



Why a sero-survey for HIV?

In Namibia HIV is mainly spread by heterosexual sex, therefore the biannual sero survey conducted among pregnant women represents the sexually active population. The survey is done anonymously, during routine antenatal care visits, which means that the results cannot be linked to anyone.

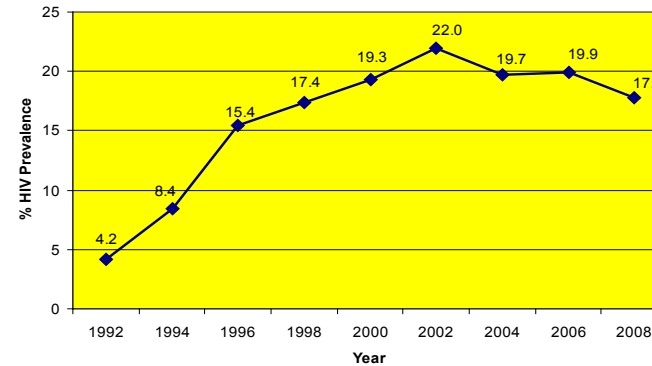
The results assist Government to monitor trends as well as evaluate the effectiveness of programmes and plan for further interventions.

Survey Objectives

1. To estimate the current burden of HIV in Namibia.
2. To monitor trends over time in HIV prevalence amongst pregnant women nationally, by site, and by age groups.
3. To compare and validate programme data from prevention of mother-to-child-transmission (PMTCT) with sentinel surveillance at sites offering VCT/PMTCT services to evaluate the utility of data for HIV surveillance.
4. To estimate the extent of syphilis among pregnant women by site and age group during the survey period.
5. To disseminate and utilize the information and to advocate and plan for more effective services for prevention, treatment, support and care.
6. To measure progress in achieving the overall target of reducing HIV prevalence to below the epidemic threshold.

What are the results for 2008?

Fig. 1: Prevalence rate 1992 - 2008



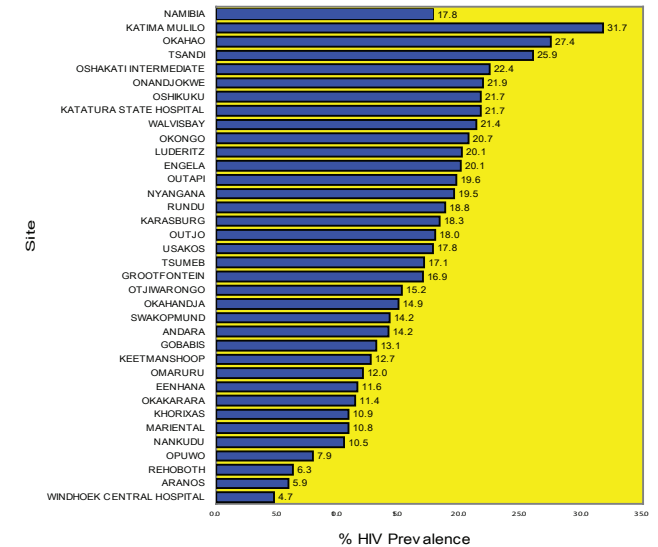
- Overall HIV prevalence in Namibia stands at 17.8%.
- HIV prevalence in urban and rural areas is the same as the National one (17.8%)

Table 1: Prevalence rate by age groups from 1992 - 2008

Age Group	Year							
	1994	1996	1998	2000	2002	2004	2006	2008
15-19	6	11	12	12	11	10	10.2	5.1
20-24	11	18	20	20	22	18	16.4	14.0
25-29	9	17	22	25	28	26	26.9	23.8
30-34	9	18	19	21	27	24	29.5	27.2
35-39	3	8	12	15	21	24	24.1	26.0
40-44	1	12	14	9	16	12	16.9	17.7
45-49	12	1	13	8	12	13	9.1	13.8

- The survey result indicate that HIV prevalence peaks in the age group of 30-34 years with 27 percent. The lowest rate of 5.1% was measured among women aged 15-19 years.

Fig.2: Prevalence rate by sites, 2008



What are some of the Key Recommendations ?

- Intensify preventive measures
- Mainstream HIV/AIDS components in all developmental projects .
- Increase efforts to get more Namibians to use voluntary counseling and testing services.
- Expand antiretroviral treatment to all parts of the country, especially in rural areas.



What can Namibians do about HIV/AIDS?

No matter who you are, you have the power to stop HIV from spreading, and to help people living with the disease. Here are a few ideas:

- As parents, we can talk more openly to our families and children about sex and HIV.
- As family, friends and neighbors, we can help to educate, care for and support people living with HIV and lower stigma and discrimination. We can also help orphaned and other vulnerable children by giving them a home, or helping with food, clothing, school, or just be a friend.
- As colleagues, we can share information, help each other to change risky behavior and support those who are infected or affected.
- As learners, we can help to educate our families, friends and ourselves to make sure we don't get infected.
- As individuals, we can get tested for HIV. If the result is negative, we can stay that way by protecting ourselves from getting HIV.
- If the result is positive, we can get support and help from health services and other groups. With a healthy lifestyle, an HIV-positive person can live a normal life without symptoms of illness.
- As religious groups, we can educate members on family values, positive living, prevention methods, and provide spiritual support for those who need it.
- As traditional leaders, we can change practices in our communities that may transmit HIV and develop support for community members.
- As young people, we can stop the spread of the disease by living responsibly, abstaining or delaying sexual activity, reducing our sexual partners, being faithful to one partner, and/or using condoms consistently.

Together we can make a difference!

The MTP III target to reduce HIV prevalence rates among different age groups by 2007 have been achieved in respect of the 15-19 and 20-24 year age groups. For other age groups the target prevalence was not achieved as per below table :

Age group	% HIV prevalence Target (MTP3)	2008 HSS results	Progress towards achievement
15-19	9	5.1	exceeded target
20-24	15	14.0	exceeded target
25-29	21	23.6	Slow
30-34	20	27.1	Slow
35-39	16	25.8	Slow
40-44	14	17.1	Slow

Produced by

**Ministry of Health and Social Services
Directorate of Special Programmes,
Response Monitoring & Evaluation Subdivision
P/Bag 13198, Windhoek, Namibia, Tel: +264-61-203 2828,
Fax: 061-22-4155
Email: rm&e@nacop.net**



Republic of Namibia

Ministry of Health and Social Services

RESULTS OF THE 2008 HIV SENTINEL SURVEY

