Overcoming distance to improve child health

In Senegal, specialists are concentrated in the hospitals of the capital, resulting in a large disparity between the medical and surgical services available in Dakar and those in the remote areas of the south, where child morbidity and mortality rates are the highest in the country. This AMREF programme is designed to strengthen the healthcare sector (from early diagnostics to surgical care), decentralise healthcare, and develop the skills of local medical professionals. It aims to extend and increase access to healthcare for more than 10,000 pupils at 60 primary schools in Kolda and Sédhiou.

**DURATION:** 2016-2019  
**CHALLENGE:** Access to Basic Services  
**COUNTRY:** Senegal  
**PARTNER:** Amref

**CONTEXT**  
In the border regions of south Senegal, there is one doctor per 53,387 inhabitants and one nurse per 6,549 inhabitants. In both regions, there is only one paediatrician. This shortage of healthcare professionals means that basic primary care services and surgery are inaccessible to a large swathe of the population, especially communities living far from the main roads or from a reliable electricity supply and healthcare infrastructures. The mortality rates in the Kolda and Sédhiou regions are the highest in the country. In Sédhiou especially, the mortality rate for infants under the age of 5 is double the national average (142‰ vs 72‰).

**ACTION**  
Building on the experience of the programme Filling the gap in healthcare provision, AMREF aims to reduce morbidity and mortality in children under 14 living in the Kolda and Sédhiou
regions by improving their access to preventive and curative primary and specialist care, including paediatric and reconstructive surgery.

Through capacity-building and mobilising and connecting the key stakeholders involved in promoting and improving child health – parents, the extended family, the community, teachers and healthcare workers – the programme targets 60 primary schools and 20 health centres covering a total of more than 10,000 children. More specifically, the programme seeks to:

- Establish 60 health clubs (i.e. one per school) and train 60 teachers to lead awareness-raising sessions in the schools on good practice in hygiene, sanitation and nutrition;
- Organise 160 free screening missions (or medical consultation camps) in the schools for early detection and treatment of the most common childhood diseases (respiratory infections, diarrhoea, malaria, anaemia). These missions involve an on-site multidisciplinary team comprising a general practitioner, a dentist, an ophthalmologist and a nurse. The consultations are open to all the children in the surrounding communities, whether they attend school or not. The children referred to specialists during the consultations receive free, quality medical or surgical follow-up to ensure ongoing care.
- Carry out 9 surgical missions in the field (surgery camps) and 12 specialist consultation mini-camps during which mobile teams carry out operations that do not require the involvement of a consultant surgeon, and train local healthcare professionals in pre- and post-operative care and in minor surgical interventions.
- Set up a telemedicine platform in the target area, in order to gather medical data prior to the camps and facilitate patient follow-up.
- Run awareness-raising sessions on reproductive health, child health, hygiene and nutrition for women of reproductive age and their spouses.

**EXPECTED RESULTS**

- Create awareness of good hygiene and nutrition practices to promote health among 10,616 pupils (i.e. 80% of the pupils at the 60 target schools). They have access to preventive healthcare services in the schools and pass on what they learn to their families.
- The 60 target primary schools are provided with kits with all the necessary hygiene and sanitation equipment; parents’ associations are able to ensure good school governance.
- More than 22,600 children benefit from the 160 screening missions in the schools and medical centres involved in the programme.
- Over 300 children referred as a result of consultations and operated on during the 9 surgery camps.
- 40 community health workers trained in preventive care and promoting good health at village level.
- More than 25,300 women of reproductive age (and their spouses or fathers) acquire improved knowledge and skills in reproductive health, children’s health, hygiene and nutrition.
- At least 10 healthcare professionals per surgery camp are trained in pre- and post-operative care as well as in anaesthetic care and in diagnosing surgical pathologies in children.
- At least 20 local healthcare professionals per surgery camp are trained in aspects of maternal and infant health at post-university level.
LONG-TERM STRATEGY

Amref has been active in Senegal since 2011. Its interventions are based on the identification of the unmet needs of the most vulnerable communities, in line with national health policies and the health districts’ annual plans. The involvement of grassroots community organisations in the solid social grounding and the mobilisation of local staff active in the schools, health clinics and communities, will help ensure optimal healthcare and the durability of these initiatives in the long term.