

Vietnamese Non-Government Organisations

The Center of Public Health and Development (CEPHAD)

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Introduction: The Centre of Public Health and Development (CEPHAD) is a non-profit health organization working under the authority of the Vietnam Psycho-Pedagogical Association, the Vietnam Union of Sciences and Technology Association. CEPHAD was established in 1995 with 15 core staff and 25 volunteers.

CEPHAD's mission is to improve the living standard and health status of the poor, especially women and children living in mountainous and remote areas. This is achieved by applying the most effective and appropriate strategies which focus on primary health care, rural development, community development and research. HIV/AIDS related topics are also part of the comprehensive health education approach.

Locations : 1) Phu Tho (Viet Tri City), 2) Yen Bai (District Tran Yen, commune Tan Dong, 3) Kon Tum (District: Donray, commune Dak Ruong)

Activities: 1) Creating a favourable environment for establishing a comprehensive home based care model for PLWHA. Strengthening support networks for PLWHAs, health workers, caregivers, family members and establishing "friends-help-friends-groups and a PLWHA family club. Training of care providers and equipment of the health station, 2) Comprehensive maternal and child health program including aspects of reduction of mother-to-child transmission, 3) Poverty reduction and community development project including HIV related aspects: communication of HIV related issues, of provision counselling services on HIV/AIDS (IEC) for villagers.

Target groups: PLWHA and family members and caregivers of PLWHA, health professionals and staff, women's union, youth union, high risk groups and the border community. 2) ethnic minority (Dao), women and their children, 3) the community.

Funding agency: ICCO – Inter Church Organization for Cooperation and Development.

Outlook: CEPHAD will continue working in primary health care, including reproductive health and HIV, namely: in research, training, project management and evaluation. One project under consideration is addressing harm reduction for injecting drug users.

CEPHAD will move into the second phase of each project in early 2003, with a gradual transfer of responsibilities to local partners until 2004

Consultation In Health Promotion (CIHP)

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CIHP has participated in studies or conducted training in HIV/AIDS. These activities belong to HIV/AIDS projects funded or implemented by other international organizations. For examples:

- The collaborative research “**Link between Gender, Women Empowerment, Sexuality and Reproductive Health**”. It started in 2001 and will be completed in 2003 with the involvement of CIHP researchers, Population Development International (PDI) staff and experts of the John Snow Institute. The research project is funded by the Summit Foundation and implemented in Cua Lo town, Nghe An province.
- **Training Needs Assessment in Adolescent Reproductive Health (ARH) and HIV/AIDS** for Know One Teach One (KOTO)’s trainees – World Population Foundation (WPF) supported project. This exercise was conducted with the involvement of team of CIHP consultants.
- **Study of the health needs, knowledge and practices about reproductive health among juvenile children** – a World Population Foundation (WPF) supported project. The study aims is to discover the health needs, knowledge and practices about RH among juvenile children in a number of social barracks. The role of CIHP consultants was to design the study, collect data, and write the report.
- **Research on link between gender, sexuality and reproductive health in Vietnam**: This research is conducted in 5 communes in Cua Lo district, Nghe An province in collaboration with the Population and Development International (PDI) and the John Snow Research and Training Institute (JSI). Duration of the research is 2001 - 2003.

CIHP also has two projects particularly working in the field of HIV/AIDS. However, these projects either are either under preparation or have only just started.

1. The second is “**Developing Edutainment Materials on HIV/AIDS for Adolescents**”. This is a collaborative research project between the Institute of Anthropology (Copenhagen University) and CIHP started in 2001 (until 2003). The general objective of the project is to develop appropriate Edutainment Materials for Adolescents in HIV/AIDS prevention. The study project is funded by DANIDA. The review report on available Edutainment Materials in Vietnam in terms of HIV/AIDS and Adolescents Reproductive Health (ARH) will be available in August 2002.
2. **On-line counselling** for adolescents and young adults on HIV/AIDS, sexuality and reproductive health: the project will be implemented from August 2002 - August 2004, funded by the Ford Foundation.

STI/ HIV/ AIDS Prevention Center (SHAPC)

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Introduction : The STI/HIV/AIDS Prevention Centre was established in 1998 under the Hanoi Department of Science and Environment as a local non-governmental organization. It was established by a volunteer team of professors and medical doctors, well experienced in prevention and promotion of reproductive health and family planning and devoted to humanitarian activities. Objectives are: contribution to the reduction of STI/HIV/AIDS cases in the community and to the improvement of reproductive health for women and female adolescents.

Activities include health promotion as well as provision of services for prevention and treatment of STI. In addition SHAPC conducted research on drug detoxification, STI treatment, innovative contraceptive methods (e.g. female condom) and on high risk behaviour for STI/HIV infection. SHAPC also provided training courses on care and support for PLWHA, on HIV prevention for hotel employees and for HIV prevention through peer education for CSW in various provinces.

1. “STI prevention on the border between Lang Son and China”

In Lang Son (Cao Loc, Loc Binh, Van Lang, Lang Son Town) from July 2000 until 6/2002. Funded by AusAID.

Target groups: PLWHA, commercial sex workers, motorbike drivers, women in the community, doctors and pharmacists.

Activities: initial assessment, provision of training courses, distribution of IEC material, distribution of condoms and needles and syringes (harm reduction), and construction of 4 clubs for PLWHA.

2. “STI prevention on the border between Lao Cai and China”

In Lao Cai Province (Sapa town, Bao Thang district) from 6/2001 – 6/2002. Funded by AusAID.

2.1 “STI/HIV/AIDS prevention on the border between Nghe An and Laos”

In Nghe An Province (Ky Son, Vinh city, Cua Lo town) from 6/2001 – 6/2002 (funded by SEARP Australia)

2.2 “STI/HIV/AIDS prevention on the border between Quang Ninh (Vietnam) and Guangxi (China)”

In Quang Ninh (Halong City and Mong Cai Town) from May 2002 to May 2003, funded by SEARP Australia.

Target groups: commercial sex workers, drug users, PLWHA and pharmacists and doctors.

Activities: organisation of trans-border conferences, provision of training courses for peer educators (commercial sex workers, IDU, PLWHA, motorbike drivers) and professionals on HIV and STI prevention and treatment, distribution of IEC material, distribution of needles/syringes (harm reduction) and condoms

3. “STI/HIV/AIDS prevention for sex workers in Hanoi”

Organisation of 2 training courses for hotel employees in Hanoi (Dong Da, Thanh Xuan, Cau Giay, Ba Dinh) from 6/2001 to 6/2002.

4. “How to care for PLWHA at home”

Organisation of two training courses for families of PLWHA in Thai Nguyen City from May to July 2002. Funded by FHI.

Supporting Centre for HIV/AIDS/STI Control (SUCECON)

Representative office:

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Introduction: SUCECON is a Vietnamese non-governmental organisation licensed by the Hanoi Department for Science Technology and Environment established in 1995 by HIV and STI professionals.

In close collaboration and funded by international organisations it conducts qualitative research on risk behaviours, provides training in STI and HIV management, implements peer education activities in close partnership with provinces, districts and communes and develops IEC and training material. Programs incorporate international best practices and follow a participatory approach.

Current activities and target groups:

- Hanoi (Cau Giay district),: peer education for youth out of school and parents. Adolescents between 13 and 16 years of age are invited to participate in workshops on sexually transmitted infections and HIV conducted at the communal health centre. Training and supervision of youth peer educators. Development of guidelines, training and IEC materials, including a song that is broadcasted. Public competitions for young people on STI/HIV.
- Hanoi and Ho Chi Minh City: health education for university students. Development of a booklet for students based on the initial rapid assessment of knowledge and behaviour among students. Development of a 15 minute documentary video on HIV/AIDS and PLWHA

Time frame: 2000-2002

Funding organisations: UNFPA, Care International, EC, Philip Morris

Outlook: project proposals have been developed to continue Lao-Vietnam cross-border interventions and to establish community based care and support for PLWHA in one district in Hanoi.

Vietnamese Community Mobilisation Centre for HIV/AIDS Control (VICOMC)

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Introduction: The Vietnamese Community Mobilization Centre for HIV/AIDS control is a National, Non-Government Organisation (NGO) founded by the Vietnamese Union of Science and Technology (VUSTA). It focuses on HIV prevention and care, in particular training and research.

Studies so far are mainly concerned with poor, marginalized and vulnerable people, who are at risk for HIV infection, including commercial sex workers, drug users, street children and PLWHA. Research and teaching are participatory in approach. Up to 2002, among other activities, workshops on counselling and care, planning for HIV prevention, care for people with HIV/AIDS and training courses on peer education and harm reduction have been conducted.

Current Activities:

1. Sustaining peer education (Hanoi, Ba Dinh), Haiphong (Cat Bi, Gia Vien), Thai Nguyen (Thai Nguyen town), Nghe An (Vinh), Lang Son (Lang Son)
2. Assessment of stigma and discrimination in collaboration with the Deakin University (Australia) (Hanoi)
3. Prevention of HIV and relapse to drug use through a post drug treatment club (Hanoi: Cau Giay, Tay Ho, Ba Dinh, Hoan Kiem, Dong Da)
4. Peer education and care for women with HIV/AIDS in a rehabilitation centre (Ha Tay: Ba Vi)
5. HIV prevention and poverty alleviation, a comprehensive approach. Bac Giang (Yen The)

Time frame: projects 1-4: August 2002 until second half 2003, project 5: until 9/2003

Funding organisations: UNDP, UNDCP, Deakin University, DACP, CIDA, ICCO

Outlook: Further activities will concentrate on implementing comprehensive approaches to HIV prevention through poverty alleviation, addressing gender and equality issues. In collaboration with international GO and NGO, UN agencies and local organisations VICOMC plans to extend its training, research and programming activities with focus on anti-discrimination of PLWHA, provision of support and care for PLWHA, harm reduction and behaviour change communication strategies.

International Organisations

Abt Associates Inc.

Representative Office:

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Introduction : Abt Associates is one of the largest for-profit government and business research and consulting firms in the world. Its work encompasses research and evaluation, strategy, planning, and policy, consulting, implementation, and technical assistance. The company serves an exceptionally diverse group of global clients in the public and private sectors. As our work illustrates, we apply our extensive problem-solving expertise across a vast range of markets and sectors. Abt Associates' staff endeavours to improve the quality of life and economic well being of peoples worldwide. The company applies its experience and problem-solving skills to wide-ranging social challenges in developing nations, including improving agricultural production in underfed nations, promoting AIDS treatment programs in Africa, and advancing childhood immunization in Asia.

Locations in 2002: Lang Son (8 communes in Lang Son Town, 3 comm. In Cao Loc District, 1 Van Lang, 1 in Loc Binh) (cooperation across the Chinese border)

Target Groups: IDU, local authorities, pharmacists

Activities: The harm reduction project, in Lang Son, funded by Ford Foundation, is implemented by the Provincial AIDS Standing Bureau and monitored by the National AIDS Standing Bureau. Abt Associates is responsible for the research on the peer based comprehensive intervention for injecting drug users. The study examines the effectiveness of the distribution of vouchers that can be exchanged in pharmacies (good for medical check up or harm reduction utilities); collection of used syringes by peer educators at the shooting galleries.

Research on effectiveness; advocacy for interventions targeted at drug users; awareness raising among the general population.

Funding period: 9/2001 – 7/2005

Funding agency: Ford Foundation for the intervention, NIDA (research only)

Implementing Agency: Provincial AIDS Standing Bureau Lang Son, National AIDS Standing Bureau

Outlook: Second phase planned until 2004, expansion of activities to Ha Giang in 2003.

Academy for Educational Development (AED)

Representative Office:

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Introduction :

The USDOL awarded the Academy for Educational Development (AED) a four-year cooperative agreement grant to implement the HIV/AIDS Global Workplace (SMARTWork) program in six countries (Vietnam, Ukraine, Haiti, Dominican Republic, Nigeria and Zimbabwe). In Vietnam, the memo was signed between MOLISA and USDOL to implement the HIV/AIDS program in the workplace. SMARTWork Vietnam will provide assistance to establish effective HIV/AIDS prevention education, support programs, and appropriate policies, for the workplace that are sustainable, achievable and based upon existing government, labour and commercial policies and practices. The results of research into the HIV/AIDS prevention education needs of individual companies across the three main corporate structure types in Vietnam (SOEs, JVs, and 100% Foreign Invested Enterprises), the program will prepare profiles and models for individual enterprise interventions, mobilize a national effort by government, unions and employers to expand HIV/AIDS prevention programs and education stigma and discrimination in the workplace, provide materials to assist in the creation of workplace programs and policies and contribute to behaviour change, train cadres and employees of the tripartite agencies in the implementation of workplace programs and the develop labour policy at a national level for the implementation of workplace programs and the promotion of rights for workers infected and affected by HIV/AIDS.

