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General data

POPULATION, 2023
17,763,163

PHYSICIANS/1000 INH, 2020-2022
0.13

NURSES/1000 INH, 2020-2022
0.44

LIFE EXPECTANCY, 2022
69.16

Socioeconomic data

COUNTRY INCOME LEVEL, 2022
Lower middle income

HUMAN DEVELOPMENT INDEX RANKING, 2023
169

GDP PER CAPITA (US\$), 2023
1,706.44

HEALTH EXPENDITURE, 2021
71.23

UNIVERSAL HEALTH COVERAGE, 2021
50



WHO FRAMEWORK FOR PALLIATIVE CARE DEVELOPMENT

① EMPOWERMENT OF PEOPLE AND COMMUNITIES
② POLICIES
③ RESEARCH
④ USE OF ESSENTIAL MEDICINES
⑤ EDUCATION AND TRAINING
⑥ PROVISION OF PC

LEVEL OF DEVELOPMENT

① EMERGING
② PROGRESSING
③ ESTABLISHED
④ ADVANCED

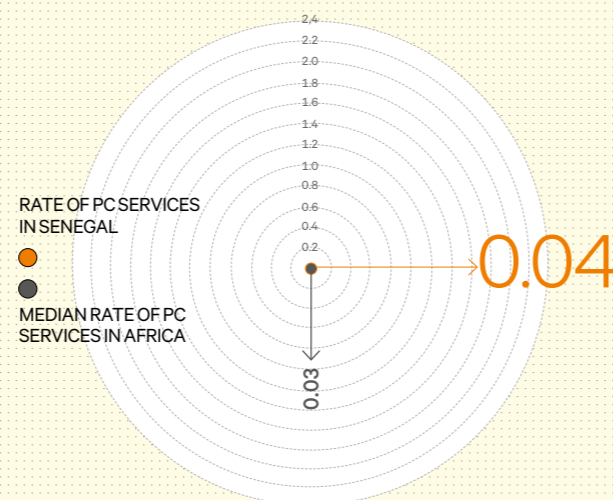
Senegal

F Provision of PC (Specialised Services)

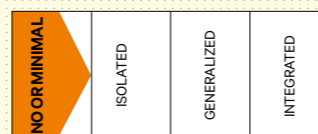
Total number of Specialised PC services
7

Rate of PC services per 100,000 inhabitants
0.04

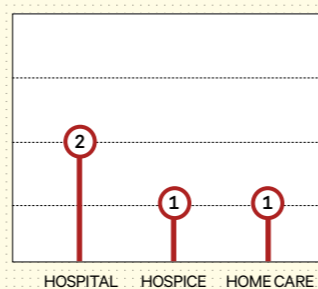
Senegal in the context of African continent



Geographic distribution and integration of PC services



Level of development of different types of PC services



Paediatric PC Services

GEOGRAPHIC DISTRIBUTION AND INTEGRATION
1

TOTAL NUMBER
0

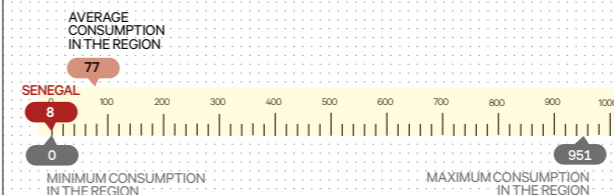
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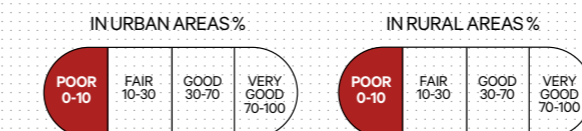
D Use of essential medicines

Opiods consumption (excluding methadone)
8
S-DDD/MILL INHABITANTS/DAY

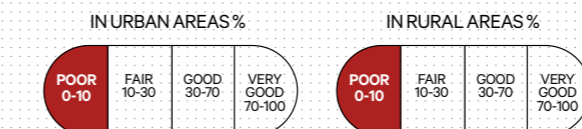
Senegal in the context of African continent



Overall availability of essential medicines for pain and PC at the primary level



General availability of immediate-release oral morphine at the primary level



C Research

PC-related research articles

2

Existence of PC congresses or scientific meetings

3



National Association: Association Sénégalaise de Soins Palliatifs.
Consultants: Coumba Gueye; Ndeye Mbombé Dieng.

