

COVID-19 in Hanoi-Vietnam: What we are doing

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Abstract

Vietnam is one of the countries which are assumed to have successful management in COVID-19 outbreak. Swift, proactive, decisive approach of government is believed the most important thing to obtain this achievement. In addition, multiple measurements are implemented, such as: track, trace and quarantine; transparent information and social solidarity. Northern Vietnam (Hanoi) is the most popular in all country with approximately 1/2 confirmed cases. This article summarizes which solutions have been applied in northern Vietnam (Hanoi) until now.

Keywords: COVID-19, northern Vietnam, Hanoi

Vietnam is a populated country with nearly 100,000,000 people, sharing the long border and having a daily transport with China. Up to date (21st June 2020), Vietnam has total 349 COVID-19 cases, 22 cases are positive with SARS-COV-2 now, no dead case and 66 days without community transmission¹. Vietnam is considered to have effective strategy to control the outbreak. The north of Vietnam (Hanoi) has a lot of infected clusters, in which total confirmed cases of 121; 7 active cases; and 114 recovered cases (Fig. 1). To restrain and control the spread of outbreak, the government has acted promptly at early stage and many policies are quickly issued and implemented following the circumstance.

1. Swift, proactive and decisive action

COVID-19 has been known from Wuhan, China since December 2019. Until 23rd January 2020, the first COVID-19 case in Vietnam was announced who came back from Wuhan, China. Since then, many strict policies are quickly issued to follow each situation to restrain the spread of outbreak. Only one day later (24th January), all flights between Vietnam and Wuhan has been cancelled². This decision is issued even WHO has not given recommendation yet. One week after the first case (30th January), the National Steering Committee on COVID-19 Prevention and Control is established which composes of 23 ministries and media agency. It is led by Deputy Prime Minister Vu Duc Dam³ to protect citizen health despite financial problems⁴. Since that time, many recommendations from Ministry of Health have been broadcasted, such as: clean hand with soap, wear mask, keep a safe distance. The swift, proactive and strong action were made more clearly in the decision on lockdown of two infected clusters, 40 km from Hanoi. On 13 February, Son Loi, Vinh Phuc which consists 11,000 people went into lockdown. In this time, this village only had 6 community transmission cases⁵. This is the

same with Ha Loi, Hanoi. This village consists 13,000 people with only 1 community transmission case, and the village also went into lockdown on 6th April⁶. On 6th March, Hanoi detected the first positive case who returned from Europe. Several days later, more cases were detected who came back from other countries. Vietnam has quickly suspended all international visas on 18th March, and all international arrivals must be screened and quarantined since 21st March. In end of March, 2 clusters with nearly 50 new cases are community transmission for several days. There is one cluster associated with Bach Mai hospital, Hanoi. The other is in Hochiminh city. Afterwards, from 1st April the government announces nationwide social distancing within 15 days, urged people to stay at home. People can go out for essential purposes, such as to get food, medicines, or seek health care. All unnecessary services such as bar, restaurant, public places are required to be closed. Only companies and services which provide the essential goods were opened. Public transportations were shutdown. People were advised travelling by private vehicle⁷. Country has opened again since 23rd April after 7 days with no new case (Fig. 2). These decisive decisions express the determination of government in combat with COVID-19. The resolutions are swiftly adopted based on the change of situation to help Vietnam always holding the initiative.

2. Track, trace and quarantine

Control of the spread of COVID-19 in Vietnam relies on track, trace and mandatory quarantine. All the communication with confirmed cases is listed. Confirmed cases and potential cases are clarified into 4 groups. F0 is confirmed cases, F1 includes all people who have direct contact with F1, such as who live with or work with. All F0 and F1 cases must isolated in hospital. F2 are people having direct contact with F1. These people are required self-quarantine at home until PCR test shows negative after 14 days. F3 consists people who have direct contact with F2 still have daily action. The people belong to group F2 and F3 are advised to see doctor if they have any symptom of fever or cough as soon as possible, they are also followed up by medical worker in case the condition get worse⁸. Besides, mandatory screening and quarantine 14 days for all passengers entering Vietnam implemented from 21st March. Government provide free meals for all people who are mandatory quarantine. Some time, the number of mandatory quarantine people went up 50,000 per day lead to some challenges to finance and facilities. Although this policy face on these defenses at the beginning of outbreak, now it shows success in preventing virus from community transmission. More than 2 months without community transmission has decrease the number of mandatory quarantine people to around 5,000 people. All cases are passengers returned from other countries.

