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ESSENTIAL PACKAGE OF HEALTH SERVICES COUNTRY SNAPSHOT: SENEGAL

July 2015

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The Health Finance and Governance Project

USAID's Health Finance and Governance (HFG) project helps to improve health in developing countries by expanding people's access to health care. Led by Abt Associates, the project team works with partner countries to increase their domestic resources for health, manage those precious resources more effectively, and make wise purchasing decisions. As a result, this five-year, \$209 million global project increases the use of both primary and priority health services, including HIV/AIDS, tuberculosis, malaria, and reproductive health services. Designed to fundamentally strengthen health systems, HFG supports countries as they navigate the economic transitions needed to achieve universal health care.

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*Photo: Thies Senegal. Health Post Sebikotane. Community Based Health Insurance Scheme.
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ACRONYMS

ASC	<i>Agents de santé communautaire</i>
EPHS	Essential package of health services
PNDS	<i>Plan National de Développement Sanitaire</i>
RMNCH	Reproductive, maternal, newborn and child health

ABOUT THE ESSENTIAL PACKAGES OF HEALTH SERVICES COUNTRY SNAPSHOT SERIES

An Essential Package of Health Services (EPHS) can be defined as the package of services that the government is providing or is aspiring to provide to its citizens in an equitable manner. Essential packages are often expected to achieve multiple goals: improved efficiency, equity, political empowerment, accountability, and altogether more effective care. There is no universal essential package of health services that applies to every country in the world, nor is it expected that all health expenditures in any given country be directed toward provision of that package. Countries vary with respect to disease burden, level of poverty and inequality, moral code, social preferences, operational challenges, financial challenges, and more, and a country's EPHS should reflect those factors.

This country snapshot is one in a series of 24 snapshots produced by the Health Finance & Governance Project as part of an activity looking at the Governance Dimensions of Essential Packages of Health Services in the Ending Preventable Child and Maternal Death priority countries. The snapshot explores several important dimensions of the EPHS in the country, such as how government policies contribute to the service coverage, population coverage, and financial coverage of the package. The information presented in this country snapshot feeds into a larger cross-country comparative analysis undertaken by the Health Finance & Governance Project to identify broader themes related to how countries use an EPHS and related policies and programs to improve health service delivery and health outcomes.

Each country snapshot includes annexes that contain further information about the EPHS. When available, this includes the country's most recently published package; a comparison of the country's package to the list of priority reproductive, maternal, newborn and child health interventions developed by the Partnership for Maternal, Newborn and Child Health in 2011 (PMNCH 2011), and a profile of health equity in the country.



THE ESSENTIAL PACKAGE OF HEALTH SERVICES (EPHS) IN SENEGAL

We identified Senegal's essential package of health services across several policy documents, including the *Liste Nationale des Médicaments et Produits Essentiels*, 2008 revision, the Expanded Program for Immunization, and the government of Senegal's *Plan National de Développement Sanitaire 2009–2018*, among other sources. In many cases government policy documents listed the essential package by covered disease/population group at a high level, but secondary sources provided further specificity for the services included. For the complete list of services, see Annex A.

Priority Reproductive, Maternal, Newborn and Child Health Interventions

To see a comparison of Senegal's EPHS and the priority reproductive, maternal, newborn and child health (RMNCH) interventions (PMNCH 2011), refer to Annex B.

Status of Service in EPHS	Status Definition	# of Services
Included	The literature on the essential package specifically mentioned that this service was included.	38
Explicitly Excluded	The literature on the essential package specifically mentioned that this service was not included.	3
Implicitly Excluded	This service was not specifically mentioned, and is not clinically relevant to one of the high-level groups of services included in the essential package.	0
Unspecified	The literature on the essential package did not specifically mention this service, but this service is clinically relevant to one of the high-level groups of services included in the essential package.	19

The following three priority RMNCH interventions are explicitly excluded from Senegal's essential package of health services:

- ▶ Safe abortion
- ▶ Vitamin A supplementation from six months of age
- ▶ Routine immunization plus H. influenzae, meningococcal, pneumococcal, and rotavirus vaccines

Use of Selected Priority Services

The table below presents the country's data on common indicators. Empty cells signify that these data are not available.

