

# Family centered care management for vulnerable children in Viet Nam: Practices and tools

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# Overview

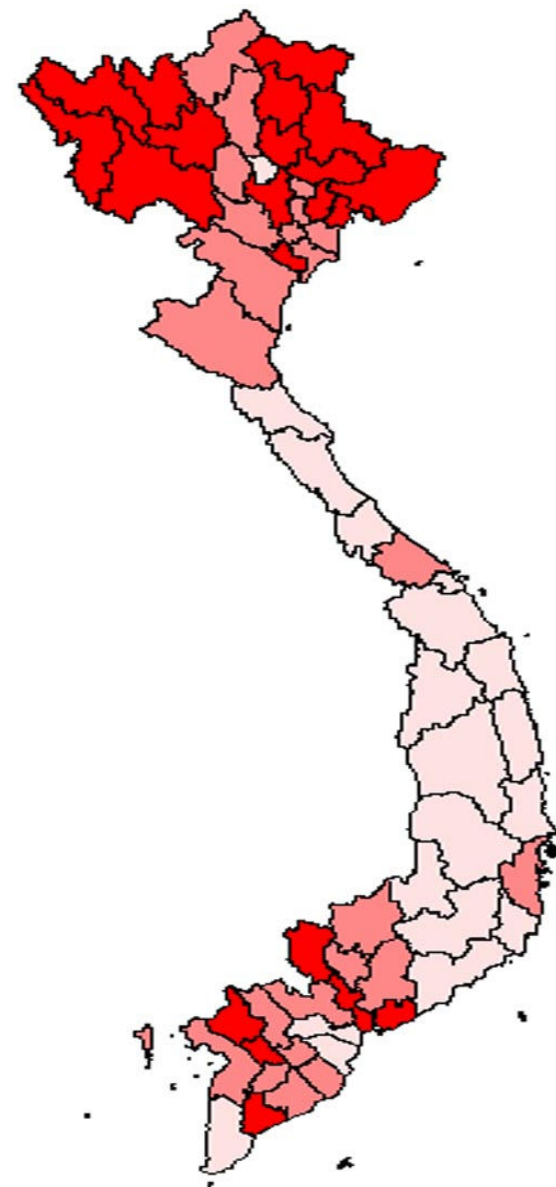
- Vulnerable children in Viet Nam
- Establishing a care management system in Viet Nam
- Lessons learned and next steps
- Key resources

# Vulnerable children in Viet Nam



# Vulnerable children in Viet Nam

- Adult HIV prevalence: 0.43%; estimated PLHIV: 231,000; concentrated in IDU, FSW and MSM
- ~50% of PLHIV fathers have a history of injection drug use
- Vast majority of vulnerable children are cared for by parents or extended family
- Among children affected by HIV, there are an average of 1.5 biological parents as primary caregivers (FHI 2010)
- Families bear the brunt of cost/time in child caregiving
- Social welfare system under-development



# OVC estimates

OVC	Numbers	Source
Estimated number of children infected with HIV	<b>3,818</b> (Range: 2,536-6,110)	UNAIDS estimates (Dec 2007)
Orphans <ul style="list-style-type: none"> <li>- Double orphans</li> <li>- Maternalorphans</li> <li>- Paternalorphans</li> </ul>	<b>1,276,000</b>	GSO, 2007
Children orphaned by HIV	8,874 (5% of total) (Range: 36,695-138,570)	UNAIDS estimates (Dec 2007)