Data collected: From December 2023 to March 2024.
Date validated by consultants: Yes
Endorsed by National PC Association: Yes.
Edition: Edited by Atlantes Research Team (University of Navarra, Spain).

E Education & Training

Medical schools with mandatory PC teaching
0/5

Nursing schools with mandatory PC teaching
0/NA

Recognition of PC specialty
2

B Policies

National PC plan or strategy
2

Responsible authority for PC in the Ministry of Health
1

Inclusion of PC in the basic health package at the primary care level
1

A Empowerment of people and communities

Groups promoting the rights of PC patients
4

Advanced care planning-related policies
1

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Ind1 Existence of groups dedicated to promoting the rights of patients in need of PC, their care-givers, and disease survivors.	<div><div></div><div></div><div></div><div>4</div></div> Strong national and sub-national presence of palliative care advocacy and promoting patient rights (as a professional association of Palliative Care, i.e.)	In Senegal, the Association Sénégalaise de Soins Palliatifs et Accompagnement (ASSOPA) is a civil society organization that promotes palliative care and provides support to patients and their families. It collaborates with the Ministry of Health, hospitals, health professionals, and community groups to expand awareness and services. While there is no association specifically focused on defending the rights of palliative care patients, other disease-specific groups—such as those for diabetes, cancer, sickle cell disease, and haemophilia—engage in advocacy that contributes to patient support and public awareness.
Ind2 Is there a national policy or guideline on advance directives or advance care planning?	<div><div>1</div><div></div><div></div><div></div></div> There is no national policy or guideline on advance care planning.	There is no national policy or guidelines for palliative care. Draft strategies for including palliative care in the national cancer control plan have been proposed but have not yet been implemented.
Ind3 3.1. There is a current national PC plan, programme, policy, or strategy. 3.2. The national palliative care plan (or programme or strategy or legislation) is a standalone.	<div><div></div><div>2</div><div></div><div></div></div> Developed over 5 years ago. <div><div></div><div></div><div>3</div><div></div></div> There is a dedicated section on palliative care contained within another national plan such as for cancer, NC diseases or HIV.	Senegal does not currently have a national strategic plan for palliative care. However, a section dedicated to palliative care exists in the Strategic Plan for Cancer Control (2015-2019 and 2025-2029). Palliative care is not yet formalized but exists as an initiative in some level 3 public health facilities (EPS). The cancer control plan provides a monitoring and evaluation framework, with indicators integrated into the DHIS2 to measure the effectiveness of interventions and improvements in patients' quality of life. A biennial evaluation of palliative care provision is also included in this plan; implementation remains limited due to the lack of a clearly defined national policy, which hinders the effective integration of palliative care nationwide.

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3.3. There are indicators in the national plan to monitor and evaluate progress, with measurable targets.	<div><div></div><div>2</div><div></div><div></div></div> The indicators to monitor and evaluate progress with clear targets exist but have not been yet implemented.	
Ind4 PC services are included in the list of priority services for Universal Health Coverage at the primary care level in the national health system.	<div><div>1</div><div></div><div></div><div></div></div> Not at all.	Palliative care is not included in Senegal's legislation. However, it is integrated into the national strategic plan for the recovery of primary health care for 2024–2028.
Ind5 5.1. Is there a national authority for palliative care within the government or the Ministry of Health? 5.2. The national authority has concrete functions, budget and staff.	<div><div></div><div></div><div></div><div>4</div></div> There is no coordinating entity. <div><div>1</div><div></div><div></div><div></div></div> Does not have concrete functions or resources (budget, staff, etc.).	Currently, there is not a national palliative care coordinating authority in Senegal, although this may be considered in the future. However, with the integration of palliative care into cancer care, the Division of NCD Control partially ensures this coordination. A recommendation from the IAEA ImPACT study called for the creation of a palliative care office within the Ministry of Health, a recommendation that has not yet been implemented. There is no palliative care department or specific budget allocated. At a conference on palliative care aimed at raising awareness among doctors specializing in cancer and radiotherapy, specialists in chronic diseases, the grant was obtained from the International Francophone Federation of Palliative Care (FISP).

