

Develop and disseminate an evidence-based healthcare professional training program tobacco use treatment in Viet Nam

The overarching goal is to develop and disseminate an evidence-based healthcare professional training program tobacco use treatment in Viet Nam. We also aim to create capacity for wide spread dissemination by developing and testing a train-the-trainer (TTT) program and creating a network of professionals and organizations including the Ministry of Health (MOH), who are dedicated to advancing evidence-based treatment throughout the health care system. This proposal has strong potential for high impact as it brings together critical public health stakeholders in Viet Nam, including the Viet Nam Steering Committee on Smoking and Health (VINACOSH-the MOH's tobacco control program), Ha Noi University of Medicine and School of Public Health, the Institute of Social Medical Studies (ISMS), a well-established research institute in Viet Nam, and experts in tobacco dependence treatment from New York University School of Medicine (NYUSOM). The team is well positioned to carry out the proposed activities and to create a South East Asian regional training center in partnership with Global Bridges. Key Objectives 1) Develop an evidence-based healthcare professional training curriculum for tobacco use treatment; 2) Develop and test a train-the-trainer (TTT) program in one province; 3) Disseminate the TTT program nation-wide via the Viet Nam Steering Committee on Smoking and Health, and Ministry of Health. Meeting these objectives will create the infrastructure for Viet Nam to become an active participant in the Global Bridges Network and to promote Global Bridges' goal to create and mobilize networks of healthcare professionals and organizations dedicated to advancing evidence-based tobacco dependence treatment and advocating for effective tobacco control policy.



Primary audience(s) targeted for this intervention: The goal will be to disseminate this training curriculum throughout the Vietnamese health care system. However, we will start by developing a robust infrastructure for training the front line health care providers who work in CHCs. The Vietnamese health care system is hierarchically organized into four administrative levels: central, province, district and commune. At the central level is the Ministry of Health (MOH). Next is the provincial-level health system, which consists of Provincial Health Departments and Preventive Health Centers. At the district level, the District People's Committee administers district health centers and district-level hospitals. Within districts the commune health centers serve as the primary access point for public health and preventive care services in Viet Nam, each providing services for an average of 6000-10000 people in

their surrounding community. There are 11,148 CHCs in Viet Nam. CHCs are staffed by 5-6 health workers including physicians, nurses, midwives and pharmacists. In addition, each CHC is supported by a network of 8-10 community health workers (CHWs). Health care providers working in CHCs, the primary target audience for this intervention, will benefit by gaining knowledge to provide patients with accurate information about the health consequences of smoking, health benefits of quitting, and mechanism of nicotine dependence, and the practice skills to conduct an assessment of smokers readiness and past quit experience and provide evidence-based treatment (i.e. counseling and pharmacotherapy). It is important to note that ISMS will manage and implement the Project in partnership with VINACOSH (Viet Nam's MOH Tobacco Control Program) to ensure the full support and coordination with the MOH during implementation. In addition, the training curriculum will be developed in close collaboration with VINACOSH/MOH to ensure that the program meets the training goals of the MOH and will be adopted and disseminating throughout the entire health care system. As noted previously, with implementation of the Tobacco Control Fund, the MOH now has resources to ramp up training of health care workers. What they are lacking is an evidence-based curriculum and model for dissemination throughout the entire health care system. Therefore, the MOH views itself as a key beneficiary of this funding opportunity.

Intervention Design and Methods: The intervention design includes two steps: 1-Develop and implement a core training curriculum and; 2-Create capacity for dissemination by: a) developing a Train-the-trainer (TTT) model and b) implementing a web-based training program.

Evaluation Design: There are two components to the evaluation: 1) evaluation of the initial core curriculum trainings among 100 health care workers and of the master trainer's training of health care workers in 3 districts (TTT), and 2) a 3 month post training assessment of sustained practice changes.

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Implementor: Institute of Social and Medical Studies, Ha Noi, Vietnam
Sponsor: Pfizer and Global Bridges