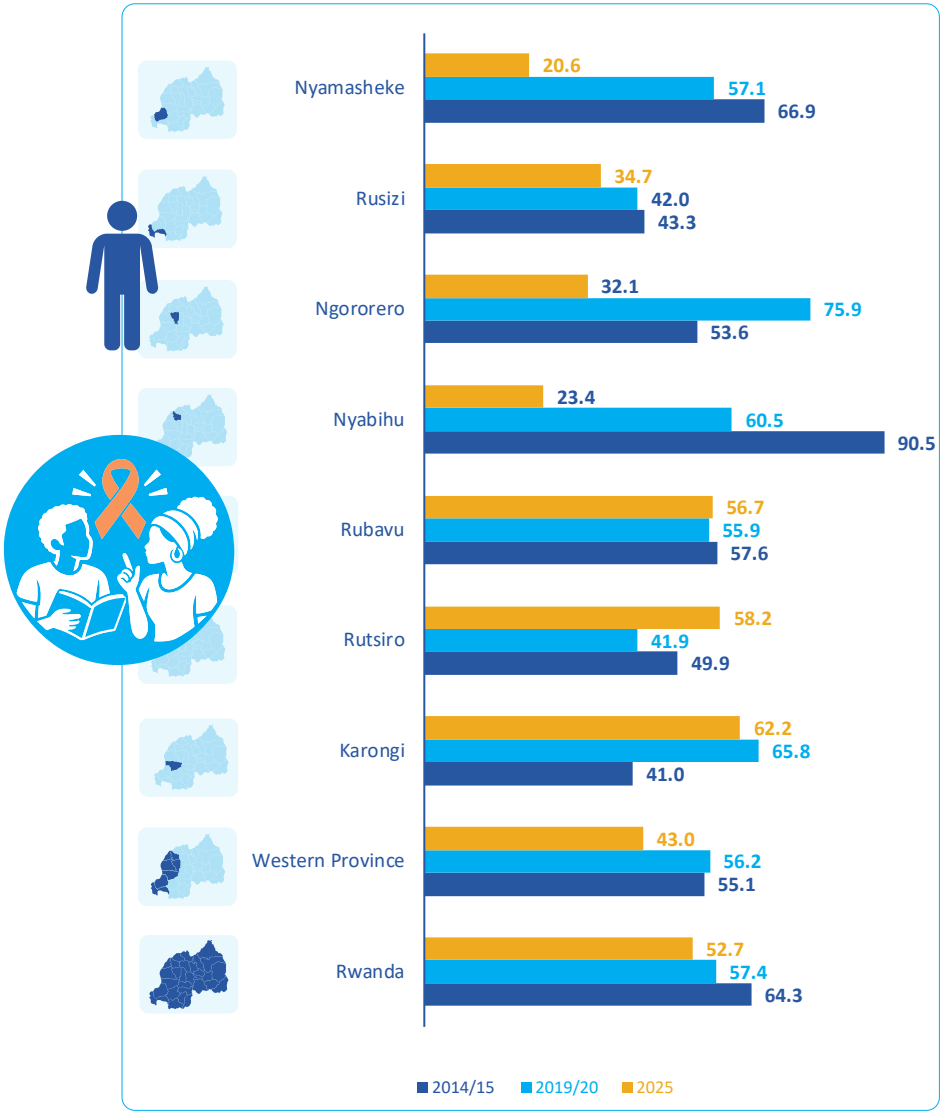


Comprehensive HIV knowledge, women 15-24



NOTE:Comprehensive HIV knowledge : Knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chances of getting HIV, knowing that a healthy looking person can have HIV, and rejecting two major misconceptions about HIV transmission: HIV can be transmitted by mosquito bites and a person can become infected by sharing food with a person who has HIV.

Comprehensive HIV knowledge, men 15-24



NOTE:Comprehensive HIV knowledge : Knowing that consistent use of condoms during sexual intercourse and having just one uninfected faithful partner can reduce the chances of getting HIV, knowing that a healthy looking person can have HIV, and rejecting two major misconceptions about HIV transmission: HIV can be transmitted by mosquito bites and a person can become infected by sharing food with a person who has HIV.

