



POLICY DISCUSSION

THE IMPACT OF THE COVID-19 PANDEMIC

ON ETHNIC MINORITIES IN VIET NAM, REGARDING THEIR
ACCESS TO SOCIAL PROTECTION AND DIRECT CASH
TRANSFER POLICIES, FROM A GENDER EQUALITY LENS

Ha Noi, August 2021

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LIST OF ABBREVIATIONS

COVID-19	Coronavirus disease 2019 caused by severe acute respiratory syndrome (SARS-CoV-2)
CEMA	Committee for Ethnic Minority Affairs
EM	Ethnic minority
GIZ	German Agency for International Cooperation
HIV/AIDS	Human immunodeficiency virus
ILO	International Labour Organisation
iSEE	Institute for Studies of Society, Economy and Environment
ILSSA	Institute of Labour Science and Social Affairs
MOLISA	Ministry of Labour, Invalids and Social Affairs
GSO	General Statistics Office
UN Women	United Nations Entity for Gender Equality and the Empowerment of Women
UNDP	United Nations Development Programme
UNFPA	United Nations Population Fund
UNICEF	United Nations Children’s Fund
WB	World Bank

ACKNOWLEDGEMENT

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During the development and finalization of the report, the group of authors has been in technical consultation with Ms. Nguyen Thi Tu, former Director and Mr. Luu Xuan Thuy Director of the Department of Ethnic Minority Affairs - Committee for Ethnic Minority Affairs.

The Department of Ethnic Minority Affairs – the Committee for Ethnic Minority Affairs, the Institute of Labour Science and Social Affairs – Ministry of Labour, Invalids and Social Affairs and UN Women Viet Nam would like to express our heartfelt thanks for financial assistance from the Government of Ireland for the development of this document.

We hope that this document will provide useful information for policy makers, programme managers, specialists and researchers in the development and implementation of gender equality promotion programmes among ethnic minorities in Viet Nam.

PREFACE

In early 2020, Viet Nam, in line with countries across the world, faced unprecedented difficulties and challenges due to COVID-19. The pandemic was not only a global health crisis, but also negatively impacted the socio-economic environment of countries, on the livelihoods and lives of household members and specific communities. Moreover, this had an extremely damaging on gender equality achievements. In this context, the most vulnerable groups in society are the people affected most severely by COVID-19 due to poor resilience and adaptability to risks.

Viet Nam is a multi-ethnic country with 54 ethnic groups of which 53 are ethnic minority (EM) groups. Results from 2019 Survey on the Socio-economic Situation of 53 ethnic minority groups¹ show that the total population of the EM groups was 14.12 million people, accounting for 14.7% of the total population of Viet Nam. Ethnic minority and mountainous areas hold a particularly important strategic position in socio-economic terms, for national defence and security and, most especially the ecological environment; However, ethnic minority and mountainous areas remain the most impoverished regions in Viet Nam wherein the percentage of poor households is many times higher than the national average.² The COVID-19 pandemic has exacerbated difficulties within the ethnic minority and mountainous areas across all socio-economic sectors from food security, livelihood, labour-employment, income and regular health care (vaccination, antenatal care, care and medication provision for people with chronic diseases) to education, cultural and social affairs. Confronting the COVID-19 pandemic, the Government of Viet Nam has taken proactive and comprehensive measures to counteract the pandemic while simultaneously giving support to maintaining levels of production and stabilising people's lives. Specifically, Resolution No. 42/NQ-CP dated 09/4/2020 was passed which outlined measures in support of people in difficulties due to COVID-19, including people experiencing a significant reduction in income, loss, lack of jobs and insecure minimum living standards, at the same time, providing additional support to those individuals/groups entitled to preferential policies and social protection during the pandemic. The national budget allocated to provinces in mountainous areas and the Central Highlands (where ethnic minority people predominantly reside) represents up to 70% of the actual designated expenditure in this Resolution.³

This Document was developed based on the results of the second Survey on the Socio-economic Situation of 53 Ethnic Minority Groups in Viet Nam 2019. Recent research results reveal that COVID-19 impacts not only the general population but most especially ethnic minority people and ethnic minority women in particular. The document was developed with the aim of supporting the development and implementation process of the policy on COVID-19 prevention and control and social protection policies for ethnic minority areas in Viet Nam. The document will focus on examining the impact of COVID-19 on ethnic minority groups in Viet Nam, especially ethnic minority women. It will analyse the implementation efficiency of direct cash transfer and social protection policies for ethnic minority groups from a gender equality perspective. The Document will propose policy recommendations towards the development and implementation of supporting policies and programmes in emergency situations to ensure gender responsiveness and contribute to effective and comprehensive gender equality promotion in ethnic minority areas; the implementation of which was committed to by the ratification of Sustainable Development Goals in Viet Nam by 2030.

¹ General Statistics Office, 2019. *The 2019 Survey on the Socio-economic Situation of 53 ethnic minority groups in Viet Nam*.

² General Statistics Office, 2019. *The 2019 Survey on the Socio-economic Situation of 53 ethnic minority groups in Viet Nam. The percentage of poor and near poor ethnic minority households was 35.5%, 3.5 times higher than the overall national rate (10.2%)*.

³ Resolution No. 42/NQ-CP dated 09/4/2020 of the Government.

