



Managing biomedical waste in Dakar, Senegal

Adequate medical supplies are already a problem for many developing countries, but disposal of biomedical waste is another, more serious matter. A programme conducted in the Senegalese capital, Dakar, shows that a sustainable approach, complete with city consultations, delivers effective benefits, including awareness-raising and replication.

The factors behind West Africa's problems with biomedical waste stem from poor infrastructure and poor risk awareness. Due to an absence of sorting at the source, all types of waste get mixed up together along the whole disposal chain, from collection to transportation to elimination. Similarly, the risks entailed by biomedical waste remain largely ignored by all those involved, from government authorities to healthcare professionals and the wider public.

This is why in 1998 the African office of UN-HABITAT's Urban Management Programme (UMP) mandated Dakar's African Institute for Urban Management (IAGU) to hold urban consultations on biomedical waste issues in four major West African cities: Dakar, Bamako (Mali), Cotonou (Benin), and Ouagadougou (Burkina Faso). IAGU conducted the programme in close co-operation with the African Foundation for Urban Management (AFUM).

The UMP-IAGU programme focused on four activities: assessing the situation through an inclusive, participatory approach, raising awareness among local authorities and the public, identifying priority actions to improve the situation, and deploying a network of experts.

In all four capitals, IAGU followed up an environmental assessment with a local consultation. The process aimed at validating the findings and developing action plans. Financing issues and implementation were steered by monitoring committees comprised of well-placed representatives from municipal authorities, the public, the business sector and civil society.

The more innovative aspect of the UMP-IAGU programme was a region-wide consultation which in late 1999 brought together in Dakar all the members of the AFUM governing council. These included a number of African mayors whose cities were formally outside the scope of the programme. The meeting also drew a wide range of municipal officers, local elected representatives, healthcare experts, utility professionals and scholars, together with experts from UNDP, the secretariat of the 1989 Basel Convention on Hazardous Wastes, the WHO African office and aid agency executives.

This wealth of discussion found its practical outcome in the Dakar Declaration whereby West African mayors committed themselves to sustainable management of biomedical waste. The mayors also highlighted the need for demonstration programmes in the post-consultation phase in order to sustain community support and facilitate replication across the whole of Africa.

The post-consultation phase ended in 2000 as the demonstration projects in Bamako, Cotonou and Dakar came on stream. An awareness-raising film that had been shown at the Dakar meeting was broadcast on two major TV channels and a specialist handbook published (in French). In the meantime, in 1999 and as an offshoot of the programme, the secretariat of the Basel Convention and the Government of Senegal designated IAGU as the anchor institution for the International Centre for Training and Technology Transfer on Hazardous Waste. The centre is sponsored by 22 African countries and has since then been mandated by WHO and Switzerland's Ecole Polytechnique Fédérale de Lausanne to assist action plans in major African cities.

PROPORTION OF URBAN POPULATION BY REGION, 1950-2030

1950 1955 1960 1965 1970 1975 1980 1985 1990 1995 2000 2005 2010 2015 2020 2025 2030