Indicator	Year	Value	Urban Value	Rural Value
Pregnant women sleeping under insecticide-treated nets (%)	2010		32.4	38.6
Births attended by skilled health personnel (in the five years preceding the survey) (%)	2010		90.4	49.1
BCG immunization coverage among one-year-olds (%)	2013	97		
Diphtheria tetanus toxoid and pertussis (DTP3) immunization coverage among one-year-olds (%)	2013	92		
Median availability of selected generic medicines (%)—private				
Median availability of selected generic medicines (%)—public				

Source: Global Health Observatory, World Health Organization.

How the Health System Delivers the EPHS

RMNCH services from the EPHS are delivered through:

- ✓ government-sponsored community health workers
- ✓ public sector primary care facilities
- ✓ public sector referral facilities

The government of Senegal maintains a public health care system, which exists alongside a private health care system. The government of Senegal describes the public health system as a pyramid where national and regional hospitals are at the top, health centers are in the middle, and health posts and health huts are closest to the community. The government has adopted a decentralization strategy for improving health outcomes across the spectrum of care. The aim is to expand the scope of services provided at lower-tiered facilities appropriately, so as to improve access to priority services that were previously referred to higher-tiered facilities, including antiretroviral treatment, tuberculosis diagnosis and treatment, obstetric and neonatal emergency care, and others (*PNDS 2009-2018*).

Additionally, international partners, with the support of the Ministry of Health and Prevention, have supported a community health program for many years. Under the program, community committees oversee the health huts, including managing the huts' finances, collecting user fees, and procuring supplies and medicines. The committees also select individuals to serve as *agents de santé communautaire* (ASCs), *matrones*, and *relais*. ASCs are men and women who are selected by community members to receive structured training that then allows them to provide basic curative health care services in health huts. *Matrones* are women who focus on maternal and reproductive health, providing assistance to mothers during pregnancy, delivery, and postpartum. *Relais communautaires* (community liaisons) are men and women who work on behavior change communication activities and community mobilization (Jarrah et al. 2013).

Delivering the EPHS to Different Population Groups

The government's strategy for implementing the EPHS includes specific activities to improve equity of access for specific populations; these include:

- ✓ women,
- ✓ adolescents,
- ✓ the indigent, and
- ✓ rural populations.

See Annex C for the World Health Organization's full health equity profile of Senegal based on data from a 2010 Demographic and Health Survey.

Key findings from the health equity profile include:

- ▶ Coverage of family planning needs satisfied varies among wealth quintiles, education levels, and place of residence.
- ▶ Coverage of births attended by skill health personnel varies among wealth quintile and education level of the mother.
- ▶ Full immunization coverage among one-year-olds is similar across wealth quintiles and place of residence, but shows more variability across education levels of the mother.

Senegal's Ministry of Health and Prevention sponsors or supports several programs aimed at delivering care to vulnerable and hard-to-reach populations. The PNDS specifically lists the following subpopulations as targets for population-specific outreach and services: pregnant women, mothers, newborns, children older than one year, adolescents, and people living with HIV (especially in Kolda and Ziguinchor). The community health program currently under way aims to provide most services from the EPHS to rural populations at the community level, given that referral health centers and hospitals are far distances from many rural communities. Scale-up of integrated community case management at all levels of the health system aims to improve child health outcomes for vulnerable and rural populations. The Bajenu Gox program is another government-sponsored community-based program that aims to increase demand for reproductive health care for women during pregnancy, childbirth, and postpartum, and demand for child health services through community outreach and mentoring (Toure et al. 2012). Through the social security system, indigent people can obtain certificates for exemptions from user fees to ensure that this population has better access to services, and certain other subgroups can receive subsidized care as well (e.g., people living with HIV).

Providing Financial Protection for the EPHS

- ✓ The government sponsors health insurance for civil servants.
- ✓ The government sponsors or regulates health insurance for nongovernmental formal sector employees.
- ✓ Community-based insurance is available in parts or all of the country.
- ✓ Some services included in the EPHS are legally exempt from user fees on a national scale.

