# Namibia

# **Medical Summary**

The health risk information presented here is summarized from Shoreland Travax<sup>®</sup>, a decision-support tool used by health care providers to perform a detailed health risk analysis based on specific locations, individual travel styles, and traveler risk behaviors. Travax provides practitioners current, independently researched malaria risk and prevention recommendations in a map-based format that goes beyond the annual WHO and US CDC statements included here. Not included here are current reports from Travax of disease outbreaks or environmental events that may pose elevated risks to travelers' health and safety. The Providers section of this site offers a directory of health care providers who utilize Shoreland Travax for travel health counseling. Learn more about the detailed reports and maps available from these practitioners (includes links to samples).

## General Information

Namibia is a developing nation classified as upper middle income. Located in southwest Africa along the Atlantic Ocean, the climate is classified as dry (arid) in the south and along the coast and dry (semi arid) in the north.

### **Vaccinations**

## Yellow Fever

Although yellow fever does not occur in Namibia, an official yellow fever vaccination certificate may be required depending on your itinerary.

• Requirement: A certificate proving yellow fever vaccination is required for travelers aged ≥ 9 months coming from countries with risk of YF transmission. This also applies to airport transit stops (no exit through immigration checkpoint) longer than 12 hours in risk countries.

#### Other Vaccines

Depending on your itinerary, your personal risk factors, and the length of your visit, your health care provider may offer you vaccination against COVID-19, hepatitis A, hepatitis B, influenza, measles, mumps, rubella, rabies, or typhoid fever. Routine immunizations, such as those that prevent tetanus/diphtheria or "childhood" diseases, should be reviewed and updated as needed.

# Malaria

The following is current information as reported by the World Health Organization (WHO) and the US Centers for Disease Control (CDC):

## WHO—International Travel and Health (current online update, Country List)

(2018) Malaria risk due to *P. falciparum* exists from November through June in the following regions: Ohangwena, Omaheke, Omusati, Oshana, Oshikoto and Otjozondjupa. Risk exists throughout the year along the Kunene river in Kunene Region, the Zambezi river in Zambezi Region, and the Okavango river in Kavango regions (West and East).

- Recommended prevention in risk areas: C Risk of *P. falciparum* malaria, in combination with reported chloroquine and sulfadoxine–pyrimethamine resistance. Mosquito bite prevention plus atovaquone–proguanil or doxycycline or mefloquine chemoprophylaxis (select according to reported side effects and contraindications) <sup>a</sup>
  - <sup>a</sup>Alternatively, for travel to rural areas with low risk of malaria infection, mosquito bite prevention can be combined with stand–by emergency treatment (SBET).

WHO Country List footnote: When available, the date of the most recent update or confirmation is indicated in parentheses in the country list. If no date is indicated, the most recent update or confirmation was provided before 2013.

#### CDC—Health Information for International Travel (current online edition)

Areas with malaria: Present in the regions of Kavango (East and West), Kunene, Ohangwena, Omusati, Oshana, Oshikoto, Otjozondjupa, and Zambezi. Rare cases in other parts of the country. No malaria in city of Windhoek.

- Drug resistance<sup>3</sup>: Chloroquine.
- Malaria species: P. falciparum >90%; P. malariae, P. ovale, and P. vivax rare.
- Recommended chemoprophylaxis: Kavango (East and West), Kunene, Ohangwena, Omusati, Oshana, Oshikoto,
  Otjozunupa, and Zambezi: Atovaquone-proguanil, doxycycline, mefloquine, or tafenoquine.<sup>4</sup> Other parts of the country with rare cases: None (practice mosquito avoidance).
  - <sup>3</sup> Refers to *P. falciparum* malaria unless otherwise noted.
  - <sup>4</sup> Primaquine and tafenoquine can cause hemolytic anemia in people with G6PD deficiency. Patients must be screened for G6PD deficiency before starting primaquine or tafenoquine. See *Tafenoquine Approved for Malaria Prophylaxis and Treatment* for more information.