HIV Testing 15–49

Women and men tested in the last 12 months and received their result (%)

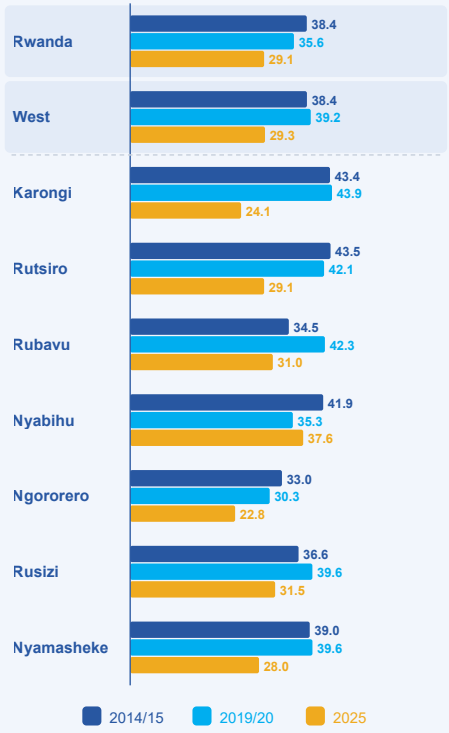
Western Province
2025
Rwanda for comparison

Women
29.3%
Rwanda: 29.1%

Men
19.2%
Rwanda: 21.5%

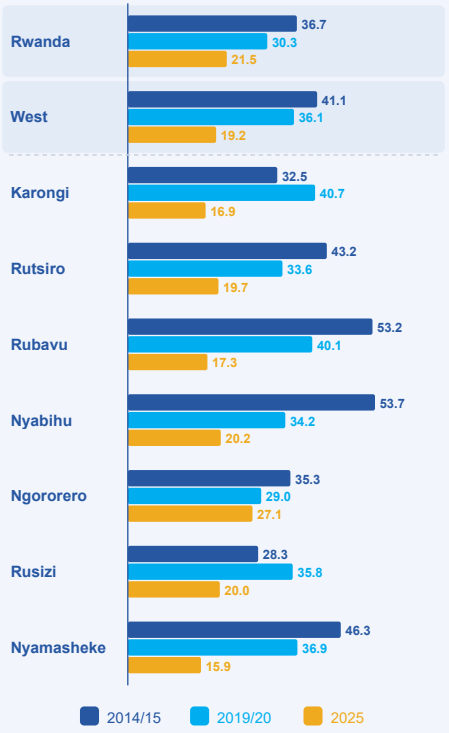
Women (15–49)

% tested and received their result



Men (15–49)

% tested and received their result



1 Testing has declined since 2014/15

In the West, women fell from 38.4% to 29.3% and men from 41.1% to 19.2%. Testing fell in every district for both.

2 Women test more than men

29.3% of women vs 19.2% of men in the West in 2025 (Rwanda: 29.1% vs 21.5%).

3 District differences

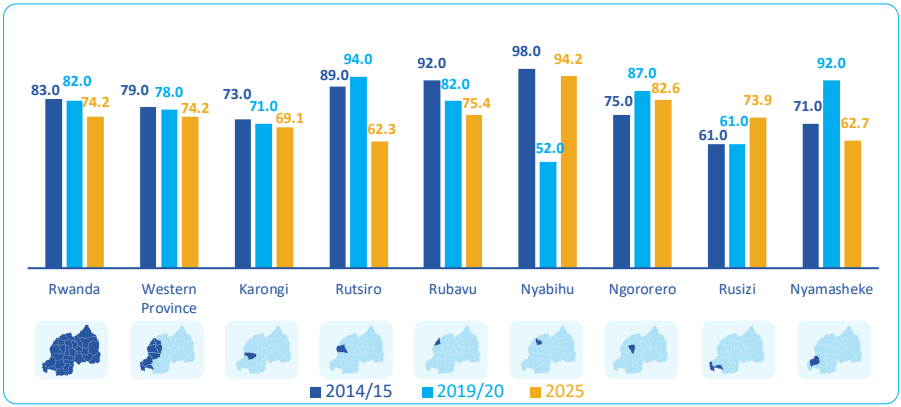
Highest in 2025: Nyabihu for women (37.6%) and Ngororero for men (27.1%), though Ngororero is lowest for women (22.8%). Lowest for men: Nyamasheke (15.9%).

