

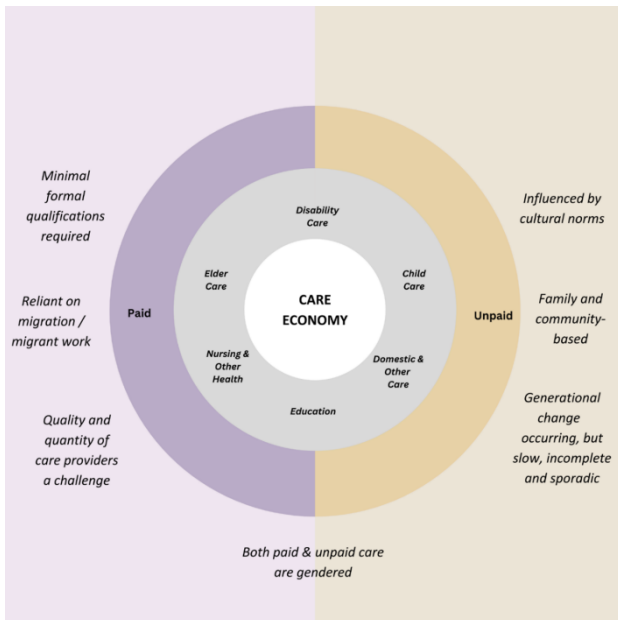
CARE ECONOMY IN VIETNAM

September 2024



DEFINITION OF CARE ECONOMY

Definitions of the care economy vary, however largely relate to two bodies of work: a) paid care work, in fields such as nursing, education, disability care, elder care, and formal childcare; and b) unpaid care work, which is largely undertaken in domestic situations, outside the formal economy. A graphic visualisation of the definition of the care economy as applies to Vietnam is demonstrated in the figure below.



This fact sheet is derived from the landscape study, [Care Economy in Vietnam, the Philippines & Indonesia](#), developed by the Global Institute for Women's Leadership with support from Investing in Women.

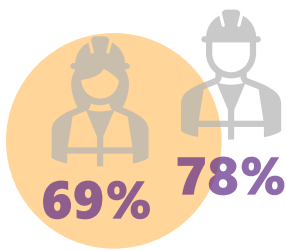
THE GENDERED DYNAMICS OF THE CARE ECONOMY

Women are over-represented in both paid care work and unpaid care and domestic labour. Broader gender stereotypes and norms depict caregiving as unskilled work that is naturally occurring to women, and therefore less valuable than other types of social and economic contributions. Gendered patterns in the care economy are reinforced by the feminisation and female-dominated nature of the workforce, contributing to the devaluation and under recognition of care in both formal and informal settings.

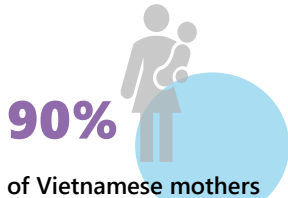


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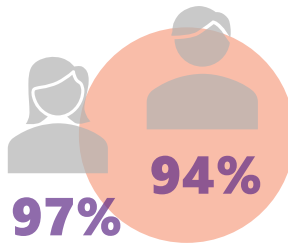
THE GLOBAL INSTITUTE FOR WOMEN'S LEADERSHIP



Labor force participation rate (ILO, 2022)



of Vietnamese mothers identified domestic duties as main reason for not working in formal employment (Dang, et al, 2019)



agreed that childcare is inherently a woman's duty (ISDS, 2015)

With care having only recently been professionalised, aged and childcare qualifications and training are lagging whilst paid care work remains undervalued.

KEY TRENDS BASED ON LITERATURE

Although it is becoming more accepted for women to enter the labour force, men are not necessarily taking on more domestic care duties. This creates barriers to women's economic empowerment.

Effect of the care economy on women's labour force participation

- Entrenched social and cultural expectations around care duties inhibit women's labour force participation and consequent economic empowerment.
- There is disparity in labour force participation rates between men and women due to the need to perform domestic care duties.