PART 1

THE IMPACT OF COVID-19 PANDEMIC ON ETHNIC MINORITY GROUPS IN VIET NAM



1. IMPACT OF COVID-19 ON THE EMPLOYMENT AND INCOME OF ETHNIC MINORITY PEOPLE

EMPLOYMENT

COVID-19 pandemic has directly and seriously affected the labour and employment situation in all ethnic minority and mountainous areas

Measures on partial or total social lockdown affect employment in three ways. *First*, employees can permanently lose their current jobs; *Second*, employees may temporarily lose their jobs but retain the opportunity to return to work when the pandemic situation is under control; and *Third*, employees may not lose their jobs but working hours or wages are cut (ILO, 2020b). In particular, the most obvious effect occurred in the second quarter of 2020 when the COVID-19 situation evolved tangentially with many cases of infection in the community being reported, and the application of social distancing regulations being thoroughly implemented in April 2020.

Box 1. Impact of COVID-19 pandemic on labour and employment in Quarter II and Quarter III/2020: The severity of the impacts on female employees.

The active labour force of Viet Nam fell to a record low in Quarter II/2020 due to the impact of the pandemic in which the female labour force was affected more severely than its male counterpart. Thus, in Quarter II/2020, the female workforce decreased by 4.9% against the previous quarter and by 5.5% over the same period last year, which was higher than the drop in among the male workforce, a fall of 3.9% against the previous quarter and 3.6% over the same period last year. With respect to those falling outside out of the recognized working age groups, while the female workforce recorded a decrease of 1.8% against the previous quarter and 4.9% over the same period last year; the male labour workforce in this category actually experienced a slight increase with a rise of 0.8% from the previous quarter and 1.4% over the same period last year.

Source: General Statistics Office, 2020. Report on the impact of COVID-19 on labour and employment situation in Viet Nam in Quarter II, 2020.

The number of unemployed people of working age, in the first nine months of 2020, was over 1.2 million, an increase of 148.2 thousand people over the same period last year. The unemployment rate of people of working age in the first nine months of 2020 was 2.50%, an increase of 0.33 of a percentage point over the same period last year.

The number of unemployed female workers of working age, in the first nine months of 2020, was 722 thousand people, an increase of 200.6 thousand people over the same period last year. The unemployment rate of working age women in the first nine months of 2020 was 3.27%, which was 0.77 percentage points higher than the overall unemployment rate of working age workers and an increase of 0.9 of a percentage point over the same period last year.

Source: Ministry of Labour -Disability and Social Affairs, 2020. Viet Nam Labour Market Update Newsletter No. 27, Quarter III/2020

The consequential effect of the COVID-19 pandemic on the employment of disadvantaged labour groups, especially ethnic minority workers

Recent research shows that the COVID-19 pandemic has more severely affected the employment of the most disadvantaged labour groups, such as workers in informal employment⁴ (GSO, 2020); the self-employed, unpaid family workers, migrant workers (GIZ, 2020); and workers in hospitality (ILO, 2020b).

Among disadvantaged labour groups impacted by COVID-19, female and ethnic minority workers have been affected most severely. The percentage of ethnic minority self-employed and unpaid family workers accounts for nearly 3/4 of the total ethnic minority people employed aged 15 and above. This proportion of ethnic minority female workers is 7.2 percentage points higher than that of ethnic minority males (78.6% and 71.4% for ethnic minority female and male workers respectively).⁵ The percentage of female workers in the hospitality sector in general and community tourism in ethnic minority and mountainous areas accounts for over 60.1%.⁶ The above data demonstrates that ethnic minority workers, especially ethnic minority women, are at greater risk of unemployment, temporary or otherwise, due to the impact of the COVID-19 pandemic than the rest the labour force.

UNDP and UN Women research⁷ shows that the COVID-19 pandemic has affected the employment of 68.6% of ethnic minority households compared to the corresponding ratio of 58.4% of Kinh-Hoa households. iSEE⁸ research also shows that 16.5% of ethnic minority household members lost their jobs temporarily and 64.7% lost job permanently due to the impact of COVID-19.

INCOME

The COVID-19 pandemic has severely affected the income of many households, including ethnic minority households.

The World Bank survey results⁹ show that due to the impact of COVID-19, nearly 70% of households in the survey sample had their income reduced;¹⁰ within which the proportion of households in rural areas with a decline in income was 5 percentage points higher than the corresponding rate of households in urban areas; while the percentage of female-led households experiencing income decline was 0.8 percentage points lower than the corresponding rate of male-led households (69.6% and 70.4 respectively).

4 Informal employment is defined as employment without social insurance (especially compulsory social insurance) and an absence of at least a three-month labour contract.

5 General Statistics Office, 2020. Survey on the Socio-economic Situation of 53 ethnic minority groups in Viet Nam as of 1/10/2019.

6 General Statistics Office, 2020. Results from Labour Force Survey, Quarter 2/2020 showed that the percentage of women in the hospitality sector is 66.1%.

7 UN Women & UNDP, 2020. COVID-19 Socio-economic Impacts on Vulnerable Households and Enterprises in Viet Nam: A gender sensitive assessment.

8 iSEE & Tien Phong (Pioneer) Network-For the voice of ethnic minority people, 2020. Thematic Report on "Impact of COVID-19 on a number of ethnic minority communities in Viet Nam: Study with local communities and urban migrants".

