



TUBERCULOSIS PROFILE



Namibia's tuberculosis incidence rate of 717 cases per 100,000 people is more than twice as high as the African regional average. The TB prevalence of 586 per 100,000 people and mortality due to TB of 85 per 100,000 people are also above average for the region. About 61 percent of people with TB are also HIV-positive, and Namibia has the fourth highest documented rate of TB-HIV co-infection in Africa. Although the number of new sputum-smear positive (SS+) cases reported from Directly Observed Therapy, Short-Course (DOTS) services decreased slightly from 2003 to 2004, it has been increasing throughout the last decade, fueled by the spread of HIV/AIDS. UNAIDS reports that Namibia's HIV prevalence is 19.6 percent, and this high prevalence poses serious problems for the successful treatment of TB. Since 2001, Namibia has sustained DOTS case detection rates above the global target of 70 percent. However, the DOTS treatment success rate of 63 percent is below the global target of 85 percent.

The National Tuberculosis Control Program (NTCP) was established in 1991, and until 2004, the national government provided the sole support for the program. In 2004, the KNCV Tuberculosis Foundation became a prime partner to the government of Namibia, providing full-time technical assistance to NTCP. Although there have been impressive gains in TB control and prevention, much remains to be done to expand access to DOTS programs and improve the treatment success rate.

Country population	2,009,251
Estimated number of new TB cases	14,396
Estimated TB incidence (all cases per 100,000 pop.)	717
DOTS population coverage (%)	100
Rate of new sputum smear-positive (SS+) cases (per 100,000 pop.)	257
DOTS case detection rate (new SS+) (%)	88
DOTS treatment success rate in 2003 (new SS+) (%)	63
Estimated adult TB cases HIV+ (%)	61
New multidrug-resistant TB cases (%)	1.3

Note: All data are for 2004 except where noted otherwise.
Source: Global Tuberculosis Control: WHO Report 2006.

USAID Approach and Key Activities

USAID launched its TB program in Namibia in 2005 with \$796,000 for TB control and surveillance. USAID supports the NTCP with technical assistance through the KNCV Tuberculosis Foundation, the NTCP's lead implementing partner. By strengthening the capacity of the NTCP, USAID efforts will enable Namibia to improve the management of TB-HIV/AIDS patients and expand community-based DOTS (CB-DOTS) into other regions. USAID assistance includes support for the following activities:

- Strengthening management capacity of the NTCP
- Developing and implementing sector-specific TB control strategies
- Expanding CB-DOTS in target zones
- Strengthening management of multidrug-resistant TB (MDR-TB) cases at the national and regional levels

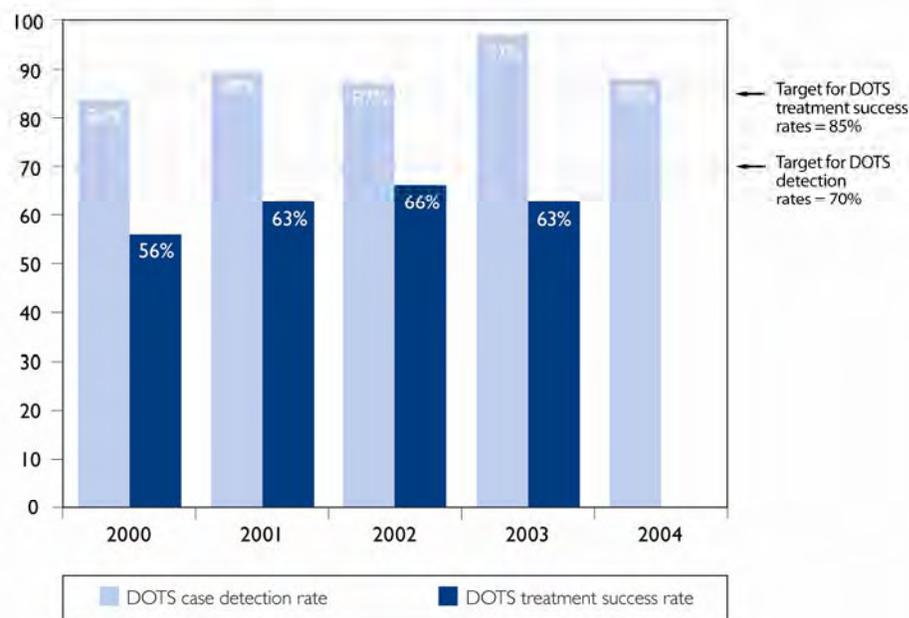
- Improving community knowledge, attitudes, and practices on TB and TB-HIV/AIDS
- Improving management and coordination between TB and HIV/AIDS partners in prevention, care, and support
- Developing infection control measures for TB and MDR-TB in health facilities

USAID Program Achievements

USAID's assistance and support have helped address TB prevention and control through the following activities:

- Conducted a situational assessment (March 2005) of TB prevention and control efforts in Namibia to identify programmatic opportunities and constraints
- Provided palliative care and TB treatment and care to 14,300 HIV-infected individuals; trained 1,500 individuals to provide TB palliative care; and supported 300 service outlets
- Supported quality assurance checks at the Namibia Institute of Pathology Laboratory
- Supported the development of a MDR-TB survey, in collaboration with staff from the Namibia Institute of Pathology, the Ministry of Health and Social Services, and U.S. Government partners

Case Detection and Treatment Success Rates Under DOTS



Note: DOTS treatment success rate for 2004 will be reported in the 2007 Global Report.
Source: Global Tuberculosis Control: WHO Report 2006.

Partnerships

USAID's partners in helping Namibia implement DOTS include the national government, the TB Coalition for Technical Assistance Project, the TB Control Assistance Project, the KNCV Tuberculosis Foundation, the U.S. Centers for Disease Control and Prevention, and other U.S. Government partners.