### NAMIBIA

#### Assessment of the Epidemiological Situation & Demographics

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Details</th>
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<tbody>
<tr>
<td><strong>Estimated percentage of adults living with HIV/AIDS, end of 2001</strong></td>
<td>22.5%</td>
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<td>These estimates include all people with HIV infection, whether or not they have developed symptoms of AIDS, alive at the end of 2001:</td>
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<tr>
<td><strong>Estimated number of deaths due to AIDS</strong></td>
<td>13,000</td>
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<td>Estimated number of adults and children who died of AIDS during 2001:</td>
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<tr>
<td><strong>Estimated number of orphans</strong></td>
<td>47,000</td>
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<tr>
<td>Estimated number of children who have lost their mother or father or both parents to AIDS and who were alive and under age 15 at the end of 2001:</td>
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- With an adult HIV prevalence of more than 22%, projected to increase to 24% by the 2002 sentinel surveillance, Namibia is now among the five countries most affected by HIV/AIDS in the world, in terms of percentage of total population living with the disease.
- Approximately 20% of pregnant women presenting for antenatal care are HIV positive.
- **Urban centers at risk:** HIV prevalence among antenatal clinic (ANC) attendees tested in Windhoek increased dramatically from 7% in 1994 to 16% in 1996, to 23% in 1998 and 31% in 2000. In Walvis Bay, HIV prevalence was 28% in 2000.
- **By 2000, approximately 160,000 people (aged 15-49) were infected.**
- In 2000, AIDS was Namibia’s number one cause of death and accounted for 28% of deaths in all age groups.
- Ninety thousand children under age 15 have lost one or both parents; more than 50% of these are AIDS orphans.
- At independence, in 1990, life expectancy stood at 60 years. In only 12 years it dropped to 42 years.
- **HIV and Sexually Transmitted Diseases (STDs).** A strong positive correlation exists between sexually transmitted diseases (STDs) and HIV transmission. The presence of STDs within the population not only indicates high-risk sexual behavior, but STDs increase both a person’s susceptibility to HIV/AIDS and the possibility of transmitting the virus. Even without the HIV epidemic, STDs are one of the most common health problems among workers and pose a significant public health risk. In 1998, a median of 42% of STD clinic patients tested in Windhoek and Walvis Bay were HIV positive.
- Median HIV prevalence among STD clinic patients tested at 11 sites outside of the major urban areas was 34% in 1998; prevalence ranged from 10% to 61%. A peak HIV prevalence of 42% was noted among the 20-24 year-olds.
- The highest prevalence rates in Namibia are reported in Katima Mulilo in the Caprivi Strip, which is close to the borders with Zambia, Zimbabwe, and Botswana. The cross-border movements that occur around this point, expedited by improving transportation networks, make this area very risky for the further spread of HIV.

#### HIV/AIDS Impact on the Macroeconomic Level

- According to a study done by UNAIDS and WHO in 1996, the total morbidity and mortality costs related to AIDS was about NS1 billion, which was almost 8% of GDP and approximately 20% of central government expenditure. Projections indicated that the direct and indirect costs of AIDS in Namibia between 1996 and 2000 were approximately $6 billion.
- In the absence of a sustained response, the same study projected that the average direct medical cost for each AIDS patient would be NS3,600, the average financial support from the government to patients and their families would be NS$2,429, and the average indirect cost, which consists of lost productivity, would be NS$125,318 for each AIDS patient. Thus, the total cost savings for the country, including productivity gains, for any HIV infection prevented today is NS$131,338 per patient.
- The total costs of AIDS orphans to Namibia could reach almost NS$51 million by the year 2000.
- The total cost, in terms of disability grants to AIDS patients, was expected to reach NS$194.5 million by the year 2000.

#### Health Sector

- **Analysis:** An analysis by UNAIDS and WHO estimated that paying the direct costs of HIV/AIDS would consume almost 20% of the total budget of N$744 million allocated to the Namibian Ministry of Health and Social Services in 1996/97.
- The total cost of hospitalization due to AIDS was expected to reach N$317 million for the period 1996-2000, while the total outpatient costs for HIV infected people was expected to reach N $85.6 million for the same period.

#### HIV/AIDS Impact on the Private Sector

- **Namibia is estimated to lose up to a third of their workforce by 2020,** along with four other countries: Botswana, Mozambique, South Africa, and Zimbabwe.
- **Mining:** The mining industry is one of the most heavily impacted sectors by the AIDS epidemic. The mining industry in southern Africa, for example, has some 30,000 HIV positive workers in a 100,000 strong workforce. With mining accounting for 12% of Namibia’s GDP and 50% of total merchandise exports, the economic impact is expected to be grave.
- **Fishing:** Fishing is a labor-intensive sector and is expected to contribute more jobs to the Namibian economy than the mining sector. Fishermen face the same risks of HIV/AIDS as do miners, due to similar living conditions (migrant adult males who spend a long period of time away from their families).


