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**“Edutainment”: The Role of Mass Media
in the Development of an Effective
HIV/AIDS Youth Awareness Campaign in Viet Nam**

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SIT Study Abroad
Vietnam: National Development and Globalization
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ABSTRACT:

Since the first reported case of HIV in Ho Chi Minh City, Vietnam, in the year 1990, more than 300,000 people have contracted the disease. The Socialist Republic of Vietnam has made considerable progress since that time in disseminating information on HIV/AIDS to the public, utilizing various forms of media. Yet in the rudimentary stages of this national effort, a “social evils” campaign was launched by the government; an emphasis was placed on informing the public as to *why* individuals contract HIV/AIDS, and which negative individual behaviors, or “social evils,” influence the proliferation of the disease. As more of the population was exposed to the government’s mass media campaign to educate about HIV/AIDS, by means of television, radio, posters, and billboards, negative images of People Living With HIV/AIDS (PWHA) became permanently imprinted on the minds of a nation, and a misunderstanding of HIV/AIDS stimulated widespread fear and value driven stigmatization and discrimination of PWHA. Due to a combination of rapid globalization and the prevalence of traditional Confucian values entrenched in Vietnamese culture, it is often difficult for the younger generation to gain a more comprehensive knowledge. Because over half the population of Vietnam consists of individuals under the age of 25, it is crucial that this demographic be the principal target of awareness campaigns. Although young people in Vietnam today have a relatively high amount of knowledge about HIV/AIDS, they are becoming more sexually active and practicing unsafe sex, failing to utilize this knowledge. The Socialist Republic of Vietnam and non-profit organizations need to coordinate to foster a consistent national dialogue involving PWHA, featuring a multi-dimensional media campaign.

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Finally, I would like to convey my appreciation of the trials and discrimination that have been overcome by HIV/AIDS victims in Vietnam, and the young people today who are willing to stand up for the human rights of others, of those living with HIV and AIDS with admirable perseverance.

ACRONYMS:

ADB: Asian Development Bank

AIDS: Acquired Immunodeficiency Virus

BBC: British Broadcasting Corporation

CCP: Community of Concerned Partners

HIV: Human Immunodeficiency Virus

IEC: Information, Education, Communication

MOH: Ministry of Health, Socialist Republic of Vietnam

PWHA: People Living With HIV/AIDS

VTV: Vietnam Television Network

I.) INTRODUCTION:

a.) HIV/AIDS Prevalence and Significance in Vietnam

The country of Vietnam has been severely impacted by the spread of the HIV/AIDS epidemic, and the rapid transmission of the HIV/AIDS virus since the first reported case in 1990 has led the Socialist Republic of Vietnam to implement dozens of national programs, as well as to coordinate awareness campaigns with international cooperation, both governmental and non-profit. In the past, national programs dedicated to the promulgation of HIV/AIDS awareness have utilized Information, Education and Communication (IEC) materials to aid their campaigns. These include television programs, radio broadcasts, newspaper and magazine articles, books, leaflets, pamphlets, art exhibitions, posters, and billboards. Today, media reform has seen a dramatic improvement.

According to a study conducted by the Vietnam Ministry of Health, the World Health Organization (WHO) and the Joint United Nations Program on HIV/AIDS (UNAIDS), results suggest that the number of People Living With HIV/AIDS (PLWHA) would exceed 350,000 by 2010.” The latest Ministry of Health study shows that “the numbers have been climbing even more rapidly than expected...the country has already passed the 300,000 mark in 2005.” However, more concerning is evidence that suggests the HIV infection rate is higher than the statistics currently released to the public.

Asian countries possess the most dynamic and rapid population growth in the world, and likewise the HIV/AIDS epidemic has been spreading rapidly, with the potential to become catastrophic. “Of the 4.8 million new HIV infections worldwide in 2003, Asia accounted for one in every four...Asian numbers represent the greatest

increases since the epidemic came to light.” In Vietnam, “adult HIV prevalence increased from 0.3 percent in 2001 to 0.4 percent in 2003 to 0.5 percent in 2007 (UNICEF).”

Currently estimates reveal that in “one in 75 households there is at least one member who has been affected by the virus” (Collymore).

b.) Youth Living with HIV/AIDS

Over half of the population of Vietnam is below the age of 25. The HIV/AIDS epidemic is “affecting young adults more than any other age group.” Moreover, results from a recent survey assessment of Vietnamese youth conducted by the Vietnam Commission for Population, Family and Children, the Ministry of Health, and the Population Reference Bureau in 2006 reveal that greater than “one-half of all reported HIV cases are among young people between ages 20 and 29,” shifting from “those who are middle aged or older to adults who are 29 years of age or younger. This latter group represents 64% of cumulative cases to date, and those in the 20-29 year old age range account for nearly 54%” (Yamamoto 282). According to an ADB statement, “young people ages 15 to 24 in 1994 in Vietnam accounted for about 10% of HIV-positive people in Vietnam, and that percentage has risen to 40% in recent years” (ADB).