Locations in 2002 and later: Thai Binh, Haiphong, Quang Nam, Baria-Vung Tau, Dong Nai, Ho Chi Minh City

Target Groups: Employees and management of at least 20 enterprises across six project locations.

Activities: The conduct of research, provincial and metropolitan workshops for companies, training and capacity building of tripartite agency staff, development of IEC materials, establishment of national policy dialogue on the legal issues surrounding HIV/AIDS prevention in the workplace and worker and management rights and responsibilities.

Funding period: September 2001-September 2005

Funding agency: International Labor Affairs Bureau, US Department of Labor

Counterparts: Ministry of Labour, Invalids and Social Affairs, Vietnam General Confederation of Labour, Vietnam Chamber of Commerce and Industry

Outlook: The formation of discrete training and policy groups within each of the tripartite agencies is anticipated within the implementation period of the project.

Australian Red Cross (ARC)

HIV/AIDS prevention program within the Vietnam Red Cross

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Introduction: Since the beginning of a number of partnerships with National Red Cross Societies in the early 1990's the Australian Red Cross (ARC) has been active in HIV prevention in Asia. In 1995 ARC and Vietnam Red Cross have started their joint activities in Vietnam.

Locations: Hanoi (Dong Dai District, Tu Liem, Gia Lam, Thanh Xuan), HCMC (District 1 & 2, Binh Chanh)

Target populations: Primary beneficiaries are vulnerable young people, street children, young people at risk for drugs or using them, women working in Karaoke bars and PLWHA. Secondary beneficiaries are VRC staff.

Activities: ARC has adopted a comprehensive peer education methodology using a life skills approach. This approach aims at transferring, among others, communication and decision making skills leading to young people's empowerment to make active choices.

Young people are trained as peer educators/youth facilitators to provide two-day community workshops on life skills and sexual health. A stepwise, supportive training model has been developed to train peer educators as well as provincial VRC staff. Over a series of training steps and supervised applied practice, trainees gradually deepen their skills and knowledge and increase their responsibility as peer educators. The community participatory workshops run by the peer educators are based on a manual that has been developed in Asia and adapted to local Vietnamese needs. Workshops often are conducted in collaboration with other groups that work with young people (e.g. child care protection centres, health centres).

More recently activities also include outreach work to reach a broader audience including PLWHA and their families and friends.

Period: end of June 2004

Funding agency: AusAID

British Columbia Center for Disease Control (BCCDC)

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Introduction: From 1998 to 2001 BCCDC has been involved with the Ho Chi Minh City STD/AIDS clinic and outreach program (the Café HY VONG project). The goal of this successful program was to develop local capacity to prevent HIV and to establish a high quality, user-friendly, free and confidential STI service combined with other HIV prevention services. Services included outreach work and peer education to reach those most at risk for HIV along with needle and condom distribution initiatives. In addition a series of training manuals for health care workers were developed and used for train-the trainer trainings.

Despite its high acceptance Café HY VONG had to be closed at the end of the funding period. The new project “Vietnam HIV/AIDS Community Clinics Network Project (HCCN) is under ministerial consideration.(2002)

Locations: HCMC (Districts 1, 3, 5, Tu Duc), An Giang (Long Xuyen, Chau Doc, Chau Phu), Kien Giang (Rach Gia, Kien Luong, Ha Tien, Phu Quoc), Can Tho (Can Tho City, Thot Not, Vinh Trinh)

Target populations: training and supervision for health care providers, lower literacy women and youth, people at risk for HIV/STI including drug users, CSW and street youth

Period: 2002 to 2006

Activities: Establishment of 12 STI/HIV clinics in 4 provinces, training of the health care providers in STI and clinic management, as well as HIV prevention. Implementation of mobile outreach clinics, peer education and outreach work for HIV prevention following an overall harm reduction approach. Risk reduction for street youth and capacity building for epidemiology at the HCMC Aids Standing Office.

Collaborating partners: National AIDS Standing Bureau, Provincial AIDS Standing Bureaus

Funding agency: Canadian International Development Agency (CIDA)

Executing Agency: The BC Centre for Disease Control (BCCDC) is British Columbia’s Centre for Excellence for the prevention, detection and control of communicable disease, and a provider of specialty health support and resource services. Five key integrated divisions within BCCDC provide the coordinated services essential to efficiently and effectively prevent and control communicable disease in the province. These are: epidemiology services, laboratory services, STD/AIDS control, tuberculosis control, BC hepatitis services.

CARE International in Vietnam (CARE in Vietnam)

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Introduction: CARE came to Vietnam in 1989 under the lead membership of CARE Australia. In 1991 a formal Country Agreement was signed between the Government of Vietnam and CARE International.

Major donors to CARE International projects in Vietnam include AusAID, Danida (Denmark), the European Union including ECHO, USAID, DFID (UK), Norad (Norway), United Nations and other multilateral agencies, corporate and private donors.

CARE in Vietnam has well-developed relations with the government, mass organisations and administrative authorities, including various provincial and district people's committees and mass organisations throughout Vietnam.

Since 1991 CARE in Viet Nam has conducted a range of innovative projects in areas such as HIV/AIDS awareness and prevention, IEC campaigns including social marketing and the use of mass media, partner capacity building, research to inform policy learning, workplace interventions and support of PLWA. CARE has formed strategic alliances with Government agencies and mass organisations at national, provincial, district and commune level.

CARE HIV/AIDS programmes in Viet Nam are guided by the goals of: reducing and limiting the spread and social and economic impact of HIV/AIDS, providing care and support for people living with and affected by HIV/AIDS.

Projects are designed and based on the following program principles: innovation and sustainability, strengthening individual and organisational capacities, emphasis on women and disadvantaged parts of the population.

Approaches: The integration of HIV/AIDS and sexual/reproductive health programs, an emphasis on training of trainers and training within outreach activities including peer education, the application of social marketing approaches and techniques to reinforce awareness campaigns and promote the practice of safer sex, a strong focus on behaviour change interventions, the development and support of family, community and peer support strategies and resources for people living with HIV/AIDS, rigorous programme evaluation of our activities and sharing of lessons learned.

Projects in 2002 and later:

1) **"HIV/AIDS prevention for seafarers and sexual partners"** is located in Kien Giang (Rach Town and Phu Quoc Island). The activities comprise provision of tailored IEC and condom distribution for seafarers and CSW. In addition capacity of NGO, community based organisation (CBO) and PVO will be strengthened through training. Further activities include advocacy and research. Funding is by WAF for January 2001 to March 2002 .

2) **"Promoting positive messages for men practising safer sex"** aims at changing behaviour through IEC activities, and condom distribution to male adults. Capacity of local partners will be strengthened through training and supervision. Further: advocacy and research activities. The project is located in An Giang, Soc Trang and Khanh Hoa and funded by AusAID for the period of November 2000-October 2002. Local partners are An Giang farmers assoc., Soc Trang Youth Union, Khanh Hoa Youth Union

3) **"Working on AIDS"** directs its activities at migrant workers in Lao Cai. Activities: IEC, condom distribution, strengthening of capacity of NGO, PVO, CBO, advocacy, training and research. Funding is for November 2001 to Nov 2002 by USAID.

4) “Confronting AIDS in the workplace” in Quang Ninh primarily works with migrant workers, in particular working in coal mines, and PLWHA. Apart from activities for HIV prevention like IEC, condom distribution and capacity building for different organisation, the project also focuses on treatment and care aspects for PLWHA and related research. Funding is provided by AusAID for November 2000 to October 2003

5) “Regional training for HIV/AIDS prevention and sexual health care” located in Kien Giang and Tay Ninh and funded by AusAID for 5/2000 to 4/2002, target adults through IEC activities and media campaigns. Training to build up capacity is provided for NGO, PVO, CBO.

Funding agencies : AusAID, USAID, CFC, WAF

Local partners: 1) Kien Giang PASB, Phu Quoc Preventive Medicine Department, 2) An Giang Farmers’ Assoc., Soc Trang and Khanh Hoa Youth Union, 3) Lao Provincial Health Department, PASB, 4) NASB, VCCI, Vietnam Coal Cooperation, Quang Ninh PASB, 5) Women’s and Youth Union of central Vietnam, Tay Ninh, Kien Giang

Outlook: While scaling up our HIV/AIDS projects, Care International is developing strategies to ensure greater involvement of PLWA in Vietnam, advocacy for policy learning on HIV/AIDS prevention and care as well as looking HIV/AIDS from the right perspectives.

Centre for AIDS Prevention Studies (CAPS), University of California, San Francisco and HCMC Provincial AIDS Committee “Anonymous HIV test site”

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Introduction : The centre was established to provide free and anonymous HIV testing for people in HCMC. Clients are counselled before and after the test and receive information on how to prevent transmission of HIV. The centre also provides training for HIV testing counsellors from other institutions in the city.

Locations in 2002: One testing centre located in Binh Thanh district, Ho Chi Minh city, Vietnam.

Target Groups: High-risk individuals and young people who may not be able to afford testing at other centres or may be afraid of a positive test being reported to others.

Activities:

- **Pre- and Post-test counselling** for HIV testing. Clients are referred for medical treatment or social services as needed. The counsellors use client-centred counselling to review risks for HIV and develop a risk-reduction plan with the client.
- **Training** of HIV counsellors from other medical centres in HCMC. About 20 new counsellors are trained every two months.
- **Experience Sharing Workshops:** are held every two months for HIV counsellors to meet, share information and continue to learn.
- **Data:** Collected on demographics, risk factors and HIV prevalence among the different risk groups..

Funding period: From April 2001 to April 2003. Most likely will be extended.

Funding agency: Ho Chi Minh City AIDS Committee, Vietnam and Centre for AIDS Prevention Studies, University of California, San Francisco, USA.

Outlook: Additional testing centres using the same model and staff training are planned in HCMC and other areas of Vietnam. Additional support services such as support groups for HIV positive clients or families/friends of infected individuals are planned.

Centres for Disease Control and Prevention (CDC)

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Introduction : The Centers for Disease Control and Prevention is the U.S. agency implementing the Global AIDS Program, that government's commitment to supporting resource-poor countries in HIV prevention through funding and technical assistance is 3 broad program areas: primary HIV prevention, HIV/AIDS treatment and care, and public health infrastructure. In 2001 Vietnam became the 24th partner nation in CDC's Global AIDS Program. Following a 2-year collaboration assessing needs, in October 2001 CDC and Vietnam Ministry of Health signed a 5-year, cooperative agreement supporting expanded technical assistance and \$10 million in direct funding. The MOH program is coordinated through the LIFE/GAP Office, and technical support provided through the CDC/GAP Office in Hanoi.

The agreement supports strengthening an integrated HIV program for 40 of Vietnam's 61 provinces/urban areas in the following areas: (1) establishing high quality voluntary counselling and testing services aimed at high-risk persons; (2) establishing and/or expanding practical, early intervention programs for HIV treatment and care; (3) strengthening and expanding peer education programs for high risk persons; (4) expanding and supporting HIV sentinel surveillance; (5) initiating STD surveillance aimed at HIV prevention, including support for STD clinics in HIV testing and providing diagnosis and treatment for persons with high HIV risk; (6) support for integrating TB and HIV programs, including TB testing for HIV-infected persons; (7) strengthening laboratory capacity for HIV/AIDS prevention and care; and (8) strengthening prevention for maternal to child transmission. The operational plan involves a time-phased approach in which comprehensive programs are established and integrated with existing programs in approximately 10 new provinces each year, until all 40 provinces have established integrated HIV prevention programs.

Additional program elements include training for Vietnamese health care professionals in HIV care and treatment, public health practice, and HIV prevention; and in establishing or strengthening systems to monitor and evaluate the national HIV prevention program.