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<div>Ind6</div> <div>Existence of congresses or scientific meetings at the national level specifically related to PC.</div>	<div><div><div></div><div></div><div>3</div><div></div></div></div> <div>At least one non-palliative care congress or conference (cancer, HIV, chronic diseases, etc.) that regularly has a track or section on palliative care, each 1-2 years.</div>	<div>The National Association, ASSOPA, regularly organizes conferences on palliative care, with no fixed frequency. A dedicated section is included in the biennial cancer conferences. Conferences on chronic diseases, HIV, and cancer also address palliative care.</div>
<div>Ind7</div> <div>Estimation of the level of peer-reviewed articles focusing on PC research published in any language in the past 5 years with at least one author from the country.</div>	<div><div><div></div><div>2</div><div></div><div></div></div></div> <div>Reflects a limited number of articles published.</div>	<div>A comprehensive scoping review conducted in March 2023, covering publications from 2017 onward, identified 8 peer-reviewed articles on palliative care in Senegal that met the inclusion criteria for this indicator.</div>
<div>Ind8</div> <div>Reported annual opioid consumption –excluding methadone– in S-DDD per million inhabitants per day.</div>	<div><div><div></div><div>8</div><div></div><div></div></div></div> <div>Reflects a limited number of articles published.</div>	<div><div><div><div></div><div>8</div><div></div></div><div>S-DDD PER MILLION INHAB /DAY</div></div><div><div>COUNTRY VS REGION</div><div><div>AVERAGE CONSUMPTION IN THE REGION</div><div>77</div><div>SENEGAL</div><div>8</div><div>0</div><div>MINIMUM CONSUMPTION IN THE REGION</div><div>MAXIMUM CONSUMPTION IN THE REGION</div><div>951</div></div></div></div>

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Senegal

<div>Ind9</div> <div>9.1. Percentage of health facilities at the primary care level in Urban areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.</div> <div>9.2. Percentage of health facilities at the primary care level in rural areas that have pain and palliative care medications as defined in the WHO Model List of Essential Medicines.</div>	<div><div><div>1</div><div></div><div></div><div></div></div></div> <div>Fair: Between 10% to 30%.</div> <div><div><div>1</div><div></div><div></div><div></div></div></div> <div>Poor: Between 0% to 10%.</div>	<div>In Senegal, the 2022 draft National Essential Medicines List includes only a limited selection of palliative care medicines, such as aspirin, ibuprofen, paracetamol, diclofenac, and prednisone. Opioids are restricted to secondary and tertiary hospitals, and several key palliative care medicines (e.g. cyclizine, docusate sodium, fluoxetine, hyoscine, loperamide, metoclopramide, senna) are not listed. However, the list remains unvalidated at national level.</div>
<div>Ind10</div> <div>10.1. Percentage of health facilities at the primary care level in urban areas that have immediate-release oral morphine (liquid or tablet).</div> <div>10.2. Percentage of health facilities at the primary care level in rural areas that have immediate-release oral morphine (liquid or tablet).</div>	<div><div><div>1</div><div></div><div></div><div></div></div></div> <div>Poor: Between 0% to 10%.</div> <div><div><div>1</div><div></div><div></div><div></div></div></div> <div>Poor: Between 0% to 10%.</div>	<div>According to the National List of Essential Medicines and Products (LNMPE, 2022),distributed by the National Supply Pharmacy (PNA), strong opioids (morphine) are only available in secondary and tertiary public healthcare facilities. Oral morphine is available in three public hospitals, private clinics in Dakar, and a few regional hospitals (Thiès, Saint-Louis, Louga, and Diourbel). Available presentations include extended-release tablets (30 mg), immediate-release tablets (10 mg), and morphine syrup. Morphine tablets and morphine syrup are often out of stock in the first half of the year, before June.</div>

