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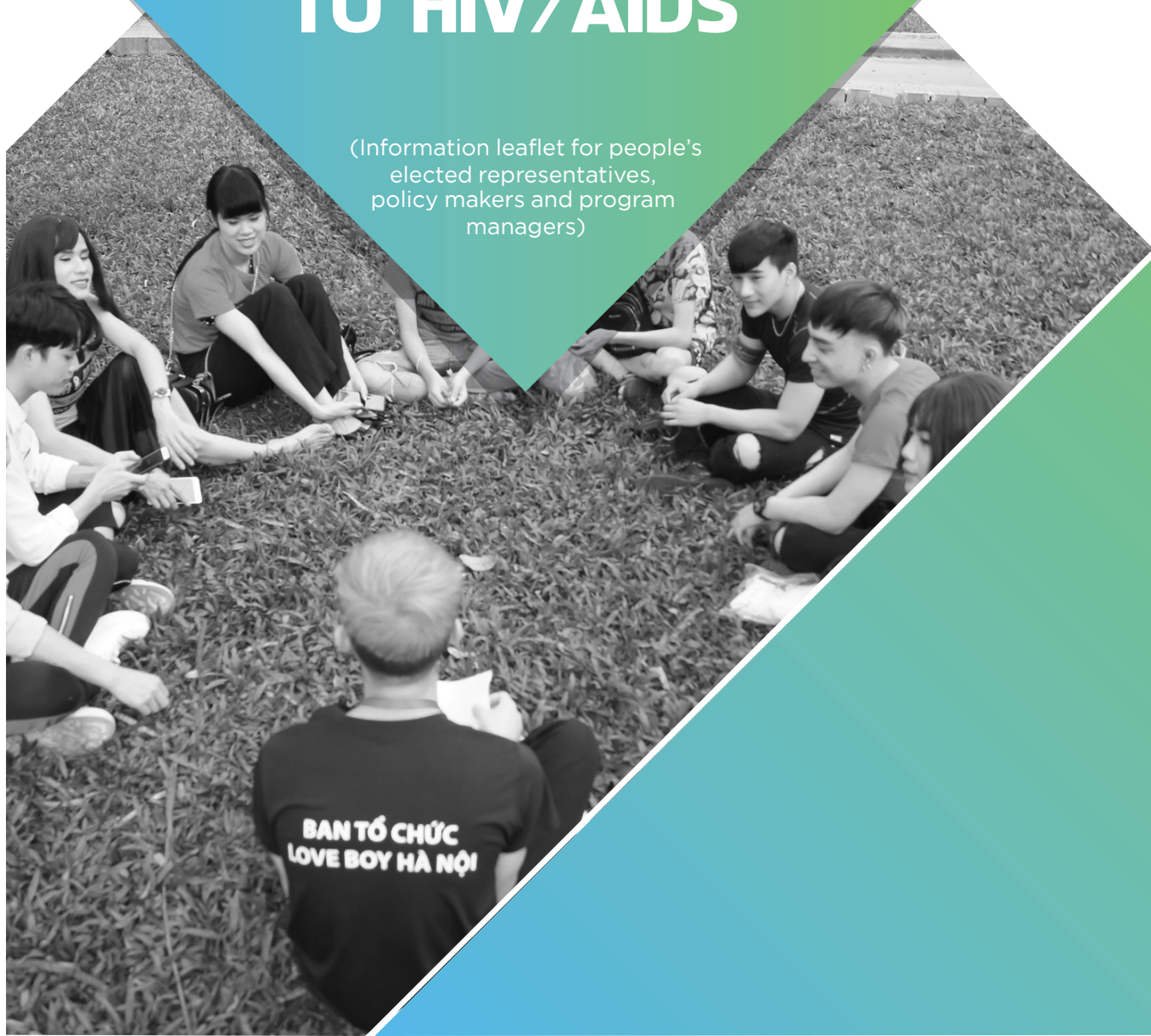


CCRD
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HEALTH POLICY PLUS

SOCIAL CONTRACTING IN RESPONSE TO HIV/AIDS

(Information leaflet for people's
elected representatives,
policy makers and program
managers)



What is social contracting in the response to HIV/AIDS?

Social contracting in the response to HIV/AIDS refers to a legally binding agreement between Party A—the government (or representative of a government entity)—and Party B—an entity that is not part of government (in this case social organizations)—in which Party A agrees to pay Party B for services rendered as per Party A's request, at mutually agreed costs.

Who are social organizations in the response to HIV/AIDS?

Social organizations in the context of social contracting are local non-governmental organizations and community-based organizations that have the capacity to provide HIV services.

Social organizations in the context of social contracting **do not include** professional or socio-political organizations that are eligible for state budget allocation to perform state-assigned tasks.

Why should government contract social organizations for delivering HIV services?

Social organizations in Viet Nam are playing an increasingly important role in the national response to HIV. The Viet Nam AIDS Response Progress Report 2014 estimated that “social organizations have provided 25–50% of some HIV services.”


To date, social organizations working in the national response to HIV have relied mainly on external financial support from international organizations to pay for their work and capacity building. This support has, however, progressively shrunk and, if there is no domestic investment, these social organizations will no longer be able to provide essential services and contribute to the national HIV response. Viet Nam will risk losing non-governmental human resources and knowledge to support government-mandated HIV service provision, and risk reducing access to HIV services for key populations.

Over many years of working in the national HIV response, social organizations' capacities in HIV service provision have been developed and continuously strengthened. Viet Nam should not waste this source of valuable experience.

Viet Nam will not be able to achieve its HIV prevention and “90-90-90” targets to move toward the goal of ending AIDS by 2030 if we fail to further mobilize the contribution of social organizations in the national HIV response.

What HIV services can social organizations best provide?

Social organizations mostly provide the following services:

- Outreach to people living with HIV and key populations (i.e., people whose behavior puts them at risk of HIV) to provide in-person information-sharing and counselling
 - Referrals to connect key populations at risk of HIV with social organizations and trained workers that can provide a home-based or community-based HIV screening test
 - Distribution of and guidance on the use of condoms, lubricants, and needles and syringes for HIV prevention
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- Peer education to introduce people who inject drugs to opioid substitution treatment, such as methadone and buprenorphine
- Referral of people living with HIV for antiretroviral treatment and provision of care and support, including for treatment adherence
- Support for people living with HIV to enroll in the social health insurance scheme
- Counselling and referral for pre-exposure prophylaxis (PrEP) and post-exposure prophylaxis (PEP)
- Support people living with HIV to access other healthcare and social services

What is needed to introduce social contracting into the national HIV response?

For government:

Have trust in and regard social organizations as equal partners in the response to HIV

Allocate resources and create a more enabling legal environment for social organizations to enter into social contracts with the government and access public funds for HIV service provision

Put in place strong and transparent mechanisms for bidding, contracting, and monitoring and reporting for service quality and funding to ensure effective use of public funds by social organizations

For social organizations:

Meet legal conditions as regulated by the law, qualified with sufficient capacity and experiences in effective provision of HIV services

Demonstrate strong management skills and financial accountability

Enter into a contract with the government under the rules and regulations set out by the government

Which countries have used social contracting in the response to HIV?

Many countries are using social contracting to sustainably mobilize social organizations to participate in HIV, health, and other social services provision using public funds.

Several countries in Asia have successfully deployed social contracting in the response to HIV, including China—which has a social, political, and HIV epidemic context similar to Viet Nam—India, Malaysia, and Thailand.

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