

PUBLIC HEALTH IN VIET NAM

(The following statistics on Public Health services in Viet Nam are not complete, but do give an indication of the scope of the Public Health organization. As the political situation in Viet Nam improves, it is expected that the objectives of the Ministry of Public Health and Social Action will be more fully realized.)

CENTRAL ORGANIZATION

The organization of Public Health in Viet Nam, at first under the direction of the Secretary of State, is now confined to the Ministry of Public Health and Social Action which was organized by decree on November 26th 1950.

The scope of authority granted to the Minister was outlined in detail in a decree dated October 22nd, 1952. It is necessary, however, to refer to a decree by the Chief of State dated September 19th, 1949 to find the details of the Ministerial authority, the principles of which are outlined as follows:

- 1) Creation, organization, operation and control of health establishments or groups;
- 2) Preparation and implementation of the national plan for health equipment;
- 3) Preparation and application of legislation and rules for the medical and para-medical professions;
- 4) Regulation and control of those practicing the medical profession, pharmacy and dentistry;
- 5) Statute of medical and health personnel, organization and control of the Association of Doctors and Pharmacists (L'Ordre des Medecins et des Pharmaciens);
- 6) Control over modern and traditional druggists as well as over the circulation and use of poisonous substances and drugs;
- 7) Organization and control of hygienic, bacteriological, and medical research laboratories;
- 8) Fight against epidemics, for clean living conditions, vaccination, disinfection, etc.
- 9) A health force;
- 10) Sanitary controls for schools and youth centers;
- 11) Prophylaxis and social hygiene;
- 12) Campaigns for sanitary conditions;
- 13) Organization of the Vietnamese Red Cross and relations with the International Red Cross;

REGIONAL ORGANIZATION

Regional health services were reorganized by a decree, November 20th, 1953.

In accordance with this decree, the health services of each region are placed under the authority of a doctor appointed by the governor of the respective regions, with, of course, the approval of the Minister of Public Health.

The Directors General have authorized the opening of clinics and dental services as well as drug warehouses or dispensaries. From the point of view of Public Health, they are particularly devoted to a clean-up campaign, to epidemiology, and to preventive medicine. An important part of their task is the professional training of hygienists, social workers and assistant personnel.

In addition to the eight regional hospitals in South and Central Viet Nam, there is, in each province or municipality, a head doctor appointed by the local government, on the advice of the Director of the Health Service.

#### STATISTICS ON MEDICAL PERSONNEL

According to the latest statistics, there are in the administrative service, sixty-eight doctors in the South, twenty-one in the central region, and forty-one in the North, making a total of one hundred and thirty in all. Other branches of medical assistance include ten dental surgeons, eight druggists, two hundred and eighty-five midwives, one hundred and twenty-four rural midwives, and one thousand three hundred and twenty eight nurses--male and female.

In addition to the above the following figures are those of private practitioners:

South Viet Nam	Vietnamese	168	French	39	Chinese	10	total	217
North Viet Nam		45		6				51
Central Region		14		3				17
		227		48		10		285

#### ENDEMIC DISEASES

Malaria covers three quarters of the country. Fortunately, this region is inhabited by only two and a half million people out of a total population of twenty-four million, or one tenth of the total population. Malaria dominates local pathology. It is an element which must be considered in any study of the development of the country(in particular in the study of labor problems) and it is one to which the Public Health Service gives first consideration.

#### REFUGEE MEDICAL AND SOCIAL SERVICE

The medical and social service in charge of refugees from the North was established on August 3, 1954. Its functions included treatment of sick refugees, evacuation of serious cases, distribution of medical supplies, disinfection of hospitals, planes for transport and the ensurance of hygienic conditions in all new installations.

According to the latest statistics published, the refugee medical and social service had forty two shelter centers under its guidance. In addition, the military health service established a hospital at Gov ap with five hundred beds, medicine, and surgical facilities. This health planning was directed by Dr. Nguyen Xuan Chu.

## STRUGGLE AGAINST TUBERCULOSIS

In application of the August 22nd, 1952 agreement between UNICEF and WHO, the latter sent Dr. Gauthier, an expert on anti-tubercular vaccination, to Viet Nam. Two special nurses went with him and headed two teams which proceeded to carry on a vaccination campaign in the public and private schools of Saigon and Cholon, and then among the general population of the city.

### RESULTS FOR THE SECOND QUARTER OF 1954:

Tested	71,364	
Controlled	63,578	Average tubercular index 65.2
Positive	41,506	
Negative	12,584	

### RESULTS FOR THE THIRD QUARTER OF 1954:

Tested	38,569	
Controlled	31,308	Average tubercular index 58.6
Positive	18,375	
Negative	12,584	

## OPIUM ADDICTION

The struggle against opium addiction should also be mentioned. Within the framework of international conventions, the sale of opium for smoking purposes officially ceased in Viet Nam as of January 1, 1954.

Regulation number thirty three of November 12, 1953, relates to the establishment of an individual record for chronic opium addicts. This record is to regulate the cure treatment of opium addicts in each region and to avoid abusive use of these drugs and an outbreak of new drug habits.

The individual treatment record was released by a commission of experts on drug addicts, composed of five member doctors and medical assistant personnel at Saigon, Hue, and Hanoi.

## PUBLIC HYGIENE AND PREVENTIVE MEDICINE...

The medical service established in practically all schools has been developed progressively to follow increases in the academic population. All pupils are regularly vaccinated each year against smallpox, cholera, and typhoid fever.

Professional training courses for hygienists were inaugurated in September, 1953. Their task is to educate the people on public hygiene. A national committee for public health education has been set up. It is entrusted with programs and with relations with the International Center for Public Health Education in Paris. The programs include informal discussions followed by educational instructive films.

In spite of difficulties, Viet Nam has tried to maintain an active health service, and has continued its development.

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