Partnerships for Community Mental Health
Part 4 – Chair: Julia Fraser

Vietnam

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Community Mental Health Promotion Program in Vietnam

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1. Program Background

- In 1998: The National Community Mental Health Program (NCMH) was approved by the Prime Minister.
- Steering committee on NCMH Program is formulated and headed by Vice Minister of Health (MoH).
- Central Psychiatric Hospital 1 is responsible for executing the NCMH program.
- National action plan approved by the Prime Minister
- Action plan for each year is approved by MoH.

1. Program Background (cont.)

- Main approach is to integrate mental health care into primary health care.
- 1999 - 2011: The program focuses on implementing the model of Schizophrenia management in the community.
- 2002 - 2011: Pilot model for Epilepsy and Depression management implemented within the community.
- 2006 – 2010: focus on Schizophrenia, Epilepsy and Depression
- Target group: whole population.
2. Program Aims

- Goal: To increase the quality of mental health care services and integrate this care into Commune Health Centres.

- Specific objectives:
  - Mental health care services are implemented in 70% of communes (administrative units).
  - Of patients detected with mental health disorders (schizophrenia, epilepsy and depression) 50% are managed and supported to live in the community.

3. Program Outcomes

- Strengthened mental health system.
- Increased awareness of mental health issues among both health workers and the broader population.
- Provision of services for the poor and people in the remote areas
- Built capacity of health workers, particularly psychiatrists.
- 100% of provinces covered by the program (63/63 provinces/cities).
- 70% of communes are covered by the program for schizophrenia.
- 7% of communes are covered by the program for epilepsy, depression management.
- 49% of patients with schizophrenia are managed. Of these, 70% of patients are stable.
3. Program Outcomes (cont.)
- Increased support for the program by leadership at all levels.
- Vietnam’s program was designed using lessons from global mental health best practice.
- Patients are treated in their communities
- Program resulted in cost savings for patients, families, communities and health facilities.

Some weakness of the program:
- Very limited rehabilitation services for patients
- Overworked health collaborators and health staff
- Insufficient budget for collaborators even though capped at US$2/month.
- Limited mental health education & communication in remote areas due to lack of basic communication equipment (e.g. no loudspeaker).
- Non-drug treatments are not covered.
- Program does not include social support.

4. Challenges and lessons learned
- Mental health legislative framework is not fully developed.
- Poor facilities. We have invested more in Commune Health Centres.
- Mental health workforce is too small and not sufficiently trained.
- Mental health services in the community are not comprehensive: We are focusing more on non-drug treatments and social intervention.
- Lack of social worker job category.
- Lack of collaboration with other ministries, including MOLISA (Ministry of Labor Impairment Social Affairs) and MOET (Ministry of Education and Training).
- Standard treatment guidelines on mental health is not sufficient. We will revise STGs.
- Awareness of mental health issues among both health workers and the broader population remains limited
- Stigma associated with mental health disorders
- Limited budget.
5. Future

- Develop mental health law
- Develop national action plan on mental health for 2012-2020.
- Develop master plan for mental health system.
- Develop mechanisms to attract staff to mental health.
- Establish National Task Force on Mental Health.
- Invest and upgrade mental health facilities.
- Revise standard treatment guidelines on mental health.
- Build capacity of mental health staff and develop mechanisms to attract staff to mental health.
- Strengthen mental health services in the community.
- Expand model on management of common mental health disorders.
- Improve public awareness and advocacy on mental health.

THANK YOU VERY MUCH!