



Access to anti-retroviral (ARV) treatment among HIV positive women in a northern province of Vietnam

There is a need for a continuum of care and treatment on HIV within public health care system

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PhD Thesis

The purpose of this project was to examine ARV treatment access through the public health system among HIV positive women living in a high HIV prevalence province; and to explore factors that might influence women's initial access and continuation of ARV.

- Pre-, initial and continuing ARV treatments are not always accessible to women living with HIV/AIDS.
- For pre-ARV access, 26% of women with positive HIV tests failed to seek care and treatment after the test. For initial treatment, 40% of all women had unmet ARV needs. For continuing treatment, women had to face the uncertainties of ARV efficiency and availability and socio-economic contingencies, including economic hardship and the loss of family support (Sample: 353 HIV positive women in Haiphong).

Access to anti-retroviral (ARV) treatment is the access to the continuum of onward care and treatment after HIV diagnosis. This approach is meaningful because seeking pre-ARV services is essential for people living with HIV/AIDS (PLWHAs) to enable timely ARV treatment. This helps maximize ARV treatment effectiveness and efficiency (WHO, 2009). As ARV is a life-long treatment, its effectiveness and efficiency also depend on how PLWHAs continue to take the drugs over the years.

Findings

In Vietnam, despite the availability of free ARV through the public health system in provinces hard hit by HIV, this study indicated that the treatment is not always accessible to women living with HIV/AIDS which occur in both initial access, including the failure to seek pre-ARV treatment, as well as ARV treatment entry and continuation. About 26% of the 353 HIV positive women in Haiphong who participated in the study, failed to seek pre-ARV care and treatment after the test. 40% of all women had unmet ARV needs.

Along with ARV treatment, women had to face with the uncertainties of ARV efficiency and availability and socio-economic contingencies, including economic hardship and the loss of family support. This struggle caused them many difficulties while on their therapeutic journey and might have the potential to negatively impact future continuation of ARV treatment.

Partners

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Proposed interventions

To maximize the efficiency of the scaling-up of ARV treatment in Vietnam, gaps in the continuum between HIV testing and treatment should be clearly identified and addressed. In the present study, factors found to be associated with the failure and barriers of accessing ARV treatment at each stage would be considered for the potential intervention.

- **Seeking pre-ARV services after HIV diagnosis at public hospitals.** The quality of post-test counseling needs to be improved. Counselors should help clients to develop strategies of seeking health services and status disclosure after the test and should pay attention to women who had the HIV test by chance, and who do not know other HIV positive family members.
- **Initiating ARV treatment.** Inconsistency in service payment and support to PLWHAs among different donor-funded ARV programs and inconvenient administrative procedures among services in the public health system caused delays in women's initiation of ARV treatment.

The problem can be addressed if different donor-funded ARV programs reach agreement on service payment and support policies from the central level as well as are coordinated by provincial AIDS Center (PAC). Given that referral mechanisms are essential for promoting and monitoring entry to HIV care and treatment services (WHO, 2004b), it is critical to study the functioning of the current referral system in Vietnam.

- **Continuing ARV treatment.** A comprehensive package of social and economic support for PLWHAs needs to be developed, which can be discussed during post-test counseling in order to develop optimized strategies of living with HIV, given social and economic hardship experienced by most PLWHAs. The network of PLWHAs self-help groups needs to receive support from local authorities and health services to integrate their spiritual, psychological, social and economic assistance to PLWHAs in the community.

Publications

Factor associated with the failure to seek HIV care and treatment among HIV positive women in a northern province of Vietnam. *AIDS Patient care and STDs*, May 2010. Nguyen T. Nam; Ib Bygbjerg; Hanne O. Morgensen; Vibeke Rasch.

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