Locations: 40 LIFE/GAP program provinces are:

Phase 1: HCMC, Quang Ninh, Haiphong, Cao Bang, Kien Giang, (5)

Phase 2: An Giang, Hanoi, Lang Son, Ba Ria Vung Tau, Khanh Hoa (5)

Phase 3: Hai Duong, Dong Thap, Thanh Hoa, Nghe An, Can Tho (5)

Phase 4 and beyond (not in any specific order) : Can Tho, Dong Nai, Danang, Thai Nguyen, Thai Binh, Bac Ninh, Soc Trang, Bac Giang, Nam Dinh, Tay Ninh, Tien Giang, Vung Long, Tra Vinh, Lam Dong, Binh Duong, Binh Thuan, Binh Dinh, Long An, Ha Tay, Hoa Binh, Ben Tre, Gia Lai, Son La, Dak Lak, Thua Thien-Hue, Quang Nam (25)

Although there will be 40 over 5 years, since the attempt here is an integrated project, plan is to go into a few provinces each year with several programs. To start, each province will be getting VCT, support for HIV care and treatment for OIs, and usually new or expanded support and training for peer education for IDU and/or CSW.

The activities are envisioned as helping province (e.g., VCT at largest city, available to all free of charge. OI support at provincial hospital, intended to trickle down to district level through training of trainers) as opposed to particular districts. The peer education programs are typically taking place in the districts with most at-risk populations that have not otherwise been met. Programmatic activities implemented or underway in all 15 provinces of phase 1-3 by the end of 2003; currently (end of 2002)¹:

- *Hai Phong* (districts: Ngo Quyen, Hong Bang, Le Chan) (rapid situational assessment (RSA), voluntary counselling and testing (VCT) clinic, peer education (PE) program, expanded HIV care activities, STD sentinel surveillance).
- *Quang Ninh* (Halong city, Halong district) (VCT clinic, PE program, expanded HIV care activities).
- *Cao Bang* (RSA, VCT clinic, PE program)
- *Lang Son* (training for VCT, preparations for RSA, VCT clinic, PE program, expanded HIV care activities)
- *Hanoi* (expanded HIV care activities [NICRTM])
- *HCMC* (preparations for RSA, VCT, PE program, expanded HIV care activities)
- *Kien Giang* (preparations for RSA, VCT, PE, expanded HIV care activities)

Target Groups: Persons at high risk for contracting HIV/AIDS, including: injection drug users and their sex partners, commercial sex workers and their partners; persons living with HIV/AIDS and their sex partners; and certain other vulnerable groups depending on the provincial situation (e.g., sailors/seafarers, long distance truckers, miners, factory workers, migrants, etc.).

Activities:

- (1) through **rapid situational assessments**, assist provinces in identifying needs, existing strengths, and likely barriers that will be encountered in conducting comprehensive, integrated HIV prevention services;
 - assessment teams established, model protocol developed and piloted
- (2) through training, staffing, and procedure development, establish high quality **voluntary counselling and testing services** aimed at high-risk persons;
 - VCT curricula based on CDC's client-centred HIV prevention counselling adapted for Vietnam, piloted in 4 provinces, and cleared through steering committee (participant manual, training manual, training of trainer (TOT) manual). VCT draft procedure manuals adopted and piloted. VCT sites opened in 4 provinces.
- (3) through training, staffing, and procedure development, establish and/or expand feasible **early intervention programs for HIV treatment and care** at provincial-level facilities, with emphasis on integrating into commune-level programs;
 - Operations research project completed on OI diagnosis and management in northern Vietnam; 2 new outpatient management pilot programs under development (anticipated start in 3/2003); national training for provincial infectious disease doctors, in collaboration with Harvard/CDC physicians, planned for 3/2003. Support for National Guidelines for diagnosis and Treatment of Opportunistic infection (anticipated start process 2/1003).
- (4) through training, staffing, and procedure development, establish (or strengthen and expand existing) **peer education programs for high risk persons**, such as injection drug users and commercial sex workers;
 - community outreach curricula based on WPRO Harm Reduction models adapted for Vietnam, piloted, and cleared through steering committee (participant manual, training manual). Draft procedure manual developed. Peer education programs initiated /expanded in 2 provinces.
- (5) through funding and technical assistance, support **HIV sentinel surveillance** in 10 provinces (represents expansion);
- (6) through funding and technical assistance, initiate **STD surveillance aimed at HIV prevention** (through linking STD surveillance to existing HIV sentinel surveillance), and provide

¹ Maps and excel tables in the annex only depict implemented activities as of end of 2002

support for STD clinics in HIV testing, counselling, diagnosis and treatment for persons with high HIV risk;

- STD surveillance linked to HIV sentinel surveillance protocol developed and piloted in Hai Phong (2002), expansion to 4 additional provinces 2003. PCR laboratory quality assessment underway.
- (7) through funding and technical assistance, support **integration of existing TB and HIV programs** through cooperative operational research projects, including enhancing quality of TB diagnosis and treatment for HIV-infected persons;
- protocol under development, with assistance WPRO TB representative.
- (8) through training, staffing, and procedure development, strengthen **prevention for maternal to child transmission of HIV**.
- Laboratory assessments to be initiated 2003.
- (9) Through training, staffing, and procedure development, strengthen **prevention for maternal to child transmission of HIV**.
- MOH and international working group established, and pilot protocols for comprehensive program in 2 provinces under draft (anticipated start 2003).

Funding period: October 2001 through September 2006

Funding agency: U.S. Centers for Disease Control and Prevention (CDC)

Counterparts: Program Director: Vice Minister of Health, HIV/AIDS (Professor Pham Manh Hung)

Program Coordinator: Director of LIFE/GAP Office (Dr. Luu Minh Chau, Deputy Director NASB)

Outlook: Despite sluggish start up related to year 1, activities currently progressing at good pace.

Coopération Internationale pour le Développement et la Solidarité (CIDSE)

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Introduction: The Coopération Internationale pour le Développement et la Solidarité, CIDSE, is an association of 18 different Catholic Development Agencies. The organisation has been working in Vietnam since 1978 with its representative office in Hanoi since 1988.

Locations in 2002 and later: Thai Nguyen (3 communes in Thai Nguyen Town), Dong Hai District (2 wards).

Target Groups: Injecting drug users, PLWHA and their relatives, students, factory workers, jobless adolescents (out-of-school youth), street children, health staff, key officers.

Activities: CIDSE is following a community based HIV prevention and drug use prevention approach. Drug users are targeted by trained peer educators, who counsel, provide IEC material and recommend detoxification. However, clean needles and syringes as well as condoms are provided for harm reduction.

To improve HIV prevention at schools and colleges, teachers are trained in new didactical methods to teach about HIV and related issues and are coached afterwards. Prevention sessions are targeted at young school students as well as at out-of-school children (street children) and youth. Training is also provided for health staff and awareness raising sessions are held for community members in order to encourage the formation of community networks that facilitate the access to social services, in particular to counselling, and health care for drug users and PLWHA. In addition, income generation activities are part of the project's activities.

Funding period: 2000- 2003

Implementing Agency: CIDSE + local partners

Counterparts: Provincial Health Centre, Thai Nguyen People's Committee, Thai Nguyen Provincial AIDS Standing Bureau

DKT International

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Introduction: DKT is an International NGO based in Washington, DC, USA. Since 1990 it has been running family planning programs and contraceptive social marketing world-wide. Work in Vietnam started in 1993 and has now been expanded nationwide.

Location: targeted activities in Quang Ninh, Haiphong, Quang Tri, Binh Dinh, Tay Ninh, Can Tho, Dong Nai, Khanh Hoa, Ha Tay, Lai Chau, An Giang, KienGiang and Dong Thap (to be expanded under the “100% condom program”)

Activities: By using social marketing approach, condoms are sold through traditional and non-traditional outlets like hotels, bars, karaoke shops, barbers etc. Condom selling activities are accompanied by mass-media advertising campaigns nationwide, eg. on posters, in newspapers or on TV; and communication campaigns for condom promotion targeting sex workers and their clients, especially, in entertainment places in project provinces.

Specific action on World AIDS Day.

Now testing the acceptance of the female condom in Vietnam.

Partner organizations: National AIDS Standing Bureau, AIDS division (MOH), National Committee for Population, family and Children, Provincial AIDS Standing Bureaus/AIDS divisions, FHI, WHO, Care , UNAIDS and local NGOs

Funding agencies: DKT International, USAID, KFW, World Bank loan, DFID, ADB, WHO

Family Health International

FHI Country Office:

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Introduction: Family Health International's (FHI) HIV/AIDS work in Vietnam began with a joint USAID and FHI team visit to Vietnam in October 1997 at the request of the Government of the Socialist Republic of Vietnam to assess the state of the HIV/AIDS epidemic, the response of the Government and donors, and measures USAID might take to provide limited assistance that would complement prevention strategies already underway.

On May 11, 1998 a Memorandum of Understanding (MOU) was signed between FHI and the National AIDS Committee for a short Phase I. Activities in Phase I focused primarily on assessments of high-risk behaviour among injecting drug users (IDUs) and sex workers (SW), of availability and quality of STI Care, and of private sector involvement in HIV/AIDS prevention work; support for condom social marketing in six provinces; and capacity-building through study tours and participation in international conferences on HIV/AIDS.

The MOU for Phase II was signed between the National AIDS Committee and Family Health International on December 6, 1999. It covered the period from December 1999 until September 30, 2002. The three-year MOU budget of \$2,721,900 dollars (US) was supported by funds from USAID under the IMPACT project, providing for the direct release of funds to Vietnamese partners, including the National AIDS Standing Bureau at the central level and the provincial AIDS Standing Bureaus and provincial health services in selected provinces. Phase II three main strategies emphasized (1) HIV/AIDS risk-reduction interventions targeting vulnerable groups (IDUs, SWs, men); (2) capacity building at the national and provincial level for HIV/AIDS program design and planning and in specific technical areas (Behavioural Change Communication (BCC), Behavioural Surveillance Surveys (BSS), Sexually Transmitted Infection (STI) skills training for pharmacists and private physicians, Program Monitoring, Voluntary Counselling and Testing (VCT), etc.); and (3) the promotion of the public health approach to HIV/AIDS prevention and care in Vietnam and the national level in the four focal provinces of Haiphong, Can Tho, Binh Dinh and Quang Ninh (e.g., through mass media and interpersonal communication BCC approaches, harm reduction activities, and work in the government rehabilitation centres for IDUs and SWS).

Phase III of the FHI/IMPACT project in Vietnam will begin in October 2003 for a three-year period. A new memorandum of understanding (MOU) is currently being developed between the Ministry of Health and FHI for Phase III. FHI will also use USAID's new five-year HIV/AIDS strategic framework for Vietnam to guide its program activities.

Locations in 2002: In 2002 FHI-supported work in 11 provinces. The 11 provinces are: Can Tho, Binh Dinh, Haiphong, Quang Ninh, Hanoi, Dong Nai, Thai Binh, HCMC, Da Nang, Quang Tri, Tay Ninh. Some of this work is done through the NASB (BSS in Hanoi, Haiphong, HCMC, Can Tho and Da Nang), DKT International (Condom Social Marketing for HIV/AIDS Prevention in Can Tho, Binh Dinh, Haiphong, Quang Ninh, Quang Tri and Tay Ninh) and through direct collaboration between FHI and the PHSS/PASBs in seven provinces.

Mass media behavioural change interventions reach province-wide in Quang Ninh, Haiphong, Binh Dinh and Can Tho provinces; the IDU drop-in centre and IDU PE outreach in Haiphong reaches the four urban Haiphong districts; the IDU drop-in Centre and IDU PE outreach in Quang Ninh province reaches the 16 communes in District of Cam Pha, the Women's health club for sex workers in Can Tho reaches mostly Can Tho city; The Condom Tunnel intervention covers Thot Not District of Can Tho; The STI skills training reaches pharmacists and private physicians from the main city of each province and a couple of neighbouring districts in the provinces Binh Dinh, Can Tho, Haiphong and Quang Ninh). Other peer education in workplace, by barbers, motorbike taxi drivers, shoeshine

boys, and condom promotion in non-traditional outlets (e.g., bars, Karaoke, massage parlours, hotels, truck stops, etc are spread out in various districts and communes in the intervention provinces). FHI supports DKT international for national advertising and for province-wide advertising for condoms in the six provinces where DKT receives FHI support. The BSS surveys are conducted for various target populations (IDUs, sex workers, mobile male populations) in a random sample of areas in the five cities/provinces included in the BSS.