3. Testing capacity and strategy

Vietnam has been known as the country that has the highest total number of COVID-19 tests per confirmed case in the world since late of March to early May⁹. Vietnam quickly ramped up the total number of testing sites nationwide from 2 sites in early

January to 63 sites in early May. PCR tests were prescribed for all people who were in F1 and F2 groups, passengers entering Vietnam (as description above) and who had symptoms of respiratory system accompanying with suspected epidemiology. These tests were done right after doctors gave prescription and the results were provided after 1 to 2 days. Although Vietnam's testing strategy was not as wide as Korea, the quick approach with suspected cases also helped to prevent the spread of the virus.

4. Transparent information and social solidarity

The government updates on COVID-19 information 2 times per days on television, newspapers, and social media. Moreover, government regularly sends messages through Zalo application for everybody to inform the situation, new policy, and guide them follow the recommendation of Ministry of Health. Besides, the government keeps sending the message to encourage the citizen that no one is left behind, accept temporary financial loss to keep safe all citizen. These actions of government appear to build strong trust in whole residence. One research showed that more than 70% Vietnamese express satisfaction with government's policies¹⁰ and the citizen obey the rule on voluntary basis, such as approximately 80% interviewers said that they avoided crowded places and more than 80% wearing the mask in public places¹¹. The social solidarity is supposed to have created a huge power to combat the outbreak.

Summary

In the past, Vietnam had successful controlled lethal pandemic SARS 2003, Influenza A 2009 and some outbreaks such as Dengue fever, Measles, Hand-food-mouth disease. With experiment in control infectious disease, Vietnam has been cautious of COVID-19 and had swiftly, decisive action against disease at the early stage. Besides, the detection of confirmed case and prompt isolation to prevent community spread were applied. All actions lead to one goal that precaution is the priority task for the combat. This may be a helpful lesson to deal with this fatal pandemic. Vietnam has been taking successful actions on this issue with the broad consensus of its citizens to cope with this outbreak.

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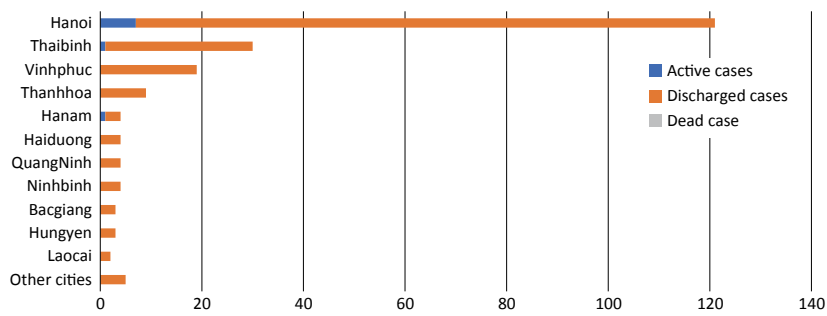


Figure 1. Number of COVID-19 cases in Northern Vietnam by city (21st-June)

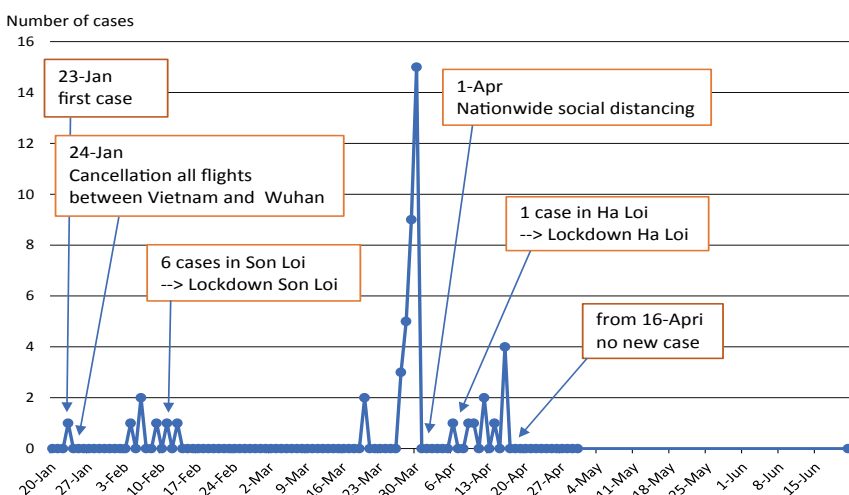


Figure 2. Some actions base on community transmission in Northern Vietnam