



Nha Trang during the COVID-19 lockdown. Source: Pixabay

Vietnam: a COVID-19 success story

By Tran Chung Chau, Michael D. Gregorio and Nicola Nixon
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On the surface, Vietnam is a country of notorious rule breakers. Even the most casual visitor is made quickly aware of the unruly nature of everyday life. A cyclist heads straight through a red light because his daughter is late for nursery school; another speeds 50 meters the wrong way up a one-way street because that is the shortest distance to her front door.

So how does a country that can barely get its citizens to comply with traffic regulations achieve the impressive results it has in managing the COVID-19 pandemic with no deaths and less than 300 cases in a country of 96 million? Comparatively little has been said about Vietnam's undeniable success at this stage of the pandemic.

The first case of COVID-19 was reported in Vietnam on 23 January. Since then there has been a very slow progression to a peak of 288 cases. As of 12 May, there are 47 active cases reported in the country, with no community transmission since mid-April.

So far, Vietnam has successfully faced down two waves of COVID-19. All the first 16 people infected recovered. Then there was a pause of 22 days. From 6 March, the second wave resulted in the first instance of untraceable community transmission. A relatively light 'lockdown' commenced, with strict social distancing and the closing of many, but not all, businesses. Within a month, the second wave was contained.

On 21 April, small businesses opened, social distancing regulations were relaxed, and offices, cafes and restaurants opened. In relative terms, we're back to 'normal'.

So how then did Vietnam control the spread of the virus so quickly and effectively? Our perspective is as follows.

By the time China reported 27 cases, Vietnam's Health Ministry began to issue prevention guidelines including border monitoring, and [when the first death was recorded in China on 11 January, Vietnam closed its northern border with China](#) and initiated health checks at border crossings and airports. Cities and provinces kept their schools closed after the annual Tet holiday celebrations, which began in late January. This is in sharp contrast to

2003, when the SARS pandemic caught the government completely off guard, prompting the development of a comprehensive preparedness strategy, putting the country on a solid footing to respond to a pandemic.

In late January, after the first domestic transmission in Vietnam, the government began providing quarantine facilities for all those suffering from or suspected of having been directly exposed to COVID-19. At their recent peak, quarantine facilities held 67,000 people. They are staffed by a combination of government employees and volunteers, often university students, and - by most accounts - are basic but clean. From mid-February, all those arriving from countries with significant outbreaks, such as Korea, were automatically taken to these facilities. Once borders fully closed on 22 March, all arrivals were required to spend two weeks in state-hosted quarantine. Importantly, as part of the comprehensive strategy, quarantine food and board are provided by the government.

Much effort has gone into tracing those who may have come into contact with someone with the disease. Each patient is assigned a number and a large - and sometimes concerning - amount of information is circulated about them and their movements through government platforms. Information on their movements is subsequently shared via the many social media networks with which people stay updated. In this way, controversial or not, the public has been provided with a significant amount of accurate information that has enabled them to make informed decisions about their health and their movements. In some cases, however, it has also led to the demonisation of particular individuals, easily identified by their description.

By the first week in February, a private company collaborating with the Ministry of Defense had developed a test kit for COVID-19. The testing regime initially targeted those who had come into contact with someone who had tested positive, regardless of whether they had symptoms. The Ministry of Health set up testing stations in kiosks in major urban areas and provided free tests. Hanoi, for instance, had 30 kiosks, most of which were conveniently located on the perimeter of city parks and gardens. This seems to have been a more effective approach to targeted testing than a focus on apparent symptoms alone. The identification of asymptomatic cases also contributed to widespread acceptance of the use of face masks in public. Moreover, the public was willing to be tested in part because health treatment related to COVID-19 has been made free to all.

All parts of government were engaged in the response process, not only the health agencies. For the first time on record, the entire Vietnam People's Army was called up and sent to barracks to await orders, where they remain on stand-by. Local media supported the government's response and encouraged citizen compliance. On 24 January, acting Minister

of Health, Vu Duc Dam, ordered activation of the Emergency Epidemic Prevention Center. Shortly afterwards, 40 mobile response teams were set up and hospitals ordered to prepare. Although state power in Vietnam appears highly centralised, the provinces have considerable autonomy. Overall, however, they complied with the orders emanating from the capital, aware that – as the 2021 national elections and party congress approach – missteps in managing the epidemic would be noted.

The Vietnamese government has approached its public communications with a striking level of transparency. Starting in mid-December, the communications campaign has run daily on television, via mobile phones and on the Zalo platform, addressing the status quo, the unknowns and the potential sequence of next steps.

The results have been to greatly minimise the outbreak.

As [Francis Fukuyama observed](#) a little over a month ago, when the pandemic subsides, both autocracies and democracies will have seen successes and failures. Vietnam's new brand of “[transparent authoritarianism](#)” seems to be succeeding. It builds on decades of control that leaves enough room for agency – the breaking of traffic rules and the like – giving citizens a sense of their own rights and freedoms, while the state and party set and manage the priority agendas away from the average citizen's view or influence.

The rhetoric has been similar this time round. COVID-19 measures have been supported by a constant stream of rousing stories of heroes, sacrifice and resilience that evoke images of war and conjure up nationalist narratives of heroic past military glory to support the state's authority.

But the transparency is new. The state's willingness to share crisis information during the COVID-19 epidemic, to accept responsibility in managing a structured and comprehensive response, and to listen to its citizens, business owners and foreign investors in defining a recovery strategy may well be a milestone in the country's approach to governance.

Also read [this post](#) for another account of Vietnam's success. The post is part of the [#COVID-19 and Asia](#) series. It is co-published with The Asia Foundation.

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