

Jhpiego in Namibia

Quick Facts

Estimated total population:¹
2.5 million

Maternal mortality ratio:²
449 per 100,000 live births

Infant mortality rate:²
46 per 1,000 live births

Under-five mortality rate:²
69 per 1,000 live births

Total fertility rate:²
3.6

Contraceptive prevalence:²
53.4% (modern methods)
55.1% (all methods)

HIV prevalence:³
14.3%

Births with skilled provider:²
81.4%

Sources:

¹ 2016 Population Data Sheet;

² 2006–07 Namibia Demographic and Health Survey;

³ National Strategic Framework for HIV and AIDS Response in Namibia 2010/11–2015/16.

Background

The Republic of Namibia, located in southern Africa, gained independence from South Africa in 1990. Given the presence of the arid Namib Desert, Namibia is one of the least densely populated countries in the world. The nation has suffered heavily from the effects of HIV/AIDS, with an HIV prevalence rate of 14.3%.

Jhpiego began working in Namibia in 2013 with the Ministry of Health and Social Services (MOHSS) with funding from the U.S. Agency for International Development (USAID), initially under the Maternal and Child Health Integrated Program (MCHIP) and now under the Maternal and Child Survival Program (MCSP). In addition, Jhpiego is implementing programs funded by the U.S. Department of Defense (DOD) and the U.S. Centers for Disease Control and Prevention (CDC). Current programs are described below.

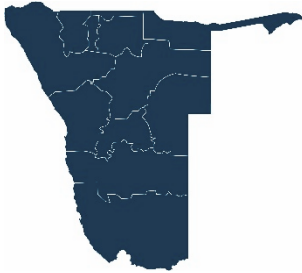
Current Program Highlights

Maternal and Child Survival Program

Under the USAID-funded MCSP, Jhpiego is working in partnership with John Snow, Inc. to support HIV testing services (HTS), including provider-initiated testing and counseling (PITC). Through MCSP, Jhpiego is conducting a pilot test in Engela, and another district to be identified, for the provision of community-based HTS within services under the national Health Extension Program. Through this pilot, Jhpiego will add HTS, condom distribution, HIV prevention messages, referrals and follow-up for prevention of mother-to-child transmission (PMTCT) to the package of services currently being offered by health extension workers. Additionally, in partnership with the Namibia Planned Parenthood Association (NAPPA), Jhpiego has been working to roll out PITC in private clinics. MCSP in Namibia will also implement nurse-initiated antiretroviral therapy within NAPPA clinics for adolescent populations as part of task shifting to meet client needs effectively. Jhpiego has also worked collaboratively with the Namibian MOHSS at the national level, establishing the HIV Testing and Counseling Task Force and presenting a concept note for innovative community-based testing using the Health Extension Program.

HIV/AIDS Prevention Program

With an adult HIV prevalence of 13.1% and a male circumcision rate of 21%, the Government of Namibia recognized voluntary medical male circumcision (VMMC) as an essential component of its comprehensive strategy for HIV prevention. Since 2014, Jhpiego has been working with the DOD HIV/AIDS Prevention Program in Namibia to support the Namibian Defense Force (NDF) in reaching military personnel, their families and the surrounding civilian communities with VMMC services. Jhpiego's approach to VMMC with NDF is to offer campaign-based services in and around military sites in collaboration with other DOD partners providing HTS and other services. The NDF medical staff work in close coordination with Jhpiego to ensure that the service teams travel to locations with high demand.



Project IQ

The CDC-funded Technical Assistance to Provide High-Quality VMMC Services to Programs Supported by the President's Emergency Plan for AIDS Relief project, also known as Project IQ, began in April 2016 to supplement VMMC services in three different sub-Saharan African countries, including Namibia. The project is based in the Erongo Region, which is located along the coast of the Atlantic Ocean. Targeting the working class, the project has had great success to date in providing VMMC to adults aged 20–39 years. The Erongo Region has a large number of port towns and mining communities, which makes this normally hard-to-reach age group more easily accessible.

Key Accomplishments

Under the DOD-funded program:

- Supported the NDF to provide 464 circumcisions in selected military facilities.
- Coordinated logistics for VMMC services at two static sites and annual outreach campaigns.
- Collaborated with DOD partners to implement VMMC and demand-generation activities.
- Prepared the DOD HIV/AIDS Prevention Program and the Ministry of Defense/NDF to lead planning and implementation of VMMC service delivery beyond the life of the project.

Under Project IQ:

- From May to September 2016, provided 2,208 circumcisions, the majority of which (1,937) were for men aged 20–39 years old.

Under MCSP:

- Since January 2015, provided HTS (including PITC) to 7,581 individuals, of whom 404 (5%) tested positive for HIV.

Under MCHIP:

- Designed and implemented a pregnancy prevention program in Kavango Region by building the capacity of the Kavango Teen Pregnancy Task Force to strengthen its role as a coordinating body, implementer and advocate. Supported the task force to develop the clinical components of their annual work plan by developing an “Adolescent-Friendly Reproductive Health Services” course and training 38 providers.
- Conducted a multi-region formative assessment to better understand the attitudes, beliefs and practices surrounding VMMC and early infant male circumcision in Namibia.
- Facilitated two training-of-trainers workshops for community mobilization trainers and community health volunteers/mobilizers to improve community approaches to interpersonal communication and peer-to-peer mobilization.
- Built the capacity of local demand creation partner, Nawalife Trust, by reviewing and updating information, education and communication materials to prepare the Trust to conduct VMMC and early infant male circumcision demand-creation activities.
- Supported the HIV/AIDS Technical Working Group to finalize the national PMTCT/HIV integration guidelines.
- Conducted an HIV integration assessment to identify gaps in Hardap Region and created an action plan for strengthening HIV integration with primary health care.

Partners and Donors

USAID is the donor for MCSP, CDC is the donor for Project IQ, and DOD is the donor for the VMMC project. In addition to the MOHSS and NAPP, Jhpiego works in Namibia with MCSP partner John Snow, Inc.

References

Joint United Nations Programme on HIV/AIDS (UNAIDS). *2010 Report on the Global AIDS Epidemic*.

MOHSS and Macro International Inc. 2008. *Namibia Demographic and Health Survey 2006–07*. Windhoek, Namibia and Calverton, Maryland, USA: MOHSS and Macro International Inc.

Population Reference Bureau. *2016 World Population Data Sheet*. Washington, D.C.