Source: Adapted from NPA 2009

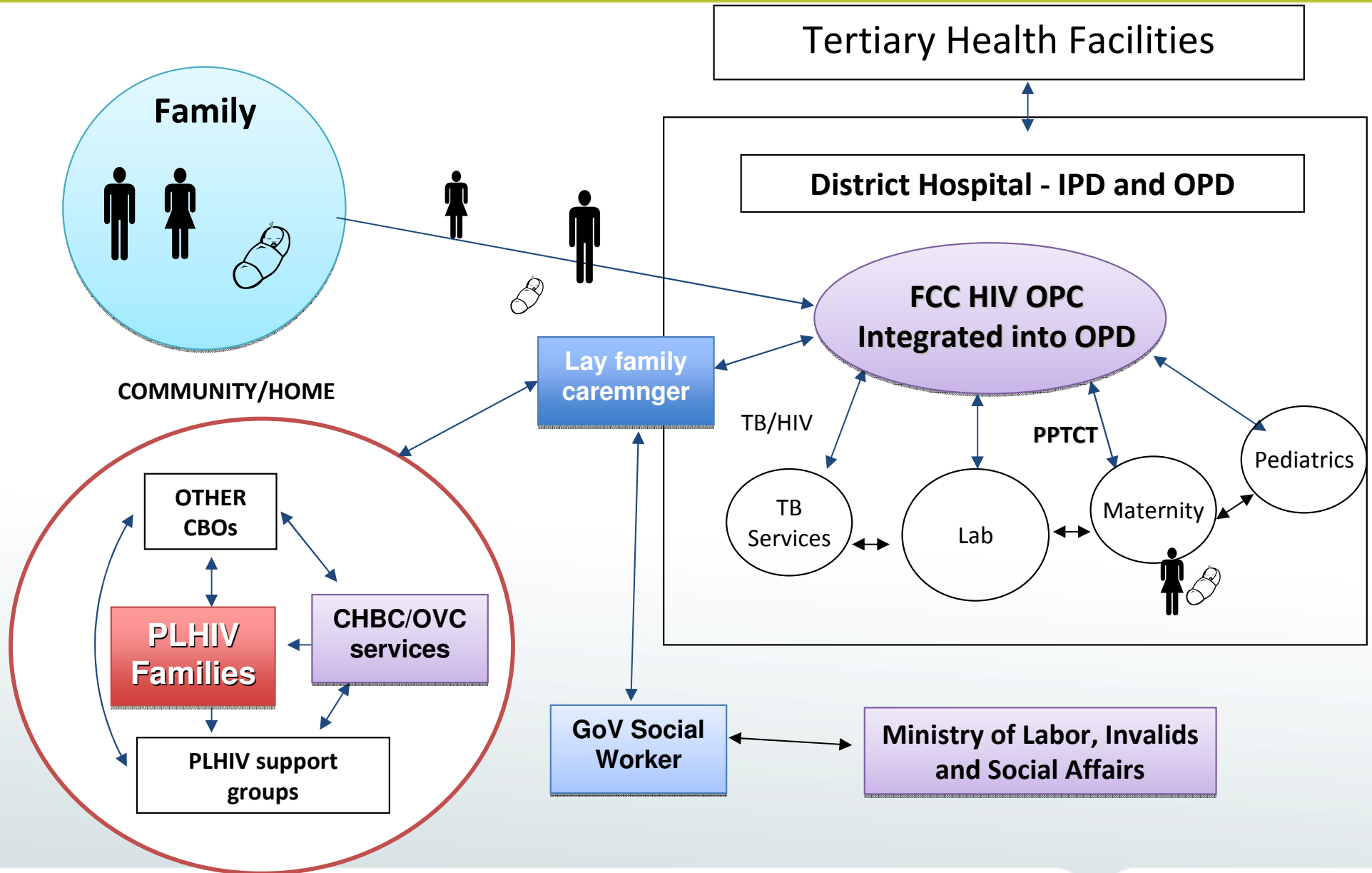
# Social work context – In 2006...