According to Dr. Pham Quynh Huong, of the Institute of Sociology in Hanoi, the demographic of PWHA is clearly changing. More than ten years ago, the main sources of transmission of the HIV virus were sexual contact and drug use. Then the pattern changed; the ratio of PWHA became altered, for the rate of transmission by means of drug use decreased, and the rate of transmission by means of sexual contact decreased only slightly. Unprotected sex is still prevalent, but an increasing number of young

people in Vietnam are becoming sexually active. (Interview, Dr. Pham Quynh Huong). Survey assessments indicate that “young people in Vietnam generally have low levels of sexual activity before marriage,” however this “data represents only youth living at home, who are often less at risk of contracting HIV than young people living outside the home.” Data from the survey also indicates that “some segments within the youth population do have higher levels of sexual activity, and these segments require focused attention” (HIV/AIDS in Vietnam, Population Reference Bureau, 2006). The recent economic development and globalization of Vietnam are leading to “changes in social relations...in Asia’s richest countries, sexual behavior among young people now mirrors that in western countries,” according to a 2008 report of the Commission on AIDS in Asia. “Young people will need information about how to avoid unwanted pregnancies and how to protect them and their partners against sexually transmitted infections, including HIV. They will need sex education and services to help them lead healthy sex lives” (Commission on AIDS in Asia, 2008). Dr. Pham concurs that the “younger generations are finding it easier to have sex than before, at a younger age, and have a greater knowledge about sex, sexuality, reproductive health and HIV/AIDS than did the generation of their parents.”

Certain aspects of Vietnamese culture and national development facilitate the rapidity of the proliferation of the HIV virus among Vietnamese youth. Although young people are increasingly acting on sexual desire, an avoidance of a discussion on subjects considered taboo, including behaviors conducive with the Ministry of Health’s definition of “social evils,” and sex, has become ingrained in Vietnamese culture and serves to facilitate the propagation of HIV/AIDS in Vietnam. Because Vietnam possesses a

worldview and educational system rooted in Confucian values, most of the population is quick to fit individual action into this mold of rigid moral code filial piety and family loyalty. According to Professor Douglas Jardine of Hanoi University, it can be “difficult to disseminate information in Confucian-based societies” about the HIV/AIDS epidemic, due to an inherent “inability to talk about sexual activity, which can often be baffling to outside observers.” He likened this inability to mention sex to the mentality of “American high school students in the 1950’s.” He believes that the social rigidity of Confucianism remained inherent within the population, even during colonial rule, and “lives here the most out of anywhere in Asia” (Interview, Douglas Jardine). This contributes to the current climate of value-driven stigma of PWHA in Vietnam.

There also exists a discrepancy in HIV/AIDS knowledge among youth living in urban and rural areas. A large number of young people living in urban areas possess an accurate knowledge of HIV/AIDS. Statistics released by the Population Reference Bureau reveal that “nearly all young people [between the ages of 14 and 25], both urban (100%) and rural (96%), have heard of HIV/AIDS” (HIV/AIDS in Vietnam, Population Reference Bureau, 2006). Dr. Pham attributes these statistics to overwhelming evidence that young people living in rural areas “start to work at an early age, and have no chance to get this knowledge,” in school or elsewhere (Interview, Pham Quynh Huong, Ph.D). However, knowledge about the disease and how it is transmitted is not well understood. “Among youth living in urban areas, 54 percent have high levels of knowledge about HIV/AIDS, while 42 percent have medium knowledge and 4 percent have low knowledge” (HIV/AIDS in Vietnam, Population Reference Bureau, 2006).

c.) HIV/AIDS in the Mass Media

The utilization of mass media as a channel for the communication and dissemination of HIV/AIDS information has been a very effective tool for HIV/AIDS awareness campaigns in recent years. The progress made in programs designed to raise this understanding has been quite remarkable, and mass media remains the most practical means of conveyance of accurate knowledge about HIV/AIDS, given the high level of public accessibility to various forms of media, particularly television and internet. Employing mass media as the primary resource for the propagation of the HIV/AIDS youth awareness campaign, in particular, has proved to be of inestimable value, for mass media plays a crucial role in raising public awareness of the dangers of the pandemic and in eliminating stigma and discrimination of PWHA.

Many shows performed by PWHA are often on television to generate public understanding. “The Voice of Vietnam radio station broadcasts an average of 700 programs about HIV/AIDS every year, and “central and local television stations give regular updates on the HIV/AIDS situation, broadcast documentaries and talks, and publicize necessary know-how for HIV/AIDS prevention and the prevention of discriminatory behavior.” The Vietnamese magazine, *AIDS and Community Magazine*, possesses a circulation of nearly 30,000 copies per month. Media programs focus in particular on high-risk, or “HIV-sensitive groups such as drugs users, people who regularly practice unsafe sex (prostitutes and their clients), migrant populations, students, young adults, soldiers, and people who live away from home” (Yamamoto, 2006).

