



Indicator	Value	Source/Year
Total Population in Millions (% Female)	2.6 (51%)	SWOP 2019
Youth Population (10-24 years)	31%	SWOP 2019
Total Fertility Rate (TFR)	3.2	NIDS 2016
Adolescent Birth Rate (15-19yrs)	82 per 1,000	SWOP 2019
Maternal Mortality Rate (MMR)	195 per 100,000 live births	MMR 2019
Modern Contraceptive Prevalence Rate (CPR)	60%	SWOP 2019
Unmet Need for Family Planning (FP)	16%	SWOP 2019
HIV Prevalence	12.1%	NAMPHIA 2017
Gender Inequality Index (GII)	0.472 ranked 115	HDR 2018
Gross Domestic Product (GDP) Growth (%)	-0.1%	WB 2018
Gini Index	59.1	WB 2018
Human Development Index (Inequality HDI)	0.647 ranked 129 (0.422)	HDR 2018



BACKGROUND

The Republic of Namibia¹ is largely a desert with a stretched coastline along the South Atlantic. The country borders South Africa, Botswana and Angola. The country's natural mineral riches, political stability and sound economic management have made it an **Upper Middle-Income Country** (UMIC). However, the UMIC status has not yet translated into job creation and prosperity for all. Extreme socioeconomic inequalities still prevail in the country.



UNITED NATIONS POPULATION FUND MODE OF ENGAGEMENT

Classified as a country with upper-middle income, Namibia is placed in the **orange** quadrant mode of engagement of the United Nations Population Fund (UNFPA). The country is characterized by deep inequalities that call for concerted actions.

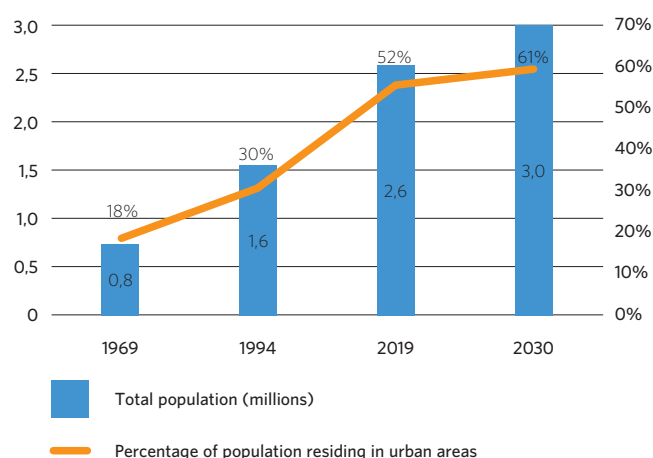
¹ This brief draws from published, global comparative data for countries and regions. Key sources are the 2019 State of the World Population Report (SWOP, UNFPA), United Nations World Population Prospects 2019, Human Development Report 2018 (HDR, UNDP), World Bank Poverty and Equity Data Portal, World Health Statistics (WHO), Trends in maternal mortality 2000 to 2017: estimates by WHO, UNICEF, UNFPA, World Bank Group and the United Nations Population Division (Maternal Mortality Report [MMR], 2019) and official national data. Recommended citation for this document: United Nations Population Fund (UNFPA), Republic of Namibia Facts and Prospects: Sexual and Reproductive Health and Rights, 2019.



POPULATION DYNAMICS

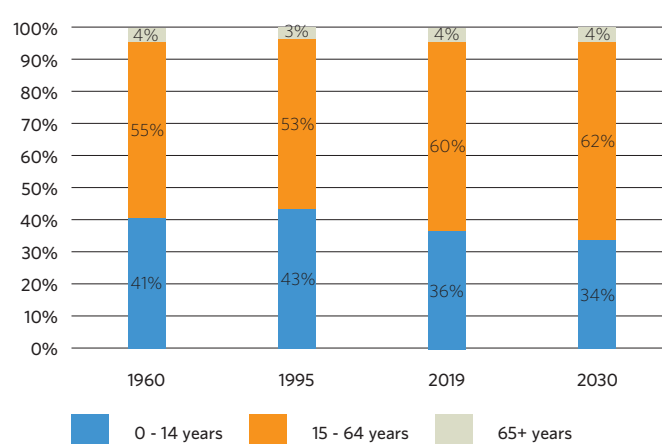
Namibia's total population increased more than three-fold to 2.6 million during the past 50 years and is projected to reach three million by 2030. The country is sparsely populated with 2.8 inhabitants per square kilometre. The average annual rate of population change declined from 2.2 per cent in 2001 to 1.9 per cent in 2011–2016. The proportion of the population residing in urban areas has nearly tripled to 52 per cent in the last 50 years and is projected to reach 60 per cent by 2030 (Figure 1). **Total fertility rate (TFR)** per woman has declined by 50 per cent from 6.4 in 1969 to the current 3.2, with corresponding changes in the population age structure.

