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**Climate change and heat wave-related
pathologies in Senegal: a public problem?**

Context (1/3)

Senegal is one of the African countries most vulnerable to the effects of CC

- ❑ The entire eastern and north strip is threatened
 - ❑ Erosion: limits the possibility of building health facilities in certain localities (PDCS, 2019-2023) and causes displacement.
 - ❑ Flooding: stagnant rainwater promotes diseases
 - ❑ High temperatures: up to 42°C cause malnutrition and mortality MIN



Context (2/3)

- ❑ Philanthropic causes
 - ❑ Burnt forests
 - ❑ Deforestation
 - ❑ Use of firewood



Heat waves in the northern region

Context (3/3)

Emerging and re-emerging diseases

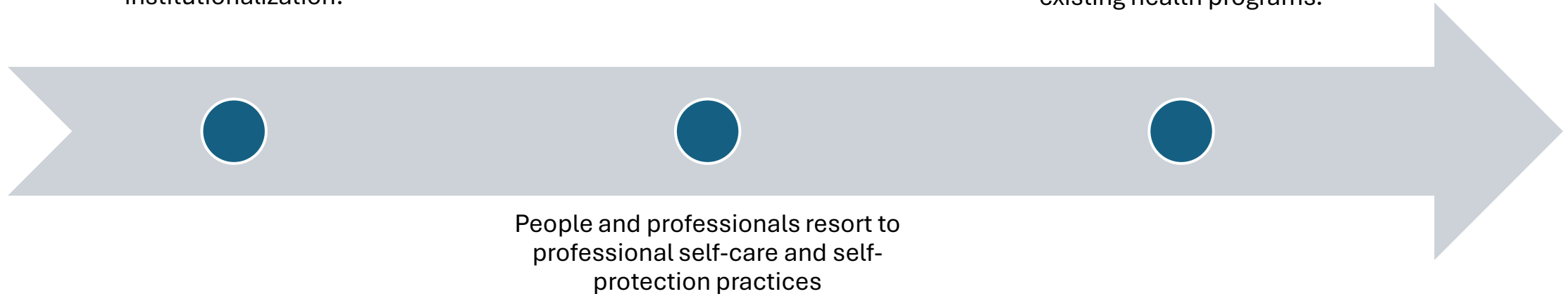
- ❑ Increased maternal and infant mortality (Basu, 2009; Manyuchi et al., 2022; Samuels et al., 2022)
- ❑ Increase in malaria morbidity, acute respiratory infections and chronic diseases (Sy et al., 2022; Fall et al., 2022).



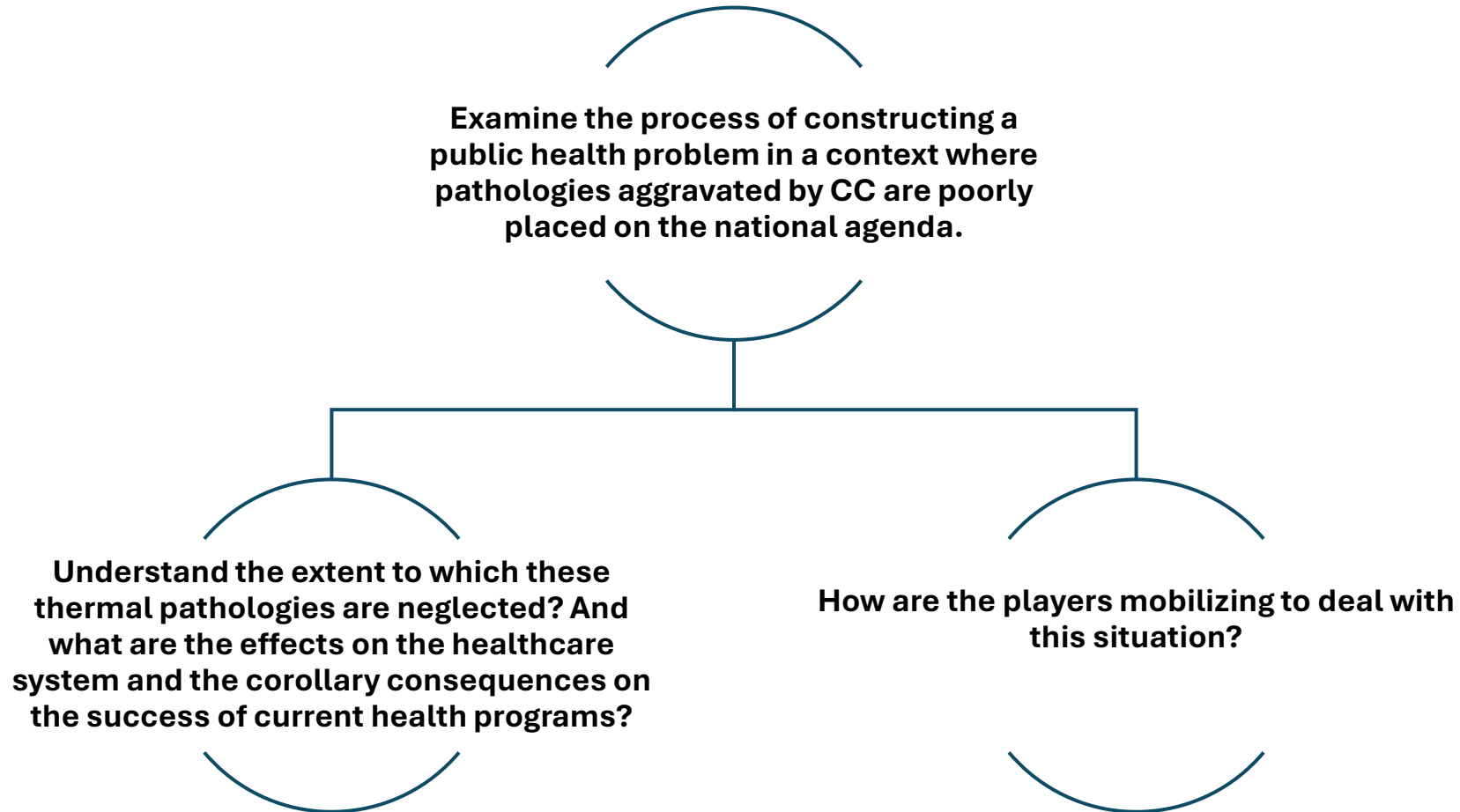
Issues (1/2)