Women Empowerment



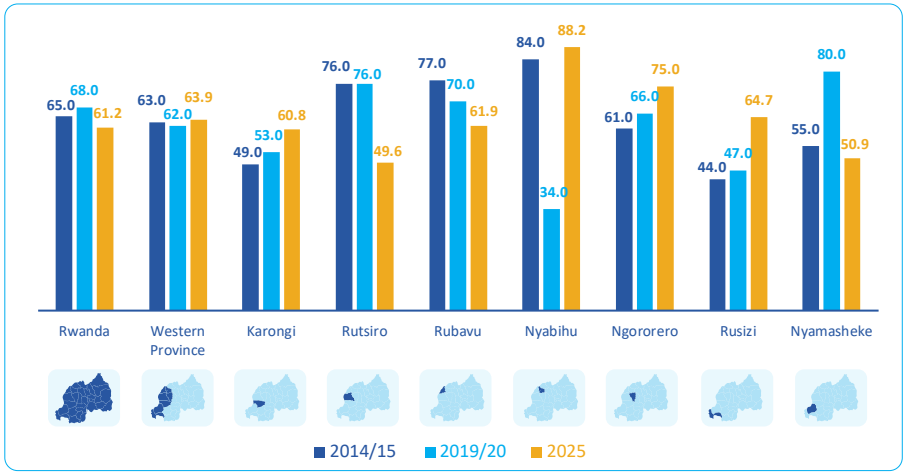


Participates in decisions about her own health care



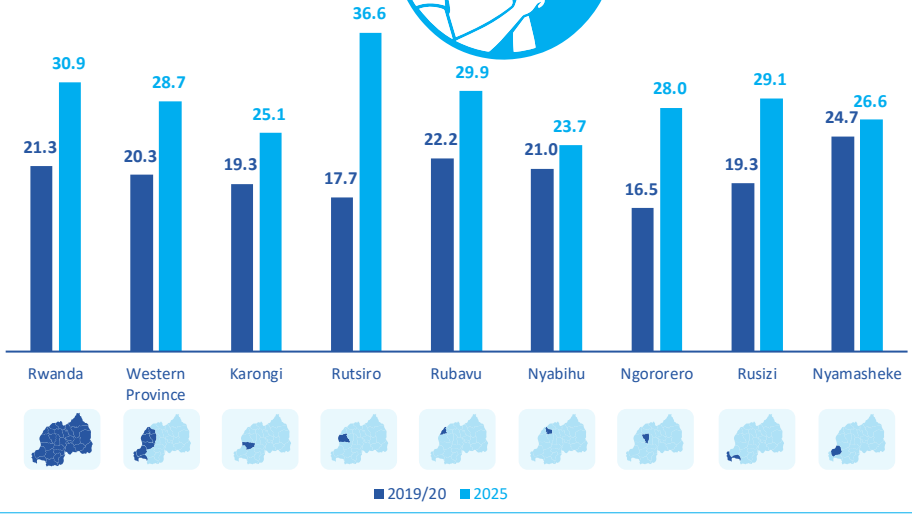


Participates in all three key decisions (own health care, household purchases, family visits)