Figure 1: Total population and percentage of population residing in urban areas, Namibia, 1969 - 2030



The proportion of the population below 15 years of age reduced by 16 per cent while that of the productive ages (15–64 years) increased by 13 per cent in the last 25 years, presenting a potential demographic dividend for socioeconomic development. **Young people below 35 years of age constitute nearly three-quarters (73%) of the total population.** The older population (above 65 years) as a percentage of the total population is projected to remain at 4 per cent up to 2030 (Figure 2). Life expectancy at birth increased from 52 years in 1960 to 61 years in 1994, then to 66 years in 2019.

Figure 2: Population composition by age, Namibia, 1960 - 2030



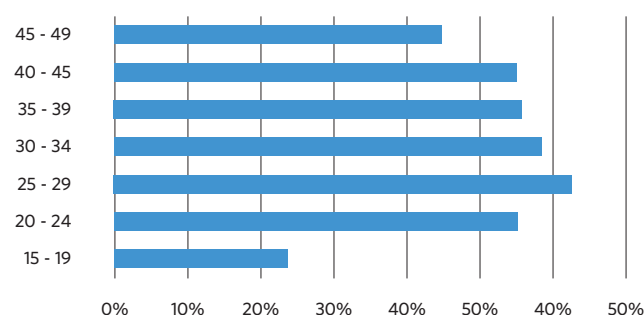
SEXUAL AND REPRODUCTIVE HEALTH AND RIGHTS

Maternal mortality rate: Namibia's maternal mortality rate (MMR) is 195 per 100,000 live births, a 40 per cent drop from the 1994 estimate of 323, and lower than the current global average of 211. Underlying causes of maternal deaths include lack of skilled personnel, long distances and delays in seeking care, as well as HIV-related maternal deaths. The high rates of adolescent pregnancies also contribute to maternal mortality. Despite the progress made, intensified efforts are necessary to reduce further maternal mortality in the country.

Contraceptive use: Modern contraceptive prevalence rate (CPR) among women of reproductive age increased phenomenally to 59 per cent from a low of 3 per cent in 1970, but is lower among young people aged 15–19 years in comparison to other age groups (Figure 3). This can be attributed to limited access to youth-friendly sexual and reproductive health (SRH) services, inadequate quality of comprehensive sexuality education (CSE), and relevant socio-economic determinants experienced by young people. These factors contribute to the unmet need for family planning (FP) estimated at 16 per cent.

Adolescent birth rate: Namibia has a high adolescent birth rate of 82 births per 1,000 girls aged 15–19 years, nearly double the global average of 44. About one in five (19%) of young women in the same age group have begun childbearing, an increase from 15 per cent in the 2006–2007 NDHS survey². Early sexual debut contributes to increased teenage pregnancies, unsafe abortions and sexually transmitted infections, including HIV.

Figure 3: Modern contraceptive prevalence rate by age, Namibia, 2013

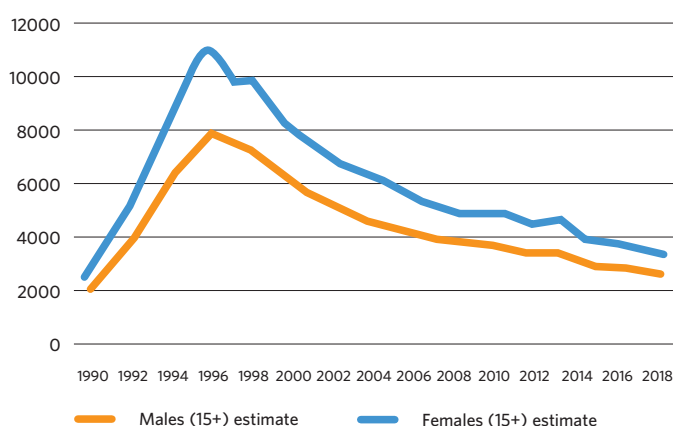


² Ministry of Health and Social Services, Demographic Health Survey 2013, 2006/07, 2000, 1991.

HIV: Currently HIV prevalence in Namibia is 12 per cent³, nearly half the peak prevalence (22%) at the turn of the last decade. While the country has recorded a 38 per cent decline in new HIV infections since 2010, new HIV infections in women of reproductive age are 31 per cent higher than that of men of the same age group (Figure 4). The country has an impressive record towards the achievement of the 90-90-90 HIV treatment cascade (Figure 5)⁴.