The government of Senegal has implemented various strategies to reduce the level of out-of-pocket spending for health care. Facilities in the public health system, albeit financially supported and subsidized by the government, charge user fees for services. The community health huts can set their own prices for services and drugs, and are supposed to be financially sustainable after the initial stocking of medicines and supplies sponsored by the government or by international partners (Toure et al. 2012). However, Senegal has introduced public subsidies for specific services (e.g., deliveries) and population groups (e.g., people living with HIV). Additionally, the government of Senegal sponsors mandatory social insurance for government employees, other formal sector workers, students, and retired persons. Community-based health insurance schemes exist in the country, and enrollment is voluntary (Tine et al. 2014).

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ANNEX A. SENEGAL'S EPHS

Source: *Plan National de Développement Sanitaire (PNDS) 2009 - 2018*

Mothers and newborns

- Family planning
- Antenatal care in all districts
- Routine HIV testing for all pregnant women
- Widespread delivery assistance with use of scans, caesarean sections and blood transfers as needed
- Essential care of the newborn
- Postnatal consultations
- Appropriate care for low birth weight newborns
- ARV prophylaxis for HIV positive women

Children older than 1 year

- Promote adequate and varied diet, including micronutrients
- Promotion of healthy lifestyles
- Prevention, early detection and treatment of infectious and parasitic diseases such as malaria, tuberculosis and respiratory infections

Adolescents

- Avoid stigmatization
- Prevent teenage pregnancy
- Prevention and voluntary testing for sexually transmitted infections and the use of harmful substances (alcohol, tobacco, and drugs)

Malaria

- Behavior change communication
- Proper and early treatment of the disease at all levels of the health system
- Use of insecticide treated nets by priority populations
- Intermittent preventive treatment for pregnant women
- Indoor residual spraying in all districts

HIV/AIDS

- Voluntary testing
- Promotion of safe behaviors
- Discouraging stigmatization and discrimination of people living with HIV

- Improved overall care of people living with HIV
- Continuous availability and sufficient antiretrovirals at all levels of the health system
- Targeting of vulnerable people and at-risk population specific services

Tuberculosis (TB)

- Universal access to free and local services for diagnosis and quality treatment of patients. regardless of the form of TB
- Prevention and management of patients with HIV/TB co-infections and multi drug resistant TB

Chronic diseases

- Diabetes
- Cardiovascular disease
- kidney failure
- Cancer
- Sickle cell disease

Emergency care

- Communication system and advisory system at all health facilities
- Suitable initial management of the emergency condition and transport for purposes of evacuation by land, air or sea to the appropriate facility
- Adequate technical facilities and a continuous supply of equipment and consumables in hospitals

Source: Reproductive Health Law (LOI n° 2005-18 du 5Août 2005)

Reproductive Health

- The state and local governments have an obligation to ensure the protection, promotion and protection of the reproductive health of individuals and couples. Groups and associations contribute to the promotion and protection of health reproduction of individuals and couples.
- Reproductive Health treatment and services include:
 - Guidance, information, education, communication, research, resources, methods and, in general, all the care in family planning;
 - Guidance, information, education, communication, research, resources, methods and, in general, all the care in family planning;
 - Benefits of post-abortion care;
 - Monitoring of growth and nutritional status of the nursling, promotion of breastfeeding
 - Exclusive breast feeding, good weaning practices and immunization;
 - The fight against sexually transmitted infections including HIV / AIDS; prevention and treatment of diseases of the genital tract, including cancers;
 - The fight against infertility and infertility;
 - The fight against female genital mutilation, sexual violence and harmful practices in the reproductive health;

- Promoting reproductive health of adolescents;
- All other health conditions with regard to sexuality and reproduction.

Source: Santé Maternelle et Neonatale au Senegal: Succes et Défis. 2012.

[Report Author] Further details about the maternal and newborn health services included in Senegal's essential package were identified in a report by MCHIP, published in 2012. Note, the following information comes from a secondary source, not a government-issued document.

