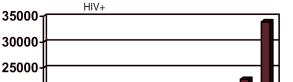
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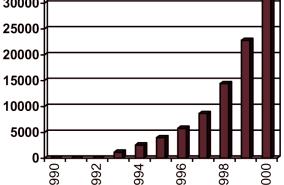
Vietnam

Cumulative Reported HIV+Cases in Vietnam:1990-2000

Background

Vietnam is still considered to have a concentrated HIV/AIDS epidemic, with almost two-thirds of reported HIV infections occurring to intravenous drug users (IDUs) and most of the rest in sex workers. The prevalence of HIV in all of the sentinel surveillance groups has been increasing steadily since 1996 (in 2000: IDUs 20%, sex workers 4.5%, STD patients 1.2%, military 0.5%, and ANC clients 0.25%), however still remaining below 1% among low risk population. Since the first case of HIV was reported in December 1990, the reported number of HIV-positive persons in Vietnam has increased to over 37,000 as of July 2001, however, the actual number of persons living with HIV/AIDS (PLHAs) is much higher.





Source: National AIDS Standing Bureau (NASB), 2001

Strategy

FHI/IMPACT, through funding from the USAID/Asia Near East Bureau, focus on preventing the spread of HIV/AIDS in Vietnam through three principle strategies:

Public Health Approaches: Supporting Behavioral Surveillance Surveys (BSS) to obtain better HIV/AIDS behavioral data for program planning, and supporting HIV/AIDS counseling services, peer education, behavior change communication (BCC) and harm reduction.

Capacity Strengthening: Training and mentoring individuals and organizations involved in HIV/STD Prevention and Care, providing them with study materials, and helping them participate in international conferences.

Behavior Change: Developing behavior change/risk reduction interventions such as condom social marketing, BCC, peer education, harm reduction, and STD provider skills improvement in the FHI-supported project provinces.

Program Accomplishments

FHI has worked directly with the National AIDS Standing Bureau and provincial AIDS and health authorities to conduct HIV/AIDS behavioral change and risk reduction interventions and related HIV/AIDS prevention activities. At the national level, we support the behavioral surveillance surveys, dissemination activities, and training workshops and conferences. Activities at the provincial level include multi-media BCC campaigns, STD skills training for pharmacists and private physicians, peer education, outreach and harm reduction for IDUs and sex workers, drop-in centers for IDUs in 2 provinces, and a women's health club for sex workers, peer education for men in the workplace, and condom promotion through social marketing in 6 provinces.

Family Health International, October, 2001

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The Challenges

Some constraints have been overcome, but there are still some major challenges:

- 1. More effort is needed to de-stigmatize PLHAs, and to reach out more effectively to sex workers, IDUs, and men for HIV/AIDS prevention;
- 2. Counseling, care and support services for PLHAs need to be developed, improved and expanded;
- 3. More behavioral research is needed which can be translated into policy and program action;
- 4. Additional technical and financial support is needed to ensure that successful pilot interventions can be scaled-up in a cost-effective manner;
- 5. More effort is needed to carry the HIV/AIDS related BCC and prevention messages beyond the targeted groups of IDUs and sex workers;
- 6. In many areas local authorities, health specialists and project staff need to gain expertise in HIV/AIDS prevention and care;
- 7. Social Evils campaigns targeting IDUs and sex workers have made outreach contact with IDUs and sex workers more difficult. FHI continues to support public health approaches to HIV/AIDS prevention and care;
- 8. There is a need to delegate more responsibilities to local organizations such as the youth union and women's union until local NGOs become more developed.

Future Program Priorities

In the future, we plan to:

- Expand to three new provinces our BCC interventions, STD provider training, peer education, harm reduction activities, and condom promotion;
- Work with mobile populations in two new provinces;
- Improve care for PLHAs in project provinces;
- Support HIV/AIDS counseling;
- Train journalists to report on HIV/AIDS; and
- Analyze and disseminate intervention results and BSS data for policy and program action.

Partner Agencies

In addition to our primary donor agency USAID, over the past three years FHI has partnered with a number of governmental and non-governmental agencies, to develop and implement HIV/AIDS prevention interventions, research and capacity building efforts, including the following:

- National AIDS Standing Bureau
- Provincial Health Services of Hai Phong, Quang Ninh, Binh Dinh, Can Tho, Hanoi, Thai Binh, Dong Nai
- Provincial AIDS Standing Bureaus of Hai Phong, Quang Ninh, Binh Dinh, Can Tho, Hanoi, Thai Binh, Dong Nai
- Provincial People's Committee,
- DKT International
- The Population Council
- PDI

Contact Details

Family Health International, 30 Nguyen Du Street, Suite 201 Hoan Kiem, Ha Noi, Viet Nam Email: fhivn@fhi.org.vn

Tel: 84-4-943-1828 Fax: 84-4-943-1829



Implementing AIDS
Prevention and
Care (IMPACT) Project



Family Health International HIV/AIDS Prevention and Care Department

2101 Wilson Boulevard SUite 700 Arlington, Virginia 22201 USA Telephone 703.516.9779 Fax 703.516.9781

http://www.fhi.org



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