



Independent observer  
of the Global Fund

## Identifying a Monitor for Viet Nam's Drug Treatment Centres Becomes a Condition of Global Fund Support

The Vietnamese government has agreed to identify an international, independent non-governmental organisation to monitor conditions in all compulsory drug treatment centres where the Global Fund to Fight AIDS, Tuberculosis and Malaria supports interventions.

This commitment is contained in an agreement signed in May 2013 between the Global Fund and the Ministry of Health (MOH) of Viet Nam for an \$85 million HIV grant. The MOH is the principal recipient for the grant. The Global Fund said that as of 1 January 2014, all support for services in these centres will be conditional on this monitoring.

This information was contained in the [31 July issue](#) of Global Fund News Flash.

This development constitutes another step in the evolution of the Global Fund's approach to the problems of human rights abuses in drug treatment centres in South-East Asia, and particularly in Viet Nam. For several years, human rights advocates have taken the Global Fund to task for providing funding to the drug treatment centres.

According to a [report](#) released in September 2011 by Human Rights Watch (HRW), the Global Fund had, since 2008, funded the provision of HIV and TB prevention, testing and treatment services in the centres. In addition, HRW said, the Global Fund had funded the training of the staff of the centres on drug relapse prevention and HIV and TB prevention, treatment and care.

In its report, HRW said that Viet Nam's system of drug treatment centres was ineffective in treating drug addiction, and was characterised by forced labour and inhumane and abusive treatment of detainees.

HRW said that support from the Global Fund and other donors for HIV prevention and treatment programmes in these centres raised questions about the effectiveness of these programmes and about the ethics of addressing HIV while seeming to ignore serious human rights abuses. HRW called on the Global Fund to review its assistance to ensure that no funding supports policies or programmes that violate international human rights law.

In a letter to HRW dated 11 June 2011, then Global Fund Executive Director Michel Kazatchkine said that although the Fund believes that detention centres for drug users do not provide effective treatment and rehabilitation, “depriving detainees from accessing life-saving treatments and the means to protect themselves from HIV and other preventable conditions is inhuman. Until these centers are closed, the Global Fund will not exclude funding effective, evidence-based HIV prevention and AIDS treatment in the centers if detainees are otherwise unable to access these services.” (See [GFO article](#)).

### Steps taken

However, Mr Kazatchkine said the Global Fund had taken several steps to ensure that all activities implemented with Global Fund money were compliant with human rights laws, norms and obligations. First, he said, the Fund reprogrammed existing grants so that they focused solely on support, treatment and prevention of HIV and TB.

Second, Mr Kazatchkine said, at the signing of Round 9 grants to Viet Nam in early 2011, the Global Fund committed to undertake a thorough review of activities in the drug treatment centres conducted with grant funds. Finally, he said, in May 2011 the Global Fund initiated “a broad consultative process that will result in a further reprogramming of Global Fund grants in Viet Nam aimed at disallowing all peripheral activities in detention centers.”

In the News Flash article, the Global Fund said that the international organisation that will monitor the conditions in the drug treatment centres will be required to have extensive experience in monitoring and providing emergency medical relief in treatment facilities and closed settings. It also said that the organisation cannot be directly involved in the daily operations of the centres, must enjoy unimpeded access, and must be empowered to make recommendations to the Viet Nam government based on any findings.

The Global Fund believes that these additional safeguards will help to ensure that the services available in the centres through Global Fund resources are provided on a voluntary basis, and that medical treatment is provided in accordance with international human rights standards.

The Global Fund also said in the article that it has been “closely working with its Vietnamese counterparts to ensure a sensible timeframe for the closure” of the drug treatment centres. The article did not provide any details.

Joe Amon, Director of Health and Human Rights at HRW, is quoted in a 31 July [blog](#) by Antigone Barton on Science Speaks as saying that the requirement for a monitoring organisation is a step in the right direction. Science Speaks is a project of the US-based Center for Global Health Policy. According to the blog, in July Mr Amon co-authored an [article](#) in the International Journal of Drug Policy in which he said that agencies and organisations have taken a less passive approach to the centres in recent years, expressing concerns about the abuses and calling for their closure.

How human rights abuses will be monitored in a country where the government doesn't allow independent organisations to work unhindered remains a question, Amon said. “There are a lot of people who hope there's progress being made in Viet Nam, but the restrictions make it hard to know.”

Mr Amon said that the long-term approach should be to move funding away from the compulsory drug

treatment centres, and to support the release from the centres of people who need medical care.

### Support for key populations

In the News Flash article, the Global Fund announced that the grant signed in May also provides seed funding to the domestic networks of sex workers, people who inject drugs, and people living with HIV. The Fund said that this funding is expected to strengthen the networks' sustainability, their involvement in the national response, and their ability to advocate for the human rights of their communities.

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