

PEPFAR PROGRAM

Counseling and testing program reaches out to at-risk populations

Vietnam's HIV/AIDS epidemic is concentrated primarily among injecting drug users, commercial sex workers and men who have sex with men. Outreach workers regularly walk into neighborhoods in Hai Phong City with the hope of reaching these at-risk populations with information about HIV/AIDS and voluntary counseling and testing (VCT). The outreach workers encourage individuals to seek HIV counseling and testing at the Community Health Counseling Center in Hai Phong City.

The Community Health Counseling Center is one of over 50 VCT sites operated by the Vietnamese Ministry of Health with support from the U.S. President's Emergency Plan for AIDS Relief (Emergency Plan/PEPFAR). VCT services in Vietnam have expanded rapidly, and are currently located in the 40 provinces with the highest HIV prevalence. These sites serve 40,000-45,000 clients annually and reach out to the country's most stigmatized individuals by offering flexible hours and confidential services free of charge. As of March 2006, VCT sites had provided services to over 88,000 clients, of whom 80 percent were members of high-risk groups. Seventeen percent of those tested were HIV-positive, and over 90 percent of HIV-positive clients were referred for follow-up services.

The VCT program is having an impact. "This intervention, VCT, helps HIV-negative people maintain their negative status, assists HIV-infected people to avoid HIV transmission to others and to live healthy lives, and links infected people to care and treatment services," said Huynh Thi Nhan, a counselor at a Ministry of Health VCT site in Can Tho City.

Launched at the end of May, a new communications campaign will help to expand the reach of the VCT program. The campaign targets potential clients with information about HIV counseling and testing and the locations of VCT sites. Billboards and posters encourage clients to talk with counselors to discuss feelings of fear and concern, and to answer questions related to HIV/AIDS. The campaign also emphasizes the importance of testing as a crucial step in improving overall health and quality of life.

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 March 31, 2006 ¹	1,600
# of individuals receiving upstream system strengthening support for treatment as of March 31, 2006 ²	0
<p>Note: Numbers may be adjusted as attribution criteria and reporting systems are refined. Numbers above 100 are rounded to nearest 100.</p> <p>¹ Number of individuals reached through downstream site-specific support includes those receiving services at U.S. Government-supported service delivery sites.</p> <p>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.</p> <p>³ Total results combine individuals reached through downstream and upstream support.</p> <p>⁴ It is possible that some individuals were counseled and tested more than once.</p> <p>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.</p> <p>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.</p>	

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 Intervention 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.