NAMIBIA

DHAPP

DEPARTMENT OF DEFENSE HIV/AIDS PREVENTION PROGRAM

REDUCING THE INCIDENCE OF HIV/AIDS AMONG UNIFORMED PERSONNEL IN SELECTED AFRICAN NATIONS AND BEYOND

WINNING BATTLES IN THE WAR AGAINST HIV/AIDS

BACKGROUND

Country Statistics

Namibia's estimated population is 2 million people, with an average life expectancy of 50 years. English is the official language of Namibia, which has an estimated literacy rate of 85%, evenly distributed between men and women. The economy is heavily dependent on the extraction and processing of minerals for export. Mining accounts for 20% of the GDP. Rich alluvial diamond deposits make Namibia a primary source for gem-quality diamonds. Increased payments from the Southern African Customs Union (SACU) put Namibia's budget into surplus in 2007 for the first time since independence, but SACU payments will decline after 2008. Currently, the GDP per capita is $5,500.

HIV/AIDS Statistics

The HIV prevalence rate in Namibia's general population is estimated at 15.3%. Namibia has approximately 180,000 individuals living with HIV/AIDS. The primary identified risk factor in the population is unprotected heterosexual contact.

Military Statistics

The Namibian Defense Force (NDF) is estimated at approximately 15,000 troops. Namibia expends 3.7% of the GDP on military expenditures. There are no official figures for HIV prevalence in the NDF.

PROGRAM RESPONSE

In-Country Ongoing Assistance

The DoD HIV/AIDS Program Office was established in mid-October 2006, and is staffed by a project manager and a project coordinator who are both Namibian nationals. Their main task is to oversee the management of the DoD HIV/AIDS Program in Namibia. The 2 staff members visited 12 military bases in 8 regions of the country to familiarize themselves with the implementation of the Military Action and Prevention Programme (MAPP) at base level. In addition, the program manager oversees the various partners that work with the NDF. PSI and the University of Washington, International Training and Education Center for HIV (I-TECH) are implementing partners with the NDF.

DHAPP staff members provided technical assistance to the NDF during in-country Country Support Team visits. The purpose of each trip included review, assistance, and preparation of the PEPFAR COP for FY09, as well as military-specific planning and technical assistance to the NDF and US Embassy personnel. DHAPP staff members represent the NDF as members of the PEPFAR Country Support Team, and have been involved in every level of country planning, ensuring that NDF programs are adequately addressed.

OUTCOMES & IMPACTS

Prevention

MAPP reached 12,740 soldiers and family members with prevention messages throughout the year, and 8,022 soldiers with abstinence and being faithful messages at military bases across the country. The soldiers were reached during edutainment sessions and evening gatherings organized at different bases countrywide by the Social Marketing Association (SMA) workplace officers in collaboration with the HIV/AIDS coordinators at the bases/camps. Interactive discussions, dramas, role plays, and video shows were used during these sessions.

Included in these figures are the participants from the SMA-led “officer only” prevention sessions during the year: 2 sessions at 261 Battalion in Rundu, 1 at Mpacha, and 1 at Arty. The sessions were conducted in order to increase levels of participation in HIV/AIDS programs among high-ranking military officials. Typically, topics discussed included HIV/AIDS basic facts, abstinence, and being faithful messages, consistent and proper condom use, CT, and STIs. Two (2) female soldiers disclosed their HIV status at the World AIDS Day 2007 event. As a result, the Army Commander encouraged more soldiers who are living with HIV to disclose their status so that they can receive better health care services.

Peer educators are the backbone of the Peer Education Plus Program (PEPP) intervention and critical to the success of the NDF program. A total number of 163 peer educators were trained. The training started in the last week of July 2008 and all peer educators from 20 bases/camps were trained. Prior to that, a 5-day training workshop was conducted in October 2007 by officials from PSI.

