One out of three people living in Sub Saharan Africa lives in a French-speaking country. The countries representing francophone Africa have the highest total fertility rates and maternal and infant mortality rates in the world—and the lowest contraceptive rates in the world. Compounding poor health outcomes, francophone Africa has rapid population growth; population in these countries is expected to grow almost three-fold by 2050.¹

Senegal Urban Reproductive Health Initiative

The Initiative Sénégalaise de Santé Urbaine (ISSU)² is a five-year project (2010-2014) to promote family planning in six cities in Senegal. Project partners are working with the Senegalese Ministry of Health (MOH) to achieve the country's Millennium Development Goals 4 and 5 by 2015. Funded by the Bill & Melinda Gates Foundation, which also supports Urban Reproductive Health Initiatives in India, Nigeria, and Kenya, ISSU works in synergy with USAID and other donor-funded projects to support the vision of the MOH's Division de la Santé de la Reproduction (DSR) to increase contraceptive prevalence by satisfying unmet need for family planning.

The overall goal of ISSU is to improve the quality of life of the urban poor³ living in Senegal's largest cities by increasing the accessibility, quality and use of family planning services. The initiative is also a proving ground to demonstrate that innovative approaches focused on supply of quality services in the public and private sectors, demand, and advocacy can be catalytic in significantly increasing the use of modern family planning methods by the urban poor in francophone Africa. Together, ISSU and the DSR are developing, testing, validating, and scaling-up under-supported and innovative approaches to ensure greater access to quality family planning products and services.

Senegal was selected as the francophone site for the Urban Reproductive Health Initiative thanks to the MOH's strong commitment to promote transformational changes in public and private sector provision of family planning services. Senegal can serve as a model and catalyst for other governments and donors to invest in urban family planning programs in francophone Africa.

¹Population Action International; Sénégal RAPID analysis; Futures Institute
²The word issue in French means a way out, solution or alternative. The initiative represents an alternative to improve living conditions among the people reached by the project. Wellitaare is a Wolof term meaning wellbeing.
³Urban poor are defined as the lowest wealth quintile; urban rich are defined as the highest wealth quintile.
Senegal has a large urban population,

like many of its neighbours. An estimated 42% of Senegal’s 12 million citizens live in cities. This population is rapidly increasing and is expected to grow by more than 45% by 2015.

ISSU is implemented by IntraHealth with support from seven consortium partners. The project works in the cities of Dakar, Guédiawaye, Kaolack, Mbao, Mbour, and Pikine.

**Interventions**

**Supply**

- Rapidly identify women at risk of unintended pregnancy at immunization, well baby, and maternity clinics to provide quality birth spacing counseling and family planning services.
- Maximize private sector’s ability to quickly mobilize to deliver services; reinforce the delivery of quality services; and develop Senegal’s first network of socially franchised private-sector family planning clinics.
- Expand access to services for urban poor through community teams of midwives offering family planning and reproductive health services.
- Sustain impact by ensuring high-quality standards in both public and private clinics so that clients return for follow up visits and recommend services to their friends.

**Demand**

- Use mass media and local community radio stations to reach women of reproductive age, men, and community and social organizations with key family planning messages from community and religious leaders.
- Mobilize under-served populations, especially youth, through mobile phones and social media.
- Engage community religious leaders—including Imams, Koranic school teachers, and Dahira leaders—to actively promote family planning.

**Advocacy**

- Promote civil society to use its voice and develop a strong activist movement to urgently advocate for family planning.
- Form national and municipal family planning councils to monitor MOH progress and advocate for an increase in high quality, affordable family planning services.
- Advocate for the government to foster an enabling policy environment that supports family planning in both private and public sectors, fosters increased access, and replicates successful approaches.
Senegal

Population: 12,000,000 (42% urban)
Maternal Mortality Ratio: 401 deaths (per 100,000 live births)
Infant Mortality Rate: 61 (per 1,000 live births)
Modern Contraceptive Prevalence Rate (national): 10.3%
Modern Contraceptive Prevalence Rate in ISSU Dakar sites:
- Urban poor: 17%
- Urban rich: 30%
Total fertility rate in ISSU Dakar sites:
- Urban poor: 5
- Urban rich: 3
Unmet need for contraceptives in ISSU Dakar sites:
- Urban poor: 34%
- Urban rich: 16%

Modern contraceptive prevalence rate: % of married women 15-49 years who are using (or whose partner is using) a modern contraceptive method.
Total fertility rate: number of children that would be born to a woman if she were to live to the end of her childbearing years and bear children in accordance with current age-specific fertility rates.
Unmet need for family planning: women who want to space or limit births but who are not currently using a modern method of family planning.
Collaborating Partners

The Measurement, Learning and Evaluation (MLE) • Project Futures Institute • PATH • PROGRESS Project (FHI 360) • Local NGOs