

## COUNTRY PROFILE SENEGAL

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### Legal System

The Republic of Senegal is a decentralized civil law system based on French law, as it was a French colony until the 1960's. The form of government is a liberal democratic government. Judicial reviews of legislative acts are done at the Constitutional court.

### Health Care System

The Senegalese healthcare system has become privatised and decentralised since the Bamako initiative in 1987 where representatives of the WHO and UNICEF met with African countries to deliberate on the health care policies in Africa.

Decentralisation: The purpose was to make the state reactive to the health needs of the population, instead of when administrative power was concentrated more centrally. This has resulted in more accountability and real power of local officials.

Privatisation: User fees and the sales of medicine funds an important part of the health sector. User fees and pharmaceutical sales are the most evident parts of the privatised health system in Senegal. The Senegalese Government still finances the health sector by paying incomes of state employees and giving each district in the country a yearly budget.

The healthcare system in Senegal is divided in three: a central level (minister's offices, branches and related services), a regional level (an administrative region that addresses healthcare services in certain regions) and a peripheral level (each district has one health centre at least, and smaller clinical centres)

Community-based health insurance: The idea is to reduce direct payments to prevent families from unpredictable and potentially high medical fees associated with pregnancy-related complications. They are voluntary, non-profit health insurance plans organized and managed at the community level. (15)

### Treaty Ratifications

|  | Signed          | Ratified         | Acceded |
|--|-----------------|------------------|---------|
| International Convention on Economic, Social and Cultural Rights // Civil and Political Rights [Including Protocols] | 6 July 1970     | 13 February 1978 | -       |
| Convention on the Elimination of All Forms of Discrimination against Women   | 29 July 1980    | 5 February 1985  | -       |
| Convention of the Rights of the Child  | 26 January 1990 | 31 July 1990     | -       |
| ILO Convention 169 (Indigenous and Tribal People Convention)   | -               | -                | -       |

|   |                   |                |             |
|---|-------------------|----------------|-------------|
| International Convention on the Protection of the Rights of All Migrant Workers and Members of their Families | -                 | -              | 9 June 1999 |
| African Charter on Humans' and Peoples' Rights  | 23 September 1981 | 13 August 1982 | -           |

## Constitution

### Article 8

⤴ The Republic of Senegal guarantees all citizens their individual fundamental freedoms, economic and social rights as well as group rights. These freedoms and rights are: Civil and political liberties, [...] the right to health, [...]. These freedoms and rights shall be exercised under the conditions provided by law.

### Article 17

Marriage and the family shall constitute the natural and moral basis for the human community. They shall be placed under the protection of the state. The state and the public shall collectively have the social duty to watch over the physical and moral well-being of the family and, in particular, of the handicapped and the elderly. The state guarantees families in general and those living in rural areas, particular access to health and welfare services. It also guarantees women and those living in rural areas in particular, the right to improve their living conditions.

Senegal is a monist country with automatic incorporation of international treaties into national law once it has been ratified.

### Article 8:

*La République du Sénégal garantit à tous les citoyens les libertés individuelles fondamentales, les droits économiques et sociaux ainsi que les droits collectifs. Ces libertés et droits sont notamment : Les libertés civiles et politiques, [...] le droit à la santé, [...]. Ces libertés et ces droits s'exercent dans les conditions prévues par la loi.*

### Article 17:

*Le mariage et la famille constituent la base naturelle et morale de la communauté humaine. Ils sont placés sous la protection de l'Etat. L'Etat et les collectivités publiques ont le devoir de veiller à la santé physique et morale de la famille et, en particulier des personnes handicapées et des personnes âgées. L'Etat garantit aux familles en général et à celles vivant en milieu rural en particulier l'accès aux services de santé et au bien être. Il garantit également aux femmes en général et à celles vivant en milieu rural en particulier, le droit à l'allègement de leurs conditions de vie.*

## Overview of Relevant Provisions (author's translation)

| Indicator  | National Legislation   | National Regulation |
|--|--|---------------------|
| <b>Government Commitment</b><br>Mandatory language | <b>In the Preamble of its constitution:</b><br>Affirm their adherence to the Declaration of Human Rights of 1789 as well as to the international instruments adopted by the United Nations and the Organization of African Unity, in particular the Universal Declaration of Human rights of 10 December 1948, the Convention on the Elimination on the Rights of the Child of 20 November 1989 and the African Charter on Human Peoples' Rights of 27 June 1981 (2) |                     |

|  |   |   |
|--|---|---|
|  | <p><b>Decree n. 2-94-985:</b> Organization of the Ministry of Health:</p> <p>Article 1: "The minister [...] is responsible for elaborating and setting a national policy in action with regards to medication and pharmaceutical products in technical and regulatory plans" (4)</p>  |   |
| <p><b>Sustainable Financing</b><br/>State reimbursement scheme</p> | <p><b>Decree n. 2004-1404, 2004:</b> Organisation of the Ministry of Health and Medical Prevention</p> <p>There is a special agency, responsible for financing the healthcare system, which has to guarantee the financial access to health. (5)</p>  |   |
| <p><b>Sustainable Financing</b><br/>State subsidy</p>              | <p>The health sector is financed by the State allocating each district a budget yearly.</p> <p>-In 1999, 53% of health funding came from the government, 11% from individuals, 6% from communities, and 30% from international partners.</p> <p>-Of a household's health expenditures, 89% is out-of-pocket spending while 11% is in the form of health insurance contributions. (6) (14)</p> | <p><b>Declaration of the National Health Policy 1989:</b></p> <p>3: Financing Health</p> <p>The financing of the health sector comes from diverse sources; Governmental budget, the general population, local collective schemes and other national and international organs.</p> <p>b) Material and medication expenses</p> <p>[...]</p> <p>The expenses for materials and medication represent approximately 30% of the functioning budget including 14% that is reserved for medication; which is low despite the important need of proper infrastructure and the increasing cost of medication</p> <p>The medication budget of hospitals takes up 86% of the Ministry of Public Health's budget (6)</p> |

|  |  |   |
|--|--|---|
| <p><b>Rational Selection</b><br/>Essential medicines framework</p> |  | <p>The medications considered to be essential medicines are stated in the following documents and they stipulate that these medications must be found in all hospitals and health centers:<br/><b>Arreté ministeriel n. 241</b>, 6 January 2002<br/>On the revision of the list of medication and essential products (7) i.c.j with <b>Arreté n° 11782</b>, 29 October 1990, establishing the lists of medication and essential products in health offices, health centers and regional hospitals (8)</p>   |
| <p><b>Affordable Prices</b><br/>Availability of generics</p>       | <p><b>Decree n. 2-94-985, 1994: Organization of the Ministry of Health:</b></p> <p><b>Article 10</b> regarding the role of the direction of Medicines and Pharmacies:</p> <p>To establish the price frames of medication and specialised pharmaceutical instruments conforming to the actual price regulations (4)</p> <p><b>Article 10:</b> La Direction du Médicament et de la Pharmacie est chargée:<br/>[...] - De fixer le cadre des prix des médicaments et des spécialités pharmaceutiques, conformément à la réglementation des prix en vigueur.</p> | <p>Both of the following regulations direct the relevant governmental bodies on the the pricing of pharmaceutical products.</p> <p><b>Arreté Interministeriel n. 210 and n. 4122</b> on the structure of prices of medicines, products and specialised pharmaceutical products in the Republic of Senegal.</p> <p><b>Arreté inteministeriel n.1539</b> establishment of a Committee whereby the Director of internal commerce, the director of economic control and the Director of Pharmacy are the ones that are accountable for n.4122. and 210. (9)</p> |

### Observations

#### Common diseases:

The most common medical problems encountered in Senegal include child mortality, maternal death, malaria and sexually transmissible diseases and infections (such as HIV/AIDS)

^ -Majority of diseases affecting the poorer population include Syphilis, tuberculosis, schistosomiasis, trypanosomiasis, meningitis, cholera and HIV (13)

#### Access to medicine:

-Senegalese people are disadvantaged due to the inadequate access to medicines and regular prescriptions for certain illnesses. Problems in supply of drugs, essential drugs missing in health centres and pharmacies, insufficient health infrastructure to cover needs of the entire population and high costs of drugs still remain the biggest challenges to the health system and the Government.

### Health Insurance:

▲ -Only 15.2% of Senegalese people have health insurance, most of whom work in the formal sector.

-Decentralisation after the Bamako Initiative (see 'Health Care System' above) failed to fulfil its goals in two manners: During the first three years, it failed to render politics and local government more participatory, cooperative and more responsive to local communities. Additionally, there has been no attention to gender equality and participation. Decentralisation has meant that authorities have completely failed to engage in women's situations and concerns. There have been additional issues and conflicts between city officials and medical district officers over disbursement of money for the health sector.