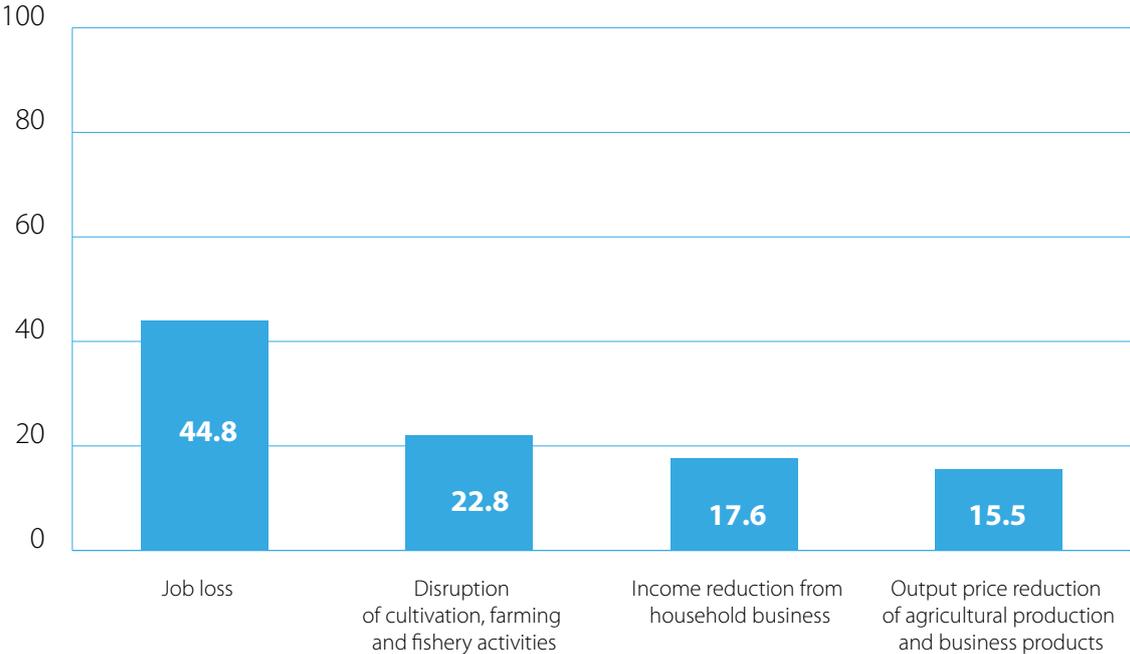
9 WB, 2020. Due to the impact COVID-19 pandemic, the highest reduction in household income was recorded in April 2020. The average income of surveyed households in April 2020 was only around 29.7% of the December 2019 level. In May 2020, this number increased to 51.1%. In other words, compared to December 2019, the average income of surveyed households decreased by more than 70% in April 2020 and 49% in May 2020.

10 Household income comparison between December 2019 and April 2020.

Ethnic minority households experienced a greater decline in income than Kinh households. The reduction in income in 70.3% of ethnic minority households was 4.8 percentage points higher than Kinh households (65.5%).¹¹ The cause of income reduction of ethnic minority households included: 'Job loss' (44.8%); 'Disruption of cultivation, farming and fishery activities' (22.8%); 'Income reduction from household business' (17.6%); and an 'Output price reduction of agricultural production and business products' (15.5%).¹²

Figure 1. The causes of income reduction of ethnic minority households during COVID-19 pandemic

Unit: %



The income recovery of ethnic minority households was also slower than that of Kinh households. The percentage of ethnic minority households with a reduction in income in April 2020 was 70.3% and 64.3% by May 2020, a reduction of 6.0 percentage points in one month. However, this reduction remains significantly lower than that of Kinh households, with a corresponding rate of 69.7% and 48% respectively, a reduction of 21.7 percentage points in one month.¹³

The impact of COVID-19 on individual ethnic minority production-business-service households is far more severe than on Kinh households

During the COVID-19 pandemic, the percentage of individual ethnic minority non-agricultural business households that had to 'adjust their operations, temporarily close, or permanently close' were 24.0%, 6.4% and 1.8% respectively. These rates are significantly higher than the corresponding rates in Kinh households (18.9%, 3.7% and 0.4% respectively).

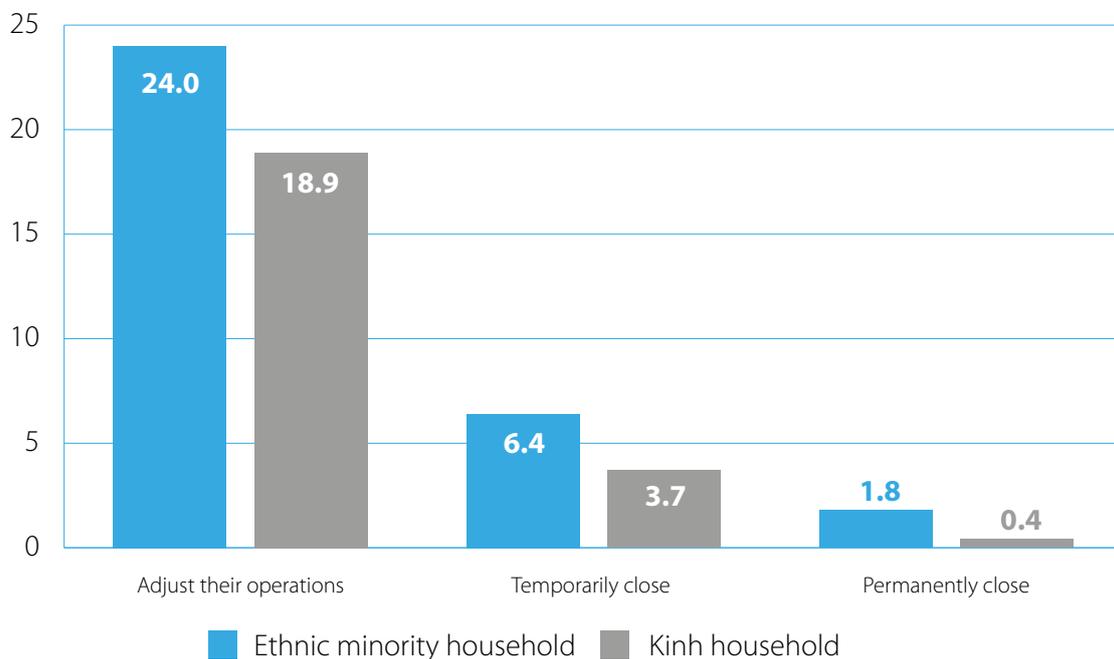
11 UN Women & UNDP, 2020. COVID-19 Socio-economic Impacts on Vulnerable Households and Enterprises in Viet Nam: A gender sensitive assessment.

