2017

Namibia: HIV as a National Issue

Elisabeth Vlasak
Augustana College, Rock Island Illinois

Follow this and additional works at: http://digitalcommons.augustana.edu/pubh100global

Part of the Cells Commons, Community Health and Preventive Medicine Commons, Health Policy Commons, Health Services Research Commons, Hemic and Immune Systems Commons, Immune System Diseases Commons, International Public Health Commons, and the Public Health Education and Promotion Commons

Augustana Digital Commons Citation
http://digitalcommons.augustana.edu/pubh100global/21

This Report is brought to you for free and open access by the Public Health 100: Global Public Health Brief at Augustana Digital Commons. It has been accepted for inclusion in Global Public Health by an authorized administrator of Augustana Digital Commons. For more information, please contact digitalcommons@augustana.edu.
Public Health in Namibia
HIV as a national issue
Elisabeth Vlasak

General and Political Information

**Location:**

**Political Structure:**
Presidential Representative Democratic Republic
- President of Namibia is both head of state and head of government, and of a multi-party system (Namibian Political System. 2011)
- The Supreme Court judges are appointed by the President on the recommendation of the Judicial Service Commission (Namibian Political System. 2011)

**Major Challenges:**
**Internal**
- Food insecurity and malnutrition
- Difficulty accessing health services
- Unequal distribution of wealth
- High child mortality
- Malaria
- Tuberculosis

**External**
- HIV/AIDS
- Easy access to South Africa’s technology and resources, but there is a ripple effect from financial struggle there (Republic of Namibia Country Paper. 2013)

<table>
<thead>
<tr>
<th>Top 10 Causes of Death in Namibia</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. HIV</td>
</tr>
<tr>
<td>2. Cancer</td>
</tr>
<tr>
<td>3. Stroke</td>
</tr>
<tr>
<td>4. Lower Respiratory Infections</td>
</tr>
<tr>
<td>5. Diarrheal Diseases</td>
</tr>
<tr>
<td>6. Tuberculosis</td>
</tr>
<tr>
<td>7. Ischemic Heart Disease</td>
</tr>
<tr>
<td>8. Diabetes</td>
</tr>
<tr>
<td>9. Interpersonal Violence</td>
</tr>
<tr>
<td>10. Malaria</td>
</tr>
</tbody>
</table>

Source: GBD Compare [http://viz.healthmetricsandevaluation.org/gbd-compare/], 2010

Namibian Demographic Information

**2016 Population:** 2,265,000

**Race and Ethnicity (%)** (Demographics, 2007):
- Ovambo - 50
- Kavango - 9
- Herero/Himba - 7
- Damara - 7
- Mixed race (Coloured and Rehoboth Baster) - 8
- White (Afrikaner, German, and Portuguese) - 8
- Nama - 5
- Caprivan - 4
- Bushmen 3
- Tswana 0.5

**Religion:**
- Christian – 80 - 90%
- Indigenous beliefs – 10 – 20%
HIV in Namibia

Namibia is considered to be an at-risk country for HIV infection. Estimates for overall adult infection rates are 15.4% of the total population. Adults ages 18-24 are the most at risk population group in Namibia. (De Beer et al., 2012) During a university study of HIV with student participants, the number of students screened versus those who were HIV positive seems to be related to the age of the students.

![Figure 2 Number of students screened, and distribution of HIV-positive students according to age and institution.](image)

Although much of the ages 18-24 population reported having only one sexual partner, many other increasing risk factor behaviors (alcohol use, declining condom use, misinformation and social stigma) were commonly reported in this demographic. (Gouws et al., 2008)

Identification, Intervention, Challenges and Personal Suggestion

HIV/AIDS are tested for with at-home test kits and at various testing clinics. HIV is identified by using a simple blood test or through oral fluid testing. Antiretroviral therapy can slow the multiplication of the disease. UNAIDS has implemented a 90-90-90 target for the next couple years where 90% of people living with HIV are informed of their HIV status, 90% of people who know their status accessing HIV treatment and 90% of people on HIV treatment having a suppressed viral load. (Accelerating HIV Prevention, 2014)

Lack of awareness regarding disease status negatively affects motivation to receive treatment. Additionally, Namibia faces issues with consistent use of preventative measures (education, condom use). The World Health Organization has worked to implement family planning services, disclosure between partners about their disease status, and enforce voluntary testing throughout the country (Guidance on Couples HIV Testing and Counselling)

**Personal Suggestion:**

Citizens should be voluntarily tested before symptoms start to show. Government implementation of informative programs about HIV/AIDS transmission and prevention is necessary. Address citizens’ lack of awareness of disease status and HIV/AIDS stigma. Better knowledge of personal disease status will prevent the spread of HIV/AIDS in Namibia.

References: