## HIV/AIDS Profile: Senegal

## **Demographic Indicators**

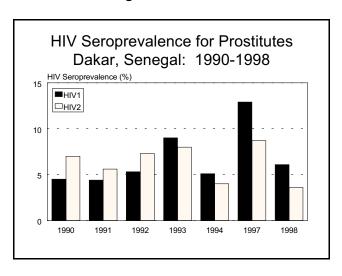
Population (1,000s)	9,987	Growth Rate (%)	2.9 %
Infant Mortality Rate (per 1,000)		Life Expectancy	
Both Sexes	58	Both Sexes	62
Male	62	Male	61
Female	54	Female	64
Crude Birth Rate (per 1,000)	38	Crude Death Rate (per 1,000)	9
Percent Urban	41	Total Fertility Rate	5.2
Note: Above indicators are for 2000.	*****	**	
Estimated % of adults living with HIV	/AIDS, end	1999 1.8 %	
Cumulative AIDS rate (per 1,000) as of	0.26		
Cumulative AIDS cases as of 11/30/97	2393		

## **Epidemiological Data**

Epidemic State: Concentrated

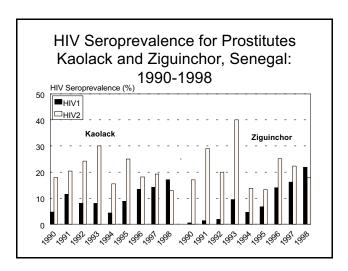
Senegal has been a success story, as the government has managed to keep the HIV epidemic from getting out of control. However, unlike most other sub-Saharan African countries, high levels of HIV-2 are found in Senegal.

• In Dakar, the capital, sentinel surveillance data show that HIV prevalence among prostitutes fluctuated during the 1990s. This was true for both HIV1 and HIV2. HIV1 ranged from 4 percent in 1990 and 1992 to 13 percent in 1997. HIV2 prevalence ranged from 4 percent in 1994 and 1998 to 9 percent in 1997. Prevalence reached its highest level in 1997 for both virus strains.

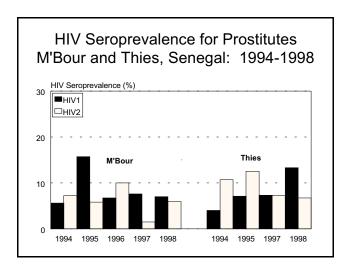


#### Senegal

• Like Dakar, prevalence varied among prostitutes tested in Kaolack and Ziguinchor during the 1990s. Unlike Dakar, however, HIV2 infection levels were, in general, higher than levels of HIV1. In Kaolack, HIV1 prevalence ranged from 4 to 17 percent; HIV2 prevalence from 13 to 30 percent. In Ziguinchor, HIV1 ranged from 1 to 22 percent; HIV2 from 13 to 40 percent.

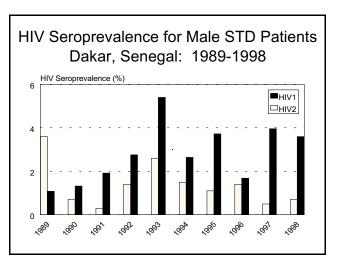


• M'Bour and Thies are located close to Dakar. There was no clear trend in HIV prevalence among prostitutes in these locales as well. In M'Bour, prevalence ranged from 6 to 16 percent; HIV2 from 2 to 10 percent. In Thies, HIV1 prevalence ranged from 4 to 13 percent; HIV2 from 7 to 13 percent.



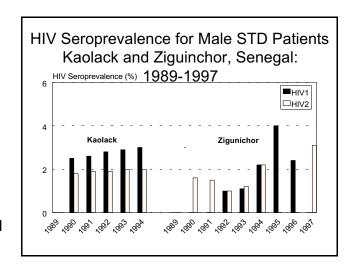
• Sentinel surveillance is also conducted among STD patients.

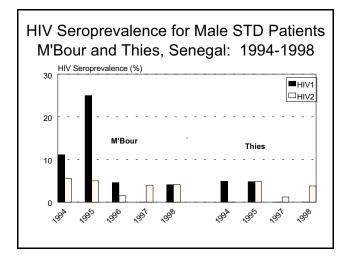
Among male STD patients, HIV1 prevalence was higher than HIV2 prevalence during 1989-1998 in Dakar. HIV1 infection levels ranged from 1 percent in 1989 to 5 percent in 1993. HIV2 prevalence ranged from 0.3 percent in 1991 to 4 percent in 1989.

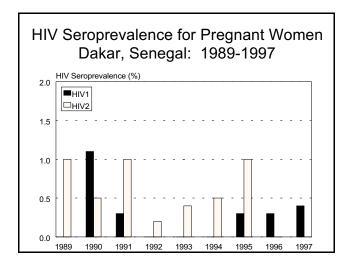


#### Senegal

- In Kaolack, HIV infection levels were fairly flat during 1990-1994 among male STD patients. There was no evidence of infection with either virus in 1989. Between 1990 and 1994, 3 percent tested positive for HIV1, 2 percent for HIV2. In Ziguinchor, there was no evidence of HIV1 infection until 1992 when 1 percent of male patients were infected. In 1997, no evidence of HIV1 infection was found again. In 1997, 3 percent were HIV2 positive.
- Among male STD patients tested in M'Bour, prevalence more than doubled, going from 11 to 25 percent between 1994 and 1995, then declining to 4 percent in 1998. There was no evidence of HIV1 infection in 1997. HIV2 infection ranged between 4 and 5 percent during 1994-1998. In Thies, HIV1 infection levels were lower throughout the time period, with no evidence of HIV1 infection in 1997 and 1998.
- During the 1990s, HIV1 prevalence in Dakar ranged from no evidence of infection to 1 percent infection among pregnant women tested as part of the sentinel surveillance system. HIV2 infection levels were low, with a similar variation in infection.

