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Mobilizing Mayoral Support in Senegal

CASE STUDY

Like most countries, Senegal is highly decentralized. A program's success or failure is greatly influenced by the level of support local leaders give it. In May 2014, the mayor of Djidah Thiaroye Kao (DTK), a commune in Senegal, committed one million West African CFA francs (US \$2,100) to the health district of Pikine for family planning commodities. It was the first such commitment by a mayor in Senegal and was the product of collaborative work by Senegalese champions.

Advance Family Planning (AFP) partner Réseau Siggil Jigéen (RSJ) led advocacy efforts to convince the mayor to make the investment with technical support from Futures Group, the Direction for Reproductive Health and Child Survival, the Senegalese Association for Family Welfare, and Action and Development. The funds, allocated for the purchase of contraceptives, will help alleviate stock-outs of contraceptives, which are common in the area, and contribute to the accessibility of family planning services.

Achieved amidst political elections, this commitment is a significant step as it lays the foundation for sustainable funding for family planning at the local





Family planning stakeholders in Djidah Thiaroye Kao work together to develop a SMART advocacy strategy.

level in Senegal.

Prioritizing Family Planning in a Decentralized System

According to the 2012-2013 continuous Demographic and Health Survey (DHS), 66% of Senegalese women want to use family planning either to limit or space births, and one in three women have an unmet need for family planning. This number is estimated to be even higher in DTK.

One of 16 communes in the city of Pikine, DTK has a population of about 150,000 residents (62,500 inhabitants/km²)¹ living in 66 neighborhoods. It houses a residential, rural, and mostly low-income population. Three public health posts, two private health posts, and a faith-based clinic serve the local population—a ratio of one health post per 37,850 inhabitants—which is well below World Health Organization and Senegalese Development Health Plan recommendations.

In addition, DTK and other nearby communes suffer recurrent floods during the rainy season that affect the ability of the local population to access health services, including family planning services. To manage their fertility, many women resort to abortion,

which is illegal in Senegal; abortions in unsafe and unhygienic conditions are estimated to cause up to 13% of all maternal deaths in the country.²

To address these needs, Senegal has undertaken a series of initiatives. Following the 2011 Ouagadougou conference on “Population, Development, and Family Planning in West Africa: An Urgency for Action,” the country developed and implemented the Senegalese Family Planning National Action Plan 2012-2015 to prioritize family planning. A decentralized, systematic distribution system of contraceptives called the Informed Push Model (IPM) has helped reduce or eliminate stock-outs of contraceptives across the country. In DTK, IPM has eliminated stock-outs at all family planning delivery points, although difficulties persist in procuring products that support the provision of some contraceptive methods (e.g. anesthetics, sterile gloves, dressing materials, etc.). These efforts have boosted use of modern contraceptive methods nationwide in a short period of time, from 12% in 2012³ to 16% in 2014.⁴

However, lack of funding remains the major challenge to realizing the goals of Senegal’s family planning action plan. In 2014, the government passed decentralization reform (Act 3), which transfers more budgeting power and financial resources to locally-

elected decisionmakers. The act has decentralized funding for the health sector, a function already largely decentralized to special health committees within each communal council in 1996. For DTK, as for other communes, funding for health is obtained through taxes—primarily from the state budget (51%), external partners (26.7%), households (19.3%) and locally elected councils (3%)⁵—and is allocated at the discretion of the mayor.

To sustain momentum, RSJ and other family planning advocates recognized the decentralization reform as an opportunity to mobilize additional financial resources for family planning.

Garnering Family Planning Champions

To achieve the mayor's commitment, RSJ undertook a strategic advocacy approach using the AFP SMART approach and applying it to the local context. In January 2014, RSJ held an initial meeting with the mayor and his team to explain the purpose of the advocacy. A second meeting later that month focused on identifying key stakeholders who should participate in the AFP SMART advocacy facilitation.

It quickly became clear that a range of stakeholders needed to be involved: Civil society organizations (CSOs) in DTK, health care providers, religious organizations, youth groups, and women's organizations. The participation of community volunteers called *Bajenu Gox* and *relais* were critical. In the Wolof language, *Bajenu* is the sister of the head of the household, who provides support for a couple and has a major influence on decisions related to marriage, pregnancy, delivery, and raising children. The *relais* is the voluntary community health worker who acts as a liaison between the health system and the community. With RSJ's guidance, the communal health committee chose 25 key actors, including members of the communal council, *Bajenu Gox*, and *relais*.