The report states that in 2005 the Government of Senegal adopted a national policy on obstetric and neonatal emergency care and defined what services must be available at what level of the health system.

Functions of basic obstetric and neonatal emergency care:

- Parenteral administration of antibiotics
- Administration of oxytocin by injection
- Administration of sedative / anticonvulsant injectable
- Extraction of intrauterine debris
- Revision of uterine category
- Childbirth assisted vaginal delivery by vacuum or forceps
- Basic resuscitation of the newborn

Functions of comprehensive obstetric and neonatal emergency care:

- All services performed under basic obstetric and neonatal emergency care
- Caesarean section
- Blood transfusion
- Full neonatal resuscitation (suction, intubation, metabolic resuscitation)
- Parenteral administration of newborn antibiotics
- Parenteral administration of newborn anticonvulsants

Package of activities (relative to the Maternal and Newborn Health) by facility level:

Rural health post / Urban Health Post

- Family planning (except tubal ligation and insertion of Norplant)
- Preventive and curative care during pregnancy
- PMTCT
- Immunization (preventive and curative care of the child)
- Routine attended birth
- Simple resuscitation of the newborn
- BEmONC

Type I health center

- Monitoring of labor and delivery assisted by qualified staff including use of the partograph and active management of the third stage of labor
- Resuscitation of the newborn
- BEmONC (including qualified postnatal care for mothers and newborns)



Reference Health Center

- Complicated Delivery including cesarean section,
- Corticosteroids for preterm labor
- Resuscitation of newborn babies suffering from birth asphyxia
- CEmONC (including intensive care newborn)

Regional Hospital / National Hospital

- Management of severe infection, care of all low birth weight suffering from birth asphyxia
- Support for other acute emergencies (broader package)

Source: *Integrated Community Case Management of Childhood Illness: Documentation of Best Practices and Bottlenecks to Program Implementation in Senegal.*

[Report Author] The report published by USAID/MCHIP outlined the specific integrated community case management (iCCM) services that are provided nationwide as part of the country's essential package. Note, the following information comes from a secondary source, not a government-issued document.

iCCM services provided by *agents de santé communautaires* and *matrones* at health huts:

- Antibiotics for acute respiratory infection
- Rapid diagnostic tests and artemisinin-based combination therapies for malaria
- Oral rehydration salts and zinc for diarrhea

ANNEX B. COMPARISON BETWEEN THE EPHS AND THE PRIORITY RMNCH SERVICES

	RMNCH Essential Interventions	Service Included in EPHS	Source and Additional Notes
Adolescence and pre-pregnancy	Level: Community Primary Referral		
	Family planning (advice, hormonal and barrier methods)	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; LOI n° 2005-18 du 5Août 2005; Toure, L et. al.
	Prevent and manage sexually transmitted infections, HIV	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Folic acid fortification/supplementation to prevent neural tube defects	Unspecified	This service was not specified in reviewed documents
	Level: Primary and Referral		
	Family planning (hormonal, barrier and selected surgical methods)	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; LOI n° 2005-18 du 5Août 2005. Toure, L et. al.
	Level: Referral		
	Family planning (surgical methods)	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; LOI n° 2005-18 du 5Août 2005. Toure, L et. al.
Pregnancy (antenatal)	Level: Community Primary Referral		
	Iron and folic acid supplementation	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Tetanus vaccination	Yes	Source: EPI Comprehensive Multiyear Plan: 2012 - 2016.
	Prevention and management of malaria with insecticide treated nets and antimalarial medicines	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Prevention and management of sexually transmitted infections and HIV, including with antiretroviral medicines	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Calcium supplementation to prevent hypertension (high blood pressure)	Yes	Source: Liste Nationale des Médicaments et Produits Essentiels: Révision de 2008.
	Interventions for cessation of smoking	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; Note, the plan only lists tobacco cessation interventions under adolescent health services