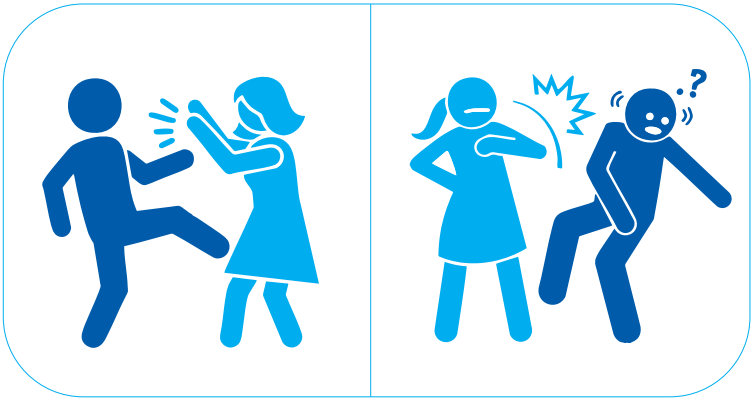


Women with a Bank Account



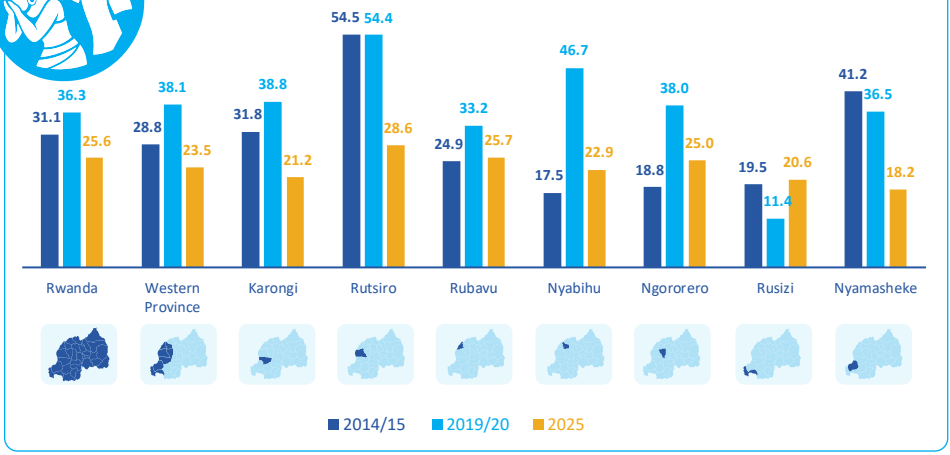


Domestic Violence



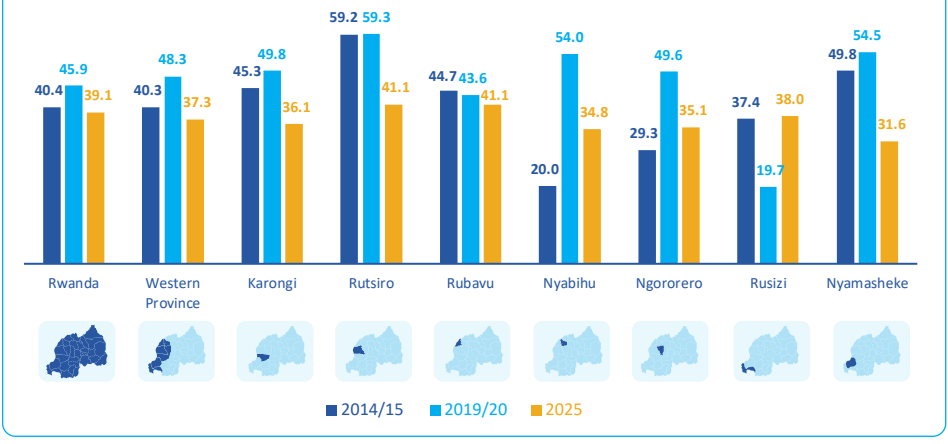
Women Ever experienced violence by current/most recent husband/partner - Physical (%)