Cultural and historical determinants of the gendered division of care

- Gendered expectations contribute to the division of care work.
- Women in Vietnam have internalised the perception that they are responsible for care giving.¹
- Even in situations where they are the primary breadwinner, women are still expected to uphold gender norms.²

The increasing demand for formal care services

- Aging population is one of the factors driving the rising demand for formal childcare services in Vietnam, with women increasingly bearing the double burden of caring for both children and elderly relatives.³
- Likewise, Vietnamese elderly people still have a negative view towards aged care homes⁴, although contemporary shifts in norms related to filial piety and in the provision of social services are anticipated to change this.
- The family is expected to feature less centrally as the main care provider for elderly people due to changes in social and cultural norms over time.

Professionalisation and regulation of the paid formal care economy

- Caring for the elderly or sick has not traditionally been seen as an occupation, and in the past, only poor or low-status people would accept such work.⁵
- There are no approved qualifications for caregivers⁶ and only 956 health workers are trained in geriatrics across in Vietnam.
- Consequently, most elderly care services continue to be provided by family members or volunteers lacking in formal care qualifications and training.⁷

¹ Institute for Social Development Studies, 2015. 'Social Determinants of Gender Inequality in Vietnam', https://vietnam.embassy.gov.au/files/hnoi/ISDS_Report_Binh%20dang%20gioi_EN_PDF-2.pdf

² Ibid.

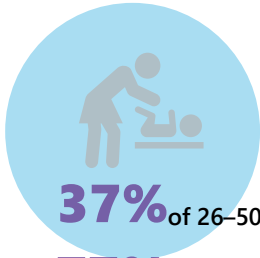
³ International Finance Corporation, 2020. 'Tackling childcare: the business case for employer-supported childcare in Vietnam', World Bank Group, Washington, DC, https://www.ifc.org/wps/wcm/connect/378a0839-d8d3-45e9-9ba8-20334d9e3cf7/Final_IFC_Childcare_Vietnam_Web.pdf?MOD=AJPERES&CVID=nkwOzPZ

⁴ Chan, A., 2020. 'Asian Countries Do Aged Care Differently. Here's What We Can Learn from Them'. The Conversation. 22 October 2020. <http://theconversation.com/asian-countriesdo-aged-care-differently-heres-what-we-can-learn-fromthem-148089>

⁵ Komazawa, O. and Saito, Y., 2021. Coping with rapid population ageing in Asia: Discussions on long-term care policy and cross-border circulation of care workers

⁶ Asian Development Bank, 2022. The Road to Better Long-Term Care in Asia and the Pacific: Building Systems of Care and Support for Older Persons.

⁷ Komazawa, O. and Saito, Y., 2021. Coping with rapid population ageing in Asia: Discussions on long-term care policy and cross-border circulation of care workers.



37% of 26–50-year-olds

77% of 51-year-olds and said women should be the family's primary caregiver (Mani-Kandt, 2022)



35% **44%**

children in rural and urban areas attending childcare in 2016 (Dang, et al, 2019)

Geographic and class intersectional aspect of the care economy creates further challenges in improving access to care services.

- Vietnam's government is working to address a lack of training for care providers by expanding the Elderly Home Care volunteers' program from four to 12 provinces to provide better education to informal carers.⁸
- Women are overrepresented in the formal care sector in Southeast Asia. Across the region, paid care workers, many of whom are women, are undervalued, underpaid, and have few employment benefits.⁹

Migration, the care economy and women's economic status

- Transnational labour migration is increasingly common in Asia, especially amongst women, many of whom enter the paid care economy overseas.
- Countries including Vietnam are experiencing a 'care deficit' as women that families have traditionally relied on for domestic care needs migrate for work, which also increases the caring responsibilities for women who remain behind.

Generational shifts in attitudes towards gender norms and labour force participation

- Studies have revealed a trend towards more equal divisions of labour between genders, challenging deeply entrenched gender norms.
- Attitudes towards the gendered division of unpaid labour are shifting as younger generations enter the workforce and start their own families, but further efforts are still needed to transform cultural norms.

An intersectional approach to care

- In Vietnam, about two-thirds of the elderly were living in rural areas as of 2015,¹⁰ suggesting that the burden of care placed upon rural women may be significantly larger than elsewhere in the country.
- Poorer women with fewer socio-economic resources have less options to navigate care. Wealthier families can outsource their care work to others (often, poorer women).
- Other intersectional gaps exist for research and policy development such as on experiences of carers from the LGBTQIA+, and different ethnic and religious communities.

