



WACI Health

GAP 1.0

Senegal

Supporting countries to bridge the gap in budgetary shortfalls for HIV & AIDS, TB and Malaria

Introduction

Data

- Gap 1.0 uses country data submitted by countries themselves to the Global Fund as part of Global Fund funding applications
- Data for all countries is the latest data available. For all countries, this is data provided in funding applications submitted in 2020.
- Budgetary shortfall ('gap') data is provided for the years 2021, 2022 and 2023
- Data is available online: <https://data.theglobalfund.org>

Focus

Theme:

Budgetary shortfalls for HIV & AIDS, TB and Malaria, not for universal health coverage

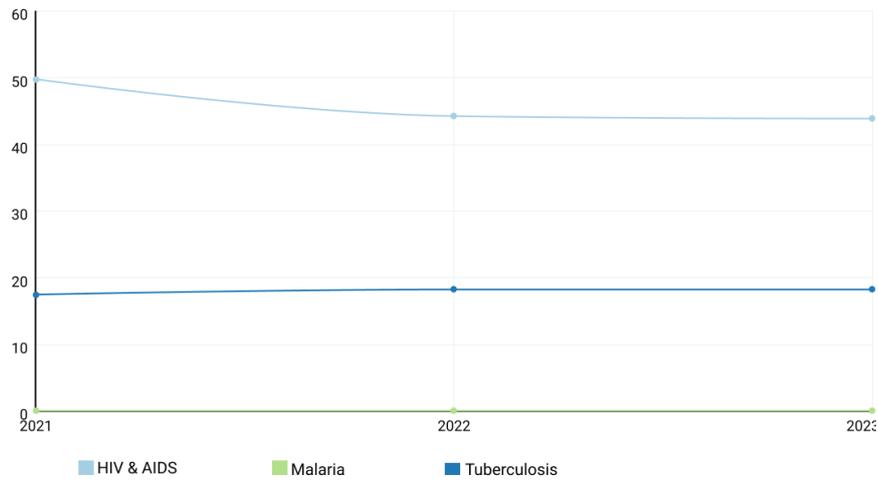
Country

Senegal

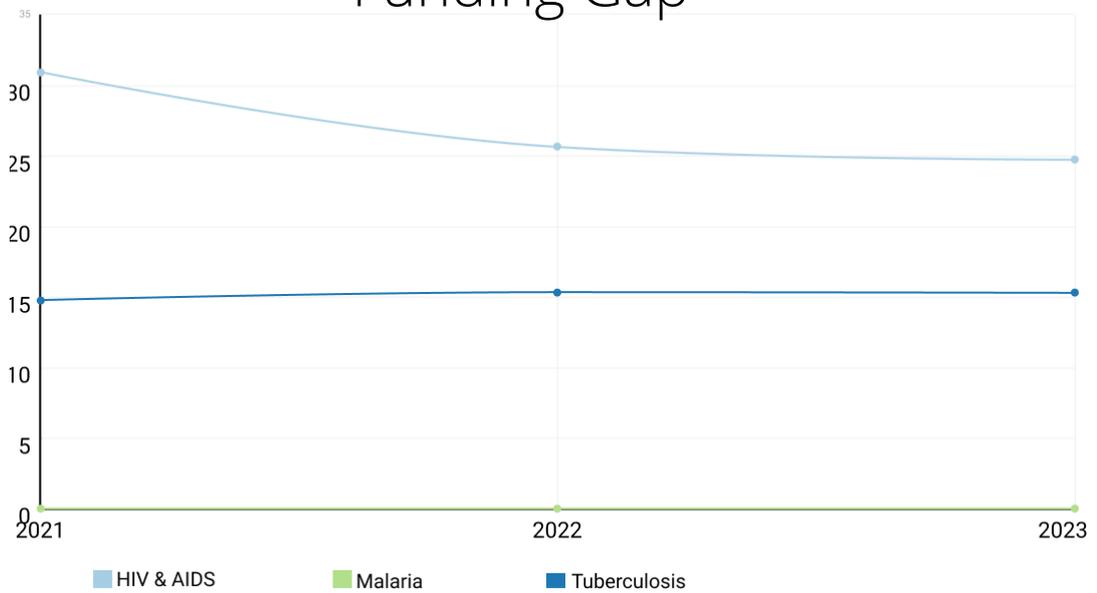


SENEGAL

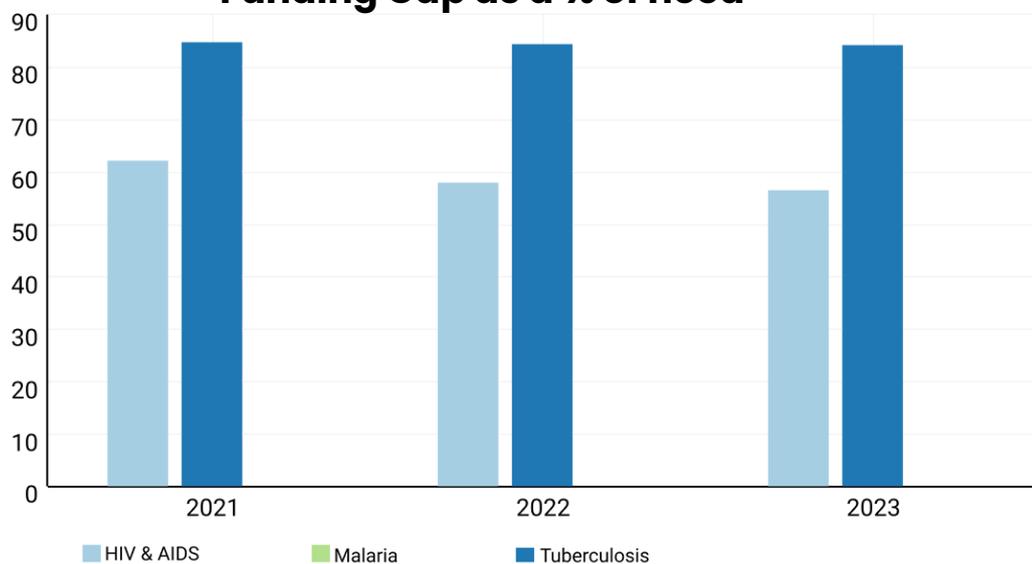
Funding Needed



Funding Gap



Funding Gap as a % of need





Historical investments by funding source (2013–2019)

No Data Available



