

## STRATEGIC FOCUS

The Centers for Disease Control and Prevention (CDC) Namibia office was established in 2002, along with satellite offices in Zambezi, Kavango East, and Oshana regions to help implement key HIV programs in these high HIV burden regions. The CDC team works with the Ministry of Health and Social Services (MOHSS) to build health system capacity and implement HIV programs, particularly areas most affected.

**Building Workforce Capacity:** CDC works with the MOHSS to ensure adequate supply of skilled medical health professionals, as well as monitoring and evaluation officers. CDC's participation has helped to strengthen mentoring of clinical staff.

**Strengthening Laboratory Systems:** The Namibia Institute of Pathology (NIP) is receiving CDC technical support to provide accurate HIV diagnostics and timely viral load (VL) testing. As Namibia continues to decentralize services and works towards reaching the target of 95% of all individuals on antiretroviral treatment (ART) maintaining VL suppression, a strong lab system and network is critical. CDC works closely with NIP to ensure the quality of all HIV and Tuberculosis (TB) testing nationally.

**Strengthening Surveillance and Health Information Systems:** CDC continues to provide technical assistance to build capacity to collect and analyze data for improved program decision-making.

## KEY ACTIVITIES AND ACCOMPLISHMENTS

**Scale Up of ART Program:** CDC Namibia supports MOHSS to implement Treat All and immediate linkage to treatment. This program has been successfully rolled-out nationwide and 2017 program data shows 60% of patients being linked to treatment on the same day as testing.

**Improved HIV Prevention:** In 2017, Namibia was designated a Determined Resilient Empowered AIDS-Free Mentored Safe (DREAMS) country, with CDC rolling-out this program in selected districts. This package supplements prevention activities supported by CDC Namibia that includes Voluntary Medical Male Circumcision (VMMC) and the successful prevention of mother-to-child transmission program.

**Strengthened Health Systems:** CDC supported MOHSS to strengthen the health system through improving access to HIV services by hiring doctors, nurses, clinical mentors, and other key staff. This supports the decentralization of ART services and implementation of innovative community-based ART models. CDC supports the weekly use of the Extension for Community Healthcare Outcomes (Project ECHO) platform as an effective means of building expertise in the country. Namibia's Project ECHO, the first of its kind in Africa, is an internet-based platform that connects remote sites to specialists and empowers health care providers with advanced skills to treat patients with complex diagnoses.

**Data to inform decisions:** CDC provided support for the first Namibia Population-based HIV Impact Assessment (NAMPHIA). Results from NAMPHIA show that 77 percent of all HIV-positive adults have achieved VL suppression, projected to surpass the Joint United Nations Programme on HIV/AIDS (UNAIDS) target of 73 percent by 2020. Compared with the UNAIDS 2012 estimates, Namibia has reduced its adult HIV incidence rate by 50 percent in the past five years. Namibia has made this tremendous progress by either reaching or exceeding the UNAIDS 90-90-90 targets among women and, nationally, by attaining 86-96-91 among adults. Namibia accomplished this through the strategic expansion of HIV prevention and treatment services, with a focus on VL suppression at the individual and community level, as well as the swift implementation of forward-leading HIV policies.

CDC also supports research at regional levels to provide insight into location specific challenges. CDC supported the implementation of the first Integrated Bio-Behavioral Surveillance Survey (IBBSS) and is supporting MOHSS to conduct a second IBBSS. Results provide information on HIV prevalence, behaviors driving the epidemic, and population size estimation. CDC is also supporting the implementation of the first-ever TB prevalence study in Namibia.

**Technology:** CDC procured point-of-care VL testing machines and printers that receive input via text message for facilities throughout the country. These technologies reduce the turnaround time for test results. A text message printer reduces delivery time of test results from an average of 5 days to 1 day.

**Addressing TB:** CDC supports comprehensive TB/HIV activities in Namibia, including improving and integrating TB and HIV services for co-infected individuals, providing isoniazid preventative therapy for all eligible HIV-positive individuals, and supporting TB infection control efforts in health care facilities.

July 2018 | The CDC Division of Global HIV & TB activities are implemented as part of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR); non-HIV related TB activities are supported by non-PEPFAR funding

## Key Country Leadership

President:  
Hage Geingob

Minister of Health:  
Bernard Haufiku

U.S. Ambassador:  
Lisa Johnson

PEPFAR Coordinator:  
Lela Baughman

CDC/DGHT Director:  
Eric Dziuban

## Country Quick Facts

Per Capita GNI:  
\$4,720 (2016)

Population:  
2.480 million (2016)

Under 5 Mortality:  
45 / 1,000 live births  
(2016)

Life Expectancy:  
64 years (2016)

## Global HIV/AIDS Epidemic

Estimated HIV Prevalence  
(Ages 15-49): 12.1% (2017)

Estimated AIDS Deaths  
(Age ≥15): 2,700 (2017)

Estimated Orphans Due to  
AIDS: 34,000 (2017)

Reported Number  
Receiving Antiretroviral  
Therapy (ART) (Age ≥15):  
158,439 (2017)

Global Tuberculosis  
(TB) Epidemic

Estimated TB Incidence:  
446 / 100,000 (2016)

TB patients with known  
HIV-status who are HIV-  
positive:: 38% (2016)

TB Treatment Success  
Rate: 83% (2015)

## Country Staff: 43

Locally Employed Staff: 33  
Direct Hires: 10