Target Groups: Primary target groups include IDUs, sex workers, clients of sex workers, men in the general population, mobile men and mobile youth, and pharmacists and private physicians (for SKI skills training) and national and provincial health program and HIV/AIDS workers (for technical, programmatic and management capacity-building)

Activities: Innovative activities include two IDU-drop-in centres, harm reduction and needle exchange programs and peer-driven IDU outreach activities in the community, a women's health club and community outreach for street-based and establishment-based sex workers, STI skills training for pharmacists and private physicians, peer education in the workplace (8 factories) and PE by barbers, shoeshine boys, and motor-bike taxi drives on the streets of four provinces, two rounds of behavioural surveillance surveys (BSS), Behavioural Change Communication (BCC) mass media campaigns using TV, radio and newspaper/print media, men's interventions, journalist training on HIV/AIDS reporting, capacity-building, a new model Voluntary Counselling and Testing Centre (VCT) being established at Bach Mai Hospital in Hanoi, and care and support for PLWHAs and efforts to destigmatize PLWHAs, sex workers, and drug users, and condom social marketing for HIV/AIDS prevention in non-traditional outlets in six provinces (e.g., bars, karaoke, hotels, massage parlours, truck stops).

Funding period: Three-year funding cycle of FHI/IMPACT Phase II ends on September 30, 2002. Next funding cycle begins on October 1, 2002 (\$2.7 million dollars allocated over the past three years).

Funding agency: United States Agency for International Development is the primary donor, with limited additional funding coming from FHI corporate funds.

Counterparts: National AIDS Standing Bureau/Ministry of Health, Provincial Health Services and Provincial AIDS Standing Bureaus in Selected provinces, DKT International, other FHI/IMPACT partners (e.g., PATH International), and some limited work with national NGOs (e.g., SHAPC).

Outlook: In the next three years, FHI/Vietnam will scale-up current successful interventions for wider impact and will expand to conduct multiple interventions in HCMC, which will include the introduction of Male Sexual Health and MSM interventions for HIV/AIDS prevention and care, and more work and community-based care and support services for PLWHAs and IDUs.

The Ford Foundation

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Introduction : The Ford Foundation is an international donor organization. The Foundation's Office in Hanoi makes grants in Vietnam and Thailand. Most of the Foundation's HIV/AIDS grants fit within its *Innovations in Reproductive and Sexual Health and Rights Initiative* within the Sexuality and Reproductive Health grant making program. The long-term goal of this Initiative is to improve the sexual and reproductive health and rights of under-served and vulnerable groups including poor women, adolescents, migrants and people living with HIV/AIDS. Ford Foundation began funding activities in Vietnam in this field in 1999 and is currently supporting a number of HIV/AIDS prevention and care programs.

With grants to national, provincial and district levels, the Foundation is supporting harm reduction (needle exchange and condom distribution), peer education and HIV/AIDS prevention and care programs for injecting drug users, sex workers and men (including men who have sex with men). In addition, HIV/AIDS prevention and care is integrated into Foundation-supported sexual and reproductive health programs for the homeless and for youth nationwide through an on-line counselling program on healthy sexuality.

Locations in 2002 and later: Khanh Hoa (Provincial AIDS Standing Bureau), Lang Son (*see under* Abt and Lang Son AIDS Standing Bureau), Ho Chi Minh City, Ha Giang (from 2003), Hanoi, Thai Nguyen, National Level

Target Groups of funded interventions: Youth, labour/mobile workers, injecting drug users, sex workers, urban poor, media, men (including men who have sex with men)

Activities: Funding of programs for HIV prevention using the following approaches: needle exchange/harm reduction/peer education/condom distribution for injecting drug users. Harm reduction/peer education/condom distribution for female sex workers and for men (including MSM). Youth peer education and condom distribution; on-line counselling on internet. Care and support for positive people and Greater Involvement of People with AIDS (GIPA). Research on stigma and discrimination. Capacity building among Vietnamese journalists to accurately understand and report on HIV/AIDS

Implementing Agencies: Provincial and district level health services, provincial AIDS standing bureaus, 05/06 centres, Vietnamese NGOs and international NGOs.

Counterparts: The Foundation supports international agencies and consultants to provide technical assistance to some Vietnamese organizations when Vietnamese implementing agencies request.

Outlook: Foundation support is likely to continue to focus on HIV/AIDS prevention and care work in the future. Current Foundation areas of interest include efforts to promote empowerment, participation and leadership of people living with HIV/AIDS in policies and programs, sexual health and rights, especially for women and young people, and a broader healthy sexuality approach for marginalized groups such as injecting drug users, sex workers and men who have sex with men.

Gesellschaft für Technische Zusammenarbeit (GTZ)

German Technical Cooperation

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Introduction : GTZ, the German implementing agency of bilateral technical support between Germany and Vietnam, has been working in Vietnam since 1995. Originally the project was part of a GTZ multi-country AIDS prevention and Control Programme. Since 2001 it has become a component of the bi-lateral programme “Promotion of Reproductive Health”.

The programme’s goal is to contain the spread of HIV/AIDS and other STI and to minimise the social and economic impact of the HIV epidemic. The programme supports the promotion of safe behaviour regarding HIV/AIDS transmission, aims to improve diagnostic procedures and the management of STI/HIV and provides support for local capacity building.

Locations in 2002: Lao Cai (Bao Thang, Cam Duong, Lao Cai Town), Hanoi (Dong Da, Hai Ba Trung, Tay Ho, Ba Dinh), Ninh Binh (Kim Son, Ninh Binh Town), Quang Ninh (Halong City), Binh Dinh (Qui Nhon, Phu Cat, Phu My, Hoai Nhon)

Target Groups: Depending on the province: Injecting drug users, sex workers, young people, fishermen and their families, PLWHA, and health staff

Activities: Peer education programmes for IDU and CSW, in some locations also harm reduction related activities. Establishment of outreach activities for young people, in particular approaching them through youth cafés. Development of appropriate IEC material. Income generation activities for peer educators and PLWHA, support for self-support groups. Setting up a counselling network.

Improvement of STI – services: training on STI management, quality of care and general management skills for provincial trainers (training of trainers), private practitioners and laboratory staff.

Development of a set of provincial guidelines on implementation of specific interventions at Provincial level

Funding period: 2001-2004

Funding agency: Ministry of Development, Germany

Counterparts: National AIDS Standing Bureau, Provincial AIDS Standing Bureaux

Japan International Cooperation Agency (JICA)

Representative Office:

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Introduction : JICA is an implementing agency of Japan's bilateral ODA, responsible for a major portion of technical cooperation and for conducting studies and expediting the implementation of Grant Aid projects. Following the decision of the Government of Japan to resume ODA in Vietnam, JICA started its activities in 1991 by posting Japanese experts and receiving participants from Vietnam for training in Japan.

In 1995, based on the agreement between the two countries, a JICA office was set up in Vietnam. Since then, JICA's cooperation with Vietnam has been expanding in terms of quality and quantity. JICA's activities have been diversified and extended to include the following five propriety areas of Japan's ODA for Vietnam, which were agreed upon between the governments of Vietnam and Japan:

- Human Resource development and Institution Building, especially for transition to market oriented economy
- Economic infrastructure development, especially in the power and transport sector
- Agricultural development, especially Agricultural Infrastructure Building and Agricultural Technology Transfer
- Education and Health
- Environment Protection (Forestry, Urban Development, Industrial Pollution Prevention)

The project of Prevention and Control of HIV/AIDS transmission in Vietnam

Scheme : Grant Aid (FY2000)

Objectives: The projects aims to 1.) maintain the central surveillance system and epidemiological survey (provide ELISA test systems to upgrade HIV testing functions) 2) to strengthen the safety of blood transfusions and blood products by providing equipment to hospitals 3) to raise the level of public awareness on AIDS prevention issues and promote behavioural changes, 4) to procure condoms in order to strengthen condom use, promotion and distribution. The project will be implemented in 10 provinces in the South of Vietnam where the HIV/AIDS situation is most critical in the country and 3 medical institutions in Hanoi.

Provided equipment includes laboratory equipment including test systems, office equipment and cars

Location: Mekong River Delta (An Giang, Binh Duong, Ba Ria Vung Tau, Can Tho, Dong Nai, Kien Giang, Lam Dong, Long An, Tien Giang, HCMC)

Input: 3,820,000 Yen

Country focussed Training Courses in HIV/AIDS Administration (FY 2001), HIV/AIDS Prevention (FY2002)

Target groups: HIV/AIDS administrators in agencies concerned (Ministry of Health, others in local provinces)

Activities: study tour to Japan to learn about HIV/AIDS approaches (countermeasures against HIV infection, sex education in schools, technology of virus detection, AIDS surveillance and data analysis, diagnostic testing methods)

Observation of research centres hospitals concerning HIV/AIDS

Funding period: FY 2001- 2003

Johns Hopkins University

Bloomberg School of Public Health

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Introduction: The Johns Hopkins University Bloomberg School of Public Health is one of the foremost academic institutions for public health research and teaching in the US, conducting both domestic and international research in locations world-wide. Johns Hopkins researchers have contributed greatly to the scientific literature on HIV epidemiology and behavioural change interventions for HIV prevention. The school is well-known for its research with Injecting Drug Users (IDUs) in the city of Baltimore, Maryland, USA as well as abroad, testing a wide variety of HIV prevention methodologies, including syringe exchange and social network interventions.

Locations in 2002: Bac Ninh (3 districts in Bac Ninh province: Bac Ninh town, Tu Son, Gia Binh)

Target Groups: Injecting Drug Users (IDUs) and their sexual partners

Activities: This project is currently in the formative phase of a randomised controlled trial of a peer educator network-oriented intervention for injecting drug users (IDUs) and their sexual partners. Starting in 2003, the study will randomise index participants to deliver a multi-session network-oriented peer-led intervention or an attention control condition. Evaluation will compare sexual and drug behavioural risks and HIV VCT (Voluntary Counselling and Testing) uptake among the index IDUs who receive the intervention and their network members to index IDUs who received attention controlled sessions and their network members.

Funding Period: 10/2002 – 10/2003 for formative phase, extension to 2005 for intervention phase

Funding Agency: National Institute of Mental Health (NIMH)

Counterparts: National AIDS Standing Bureau, Provincial AIDS Standing Bureau of Bac Ninh

Outlook: Intervention phase planned until 2005

Kreditanstalt für Wiederaufbau (KfW)

Representative Office:

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Introduction : Under the Financial Cooperation between the Federal Republic of Germany and developing countries KfW, on behalf of the German government, finances investments and project-related consultancy services to expand social, economic and industrial infrastructure and to protect the environment and natural resources. KfW appraises the eligibility of projects for financing according to development-policy criteria, assists the partner countries in implementing them, and evaluates their success after they are completed.

During the German-Vietnamese Inter-Governmental negotiations in 1999 financial assistance to the Sector Programme Health was proposed by KfW in addition to the already granted 7 mill €. The new grant of 6.5 million € to HIV/AIDS prevention will be executed in close cooperation with the GTZ HIV/AIDS prevention component of the sector health programme.

Locations: Nghe An, Ha Tinh, Quang Binh, Ha Nam, Ha Tay, Nam Dinh, Thai Binh, Khanh Hoa, Ninh Binh, Binh Dinh, Hanoi, Quang Ninh, Lao Cai, Binh Thuan, Dac Lac

Target Groups: Public health system, CSW and their clients, general population

Activities: Nationwide condom supply and distribution via private sector social condom marketing (by DKT International) through the existing commercial network, pharmacies, traditional and non-traditional outlets, and NGOs. Procurement of condoms will be done through NASB.

Condom supply for free-of-charge distribution through NASB and the public health system.

Purchase and distribution of medical equipment, namely syringes, needles and needle-disposure equipment.

Supply of HIV/AIDS diagnostic equipment (test kits and laboratory equipment) for strengthening the surveillance system in the project provinces in cooperation with NIHE, Pasteur Institute Nha Trang and Tay Nguyen Institute for Hygiene and Epidemiology.

Supply of medical equipment and consumables for diagnosis and treatment of STI.

Reprint or reproduction of reference and IEC material including audio-visual and print media for health personnel, peer educators, and target groups at risk for HIV for NASB and partners (GTZ, NIDV).

Provision of communication equipment (computers, audio-visual equipment, photocopiers etc.) for NASB and partners at provincial level.

Training of health personnel apart from user training will be the responsibility of NASB.

Funding period: 3 years from end of 2002

Funding agency: KfW

Counterparts: National AIDS Standing Bureau, National Institute of Hygiene and Epidemiology (NIHE), National Institute for Dermatology and Venereology (NIDV), PACs, DKT International, DFID funded programme

Marie Stopes International in Vietnam

Representative Office:

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Introduction: Marie Stopes International is a UK based registered charity established in 1921 in UK by Dr. Marie Stopes, a pioneer woman in the field of family planning. She opened the first birth control clinic “Marie Stopes House” in London in 1921 and it still serves people now.

