



**African Population and
Health Research Center**

Transforming lives in Africa through research

Inequalities in access to emergency obstetric and neonatal care services in Dakar, Senegal

CPHIA 2023 Side Event Proposal

Ndèye Awa fall

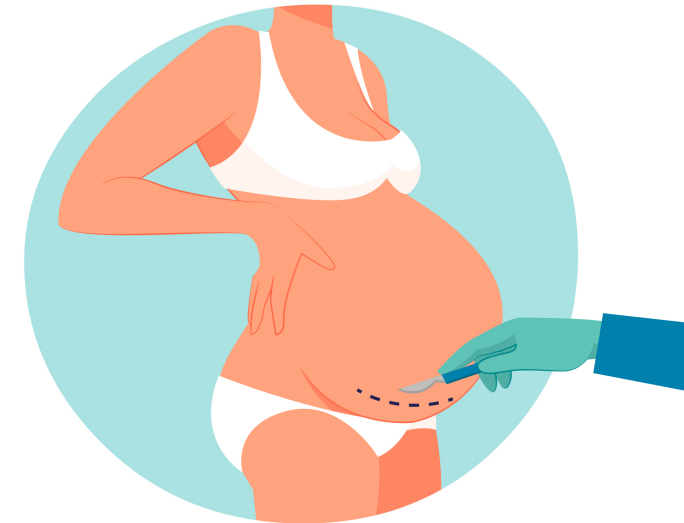
November 27th, 2023, Lusaka

CONTEXT AND JUSTIFICATION

- C-section rates are increasing worldwide and contributing to reducing in maternal and neonatal mortality
- In West Africa, C-section rates remain below 10% and high inequalities within countries

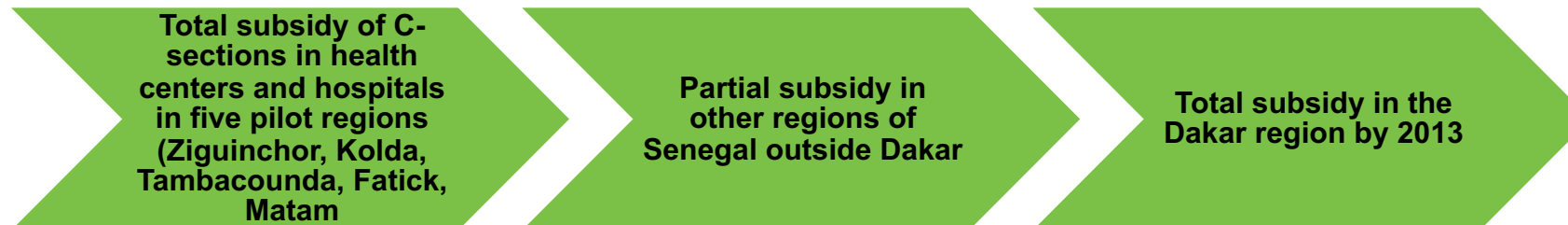
In Senegal:

- To reduce maternal and child mortality:
Implementation of c-section free policy in 2005
- Little knowledge on inequalities in access to C-section



CESAREAN SECTION

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STUDY OBJECTIVE AND METHODS

Objective

Estimate C-section rates, examine socio-spatial inequalities in C-section use and identify associated socio-economic factors in Dakar region between 2005 and 2019.