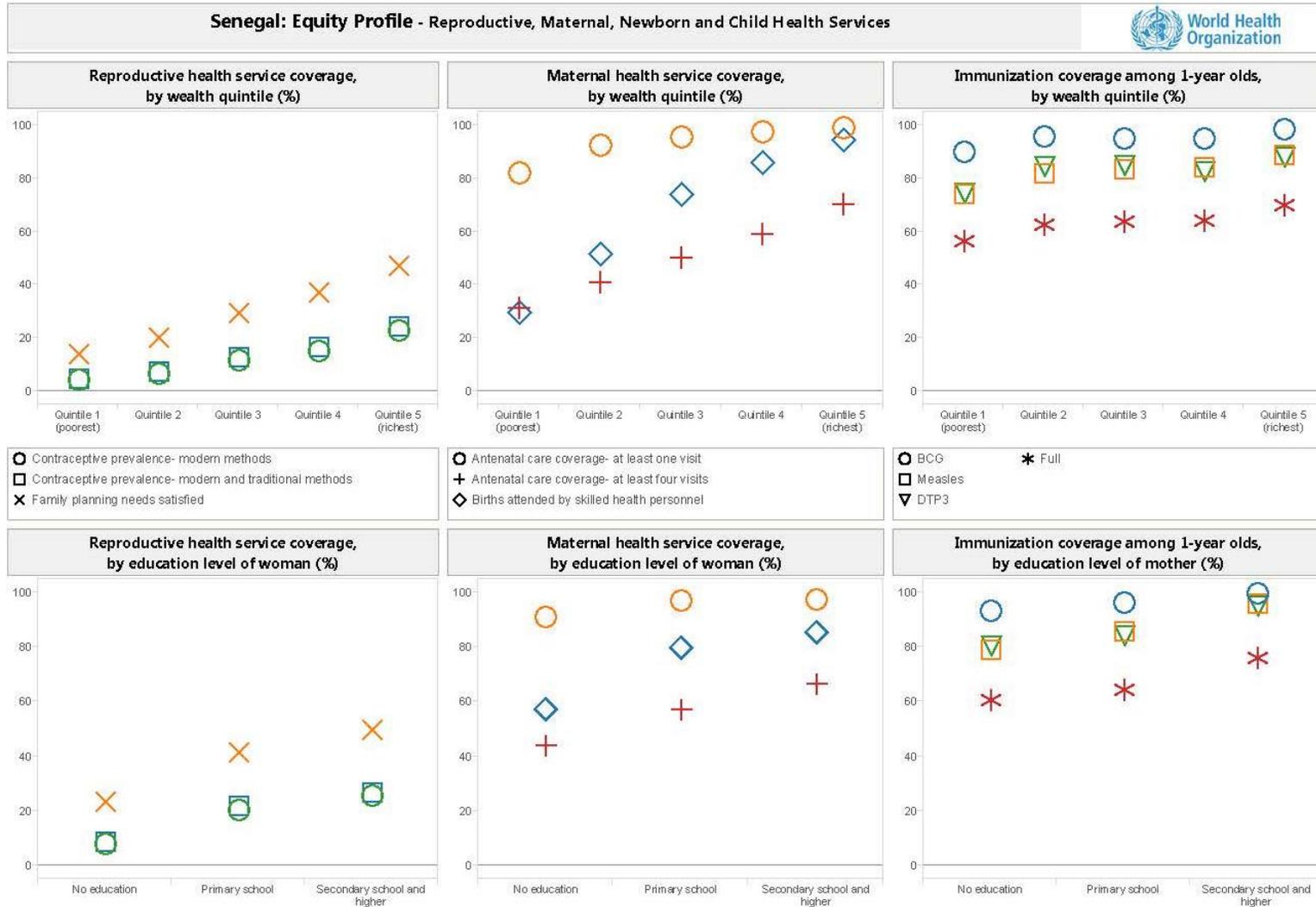
	RMNCH Essential Interventions	Service Included in EPHS	Source and Additional Notes
	Level: Primary and Referral		
	Screening for and treatment of syphilis	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Low-dose aspirin to prevent pre-eclampsia	Unspecified	This service was not specified in reviewed documents
	Anti-hypertensive drugs (to treat high blood pressure)	Yes	Source: Liste Nationale des Médicaments et Produits Essentiels: Révision de 2008.
	Magnesium sulphate for eclampsia	Unspecified	This service was not specified in reviewed documents
	Antibiotics for preterm prelabour rupture of membranes	Yes	Source: Liste Nationale des Médicaments et Produits Essentiels: Révision de 2008.
	Corticosteroids to prevent respiratory distress syndrome in preterm babies	Yes	Source: Toure, L. et. al.
	Safe abortion	No	Abortion is not offered through the public sector in Senegal.
	Post abortion care	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; LOI n° 2005-18 du 5Août 2005; Toure, L et. al.
	Level: Referral		
	Reduce malpresentation at term with External Cephalic Version	Unspecified	This service was not specified in reviewed documents
	Induction of labour to manage prelabour rupture of membranes at term (initiate labour)	Unspecified	This service was not specified in reviewed documents
Childbirth	Level: Community Primary Referral		
	Prophylactic uterotonics to prevent postpartum haemorrhage (excessive bleeding after birth)	Yes	Source: Toure, L. et. al. mention in their report that national-level training on AMTSL was provided to staff of health centers providing deliveries.
	Manage postpartum haemorrhage using uterine massage and uterotonics	Yes	Source: Toure, L. et. al. mention in their report that national-level training on AMTSL was provided to staff of health centers providing deliveries.
	Social support during childbirth	Yes	Source: Toure, L. et. al., according to their report, the Bajenu Gox program is intended to be implemented nationwide by the Government of Senegal by 2015.
	Level: Primary and Referral		
	Active management of third stage of labour (to deliver the placenta) to prevent postpartum haemorrhage (<i>as above plus controlled cord traction</i>)	Yes	Source: Toure, L. et. al. mention in their report that national-level training on AMTSL was provided to staff of health centers providing deliveries.
	Management of postpartum haemorrhage (<i>as above plus manual removal of placenta</i>)	Yes	Source: Toure, L. et. al. includes a table stating that all levels of the health system providing deliveries are cleared to provide uterine exploration.
	Screen and manage HIV (if not already	Yes	Source: Plan National de Développement Sanitaire