The majority of respondents of the Population Reference Bureau survey in 2006 reported that they “receive their HIV information from a variety of sources.” However,

the “most commonly reported source of information is the mass media (97%)” (HIV/AIDS in Vietnam, Population Reference Bureau, 2006). According to Mr. Dinh Hung, Vice President of Vietnam Television, “90% of 84 million people living in Vietnam have access to television broadcasts.” Vietnam Television is the only national television network, and the information and news channels broadcasted are watched by 90% of the population. Mr. Dinh describes VTV as an “arm of the government...a forum for the opinions of the people,” for “truth is our top priority.” Because popular methods of accessing information are changing, and television remains a traditional form of media, VTV understands that they “must improve content and maintain audience attention,” therefore focusing on the development of new technology, including access to television broadcasts on mobile phones.” Vietnam Television is an important branch of the media in terms of communicating HIV/AIDS related information to the public, for they work in “cooperation with the Ministry of Health,” implementing programs specific to HIV, including the channel VTV2, which specializes in health and educational programming.

In teaching young adults about HIV/AIDS prevention, mass media “may be especially useful,” because “media can use elements of popular culture to articulate a message in the young people’s own terms.” In fact, “campaigns seem to be more effective if messages appear in different media simultaneously,” such as music, television, internet, radio, movies and posters. Some forms of media are especially popular among youth, such as music, television and internet. Internet cafés are very popular in Vietnam among youth, and young people are able to communicate with each other, and can find information about numerous topics, including current HIV/AIDS awareness events

around the country.

II. LITERATURE REVIEW:

a.) Media Misrepresentation: “Social Evils” Campaign

Mass media programs have not always conveyed accurate information on HIV/AIDS, or reflected positively on PWHA. One of the most important obstacles to be overcome in the HIV/AIDS awareness campaigns in Vietnam today is the common association of PWHA with “social evils,” defined by the government as drug use and prostitution. This has triggered a public perception of HIV and AIDS themselves as social evils. Government programs employed fear tactics, intending to shock the public with frightening images denoting HIV/AIDS, thereby attempting to prevent a further proliferation of the disease.

However, the fear and value driven stigmatization of PWHA by every level of Vietnamese society has proven to directly correlate with the negative images spread by the government in their “social evils” campaign strategy, for “one of the effects of the campaign appeared to be a widespread and irrational fear of a disease perceived to be a punishment for ‘evil’ behavior.” Ironically, the government may unintentionally be undermining its own sanguine efforts to combat stigma and discrimination with this connotation, for the “social evils” campaign strategy had served to encourage “respondents to hide their situation, as they feared rejection and abandonment by their community.” Another effect, which will be discussed later in this section, was what “seemed to be official approval of stigmatization and comprehensive rejection of anybody suspected to be infected or sick” (UNESCO, 2003).

According to results of a UNESCO/UNAIDS research project, conducted in Ho Chi Minh City and Quang Ninh Province in 2003, the “social evils” campaign strategy “appeared to consist of disseminating only general information, focusing on the risks linked to the disease and illustrating them by frightening images, rather than providing credible and feasible methods of preventing the spread of infection” (UNESCO, 2003). The descriptions of the negative images that served to provoke this fear based stigmatizations seemed to have one important element in common: most were extremely graphic, and seemed to employ shock tactics to deliver a message of death and despair. Many posters on the street would “use highly emotive symbols,” such as “human skulls, bleeding syringes and coffins, or contrast images of sick and dying drug users with images of robust, healthy people.” In many posters, “the words ‘drug abuse’ and ‘prostitution’ appear together with ‘HIV/AIDS,’ implying that these are all equivalent ‘evils’” (Khuat, Nguyen, Ogden. 2004).

Similarly, on television and in newspaper reports, public perception of HIV/AIDS was profoundly affected by sensational and exaggerated stories and imagery. For example, “HIV related stigma has been heightened by a series of press stories in recent years about instances when someone living with HIV has deliberately infected others for revenge or used supposedly HIV infected syringes as weapons in muggings” (Khuat, Nguyen, Ogden. 2004). The association of HIV/AIDS with “social evils” also produced great difficulty in the organization and mobilization of a national AIDS prevention program in Vietnam. It became very difficult to mobilize community funds, and in turn to perpetuate the costly awareness campaigns” (Project VIE, AAID, 2004).

b.) Stigmatization

As a result of negative imagery of PWHA and the association of HIV and AIDS as “social evils” on posters, pamphlets, radio and television programs, stigmatization and discrimination pertaining to HIV/AIDS can have devastating consequences and severely affect the lives of PWHA. Multiple reactions of this fear and value driven stigma are manifested. A fear of transmission through casual contact with an HIV/AIDS victim is common, and many react with gossip and by isolating PWHA. “Cases of termination of employment, denial of treatment at medical centers, isolation from the community, and even isolation from the family are common” (Nyblade, Khuat, Nguyen).

Even now, there are still “many reported incidents of stigma and discrimination in communities, schools, workplaces, the media, and most common, health care settings.” Furthermore, “women tend to be stigmatized more severely than men due to the assumption that HIV is acquired through “immoral” behavior, which challenges the social expectation that women uphold the moral integrity of family and society” (Yamamoto, 274). An example of this intensified stigmatization of women living with HIV or AIDS can be found in the story of Thuy Linh. It has often proved successful for mass media campaigns to make use of celebrities, or famous figures, as role models who can provide an example for youth and demonstrate healthy behavior. However, this strategy has the potential to backfire. “role models who do not practice what they preach or who behave irresponsibly can have a negative impact on the public’s acceptance of campaign messages” (Keller, 2009). In 2007, a popular television show entitled “Vang Anh’s Diaries” became hugely popular. When the boyfriend of the actress who played

Vang Anh, television star Thuy Linh, posted a sex tape of Linh on the internet, the entire country was scandalized. According to BBC, journalist Hung Nguyen remarked that it was “the most scandalous and controversial thing that has ever happened in Vietnam's virtual world,” and Vietnam Television (VTV) dropped the series. Thuy Linh was made to apologize on national television to her parents, “begging for understanding from her fans.” The issue prompts a discussion of the national reaction and reflection that it had on Vietnamese cultural values and the taboo on sex-related issues. It “poses a big question about modern life that the mainstream newspapers need to answer...the question about the sexual revolution among the young people in Vietnam nowadays” (Pham, 2007).

Professor Douglas Jardine found that a problem with the situation was that “they boyfriend got off scot-free. And the girl was trashed.” The image of the actress as a good girl had been irrevocably reversed, and she was shamed in front of her entire country. No one focused on the boyfriend, who had distributed the sex tape in the first place.

Professor Jardine describes this as an example of the Neo-Confucian arena of thought permeating the country, in that women are the ones who take the fall in any abuse of Confucian ideals, whereas men are free, and often encouraged, to engage in extramarital affairs. It is this form of thought that impedes the widespread dissemination of HIV/AIDS information, and obstructs a greater understanding and acceptance of the victims of the disease (Interview, Professor Jardine).

c.) Media Reform

While the IEC campaign of the National AIDS Program has made some efforts to tackle HIV/AIDS related stigma and raise community understanding about HIV/AIDS,

establishing a Medium-Term Plan using slogans such as “living together with AIDS” and (1996-2000), clear methods as to how this can be implemented had previously not been provided (Khuat, Nguyen, Ogden. 2004). According to the Report of the Commission of AIDS in Asia in 2008, an involvement of political and social leaders in the HIV/AIDS awareness campaigns can greatly contribute to public knowledge of the numerous health benefits of condom use (Commission of AIDS in Asia. 2008). However, a number of topics surrounding HIV/AIDS upon which ‘polite society’ looks down have led to a deficiency of statements made by prominent personages in the HIV/AIDS public forum. The idea of fueling a wider prejudice of HIV/AIDS is generally overcome by the threat of social rejection due to a discussion of serious social taboos.

In 2007, Vietnamese Deputy Minister Do Quy Doan remarked at a workshop, attended by over 40 media leaders across Vietnam and designed to reduce stigma and discrimination in HIV/AIDS reporting, that “Media play a pivotal role in HIV/AIDS prevention in our country.” He elaborated that “perhaps no other sector has such incredible power as the media to raise awareness among people of the negative impacts of stigma and discrimination towards people living with HIV, and to change people’s risky behaviors” (Internews Network, 2009). This statement, made by a pivotal political figure in such a public forum, raised the attention of every leading media network as to the gravity of misunderstanding HIV/AIDS and the destructive effects of stigmatization and discrimination on the lives of PWHA. A pamphlet distributed by the CCP (Community of Concerned Partners) states,

“HIV is a virus, not an evil. We need to separate the issue of social evils from HIV transmission. As long as campaigns, communication message and interventions on HIV/AIDS focus on individuals or groups practicing what are considered social evils, the majority of the Vietnamese population will not

recognize that their own behavior or that of their sexual partners makes them vulnerable as well.” Just as the government needs “to remove or revise laws that legitimize HIV-related discrimination,” it needs to remove any remaining negative visual media available to the public, from previous campaigns. However, these efforts need to be coordinated at various levels. “The responsibility for developing these public information campaigns should rest with advertising and media professionals [rather than only Ministry of Health officials]” (Report of Commission of AIDS in Asia. 2008).

d.) Multi-Dimensional Expansion of IEC Materials

Information, Education and Communication (IEC) materials utilized in HIV/AIDS awareness campaigns, and the employment of mass media as the forum for this communication has been essential to the recent progress made. IEC materials remain the central resources and key components in the implementation of HIV/AIDS awareness campaigns. Mass media is the most effective way to communicate this information to youth, and instilling a multi-dimensional, multi-faceted and comprehensive expansion of IEC material will serve to further the impact made on young people. The cumulative impact of the government’s various IEC programs has resulted in a successful mobilization and active participation of mass media, and has “contributed to 70% of the population of reproductive age having basic knowledge on HIV and AIDS modes of transmission and prevention measures” (Khuat, Nguyen, Ogden. 2004). However, many IEC activities remain limited in that they target “only specific groups such as youth, men who have sex with men, people living with HIV and AIDS, sex workers and injection drug users,” and consequently IEC activities “have not resulted in behavior change that

would prevent the spread of HIV” (Khuat, Nguyen, Ogden. 2004).

