



VIETNAMESE AND AMERICANS
IN PARTNERSHIP TO FIGHT HIV/AIDS

President George W. Bush's Emergency Plan for AIDS Relief is the largest commitment ever by any nation for an international health initiative dedicated to a single disease—a five-year, \$15 billion, multifaceted approach to combating the disease around the world.

U.S. Department of State

U.S. Agency for International Development

U.S. Department of Defense

U.S. Department of Commerce

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Peace Corps

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Country Profile: Vietnam

HIV/AIDS in Vietnam

Adults and Children Living with HIV: 260,000¹

AIDS Deaths (Adults and Children): 13,000¹

AIDS Orphans: Not available

HIV prevalence data in Vietnam is based primarily on HIV/AIDS case reporting and on the HIV Sentinel Surveillance conducted annually in 40 of Vietnam's 64 provinces. The government now reports HIV cases in all provinces, 93 percent of all districts, and 49 percent of all communes, although many high prevalence provinces report cases in 100 percent of communes. Even though Vietnam has implemented HIV/AIDS case reporting, the general lack of HIV testing thus far suggests that the actual number of HIV infected persons is much higher. HIV prevalence in the general population is estimated to be approximately 0.4 percent.

U.S. Government Response

In March 2004, the Government of the Socialist Republic of Vietnam released the National Strategic Plan on HIV/AIDS Prevention for 2004-2010 with a Vision to 2020. The strategy provides the vision, guidance and measures for a comprehensive national response to the epidemic, calling for mobilization of government, party and community level organizations across multiple sectors. The U.S. Government (USG) cooperates with the Government of Vietnam, as well as international organizations, community- and faith-based organizations, and international and local nongovernmental organizations to implement comprehensive HIV prevention, care and treatment programs in line with the National Strategic Plan, through the development of a diversified network system.

The USG response in Vietnam includes:

- Assisting Vietnam to develop comprehensive models of HIV/AIDS prevention, treatment, care and support networks;
- Supporting the Government of Vietnam's efforts to reduce stigma and discrimination against people living with HIV/AIDS (PLWHA) and people affected by HIV/AIDS;
- Advocating for greater involvement of PLWHAs at all levels of program development, implementation and monitoring of HIV/AIDS programs;
- Training Vietnamese physicians in clinical HIV/AIDS care and treatment;
- Assisting the Ministry of Health to develop peer outreach for those populations most-at-risk-populations for HIV infection, HIV/AIDS counseling and testing sites, and outpatient clinics in 40 provinces while others cover the remaining 24 provinces;
- Increasing the public health management capacity of Vietnamese government workers;
- Assisting the Ministry of Health to develop a national HIV reference laboratory, including quality assurance and quality control systems;
- Assisting in development of care and treatment coordination unit within the Ministry of Health by funding a care and treatment coordination position in the unit; and
- Providing support in establishing one national surveillance and monitoring and evaluation system.

Recognizing the global HIV/AIDS pandemic as one of the greatest health challenges of our time, President George W. Bush announced the U.S. President's Emergency Plan for AIDS Relief (Emergency Plan/PEPFAR) in 2003 — the largest international health initiative in history by one nation to address a single disease. Under the leadership of the U.S. Global AIDS Coordinator, USG agencies implement the Emergency Plan, working collaboratively as strong, interagency country teams under the direction of the U.S. Ambassador. These teams capitalize on the expertise of each USG agency and leverage partnerships with host governments, multilateral institutions, nongovernmental organizations and the private sector to implement effective programs for combating HIV/AIDS and ensure efficient use of USG resources.

Vietnam became the 15th focus country of the Emergency Plan in June 2004. The 15 focus countries collectively represent approximately 50 percent of HIV infections worldwide. Under the Emergency Plan, Vietnam received more than \$17.3 million in FY2004 and nearly \$27.6 million in FY2005 to support a comprehensive HIV/AIDS prevention, treatment and care program. In FY2006, the United States plans to provide approximately \$34 million to support Vietnam's fight against HIV/AIDS.



¹ UNAIDS, Report of the Global AIDS Epidemic, 2006



Emergency Plan Achievements in Vietnam to Date

Challenges to Emergency Plan Implementation

Stigma and discrimination pose a major challenge to fighting the HIV epidemic and must be addressed to enable people to seek services and allow caregivers to deliver support openly. Injecting drug use is a major factor driving the spread of HIV in Vietnam, posing a number of complex challenges. Detoxification with traditional therapies and government-sponsored rehabilitation centers are the mainstays of drug abuse treatment in Vietnam. Those failing to abstain from drug use or commercial sex work are enrolled in rehabilitation centers. Centers are costly and pose considerable health concerns due to the high number of HIV-infected detainees. It is reported that 40 percent of detainees are HIV-infected and many have tuberculosis (TB) or acquire TB in the centers. Vietnam has a relative advantage because the country has an adequate amount of health care workers, but the demands of augmenting HIV/AIDS prevention, treatment, and care are exposing serious gaps in the nation's capacity to implement the necessary policies and programs. Policy planning and program management skills are lacking at the provincial level. Laboratories show considerable differences in the quality of their outputs.