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**AIDS has become the number one killer in Namibia since 1996.**
The National and Multisectoral Response

- The National AIDS Executive Committee (NAEC), chaired by the Under Secretary of the Ministry of Health and Social Services, acts as the key implementing agency of the National AIDS Coordination Program (launched in early 1999). There are Regional AIDS Committees in each of the thirteen regions, chaired by the Governor.
- Examples of Namibia’s HIV/AIDS prevention and care activities include:
  - Take Control, the Namibian HIV/AIDS Media Campaign, which uses television, billboards, radio, and print media to raise awareness on HIV/AIDS.
  - The National Social Marketing Program promotes condoms through commercial marketing techniques, including radio, television, and print media.
  - The Namibia Network of AIDS Service Organizations supports a program to train health workers and counselors in HIV/AIDS prevention, care, and support.
  - A program for the prevention of mother-to-child-transmission of HIV (PMTCT) that includes treatment with antiretroviral drugs.
- The National AIDS Coordination Program distributed more than 11 million condoms in 2001 through family planning services, health services, government sectors, NGOs, and private companies.
- The Alliance of Mayors’ Initiative for Community Action on AIDS at the Local Level supports community-based actions on prevention, care and support to orphans.
- The United States Agency for International Development (USAID) works on three major areas: Behavioral Change; Capacity Development; and Comprehensive Care and Support for Orphans and Vulnerable Children (OVC). The program is being implemented in three regions, which represents about 20% of the total targeted population.
- The United National Development Program (UNDP) helps the Namibian government enhance its capacity to plan and implement multi-sectoral strategies, involving nongovernmental organizations and the private sector to prevent the spread of HIV/AIDS and mitigate its social and economic impact.
- A variety of nongovernmental organizations (NGOs) are pursuing HIV/AIDS activities in Namibia. The AIDS Care Trust of Namibia (ACT) has introduced workplace HIV/AIDS prevention and care programs for trade associations, unions, and companies, including Nampower, Namwater, Bank Windhoek, as well as small firms.
- Lironga Eparu (Learn to Survive), a Namibian network of people living with HIV/AIDS, was launched in November 2001.

The Private Sector Response

- The Namibian Chamber of Commerce and Industry (NCCI) works to mobilize the private sector to expand its response to HIV/AIDS. Its initiatives include:
  - An assessment study of the private sector involvement in the fight against AIDS in Namibia. This study revealed that, of the 261 respondents, more than half (61%) perceived AIDS as a threat to their operations. However, only 39% of them (most of them large firms) indicated that they had an HIV/AIDS program in place, which consisted mainly of condom distribution.
  - An advocacy film aimed at the private sector in Namibia entitled Managing AIDS, which serves as an awareness, advocacy, and training tool for Namibian companies. The film focuses on the impacts of AIDS to a company’s operations and makes the business case for action against AIDS in the workplace.
- The Namibia Business Coalition on AIDS (NABCA). Established in 2002, NABCA is an independent body from the NCCI and membership is voluntary. NABCA works to coordinate and facilitate the activities of businesses to pool their resources and skills to best address HIV/AIDS, to devise a strategy for SMEs, to be the national clearinghouse of information, and to be a forum for advocacy and lobbying.
- Some companies have initiated or are updating their HIV/AIDS prevention strategies, which include, depending on the company: peer education programs, a training manual for employees, internal AIDS campaign with posters and flyers or specific features in in-house magazines.
- Novanam, an IFC client, has started to address the issue in its workplace and community in Luderitz, as per an assessment and set of recommendations from “IFC Against AIDS.” The program includes awareness, education, and prevention, as well as better care through the company’s clinic.
- The major mining companies are the most advanced and have actively responded to the prevention of HIV/AIDS, not only for their employees but also for their families. For example, Rössing and Namdeb have peer education programs, awareness campaigns and counseling services.
- In addition to an AIDS prevention program in the workplace, Telecom has a clinic on site where employees can get information and treatment for sexually transmitted diseases (STDs).

Sources: Hopolong Phororo, HIV/AIDS and the Private Sector in Namibia: Getting Small Businesses on Board (March 2003), IFC Against AIDS, Namibian Chamber of Commerce and Industry

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<thead>
<tr>
<th>SELECTED LINKS AND CONTACTS</th>
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<tbody>
<tr>
<td>1. National AIDS Program: Mr Abner Xoagub, Manager, P/Bag 13198, Windhoek. Tel: (264) 61-203-2199, Fax: (264) 61-224-155, E-mail: <a href="mailto:naap@iafrica.com.na">naap@iafrica.com.na</a></td>
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<td>2. USAID/Namibia: C.Kirk Lazell, Officer, 6th Floor, Southern Life Tower, 39 Post Street Mall, Windhoek. Tel: (264) 61-273-715, Fax: (264) 61-227-006, Website: <a href="http://www.usaid.gov/na">www.usaid.gov/na</a>.</td>
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<td>3. Lironga Eparu - Namibian Network of People Living with HIV/AIDS (NNP+): M.Emma Tuahepa, P.O.Box 61592, Katutura, Windhoek. Tel: (264) 61-261-122/234-198, Fax: (264) 61-261-778, E-mail: <a href="mailto:nanaso@mweb.com.na">nanaso@mweb.com.na</a></td>
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<td>4. Namibia Business Coalition on AIDS (NABCOA), Contact person: Peter J. Van Wyk, Acting Project Manager. 29 Schubert Street, Windhoek West, P.O.Box 11735, Windhoek. Tel/Fax: (264) 61-226-771, E-mail: <a href="mailto:pjvanwyk@africaonline.com.na">pjvanwyk@africaonline.com.na</a></td>
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Namibian firms that have nascent or established AIDS prevention strategies in their workplace include: Nampower, Namwater, the Commercial Bank of Namibia, Standard Bank, Bank Windhoek, Old Mutual, UNITRANS, Coca Cola, DHL, Sea Flower, Olthaver and List Group of Companies, Barloworld Namibia, BP Namibia, and Sanlam Namibia.