### Medicine importation and access to generics:

-Senegal imports 80% of its medicine. In Africa, most of the generics are imported from India, therefore the price of the medicine itself is low but the transportation costs remains the biggest issue. Senegal is also a medicine producing country, as it has four medicine production units where the following pharmaceutical companies are established: Sanofi Aventis, Pfizer, Canon and Valdafrique Westafrica Pharma. They provide the licensed production of specialised and generic that is exported (20 -30 %) (12)

## Government Commitment Overview

### **Préambule:**

Le peuple du Sénégal souverain, AFFIRME:

-son adhésion à la Déclaration des Droits de l'Homme et du Citoyen de 1789 et aux instruments internationaux adoptés par l'Organisation des Nations Unies et l'Organisation de l'Unité Africaine, notamment la Déclaration Universelle des Droits de l'Homme du 10 décembre 1948, la Convention sur l'élimination de toutes les formes de discrimination à l'égard des femmes du 18 décembre 1979, la Convention relative aux Droits de l'Enfant du 20 novembre 1989 et la Charte Africaine des Droits de l'Homme et des Peuples du 27 juin 1981 ;

### **Decree n. 2-94-985:**

**Article 1:** Il est chargé d'élaborer et de mettre en oeuvre la politique nationale en matière de médicament et de produits pharmaceutiques sur les plans technique et réglementaire.

### **In the Preamble of its constitution:**

▲ Affirm their adherence to the Declaration of Human Rights of 1789 as well as to the international instruments adopted by the United Nations and the Organization of African Unity, in particular the Universal Declaration of Human rights of 10 December 1948, the Convention on the Elimination on the Rights of the Child of 20 November 1989 and the African Charter on Human Peoples' Rights of 27 June 1981 (2)

▲ **Decree n. 2-94-985:** Organization of the Ministry of Health:

Article 1: "The minister [...] is charged of elaborating and to put in action a national policy with regards to medication and pharmaceutical products in technical and regulatory plans" (4)

## Sustainable Financing (State Reimbursement scheme) Overview

**Decree n. 2004-1404, 2004:** Organization of the Ministry of Health and Medical Prevention

### Article 16:

La Cellule d'Appui au Financement de la Santé et au Partenariat a pour mission d'assurer l'accès financier aux soins de santé par le développement de stratégies appropriées en vue de la mise en place d'un système de couverture maladie universelle et de développer le partenariat avec les collectivités

locales, les associations, les mutuelles, les comités de santé et les organismes de prévoyance maladie.

Elle est chargée, à ce titre, d'assurer :

— le développement de l'assurance maladie volontaire ;

— la mise en place de mécanismes de solidarité en faveur de l'accès financier aux soins de santé des

groupes vulnérables ;

— la régulation des prix et des tarifs des prestations sanitaires dans les structures publiques et privées ;

— la tutelle technique des Institutions de Prévoyance Maladie (IPM) et des comités de santé ;

— l'élaboration des comptes nationaux de la santé ;

— le secrétariat de la Commission Macroéconomie et Santé ;

— la supervision des études liées au

**Decree n. 2004-1404, 2004:** Organization of the Ministry of Health and Medical Prevention

### Article 16:

The responsible agency for the Financing of health and Partnership have as a mission to guarantee the financial access to health care via the strategy developments with the purpose to create a universal healthcare system and to develop a partnership with local collectivities, associations, insurance companies, health committees and health care organizations

This agency has the responsibility for:

-The development of a voluntary health insurance;

-The implementation of solidarity mechanisms in favor of the financial access to health care of vulnerable groups

-Regulating prices and tariffs of sanitary subsidies in private and public infrastructures;

-The organization of the Ministry of Health and Medical Prevention;

-The technical (tutelle) of the Medical Prevention Institutions (IPM) and health committees;

-The creation of national health accounts;

-The Secretariat of the Macroeconomic and Health Commission;

-The supervision of the studies linked to the financing of health;

-The promotion of contracting of health services (5)

Financement de la santé ;

— la promotion de la contractualisation des services de santé.