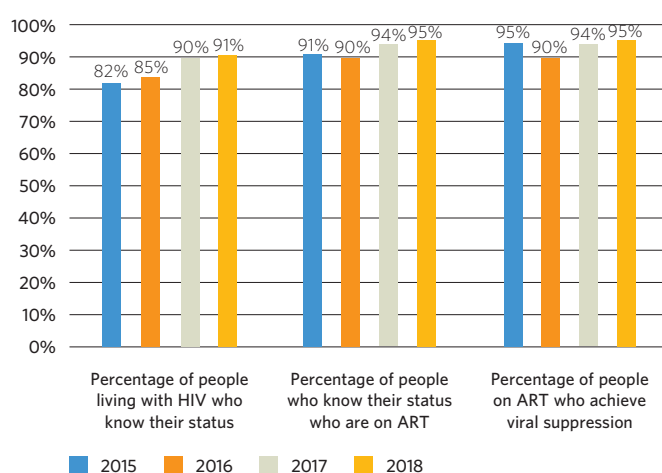
Gender equality: Namibia has ratified or signed many international and regional conventions or protocols regarding women's rights and gender equality, such as the 1979 Convention on the Elimination of all Forms of Discrimination Against Women (CEDAW), the Beijing Declaration, and the Southern African Development Community (SADC) Protocol on Gender and Development. **In 2018, the country launched a National Action Plan on Gender-Based Violence (GBV) as part of efforts to stem the gender-based violence problem.**

Figure 4: New HIV infections among adults (15+ years), by sex, Namibia, 1990 - 2018



However, the country faces high levels of violence against women and girls. The 2013 Demographic and Health Survey indicates the pervasive nature of **gender-based violence (GBV)** in the country with 33 per cent of ever-married women age 15-49 years reporting having experienced physical, sexual, and/or emotional violence from their spouse, with most of the cases (28%) occurring in the past 12 months and 6 per cent occurring during pregnancy. Adolescent girls, in particular, face higher levels of sexual violence with 8 per cent of girls aged 15-19 years having experienced sexual violence compared to 5 per cent of those aged 20-24 years. More than half (54%) of adolescent girls report their first sexual encounter as being forced, and nearly one in five (19%) have begun childbearing. The current GBV prevention, protection and response efforts are often not well coordinated and integrated, and do not reach the most marginalized. **Female representation in parliament** is reported at 36 per cent⁵.

Figure 5: Progress towards 90-90-90 target (all ages), Namibia, 2015 - 2018



ECONOMIC PERFORMANCE AND EQUITY

Namibia enjoyed a strong and sustained annual average economic growth of 4.6 per cent from 2012 to 2016. This growth was primarily driven by large investments in the extractive sector, favourable export prices and high government spending. The economic recession that started in 2017 continued through 2018 as seen in negative **gross domestic product (GDP)** growth rates of -0.9 and -0.1, respectively. The tough economic situation is also reflected in declines in investments as a percentage of GDP since 2015. The economy is projected to recover slowly over the coming years (Figure 6)⁶. Namibia's human development index (HDI) value is 0.647, which puts it in the medium human development category. Yet, when the value is discounted for inequality, it reduces to 0.422, a loss of 35 per cent. This is far higher than the average loss due to inequality for medium HDI countries, which is 25 per cent. This inequality is further reflected in the **Gini index**, a measure of wealth or income distribution, which is 0.59, placing Namibia among the most unequal countries in the world. The richest quintile account for nearly two-thirds of the income and consumption distribution (Figure 7)⁷.

Unemployment remains high at 33 per cent, with extremely high rates among young people: 15-19 years (70%), 20-24 years (57%) and 25-29 years (42%). The unemployment situation poses a critical development challenge.

Figure 6: Real GDP growth, and changes in total investment as a percentage of GDP, Namibia, 2010 - 2020

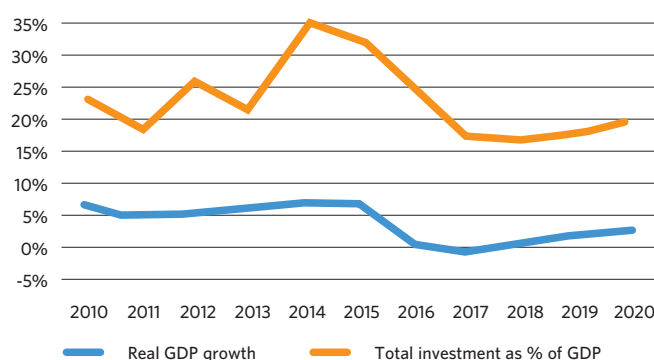
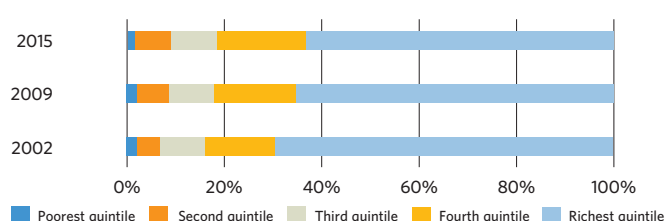


Figure 7: Distribution of income or consumption by quintile, Namibia, 2003 - 2015



³ Namibia Population-based HIV Impact Assessment (NAMPHIA), 2017.