# of individuals reached with community outreach HIV/AIDS prevention programs that promote Abstinence and/or Being Faithful in FY2005 ^{1,6}	265,500
# of individuals reached with community outreach HIV/AIDS prevention activities that promote Condoms and related prevention services in FY2005 ^{1,6}	165,200
# of USG condoms shipped in Calendar Year 2005	10,344,000
# of pregnant women receiving prevention of mother-to-child HIV transmission (PMTCT) services since the beginning of the Emergency Plan ^{3,4}	71,900
# of pregnant women receiving antiretroviral prophylaxis for PMTCT since the beginning of the Emergency Plan ^{3,5}	200
# of individuals receiving counseling and testing (in settings other than PMTCT) in FY2005 ^{3,4}	37,300
# of HIV-infected individuals who received palliative care/basic health care and support in FY2005 ³	11,800
# of Orphans and Vulnerable Children (OVCs) who were served by an OVC program in FY2005 ³	1,000
# of individuals receiving downstream site-specific support for treatment as of September 30, 2006 ¹	3,700
# of individuals receiving upstream system strengthening support for treatment as of September 30, 2006 ²	2,900

Note: Numbers may be adjusted as attribution criteria and reporting systems are refined. Numbers above 100 are rounded to nearest 100.

¹ Number of individuals reached through downstream site-specific support includes those receiving services at U.S. Government-supported service delivery sites.

² Number of individuals reached through upstream systems strengthening includes those supported through contributions to national, regional and local activities such as training, laboratory support, monitoring and evaluation, logistics and distribution systems, protocol and curriculum development.

³ Total results combine individuals reached through downstream and upstream support.

⁴ It is possible that some individuals were counseled and tested more than once.

⁵ It is possible that some pregnant women received antiretroviral prophylaxis more than once over the two-year period, e.g. HIV positive women who were pregnant more than once.

⁶ In FY2004, Vietnam reported all community outreach prevention results under the Other Prevention program area. In FY2005, in accordance with Emergency Plan reporting requirements, community outreach results are split between the AB or Other Prevention program areas.

Critical Interventions for HIV/AIDS Prevention

- Supported workshops in both northern and southern Vietnam to help break down stereotypes about people living with HIV/AIDS (PLWHA).
- Supported basic training for PLWHA on organizing and managing groups, advocacy, public speaking, care and support.
- Supported a workshop for Vietnamese medical personnel to share best practice models and lessons learned.
- Supported the first hospital-based counseling and testing clinic, which was advertised as part of routine health-related services in an effort to reduce the stigma associated with the disease. In the first 18 months, more than 3,700 individuals were served at this clinic with 85 percent of those who tested positive returning for their results.
- Supported dozens of counseling and testing sites in 40 provinces. In 12 months, more than 20,000 individuals were tested with 89 percent returning for their results.
- Supported two workshops for peer outreach workers to share experiences and lessons learned. These workshops were also attended by peer outreach workers from neighboring countries.
- Supported HIV/AIDS prevention activities in the workplace including abstinence, being faithful and condom use, as well as reduction of stigma and discrimination for workers.

Critical Interventions for HIV/AIDS Treatment

- Provided clinical training for HIV/AIDS care and treatment by American HIV specialist physicians to physicians throughout Vietnam. This includes small-group instruction, bedside teaching, and mentors for Vietnamese physicians to contact for individual case management.
- Supported clinics that deliver antiretroviral drugs (ARVs) in national, provincial and district hospitals.
- Supported the development of national ARV treatment guidelines, which were disseminated in June 2005.
- Rapidly ensured ARV readiness focusing on six high prevalence provinces. The treatment program includes USG coordinated clinical training, ARV criteria guidelines, site and patient readiness training, patient monitoring and site quality assurance.
- Supported training of health care providers in the administration of ARVs and monitoring of patient conditions during treatment.

Critical Interventions for HIV/AIDS Care

- Worked with PLWHA groups in an effort to coordinate work to promote human rights and coordinate a more effective national effort.
- Vietnam's epidemic is concentrated primarily in injecting drug users (IDU) and commercial sex workers. Currently, large populations at risk for acquiring or transmitting HIV in Vietnam are detained in provincial drug treatment rehabilitation centers. Pilot transition programs are being developed to support HIV-positive residents as they leave IDU rehabilitation centers to return to their communities.