### Sustainable Financing (State subsidy) Overview

### Rational Selection Overview

### Affordable prices Overview

**Decree n. 2-94-985, 1994:**

**Article 10:** La Direction du Médicament et de la Pharmacie est chargée:

[...] - De fixer le cadre des prix des médicaments et des spécialités pharmaceutiques, conformément à la réglementation des prix en vigueur.

**Decree n. 2-94-985, 1994: Organization of the Ministry of Health:**

**Article 10** regarding the role of the direction of Medicines and Pharmacies:

To establish the price frames of medication and the pharmaceutical speciality, conformably with the actual price regulations (4)

*Translations found in this template were made by the author.*

### Sources

(1) Ministère de la Santé du Sénégal:

<http://www.sante.gouv.sn> (accessed on 17 May 2014)

(2) Constitution de la République du Sénégal:

<http://www.gouv.sn/IMG/pdf/Constitution.pdf> (accessed on 17 May 2014)

(3) Ratification of International Human Rights Treaties:

<http://www1.umn.edu/humanrts/research/ratification-senegal.html> (accessed on 17 May 2014)

(4) Décret n° 2-94-985 du 17 Jomada II 1415 (21 novembre 1994) relatif aux attributions et à l'organisation du Ministère de la Santé:

<http://docum.unblog.fr/files/2010/01/organmsp.pdf> (accessed on 17 May 2014)

(5) Décret n° 2004-1404 du 4 novembre 2004 portant organisation du Ministère de la Santé et de la Prévention Médicale:

<http://www.jo.gouv.sn/spip.php?article4451> (accessed on 17 May 2014)

(6) Ministère de la Santé Publique, 'Déclaration de la Politique Nationale de Santé', Juin 1989, 6.  
<http://rds.refer.sn/IMG/pdf/1c89-POLITIQSANTESENEGAL89.pdf> (accessed on 17 May 2014)

(7) Arrêté ministériel n° 241 MSP/DPM en date du 16 janvier 2002, portant révision des listes de médicaments et produits essentiels.  
<http://rds.refer.sn/IMG/pdf/3o02-01-16LISTMEDICESSENTIE.pdf> (accessed on 17 May 2014)

(8) Arrêté n° 11782 du 29 octobre 1990, fixant les listes des médicaments et produits essentiels au niveau des cases, postes, centres de santé et des hôpitaux régionaux.  
<http://rds.refer.sn/IMG/pdf/3m85-04-16prixprodspecpharm.pdf> (accessed on 17 May 2014)

(9) Arrêté interministériel n°1539 MEFP-MCA-MSAS en date du 4 mars 1994 créant un Comité de suivi des prix des produits pharmaceutiques.  
<http://rds.refer.sn/IMG/pdf/3p94-03-04Comiteprixpharm.pdf> (accessed on 17 May 2014)

(10) Arrêté interministériel n° 210 MFAE-DCIP du 9 juin 1979 fixant la structure des prix des produits et spécialités pharmaceutiques dans la République du Sénégal.  
<http://rds.refer.sn/IMG/pdf/3j79-01-09prixprodspecpharm.pdf> (accessed on 17 May 2014)

(11) Arrêté interministériel n° 4122 MCOM-DCIP en date du 16 avril 1985 completant l'arrêté n° 210 MFAE-DCIP du 9 juin 1979 fixant la structure des prix des produits et spécialités pharmaceutiques.  
<http://rds.refer.sn/IMG/pdf/3m85-04-16prixprodspecpharm.pdf> (accessed on 17 May 2014)

(12) Begoña Iñarra, '*Towards Greater Production of Medicines in Africa*', Africa Europe Faith and Justice Network (2014).  
<http://www.aefjn.org/index.php/358/articles/towards-greater-production-of-medicines-in-africa.html>  
(accessed on 18 May 2014)

(13) Guide des Professionnels de la Santé, 'Les Maladies Infectieuses et Parasitaires'  
[http://www.annuairemedical-senegal.com/article.php3?id\\_article=2842#top](http://www.annuairemedical-senegal.com/article.php3?id_article=2842#top) (accessed 12 March 2014)

(14) Foley, Ellen E. "No money, no care: women and health sector reform in Senegal." (2001), 1-50

(15) UNICEF, 'The Bamako Initiative'  
[http://www.unicef.org/sowc08/docs/sowc08\\_panel\\_2\\_5.pdf](http://www.unicef.org/sowc08/docs/sowc08_panel_2_5.pdf) (accessed 12 March 2014)