12 WB, 2020. "Monitoring COVID-19 impact on households in Viet Nam: Summary of Household High-frequency Phone Survey Results."

13 UN Women & UNDP, 2020. COVID-19 Socio-economic Impacts on Vulnerable Households and Enterprises in Viet Nam: A gender sensitive assessment.

Figure 2. The impact of COVID-19 on individual ethnic minority production-business-service households compared to Kinh households

Unit: %



Ethnic minority agro-forestry and fishery households are also seriously affected by the COVID-19 pandemic. Social distancing has disrupted commodity production chains and hindered product consumption. Suppliers of fertilizers, seedling/breeding and raw materials for agricultural production also faced difficulties in business during the pandemic, therefore they were forced to cut down the percentage of the support costs for buyers. The above mentioned difficulties have simultaneously and seriously affected the production and income of ethnic minority agro-forestry and fishery households (iSEE, 2020).

Social distancing affects the production and product consumption of female-led ethnic minority agro-forestry and fishery households more severely than that of male-led households. During social distancing, transportation services were interrupted, wholesalers were not able to travel to provinces to acquire agricultural products. Additionally, product consumption in the provinces also faced difficulties because there were no tourists and the purchasing power of local people also decreased. In this circumstance, female-led ethnic minority households faced more difficulties since many ethnic minority women cannot drive nor have driving licenses to transport their products to other areas for consumption (CARE, 2020).

The COVID-19 pandemic has caused a significant reduction in household income and increased the percentage of poor and relatively poor households in terms of income, in which ethnic minority households and female-led ethnic minority households have been more severely affected

The World Bank survey results¹⁴ show that due to the impact of the COVID-19 pandemic, 60.3% of ethnic minority households were driven into income poverty in April 2020, which was 46.4% higher than the corresponding rate of poverty in Kinh-Hoa households. The percentage of women-led ethnic minority households fell into income poverty in April 2020 was slightly higher than that of male-led households constituting 48.3% and 47.7% respectively.¹⁵

¹⁴ WB, 2020. Due to the impact COVID-19 pandemic, the highest reduction in household income was recorded in April 2020. The average income of surveyed households in April 2020 was only around 29.7% of the December 2019 level. In May 2020, this number increased to 51.1%. In other words, compared to December 2019, the average income of surveyed households decreased by more than 70% in April 2020 and 49% in May 2020.

¹⁵ UN Women & UNDP, 2020. COVID-19 Socio-economic Impacts on Vulnerable Households and Enterprises in Viet Nam: A gender sensitive assessment.

2. IMPACT OF COVID-19 ON ACCESS TO EDUCATION BY CHILDREN AND HOUSEHOLDS IN ETHNIC MINORITY AND MOUNTAINOUS AREAS

Social distancing due to COVID-19 pandemic has increased inequality of access to education among children in ethnic minority and mountainous areas

Since early February 2020, the requirements of social distancing have affected the education of more than 21 million Vietnamese children due to school closures.¹⁶ The cohort of preschool children was completely interrupted with respect to learning and connecting with the school, they had to stay home or be taken care by their grandparents/relatives. From elementary education level and above, eligible schools have switched to online learning during social distancing.

Online learning has increased the inequality gap in access to education in which ethnic minority children are the most disadvantaged group. Firstly, online learning increases the cost of education due to the requirement of modern technological devices (computer or smartphone) and an internet connection. This will more severely affect children in the poor households, ethnic minority children in EM and mountainous areas and areas with difficult socio-economic conditions.¹⁷ Although in recent years, the proportion of EM households using smartphones and computers, with internet connection, has increased rapidly,¹⁸ there remains 9/53 and 29/53 of EM groups with the percentage of households using the internet and computers being less than 30% and 5% respectively.¹⁹ Secondly, online and distance learning programmes are not evenly spread across the country and often ***do not support instruction in ethnic minority languages.***²⁰ Thirdly, the teachers in EM and mountainous areas are not well versed in online teaching. About 93% of teachers in EM and mountainous areas said that they did not use the modern technologies required for 'Digital Education' nor did they teach online before the COVID-19 pandemic. This clearly affects the quality of online teaching.²¹

The World Bank survey results²² show that the school closure has affected about 26% of households with school-age children. Each household must have at least one adult who has reduced or ceased income generating employment in order to look after and care for children who are absent from school. EM households and households in 40% of the poorest household group are more affected for reasons such as: No-one to help to take care of their children (father, mother, relatives) or paid work cannot be undertaken remotely such as agroforestry, and fishery production. In the household, mothers often have to reduce/stop working more than fathers do to look after and care for children who are absent from school.²³