HIV Steering Committees were established at all 23 bases/camps. The HIV Steering Committees generally consist of the following members: chairperson (unit commander), deputy chairperson (second-in-command), unit HIV coordinator, chaplain representative, gender representative, regimental medical officer, company commanders (also know as battery commanders), 1 peer educator, and any other member, depending on the committee.

To effectively fight the challenge of HIV in the NDF, the MOD realized that the inequality between men and women and gender-related issues in the NDF should be addressed. Six (6) sets of trainings on male norms and gender equity were organized by the SMA with the assistance of international facilitators from Promundo (Brazil), EngenderHealth (South Africa), and local experts from Polytechnic of Namibia, Ministry of Gender Equality and Child Welfare and the Ministry of Defense Gender Desk. A total of 135 soldiers benefited from the trainings. Each group of participants developed a gender work plan to help them implement the strategies and objectives addressed during the training.

By April 2008, SMA/PSI had distributed over 340,000 Maximum Gold condoms directly to NDF personnel at military bases/camps. This was followed by the launch of a military packaged condom, “the Protector,” by the US Ambassador to Namibia and the Minister of Defense, which took place on 10 June 2008. A total of 864,000 military condoms were procured. Leaflet inserts with relevant messages and reasons for using condoms were developed to promote correct and consistent condom use. Military condoms have been distributed free of charge through the MOD headquarters and peer educators to military personnel, and are available through the NDF distribution channels (i.e. sick bay, and CT centers). MAPP will continue to integrate into program activities and print materials discussion on the use of female condoms and women’s right to negotiate condom use. Due to the popularity of military condoms among NDF personnel, the SMA will no longer brand or sell condoms; camouflage military condoms will be available and distributed freely to the soldiers.

The popular militarily-focused prevention film *Remember Eliphas* 1 and 2, which focus on addressing CT and stigma and discrimination, continue to be used as prevention tools.

The following Information, Education, and Communication materials relating to prevention focusing on abstinence and faithfulness have been developed, printed, and/or distributed: 3,500 MAPP 2008 calendars; 2,500 copies of posters and billboards; 250 copies of PEPP manual; 3,000 copies of alcohol booklets in 3 languages; and 25,000 condoms pouches and leaflets with messages outlining 7 reasons to use condoms.

Care

The NDF has 2 palliative care service outlets. A total of 85 NDF health workers were trained in palliative care-related subjects: 42 nurses and medics were trained in the management of TB; 24 nurses, counselors, and medics were trained in nutrition management for people living with HIV/AIDS; 18 nurses, counselors, peer educators, and medics were trained in counseling support, and 1 physician was trained in clinical care of OIs. A team from the MOD, US DoD,

and I-TECH conducted a situational analysis of the home-based care (HBC) program in Oshakati in February 2008. The team found that while most nurses are trained in first aid and some in nutrition, nurses have no training in HBC. The Oshakati HBC team covers long distances, as far as 500 kilometers to visit their patients, and lack most resources needed, especially HBC kits. HBC consists of medicine adherence counseling, nutritional counseling, wound care, medical care, counseling for family members, and transportation of patients to the hospital, if needed. The MOD/NDF and I-TECH will use this information to upgrade the HBC program for military staff.

The MOD requested SMA establish post-test clubs or support services in the military or the existing CT services, after realizing a great need to provide continuous psychosocial counseling to people infected or affected by HIV/AIDS. SMA conducted a joint visit with MAPP staff in May 2008 to the CT Centre at the Army base in Grootfontein to meet with the group of people infected or affected by HIV/AIDS and assess the necessity of establishing post-test clubs. A training needs assessment was also conducted. A post-test club consisting of 13 pioneering support group members, including people infected and affected by HIV/AIDS, was established. A support services coordinator was also identified at the CT site as per advice of the CT manager at Grootfontein.

