



Republic of Senegal
One People- One Goal- One Faith



**Ministry of Health and
Social Welfare**

THE SENEGALESE DEVELOPMENT STRATEGY OF THE UNIVERSAL HEALTH COVERAGE

**Tokyo International Conference on African
Development**

1-3 June 2013

Context of financial accessibility to health care

Generally, the demand of health services constitutes a major concern due to financial accessibility.

Household expenditure directly contributes to 34% of the National Health Expenditure.

80% of the Senegalese population does not have health coverage.

A strong political commitment in order to make Universal Health Coverage a reality in Senegal.

Political commitment



« Beyond a new voluntarism in the strengthening of the health facility, I intend to launch, in consultation with the relevant actors, a universal health coverage program and a serious reflection on the health governance ».

(Address to the nation April 3, 2012)

Health risk coverage schemes in Senegal

R1

- Compulsory scheme covering the civil servants.

R2

- Compulsory scheme covering workers from the private sector.
- This is the health contingency institutions (HCI).

R3

- Voluntary scheme across health mutual insurance.
- Voluntary scheme across private insurances.

R4

- Free medical assistance scheme targetting vulnerable groups and poor population.

Strength and Weaknesses

Strength

- Improved access to health care.
- Solidarity and equity
- Improved health indicators in people with insurance

Weaknesses

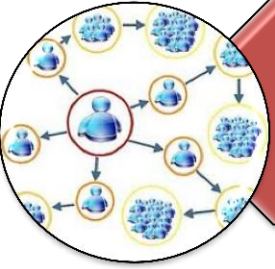
- Weakness in governance and management.
- No regard of the health pyramid by beneficiaries
- A package of care of health insurances remains weak and midly attractive
- Low capacity of beneficiaries' contribution
- Low rate of coverage in the informal and rural sector
- Free initiatives highly depending on the Technical and financial partners

Current experiences and achievements for the extension of the health coverage

« Decentralization of the health insurance » project (DECAM)

- ❑ DECAM aims to improve financial accessibility to quality health care among the rural and informal population and the vulnerable groups .
- ❑ Objective : « ***One local communtiy, One mutual insurance at least*** ».

The domains of intervention of the project:



Setting of mutual insurance and networks at regional and departmental level



Strengthening the financial mechanism of mutual health insurances (Health insurance subsidy from the State)

Métriques de 2013		
	2013	2012
Total inscrit	3234	1234
Moins par retraité	102	102
Total inscrit	3132	1132
Moins par retraité	1707	1300
Moins de bénéficiaires par adhérent	3,10	1,4
Moins	1421234	1891234
Moins	12001234	15001234
Moins	1171234	211234
Moins	2001234	1501234
Moins	123456	4234
Moins de bénéficiaires par adhérent	36,7%	
Moins de bénéficiaires par adhérent	37,8%	
Moins de bénéficiaires par adhérent	38%	