16 <https://www.unicef.org/vietnam/vi/nh%E1%BB%AFng-c%C3%A2u-chuy%E1%BB%87n/%C4%91%C6%B0a-tr%E1%BA%BB-em-v%C3%A0o-v%E1%BB%8B-tr%C3%AD-tr%E1%BB%8Dng-t%C3%A2m-trong-%E1%BB%A9ng-ph%C3%B3-v%E1%BB%9Bì-d%E1%BB%8Bch-covid-19-t%E1%BA%A1i-vi%E1%BB%87t-nam>

17 ILSSA & GIZ, 2020. "Assessment of COVID-19 impact on informal labour in Viet Nam".

18 Results from the 2019 Survey on the Socio-economic Situation of 53 ethnic minority groups in Viet Nam (GSO) show that 61.3% EM households use internet (the male-led is 61.4% and the female-led is 59.9%), an increase of up to +54.8 percentage point compared to 2015 (6.5%).

19 General Statistics Office, 2019. Survey on the Socio-Economic Situation of 53 ethnic minority groups in Viet Nam 2019

20 UNICEF, 2020. Rapid assessment of online/distance learning situation in the context of COVID-19 pandemic.

21 UNICEF, 2020. Rapid assessment on socio-economic impact of COVID-19 on children and families in Viet Nam

22 WB, 2020. Due to the impact COVID-19 pandemic, the highest reduction in household income was recorded in April 2020. The average income of surveyed households in April 2020 was only around 29.7% of the December 2019 level. In May 2020, this number increased to 51.1%. In other words, compared to December 2019, the average income of surveyed households decreased by more than 70% in April 2020 and 49% in May 2020.

23 WB, 2020. "Monitoring COVID-19 impact on households in Viet Nam: Summary of Household High-frequency Phone Survey Results".

3. IMPACT OF COVID-19 ON ACCESS TO MEDICAL AND HEALTHCARE SERVICES BY ETHNIC MINORITY WOMEN AND CHILDREN

In Viet Nam, thanks to efforts in the prevention and control of the COVID-19 pandemic, there has not been a significant health crisis. However, the pandemic seriously affects people's health care, especially that of pregnant women and young children. When COVID-19 cases in the community were reported, a proportion of people delayed or even canceled attending medical facilities for a medical check and treatment which might adversely affect their lives and health.²⁴

Some pregnant women canceled their regular antenatal check, increasing the risk of obstetric complications and maternal mortality. According to UNFPA (2020), due to the impact of the COVID-19 pandemic, the rate of childbirth in health facilities in provinces/cities in the first quarter of 2020 decreased from 5% to 15% compared to that in the first quarter of 2019. According to the most optimistic scenario, the number of maternal deaths related to pregnancy in 2020 is forecast to increase to 298 cases²⁵ and the maternal mortality rate related to pregnancy will reach 62 maternal deaths per 100,000 births. The worst case scenario is predicted to be 443 cases and 69 maternal deaths per 100,000 births. While in 2019, the rate was only 46 maternal deaths per 100,000 births. Moreover, according to UNFPA (2020), the rate of modern contraceptive use in the first quarter of 2020 also decreased by 5% to 10% compared to that in the first quarter of 2019 among certain population groups. This will reverse the progress in maternal health care and family planning achieved by Viet Nam over the past 10 years.²⁶

The COVID-19 pandemic affects access to child health care services and might threaten the health and lives of children in ethnic minority areas. During social distancing, many ethnic minority families faced greater difficulty in access to health care services for their children.²⁷ 88% of commune health stations had to temporarily stop providing vaccination services during social distancing; at the same time, advocacy and guidance on child health care as well as the regular monitoring of the development of children under 5 years old were also temporarily suspended.^{28 29}

The immediate consequence of the decline in vaccination rates is the re-emergence of a number of diseases such as measles-rubella and diphtheria in some areas, **especially in the Central Highlands - the area where ethnic minority people predominate.** The Central Highlands is an area with the lowest vaccination rate in the country, thus the temporary suspension of vaccination services during social distancing, which has caused the re-emergence of a number of diseases that could have been well controlled, such as measles and diphtheria, taking the lives of ethnic minority children.³⁰

24 ILSSA & GIZ, 2020. "Assessment of COVID-19 impact on informal labour in Viet Nam".

25 In the absence of COVID-19 pandemic, the forecast for the number of maternal deaths related to pregnancy in 2020 is 677 cases.

26 UNFPA, 2020. Technical Brief: The impact COVID-19 pandemic on maternal health and family planning in Viet Nam.

27 Viet Nam Network of Sex Workers (VNSW) and the Joint United Nations Programme on HIV/AIDS (UNAIDS) (2020). Rapid community-based assessment on COVID-19 impact on sex workers in Viet Nam.

28 Administrative data from the Ministry of Health (2020) shows that a decrease in vaccination rates against measles-rubella (MR), white diphtheria, pertussis and tetanus (DPT4) and Japanese encephalitis (JE2) was recorded in the first 3 months of 2020 in most provinces/cities. In 13 provinces, the percentage of measles-rubella vaccination decreased by 10%; in 7 provinces, the rate of vaccination against diphtheria, pertussis and tetanus decreased by 10%.

29 Statistics of the National Institute of Hygiene and Epidemiology (NIHE-Ministry of Health) also show that, due to the impact of COVID-19, the rate of complete immunization for children under 1 year old in the first 5 months of 2020 was 37.2% lower than the same period of 2019 and not yet reaching the planned progress of around 40%. Measles-rubella and DPT4 vaccination rates for 18-month-old children were 31.2% and 28.9% respectively, lower than in the first 5 months of 2019.