In 2007, the government launched a “National Program of Action on Information, Education and Behavior Change Communication in HIV/AIDS Prevention and Control Till 2010.” The program’s ongoing objectives are to raise awareness and change behaviors regarding HIV/AIDS prevention and control through an expansion of information coverage, intensification of information, education and behavior change communication in HIV/AIDS prevention and control to all levels, including leading officials, civil servants and the people. A vital component of the program is the augmentation of the “capacity of the system of managing, organizing and conducting information, education and behavior change communication in HIV/AIDS prevention.” Information, education and behavior change communication is defined in the program statement as an essential improvement of “people’s awareness of the danger of the HIV/AIDS pandemic, HIV spread, and HIV/AIDS prevention and control measures,” and serves to encourage “the community to participate in dialogues on HIV/AIDS transmission factors, risk behaviors and factors that increase or reduce risk behaviors; thereby creating the need for information and services” (Ministry of Health, 2007).

The statement of the National Program of Action identifies the people’s awareness of HIV/AIDS as “generally not so high,” in particular “the extent of behavior change and adoption of safe behaviors remains limited.” The program distinguishes people in the 20-29 age group, or adolescents, as the “target group” which HIV activities should continue to aim at. A major problem of the current IEC material utilized in various campaigns is that the communication remains “ceremonial and slow,” were not “carried out intensively, synchronously and extensively in communities.” Another major problem

is that “propaganda and education work fails to create close and regular links between HIV/AIDS prevention and control and other mass movements and campaigns (Ministry of Health, 2007).

The program has focused on coordinating communication channels, diversifying them by establishing clubs, organizing contests, festivals, cultural and art performances, and organizing educational lectures. Based on personal observations and information gained in interviews, the program has made immense progress in reaching out to the public. Events are large, involving many members of the community and attracting large crowds. The media of communication are certainly expanding, and new technology is allowing an even more comprehensive range of education platforms. These will be discussed in the next section.

e.) Current Youth Campaigns and Events: Dance4life

The range of HIV/AIDS awareness-raising activities available now to the general Vietnamese public, many of which are targeting youth in particular, has broadened astronomically since the introduction of the country’s first national HIV/AIDS prevention programs. One certainly encounters these events on a regular basis. In January, 2007, the Voice of Vietnam radio launched a radio program aiming to educate youth about HIV/AIDS. The program focused on changing behavior to prevent HIV transmission, and was broadcast in 64 provinces and cities in Vietnam, in several ethnic languages. It ran as “a serialized soap opera that includes 104 episodes” (Vietnam News Brief Service, 2007). Vietnam Television, in cooperation with the British Broadcasting Company (BBC) aired a 52-part TV drama series, *House with Many Windows*, set to run from September to

November 2008. It is “now being repeated on a variety of other channels including the 15 provincial partner stations,” and “audience research on the series has shown a high level of appreciation and understanding of the HIV messaging in the series” (BBC, 2007) . The same program featured several call-in radio programs, some with presenters as young as 16 years old, and have become extremely successful.

In 2010, it will be 20 years since HIV was first reported in Vietnam. A tentative date for Fall 2010 has been scheduled for an Exhibition on HIV/AIDS in Vietnam, organized by the Center for Community Health Research and Development (CCRD) and the Vietnam Museum of Ethnology (VME) in collaboration with Columbia University. A major ambition of the exhibition is to “create an opportunity for individuals living with HIV/AIDS and those engaged in HIV/AIDS research...to engage with each other and share their experiences, showcase their work for the benefit of the general public.” They will also be reviewing “achievements and efforts made by the Government, local and international organizations and communities in response to the HIV/AIDS epidemic” in terms of services rendered to PWHA and awareness raised (Center for Community Health Research and Development. 2008.)

Recently, I was introduced to the international HIV/AIDS youth awareness campaign, called dance4life, involving youth from around the world in an annual dance competition. According to a dance4life leaflet, “by dancing for life an ever growing number of youthful and dedicated agents of change will help to breakdown silence and taboos.” Vietnam joined the movement in 2006, and currently 14 schools and 4700 students are involved. This year, dance4life in Vietnam hopes to enable over 3,300 “agents of change,” many of whom will be “at-risk youth.” I was able to visit an event in

Hanoi, at which dance4life was raising awareness by offering free condoms and informing youth about the current dance4life contest in Vietnam. The program received a lot of attention, and they continue to advertise the goals and plans for the upcoming year on television, in pamphlets and online. (4life Foundation, dance4life.com)

IV. FINDINGS AND DISCUSSION

a.) Interviews

Interviews central to this project were conducted with various professionals in the field of HIV/AIDS education, prevention work, and research; similar questions were asked, pertaining to the progress made in HIV/AIDS awareness in Vietnam, as well as to the work that is currently being done to prevent a further propagation of the HIV virus. Interviews among five university students were conducted as well, via email. Three female students and one male student were questioned, all between the ages of 19 and 22. Several themes emerged from the interview results. It was acknowledged that there is certainly progress that needs to be made, in both media reform and government prevention strategies, and that there are certain cultural factors in Vietnamese society that contribute to the spread of the HIV/AIDS pandemic.

Personal observations of HIV/AIDS awareness campaigns in Vietnam:

As a volunteer of the Red Cross, stationed in Ninh Binh Province, Amy Childs asserts that the Red Cross is an integral institution in promoting HIV awareness, particularly in rural Vietnam. Many Red Cross programs stress the importance of talking face to face with members of communities in which HIV/AIDS knowledge is relatively

low. She mentions that when large campaigns are instigated by the government, often they become “very political,” stating that the “Ministry of Health linked HIV to social evils, and the PAC (People’s Committee) has it’s own HIV/AIDS agenda,” often taking away resources from smaller, community-level programs. For instance, she says, “there is only a small amount of money in her area.” Direct community involvement in HIV/AIDS awareness activities has proven to be an effective way to correct community misunderstanding of HIV/AIDS and to increase knowledge of transmission and prevention (Interview, Amy Childs).