# Other Concerns

#### Travelers' Diarrhea

High risk exists throughout the country, with moderate risk in deluxe accommodations. Community sanitation and food safety measures are generally inadequate. Some itineraries (e.g., remote destinations, austere accommodations) and activities (e.g., ecotourism, eating street or local-market food) further increase risk.

Travelers should observe food and beverage precautions, which reduce the likelihood of illness.

Travelers should carry loperamide for self-treatment of diarrhea and, if risk is moderate to high, an antibiotic to add if diarrhea is severe. Consult a knowledgeable health care provider regarding which antibiotic is appropriate for you and most effective for your destination.

## Insect- and Arthropod-Borne Diseases

African trypanosomiasis, dengue, tick-bite fever, West Nile virus may pose a risk. Personal protective measures are important.

#### Other Disease and Health Risks

Additional concerns include anthrax disease, Crimean-Congo hemorrhagic fever, helminths, leptospirosis, Marburg virus disease, marine hazards, plague, schistosomiasis, sexually transmitted infections, tuberculosis.

#### Consular Advice

The material below includes information from the US Department of State (DOS), the UK Foreign, Commonwealth & Development Office (FCO), Global Affairs Canada (GAC), and Australia's Department of Foreign Affairs and Trade (DFAT), as well as from additional open-source material. Standard safety precautions that apply to all international travel can be found in the Library article Safety and Security.

#### Terrorism Risk

No intrinsic risk of attack by terrorist groups exists, but unforeseen attacks are possible.

#### Crime

Moderate risk of violent crime (armed robbery, sexual assault, and murder) and high risk of petty crime exist throughout the country, especially in Windhoek.

Theft of valuables from unattended vehicles is common.

Scams involving the use of distraction techniques to commit robbery have been reported.

#### Civil Unrest

Protests and demonstrations may infrequently occur and have the potential to turn violent without warning. Bystanders are at risk of harm from violence or from the response by authorities. Disruption to transportation, free movement, or the ability to carry out daily activities may occur.

# **Unsafe Areas**

Landmines and other unexploded ordnance may be present in areas bordering Angola.

## **Outdoor Safety**

Basic safety standards for adventure activities (including dune boarding, hot air ballooning, and recreational off-roading) may not be in place. Travelers should only use reputable adventure-sport operators for activities and equipment rentals.

Desert excursions should only be undertaken with organized groups and experienced guides. Participants should inform someone not on the tour of their itinerary and anticipated return time. An adequate supply of food and water for extended unforeseen delays is essential.

## Other Safety Threats

Risk exists for fatal wildlife attacks on safaris and in game parks and reserves. Travelers should closely follow park regulations, always maintain a safe distance from wildlife, and should not exit vehicles or protected enclosures.

### Transportation Safety

Significant risk of traffic-related injury or death exists. The road traffic death rate is more than 24 per 100,000 population, the highest risk category. Carefully assess the safety of transportation options before any road travel.

Speed laws are poorly enforced.

Drunk driving laws are poorly enforced.

Structural standards for vehicles may not meet international standards.

#### **Natural Disasters**

The rainy season is from November through March. Floods, mudslides, and landslides may occur.

#### Consular Information

Selected Embassies or Consulates in Namibia

- United States: [+264] 061-295-8500; na.usembassy.gov
- Canada: [+264] 61-251-254; travel.gc.ca/assistance/embassies-consulates/namibia
- United Kingdom: [+264] 61-274800; www.gov.uk/world/organisations/british-high-commission-windhoek
- Australia: [+264] 61-300194

Namibia's Embassies or Consulates in Selected Countries

- In the U.S.: www.namibianembassyusa.org
- In Canada: [+1] 519-578-5932
- In the U.K.: www.namibiahc.org.uk
- In Australia: www.namibianconsulaustralia.com.au

# Visa/HIV Testing

HIV testing is not required to obtain a tourist, work, or residence visa.

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