30 UNICEF, 2020. Rapid Assessment on Socio-economic Impact of COVID-19 on Children and Families in Viet Nam

Ensuring adequate nutrition for children in many households has been significantly affected during the COVID-19 pandemic, especially children in ethnic minority poor and relatively poor households.³¹ However, emergency support policies, during the COVID-19, pandemic have not provided prompt support in terms of nutrition to meet the demands of affected groups of children.

4. IMPACT OF COVID-19 ON VIOLENCE AGAINST ETHNIC MINORITY WOMEN AND GIRLS

Violence against women in general and ethnic minority women, in particular, is usually perpetrated by their husbands or partners and the most common form of GBV that women have to endure. Forms of gender based violence include physical, sexual, emotional and economic violence and controlling behaviours. The results from the National Survey on Violence against Women in Viet Nam in 2019³² demonstrate that violence perpetrated by a husband/partner across a lifetime and in the past 12 months during COVID-19³³ reveal a significant difference among ethnic groups. The percentages of ethnic minority women suffering from behaviour control³⁴ and economic violence³⁵ are both higher than the corresponding rates for women across the country and among Kinh women. However, the proportion of ethnic minority women experiencing physical and/or sexual and emotional violence is lower than that of women across the country and among Kinh women.

In the context of the COVID-19 pandemic, a pre-existing issue of violence against women and children has been exacerbated. Mobility restrictions, social isolation and other epidemic control measures, along with the socio-economic pressures and tensions that are inherent within the family, will lead to a rise in violence, especially violence against women and children. In many countries, the estimated number of domestic violence cases has increased by at least 30%. In Viet Nam, the Hotlines 1900 969680 and 1800 1769 of the Peace House Shelter³⁶ and Sunshine House Shelter³⁷ respectively received twice the number of emergency calls in past months compared to the same period in previous years. In addition, services which support the victims of gender based and sexual violence cases such as medical care, psychological and spiritual support for women and girls were interrupted due to the social distancing requirements and the consolidation of medical resources for preventing the spread of the virus, caring for and treating cases (UN Women, 2020).

The results from UNICEF Rapid Assessment show that the COVID-19 pandemic has made the ***burden of unpaid household and care work among women in general and ethnic minority women more onerous.*** The traditional gender division of labour in the household has increased the burden on women with respect to taking care of children, supporting children's learning, taking care of the elderly and the terminally/chronically ill when schools and health care services closed down due to social distancing regulations due to the pandemic (UNICEF, 2020).

31 UNICEF, 2020. *Rapid Assessment on Socio-economic Impact of COVID-19 on Children and Families in Viet Nam*

32 General Statistics Office, 2020. *Results from the National Study on Violence Against Women in Viet Nam 2019*

33 For each violent act the women reported happened to them, they will be asked if the act had happened in their life (lifetime violence). If the answer is yes, they will be asked if the behavior has occurred in the past 12 months. Violence that occurred in the past 12 months is considered current violence by a husband/partner. Both periods of time reference are important because it tells us about different aspects of the issue.

34 In a lifetime and during the past 12 months are 33.8% and 17.4% respectively

35 In a lifetime and during the past 12 months are là 24.1% and 16.4% respectively

36 Peace House Shelter under the National Committee of Viet Nam Women's Union

37 Supported by UNFPA in collaboration with Korea International Cooperation Agency - KOICA in Quang Ninh Province

PART 2

SUPPORTING POLICY



1. INTRODUCTION OF POLICIES IN SUPPORT OF THE TARGETS AFFECTED BY COVID-19

Viet Nam has done a very good job in controlling the COVID-19 pandemic, providing medical treatment for COVID-19 cases and mitigating macroeconomic damages. The Government of Viet Nam has issued the Resolution No. 42/NQ-CP dated 9/4/2020 and Decision No. 15/2020/QD-TTg dated 24/4/2020 for the implementation of appropriate measures in support of the target groups affected by COVID-19 such as workers, households, business households, employers and enterprises. The forms of support are diverse, suitable to the needs and actual circumstances of the subjects such as a cash transfer, loan with a 0% interest rate, reduction of interest rate, fees; deferring the payment of tax, land use tax and the temporary suspension of social insurance contributions.

Government policies focus on support to the most affected subject groups by COVID-19, including ethnic minority people, business households and enterprises in ethnic minority and mountainous areas

Beneficiaries who are ethnic minority people and ethnic minority households account for a large percentage in some supporting policies such as direct cash transfer for poor and near poor households.³⁸ The direct cash transfer is for those in receipt of monthly social protection allowances, and electricity price reduction. In addition to that, provinces in mountainous areas and the Central Highlands (where ethnic minority people predominantly reside) shall be funded by the national budget up to 70% of the actual expenditure as regulated in this policy.³⁹

Table 1. Direct cash transfer policy for subjects affected by COVID-19

	Supporting Policies	Budget (billion dong)	Types of Support	Beneficiaries	Ethnic Minority
1	<ul style="list-style-type: none"> - Resolution No 42/NQ-CP dated 9/4/2020 of the Government on measures in support of the people in difficulties due to COVID-19. - Decision No. 15/2020/QD-TTg dated 24/4/2020 of the Prime Minister on the implementation of policies in support of people in difficulties due to COVID-19. 	61,580	Cash transfer in three months (Apr, May, Jun/2020)	<ul style="list-style-type: none"> - People with meritorious services to the revolution who are enjoying monthly preferential allowance shall be provided an additional amount of VND 500,000/person/month. - Social protection beneficiaries who are receive monthly social protection allowances shall be provided an additional amount of VND 500,000/person/month - The poor and relatively poor households, according to the national poverty line in the list, as of 31 December 2020 shall be provided with VND 250.000/person/month. 	<ul style="list-style-type: none"> - EM people with meritorious services to the revolution are entitled to benefit under this Policy. - In 2020, 3,041,731 social protection beneficiaries in the whole country enjoy monthly social protection allowances, including EM people⁴⁰. - The percentage of EM poor and relatively poor households in EM and mountainous areas is 35.5%, three times higher than the national overall rate (10.2%).