Study Population

Urban women of reproductive age living in the identified slums in Dakar region

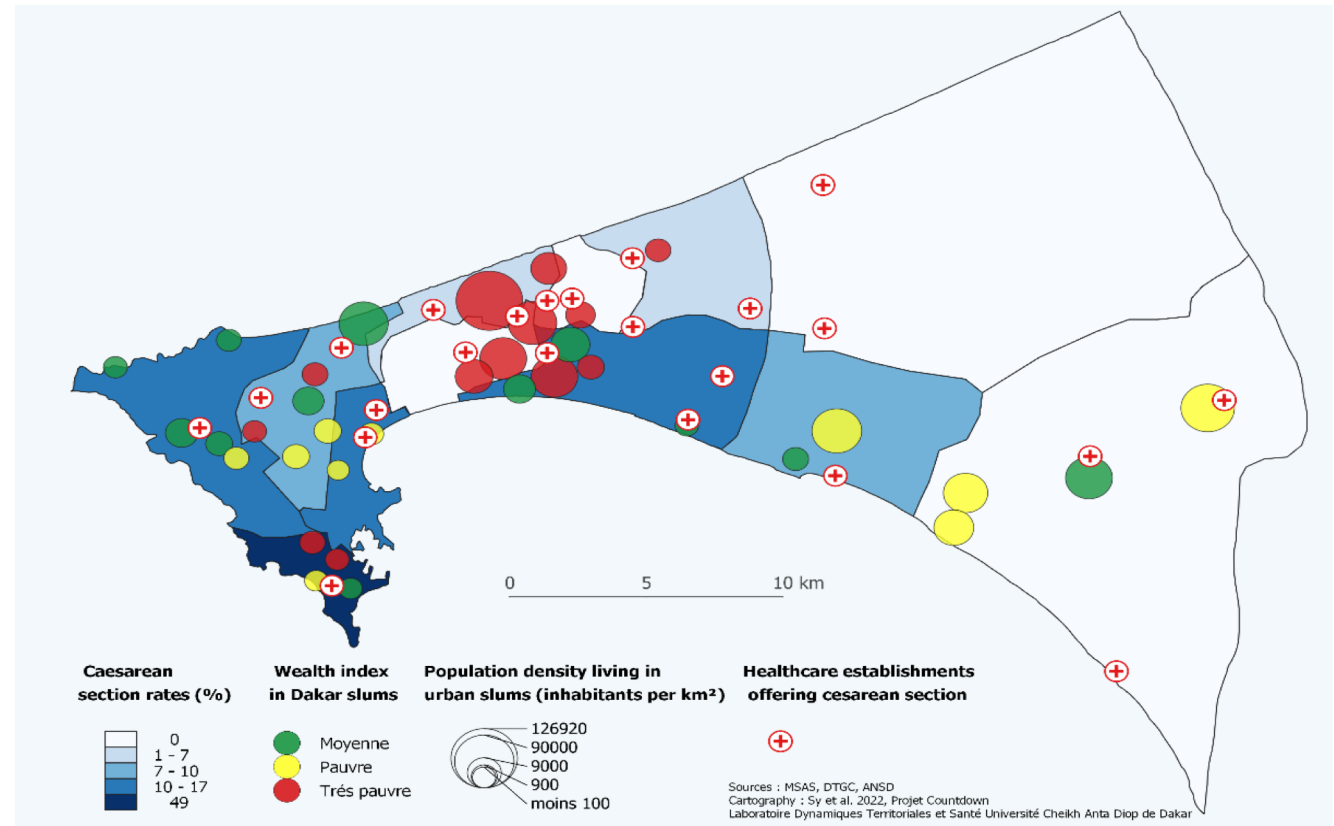
Data sources

- ✓ District Health Information Software 2 (DHIS2) Government statistics on slum areas
- ✓ Demographic and Health Surveys (DHS)
- ✓ Geospatial analysis: to localize emergency obstetric and neonatal care (EmONC) services using the Direction des Travaux Géographiques et Cartographiques (DTGC) databases and satellite imagery from Google Earth platform.

Good accessibility of C-section facilities

High concentration of health facilities offering C-sections near the slums

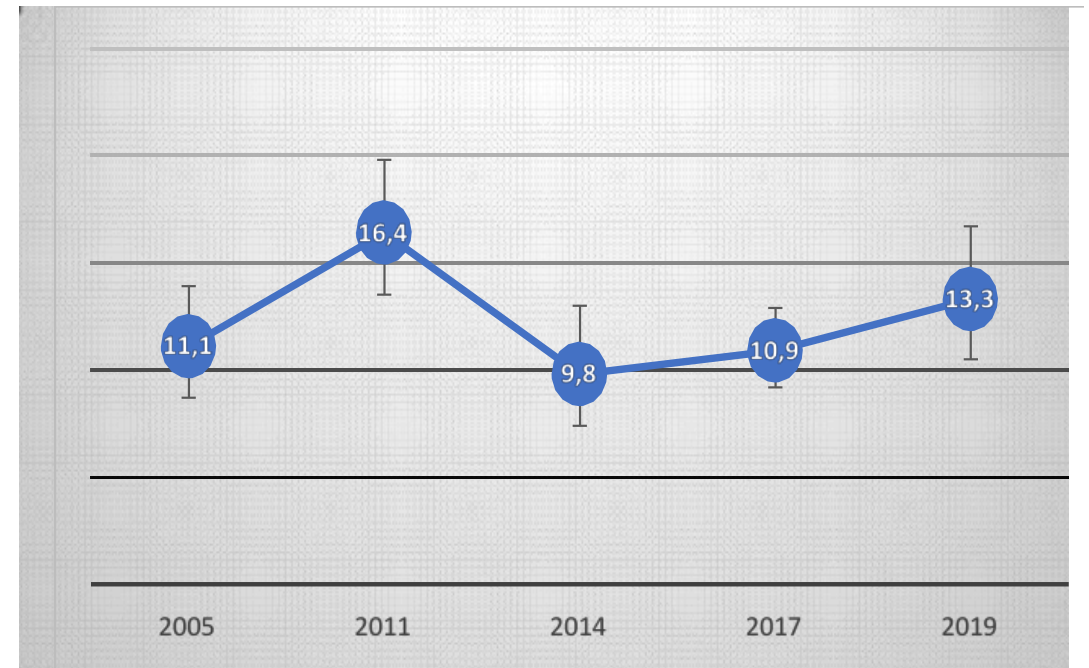
~ 75% of the slums are located less than 2 km from a health facility offering C-sections



Cesarean section delivery rates by wealth tertile and spatial proximity to health facilities (DHIS2, 2019)

C-section trends and associated factors

- Fluctuation in c-section trends overtime
- **Wealth tertile** positively associated with C-section with high prevalence among the rich group
- High prevalence among women with **higher educational levels**
- Women aged between **40 and 49 years** were more likely to have a C-section than those aged 15–24 (aOR=2.02; 95% CI = (1.35-3.02)).



Trends in C-section rates

CONCLUSION

- Free policy effective in Dakar in 2013 but not major significant impact on C-sections rate
- Inequality in the use of C-sections related to socioeconomic factors (wealth status and mother's level of education) and sociodemographic characteristics (mother's age).
- Ineffectiveness in the implementation of the free policy particularly -- urban areas of Dakar region
- Need to implement strategies to promote adequate access to C-section for all women especially urban slums poor

THANK YOU



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