Many professionals who were interviewed believe that the HIV/AIDS awareness campaigns continue to fail to spread a positive message to the public about overcoming HIV/AIDS. Although Jacquelin Bunt, an international volunteer in Vietnam for the dance4life program, emphasizes that her experience is “purely on a personal basis as dance4life doesn’t have direct involvement with any government campaigns,” she has experienced the media propagation of various HIV/AIDS awareness campaigns, and has “seen plenty posters around Hanoi.” She states,

“I feel that overall people have a pretty high awareness of HIV/AIDS. However, for a long time all the propaganda has been much related to drug use so that now the young people that I meet through dance4life mostly think drugs = HIV = (instant) death. I haven’t met many young people that also know that there are actually medications and that with these medications people can live a relatively normal life. And worse, young people don’t see HIV/AIDS as a thing that could affect them directly.”

Ms. Bunt believes that there is still much progress to be made, elaborating that although “officially there is a non-discrimination policy for positive people, in reality they face grim discrimination including from (or maybe especially from) the police and health sector” (Interview, Jacquelin Bunt).

Dr. Le Bac Duong is the Director of the Institute for Social Development Studies,

based in Hanoi. He received much of his education in the United States, and has been a leading expert on HIV/AIDS in Vietnam. He believes that after the first case of HIV in Vietnam was discovered in 1990, “all messages of HIV were negative,” and “posters portrayed negative images” such as “drug use, rape.” However, he now considers government messages about HIV/AIDS to be “more positive,” and people see the message “don’t discriminate, they are us.” He attributes this to the fact that “the government now pays attention, with more foreign money coming in [from the United States]; and HIV victims now in the spotlight.” Now there is “more research,” and “international programs, like the UN and other NGOs, and they show different pictures.” He says, “the message is getting clearer. There are now official guidelines for mass media, such as how to give a report and send a different image [than before].” There are obstacles, however. He believes that stigmatization still exists, “even in the government, workplace, schools, and hospitals,” adding that “understanding is still not clear...some reporters and reports are still negative, but this cannot be controlled.” Ultimately, “it will take a long time to change society’s attitude, not only in this country” (Interview, Dr. Le Bac Duong).

David Duong, an HIV/AIDS research expert, agrees that there is still much work to be done, for “there is still heavy, heavy stigma in Vietnam.” The change in HIV/AIDS prevention in Vietnam is happening “very, very, very slowly. International NGOs are making a difference, but now the government needs to also adopt, or implement, a new strategy for AIDS awareness and prevention.” He describes a recent HIV/AIDS case in which “the school children that just got turned away from public school by parents in Ho Chi Minh City because they had HIV,” adding that “the government only reversed its

policy in 2007, and therefore, much more work needs to be done” (Interview, David Duong).

Cultural Factors in Vietnamese Society that Facilitate HIV/AIDS Transmission:

When asked if she believed that there exist specific cultural factors in Vietnamese society that ameliorate the HIV/AIDS pandemic, Jacquelin Bunt replied that a “cultural factor or habit which puts women at greater risk of being infected” is when they have, or enter into, relationships with men who visit sex workers “where normally they have unprotected sex.” Women are at risk “even more so as men are supposed to be experienced when they get married, whereas women are supposed to be virgins.” Ms. Bunt also attributes migration as a factor that increases the risk, “especially for women as their husbands go work somewhere else where they are very likely to also start this habit and then return to their villages/families,” where undoubtedly they would infect their own wives (Interview, Jacquelin Bunt).

Professor Douglas Jardine also believes that certain elements of Vietnamese cultural values augment the risk of transmission of HIV/AIDS to women in particular. He recalls seeing a poster used in an earlier HIV awareness campaign in the countryside, advertising an HIV information hotline. He found it “really funny,” for it featured a woman in an ao dai calling the hotline, and asked, “Is a woman in an ao dai more likely to be calling the hotline, or should she be wearing an ao dai when calling the hotline?” An ao dai is a symbol of womanhood, or “every woman”; the poster intended to be positive or neutral at least. He likes the humor in the poster, because it deals with the reality that married women can get HIV/AIDS just as easily as those who aren’t and may be more sexually promiscuous, from the activities of their husbands. He remarks that

images of PWHA used to be centered around women, and that “only recently were men featured at all.” Therefore, men were seen to have little to no sexual responsibility, or in the transmission of HIV/AIDS, but “it was the woman’s duty to make sure she doesn’t have it” (Interview, Douglas Jardine).

Dr. Pham Quynh Huong, of the Institute of Sociology in Hanoi, conducted a majority of the research for her Master’s degree in Thailand. She found that in Thailand, similar problems existed regarding government HIV/AIDS campaign strategies.

