



**Karolinska
Institutet**

Department of Public Health Sciences

**Human Resources and the Response to HIV
in Vietnam: Policies and Health Workers' Perspectives**

ACADEMIC DISSERTATION

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ABSTRACT

Background: An effective response to HIV requires sound national policies, a strong and sustainable health system with a motivated and well-trained health workforce.

Aim and objectives: To analyse development of HIV-related policy and describe health workers' perception and experiences on the HIV response in Vietnam. This thesis has four objectives: i) To analyse development of HIV-related policy in regards to policy content, policy-making process, actors and obstacles to policy implementation; ii) To describe health workers' perceptions and experiences about HIV work and explore factors that influence their job satisfaction; iii) to explore HIV-related stigma impacts upon health workers; and iv) To describe health workers' knowledge about HIV.

Method: Nine policy documents on HIV were analysed and 17 key informant interviews were conducted in Ha Noi and Quang Ninh (Study I). Seven focus group discussions and 15 semi-structured interviews with health workers, purposively selected from national and provincial organisations responsible for HIV response in five provinces (Study II). Fourteen semi-structured interviews with health workers, purposively selected from hospitals and detention centres for drug users and sex workers in Hanoi (Study III). Interviews with structured questionnaires and self-administered questionnaires on HIV knowledge were carried out with 610 health workers in three provinces in Vietnam (Study IV).

Results: Vietnam's HIV policy has evolved from punitive control measures to a more rights-based approach, encompassing harm reduction and payment of health insurance for medical costs of people living with HIV (PLHIV) (Paper I).

HIV work is perceived by Vietnamese health workers as having both positive and negative aspects. Factors related to job satisfaction included training opportunities, social recognition, and meaningful tasks. Factors related to job dissatisfaction included unsatisfactory compensation, lack of positive feedback from supervisors, work-related stress, fear of infection, and stigma because of association with PLHIV (Paper II).

Stigma experienced by health workers may be organised around several themes i) Little social prestige associated with HIV work; ii) Fear expressed by family members; iii) Feelings of being devalued in the healthcare field; and iv) Work-related stress and burnout (Paper III).

Health workers' knowledge about HIV epidemiology, prevention and treatment appeared to be adequate. Knowledge about stigma and discrimination, palliative and nutrition care remained modest. The multivariable linear regression analysis showed that health workers, who do not support isolation and separation of PLHIV and who have a positive attitude to PLHIV, have better knowledge about stigma and discrimination (Paper IV).

Conclusion: Vietnam's HIV-related policy has converged towards internationally recognised approaches. Policies of harm reduction and health insurance for HIV patients' medical costs are now the norm. Stigma is still a major barrier to HIV response. Efforts are needed to change the public image of HIV work, scale up stigma reduction, enhance stress management and improve workplace safety, thereby making health workers feel that their work is both valued and safe.

Keywords: Health policy analysis, job satisfaction, stigma, discrimination, knowledge.

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