The stakeholders participated in a three-day workshop held from February 10-12, 2014, with the aim of developing an advocacy strategy on mobilizing



local funds for family planning. Participants reached consensus on the mayor as the key decisionmaker and a strong, evidence-based message to obtain his support. A member of the Bajenu Gox was chosen as the most credible messenger to deliver the advocacy ask: for the mayor to allocate funding from the communal budget to family planning.

Delivering the Ask

The Bajenu Gox messenger subsequently received an additional two-day training at RSJ to further strengthen her advocacy skills through practices and demonstrations. She also reviewed samples of the Futures Group's RAPID model, which provided her with strong evidence on the positive impact of family planning in health, economic, and social development.

On April 20, 2014, the Bajenu Gox messenger met with the mayor, stressing the urgent need to allocate funds to family planning in DTK and the disastrous consequences of unintended pregnancies due to the inaccessibility of family planning services. She also described how unintended pregnancy leads to abortions in deplorable conditions, which often cause death or lifelong disability. "Whenever a woman

dies, it's like a big tree is uprooted," she implored. Her well-articulated plea deeply affected the mayor. "The mayor had tears in his eyes, and his decision was sudden," she later reported. The DTK mayor immediately made a verbal commitment that he later formally signed in writing, allocating 1 million CFA (US \$2,100) for the purchase of contraceptives.

Although the strategy was successful, the election of a new mayor occurred less than a month after the commitment of the outgoing mayor. In principle, the new administration of the incoming mayor assumes continuity in the decisions and commitments made of the previous one. However, given the many priorities in DTK, follow-through was not assured. Thus, RSJ repeated the advocacy steps with the new mayor to get his personal commitment to at least maintain the decision taken by his predecessor. A first visit was carried out on August 19, 2014, to inform the mayor on the decision made by the former incumbent mayor, raise his awareness about the importance of this commitment, and request his support. Without saying "no," the newly-elected mayor requested more information on the status of family planning in his commune so he could make an informed decision.

During a conversation with RSJ's President on how



best to tailor the advocacy to this new decisionmaker, she realized that the newly-elected mayor was a long-time acquaintance and called him immediately. A subsequent visit to the mayor by the RSJ President was enough to solidify his commitment; he signed a new engagement letter to make the allocation on September 11, 2014.

Lessons Learned

- **Prepare and engage key stakeholders early:** Anticipated difficulties in mobilizing local actors were mitigated and overcome because of their direct involvement in the advocacy planning process from the start. The DTK commune council was deeply interested in the outcome due to preliminary visits conducted by RSJ. The early engagement of CSOs that were familiar with the environment, easy to mobilize, and complementary to efforts, was critical to securing mayoral support. In addition, a partnership with the Direction for Reproductive Health and Child Survival (DSRSE) provided administrative and political support as well as access to necessary information about the health benefits of family planning to use as evidence to support advocacy.
- **The right messenger increases chances for success:** The Bajenu Gox messenger and RSJ President were well suited and well prepared to request commitments from the initial mayor and his successor.
- **Be conscious of timing:** The major risk encountered by the RSJ team was the sudden change in leadership. Since the mayor who made the initial commitment was not re-elected, the new mayor could have denied the prior commitment without RSJ's intervention. Therefore, a major lesson learned is to carefully consider terms of office in pursuing advocacy objectives.
- **Other communes can adopt this approach:** Other Senegal communes face similar obstacles to ensuring access to family planning information, services, and supplies. The strategy employed

in DTK can be tailored to the leadership of other communes to increase resources and ensure a supportive policy environment.

Next Steps

RSJ will follow up with the administrative and financial services of the commune to obtain the effective purchase of the contraceptives as stated in the mayor's commitment letter. There is also a great need in DTK to create a specific budget line for family planning in DTK's annual budget to ensure sustainable funding. The new mayor's commitment makes him a strong candidate to achieve this and to become a true family planning champion in Senegal. RSJ intends to replicate this advocacy approach in additional communes to increase the impact of mayors' financial commitments to family planning. The DTK experience will serve as a model for mobilizing support for family planning at the commune level. Without such support, Senegal will have difficulty achieving its family planning goals.

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Advance Family Planning (AFP) aims to increase the financial investment and political commitment needed to ensure access to quality family planning through evidence-based advocacy. An initiative of the Bill & Melinda Gates Institute for Population and Reproductive Health with the Johns Hopkins Bloomberg School of Public Health, AFP works to achieve the goals of the Family Planning 2020 initiative: to enable women and girls in some of the world's poorest countries to use contraceptive information, services and supplies, without coercion or discrimination.

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