



16th International Inter-Ministerial Conference on SSC in Pop & Dev :
Consolidating the Gains and Reaffirming the Commitments for the
Achievement of the ICPD PoA and the SDGs

Experience from Viet Nam in Improving Universal Access to RH/FP Services



Dr. NGUYEN THI NGOC LAN
Deputy Director General, The General Office for Pop & FP
Ministry of Health, The S.R. of Viet Nam



BACKGROUND

- Total population: 96.2 million, Urban: 35.7%; Rural: 64.3%
- Literacy rate of population aged 15+: 95.8% (Urban: 98.3%; Rural: 94.3%)
- GDP (PPP): 2 540 US\$
- TFR: 2.05, keeps maintained replacement fertility rate since 2006
- IMR: 14.2‰ ; U5MR: 21.4‰; MMR: 54/100 thousand live births
- Life expectancy at birth: 73.5 (Male: 70.9; Female: 76.2)
- Contraceptive prevalence rate: 75.7
- Pregnancy examination from 3+times: 90.2% (U: 96.1; R: 87.5)
- Births attended by skilled health personnel: 94%

Sources: GSO, Population & Housing Census 2019, Pop. change & FP Survey, 2017; UNFPA, WHO

Experiences from Viet Nam

Why has Viet Nam attained these achievements?



Experiences from Viet Nam: Policies

- 60 years of experiences in RH/FP
- Ensuring the rights of access and use RH/FP services
- These rights are specified in the Constitution & laws on health and population sectors
- Ensuring the equal rights between men & women, among regions, ethnic groups and religions in access & use RH/FP services
- Implementing the relevant international commitments related to RH/FP such as MDGs, 2015, SDGs 2030
- Ensuring these policies are implemented in the whole country





Experiences from Viet Nam: Programs

1. IEC, behavior change
2. Developing a system of services to meet the people's demands with requirements of convenience, safety, efficiency and diversity
3. Building the population collaborators at all villages/hamlets to provide IEC, FP services (condom, pills), collect data...
4. Training/enhancing capacities for health workers, midwife in the villages, hamlets, particularly in remote areas, ethnic groups...
5. Diversifying products, services: Free, social marketing...
6. Counseling and health checking up programs for adolescents & youth pre- marriage
7. Counseling & providing RH/FP services for migrants particularly for youth migrants in industrial park /export zone
8. Providing the pre-natal and newborn screening programs
9. Expanding the nutrition for pregnancy & children programs
10. ...



Target groups, Participation & Challenges

- **Target groups:**
 1. Women aged 15-49 in married
 2. Adolescent, Youth, Migrants, vulnerable groups
- **Participation:**
 - Multi-stakeholders: Among Government bodies, Private sector, male involvement, business owners, schools, communities, head of villages/hamlets, religious leaders, reputable persons in the community...
- **Challenges:**
 - Although CPR in Viet Nam is high, IMR, U5MR, MMR is decreasing but it is still high compared to other countries in the world
 - There are deeply differences among regions in Viet Nam
 -



LESSONS LEARNED

1. Making appropriate policies and programs; Strong political commitment
2. Enhancing knowledge, providing information and advocacy for behavior change
3. Developing a system of services to meet the people's demands with requirements of convenience, safety, efficiency and diversity
4. Building the population collaborators at all villages/hamlets...
5. Building the health workers, midwives at the villages/hamlets particularly in remote areas, ethnic areas...
6. Participating of all stakeholders; International cooperation
7. Developing the social economic programs at all level & in the whole country



THANK YOU VERY MUCH!



Email: lgdangvn@gmail.com