Understanding policy approaches and interventions

- Gaps remain in understanding which care interventions deliver positive outcomes without perpetuating gender inequalities.
- There is opportunity for investment – particularly in mapping disparate, disconnected, and localised interventions.

KEY ISSUES IN CARE PROVISION

Early childhood education and childcare

- Early childhood education is an integral part of the care economy. Despite the Government of Vietnam's efforts and commitments to increase the proportion of children under three in preschool to 35%

⁸ Royal Commission into Aged Care Quality and Safety, 2020. <https://agedcare.royalcommission.gov.au/sites/default/files/2020-09/Research%20Paper%20-%20Review%20of%20international%20systems%20for%20longterm%20care%20of...pdf>

⁹ Asia Foundation, 2023. 'Towards a Resilient Care Ecosystem in Asia and the Pacific', <https://asiafoundation.org/publication/toward-a-resilient-care-ecosystem-in-asia-and-the-pacific/>.

¹⁰ See 5



THE ROLE OF THE PRIVATE SECTOR

The private sector can contribute to quality assurance, compliance with regulations, testing interventions, and evaluating program effectiveness.

Even companies not directly involved in the care economy play a part in creating a carer-friendly environment with adequate rights and protections. There are significant gaps in understanding the private sector's role, particularly in reducing gendered inequalities and ensuring the effectiveness of policies (e.g., leave practices). Moreover, understanding how the private sector could foster growth in the care industry is critical.

by 2025,¹¹ it is not meeting the rising demand for care services, particularly in urban areas.

- On average, only 22.7% of Vietnamese children were enrolled in pre-primary education facilities in 2020; research suggests it is a lack of services rather than unwillingness of parents driving this low enrolment rate.¹²
- This has significant ramifications for the care economy as it prevents parents, usually mothers, from entering the formal labour force.

Aged care services

- Vietnam has a limited state-run aged care system. The Law on the Elderly saw initiatives being implemented to support the elderly, including social protection policies for older people from low-income families or without family members to support them.¹³
- However, this system heavily utilises informal carers, primarily women, to provide majority of primary care for elderly people. There are no home care or informal care supports and family carers do not receive benefits, except for in special circumstances.¹⁴

Professionalisation of care work

- Prescribing professional standards for and training of care workers rests at a national level with the Ministry of Labour, Invalids and Social Affairs. Training for care workers is not yet mandate.

REMAINING GAPS AND OPPORTUNITIES



Shifting social norms.

Attention could be directed to evaluating what interventions have been most impactful and cost-effective in shifting social norms surrounding caregiving.



Working with organisations to establish standards.

Development of best practice guidelines, benchmarks and standards on policy and practice in the care economy tailored to Vietnam. This should include looking to the future to anticipate the needs and wants of the next generation of carers, as well as changes to supply and demand that may disrupt the care economy.



Encouraging government policy change.

Governments need to be encouraged to act, which could be supported through a clearer and more empirical presentation of policy options. Gauging public attitudes towards these policies and exploring funding and investment arrangements can help ensure long-term sustainability of these care policies.



Supporting individuals.

Greater understandings could be developed surrounding the impact of rising costs of living on low-income families and their ability to provide care; relative demands for care services by geography and other demographic features; protections and rights of domestic care workers; and how to improve or support migrant care workers when they move abroad.

¹¹ International Finance Corporation, 2020. 'Tackling childcare: the business case for employer-supported childcare in Vietnam', *World Bank Group*, Washington, DC, https://www.ifc.org/wps/wcm/connect/378a0839-d8d3-45e9-9ba8-20334d9e3cf7/Final_IFC_Childcare_Vietnam_Web.pdf?MOD=AJPERES&CVID=nkwOzPZ

¹² Ibid.

¹³ ActionAid, 2017. Unpaid Care Work: Redistribution for Sustainable Development. rep. https://vietnam.actionaid.org/sites/vietnam/files/ucw3_0.pdf

¹⁴ Royal Commission into Aged Care Quality and Safety. <https://agedcare.royalcommission.gov.au/sites/default/files/2020-09/Research%20Paper%20-%20-%20Review%20of%20international%20systems%20for%20longterm%20care%20of...pdf>