Since the first establishment of the overseas programme in India in 1976, Marie Stopes International has been expanding its operations to 40 countries, in particular to developing countries.

Marie Stopes International started its involvement in Vietnam in 1990 and has been able to set up a chain of 7 specialised health centres throughout Vietnam in conjunction with local project partners. These centres provide a wide range of family planning and essential reproductive health services to the population in the community where they are located. Services are provided at the static canters and through a mobile team attached to each centre that provides services to the poor people in hard to reach rural areas.

Relating to HIV/AIDS, Marie Stopes International in Vietnam has been providing the following services: Information/education/communication on safe sex and HIV/AIDS at the static centre and on outreach (adolescent reproductive health centres in Hanoi and Hue), promotion of condom use, provision of STI screening and treatment services, provision of voluntary surgical contraception service to HIV positive clients

Locations in 2002: Focus on HIV education activities and STIs service provision (through Marie Stopes Vietnam existing centres and outreach activities):

Location: Dong Da and Cau Giay districts of Hanoi.

Ho Chi Minh City: Thu Duc district and district 6

Possible : Nghe An (5 districts of World Bank project), Ha Tinh: (5 districts of World Bank project)

Target Groups: Vulnerable groups: bar and karaoke based sex workers (Hanoi) ; sex workers at rehabilitation centres (Ho Chi Minh City)

Approach: reaching out for the target groups through the existing network of relevant authorities and HIV educators (peer educators).

Involve community leaders in the IEC programme to facilitate the activities at the project level.

Integrating HIV voluntary counselling and testing into the RH program to minimise embarrassment for vulnerable groups when accessing the services.

Funding period:

Hanoi: part of the Adolescent reproductive health project is funded by EC/UNFPA. Project to expire by the end of 2002. Possible second phase.

HCMC: part of the project funded by the Community Fund (former Charities Board of National Lottery of UK). Project funding expires at the end of 2003.

Funding period: Hanoi: EC/UNFPA, HCMC: Community Fund

Counterparts: Hanoi: Hanoi Youth Union, HCMC: Maternal and Child Health Care/Family planning Centre of HCMC

Outlook: Strategic planning for HIV activities undertaken in April 2002. Main direction/project ideas: integration of HIV VCT into existing operations/centres, IEC activities on STIs and HIV accompanied by support clinical services targeted at vulnerable groups - at the static centres and in the field, condom social marketing.

Macfarlane Burnet Institute for Medical Research and Public Health - The Centre for Harm Reduction

Representative Office

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Introduction: Through its research into the prevention of HIV/AIDS among people who inject drugs, in Australia and Asia, the Epidemiology and Social Research Unit of the Macfarlane Burnet Centre (MBC) has increasingly become involved in the development of programs to prevent the harms associated with illicit drug use. The Institute has recently changed its name from MacFarlane Burnet Centre for Medical Research to Macfarlane Burnet Institute for Medical Research and Public Health (The Burnet Institute). A fundamental activity over the past decade has been the support of programs for prevention of AIDS among drug users in Asia, which has culminated in the formation of the Asian Harm Reduction Network, initially based at MBC and now in Chiang Mai, Thailand.

The Centre for Harm Reduction (CHR) grew out of the Epidemiology and Social Research Unit (ESRU) to become a separate unit of MBC in early 2001.

The Burnet Institute is committed to fostering research that benefits human health, by *Linking Health Research with Health Action*. We integrate basic and applied laboratory research in virology and other communicable diseases with field research and the design, implementation and evaluation of public health programs.

We assist socially marginalized groups by tackling tough problems: HIV/AIDS, sexually transmitted infections, hepatitis, and illicit drug use. Our laboratory research is motivated and informed by the direct experience of its researchers on the streets and byways of developed and developing nations.

Locations in 2002: Bac Giang (1 commune in Bac Giang town), Thanh Hoa (4 communes), Ho chi Minh City (planned)

Funding period: 1 year

Target Groups: Drug users, PLWHA and their families, provincial and district health staff and police

Activities:

Bac Giang: support of the PASB to establish a harm reduction club following the Hai Au Club model of Haiphong (FHI) with outreach peer education, harm reduction activities and support to people with HIV and their families. Conducting a series of workshops as part of the training, planning and implementation process.

Thanh Hoa: support to PASB to initiate harm reduction activities in 4 communes in rural areas.

Counterparts: National AIDS Standing Bureau, Provincial AIDS Standing Bureau

Medicos del Mundo-Spain (MdM-S)

Representative Office:

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Introduction: Médicos del Mundo-España (MDM-E), a Spanish humanitarian NGO, with the authorisation of the local authorities, supports a STD and HIV/AIDS prevention project in Khan Hoa Province, since August 1, 2000,

Locations in 2002: Khan Hoa Province: Cam Ranh, Dien Khan and Van Gia Districts

Target Groups: IDUs and CSWs

Activities: Supporting the STD clinic, implementation of mobile clinics in the project districts, support of peer educators' and harm reduction activities with IDUs and CSWs, support of IEC activities targeting youth groups (Gypsy Café)

Funding period: August 2000-December 2002-09-06

Funding agency: Palencia Council, Balear Islands government and Palma de Mallorca Municipality

Counterparts: Khan Hoa Provincial Health Service, Khan Hoa Provincial AIDS Committee, City, Women Union (CWU), Provincial Women Union (PWU), City Youth Union (CYU)

Outlook: HIV/AIDS prevention project in Dong Da district (Hanoi), Thai Binh and Nam Dinh Province

Médecins du Monde France

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Introduction : Médecins du Monde is a French NGO dedicated to the sustainable improvement of access to health care for the most vulnerable populations. It has been working in Vietnam since 1989. Projects so far have been on community based primary health care in Dac Lac, Soc Trang, Bac Kan and Thai Nguyen during 1994 to 2001.

Until recently MdM France provided services related to HIV prevention through 3 coffee shops in Ho Chi Minh City. The projects included counselling services, assistance to capacity building of peer educators and HIEC shows, all targeted at young people, drug users and commercial sex workers.

Locations in 2002: District 6, HCMC and parts of the neighbouring districts such as 1, 5, 8, 10, 11, and Binh Chanh.

Target Groups: Homeless and semi-homeless people, including illegal Khmer ethnic migrants, IDUs and CSWs, focusing on children and women.

Activities: Combination of social work and primary health care services provided by a day care Centre (An Hoa Clinic) with outreach work conducted by 2 mobile teams.

- At the day care clinic, primary health care services, including nutrition, and STI/HIV cares are available. Dissemination of health promotion messages (including video) and materials is regularly organized. Also basic hygienic services such as laundry, showers, as well as hot meals are provided. In addition, there are counselling services on social reintegration, education or vocational trainings for target individuals.
- Two Mobile teams (consisting of an assistant doctor or a nurse, a social worker and peer-educators) conduct outreach activities day and night to provide counselling, health education, basic first aids and direct treatment of minor disorders; and to distribute meals, IEC materials, condoms and exchange needles.

Funding period: From Nov.01, 2000 to Oct.31, 2003

Funding agency: EU, Ford Foundation, MdM

Counterparts: HCMC Provincial AIDS Committee and District 6 People's Committee.

Outlook: To develop the component of treatment and care for HIV/AIDS patients at the Day Care Centre and home care with the mobile teams and BGB group, including preventive treatment, treatment for opportunistic infections and antiretroviral treatment.

Program for Appropriate Technology in Health (PATH), Canada

Representative Office:

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Introduction: Programme for Appropriate Technology in Health, Canada (PATH Canada) is a non-profit, non-governmental Canadian organization committed to improving health, especially the health of women and children in developing regions of the world. PATH Canada has been working in Vietnam since 1995 in the areas of reproductive and adolescent health, sexuality, tobacco control, and nutrition. In Vietnam, PATH Canada has produced a series of three very popular books related to reproductive health, sexuality, and HIV/AIDS. The books were developed based on qualitative research with youth and were extensively pre-tested with youth throughout Vietnam. The books are informative and reflect many of the concerns and perceptions of adolescents and youth. The books are widely used by government agencies, mass organizations, NGOs, and INGOs in Vietnam.

Locations in 2002 and later: PATH Canada books, training materials, and information, education, communication materials are distributed throughout the country.

Target Groups: School youth and adolescents

Activities: In Vietnam, PATH Canada focuses its efforts on capacity building and material development in the area of adolescent health and sexuality.

Funding agency: PATH Canada's reproductive and adolescent health program has been funded by the Canada Fund for Local Initiatives, the International Development Research Centre (IDRC), and the Netherlands Embassy.

Counterparts: PATH Canada has worked and has received input from many organizations in the development of its information and education materials including the Vietnam Women's Union, the Australian Red Cross, UNFPA, GTZ, and the Research and Training Centre for Community Development.

Outlook: In 2003, PATH Canada will expand its program to assist in reducing the vulnerability to, and impact of, HIV/AIDS among mobile people in Vietnam.

Program for Appropriate Technology in Health (PATH), US

Representative Office:

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Introduction : PATH is an international organization that is dedicated to developing, implementing and evaluating innovative solutions to public health problems. PATH focuses on improving reproductive and sexual health, increasing the availability of vaccines and immunizations, preventing the transmission of HIV, improving adolescent and maternal health, and preventing gender-based violence through the advancement of human rights.

PATH's programmatic and organizational strengths in Vietnam include: identifying and developing partnerships, behaviour change interventions and IEC material development, technical assistance and capacity building, training, program documentation, and evaluation.

PATH has been working in Vietnam since 1997, primarily in immunization and reproductive health. PATH's work in reproductive health includes male involvement in adolescent reproductive health, post-abortion care, safe motherhood, and HIV-related research, advocacy and capacity building. Project work in immunization and children's health includes the introduction of the hepatitis B vaccine into the national immunization program, child survival behaviour change, the strengthening of malaria control, and research into intestinal parasites and nutritional deficiencies.

For HIV activities, PATH works on the "Working on HIV project" with CARE and Save the Children and has implemented activities on stigma reduction, HIV awareness and behaviour change, and materials for care of PLWHA.

Locations in 2002: PATH implemented three HIV-specific projects in 2002. The Community based-care project was implemented in Hanoi and Haiphong. The "Working on HIV project" that has been carried out by PATH, CARE and Save Children US in Lao Cai. PATH worked with city level health services in Hanoi and Haiphong and the provincial AIDS bureau in Lao Cai. The Materials for Care of PLWHA was conducted in Hanoi.

Target Groups: PLWHAs and persons affected by HIV and AIDS, staff working on HIV/AIDS program in Lao Cai, provincial authorities.

Activities: For the communications project, activities included events such as a forum on HIV on VTV with programme staff and policy makers discussing HIV transmission in border areas, an AIDS candlelight memorial in Haiphong, a dedicated magazine column in the HIV/AIDS Magazine, and a contest on TV highlighting HIV issues.

The project in Lao Cai focused on capacity building for staff working on HIV/AIDS in Lao Cai province and 11 districts in order to enhance and sustain HIV prevention efforts. Activities included training courses on communications strategies, planning, administrative management, proposal and report writing, partnership workshops, and a study tour to factories and government in Thailand.

Funding period: Two projects ended in 2002 and the Lao Cai project is expected to end in the first quarter of 2003.

Funding agency: USAID, PATH

Counterparts: Lao Cai Province People's Committee and PASB, Haiphong Provincial Health Service and PASB, VTV1

Outlook: PATH intends to have a much greater focus on HIV in 2003. Two cross-border projects are planned; one starting in late 2002. PATH activities in HIV will include VCT, care and treatment, and behaviour-change communication strategies.

Population and Development International (PDI)

Representative Office:

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Introduction : Since 1991, PDI has successfully implemented a number of different health promotion and rural development projects in all regions of the country; North, Central, and South. In partnership with many, PDI has helped to establish sound development models (community-based family planning, integrated women's development, life-skill education and HIV/AIDS prevention among youth, etc.). Most recently, PDI has effectively provided technical assistance to the project VIE/97/P11 & P12 implemented by VYU and UNFPA in the development and publication of numerous IEC manuals and materials on family planning, reproductive health and HIV/AIDS prevention.

