

VIET NAM

Report prepared by the Joint UN Team on AIDS

JOINT TEAM

UNICEF, UNDP, UNFPA, UNODC, UN WOMEN, UNESCO, WHO, UNAIDS
SECRETARIAT

JOINT PROGRAMME CONTRIBUTIONS AND RESULTS IN 2020-2021

To ensure HIV service continuity during the COVID-19 pandemic, the Joint Team supported implementation and scale up of innovative differentiated service delivery mechanisms, such as online HIV counselling, online distribution of HIV self-test kits, and pre-exposure prophylaxis, as well as the multiday take-home methadone doses pilot programme to scale up HIV and harm reduction services for people who use amphetamine-type stimulants and engage in sexualized drug use. National guidelines on harm reduction programmes and methadone maintenance treatment were developed, and healthcare workers within prisons and pre-trial detention centres were trained and received onsite monitoring to improve HIV testing, treatment, and care services in prisons and closed settings. Thanks to technical support, a new guideline on comprehensive sexuality education (CSE) and a teachers' guide for CSE integration in the school curricula were made available, while the Joint Team supported the development of an e-course on gender responsive counselling for lower secondary school teachers to improve access to sexual and reproductive health and HIV information among adolescents and young people. Information on COVID-19, HIV and other sexually transmitted infections were provided for thousands of people, and other health counselling and service package and socioeconomic support, including cash transfers reached more than 6000 people living with HIV and key populations to overcome the impacts of the pandemic. Finally, a new Government circular was issued to improve antiretroviral treatment for people living with HIV provided through the social health insurance system, and key laws on HIV and drug use were amended to provide equitable and rights-based services and improve the enabling environment to uphold the rights of vulnerable and key populations.

HIV PREVENTION AMONG YOUNG PEOPLE AND KEY POPULATIONS

The Joint Team provided substantial technical support for the development of a five-year national plan (2020-2025) and the update of the national guideline for the management of pre-exposure prophylaxis (PrEP) for scaling up access and uptake of PrEP services among key populations.

Following successful advocacy efforts, the Joint Team supported the Ministry of Education and Training to develop a guideline on CSE for integration into teacher training programmes. CSE lesson plans for teachers will be implemented in three provinces in 2022.

Technical assistance was also provided for the development and rollout of an e-course on gender responsive counselling that comprises HIV for lower secondary school teachers. To improve access to sexual and reproductive health and HIV information among young key populations, the Joint Team further supported the rollout of comprehensive sexuality education in out-of-school settings for young people who use drugs in the Hai Phong, Son La and Hoa Binh northern provinces.

To address the expanding use of amphetamine-type stimulants in Viet Nam, the Joint Team supported the development of national guidelines on HIV interventions for people who use stimulants; and national guideline on harm reduction for people engaged in sexualized drug use which were approved by the Viet Nam Administration for HIV/AIDS Control (VAAC). Additionally, the Joint Team provided policy and technical support to prepare national guidelines for methadone maintenance treatment (MMT) service provision in the context of the COVID-19 pandemic.

Intense advocacy and technical assistance by the Joint Team led to the development and successful implementation of a multiday take-home methadone doses pilot programme in three provinces in 2021, with concrete plan of expansion to three more provinces in 2022. Bottles and bags for take-home MMT were also procured to support the pilot programme.

The Joint Team made significant contributions to improve access to community-led HIV and other essential health and social support services among key populations and strengthen community resilience during the COVID-19 pandemic. Hence, the Joint Team conducted two rapid assessments of the impact of the pandemic on key populations, through the Viet Nam Sex Workers Network (VNSW), which comprises people living with HIV, transgender persons, men who have sex with men, and people who use drugs. The assessments revealed a lack of access to information, social services and protection, and informed advocacy and provision of an emergency support package.

The Joint Team in collaboration with community networks provided HIV, sexually transmitted infection (STI) and other health counselling and service package and socioeconomic support, including cash transfers reaching more than 6000 people living with HIV and key populations by the end of 2021. Information on HIV, COVID-19, and other health-related topics were also disseminated on social media platforms receiving 54 000 views.

