

STRATEGIC FOCUS

The U.S. Centers for Disease Control and Prevention (CDC) office was established in Vietnam in 1998. Since 2003, CDC has been a principal agency implementing HIV programs under the U.S. President's Emergency Plan for AIDS Relief (PEPFAR) in Vietnam. CDC also supports Vietnam's National Tuberculosis (TB) Program (NTP) with increasing direct technical assistance. With Vietnam's entry into middle-income status, the country has embraced financial and program responsibility for HIV and TB treatment and prevention services for its citizens. With the Ministry of Health, CDC Vietnam supports the transition of HIV services to domestic financing and program responsibility. This transition prioritizes continuity and quality of patient services while accelerating toward sustainable HIV epidemic control through concentrated efforts among men who have sex with men (MSM) and people who inject drugs in two priority regions - the Northern Economic Zone and Ho Chi Minh City Metropolitan Area.

CDC has been providing technical support to Vietnam's NTP since 1997 to strengthen efforts to find, cure, and prevent TB, HIV-associated TB, and multidrug-resistant TB in adults and children. These efforts include strengthening capacity to operationalize new and existing TB control tools, building the evidence base for improved TB control and prevention, and using evidence to guide data-driven decision-making.

KEY ACTIVITIES AND ACCOMPLISHMENTS

CDC Vietnam supports the national HIV response through innovations including: National HIV infection recency testing; enhanced partner services; strengthened HIV laboratory and diagnostic capacity for same-day antiretroviral treatment (ART) initiation; universal routine viral load (VL) testing coverage; Undetectable equals Untransmittable (U=U [K=K in Vietnam]) messaging across the treatment cascade; rapid scale-up of pre-exposure prophylaxis services; and development of a national case-based surveillance system. CDC is a lead partner in the evaluation and improvement of TB case finding, optimization of TB treatment for latent and active cases, TB infection control, and surveillance and laboratory capacity building. Key activities and accomplishments include:

- CDC-supported provinces and sites are leading a successful transition of HIV patients to the Government of Vietnam's (GVN's) social health insurance (SHI). At the end of 2018, 94 percent of CDC-supported sites were processing SHI reimbursements for HIV treatment services, with 89 percent of patients insured and 75 percent of CDC-supported provinces subsidizing these enrollments. People living with HIV (PLHIV) began receiving antiretrovirals (ARVs) through SHI in March 2019, and CDC sites were the first to implement multi-month scripting of ARVs through SHI.
- In treatment sites supported by CDC under PEPFAR, 98 percent of tested patients have HIV viral load (VL) of <1000 copies/mL (*source: PEPFAR-Vietnam programmatic data, March 2019*), and 95 percent are virally suppressed below 200 copies/mL (*source: Vietnam Administration of HIV/AIDS Control data, December 2018*), meaning they cannot transmit HIV to their sexual partners.
- CDC partners with GVN, the Vietnam Network of People Living with HIV (VNP+), and community-based and international organizations to utilize the K=K findings to reduce HIV-related stigma and to meet HIV program priorities for case-finding, early testing and treatment, and treatment retention and adherence. Vietnam is a global leader in the K=K movement due to early endorsement of the findings and translation of them in treatment guidelines, public health campaigns, and government and civil society collaborations.
- CDC led the implementation of routine recency testing in PEPFAR priority provinces and, in collaboration with GVN, will establish national recency surveillance across all 63 provinces.
- CDC initiated the establishment of a national HIV case-based surveillance system through technical assistance to GVN.
- CDC supported GVN to increase provider-initiated HIV testing and counseling for over 85 percent of persons with TB by 2018; linked over 90 percent of TB patients living with HIV to ART; and helped guide scale-up of TB preventive treatment among PLHIV nationally.
- CDC's intensified case-finding (ICF)/isoniazid preventive therapy (IPT) cohort study in PLHIV demonstrated reduced TB incidence among persons who received IPT as well as reduced mortality among PLHIV routinely screened for TB. Findings influenced international and national policy changes concerning ICF practices and IPT uptake among PLHIV.
- An ongoing CDC-supported study (Preventing Tuberculosis Overseas Pilot Study) is the first attempt to treat latent TB infection in U.S.-bound migrants prior to immigration to the United States.
- CDC provided technical assistance in key TB surveillance activities, including the epidemiologic review to update national burden estimates in order to understand the impact of program interventions over time and inform the national plan for ending TB in Vietnam.
- CDC has supported Vietnam to independently produce Xpert proficiency testing panels and lead external quality assessment for Xpert laboratory sites in Vietnam and the region.

Our success is built on the backbone of science and strong partnerships.

July 2019 | The CDC Division of Global HIV & TB activities are implemented as part of the U.S. President's Emergency Plan for AIDS Relief (PEPFAR); non-HIV related TB activities are supported by non-PEPFAR funding

Key Country Leadership

Prime Minister:
Nguyễn Xuân Phúc

Minister of Health:
Nguyễn Thị Kim Tiến

U.S. Ambassador:
Daniel Kritenbrink

CDC/DGHT Director:
John Blandford

Country Quick Facts
(worldbank.org/en/where-we-work)

Per Capita GNI:
\$2,400 (2018)

Population (million):
95.54 (2018)

Under 5 Mortality:
21/1,000 live births (2017)

Life Expectancy:
76 years (2017)

Global HIV/AIDS Epidemic
(aidsinfo.unaids.org)

Estimated HIV Prevalence
(Ages 15-49): 0.3% (2018)

Estimated AIDS Deaths
(Age ≥15): 4,500 (2018)

Estimated Orphans Due to
AIDS: 94,000 (2018)

Reported Number Receiving
Antiretroviral Therapy (ART)
(Age ≥15): 145,360 (2018)

**Global Tuberculosis
(TB) Epidemic**
(who.int/tb/country/data/profiles/en)

Estimated TB Incidence:
129/100,000 population (2017)

TB Patients With Known HIV-
Status Who Are HIV-Positive:
4% (2017)

TB Treatment Success Rate:
92% (2016)

TB Mortality:
12/100,000 population (2017)

DGHT Country Staff: 39.5

Locally Employed Staff: 33
Direct Hires: 5
Fellows & Contactors: 1.5