Health spending remains below key AU benchmarks

(Current expenditure, 2018)

How much does government spend on health?

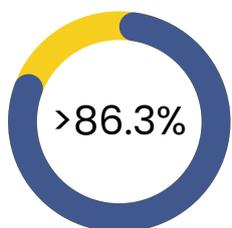
Fiscal space

Per Capita

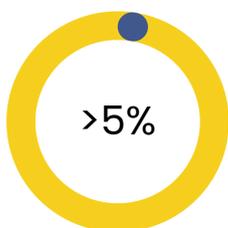
as % of GDP

as a % of the Govt budget

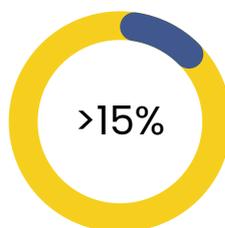
Tax collected as a % of GDP



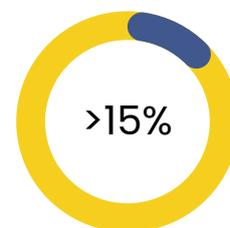
\$14



0.9%



4.3%



16.4 (2018)

Senegal spends below Africa's \$86.30 per capita benchmark:

- Government health expenditure is \$14 per capita in USD terms (\$34.8 in PPP Int \$).
- Total (current) Health Expenditure for all sources is \$54.9 per capita in USD terms but rises above the benchmark to \$146.4 in PPP Int \$ terms.

Senegal spends below the 5% of GDP benchmark required to achieve UHC:

- Government health expenditure as a share of GDP is 0.9%.
- Total (current) Health Expenditure for all sources as a share of GDP is 4%, below the AU benchmark.