	RMNCH Essential Interventions	Service Included in EPHS	Source and Additional Notes
	tested)		(PNDS) 2009 - 2018;
	Level: Referral		
	Caesarean section for maternal/foetal indication (to save the life of the mother/baby)	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Prophylactic antibiotic for caesarean section	Yes	Source: Toure, L. et. al.
	Induction of labour for prolonged pregnancy (initiate labour)	Unspecified	This service was not specified in reviewed documents
	Management of postpartum haemorrhage (<i>as above plus surgical procedures</i>)	Yes	Source: Toure, L. et. al.
Postnatal (Mother)	Level: Community Primary Referral		
	Family planning advice and contraceptives	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; LOI n° 2005-18 du 5Août 2005
	Nutrition counselling	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; LOI n° 2005-18 du 5Août 2005
	Level: Primary and Referral		
	Screen for and initiate or continue antiretroviral therapy for HIV	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Treat maternal anaemia	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Level: Referral		
	Detect and manage postpartum sepsis (serious infections after birth)	Yes	Source: Toure, L. et. al.
Postnatal (Newborn)	Level: Community Primary Referral		
	Immediate thermal care (to keep the baby warm)	Unspecified	This service was not specified in reviewed documents. The EPHS includes “essential newborn care” generically.
	Initiation of early breastfeeding (within the first hour)	Unspecified	This service was not specified in reviewed documents. The EPHS includes “essential newborn care” generically.
	Hygienic cord and skin care	Unspecified	This service was not specified in reviewed documents. The EPHS includes “essential newborn care” generically.
	Level: Primary and Referral		
	Neonatal resuscitation with bag and mask (by professional health workers for babies who do not breathe at birth)	Yes	Source: Toure, L. et. al.
	Kangaroo mother care for preterm (premature) and for less than 2000g babies	Yes	Source: Toure, L. et. al. states that Kangaroo mother care training was being introduced at health centers nationwide by partner organizations but with the support of the Government.

