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**Research on Reproductive Health
in Viet Nam**
A Review for the Period 2000-2005



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Table of contents

| | | |
|-----|---|-----|
| | Table Of Contents | i |
| | List Of Tables | ii |
| | Abbreviations | iii |
| | Preface | iv |
| | Executive Summary | v |
| I | BACKGROUND | 1 |
| II | OBJECTIVES | 2 |
| III | METHODOLOGY | 2 |
| | 3.1 Criteria for considering studies for the review | 2 |
| | 3.2 Search strategy for identification of studies | 3 |
| | 3.3 Method of the review | 3 |
| IV | FINDINGS ON RESEARCH METHODS | 5 |
| | 4.1 Topic distribution | 5 |
| | 4.2 Study participants | 5 |
| | 4.3 Research methods | 6 |
| | 4.4 Study setting | 7 |
| | 4.5 Report quality | 7 |
| V | FINDINGS OF REPRODUCTIVE HEALTH STUDIES | 9 |
| | 5.1 Safe Motherhood | 9 |
| | 5.2 Family Planning | 18 |
| | 5.3 Abortion | 22 |
| | 5.4 Reproductive Tract Infections | 26 |
| | 5.5 Adolescent Reproductive Health | 28 |
| | 5.6 Infertility | 32 |
| | 5.7 Reproductive Cancer And Menopause | 34 |
| | 5.8 Gender And Sexuality | 37 |
| | 5.9 Cross - Cutting Issues | 41 |
| VI | CONCLUSIONS | 44 |
| | 6.1 Research methods | 45 |
| | 6.2 Findings | 45 |
| | 6.3 Limitations | 49 |
| VII | RECOMMENDATIONS | 49 |
| | ANNEX 1: Introduction of Research Team | 51 |
| | ANNEX 2: Screening Form | 52 |
| | ANNEX 3: Recording/Extraction Form | 53 |
| | REFERENCE | 54 |

List Of Tables

Table 1. Distribution of topics in RH5

Table 2: Studies by participants5

Table 3: Age of participants6

Table 4: Study design6

Table 5: Results of studies6

Table 6: Study setting7

Table 7. Quality of reports7

Abbreviations

| | |
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| ARH | Adolescent Reproductive Health |
| CDK | Clean Delivery Kit |
| CHC | Commune Health Centres |
| CM-5 | Child Mortality Under 5 |
| CPR | Contraceptive Prevalence Rate |
| D&C | Dilatation and Curettage |
| D&E | Gestation Dilation and Evacuation |
| DHC | District health Centres |
| FP | Family Planning |
| FSW | Female Sex Workers |
| HIV/AIDS | Human Immune Virus/ Acquired Immune Deficiency Syndroms |
| ICPD | International Conference on Population and Development |
| IEC | Information Education Communication |
| IMR | Infant Mortality Rate |
| IUD | Intra-Uterine Device |
| KAP | Knowledge - Attitude - Practice |
| LBW | Low Birth Weight |
| MCH | Maternal and Child Health |
| MDG | Millennium Development Goals |
| MMR | Maternal Mortality Ratio |
| MOET | Ministry of Education and Training |
| MR | Menstrual Regulation |
| MVA | Manual Vacuum Aspiration |
| NCPFC | National Committee for Population, Family and Children |
| NCPFP | National Committee for Population and Family Planning |
| NGOs | Non-governmental Organizations |
| Ob/Gyn | Obstetric Genecology |
| PCPFP | Provincial Committee for Population and Family Planning |
| PID | Pelvic Inflammatory Disease |
| PNC | Postnatal care/Postpartum Care |
| RCT | Randomized Controlled Trial |
| RH | Reproductive Health |
| RTIs | Reproductive Tract Infections |
| SAVY | Survey of Vietnamese Adolescents and Youth |
| SMP | Safe Motherhood Programme |
| STIs | Sexually Transmitted Infections |
| TFR | Total Fertility Rate |
| UN | United Nations |

Preface

This publication is the fifth report in the series of lessons learnt and best practices in reproductive health supported by the United Nations Population Fund (UNFPA) in 2007. This report will serve as a critical review of reproductive health studies that have been conducted in Viet Nam during the period 2000 - 2005 in order to draw out gaps in research, contents to be added, and issues to be updated in the coming research programmes.

