Key mission findings

1. Over the last few decades Viet Nam has demonstrated outstanding economic development but is now at grave risk of the socioeconomic effects of NCDs.

2. The national NCD strategy 2015-2025 is aligned with the voluntary global NCD targets and includes five action plans in which 12 agencies, as well as the People’s Committees of Provinces and cities, are involved. The strategy emphasises multisectoral action and is already being demonstrated through tobacco and alcohol steering committees as well as in the area of road safety.

3. Viet Nam is committed to innovation. Examples include the Tobacco Control Fund and newly established primary care pilots for NCDs prevention and control.

4. The Joint Mission found evidence of political commitment, with the opportunity for stronger enforcement of laws and regulations.

5. Over the next few years, priority NCD interventions for Viet Nam should be to reduce tobacco use, harmful use of alcohol and salt intake of the population. These require an urgent and sustained whole-of-government and whole-of-society response, including support from political, social, professional and mass organizations.

“We are committed to preventing premature deaths from NCDs in our country. The prevention and control of the NCD epidemic requires all parts of the government and our development partners to work together.”

Dr Nguyen Thanh Long,
Vice Minister of Health of Viet Nam

Key adult NCD mortality and risk factors*

<table>
<thead>
<tr>
<th>Probability of premature mortality from NCDs: 17% (2015)</th>
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<tbody>
<tr>
<td>47% of men (aged &gt;=15 years) smoke tobacco (2015)</td>
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<tr>
<td>28% of adults are insufficiently physically active (2010)</td>
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<tr>
<td>5% of adults have raised fasting blood glucose (2014)</td>
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<tr>
<td>23% of adult men and 21.5% of adult women have raised blood pressure (2015)</td>
</tr>
<tr>
<td>1.7% of adult men and 3.2% of adult women are obese (2014)</td>
</tr>
<tr>
<td>Pure alcohol per capita consumption: 8.7 litres per year (population 15+, 2015)</td>
</tr>
<tr>
<td>57% of adults eat insufficient amounts of fruits and vegetables (STEPS, 2015)</td>
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</table>
Key recommendations

1. Establish an inter-ministerial committee for NCDs (by merging the tobacco and alcohol control ministerial steering committees) to be chaired by a senior member of the Government in order to provide the strongest possible leadership for the multisectoral action that is required to combat NCDs.

2. The NCD Health Promotion Fund should be formed by expanding the existing Tobacco Control Fund.

3. Levels of excise tax on tobacco should be increased to at least 70% of the retail price and the tobacco law fully enforced (e.g. ensuring indoor workplaces, public places and public transport are completely smoke-free).

4. Accelerate completion of the law on alcohol. This law should strengthen the licensing system on retail sales and put in place a set of regulations of marketing for alcohol.

5. Develop and implement a national salt reduction action plan.

6. Re-orient the primary health care delivery system from the current focus on communicable diseases to one that provides long-term and continuing care for patients with NCDs and chronic diseases.

Next steps


2. The Ministry of Education and Training is developing an action plan to support the National NCD Strategy.

3. The NCD service delivery model will be evaluated and expanded to other provinces during 2017 and 2018.

Adding value: actions taken following the mission

1. An NCD investment case was developed with technical and funding support from WHO and World Bank.

2. WHO is supporting the Ministry of Finance to estimate the potential benefits of an initial tobacco tax increase in 2016 and estimates for future tax scenarios.

3. The Government is estimating the probability of premature deaths from NCDs, based on data from commune health stations.