

Improving linkage to care of injection drug users in Senegal by establishing cost-efficient and tailored outreach programs with special consideration of women. Senegal



Figure 1: Housing conditions of a drug user in Medina, Dakar (Photo: Julia Joos)

Context

The traffic of cocaine, heroin and amphetamine-type stimulants through West Africa is leading to the increased use of these substances, especially among young people. The real extent of the problem – particularly of problematic drug use – is largely unknown. There are strong indications, however, that it is creating additional health problems, whereby the spread of infectious diseases such as HIV/AIDS, Hepatitis C, tuberculosis and sexually transmitted diseases must be highlighted. In Senegal, the prevalence of HIV infection is much higher among injection drug users (IDU) compared to the general population (9.4% vs. 0.7%) (see e.g. ¹ or ²). Similarly, IDU are at high risk of acquiring HCV infection, with a prevalence estimated at 38.9% in Dakar (see ²). Research has consistently shown that investments in treatment and harm reduction services can lead to sanitary, economic and social benefits far in excess of the resources invested. But across West Africa, even the most basic drug-related health and treatment services are scarce. Available facilities are generally poorly funded, and few have adequate numbers of personnel with skills and experience in managing substance use disorders.¹

The Centre de prise en charge intégrée des addictions de Dakar (CEPIAD) – at university hospital Fann in Dakar – was the first organization in the region to start outreach interventions

¹ United Nations Office on Drugs and Crime (2014). Not Just in Transit: Drugs, the State and Society in West Africa: An Independent Report of the West Africa Commission on Drugs. United Nations, 2014, Vienna.

² Leprêtre et al. (2015). Prevalence and behavioral risks for HIV and HCV infections in a population of drug users of Dakar, Senegal: the ANRS 12243 UDSEN study. J Int AIDS Soc. 2015 May 22 ; 18 :19888

for injection drug users in 2015 and the first year of activity highlighted the huge need for such work in the Dakar area and beyond. Furthermore, it became evident that the expansion of such activities and the comparison and sharing of outreach interventions with other outreach programs on a regional and international level is necessary. The need for putting a special focus on women is based on their additional vulnerability highlighted by their markedly increased risk of HIV infection: the UDSEN survey³ – with the participation of the CEPIAD technical coordinator Dr. Idrissa Ba – showed that the HIV prevalence among women who injected drugs was disproportionately high (21.1 percent vs. 7.5 percent in men).



Figure 2: Member of the CEPIAD outreach team
(Photo: Julia Joos)



Figure 3: Syringe Exchange through outreach team
at a private house in Dakar (Photo: Julia Joos)

Project description

The general goal of the start-up project is to establish a partnership for an effective and cost-efficient system of outreach interventions, peer work and triage targeting drug users in Senegal with special consideration of women. Key populations should be accessed through harm reduction interventions and triaged to the Department of Infectious Diseases for testing and treatment.

The start-up project aims at developing an institutional partnership between *licit LLC* in Bern and the CEPIAD field team with the support and guidance of the respective Departments of Infectious Diseases of the University Hospitals of Dakar and Bern. This collaborative effort aims at elaborating a strategy for improving the outreach skills of staff in the field and the coverage of effective and cost-efficient outreach interventions. The cost-efficiency hereby will

³ Ibid.



be guaranteed by the inclusion of peer staff. The elaborated project shall basically target injection drug users– based on what we understand as an “extended” peer approach. This approach aims at having a peer presence within drug user communities and at different selected spots in the city. The aim is to train, supervise, guide, monitor and back-up these peer workers by professionals of relevant institutions such as NGOs, state hospitals, psychiatric or HIV clinics.

The project would thus lead to a cost-effective extension of the already existing outreach work of the CEPIAD, including focus on female IDU for the first time.

With the help of the start-up fund we will investigate options for enhanced peer outreach interventions which connect problematic drug users to the Fann Department of Infectious Diseases for testing and treatment of the most common infectious diseases among drug users. We would like to put a special focus on women as their needs – especially those of pregnant women and women with children – are often particularly urgent.

The peer approach is promising especially due to its cost-effectiveness and its success in reaching key-populations.

The start-up grant will be used to organize a 3-day workshop in Dakar, Senegal, during the first half of 2018, to prepare the proposed collaboration between the involved institutions. The main partners for this collaboration will be present, including staff members from the following institutions (total max. 40 persons):

- CEPIAD field team ASRDR, Centre de prise en charge intégrée des addictions, CHNU Fann, Dakar, Senegal ;
- *licit LLC*, Bern, Switzerland;
- Department of Infectious Diseases, Bern University Hospital, Switzerland;
- SMIT (Service des Maladies Infectieuses et Tropicales, CHNU Fann, Dakar ;
- CRCF (Centre Régional de Recherche et de Formation à la Prise en Charge), CHNU Fann, Dakar ;
- La Direction de la Lutte contre la Maladie, CHNU Fann, Dakar ;
- CNLS (Conseil National de lutte contre le SIDA), Senegal ;
- CSO's ;
- Patient organizations .

During this meeting, all key issues regarding the planning of the partnership and further relevant topics concerning IDU will be discussed, including:

- Infrastructure;
- Ethical issues (including submission of protocol to ethics commission);
- Political issues;
- Relevant external expert experiences (by inviting relevant experts from epidemiology, psychiatry, social science etc.);
- Organizational framework: set-up of a project committee including important stakeholders, health authorities, harm reduction experts and public health experts;
- Access to testing and treatment;
- Plan to apply for additional funding mechanisms.

Partnership



Jakob Huber, long-term director of the swiss NGO CONTACT and founder member of *licit* met the Psychiatrist Dr. Idrissa Ba at a Conference in Cape Verde in 2013, where they discussed the urgent need for the development of harm reduction strategies in West Africa. This meeting lead to the development of the regional Global Fund project PARECO (implementation 2017-2019) in 5 different countries of the region (Senegal, Cabo Verde, Ivory Coast, Burkina Faso and Guinee Bissau) with a focus on advocacy activities and a small intervention development component. Both collaborate in the PARECO project but are convinced that harm reduction interventions must be strengthened.

Jakob Huber and Julia Joos, also founder member of *licit*, met Dr. Wandeler in 2017 to discuss their common interest in developing strategies to improve access to health care for populations in West Africa such as defined in the UN Sustainable Development Goal 3. Dr. Wandeler, an attending physician at the Department of Infectious Diseases at Bern University Hospital, was based at Fann University Hospital in Dakar for 4 years (2012-2016), where he worked as a clinical and research collaborator with Prof. Seydi. Prof. Seydi and Dr. Ba have been working together since the opening of CEPIAD in 2014. Prof. Seydi's team is responsible for the management of somatic illnesses of drug users in CEPIAD, with a special focus on HIV and viral hepatitis infections.

Timeframe

The workshop in Dakar is planned for the second half of 2018. A report including all main topics discussed and strategic decisions taken will be drafted following the workshop, including a version in French intended for Senegalese participants and the Ministry of Health in Senegal. A full proposal will be submitted in the next Esther call for proposals.

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