Policies support the use of emergency contraception (EC) in Senegal: EC is included in national policies for family planning, social marketing programs have procured EC, and local drugstores and pharmacies distribute EC. Knowledge and use of EC is still very low, however.

ABOUT SENEGAL
Senegal has an estimated population of 13,567,338. The country is poor but fairly urban, with 42% living in urban areas. A large majority of the population (94%) identifies as Muslim. Only 4.1% of women have completed education at the secondary level or above. Use of contraception is low and high fertility remains the social norm. Nevertheless, in 2005, the government demonstrated its strong commitment to family planning by passing the Reproductive Health Law, which established access to reproductive health service as a universal right.

CONTRACEPTIVE KNOWLEDGE AND USE
According to the 2010-11 DHS, women with some secondary or higher education are significantly more likely to know about EC than women with no education.

Policies

National norms and guidelines: In 2005, EC was included in the National Norms and Standards. EC is now documented in policies, standards, and protocols relating to RH / FP, revised in July 2010.

Prescription status and who is authorized to dispense: EC is widely available in private pharmacies and can be obtained without a prescription. In the public sector, EC can be obtained from skilled providers such as nurses, midwives and physicians at health facilities.

Post-rape care: EC is not yet included in the national guidelines for post-rape care. However, NGOs working to stop gender-based violence are advocating to include EC in these guidelines.

PRODUCT AVAILABILITY
Registered Products: According to the ICEC database, as of April 2013 three levonorgestrel-alone EC products are registered and distributed: NorLevo 1.5mg (HRA Pharma), Duet (FamyCare), and Optinor (FamyCare).

Locally manufactured products: None available.

Poor quality or counterfeit EC products: No information is available; however, counterfeit drugs are a problem in the region.

WHERE WOMEN CAN ACCESS EC
EC in the commercial sector: The 2010-11 DHS shows that 12% of current contraceptive users obtain their method from the private/for-profit sector. However, a 2009 study determined that pharmacies are the primary outlet for EC access. NorLevo is the major product available in the private sector. Despite the wide availability of EC in pharmacies, a majority of private sector
providers have very low knowledge of EC medical protocols and efficacy timeframes.\(^8\)

**EC in the public sector:** The 2010-11 DHS shows that 85% of current contraceptive users obtain their method from the public sector, making this an important source of family planning supplies.\(^3\) In partnership with the Ministry of Health, in 2006, UNFPA purchased Pregnon for distribution in public clinics.\(^6\) However, a 2006 evaluation of the MOH’s family planning program determined that few health centers offered EC because of a lack of service provider training. In 2007, the MOH in conjunction with Population Council’s EC Afrique implemented a program to train providers and community volunteers about EC to increase accessibility in public sector clinics. As a result of the program, EC became more accessible and available at all public health facilities at an affordable price.\(^6\) Later, however, in a 2011 study with providers and key opinion leaders (KOLs), some KOLs cited low availability of EC products, particularly in public health facilities. These facilities have experienced stock shortages since 2010 due to the expiration of the public sector ECP product, Pregnon.\(^6\) (Duet is now the product available in public sector.)\(^6\)

**EC in the NGO, social marketing and social franchising sectors:** In 2003, IPPF shipped 10,000 packets of EC to Senegal, and in 2006, another 55,000 packets were shipped by UNFPA (likely for use in the public sector).\(^10\) In conjunction with school officials and students, the Centre de Formation et de Recherche en Santé de la Reproduction (CEFOREP, a Senegalese non-profit organization) introduced an initiative to build awareness of EC as an option for young people who are sexually active.\(^6\) The initiative also sought to build a link between the school community and the health care system for EC provision. Currently there is no specific campaign by social marketing organizations to promote EC use in Senegal.

**Community-based distribution of EC:** Current policies and standards in reproductive health do not yet provide for community-based distribution of EC.

**MEDIA COVERAGE OF EC**
Approximately 80% of women in rural areas have exposure to the mass media at least once a week. In urban areas, 93.1% of women have exposure to the mass media and almost 70% of women listen to the radio at least once a week.\(^3\) In March 2010, Agence de Presse Sénégalaise (The Herald), a local newspaper in Dakar, published an article describing EC and the need for providers to increase their awareness and understanding of EC protocols. The national network of journalists for population and reproductive health has also expressed interest in educating its members about EC more extensively.\(^10\)

**PROVIDERS**
Over the last three years, two studies have been conducted (in 2009 and 2011) in Senegal yielding information on providers and EC. The 2009 study determined that the majority of providers in local pharmacies are unaware of existing medical protocols for EC, such as the timeframe for effective use. Providers were also divided on whether to offer EC to young people.\(^8\) The 2011 study found that 38% of providers have never received specific training on EC provision, and that training in EC provision is not sufficiently integrated into the basic training of providers (only 23% of providers were trained on EC in their basic training). Most knowledge is gained through their professional practice (52% said they were trained on the job). The providers least likely to be trained are counter agents and pharmacists, with only 30% and 65% trained respectively. Only 41% of trained providers are comfortable with EC being sold without a prescription. In addition, many of the trained providers continue to believe that EC use increases the risk of contracting STIs and sexual risk-taking.\(^10\)

**DONOR SUPPORT**
UNFPA has purchased EC for Senegal’s family planning programs, and there are indications that UNFPA support will continue for their next program (2011-2016).\(^10\)

**CONCLUSION**
EC access in Senegal is acceptable with several products on the market, and favorable policies. However, EC knowledge is low, and family planning use in general is low, at less than 10%.
REFERENCES


8 Key informant feedback from Babacar Mane, February 14, 2012.


This fact sheet has been prepared by the International Consortium for Emergency Contraception, in conjunction with Population Council Senegal, and represents the best information we have been able to gather. We welcome your input for future revisions. Please contact us at info@cecinfo.org. Visit our website at www.emergencycontraception.org for more information on EC.