These pathologies, aggravated by extreme temperatures, are perceived by health system stakeholders as health problems with little institutionalization.

Beyond the unfavourable environmental factor, these human behaviours obstruct the success of existing health programs.



Issues (2/2)



Conceptuel framework

- ❑ For a situation to become a public problem, it must.....
 - ❑ ...be sufficiently publicized
 - ❑ ... be emergent
 - ❑ ... be explicitly formulated
 - ❑ ... be implemented in a way that is antinomic to existing policies.

Source: adapted from Ridde, 2006, and Henry 2009.

Cadre méthodologique

Field Workers

- three medical districts selected in Matam region :Kanel, Matam and Ranérou
- 7 months immersion (November 2022 to July 2023)

Sampling

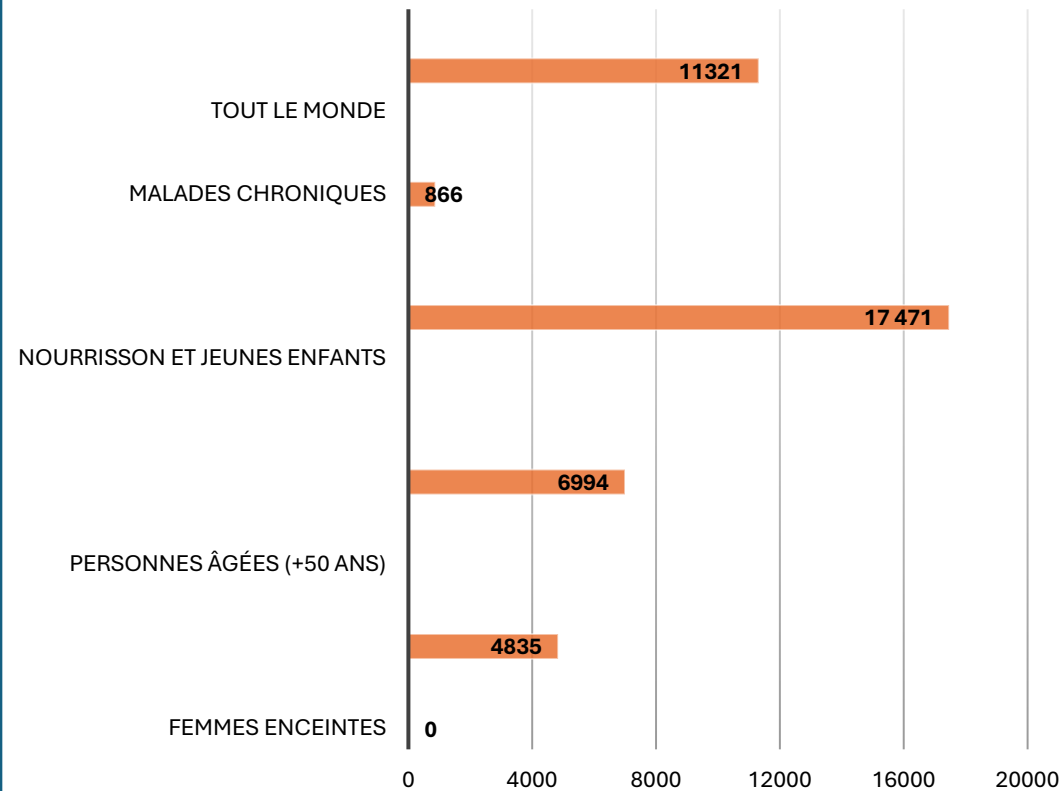
- Keys Informantes: health workers, community health workers, prospective study service agents (DP, CSE), municipal agents, environmental experts,
- Most impacted households: FAR, Seniors, Chronically ill