Although in the beginning of the HIV/AIDS outbreak in Thailand the “government had a strong policy,” HIV/AIDS was still a problem. She believes that the pattern of HIV infection in Vietnam is similar. Cultural differences regarding the reaction to HIV/AIDS became quite apparent. According to Dr. Pham,

“in Thailand, premarital sex is open, and it’s not a serious problem that causes you to ‘lose face’ as in Vietnam. If a man has ‘extramarital sex,’ in the eye of his wife it is not as serious. It is easier to talk about sex and receive information and to spread knowledge...they don’t hide it.” She mentions that it is more normal for men to have condoms with them, whereas in Vietnam if a man carries a condom it causes him to lose face. This is true among youth also (Interview, Dr. Pham Quynh Huong). In the report of the Commission on AIDS in Asia in 2008, it is mentioned that “it is possible to overcome ignorance among most-at-risk populations in ways that are non judgmental and that do not fuel wider social prejudice and taboos,” for a “study in Thailand concluded that a well designed mass media campaign is a prerequisite for a potentially successful HIV response” (Commission on AIDS in Asia. 2008).

Youth Awareness of HIV/AIDS in Vietnam

Most of the interviewees believe that Vietnamese youth do not have an accurate

view of what HIV/AIDS is, and how it is transmitted. According to Jacquelin Bunt, “they know most of the technical details on how it is transmitted, but what is missed is the link to their personal lives.” She believes that most of the HIV/AIDS propaganda “has been around drug users and sex workers,” and that “youth are definitely not prepared.” It is essential that the “right media” is selected to convey information to youth, or something that they “actually use,” and she poses the question, “perhaps internet is a better medium than TV or radio?” She states, “I believe that with the sensitivity of the issue and the shyness of youth to discuss these issues publicly (even when it is ‘just’ among their peers), it helps a lot to have more individualized counseling services where youth can go with their questions and where for example they can easily buy condoms.” At an international event in Hanoi I was recently able to attend, Ms. Bunt as well as several other volunteers for dance4life were handing out free condoms, and she remarks, “even that led to a lot of giggling among the girls who didn’t want to be seen accepting condoms” (Interview, Jacquelin Bunt).

Dr. Pham also asserts that “youth have an accurate knowledge of HIV, especially in urban areas,” but youth living in rural areas or with lower education have “an inaccurate knowledge of HIV, because they start to work at an early age and have no chance to get this knowledge.” However, there are many programs that aim to improve knowledge, as heretofore described. Dr. Pham also affirms that “peer groups and peer clubs are quite useful”(Interview, Dr. Pham Quynh Huong).

Central to this research were email interviews I conducted with four university-level students. Three of the students were female, and one male. Each student responded correctly to questions asked about the transmission of HIV/AIDS, citing mother to child

transmission, blood-to-blood contact (needles, etc), and sexual transmission.

One of the students, a 20-year-old female at Hanoi University, remarked that she has seen both negative and positive portrayals of PWHA in mass media, but they are primarily positive. She has learned from media programs that it is important to “live with and help those who have HIV/AIDS, so that they can live positively and contribute to society.” She also believes that “the public should be aware of the way that HIV/AIDS is transmitted,” in order to avoid it and to help those who have it, and has attended both classes at school as well as conferences intending to raise HIV/AIDS awareness.

A female student at Hanoi University, age 22, describes the HIV/AIDS education that she received in high school: “someone from WTO came to my school and had a presentation with a video,” and also learned in “a biology lesson, but just a little bit.” She believes that most media awareness campaigns she has seen have portrayed PWHA in a positive way. She is not, however, “impressed by the [propaganda] posters, and [I] learn nothing.” She stresses that “one important thing is that not all HIV people are bad people, sometimes they are women who are just the victims of their husbands or lovers,” and that “all HIV people still can be useful for society; they just need sympathy from others.”

A 19-year-old female student at Hanoi University states that although she was taught how to avoid HIV/AIDS in high school, they were only “fundamental points, we haven’t been taught deeply about this.” She says, “Vietnamese people are afraid of getting HIV through using things that they [PWHA] touched, like chopsticks.” She believes that since the first string of media campaigns intending to raise HIV/AIDS awareness, “things have changed,” and there is a greater level of awareness now. She was impacted, in particular, by “a documentary film about a policemen finding drug users and

in the process was infected. He came home and his wife got it from him. The film says that people can get HIV unintentionally and that other people should sympathize with them.” She believes that “things have been changing positively but they cannot be changed overnight,” and that “people still have negative thoughts about them [PWHA]. People do not treat those with HIV like other people. There is still discrimination.”

A male student in Ho Chi Minh City, age 21, correctly identified the “three ways HIV can be passed,” through “bleeding, [drug] addiction, and from mother to child.” He revealed that he has had sex, and didn’t use a condom. He stresses that “by talking about HIV/AIDS, we have knowledge about it, and we can have the experience of preventing HIV/AIDS.” He believes that HIV/AIDS is shown in a positive way in the mass media, and that he learned “many things” through media programs. One form of discrimination that he has seen toward PWHA is “isolation,” citing some examples as “children who are HIV victims and aren’t allowed to go to school.” If he were to rate the effectiveness of the government’s HIV/AIDS awareness campaigns, as a number from one (poor) to ten (good), he believes they would be a six.