³⁸ Report at the Virtual National Review Meeting on Poverty Reduction for 2016-2020 of the National Steering Committee for the National Target Programme on Sustainable Poverty Reduction during 2016-2020. Among the poor households, the percentage of ethnic minority households accounts for more than 58%.

³⁹ Resolution No 42/NQ-CP dated 09/4/2020 of the Government and Resolution No 154/NQ-CP dated 19/10/2020

⁴⁰ Ministry of Labour- Disability and Social Affairs. Report No. 3265/LĐTBXH-KHTC on the development of the Plan on developing the Labour, People with meritorious services and Social Affairs for 5 years during 2021-2025.

Supporting Policies	Budget (billion dong)	Types of Support	Beneficiaries	Ethnic Minority
<p>- Resolution No. 154/NQ-CP dated 19/10/2020 of the Government on amendment of the Resolution No 42/NQ-CP dated 9/4/2020 of the Government on measures in support of the people in difficulties due to COVID-19.</p> <p>- The signed Decision No. 32/QĐ-TTg on amendment of some Articles in the Decision No. 15/QĐ-TTg dated 24/4/2020</p>		Cash transfer to the workers	Employees whose labor contracts or work agreements are terminated but are not eligible for unemployment allowance.	- Eligible ethnic minority employees are entitled to benefit under this policy.
		Cash transfer to the workers	Employees without labor contracts who lose their jobs shall be provided with VND 1,000,000/ per person on a monthly basis depending on the actual situation of the pandemic for a maximum of, but not exceeding, three months.	- Eligible ethnic minority employees are entitled to benefit under this policy.
		Cash transfer to the workers	Employees holding a labor contract that have to agree to the suspension of that labor contract, take leave without pay for 1 month or more since enterprises are in difficulties due to COVID-19 without revenue or financial resources shall be provided with VND 1,800,000/per person/ month. The supporting period is based on the actual suspension of the labour contract and leave without pay on a monthly basis, and depending on the actual pandemic situation from 1 April 2020 and should not exceed three months.	- Eligible ethnic minority employees are entitled to benefit under this policy.
		Support for employers in getting loans for severance pay to employees	Employers who have financial difficulties and have paid at least 50% of the employee's severance pay in advance according to Clause 3, Article 98 of the Labor Code from April to June 2020 shall be entitled to loans, without collateral, up to 50% of the regional minimum salary for each employee according to the actual salary payment time but not exceeding three months with 0% interest, maximum loan term of twelve months at the Social Policy Bank to pay the rest of salary and disburse monthly directly to terminated employees.	- Eligible employers in EM and mountainous areas are entitled to the benefit under this policy.

	Supporting Policies	Budget (billion dong)	Types of Support	Beneficiaries	Ethnic Minority
			Supporting business households	An individual business household who has a tax declaration revenue of less than VND 100 million/year and has temporarily suspended its business from 1 April 2020, shall be provided with VND 1,000,000/household/month depending on the actual pandemic situation but not exceeding three months.	- Eligible EM individual business households are entitled to benefit under this policy.
			Suspension of contribution to retirement and survivorship funds	Employers affected by COVID-19 have to reduce by 50% or more of their employees participating in social insurance compared to the time the authority announces the pandemic (including employees whose labour contracts are terminated or suspended or taking leave without pay), employees and employers may suspend contributions to the retirement and survivorship funds for a maximum of but not exceeding twelve months.	- Eligible employers in EM and mountainous areas are entitled to benefit under this policy.
2	Letter No. 2698/BCT-DTDL dated 16/4/2020 of the Ministry of Industry and Trade	11,000	Reduction of electricity price	Reduction of electricity prices by 10% (April - June 2020) for all households and enterprises.	- EM households are entitled to benefit under this policy.
3	Decree No. 41/2020/ND-CP of the Government dated 8/4/2020	180,000	Financial packages in support of enterprises	Deferring payment of taxes, land use tax and house rental etc. for affected enterprises in more than 30 manufacture, processing and service sub-industries.	- Eligible enterprises in EM and mountainous areas are entitled to benefit under this policy.
4	Circular No. 01/2020/TT-NHNN dated 13/3/2020		Reduction of bank interest rate	Banks will waive and reduce interest rates and reduce transaction service fees. Enterprises supplying essential goods and services are eligible to borrow at an interest rate of 4.5-5%/year (lower than the deposit interest rate).	- Eligible enterprises in EM and mountainous areas are entitled to benefit under this policy.
5		285,000	Credit packages of the commercial banks	Enterprises that are less affected or least affected but in need of funding for development after the COVID-19 pandemic in the areas of: aquaculture, agriculture, healthcare service and electricity etc. Severely affected enterprises are also able to borrow if repayment capacity can be proved.	- Eligible enterprises in EM and mountainous areas are entitled to benefit under this policy.