The report consists of four main parts. First, it provides information on review methodology as well as how the data was collected and reviewed. Second, it reviews the issues related to research methodology: design, participants, setting, outcomes, and quality of report writing. Third, it provides findings from the research on reproductive health. Fourth, it presents recommendations for research design and topics for the coming period in Viet Nam. Finally, the annexes provide additional and more detailed information to round out the report.

We would like to thank Dr Bui Thi Thu Ha and the research team at the Hanoi School of Public Health for their great efforts to complete this report. I would like to thank Dr. Duong Van Dat and Dr. Le Thi Thanh Huyen of UNFPA Viet Nam for their coordination on this research. We also acknowledge agencies, organizations and individuals who contributed to the success of the study. We wish that the report would be useful to policy makers, programme managers, health professionals, researchers, and donors in designing and implementing effective reproductive health programmes in order to achieve the ultimate objectives of Millennium Development Goal (MDG) and International Conference on Population and Development (ICPD) in Viet Nam.

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Representative
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Executive Summary

A total of 221 studies on Reproductive Health (RH) were collected and reviewed for this report and a systematic review recommended by the World Health Organization (WHO) was adopted for review. The report team also used an electronic database from PopMed and Popline as well as hardcopy searches in different training and research institutions or agencies based in Hanoi. The report used 10 keywords covering 10 contents of RH strategy for researching data and research methodology focused on design, participants, setting, outcomes, and quality of report writing.

This work included several studies on the areas of reproductive health. Some of them used the high ranking of evidence-based design, such as randomized control trial, intervention and cohort, about half used a cross-sectional design, and about one-fifth took a qualitative approach.

About half of these studies focused on both men and women, and some on men only. Most study participants were of reproductive age. And only limited data collection was carried out in remote areas.

Overall quality of reporting was limited. About half did not provide a clear definition of the topic investigated and one-third used random sampling. Only one-third reported an ethic approval and just two-thirds reported on data collection time. Most studies used a basic statistical technique. Few of them used multivariate analysis.

This review also reports findings related to specific areas of RH, such as Information-Education-Communication (IEC), family planning, safe motherhood, abortion, adolescent reproductive health, infertility, reproductive cancers, gender, and sexuality

Included also are recommendations related to the research methods and topics that need greater focus in the reproductive health program.

I. Background

Since the International Conference on Population and Development (ICPD) in 1994, the Government of Viet Nam has striven to implement key elements of the Programme of Action. By the end of 2000, the government had adopted the National Population Policy and a new National Reproductive Health Care Strategy for the period 2001 - 2010, both of which incorporated many elements of the broader ICPD framework.

The country had developed and implemented for the first time its National Standards and Guidelines for Reproductive Health (RH) Services and issuance of the National Safe Motherhood (SM) Master Plan and breastfeeding strategies was aimed at reducing morbidity, mortality, and malnutrition among mothers and infants.

Following Demographic Health Survey in 2005, life expectancy continues to rise in Viet Nam, and is up to 71.5 for men and 73.5 for women. Fertility rate has declined to 2.11 (UNFPA, 2005). Couples have increasing access to reproductive health programs, contraceptives, and information that they need to choose the number and spacing of their children. The contraceptive prevalence rate is 79% with modern contraceptive prevalence rate (CPR) of 57%. These and other gains are profound and far-reaching, as they involve some of the most basic and intimate human experiences: birth, death, and marriage.

However, high population growth remains a concern for the country. Declines in fertility and increased longevity mean that societies, developed and developing alike, are now wrestling with the wide-ranging implications of ageing, including the need for health care, pensions, and safety nets, and to ensure the social integration of older persons.

The high incidence of reproductive tract infections (RTIs) and sexually transmitted infections (STIs) is alarming. HIV/AIDS continues to be of great concern to the government. The HIV prevalence rates for males and females are 0.7 and 0.3%, respectively. The incidence of HIV is particularly high among vulnerable populations. Injecting drug users (IDU) dominate the epidemic with males and youth being more at risk.

Viet Nam is yet to achieve universal access to vitally needed reproductive health services and family planning, which is necessary if the country is to achieve the Millennium Development Goals and advance the status of women. Instead, too many women and girls go without these services, leading to unplanned or mistimed births that keep families in poverty, threaten maternal and child health, and increase the rate at which girls drop out of school. Persistent, widespread discrimination and violence against women and girls, meanwhile, also help to perpetuate the cycle of poverty and poor health.

The UNFPA Seventh Country Programme (2006 - 2010)

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