Locations in 2002:

- Nghe An province: Cua Lo township, Nghia Dan and Qui Hop districts.
- Thanh Hoa province: Sam Son township.
- HCM city: 2 vendor factories of NIKE.
- Dong Nai province: 7 vendor factories of NIKE

Target Groups: Youth, IDUs, mothers and wives of IDUs, workers at workplace

Activities on HIV/AIDS:

- Establishing life-skill teams, youth clubs, worker groups to provide youth and workers with peer education on reproductive health and HIV/AIDS.
- Establishing women's groups including mothers and wives of IDUs to provide peer education on HIV/AIDS prevention.
- Provision of IEC materials.

Funding period: 2001 - December 2002 (extension to March 2003)

Funding agency: AusAID via Family Planning Australia (FPA), Norwegian Church Aid (NCA), Global Alliance for Workers (GA)

Counterparts: Central Youth Union, Women's Union and Youth Union of Nghia Dan and Qui Hop districts, Nghe An, Vietnam General Confederation of Labour (VGCL)

Plan International

Representative Office:

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Introduction : After surveys in May 1993, Plan re-established its program in Vietnam in June 1993. Today, Plan in Vietnam is helping over 37,000 children, their families and their communities in 65 communes in Nam Dinh, Ha Nam, Quang Tri, Bac Giang, Phu Tho, Quang Ngai and Thai Nguyen Provinces, as well as Ha Noi.

In Vietnam, Plan works in partnership with local people, organizations and government bodies at various levels. Most project activities take place at commune and village levels, with the active participation of project beneficiaries.

Locations in 2002: Presently, Plan's work in HIV/AIDS related activities concentrates on communicating information on HIV/AIDS prevention and transmission within Plan communities. HIV/AIDS activities are conducted as part of Plan's Primary Health Care and Reproductive Health programs.

Target Groups: Women and adolescents in Plan communities.

Activities:

- **Hanoi Program Unit**, Ba Dinh, Ha Ba Trung, Thanh Suan Wards: Life Skills training for street children ages 13-18 on HIV/AIDS prevention, transmission and condom use.
 - **Nam Dinh, Ha Nam, Bac Giang, Quang Tri and Quang Ngai Program Units** integrate HIV/AIDS education into a general health education program (Life Skills training, Health Education, IEC) targeted towards women in Plan communities.

Funding period: Varies

Funding agency: Sponsorship and Grants

Outlook: In the coming year, Plan will pilot an HIV/AIDS project in a Plan commune focusing on raising awareness among families and the community on prevention and transmission of HIV/AIDS, reducing Mother-to-Child transmission, and slowing the process of HIV turning into full blown AIDS in HIV positive persons.

Population Council

Representative office:

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Introduction: Population Council is a non-profit, non-governmental research organization. The council conducts research on a broad range of reproductive health aspects. Its aim is to improve the overall quality of reproductive health. To strengthen the local capacities and translate research into effective practice, it works closely with the different public and private partners in this field and widely distributes the research results.

In Vietnam Population Council has been working since 1989.

Up to now research focused on mainly two areas: health care provision and access to it and behavior of different groups at risk of HIV-infection and the effectiveness of different approaches of HIV prevention.

Locations: Hanoi, HCMC, Tra Vinh

Target populations: Out-of-school youth (e.g. Hanoi soccer intervention), factory workers, mobile population and ethnic minority (Khmer in Tra Vinh)

Activities: Mobile construction workers in HCMC are targeted through work-place based peer education (trained construction workers). Alternative interventions will be compared for effectiveness and ability to gain sustainable effects despite the workers' mobility.

An intervention based in a garment factory in HCMC provides IEC on HIV and STI through peer education. The project aims at involving the factory's management to raise awareness and create a sense of concern and commitment to HIV prevention.

In Hanoi health communication takes place at the university targeting students.

Out-of-school youth is getting involved in adolescent reproductive health education (including STI and HIV) through health education sessions provided along with soccer training.

A new intervention has recently been launched in Tra Vinh reaching out to the Khmer ethnic group. Theatre plays and a video in Khmer are being developed and will be shown in Khmer communities in Tra Vinh, Soc Trang and Can Tho after one year. The extent of behaviour change induced will be measured.

Information on results of previous activities can be accessed on the Internet:
<http://www.popcouncil.org/pubasps/PublicationDetails.asp?Publication>

Save the Children UK

Representative office:

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Website: [http:// savethechildren.org/countries/Vietnam/shtml](http://savethechildren.org/countries/Vietnam/shtml)

Introduction: Save the children UK is the United Kingdom’s leading international child rights organisation. It has been working in Vietnam since 1966. A representative office was established in Hanoi in 1990, followed by the opening of a programme office in HCMC in 1992, the year SCF also was engaged in HIV prevention.

SCUK addresses issues of poverty, exploitation and discrimination of children, factors strongly influencing children’s vulnerability to HIV.

Locations: HCMC, Haiphong and gradual expansion to other provinces where SC UK works namely Thanh Hoa, Nghe An, Ha Tinh, Hanoi and Quang Ninh.

Target groups: children in and out of school, young people, PLWHA, families

Activities:

- Peer education for children in and out of school
- IEC material development
- Sex education
- Public education
- Self advocacy (children and PLWHA)
- Capacity building of DOET, PAC, DAC and CAC

Partners: Provincial AIDS Standing Bureau, Provincial Department of Education and Training

Funding: co-funded by the European Community

Outlook: SC/UK is considering expansion of its activities to pilot community based care and support for infected and affected children.

Save the Children US (SC/US)

Representative Office:

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Website: Not available

Introduction : SC/US works in over 48 countries and territories, and programming includes work in Education, Health, Economic Opportunities, and Humanitarian Relief. In various countries, SC works on the issue of HIV/AIDS, with a particular focus on youth and children.

Locations in 2002: The current HIV project is implemented in Lao Cai province, in two districts: Sapa and Lao Cai.

Target Groups: Target groups are working youth, broadly defined. Specifically, this includes workers in hotels, restaurants, karaoke, xe om drivers and construction workers. The focus is on people under 25.

Activities: Main activities include establishing peer education networks, condom promotion, and IEC development. One distinctive feature of the program is the use of Positive Deviance (PD) methodology. This methodology is based on the premise that the best solutions are those which already exist within the resource constraints of the community. The methodology consists of identifying with the community those individuals who are already successful in solving widespread problems, without access to any special resources. Once these individuals are identified, they are interviewed thoroughly to discover very specific behaviours and strategies that they actually employ in reality to solve their problems. The second phase of the process involves communicating the information learnt to the target populations, with a focus on actual practice (or, as is often the case with sensitive sexual/injecting behaviours, role-play) the behaviours: PAK instead of KAP (Performance - attitude – knowledge instead of knowledge – attitude - performance)

Funding period: Through September 2003.

Funding agency: Gates Foundation

Counterparts: Lao Cai PAC

Outlook: SC US also has an Adolescent Reproductive Health (ARH) program which is of relevance to HIV and has HIV-related content. This 2 year program will work with an existing peer-education program, and will add a major media communications component, focusing on youth participation, to address issues of ARH including HIV/AIDS. In the long run, SC is committed to continuing to address the ongoing needs and rights of children and youth regarding HIV.

World Village Foundation

Representative Office:

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Introduction : WVF is a US registered non-profit organization established to help heal the wounds of war. The major focus is the Technology of Participation which helps groups reach their goals more efficiently. WVF established its office in Hanoi in 1996.

Locations in 2002: 70% of WVF activities (in 2002) centred in the greater Hanoi area. Other locations: Ha Tay (Ba Vi), Haiphong, HCMC, Da Nang

Target Groups: At-risk for heroin addiction & HIV/AIDS youth (ages 15 – 30), HIV positive folks, disabled citizens

Activities: WVF is currently conducting workshops which train leaders to organize self-help groups. Leaders from 9 self-help groups were selected after an initial 3-day workshop introducing leadership & networking skills. These leaders will eventually take over the duties of WVF facilitators by the end of the 18 month project period. Final outputs will be guidelines for the formation of self-help groups and a leadership training (ToT) manual.

WVF facilitated the production of a 30-sec TV advertisement called: “Say NO to Heroin”. This is social advertising which demonstrates how an urban male ages 15 – 30 can refuse to smoke heroin when pressured by friends to do so. The ad’s audio portion is a song by nationally famous singer Ms Thanh Lam. A CD of the same title will be released March, 2003. The ad is slated for national wide release Dec, Jan, 02. It will be followed up with a music concert series of top name start on the theme of “drug-free fun”.

Funding agency: The majority of WVF services are privately funded by Dan Rocovits, with volunteers from the National Institute of Psychology. Some project partners can provide consulting monies.

Counterparts: Institute of Psychology, National Centre for Social Studies and Humanities

Outlook: WVF projects are expanding rapidly in the area of leadership training for self-help groups and empowerment of grass-roots organizations.

World Population Foundation (WPF)

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Introduction : WPF, a Dutch NGO, promotes reproductive health and reproductive rights in developing countries. WPF implements programs in Asia and Africa. It has been active in Vietnam since 1995, and its office here was opened in 2000. WPF always works with local partner organisations in the countries where it operates. The Country Program's overall goal is to ensure reproductive rights and reproductive health for young people in three key program areas -quality services, innovative communications, and rights-based advocacy. All projects are developed based on these program areas. WPF Vietnam emphasizes participatory planning and implementation with local partners.

Locations : Project for Children in Especially Difficult Circumstances in reeducation schools in Long An, Dong Nai, Da Nang and Ninh Binh. Project for community based adolescent health with the Centre for Reproductive and Family Health in Ninh Binh and Hanoi provinces. Project for community based adolescent health in Nghi Loc district, Nghe An province. Upcoming project on participatory theatre for education in Nghe An and Hanoi provinces

Target groups: WPF target groups include children in conflict with the law, rural adolescents, adolescents in difficult circumstances in both urban and rural areas, and through one project, urban youth in Hanoi. Secondary beneficiaries are partner organisations, community leaders, local authorities, mass organisation staff, health workers, and teachers.

Time frame: Different projects have different time frames

Activities: WPF's activities include educational materials development, training, health service improvement, education, awareness raising and advocacy activities at grassroots levels, and programme research and evaluation. In particular, under one project, we are developing a sexuality and reproductive health education curriculum for use in the four re-education schools and at KOTO by the teachers.

Counterparts: Nghi Loc People's Committee, Nghi Loc Health Service, Nghi Loc Department of Education, Nghi Loc Women's Union, Nghi Loc Youth Union, Centre for Reproductive and Family Health, Ministry of Public Security, Ministry of Education and Training, KOTO, Vietnam Stage Artists' Association, Hanoi Department of Education

World Vision Vietnam

Representative Office

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Introduction: World Vision is a non-profit Christian humanitarian organization, which is dedicated to working with the poor and oppressed to promote human transformation and justice. World Vision presently works in more than 90 countries around the world, assisting communities with programs in health, education, agriculture, micro-enterprise, water, sanitation, food security, and emergency relief. Importantly, World Vision works directly with members of the community, engaging in a process to create the conditions whereby people become the agents of their own development. As a child-focused organization, World Vision makes special efforts to ensure that children are protected and their basic needs are met.

From 1997 until the present, World Vision has been implementing an HIV prevention program in Central Vietnam along Highway No. 1. The program targets mobile populations with community-based counselling and materials to promote behaviour change. Materials such as audio cassettes, leaflets, stickers, posters, and key rings are distributed to truck drivers, through a network of peer educators. A program which expands and adapts the Highway No 1 methodology is currently being implemented in Haiphong. Furthermore, World Vision is implementing a care and support program in Haiphong for people living with HIV/AIDS.

Locations in 2002: Haiphong City, Quang Tri Province, Thua Thien Hue Province, Quang Nam Province.

Target Groups: Truck drivers, bus drivers, seafarers, service women, shop owners, community members, and people living with HIV/AIDS.

Activities: Research on epidemiology in mobile populations. Development of peer education networks. Formulation and distribution of Information, Education, and Communication materials which reinforce behaviour change related to prevention of HIV. Provision of vocational training and access to credit for vulnerable groups. Implementation of activities to reduce stigma and discrimination toward people living with HIV/AIDS. Development of a toolkit for people living with HIV/AIDS. Capacity building of local partners. Dissemination of research, materials, and lessons learned to the local, provincial, and national levels.

Counterparts: Department of Health, National AIDS Standing Bureau, Provincial AIDS Committee, Women's Union.