⁴ HIV/AIDS data based on The Joint United Nations Programme on HIV/AIDS (UNAIDS) special analysis, 2019.

⁵ United Nations Development Programme, Human Development Report 2018.

⁶ International Monetary Fund (IMF), Regional economic outlook: Sub-Saharan Africa, April 2019.

⁷ World Bank Poverty and Equity Data Portal.



OTHER DEVELOPMENT COMPLEXITIES

Climate change: Namibia's various climatic zones make it difficult to detect and predict climate trends. Some regions of the country receive extreme rainfall events that add to the annual rainfall while others are confronted by severe droughts. In May 2019, the President of the Republic of Namibia declared a state of emergency due to drought that had affected an estimated 556,000 people. Climate change impacts include livestock losses, reduced grain and crop production and yields, severe water scarcity due to droughts, increased temperatures and disease outbreaks. Further, a shift in malaria zones occurred due to changing rainfall patterns.

Other climate change impacts that are surfacing is an increase in solar radiation that leads to more incidences of skin diseases, and increased susceptibility to respiratory and gastro-intestinal infections due to drought, poor nutrition, and poor sanitation.

Education: Universal education is a priority for the government. This is reflected in the 97 per cent and 96 per cent net enrolment rates at primary school level among boys and girls, respectively. There is also gender parity of 1.04 at primary education level. Net enrolment rate at secondary school is 51 per cent and 61 per cent among boys and girls, respectively, reflecting a drop in progression rate. One of the underlying drivers of attrition is teenage pregnancies, which accounts for about 28 per cent of all school drop-outs⁸.



ACCELERATING THE PROMISE IN 2019 AND BEYOND

Demographic dividend: Given changes in its population age structure, Namibia's window of opportunity for harnessing the first demographic dividend opened before 1990, while the magnitude of the first demographic dividend peaked between 2013 and 2015. Although the first demographic dividend will still have a positive impact on socioeconomic development by 2060, it is currently in the diminishing returns phase. A study commissioned by the Government of Namibia, with support from UNFPA, recommends the following actions to maximise what is left of the country's first demographic dividend, and to use this opportunity to hasten the achievement of the Vision 2030 development aspirations:

- Facilitate further demographic transition through enhancing voluntary family planning services and access to effective modern contraception.
- Reinforce investments in health to ensure a healthy labour force.
- Create jobs and other well-paying livelihoods for the country's youth.
- Optimise value for money to create a globally competitive skilled workforce.

Sexual and reproductive health and rights within universal health coverage:

The current situation in Namibia underscores the urgent need to invest in robust health systems and in sexual and reproductive health (SRH) services as part of the universal health coverage (UHC) agenda, with special focus on young people, including young people living with disabilities, to address high adolescent pregnancies and high maternal mortality.

Climate change: Namibia acknowledges that climate change poses significant threats to the country's growth and development and has developed a National Policy on Climate Change (2011). This Policy includes a section on health and well-being, with a focus on providing medical assistance to people impacted by climate change related diseases as well as malnutrition. The government's commitment to addressing climate change is reflected in its recent declaration of a state of emergency due to persistent drought. Investments are needed in understanding and responding to the full scale of the effects of climate change on health, including SRH.

Gender equality: The government recently adopted the Prioritised National Plan of Action on Gender-based Violence (2019–2023) to address the high levels of GBV, including against adolescents and young girls. This calls for multi-sectoral actions such as wide dissemination of laws and policies, engagement of community leaders to adopt positive gender norms, strengthening coordination and delivery of essential services, and improving collection, analysis and use of GBV data to drive evidence-informed policy decisions and programmatic actions. Namibia's third Universal Periodic Review (UPR) is scheduled for January/February 2021. During the second review in January 2016, the country accepted 71 out of 76 SRH-related recommendations that were raised, many of which relied on information from United Nations agencies and other stakeholders. This underscores the importance of continued engagement of the UNFPA with Namibia's UPR process.

Strengthening and forging strategic partnerships: Intersectoral and multi-stakeholder partnerships have potential to effectively address the prevailing development inequalities. United Nations agencies collaborated in 2019 to develop a joint Sustainable Development Goals (SDG) Fund proposal to support the government's social protection measures.



Ensuring rights and choices for all since 1969

United Nations Population Fund

East and Southern Africa Regional Office
9 Simba Road / PO Box 2980, Sunninghill,
South Africa, 2191
+27 11 6035300

esaro.unfpa.org

@UNFPA_ESARO

UNFPA East and Southern Africa Regional Office

⁸ Ministry of Education, Arts and Culture Education, Management Information System Report, 2017.