The third CT center for the military was opened at Walvis Bay Naval Base in October 2007. During the first quarter, all 3 military CT centers were visited to assess the quality of CT services. A total number of 824 clients were counseled, tested, and received their results (74% male, 26% female). During the reporting period, a total of 11 military personnel participated in a 3-week foundation counseling training course covering topics such as self-awareness, sex and sexuality, generic counseling skills, and 13 principal components of CT protocols. Another group of 19 military personnel participated in a 1-week training focusing on general CT, which resulted in 30 individuals trained to provide CT. The Remember Eliphas Counseling and Testing Center, which was situated in the community in Rundu and managed by SMA staff, was closed in May 2008 in order to move to the military base at Battalion 261 in Rundu so that it can be managed by military personnel. Renovations of the site at Battalion

261 have been completed and the site will officially open in early 2009.

A comprehensive laboratory assessment was conducted to determine immediate needs not only for the reintroduction of services, but to specifically support the HIV care and treatment program being introduced in the military. As a result, the laboratory at the army headquarters hospital in Grootfontein has been renovated. Specifications for the laboratory equipment, consumables, and reagents and supplies were made while required laboratory furniture and equipment were ordered in collaboration with the MOD/NDF and Supply Chain Management System. An internal quality assurance system has been designed and arrangements made with the Namibia Institute of Pathology and another external agency for the provision of external quality assurance services. In addition, a paper-based laboratory information system has been developed that includes all necessary documents (request forms, registers, and report templates). This will allow for reporting approximately 11 tests. Five (5) military laboratory personnel were trained in basic laboratory procedures.

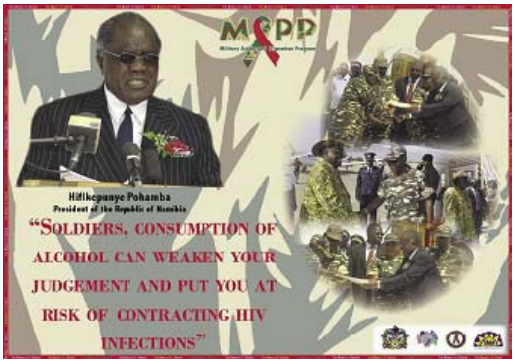
Other

The MOD Data Capturing System technical working group consisting of all relevant stakeholders and was established in February 2008 to spearhead the establishment of a HIV-Health Management Information System (HMIS) for the military. The Office of the Prime Minister shared its expertise with the working group and assisted to ensure the MOD/NDF HIV-HMIS process is consistent with government guidelines. The group will pilot and optimize a paper-based HIV medical record system before introducing an electronic system. I-TECH assessed the flow of patient information at the Military Hospital at Grootfontein army headquarters, and flow charts were developed. This work has been shared with the MOD/NDF and will help to define requirements for the electronic information system.

To improve communication between the MOD/NDF HIV/AIDS coordinating unit, I-TECH and the DoD, an assessment was carried out to establish the information and technology gaps within the MOD/NDF health services. As a

result, a basic communication system including a computer and Internet connection was procured and installed. The equipment was handed over to the MOD/NDF by the US Ambassador in June 2008. I-TECH developed extensive information technology training materials for MOD/NDF trainees from the pharmacy and laboratory units. I-TECH further conducted a 5-day course in information technology for 18 military staff members (8 pharmacy and 10 laboratory) to improve their computer literacy and provide training in the use of pharmacy and laboratory HIV-HMIS modules.

I-TECH developed detailed diagrams that show patient flow in the HIV care and treatment facility and depict the supply chain for laboratory reagents. These will be further refined to identify detailed information requirements for the HIV care and treatment facility. These data will be presented to the MOD/NDF Data Capturing System technical working group. Three (3) military staff members were trained in a 2-week PEPFAR-sponsored program monitoring and evaluation course for HIV/AIDS in Pretoria, South Africa.

Proposed Future Activities

Ongoing successful NDF and partner programming was expanded to include additional aspects of comprehensive prevention, care, and treatment for military members and their families. All proposed activities were submitted to the Namibia Country Support Team, and were included in the FY09 COP.