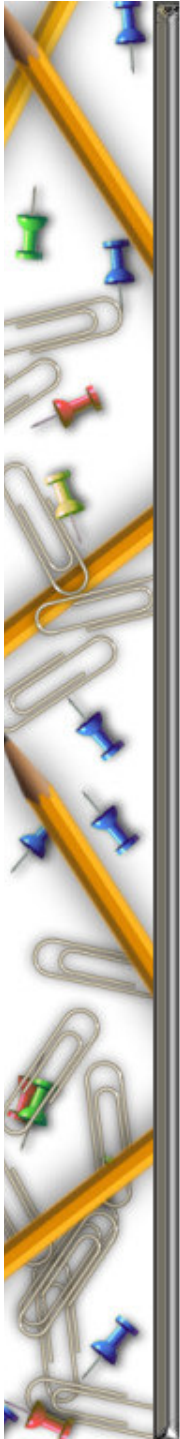


World Bank funded Project on Harm Reduction

Management Unit
on HIV/AIDS Prevention Projects in Vietnam
Hai Phong Health Department



Objective and Approach

Objective: Minimizing new HIV-infected cases

Approach: Reaching out MSM at their communities



Some figures about Hai Phong

- Population: 1.8 million
- Land area: 1508 km²
- 14 districts, 218 sub-districts
- Total No. HIV-infected cases: 7005
- Or 378 cases/100,000 heads



About our project

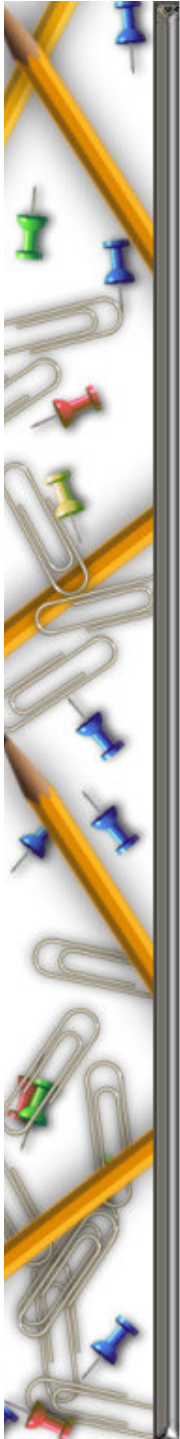
- ➔ 11/2004 -11/2005 funded by UNESCO
- ➔ 5/2006 – 2010 funded by World Bank
- ➔ Partnership with FHI

A vertical decorative strip on the left side of the slide, featuring a repeating pattern of yellow pencils, silver paper clips, and colorful pushpins (blue, green, red) against a white background.

Main Activities

MSM communities visits

- Distribution of condoms and lubes
- Distribution of syringes and needles
- Distribution of promotional flyers



Accomplishment

- Number of site visits: 1889
- Number of clients: 778
- 67.6% clients received counselling services
- 62.34% clients recommended to VCT
- 27.1% clients recommended to STIs
- 9.187 condom 2040 packs of lube distributed



Outcomes (cont'd)

- Integration of communication and VCT
- Tested 207 clients
 - 55 HIV+
 - 32 from male sex workers who were IDUs themselves
- 15 from male sex workers
- 8 from MSM



Outcomes

- Communicated to small groups of client
- Following oil-spreading model
- Combination of communication with distribution of promotional materials and VCT services recommendation



Outcomes

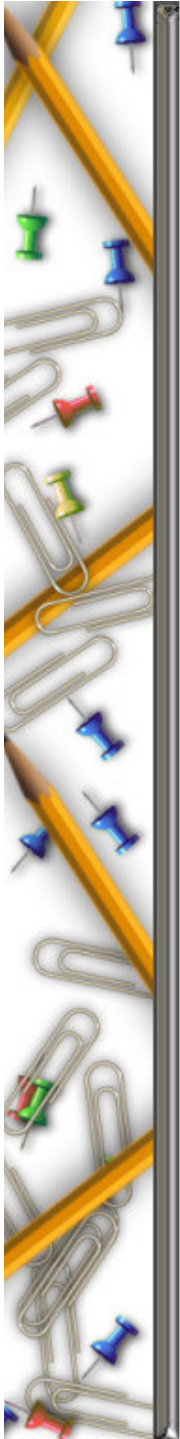
5/2006 – 8/2006 (funded by WB)

- 4000 syringes and needles distributed 10 field workers
- 687 field visits
- 285 MSM clients
- 88 clients recommended to VCT
- 31 clients recommended to STIs testing services



Challenges

- Knowledge on STIs is not adequate
- Drug abuse percentage is high in male sex workers + sharing needle is common practice
- Using condom but in a wrong way or not consistency
- Having anal sex practices but not always applying lube or inconsistently doing so



Challenges (cont'd)

- MSM's ignorance in using health services
- MSM are still facing with stigma and discrimination
- Less support from the government
- MSM always have to hide their sexual preferences



Recommendations

- Recognizing homosexuality is natural trend → minimizing discrimination
- Including male homosexuality into groups which intervention programmes should prioritise
- Special attention should be given to people who sell sex to MSM



Recommendations

- Better coordination among provinces/ regions in HIV/AIDS prevention intervention programmes for MSM
(Sensitive attributes of these communities on keeping their personal information private)
- Skill/knowledge strengthening for field workers through training or study visits
- Funds needed to set up a MSM club.