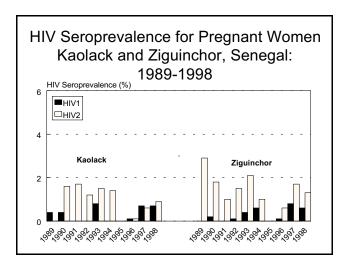




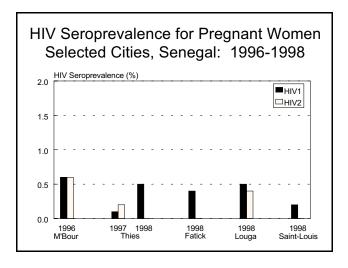


#### Senegal

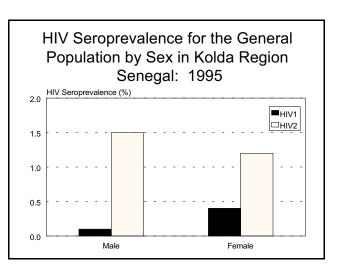
• Likewise, in Kaolack and Ziguinchor, HIV infection levels remained low and variable throughout the 1990s among pregnant women tested. On average, HIV2 infection was higher in Ziguinchor, where it ranged from no evidence of infection in 1995 to 3 percent in 1989.



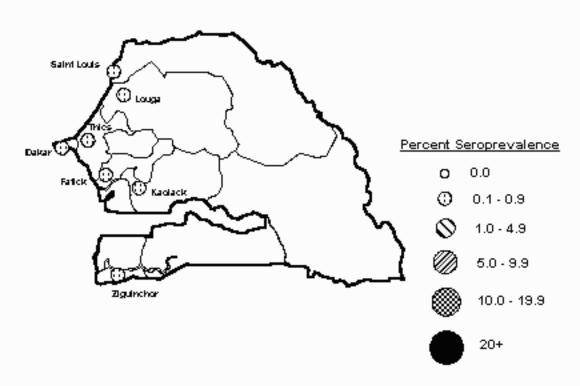
• In selected cities of Senegal, HIV1 prevalence among pregnant women tested ranged from 0.1 percent in Thies in 1997 to 0.6 percent in M'Bour. In 1998, HIV2 prevalence ranged from no evidence of infection in Thies, Fatick, and Saint-Louis to 0.6 percent in M'Bour.



• In a 1995 study conducted among the general population of Kolda region, near the border with Guinea-Bissau, there was little difference in infection levels by sex. However, HIV2 infection levels were higher in both sexes, 1.5 percent in males and 1.2 percent in females. HIV1 infection was negligible in males, 0.1 percent, 0.4 percent among females.

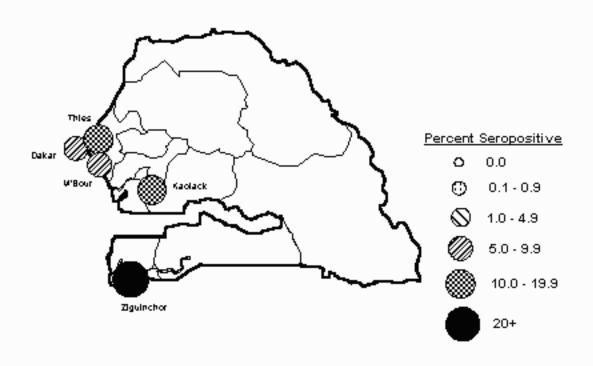


# Seroprevalence of HIV-1 for Pregnant Women Senegal: 1997-98



u.S Census Bureau, Population Divison, International Programs Center, Country Profile, September 2000.

# Seroprevalence of HIV-1 for Prostitutes Senegal: 1997-98



u.S Census Bureau, Population Divison, International Programs Center, Country Profile, September 2000.

### Sources for Senegal

- M0162 Mboup, S., et al., 1990, Surveillance Sentinelle des Infection a HIV Bulletin Epidemiologique 001, Bulletin Epidemiologique HIV, January, no. 1.
- M0172 Mboup, S., et al., 1991, Surveillance Sentinelle des Infections a HIV, Bulletin Epidemiologique HIV, December, no. 3.
- M0322 Mboup, S., et al., 1993, Surveillance Sentinelle des Infection of HIV, Bulletin Epidemiologique HIV, December, no. 4.
- M0420 Mboup, S., et al., 1994, Surveillance Sentinelle de Infections o HIV, Bulletin Epidemiologique HIV, December, no. 5, pp. 1-24.
- M0531 M'Boup, S., et al., 1997, Surveillance Sentinelle des Infectious a HIV, Bulletin Epidemilogique HIV, December, no. 6, pp. 1-35.
- N0164 Ndiaye, A. D., D. Diop, F. Cisse, et al., 1995, Facteurs de Risque de M.S.T./SIDA chez les Femmes dans la Region de Kolda, IX International Conference on AIDS and STD in Africa, Kampala, Uganda, 12/10-14, Abstract WeC201.
- S0485 Senegal Ministere de la Sante, 1999, Situation Serologique du VIH dans les Sites Sentinelles in 1997 and 1998, Group Sero-Epidemiologique, CNLS, PNLCS, 21 Oct., tables.