Three training sessions were conducted for more than 250 representatives of civil society organizations to improve their understanding and skills on the delivery of harm reduction and COVID-19 services, indirectly benefiting an estimated 15 000 people who use drugs across the country. Furthermore, the Joint Team worked closely with the national steering committee of the Viet Nam Sex Workers Network (VNSW) and the Vietnam Network of People Living with HIV (VPN+) to enhance the capacity for 50 community-based organizations of people living with HIV and key populations in the 15 provinces most affected by the pandemic to provide emergency peer-support. The capacity building efforts included guidance and technical support, procurement of HIV and hygiene commodities and medicines, training on prevention of gender-based violence and COVID-19, and access to government emergency social protection scheme.

HIV TESTING AND TREATMENT, AND PMTCT

The Government of Viet Nam was supported to revise the national guidelines for HIV diagnosis and treatment, which was approved by the Ministry of Health.

The Joint Team also supported the implementation of the national plan for the elimination of mother-to-child transmission of HIV, syphilis, and hepatitis B in the remaining nine provinces in Viet Nam. The support included the roll out of capacity building initiatives on the related standard operating procedure by the Ministry of Health. In addition, technical and financial support was provided for the development and dissemination of the national guidance on the prevention of mother-to-child transmission of HIV (PMTCT) in prisons. National stakeholders,

including representatives of the Ministry of Health and the Ministry of Public Security attended a regional training organized by the Joint Programme to strengthen their skills on the implementation of the new guidelines.

The Joint Team made several contributions to improve access to critical healthcare services aimed at ensuring better health outcomes of people living with HIV. These included technical support for implementation of the national action plan for HIV drug resistance prevention and surveillance to guide national decisions on HIV treatment regimens and public health interventions; development of a national guideline on tuberculosis case finding and latent tuberculosis treatment for people living with HIV; and implementation of hepatitis C treatment services for people living with HIV.

Technical support and guidance were also provided to ensure the continuity of HIV prevention, testing and treatment services in Viet Nam during the COVID-19 pandemic. Hence, online HIV counselling, distribution of HIV self-test kit, PrEP, and multimonth dispensing of antiretroviral treatment services were scaled up to improve access among vulnerable and key populations. In 2020-2021, online distribution of HIV self-test kit with linkages to antiretroviral treatment and PrEP services was successfully piloted in three provinces with an aim of expansion to 23 provinces in 2022. Results from the assessment of the pilot programme showed web-based HIV self-test kit distribution could be used to reach key populations, including young key populations.

As a result of technical assistance from the Joint Team, the Ministry of Health issued a new circular on the management and supply of antiretroviral treatment procured through the social health insurance, ensuring quality and sustainable antiretroviral treatment services for more than 162 000 people living with HIV in the country. More than 85 000 of them were transitioned to antiretroviral treatment financed through the social health insurance by the end of 2021. The Joint Team also supported monitoring of this transition, including through community feedback which was critical to ensuring flexible and inclusive policies for the most marginalised and vulnerable populations.

To improve access to HIV counselling and testing, treatment, and care services in prisons, the Joint Team provided training healthcare workers from 20 prisons and 25 pre-trial detention centres. The Joint Team further conducted virtual and onsite monitoring, distributed education materials, and facilitated collaboration between communities and prison healthcare providers to ensure access and continuity of antiretroviral treatment services. Additionally, personal protective equipment, COVID-19 prevention information materials, and medicines were procured and distributed to 54 prisons and six reformatory sites to curb new COVID-19 infections and support the overall pandemic response in prisons.

HUMAN RIGHTS, STIGMA, AND DISCRIMINATION

In collaboration with development partners and civil society, the Joint Team advocated for and provided technical support for the revision of the 2006 Law on HIV/AIDS Prevention and Control; the Drug Prevention and Control Law; and the 2012 Law on Handling of Administrative Violations. The new Law on HIV/AIDS prevention and control which took effect in July 2021 among others lowers the age of consent for voluntary HIV testing from 16 to 15 years and mandates the social health insurance to cover cost of HIV testing among pregnant women. The Law was also amended to include transgender people, inmates, detainees, and people consigned to compulsory education institutions or reformatories as key populations.