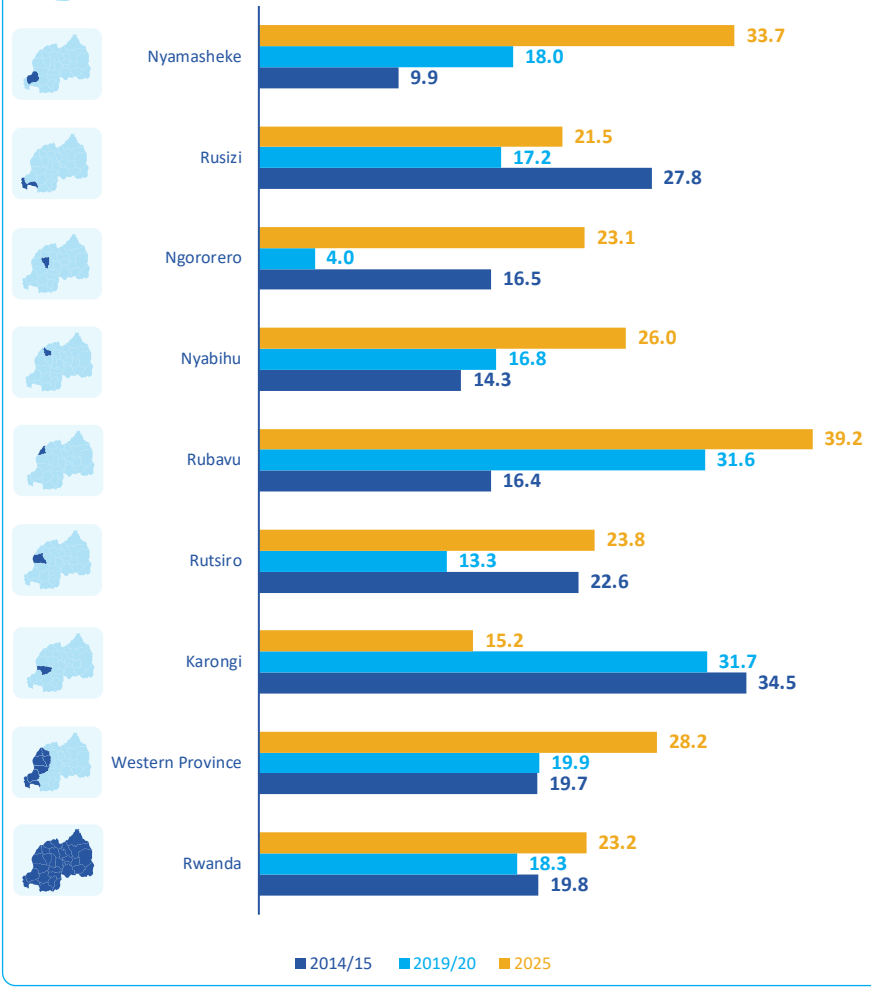


Women Ever experienced violence by current/most recent husband/partner





Men Ever Experienced any Violence (Physical or sexual or emotional) by Current/Most Recent Wife/Partner



Partner Alcohol Consumption (Reported by women)

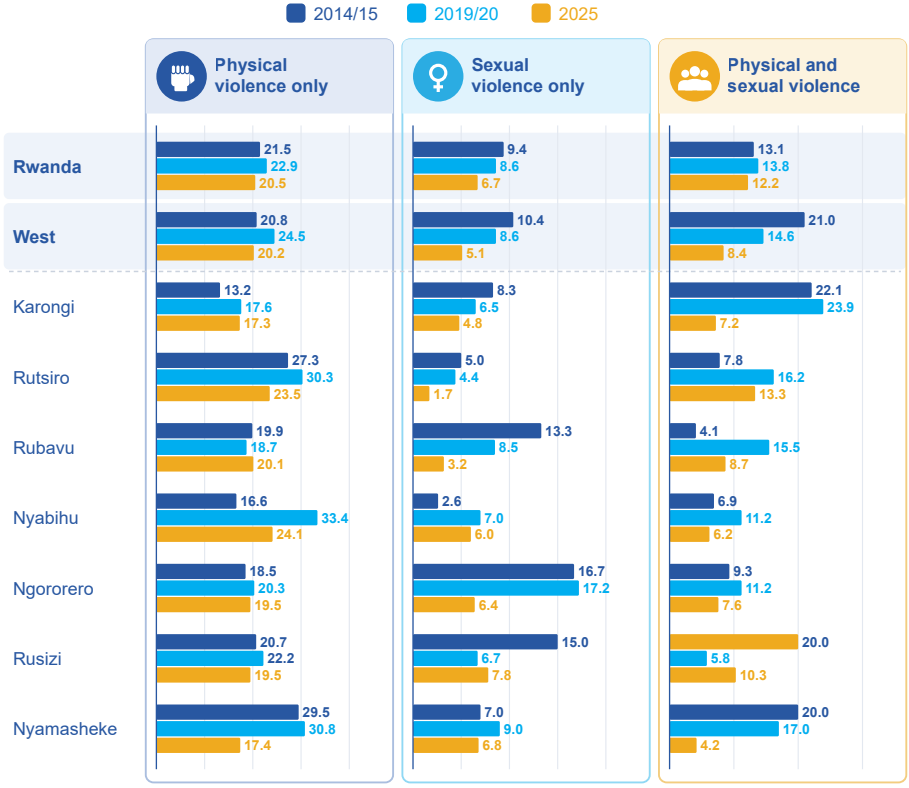


Partner Alcohol Consumption (Reported by men)



Experience of Violence among Women

By district, Western Province: percentage of women who experienced different forms of violence