Tools

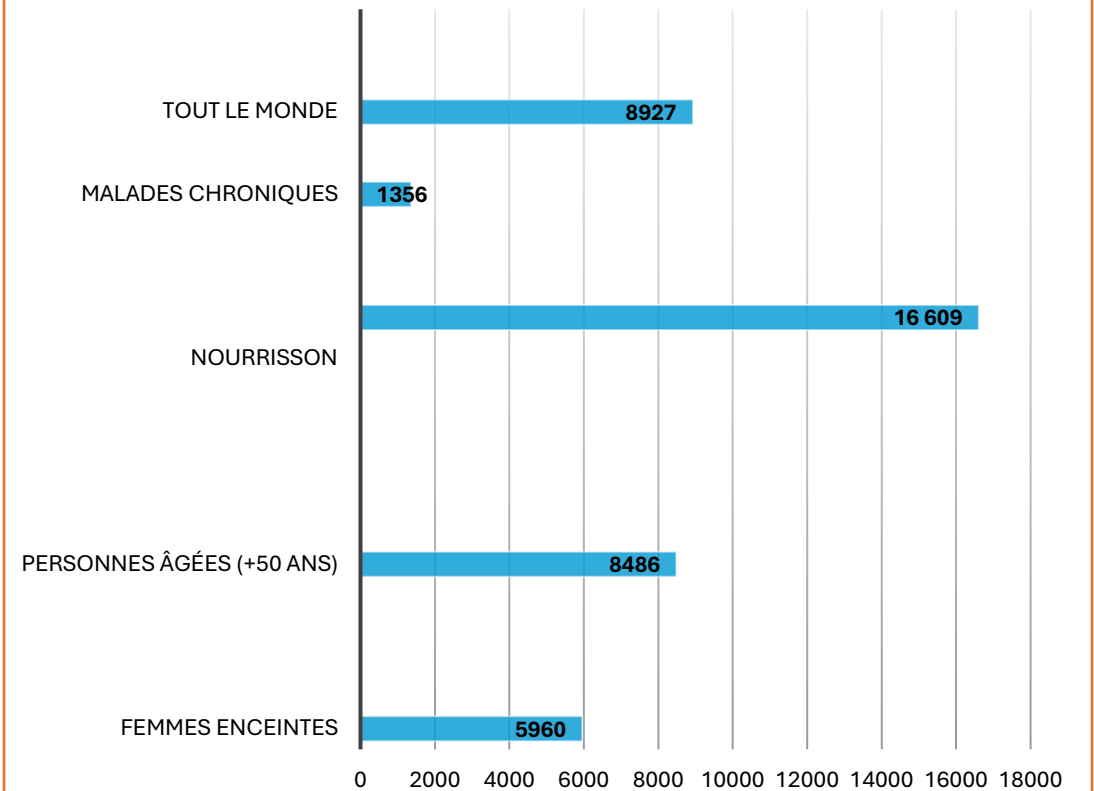
- Interview guide: key informants and impacted households ≥ 62
- Focus group guide: community actors $n \geq 6$: N= 165
- Participatory observation: households, health facilities

Emergence

PThN en 2020



PThN en 2021



Formulation

Health Workers

"The average consultation time per person is considerably reduced because of the heat. Normally, the consultation lasts about 30 minutes or more for new contacts, but during the hot weather it goes from 30 minutes to 15 minutes, or even less. Caregivers also suffer a lot from the effects of the heat! (KII, doctor).

Populations

"I started bleeding when I was making lunch. [...] This is due to the high heat. Unfortunately I had an abortion! The midwife was unable to do anything. It is common to see cases of abortion. The majority of women have at least one abortion. We haven't found a miracle solution yet! (Focus group, parturients).

Form of mobilisation

Health System

- Professional mobility
- Strikes to demand better conditions



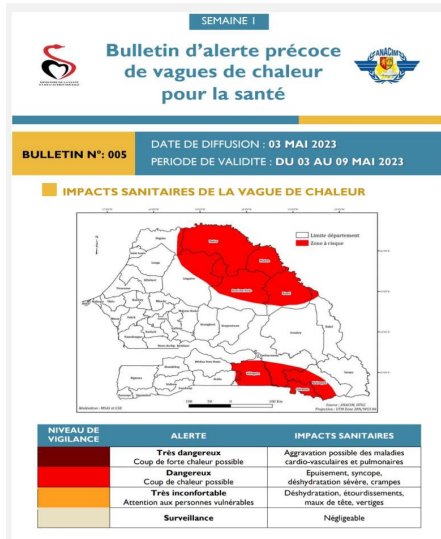
Populations

- Therapeutic mobility
- Under use health services
- Non-compliance with the AME



Mitigation strategies

Health System



Populations



CONCLUSION

- **Weak formulation of ThPN as a public health problem**
 - Benign diseases
 - Organizational dysfunction
- **Responses more preventive than curative**
 - Partial information on the climate Professional service
 - Lack of mapping of areas with a high climate vulnerability index (CVI) Events related to CC versus health needs
 - Territorialization of health