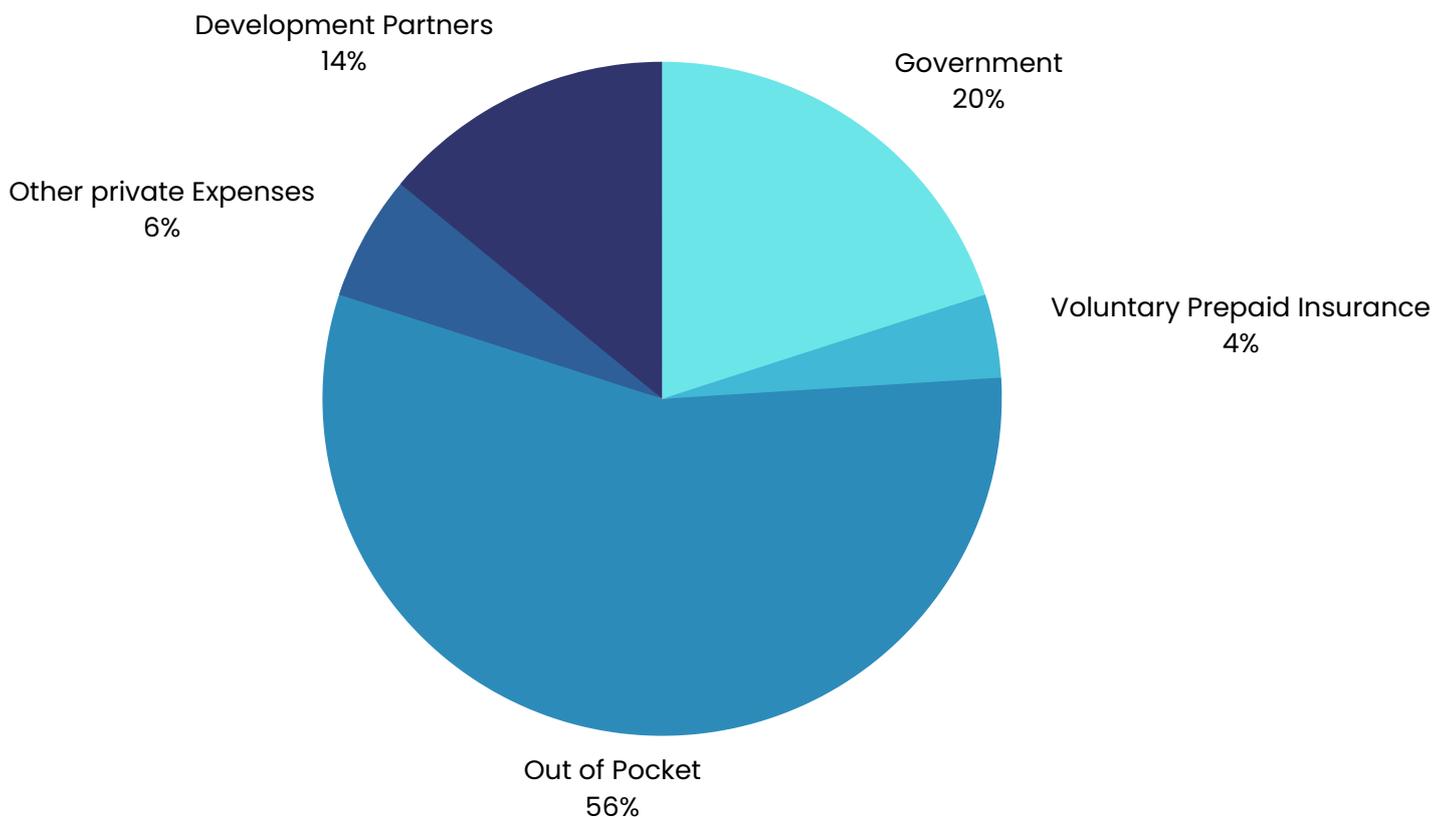
Senegal spends below the Abuja target of 15% of government budget invested in health:

- Government health expenditure as a share of the government budget is 4.3%.



Health spending is heavily dependent on out-of-pocket expenditure

- Government spending on health accounts for 20% of total health expenditure (THE).
- At 56%, out-of-pocket spending is above the 15% benchmark of catastrophic health expenditure and is a cause for concern.
- Development partner spending accounts for 14% of THE.



Sources of health spending, (2018)



Conclusions – Senegal

The health financing gap is two-thirds of the funding need

- The resources needed are double the level of resources available for HIV & AIDS, TB and malaria.
- The funding gap is particularly acute in TB.

At 56%, out-of-pocket health spending (OOP) is a cause for concern

- This is higher in only 9 other African countries – placing Senegal in the bottom 20%.

Senegal spends below each of Africa's spending benchmarks

- Bridging health financing gaps or achieving universal health coverage will not be possible at this level of political prioritisation of health.