- **Social work:** No systematic training, lack of job responsibilities and remuneration for GoV social workers
- **Lack of coordination:** Care for vulnerable children offered by different GoV and NGO services but no one entity providing routine assessment and follow-up
- **Give one, give all:** Tradition of periodic mass donation for vulnerable children (eg milk, school uniform)
- **Focus on the tangibles:** Services tended to center on food distribution and school materials
- **Low uptake:** Low proportion of children enrolled in the program as compared to adults

# Care management evolution in Viet Nam



# Family Centered Care – Viet Nam



# Care management cycle

- Establishing a relationship with the child/family
- Assessing needs
- Developing a care plan
- Supporting referrals
- Advocating for the client
- Monitoring & follow-up
- Routinely re-assessing needs

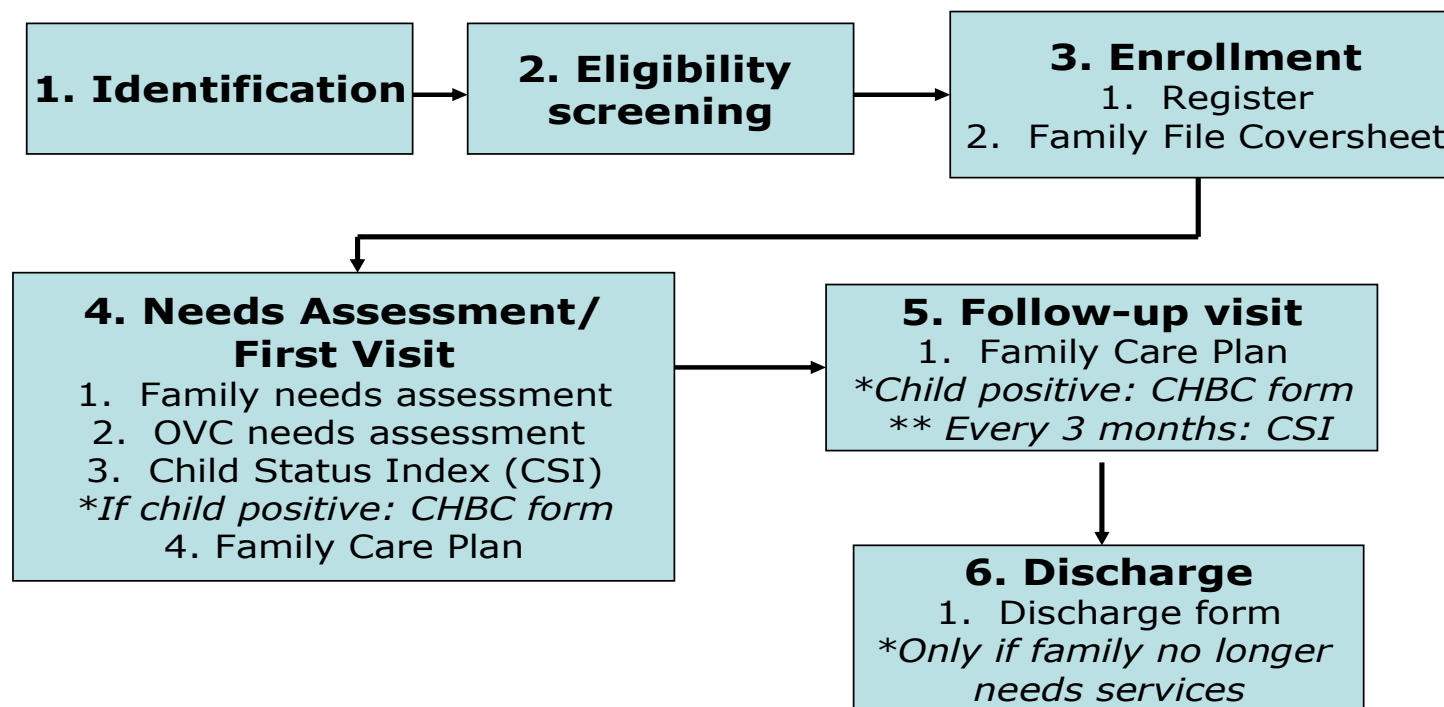


## Supportive factors

- Standards/QI
- Tools/job aids to facilitate process
- Training and mentoring

# Example from Viet Nam : Process and tools

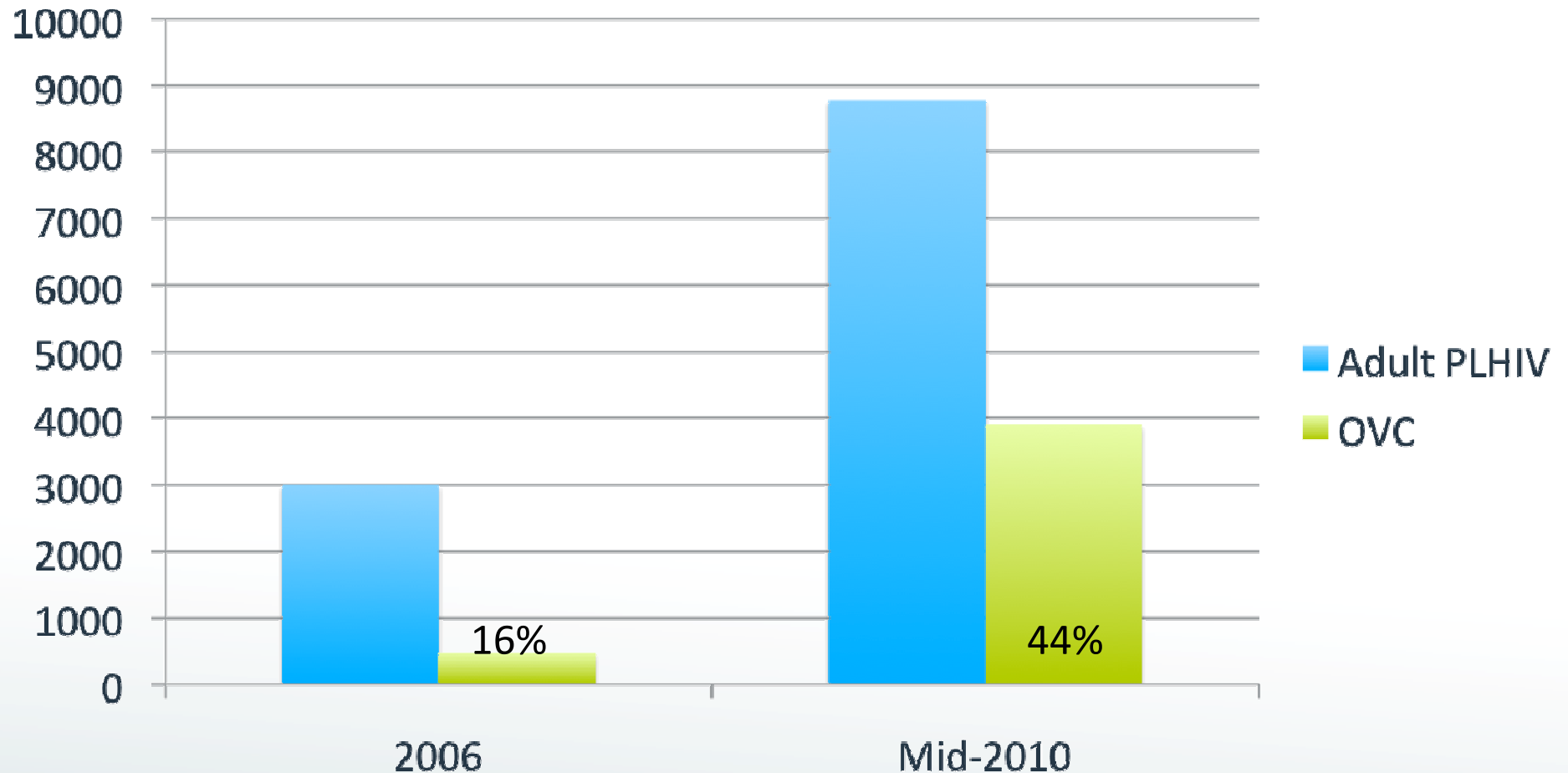
## Case Management Process



# Developing a family care plan

<b>Family Care Plan</b>						
<b>Family Code:</b> _____ <b>Family Name:</b> _____ <b>Prepared by (Name) FCMICW:</b> _____						
<b>Date</b>	<b>Need No. #</b>	<b>Main concerns or needs</b>	<b>Actions to address needs (Direct care or referral)</b>	<b>Person(s) responsible</b>	<b>Date when action taken/ completed</b>	<b>Outcome/ Follow-up</b>