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Ind11	11.1. The proportion of medical schools with COMPULSORY teaching in PC (with or without other optional teaching)	0/5	 <p>To date, no medical school in Senegal has integrated palliative care into its curriculum: palliative care teaching is not mandatory in the curriculum of the five medical schools. However, given its importance in patient care and support, it is planned to advocate with the relevant authorities to introduce it into medical student training programs to enable them to meet pre-requisites. There is no formal national palliative care program in paramedical schools; some schools even devote 2 to 4 hours per year to it in cancer care courses (basic concepts in palliative care).</p>
	11.2. The proportion of medical schools with OPTIONAL teaching in PC.	1/5	
	11.3. The proportion of nursing schools with COMPULSORY teaching in PC (with or without other optional teaching).	0/NA	
	11.4. The proportion of nursing schools with OPTIONAL teaching in PC.	0/NA	
Ind12	Existence of an official specialisation process in palliative medicine for physicians, recognised by the competent authority in the country.	 <p>There is no process for specialization for palliative care physicians but exists other kinds of diplomas with official recognition (i.e., certification of the professional category or of the job position of palliative care physician).</p>	There is currently no specialization in palliative medicine for physicians in Senegal. However, a university diploma in Pain and Palliative Medicine was introduced two years ago in a university medical department.

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Ind13	13.1. There is a system of specialised PC services or teams in the country that has a GEOGRAPHIC reach and is delivered through different service delivery platforms.	 <p>Not at all.</p>	<p>The number of palliative care teams per population is estimated at 0.04 services per 100,000 inhabitants. In Senegal, specialized palliative care is still limited and concentrated in certain urban areas. In some public facilities (four national hospitals and one regional hospital), there are departments with teams trained in palliative care, but palliative care is not their primary activity. In Senegal, palliative care is not specialized but is initiated in specialized departments. It is still limited and concentrated in certain urban areas: Dalal Jamm Hospital (cancer department), Fann Hospital (gerontology department), Aristide Le Dantec Hospital (pediatric and adult oncology departments), and the Ziguinchor Regional Hospital. In the private sector, two facilities offer care (at home and inpatient) and are attempting to include palliative care, but not as their primary activity.</p> <p>RATE OF SPECIALISED PC SERVICES/100,000 INH</p>  <p>7 ← SPECIALISED PALLIATIVE CARE SERVICES</p>
	13.2. Are available in HOSPITALS (public or private), such as hospital PC teams (consultation teams), and PC units (with beds), to name a few examples.	 <p>Ad hoc/ in some parts of the country.</p>	
	13.3. Free-standing HOSPICES (including hospices with inpatient beds).	 <p>Not at all.</p>	
	13.4. HOME CARE teams (specialised in PC) are available in the community (or at the primary Healthcare level), as independent services or linked with hospitals or hospices.	 <p>Not at all.</p>	
	13.5. Total number of specialised PC services or teams in the country.		
Ind14	14.1. There is a system of specialised PC services or teams for children in the country that has geographic reach and is delivered through different service delivery platforms.	 <p>No or minimal provision of palliative care specialized services or teams for children exists in country.</p>	<p>In Senegal, the availability of specialized pediatric palliative care remains very limited, and no specific program dedicated exclusively to palliative care for children exists. Le Dantec Hospital offers palliative care for adults and children and at Dalal Jamm Hospital, a pediatric team provides palliative care, and it is composed of a pediatric oncologist supported by a nurse.</p>
	14.2. Number of pediatric specialised PC services or teams in the country.	 <p>PPC TEAMS</p>	