The amended Drug Prevention and Control Law defines drug addiction which is better aligned with the international concept on drug dependence and integrates conditional exemption of Opioid Agonist Therapy (OAT) clients for compulsory drug detoxification. Additionally, the revised law on Handling of Administrative Violations aims to improve policies and legislations used to address administrative violations to ensure effectiveness and efficiency of the law.

INVESTMENT AND EFFICIENCY

The Joint Team provided technical support to the Government and ensured active involvement of civil society in the development of a successful Global Fund concept note for the 2021-2023 grant period which mobilized more than US\$ 55 million for the national HIV response.

In partnership with development partners, the Joint Team continued its advocacy work ensuring the Government of Viet Nam remained highly committed to ending AIDS as a public health threat. Technical support was provided for the development of the *National Strategy to End AIDS by 2030* which was approved by the Prime Minister in 2020. The strategy institutionalizes the 95-95-95 targets and reinforces the policy that mandates provincial governments to invest local budget in the HIV response.

CONTRIBUTION TO THE INTEGRATED SDG AGENDA

The Joint Team made significant contributions to the development of Viet Nam's United Nations Sustainable Development Cooperation Framework (2022-2026) following the Common Country Analysis (CCA) and an independent evaluation of the Joint Team's One Strategic Plan in Viet Nam 2017-2021. The framework includes critical HIV-related strategic priorities and outcomes in two areas—Inclusive Social Services and Governance and Access to Justice—that address the needs of vulnerable and key populations in line with the Sustainable Development Goals (SDGs) and the principle of *leaving no one behind*. Efforts were also made to ensure full engagement of the Viet Nam Administration for HIV/AIDS Control and communities in the development of the framework.

The Joint Team collectively advocated for and supported the participation of high-level government officials to the UN High-Level Meeting on HIV/AIDS (HLM) in June 2021. As a result, the Deputy Prime Minister headed the delegation and spoke about Viet Nam's strong political commitment to the HIV/AIDS response in the past four decades, expressed solidarity to end AIDS by 2030, and committed and called upon other countries to achieve the 95-95-95 targets in the next five years.

In 2020, the Joint Team actively participated and provided technical assistance for the development of Viet Nam's socioeconomic development strategy 2020-2030 and the national socioeconomic development plan 2020-2025 ensuring inclusion of a target on ending AIDS as a public health threat.

Technical support was provided for the development of the mid-term review report on the implementation of recommendations in the third round of Viet Nam's Universal Periodic Review (UPR). In this process the Joint Team also ensured that the recommendations of the report covered HIV-related issues, including human rights and built on other efforts made by the Joint Team to promote gender equality and rights for all, such as the UN Free & Equal annual national campaigns on the rights of the LGBTI community and in and out of school comprehensive sexuality education.

CHALLENGES AND LESSONS LEARNED

Despite achieved gains, including a decline in new infections among people who inject drugs and female sex workers, new HIV infections continued to increase rapidly among men who have sex with men, transgender women and women who acquired HIV from their intimate partners who engage in behaviours that put them at risk of HIV infection.

Implementation of HIV combination prevention programmes remained insufficient among key populations, especially among young men who have sex with men and uneven across the country. The expansion of innovative approaches, including PrEP focused on targeted locations supported by external donors and are thus not yet fully maximized and sustainable. Experiences underscored the need to scale up HIV self-test kits distribution and tele-PrEP as well as increase domestic resources to ensure the sustainability of HIV prevention programmes.

While political leadership and commitment for the HIV response remained strong, consolidated effort is needed to address complex issues, including restructuring the healthcare system around prevention. New challenges arose from increased integration of HIV within the health and social systems; declining external resources for the HIV response; and increasing use of amphetamine-type stimulants and chemsex, and limited national capacity for public health approaches for handling drug-related issues; uneven implementation of national commitments across the country.

The COVID-19 pandemic posed severe constraints on the continuity of HIV services. However, it also created an opportunity for implementing innovative programmes, such as MMD and take-home methadone doses. It also underscored the critical role community-based organizations play in the HIV response, paving the way for a more structured partnership with the Government through social contracting.

The *National Strategy to End AIDS by 2030*, approved in 2020, mandated all provinces to develop financial sustainability plans to guide provincial investment for HIV. Continued monitoring and advocacy by the Government, the National Assembly and the United Nations are required to ensure development and funding of these plans.

Report available on the
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