02/07/09	1	Ha's language development is delayed	* Teach the father and grandparents how to read to and interact with Ha *Enrolled Ha in kindergarten	Family case manager (FCM)  FCM	On-going  15/09/09	
02/07/09	2	Hien is not enrolled in school. Family does not have money for uniform, other fees	*Apply for education support grant	FCM	20/7/09	
02/07/09	3	Family poor, not benefiting from social welfare schemes	* Enroll family for social welfare grants	FCM	20/07/09	
02/07/09	4	Father not able to make adequate money to support family	* Develop income generation plan with father	FCM	Next visit	

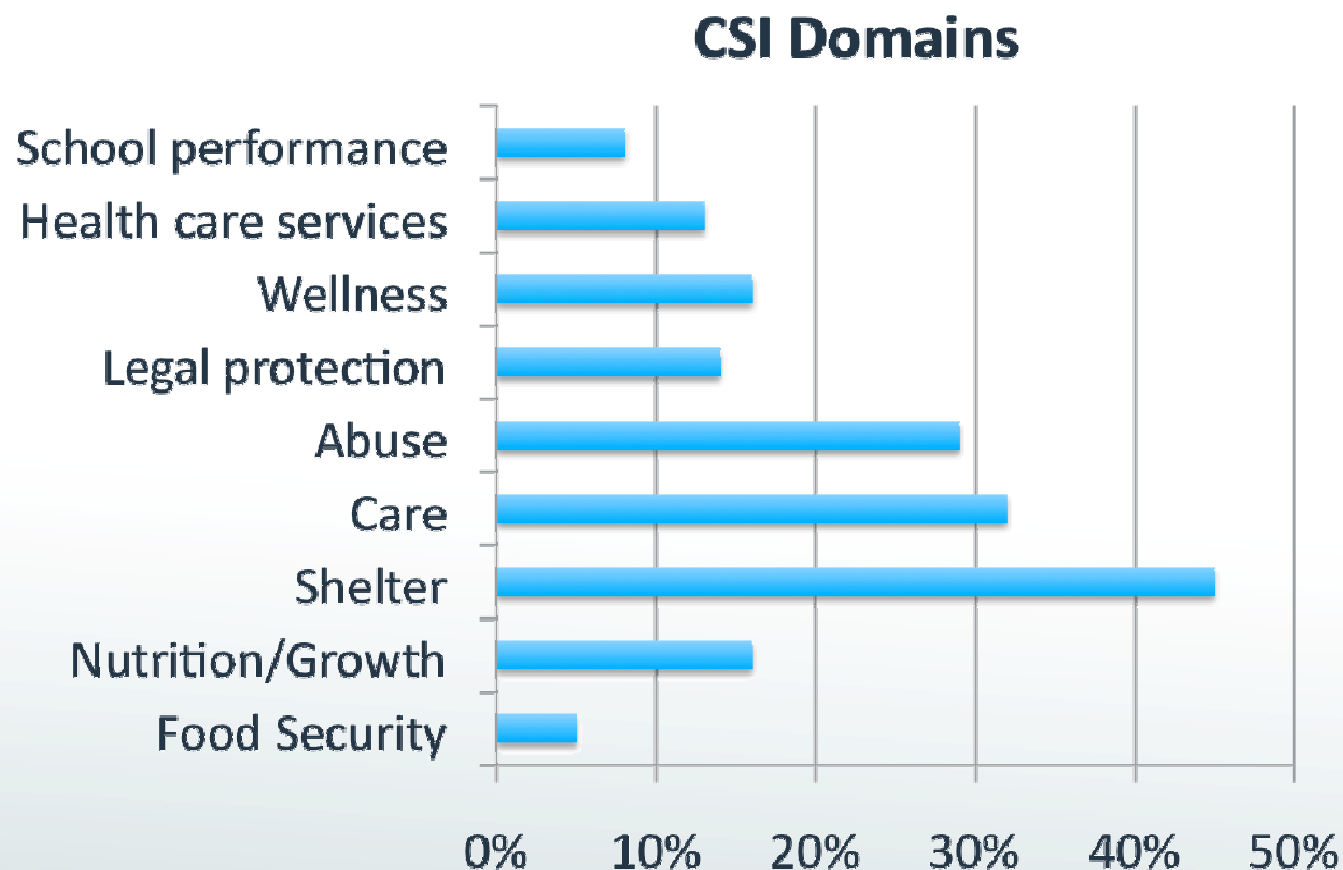
# Viet Nam - Change in proportion of OVC enrolled