United Nations International Drug Control Programme (UNDCP)

Representative Office:

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Introduction : The strategy of UNDCP Vietnam has been one on a balanced approach incorporating all elements of drug control related both to supply and demand reduction. The country office works in close collaboration with the government, providing technical assistance and expertise in capacity-building, as well as initiating and co-ordinating a variety of donor-funded projects designed to assist the government in achieving the drug control objectives laid out in its 2001-2005 action plan.

I) Project AD/VIE/01/B85:

In 2002 UNDCP initiated the project AD/VIE/01/B85 on reducing drug use and harm in highland ethnic minorities in association with The Committee for Ethnic Minorities and Mountainous Areas (CEMMA).

Locations in 2002: 2 communes each in Son La (Thuan Chau District), Lai Chau (Dien Bien District), Lao Cai (Than Uyen District)

Target Groups: ethnic minorities, drug users and poppy farmers, rehabilitation centres, local authorities, mass organisations including Women's union, youth union, farmers association, war veteran association, and fatherland front.

Activities: interventions aiming at drug abuse prevention, treatment and rehabilitation, information, education and communication (IEC) targeted at drug users in their communities (concise interventions still to be decided). Activities preferably will be carried out integrated into other developmental projects

Funding period: 2002- 2003

Funding agency: DANIDA

Counterparts: CEMMA, local authorities, NGO working in the areas as implementing partners

II) Project VIE/F82-PAF Project

Funding period: one year (2001 – 2002), budget: USD 60 600 (incl. PSC)

Activities:

- Studies on drug abuse and heroin users in Hanoi and the implications on future projects were carried out and, a study paper has been finalised for publication
- UNDCP provided a local Vietnamese NGO - Vietnamese Community Mobilization Center for HIV/AIDS (VICOMC) with USD 7000, to expand peer education activities to 11 wards of five cities/provinces including Hanoi, Haiphong, Thai Nguyen, Lang Son, Nghe An promoting the

results obtained from the UNDCP-funded project VIE/97/B07 in 1998-2000 (duration 8 months: Aug 02 to Mar 03)

- UNDCP is considering support to Danang City with 30 000 USD to implement an intervention project to prevent drug use and HIV infection
- Working with UNESCO to develop a joint initiative on drug-related harm reduction and HIV/AIDS prevention through empowerment in Ha Long (Quang Ninh province) with UNDCP's contribution worth USD 8000.

III) UNDC/DAPC 2002 NGO Scheme Grant

Implementing partner: VICOMC

Grant: 6500 USD

Duration: 9 months from August 2002 – April 2003

Location: Hanoi City (Ba Dinh, Hoan Kiem, Dong Da, Cau Giay, Tay Ho)

Target group: (ex) drug users, their families, health and social workers

Objectives and activities: Prevention of HIV and drug relapse through post-treatment clubs, enhancement of knowledge and skills related to HIV and drug prevention through training and club activities. The objective is to reduce the drug relapse rate after returning from rehabilitation centres from 90% to 70% in the 5 pilot communes.

United Nations Development Programme (UNDP)

I. “Strengthening capacity in management, policy formulation and coordination of HIV/AIDS activities in Vietnam (VIE/98/006)”

Key person(s): Dr Dao Quang Vinh, National Project Manager
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Website: www.undp.org.vn/

Objectives: 1) Planning, management, M&E and co-ordination capacity of selected provinces and agencies will be improved; 2) some researches will be conducted to contribute to the HIV/AIDS policy advocacy, and the policy and strategy development; and 3) the Government-led co-ordination of HIV/AIDS efforts and HIV/AIDS policy dialogues in Viet Nam improved.

Locations: The PPCs of Lang Son, Hai Duong and Da Nang will be directly involved in the project as co-implementing agencies.

Target groups: The target groups are NASB (under the MoH) and staff of PASB, research institutes involved in the evaluation, training and research. Secondary beneficiaries will be youth, PLWA, women and men at high risk.

Activities: Develop comprehensive provincial AIDS prevention annual plans prepared and implemented that incorporate M&E indicators and coordinate funding from the NAP, provincial and other sources. Support HIV/AIDS policy/strategy development (to be identified). Assess the feasibility of conducting a socio-economic impact assessment. Assess the organisational structure of the NAP. Develop a unified government-led mechanism to support policy dialogues and establish coordinating efforts on HIV/AIDS.

Funding : October 2000 - December 2003 by AusAID

Counterparts: NASB, three above Provinces and selected member organisations of NCADP.

II. “Capacity strengthening project: community-based HIV awareness and behaviour change communication skills (VIE/01/09)”

Key person(s): Doan Thi Khao Trang, National Project Manager
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Objectives: To strengthen the capacity of the VYU at all levels to develop community-based HIV/AIDS activities; to build-up IEC material and raise HIV/AIDS awareness among young people in general; to implement community-based life skills and HIV/AIDS education activities; to raise awareness and facilitate behaviour change among young people, especially the high risk behaviours.

Locations: First stage Ha Tinh and Can Tho, second stage Son La and Tay Ninh

Target groups: The target group is Youth Union at all levels. Secondary beneficiaries will be IDUs, CSW and PLWHA.

Activities: Design and implement direct community-based IEC, through a mix of direct training inputs and study tours to observe successful activities in Vietnam and other countries. Implement broad awareness activities such as organizing TV show competition, and musical shows under HIV/AIDS topic. Apply four strategies of direct community-based activities. Condom promotion and improved access to condoms.

Funding period: 2001 – 2004 by AusAID

Counterparts: Youth Union, health sector, and Committee on AIDS, Drugs and Prostitution.

United Nations International Children's Fund (UNICEF)

Representative Office:

Key person(s): Mr. Anthony Bloomberg, UNICEF Representative
Dr Seija Kasvi, Project Officer (Health), Health & Nutrition Section, head of Task Force on HIV/AIDS
UNICEF HIV/AIDS Task Force Members

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Introduction: The UN response to HIV/AIDS in Viet Nam has resulted in the development of a draft UN Joint Plan of Action. UNICEF's contribution to this plan consists primarily of education, communication and care to promote positive behaviours among children and women affected by and infected with HIV/AIDS.

Specifically, UNICEF's programming includes Life Skills Education for children and adolescents - Behaviour Change Communication (BCC), Care and support for orphans and other People Living With and affected by HIV/AIDS (PLWA), and Prevention of Parent (Mother) to Child Transmission (PMTCT) of HIV/AIDS through support to Reproductive Health Services.

Such interventions are supported through UNICEF Sections, and increasing effort is being made to strengthen integration thorough the Office wide HIV/AIDS Task Force.

Location in 2002 by UNICEF Sections: Child Protection (CP): Quang Ninh (Ha Long, Cam Pha, Mong Cai, Hai Ha districts), An Giang: Tan Chau district (Tan Chau town, Long Van and Vinh Xuong communes), Phu Tan district (Phu My town, Long Son commune), Dong Thap: Hong Ngu district (Hong Ngu town, An Binh A commune), Hanoi (Hoan Kiem, Dong Da, Gia Lam district), Lao Cai: (Sapa district), Hung Yen: (Kim Dong district), Thanh Hoa: (Quang Xuong district), HCMC, Nha Trang

Communication (COM): Media activities nationwide, specific activities in Hanoi, and HCM-city and possibly other bigger towns.

Specific activities targeting adolescents in Tay Nguyen, Nghe-An, Tra Vinh, Son La, Yen Bai

Education (EDU): Lang Son (Cao Loc and Van Lang Districts), Quang Ninh (Mong Cai and Yen Hung Districts), Lao Cai (Sapa and Lao Cai Town), Haiphong (Do Son Town), Ha Noi (Hoan Kiem, Dong Da and Thanh Xuan Districts), Ho Chi Minh City (Hoc Mon, Thu Duc and Nha Be Districts), An Giang (Long Xuyen Town and Phu Tan District), Kien Giang (Phu Quoc District)

Health and Nutrition (H&N): Nationwide and specific activities related to Prevention of Mother to Child Transmission/PMTCT in five (5) high-risk districts: Cao Loc-Lang Son, Thuy Nguyen- Haiphong, Ha Long-Quang Ninh, District 10-HCMC and Long Xuyen-An Giang.

Water and Environmental Sanitation (WES): The UNICEF Area Focused Approach/AFA (66 districts in 24 provinces)

Target Groups: In general, children and adolescents 0-18 years old (in and out of school) according to the Convention of the Rights of the Child/CRC, and women of child-bearing age and more particularly the ones made most vulnerable by the pandemic: young children, orphans, young people, parents and children living with HIV/AIDS.

Activities: Globally as well as in Viet Nam, UNICEF is moving towards Results Based Management/RBM with more integration of activities.

List of Activities planned for 2002-2005:

CP: Conduct situation analysis on HIV/AIDS infected/affected children, support for policy development for Children Affected by HIV/AIDS (CABA), support for all aspects of community based care for CABA, training of staff in social protection centres on basic health care including psychosocial care for CABA. Life skills training and provision of IEC materials as a component of informal education/club activities. Income generating activities for families caring for CABA-Provision of small grants for innovative community-based initiatives.

COM: Support to the radio-programme Window of Love, Meena, newspaper articles and development of theatre plays, an interactive video with manual for street children. Introduction and distribution of With Hope and Help – a communication tool to help infected people and communities to live positively with HIV/AIDS. Buddhist Leadership Initiative to promote for care of HIV/AIDS infected and affected children. Special event on World AIDS Day

EDU: Material and capacity development on life skills and HIV/AIDS, drug and substance, reproductive health issues (for adolescents, parents, teachers YA and WU officers as well as volunteers at community level). Advocacy and Community mobilization, Monitoring and Evaluation, promotion of effectiveness of adolescents focused initiatives.

H&N: Establish a National PMCT Technical Working Group/Task Force for the development of a framework for PMCT Master Plan and to review existing PMCT guidelines. Operational Research on Infant Feeding Options for HIV-positive mothers.

In 5 PMCT Pilot Project Districts: development of a manual, provision of “training for trainers” down to commune level, training of health care providers (VCT, hygiene, treatment and care, PMTCT, feeding) and secondary medical school students

Increase in-country expertise at national, provincial, and district levels in PMCT/Care for Women and Children Affected by HIV-AIDS by participating in relevant international or regional training courses, workshops and conferences

Contribution to UNICEF-Regional HIV-AIDS internet website with information on PMCT and Women and Children Affected by HIV-AIDS in Viet Nam

WES: Provide TA for WES in support of other core interventions for fighting HIV/AIDS

Funding Period: 2001-2005

Funding Agency: UNICEF receives contributions from governments (64%) and through fund raising activities

Counterparts: NCDPA, Ministries of Education and training and Health, The Committee for care and protection of children, Vietnam’s Women’s Union, Youth Union, Young Pioneer Council, other UN agencies, NGO and INGO (ARC, SCF-UK, World Vision. MdM. CARE)

Outlook : Future UNICEF programming will focus on convergence, both geographically and activity-wise. As part of UNICEF Mid Term Review, a youth survey will be conducted in conjunction with WHO and Vietnamese partners. This will include a qualitative survey to look at adolescents and youth priorities issues, and a qualitative research to look at STIs and HIV/AIDS, youth dreams and aspirations, voices and participation.

World Health Organisation (WHO)

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Introduction : The World Health Organisation (WHO) collaborates with Member States to provide more effective STI education, counselling and services to sex workers and their clients. "100% condom use" within the sex industry remains an important strategy. WHO supports Member States to: improve the organization and management of national STI programmes; develop appropriate STI policies; redefine the role of specialist STI services; and improve STI services at the primary health level through the use of the syndromic approach, which enables immediate STI treatment.

WHO's support for AIDS care focuses on reinforcing the capacity of health systems to cope with the expected increase in AIDS cases. In the region care guidelines have been developed, strategic approaches to AIDS care have been designed and health care workers have been trained. The AIDS home care project in Cambodia now serves as a model for other countries in the Region.

A twice-yearly *Antiretroviral newsletter* is launched by the Regional Office to inform public health specialists and health care workers of the latest developments in the use of antiretroviral drugs for the prevention and care of HIV infection.

WHO supports Member States to improve their STI epidemiological and surveillance data. Epidemiological data from the Region are collected, analysed, and disseminated through publications, including the twice-yearly *STI, HIV and AIDS surveillance report* and a regional report on the *Status and trends of STI, HIV and AIDS at the end of the millennium*.

In Vietnam, so far, impact of HIV/AIDS prevention on HIV incidence has been limited, partly due to the small scale of projects and activities. Up scaling of HIV prevention to focussed activities to reduce risk behaviours in combination with local expansion are urgently needed to halt the epidemic. The DFID financed project "Preventing HIV in Vietnam" aims at filling in this gap.