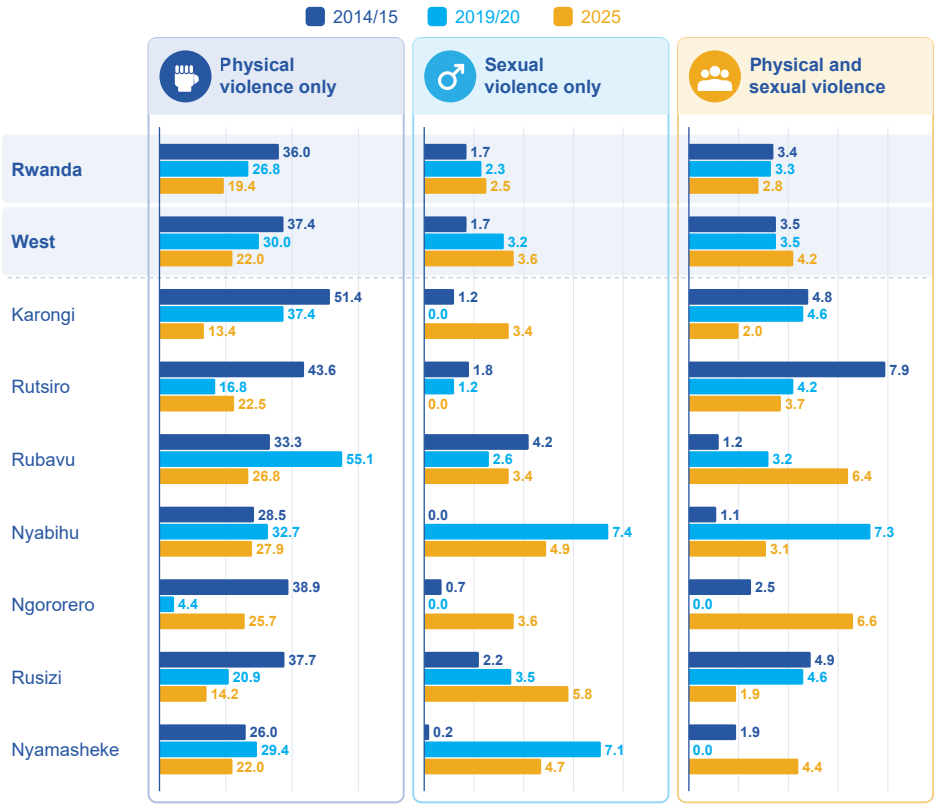


Key Insights

1. **Physical violence only**
   20.2% in the West in 2025, down from 24.5% in 2019/20 (Rwanda 20.5%). Highest in Nyabihu (24.1%) and Rutsiro (23.5%); Nyamasheke fell from 30.8% to 17.4%.
2. **Sexual violence only**
   Halved in the West, from 10.4% (2014/15) to 5.1%, below Rwanda (6.7%). Highest in 2025: Rusizi (7.8%); lowest: Rutsiro (1.7%).
3. **Physical and sexual violence**
   Fell in the West from 21.0% to 8.4%, below Rwanda (12.2%). Highest in Rutsiro (13.3%) and Rusizi (10.3%); lowest in Nyamasheke (4.2%).

Experience of Violence among Men

By district, Western Province: percentage of men who experienced different forms of violence



Key Insights

1. **Physical violence only**
   Down in the West from 37.4% (2014/15) to 22.0% in 2025, and down in every district, but above Rwanda (19.4%). Highest in Nyabihu (27.9%) and Rubavu (26.8%); lowest in Karongi (13.4%, from 51.4%).

2. **Sexual violence only**
   Low everywhere, never above 7.5%. Rose in the West from 1.7% to 3.6%. Highest in 2025: Rusizi (5.8%); 0.0% in Rutsiro.

3. **Physical and sexual violence**
   4.2% in the West in 2025, above Rwanda (2.8%). Highest in Ngororero (6.6%) and Rubavu (6.4%); lowest in Rusizi (1.9%).

Handwashing & Sanitation



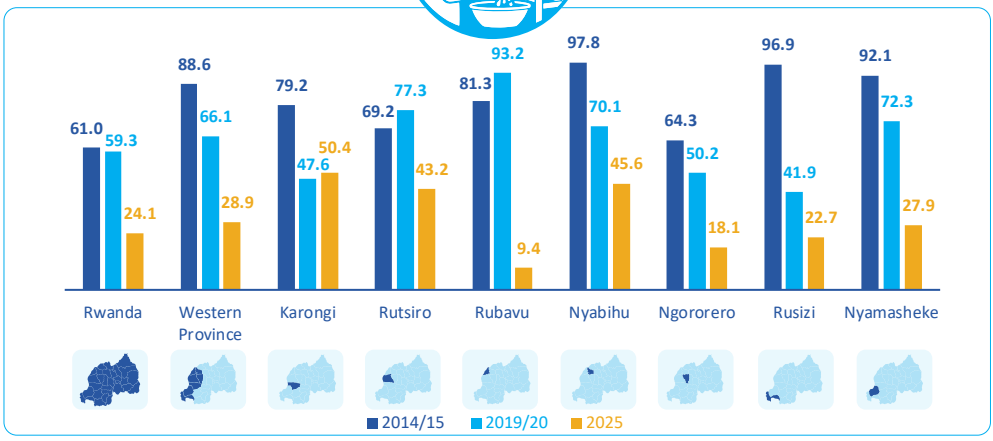
Household with Basic Handwashing Facility