Strengthening administration and management

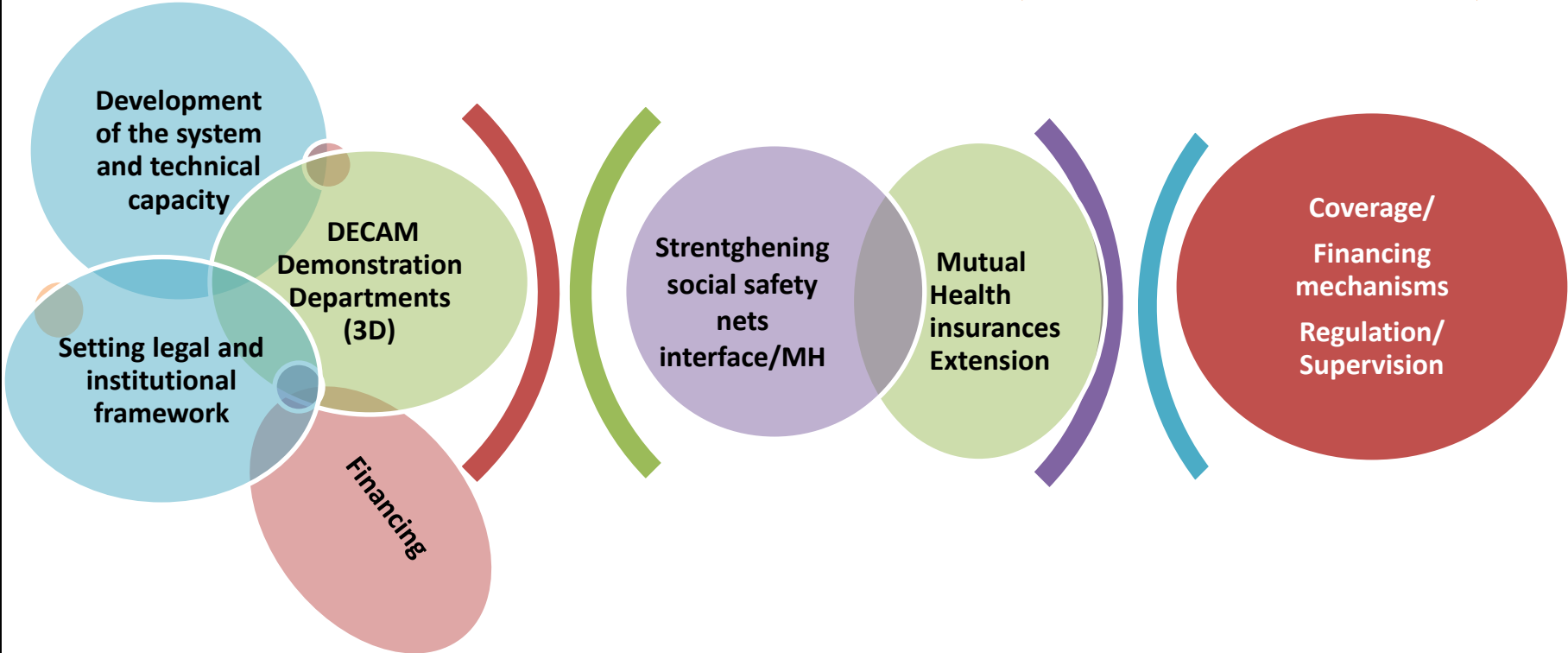


Strengthening communication

Other experiences et initiatives (continuation)

Experience developed by one local authority





Phase I: Foundation and Demonstration (in 14 departments)

Phase II: Extension

Phase III: Consolidation

Extension of the Universal Health Coverage in 3 Phases

Setting of an Equity Fund

- ❑ **Objective of the fund of equity:** free medical care of the indigents through the mutual health insurances.
- ❑ **Area of intervention:** In four (04) regions of Senegal with the support of the Belgian cooperation.
- ❑ **Currently over 7000** indigents enrolled in **43** mutual health insurances insurance benefit freely from the health services.

Signing ceremony of the Equity Fund

ENTRE LE SENEGAL ET LA BELGIQUE
AGEMENT DU FONDS D'EQUITE DESTINE A LA PRISE EN CHARGE
NTS A TRAVERS LES MUTUELLES DE SANTE DANS LES REGIONS
KAOLACK, FATICK, DIOURBEL ET KAFFRINE.
E Mme LE MINISTRE DE LA SANTE ET DE L'ACTION SOCIALE
0 JUIN 2012 - HOTEL RADISSON BLU DAKAR



School Mutual Health Insurance Project



Other experiences and initiatives

- ❑ Free initiatives (dialysis, insulin, ARV, tuberculose....)



Strengthening of the insurance regulation

Implementation of Statut N°07/2009/CM/UEMOA on regulation of social mutuality

**National Office of Social
Mutuality**

**National Guarantee
Funds of Social
Mutuality**

Challenges:

- Ownership of UHC strategy by the local authority and community;
- To put together all the free initiatives;
- Strengthening the strategies of information;
- Sustainability of financing of the UHC;
- Harmonization of interventions by a multisectorial approach with the definition of roles and responsibilities of each actor.
- The Universal Health Coverage is not only the prerogative of a single ministerial department more or less a single sector.

**If you want to go far , go together !
If you want to go fast, go alone !
“Dr Lembit Raago”**





**JE VOUS REMERCIE DE VOTRE
AIMABLE ATTENTION!**