Locations: Quang Ninh, Haiphong, Hanoi, Lang Son, Nam Dinh, Thanh Hoa, Ha Tay, Thua Thien Hue, Ha Tinh, Da Nang, Khanh Hoa, Can Tho, Ho Chi Minh City, Dong Nai, Binh Thuan, Soc Trang, Tay Ninh, Ba Ria Vung Tau, Dong Thap, An Giang, Kien Giang.

Provinces have been chosen based on the following criteria: access to sex workers and clients by professional HIV workers, an active street-based sex industry, an HIV epidemic among drug users, a nexus of transport routes.

Target Groups: Sex workers and their male clients (incl. transport and construction workers, other mobile populations), drug users, entertainment establishments.

As secondary beneficiaries: sexual partners, provincial administration,

Activities: Training, technical assistance, advocacy and research to improve the national and provincial capacity to develop effective, equitable and non-discriminatory HIV prevention policies, strategies and practices. Support for the translation of the HIV/AIDS strategy for 2001-2005 into a national plan of action.

Purchase and supply of subsidized condoms (social marketing of condoms), expansion of non-traditional condom outlets, and technical assistance to develop private sector sales of condoms. Implementation of the 100% Condom Use Programme (CUP) in entertainment establishments. Establishment of drop-in centres for street-based sex workers where behaviour change activities, condom promotion, STI treatment and empowerment can be conducted. Self-help and peer initiatives for CSW will be expanded. Training on diagnosis and treatment of STI, establishment of a safe and effective drug supply for STI treatment.

Harm reduction activities for IDU: peer education, needle and syringe exchange and community support initiatives for street-based IDU.

IEC tailored for CSW and their clients and for IDU via mass media, notably TV.

Funding period: from January 2002 (proposed start) over the following five years, two phases: 6/12 inception phase

Funding agency: Department for International Development (DFID)(United Kingdom)

Counterparts: Ministry of Health (AIDS Division), National Committee for AIDS Prevention and for Drug and Prostitution Control (NCADP). Implementing agencies: MOLISA, MOTC, Provincial AIDS Committees, Provincial AIDS Divisions, International and National NGO, DKT in particular for social marketing.

UNAIDS: Joint United Nations Programme on HIV/AIDS

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UNAIDS is a co-sponsored programme of eight UN agencies: UNICEF, UNDP, UNFPA, UNDCP, ILO, UNESCO, WHO and the World Bank. The mandate of UNAIDS is to co-ordinate UN activities in HIV/AIDS prevention, care and support, and to promote an expanded response to the HIV epidemic. UNAIDS works through the UN Theme Group, currently chaired by the UN Resident Representative, Mr. Jordan Ryan, and the technical focal points of the UN co-sponsor agencies. UNAIDS works closely together with the government, and the development partners active in HIV activities.

Private/Public Cosponsors

The Global Fund to Fight AIDS, Tuberculosis and Malaria (GFATM)

“Strengthening care, counselling, support to People Living With HIV/AIDS (PLWHA’s) and related community based activities to prevent HIV/AIDS in Vietnam”

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Introduction: HIV/AIDS, TB and malaria are the world's great killers. Three million people died of AIDS in 2001, tuberculosis accounted for 1.7 million deaths in 2000, in the same year, malaria killed more than 1 million people, mostly children in Africa.

The Global Fund to Fight HIV/AIDS, TB and Malaria (GFATM), which has been created in a joint effort of private and public sectors, will ensure that the unprecedented international and political attention that has now been mobilized is translated into real commitments that will help improve access to the information, goods and services that people so urgently need.

The Global fund grant for Vietnam will be coordinated, organised and monitored through a National Country Coordination Mechanism (CCM). This committee is composed of members of the Ministry of Health representing the government sector; Vietnam Women Union, SUCICON and Vietnam Red Cross for the NGO/community based groups, Vietnam Chamber of Commerce and Industry (VCCI) for the Private/Business sector, and the National Institutes for the Control of Malaria and the Control of Tuberculosis as well as the Hanoi Medical University for the academic/educational sector. Other members are: WHO, UNAIDS, UNDP, and Japan International Cooperation Agency (JICA), Medical Committee for Netherlands-Vietnam (MCNV). The “Community” is represented by the Vietnamese Buddhist Association and a representative of PLWHA. The CCM meets quarterly.

The GFATM will support the development of care and support activities for people living with HIV based on the draft national plan for care and support and pilot model developed by the MoH. Since 1996 the MoH has started a community based pilot model on HIV management, care and counselling in 3 provinces, HCMC, An Giang and Khanh Hoa. The activities focussed on “care and support” and capacity building for health care workers. Achievements made were better access to health care for PLWHA, reduction of stigma and establishment of “friends-help-friends-groups” and peer education groups. In addition the GFATM will support the development of prevention of mother to child transmission of HIV by strengthening the national capacity.

Locations in 2002: 20 provinces chosen on the basis of detected HIV-infections and AIDS cases, political commitment and existent infrastructure for implementation: Quang Ninh, Hai Phong, Ho Chi Minh City, Ha Noi, An Giang, Lang Son, Nhe An, Khan Hoa, Cao Bang, Hai Duong, Thai Nguyen, Tay Ninh, Can Tho, Kien Giang, Soc Trang, Thanh Hoa, Phu Tho, Ca Mau (starting in 10 provinces and then expanding stepwise).

Target Groups: PLWHA, their families, health care provider, social workers, social organisations, women and their families.

Activities: Basic assessment on manpower, budget, supplies and equipment, drugs for OI and some ARV treatments. Capacity building through training of trainers and training of health care providers

(concerning counselling, care and support for PLWHA), implementation of comprehensive network of counselling, care and support services for PLWHA, VCT for all pregnant women and prevention of mother-to-child-transmission (PMTCT), formation of technical groups with professionals for technical support, independent annual evaluations. Setting up friend-help-friends-groups as peer groups for education, behaviour change promotion. Development of an IEC strategy on care, counselling and support to PLHA. Establish outreach groups to promote IEC at community level. Provision of regular medical care and treatment for prophylaxis of opportunistic infections and, as a future option, anti-retroviral treatment.

Funding period: 12 million USD over 4 years starting in 2002

Funding agency: Global Fund to fight AIDS, tuberculosis and malaria

Counterparts: AIDS Division of Ministry of Health, Provincial AIDS Divisions, mass organisations (Youth Union and Women Union, NGO, other health care providers).

Asian Development Bank

“Community action for preventing HIV/AIDS”

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Introduction : The Asian Development Bank is financing health sector projects in Cambodia Vietnam and Laos. These projects focus on strengthening the infrastructure for primary health care and improving the quality of health services. The project “Community action for HIV/AIDS prevention” will be implemented and integrated into the ongoing health projects. It will enhance the poverty reduction impact of the ADB health projects by reducing the HIV/AIDS incidence of HIV/AIDS, a health condition that disproportionately affects the poor.

Even though the conditions highly vary between the three countries, the high level of mobility of different populations within the countries and across the borders highly justifies a regional response to HIV prevention.

Locations: Vietnam (An Giang, Dong Thap, Kien Giang, Lai Chau, Quang Tri), Cambodia (Battambang, Kho Kong, Prey Veng, Svay Rieng), Lao PDR (Khamoune, Oudomxay, Savannakhet)

Target Groups: Mobile groups of people, migrants, source and host communities in the three countries. Direct and indirect CSW, male mobile populations such as construction workers, truck drivers, seafarers, men in uniform. In some provinces women employed in garment and electronics industry. Health care providers and private pharmacies for STI care. Training of teachers.

Activities: Community based activities: behaviour change communication for host communities and mobile populations through health services and peer education for hard-to-reach groups. Condom promotion: using social marketing techniques and increase of traditional and non-traditional outlets with particular focus along transport and construction sites. Care and management of sexually transmitted infections: upgrading of STI treatment facilities to user friendly services , training of care providers (based on syndromic approach), provision of equipment.

Strengthening the capacity of National and local HIV authorities and selected NGO to develop community-based prevention and care programs: support for behavioural sentinel surveillance or second generation surveillance, training of teachers, advocacy with policy makers.

Funding period: 2001-2003 (30 months)

Funding agency: Asian Development Bank (8 million USD on a grant basis from the Japanese Fund for Poverty Reduction)

Counterparts: In Vietnam: AIDS Division of Ministry of Health, provincial AIDS agencies, selected NGO

Asia Regional HIV/AIDS Project

Representative Office:

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Introduction : The Asia Regional HIV/AIDS Project (ARHP) is funded by the Government of Australia through the Australian Agency for International Development (AusAID), and is implemented in partnership with the Governments of China PDR, Myanmar and Viet Nam.

The A\$ 9.37 million Project is managed under AusAID’s Asia Regional Program, which aims to assist developing countries in east Asia to reduce poverty and achieve sustainable development by tackling trans-boundary development challenges and by strengthening regional cooperation and economic development.

ARHP is designed to target regional action to strengthen the capacity of countries to take a more strategic and evidence-based approach to policymaking, planning and programming to reduce HIV related harm associated with injecting drug use.

The geographic focus of Project activities is in China PDR, Myanmar and Viet Nam. In China, Project activities will mostly take place in Guangxi Zhuang Autonomous Region and Yunnan Province, with limited work at the national level. The design of the Project reflects the need to involve a range of countries, stakeholders and strategies to enable the development of a supportive policy environment for effective approaches to reduce HIV related harm associated with injecting drug use.

Locations: Regional project collaborating with China and Myanmar, initially five pilot provinces in Vietnam. While project activities will be country-based, linkages will be built among regional bodies so that experiences will be shared and the project will have regional impact.

Target Groups: Authorities, government staff from police/public security and health sector, drug users.

Activities: Component 1: “to establish a supportive environment for effective approaches to HIV/AIDS and injecting drug use.” Advocacy through workshops, training videos, training for trainers at different levels. Raising awareness to drug use situation and possible responses. **Component 2:** “expanding effective approaches”: capacity building of key stakeholders at the district level through training and technical support, preparation of Rapid Assessment and Response (RAR) training manuals in different locally relevant languages. Training and support for implementation of a small number of selected projects for 12-18 months. Support for documentation and dissemination of RAR outcomes. **Component 3:** “to strengthen regional cooperation”: regular meetings and experience exchange between regional partners. Participation of senior health/public security officials in conferences, study tours. **Component 4:** Coordination with National partners (see counterparts).

Funding period: 3 years from start (altogether 4 years), in Myanmar and China start in 2002, Vietnam not yet signed.

Counterparts: Ministry of Health, National AIDS Standing Bureau, MOLISA (Department for Social Evils Control), Ministry of Public Security (Standing Office on Drug Control)

Managing agency: International Development Consultancy and Project Managers, Australia

Regional United National Development Programme (UNDP) **“Building Regional HIV/AIDS Resilience” (RAS/02/200) Phase II**

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Introduction : HIV prevalence is rapidly raising in South East Asia, an area with development of six major economic zones and with high population movements across borders. The planned programme will assist the countries in the region to fulfil the UNGASS targets as well as achieving human development by tackling the HIV crisis.

Phase II will focus on population movements and HIV vulnerability through the following components: promotion of an enabling policy environment, capacity-building for mobility systems to facilitate a multi-sectoral development and building community HIV resilience through fostering multi-sectoral partnerships and integration of gender, destigmatization and Greater Involvement of PLWHA. Through establishing intercountry collaboration, the project aims to mitigate socio-economic impact.

Locations: Brunei Daressalam, Cambodia, China, East Timor, Indonesia, Lao PDR, Malaysia, Myanmar, Philippines, Singapore, Thailand, Vietnam

Target Groups: Governments of the participating countries

Activities: promotion of co-operation, strengthening the understanding of the close association between mobility and HIV-vulnerability, technical assistance to build capacity and promote policy formulation and implementation, developing an Early Warning Rapid Response concept. Trainings, regional workshops, provision of information (website).

Funding period: 4 years (estimated time frame: September 2002 to August 2006), budget for 2002 and 2003: 1.5 million USD

Funding agency: UNDP plus additional resources (to be identified)

Counterparts: Intergovernmental entities (ASEAN, International Organisation of Migration (IOM), Greater Mekong River Secretariat, Mekong River Commission Secretariat, multilateral agencies and bilateral donors (UNESCAP, ILO, UNESCO, WHO, UNIFEM, UNDCP, UNICEF, UNFPA, UNAIDS), other regional UNDP, NGO and INGO