- 97% of children in need of care, enrolled in care (mid-2010)

# Viet Nam –CSI changes over time

% change from 2008 to mid-2010:



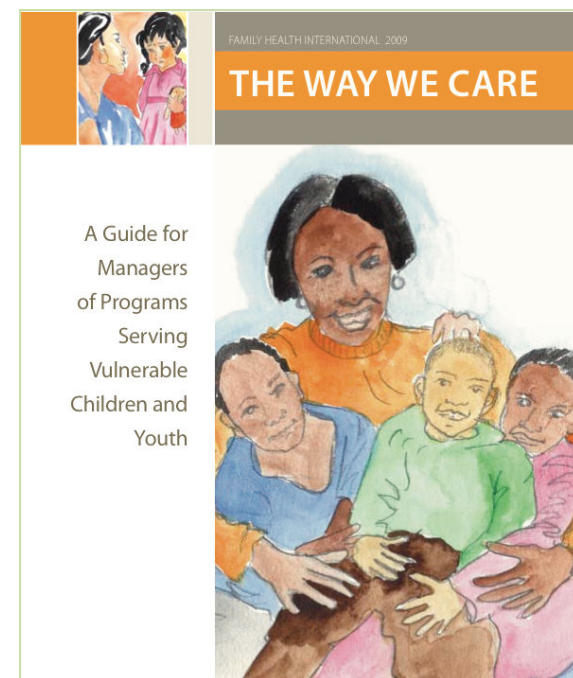
# Lessons learned/next steps

- Change from a *donation* to *assessment and facilitation* orientation takes time and is an uneven process
- Standards, training/mentoring, supervision and job aids are the key to transitioning to a care management approach
- Govt-NGO partnership is critical to overtime improving national social work and protection systems
- Care management highlighted in NPA (2009) and central to new GoV social work *renovation* plan= set to put in place a system of social work training, job codes and remuneration
- Pilots underway to support GoV to build capacity of existing social workers to care for vulnerable children

# QI Tools and Resources

- **Quality Guidelines of the Care of Vulnerable Children and Youth**
- Quality Improvement Toolkit for Vulnerable Children and Youth Programs (guidance, checklist and training)
- **The Way We Care: A Guide for Managers of Programs for Vulnerable Children and Youth**
- Scaling up the Continuum of Care for PLHIV in Asia and the Pacific: A Toolkit for Implementers
- **HIV Counseling Resource Package (UNICEF/FHI/WHO)**

[www.fhi.org](http://www.fhi.org)



# Acknowledgements

- Ministry of Labor, Invalids and Social Affairs
- Ministry of Health
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# Thank You!



# THE CONTINUUM OF PREVENTION AND CARE (CoPC) IN ASIA PACIFIC: successes, challenges and contributions to health systems strengthening

DATE: **SUNDAY, 18 JULY**

TIME: **15:45-17:45**

VENUE: **SESSION ROOM 4**