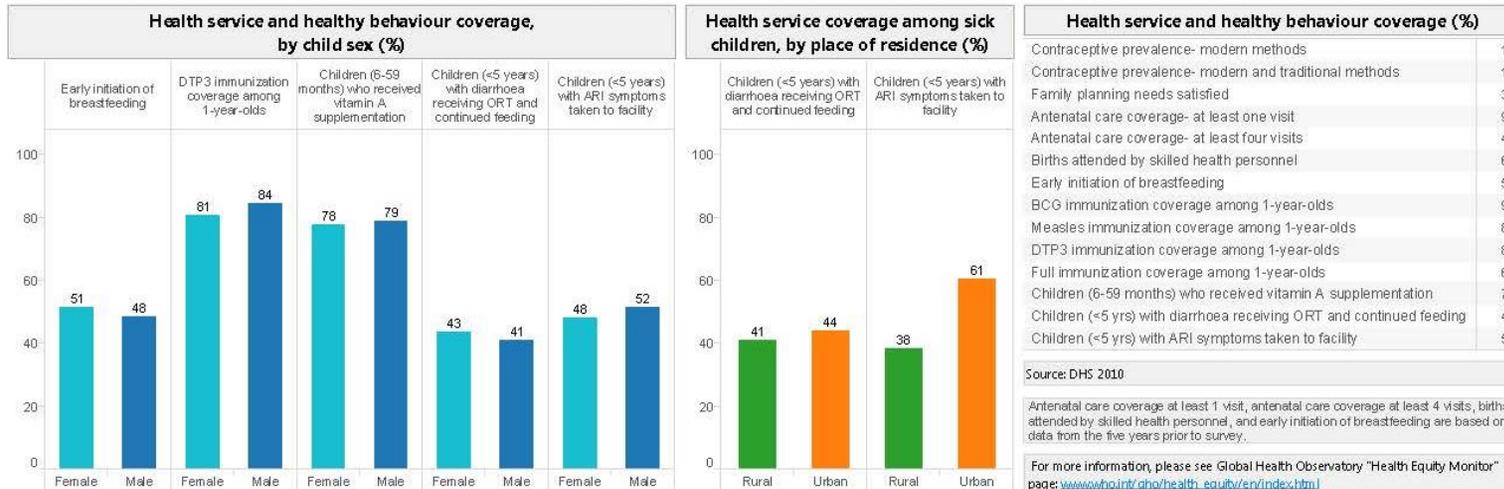
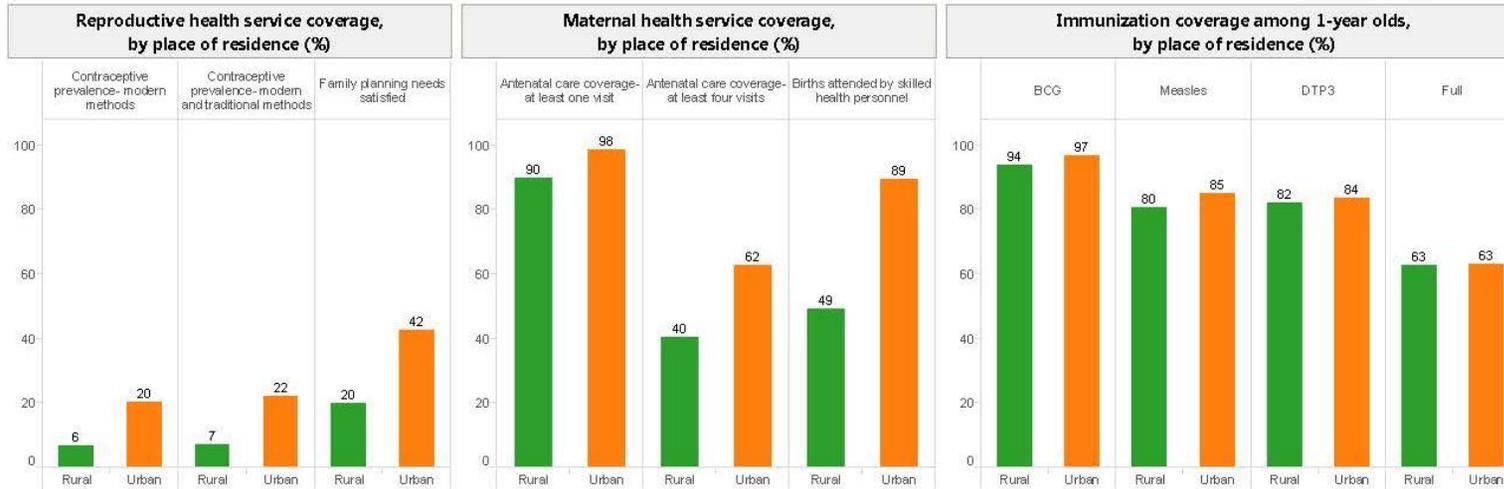
	RMNCH Essential Interventions	Service Included in EPHS	Source and Additional Notes
	Extra support for feeding small and preterm babies	Unspecified	This service was not specified in reviewed documents. The EPHS includes “essential newborn care” generically.
	Management of newborns with jaundice (“yellow” newborns)	Unspecified	This service was not specified in reviewed documents. The EPHS includes “essential newborn care” generically.
	Initiate prophylactic antiretroviral therapy for babies exposed to HIV	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Level: Referral		
	Presumptive antibiotic therapy for newborns at risk of bacterial infection	Unspecified	This service was not specified in reviewed documents
	Use of surfactant (respiratory medication) to prevent respiratory distress syndrome in preterm babies	Unspecified	This service was not specified in reviewed documents
	Continuous positive airway pressure (CPAP) to manage babies with respiratory distress syndrome	Unspecified	This service was not specified in reviewed documents
	Case management of neonatal sepsis, meningitis and pneumonia	Unspecified	This service was not specified in reviewed documents
Infancy and Childhood	Level: Community Primary Referral		
	Exclusive breastfeeding for 6 months	Unspecified	This service was not specified in reviewed documents
	Continued breastfeeding and complementary feeding from 6 months	Unspecified	This service was not specified in reviewed documents
	Prevention and case management of childhood malaria	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018; Integrated Community Case Management of Childhood Illness: Documentation of Best Practices and Bottlenecks to Program Implementation in Senegal