On Mass Media Reform of HIV/AIDS Programs

Many of the interviewees believe that television is a good medium through which to communicate HIV/AIDS information. According to Dr. Le Bac Duong, “television is the most effective,” due to the fact that most people have access to television, and this form of media is able to “send a selective message.” He thinks that the “capacity of television has been strengthened” over time (Interview, Dr. Le Bac Duong). Amy Childs believes that having a “national television station helps,” because it “broadcasts to

different provinces, including rural areas.” She has been able to see this in the rural area in which she works, and states that “in communes, more people watch national television” (Interview, Amy Childs).

On the other hand, some interviews yielded less positive responses about the capacity of television to communicate HIV/AIDS information, particularly to youth. Jacquelin Bunt believes that although television is often “on at all times,” it is “more like background,” for “not necessarily as limited amount of people actively watch TV.” She feels that “it could work, but then it would have to be very specific programs that really ‘glue’ the viewers to their screen” (Interview, Jacquelin Bunt). Dr. Pham Quynh Huong believes that advertisements which are currently on TV “include quite useful messages, and some are about condom use and HIV,” but that there “needs to be more messages like this,” as well as another channel besides TV to “connect to young people, like leaflets and movies.” When it comes to movies, she believes that sometimes there are movies that communicate useful information about HIV/AIDS, giving an example of a “movie about domestic abuse which includes a message about condom use,” adding, “but there is only one movie like this, and other movies, more movies, send a different message that confuses young people” (Interview, Dr. Pham Quynh Huong).

V. CONCLUDING REMARKS

a.) Suggestions for Future Progress

Many suggestions have been made for the future progress of HIV/AIDS awareness in Vietnam. In order to create a more effective platform for youth awareness campaigns, the Socialist Republic of Vietnam needs several goals. One, a national dialogue on HIV/AIDS needs to be fostered, a coordination between governmental organizations, non-profit organizations, and mass media in order to develop more relevant IEC models. At present, there exists a fragmentation of comprehension and focus, and most certainly a lack of communication. “The battle against HIV/AIDS must be coordinated within a national strategic framework that is coherent and fosters collaboration.” Action to develop a nationwide strategy should be, more importantly, immediate. No more time should be wasted. An “effort is urgently needed to develop an appropriate communication strategy that appreciates and capitalizes on societal mores, ideologies and the tradition of rights and responsibilities of Vietnam” (Community of Concerned Partners).

A goal of increasing participatory interventions designed to reduce HIV related stigma and should also *involve* PWHA at a community level. If the government can “identify and strengthen the measures to upgrade the community awareness of HIV/AIDS,” as well as to “strengthen the possibilities of community mobilization in solving HIV/AIDS related issues in the community,” then the results would prove to be more effective in creating a personal solidarity with PWHA and a greater mutual understanding.

Finally, the need to increase and strengthen Information, Education and Communication (IEC) materials is vital. The content needs to be less superficial, and to avoid conveying a judgmental, condemnatory and threatening message about PWHA, and

the presentation more attractive. The association of HIV/AIDS and “social evils” such as drug use and prostitution needs to be eradicated. Old forms of media that still manage to do such need to be removed.

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APPENDIX 1

Sample Interview Questions:

Students:

- How old are you?
- Are you male or female?
- How many years of education do you have?

- Have you ever had sex? If yes, did you use a condom?
 - Do you live with your parents or on campus?
 - Have you ever been taught about HIV/AIDS in school? If yes, how did they teach you?
 - How is HIV/AIDS transmitted?
 - Do you think that the media has portrayed HIV victims in a positive or negative way?
 - Do you know anyone living with HIV/AIDS?
 - Have you seen any programs about HIV/AIDS on television? If yes, did you learn anything from it?
 - Have you seen any HIV/AIDS posters in public places? If yes, did you learn anything from them
 - Have you seen any negative behavior toward HIV/AIDS victims?
 - How would you rate the government's HIV/AIDS awareness campaign?
- | | | | | | | | | | | | | |
|------|---|---|---|---|---|---|---|---|---|---|----|------|
| Poor | | | | | | | | | | | | Good |
| | 0 | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 | 10 | |

Professionals:

- Can you describe any observations of HIV/AIDS awareness campaigns in Vietnam (for example, the “social evils” campaign, Asian Development Bank program)?
- In your opinion, do you believe it is effectively spreading a positive message?
- Have you seen a change in the way HIV/AIDS information has been presented?
- Do you feel that Vietnamese youth have an accurate knowledge of HIV/AIDS?
- Do you think that the media could present the information in a more effective, efficient manner?
- Do you believe that HIV/AIDS is a rapidly expanding epidemic in Vietnam?
- Do you feel that there are certain cultural factors in Vietnamese society that facilitate HIV/AIDS transmission more easily?
- Do you know any government officials or staff of both domestic or international NGOs who are raising awareness of HIV/AIDS?
- Do you think that television is a good medium through which to communicate HIV/AIDS information?
- How do you think that the HIV/AIDS awareness campaign has targeted Vietnamese youth through mass media?
- Do you think that the campaign is making an impact on Vietnamese youth?
- What changes, or progress, would you like to see in the HIV/AIDS awareness campaign?