SPEECH OF THE MINISTER OF HEALTH OF VIETNAM

Questions from the HLM Organizing Committee for the Minister of Health of Vietnam:

Vietnam has one of the highest rates of HIV transmission through injecting drug use, but you’ve had success in preventing new infections through the introduction of methadone maintenance therapy programmes. But harm reduction programmes can be controversial. If you could give advice to other government leaders about how to scale up such programmes, what would that be? (Please reply within 3 minutes)

Reply

Dear Chair Persons;

Ladies and Gentlemen

Thank you all very much for inviting Vietnam to share our lessons in controlling the HIV/AIDS among People Who Inject Drug (PWIDs).

As you may know, 15 years ago, HIV prevalence among PWIDs in Vietnam was around 30%; Nowadays, it is only 10%, and the annual incidence is only 0.4%.

How we can achieve this?

First, drugs addiction should be considered as a “chronic brain disease”, a disease, need to be medically treated, not as “Crime”. It was very hard and took long time to introduce this perception in legal documents, including the Government Decree and the Law on HIV/AIDS control. When this perception was legally accepted, it is much easier for us to scale-up the Methadone program.

Second, we have introduced Methadone program step-by-step, first piloted in 2 major cities (in 2008), together with careful independent evaluation. The evaluation showed very good outcomes, including:
- Improve health status; almost no new HIV cases among Methadone users;
- Improve public security because crimes related to drugs were reduced.
- Improve economy status of Methadone users and their families.

With these outcomes, the Government decided to scale up the Methadone program nationwide. Now, all 63 provinces of Vietnam are implementing Methadone program, with more than 50 thousand patients on Methadone, including take-home-doses.

**Third**, we need to mobilize the consensus and active involvement of other Ministries, like Public Security, Labour and Social Affairs, and local government authorities.

**Forth**, in addition to the Methadone program, we have also widely implemented other harm-reduction programs, including: Distribution of clean needles and syringes, condom use and PrEP for PWIDs and other key populations.

**Finally**, on this occasion, we would like to express my sincere thanks for the valuable support from international organizations and development partners. Your continued support will help Vietnam achieve the 95-95-95 targets by 2025, aiming at Ending AIDS in Vietnam by 2030.

Thank you very much./.