

# Rapid Review of Healthy Ageing and Long-Term Care Systems in East and Southern Africa



Country summary reports

# Rwanda





## Rwanda

Based on United Nations Population Prospects projections, Rwanda had a total population of 12.9 million with 663,253 persons (5.1 per cent) aged 60 years and over in 2020 (United Nations Department of Economic and Social Affairs, 2019)<sup>2</sup>. The country's health expenditure was 6.4 per cent of Gross Domestic Product (GDP) in 2019 (World Health Organization, n.d.). Rwanda is classified as a low-income country and has a Human Development Index (composite index of life expectancy, education and per capita income) ranking of 160 of 189 with a score of 0.543 (low). Absolute poverty is high with an extreme poverty rate (those living under \$1.90 per day) of 16 per cent (2016-2017) and has a GINI coefficient (a measure of degree of inequality) of 42.9 (2016-17). The service coverage of essential health services is 54 per cent.

Rwanda provides an example of a country which is only very recently engaging with the issue of ageing and the development of a policy framework to ensure the inclusion of the growing number of older people, and ensure that their specific needs and concerns are addressed.

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(United Nations Department of Economic and Social Affairs, 2019).



## Overarching frameworks and coordination at national level

- The National Older Persons Policy (2021) was developed by the Ministry of Local Government (in consultation with other ministries and civil society). The policy was very recently introduced — an implementation strategy for the policy and the development of clear measurement indicators are still needed. The policy focuses on encouraging volunteerism and participation among older people, placing emphasis on social protection and social services.
- Rwanda has ratified the Protocol to the African Charter on Human and Peoples' Rights on the Rights of Older Persons, but have not yet deposited the protocol.

## Coordinating Mechanisms

No coordination mechanisms exist in the ageing sector.

## Social protection and development services

No universal or non-contributory pension is in place and contributory pension plans for formal workers have low coverage (8.7 per cent) given low rates for formal labour market participation. In the absence of social pensions for older people, informal labour market participation among older people in Rwanda is high (around 75 per cent among those over 65 years) and older people's income and food security, which was already tenuous, was further affected by the COVID-19 pandemic. This is supported by the findings of the HelpAge International Rapid Needs Assessment which found that 88 per cent of people had to reduce the quality and quantity of food they consumed (HelpAge International and Nsindagiza Organization, 2020).

The Social Protection Policy (2020) and the National Older Persons Policy (2021) recognizes the high rate of poverty among older people due to a lack of pension benefits. However, both policies only loosely suggest 'exploring' (in the case of the social protection policy) or 'move towards' (in the older persons policy document) universal pensions. The Social Protection Policy sets the goal that all older people will have access to a pension (state or private) by 2050. These policies points to *Ejo Heza*, an optional retirement savings plan run by the Rwanda Social Security Board introduced in 2017 for informal sector workers, as a way to finance a more comprehensive social protection system for the next generation.



Given that 2050 is still some way off, the focus of the policy on the current generation of older people is on the direct income support component of the Vision 2020 Umurenge (VUP) – Minimum Package for Graduation Programme, a social protection programme that provides public works and direct income support programmes to poor households. Older people in labour constrained households are eligible for the direct income support programme, but very few are reached in practice; and the focus of the programme seems to emphasize on those who can ‘graduate’ from poverty, whereas older people are more likely to be dependent on the programme (Sabates-Wheeler et al., 2020). The National Older Persons Policy sets a target of providing 67,000 older people with direct income support, which is only 10 per cent of the population over 60 years. More generally, social protection policy focuses on self-reliance and promoting the transformational aspects of social protection rather than a rights-based approach.

## Health and long-term care

Rwanda has extended Universal Health Coverage (UHC) through the innovative Community-Based Health Insurance (CBHI) programme (formerly called Mutuelle de santé) for the most vulnerable including older people (limited to generic medicines). Eighty-seven per cent of older people are covered by the programme, which is similar to the rate of inclusion of younger people. However, enrolment rates have been declining and the system has been under financial pressure for some time; and less than half paid their premiums in 2020 and 2021 due to COVID-19. The community system (Ubudehe) has been an imperfect targeting mechanism, resulting in exclusion or incorrect categorization of older people in the UBudehe category, making the fees unaffordable and driving dropout (Sanogo et al., 2019; Nyandekwe et al., 2020).

While services are available, they are not necessarily responsive to the needs of older people. There is no geriatrics programme available and no other training available to health workers in the care of older persons.



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## Non-communicable diseases

The National Health Sector Plan 2018-2024 aims to mainstream non-communicable diseases (NCDs) across multiple sectors – e.g. education, local government (including NCD checkups in “Imihigos” or performance contracts of local leaders), environmental and natural resources, infrastructure sector – to reinforce implementation of accessibility policies to promote physical activities accessibility, etc.

The National NCD policy includes older people, and NCD service access targets are set in the National Older Persons Policy.

## Long-term care

There is limited coverage in terms of residential care, and according to the older persons’ advocacy organization Nsindagiza, there are only 12 residential care homes in the country run by churches and four centres for widows/widowers, and there no guidelines regulating their operations. The social protection policy emphasizes the provision of services to ensure older people remain in families. The 1994 genocide left many people without their children and older adults caring for one another outside of kinship networks has become common (Sadruddin, 2020).

## Disaster situations

The National Disaster Management Policy (2012) stresses the importance of mainstreaming the concerns of people with disabilities (PWDs) and older persons in all disaster management activities and the need to reduce the vulnerability of disadvantaged populations through capacity building. However, older people are not well included in the National Contingency Matrix Plan or in contingency or recovery plans (e.g. May 2021 Rabavu District Seismic Disasters Post Disaster Needs Assessment and Recovery Plan, Flood and Landslide Contingency Plan and Refugee Inclusion Strategy).



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