Note: A basic handwashing facility refers to a facility that was observed and had both water and soap available at the time of the survey

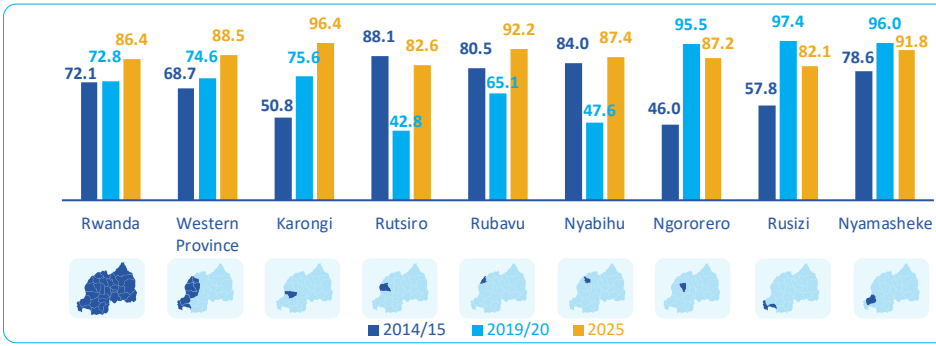
Households with Limited Handwashing Facility





Note: Limited handwashing facility means that A handwashing facility was observed, but either water or soap was not available at the time of the survey.

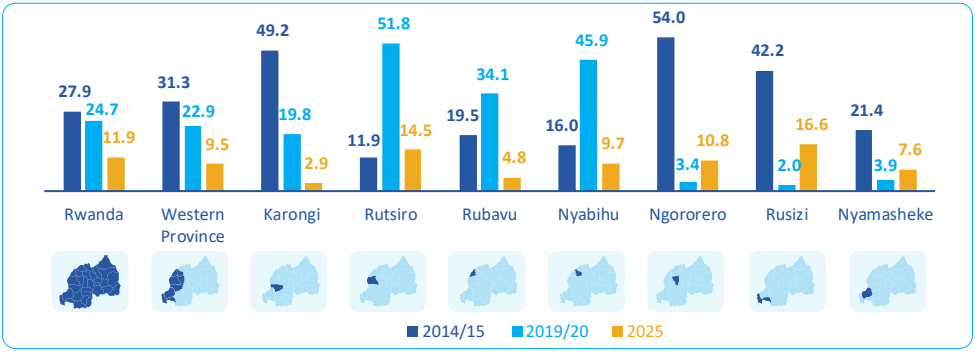
Percentage distribution of de jure population with improved Sanitation



NOTE: de jure means usual members

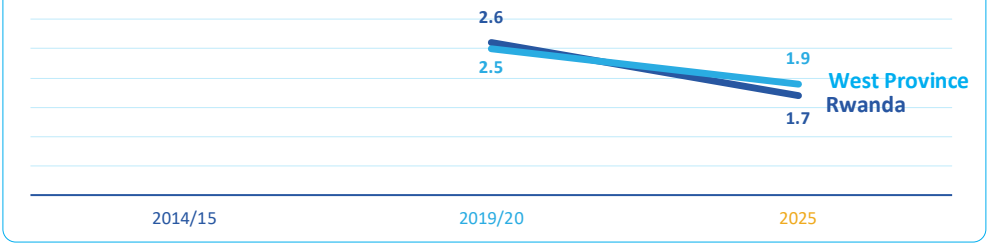
Improved sanitation facilities Include flush/pour flush toilets that flush water and waste to a piped sewer system, septic tank,pit latrine, or unknown destination, ventilated improved pit (VIP) latrines, pit latrines with slabs, and composting toilets.

Percentage distribution of de jure population with unimproved Sanitation



NOTE: Unimproved sanitation facility include pit latrine without a slab or open pit and flush or pour-flush to open drains

Open defecation



Note: Open Defecation means Disposal of human feces in fields, forests, bushes, open bodies of water, beaches, or other open spaces or with solid waste.

The RWANDA DHS 7 DEMOGRAPHIC AND HEALTH SURVEY 2025