	Vitamin A supplementation from 6 months of age	No	Source: EPI Comprehensive Multiyear Plan: 2012 - 2016.
	Routine immunization plus <i>H.influenzae</i> , meningococcal, pneumococcal and rotavirus vaccines	No	Source: EPI Comprehensive Multiyear Plan: 2012 - 2016 states that in the future, the government wants to include pneumococcal and rotavirus vaccines in the routine immunization schedule.
	Management of severe acute malnutrition	Unspecified	This service was not specified in reviewed documents
	Case management of childhood pneumonia	Yes	Source: Integrated Community Case Management of Childhood Illness: Documentation of Best Practices and Bottlenecks to Program Implementation in Senegal
	Case management of diarrhoea	Yes	Source: Integrated Community Case Management of Childhood Illness: Documentation of Best Practices and Bottlenecks to Program Implementation in Senegal

	RMNCH Essential Interventions	Service Included in EPHS	Source and Additional Notes
	Level: Primary and Referral		
	Comprehensive care of children infected with, or exposed to, HIV	Yes	Source: Plan National de Développement Sanitaire (PNDS) 2009 - 2018;
	Level: Referral		
	Case management of meningitis	Unspecified	This service was not specified in reviewed documents
Across the continuum of care	Level: Community Strategies		
	Home visits for women and children across the continuum of care	Yes	Source: Toure, L. et. al., according to their report, the Bajenu Gox program is intended to be implemented nationwide by the Government of Senegal by 2015.
	Women's groups	Yes	Source: Toure, L. et. al., according to their report, the Bajenu Gox program is intended to be implemented nationwide by the Government of Senegal by 2015.

ANNEX C: SENEGAL HEALTH EQUITY PROFILE



Senegal: Equity Profile - Reproductive, Maternal, Newborn and Child Health Services





**BOLD THINKERS DRIVING
REAL-WORLD IMPACT**