In addition to direct cash transfer policies, the Government has also issued a number of policies to ensure an equitable supply of basic social services in the context of the COVID-19 pandemic. Specifically, the Ministry of Health has issued the Scheme of 'Remote medical examination and treatment' for the period 2020-2025,⁴¹ provisional guidelines on the receipt, treatment and medication provision for HIV/AIDS patients in the COVID-19 situation to ensure uninterrupted service for people under HIV/AIDS treatment in general and in ethnic minority areas.⁴² The Ministry of Education and Training has promulgated policies guiding the implementation of measures in the prevention and control of COVID-19 in schools;⁴³ the guidelines for distance learning,⁴⁴ and policies for children and students in areas with extremely difficult socio-economic conditions in response to the COVID-19 pandemic.⁴⁵ Especially, the Ministry of Labour, Disability and Social Affairs with the support of UNICEF and UN Women, has developed a 'Guideline for officials and staff in quarantine areas' to ensure accommodation security, safety from violence and sexual abuse, hygiene and nutrition safety, and information security for children and women at concentrated quarantine places in prevention and control of COVID-19.

In addition to the Government supporting policies, several international organizations have implemented activities in support of the subjects affected by the COVID-19 pandemic. Support is focused on the protection of reproductive health and sexual health for women and girls in the context of natural disasters and epidemics and supporting households whose livelihoods have been affected by the COVID-19 pandemic for restoring production-business-service activities. These initiatives shall complement the Government supporting policies for the most vulnerable subjects affected by the COVID-19 pandemic, especially women in ethnic minority and mountainous areas. However, such initiatives and practical support are few and limited.

41 Decision No. 2628/QĐ-BYT dated 22/06/2020 of the Ministry of Health approving the Scheme of "Remote medical examination and treatment" for 2020-2025.

42 Letter No. 1563/BYT-AIDS dated 25/03/2020 of the Ministry of Health (MOH) on the treatment and provision of ARV drugs for HIV patients in the context of COVID-19; Letter No. 178/AIDS-ĐT dated 27/03/2020 of Viet Nam Administration for HIV/AIDS Control (VAAC), MOH on temporary guidance on ARV drug treatment for HIV-infected people in the context of COVID-19; Letter No. 190/AIDS-ĐT dated 31/03/2020 of VAAC, MOH on examination and provision of ARV drugs for treatment for HIV/AIDS patients in the context of COVID-19; Letter No. 190/AIDS-ĐT dated 31/03/2020 of VAAC, MOH on examination and provision of ARV drugs for treatment for HIV/AIDS patients in the context of COVID-19.

43 Letter No. 550/BGDĐT-GDTC dated 25/02/2020 of the Ministry of Education and Training (MOET) on the implementation of measures in prevention and control of COVID-19 in schools; Letter No. 696/BGDĐT-GDTC dated 4/03/2020 of MOET on things to do in prevention and control of COVID-19 in schools; Letter No. 757/BGDĐT-VP dated 10/03/2020 of MOET on strict implementation of regulations on prevention and control of COVID-19; Letter No. 1398/BGDĐT-GDTC dated 23/04/2020 of MOET on guidance on conditions ensuring safety for students to return to school and handling suspected COVID-19 cases in schools.

44 Letter No. 795/BGDĐT-GDĐH dated 13/03/2020 of MOET on the implementation of distance training in response to the COVID-19 pandemic; Letter No. 1061/BGDĐT-GDTrH dated 25/03/2020 of MOET on guidance for teaching via the internet and on television for general and continuing educational institutions during the time students are absent from school due to COVID-19 for 2019-2020 academic year.

45 Letter No. 1700/BGDĐT-GDĐT dated 15/05/2020 and Letter No. 1709/BGDĐT-GDĐT dated 18/05/2020 of MOET on the implementation of policies for children, students in areas with extremely difficult socio-economic conditions in the second semester of 2019-2020 academic year; Letter No. 2187/BGDĐT-GDDT dated 18/06/2020 on the implementation of policies for children and students in the second semester of 2019-2020 academic year.

Box 2. Initiatives of International Organisations in support of the people and households affected by COVID-19 in ethnic minority and mountainous areas

During the recent devastating floods and storms in the Central Vietnam and the Central Highlands as well as in the recent COVID-19 pandemic, the United Nations Population Fund (UNFPA) in Viet Nam has provided aid worth USD 540,000 and emergency relief of 3,700 essential kits for women and girls (including sanitary pads and feminine hygiene solutions) for six flood-affected provinces in the central region. The emergency kit is a feature of the UNFPA's comprehensive humanitarian package to protect sexual and reproductive health as well as the rights of women and girls, to reduce the risk of gender violence and to protect the dignity of women and girls who are negatively affected by crisis, natural disasters and epidemics.

In December 2020, the United Nations Entity for Gender Equality and Empowerment of Women (UN Women) and Lao Cai Provincial Women's Union have rolled out activities in support of 600 poor and ethnic minority households in four communes in Lao Cai province affected by the COVID-19 pandemic. The cash transfer (VND 2,300,000/household) is to help households buy food and invest in livelihoods after the pandemic. The support package is valued at more than VND 1.38 billion, from the United Nations COVID-19 Response and Recovery Multi-Partner Trust Fund (UN COVID-19 MPTF).

Source: Press Release of UNFPA and UN Women Viet Nam.

2. LIMITATIONS OF THE POLICY IN SUPPORT OF THE POPULATION AFFECTED BY THE COVID-19 PANDEMIC FROM A GENDER EQUALITY PERSPECTIVE

The policy development and implementation process in support of the population affected by COVID-19 in the past has revealed some limitations⁴⁶ as follows:

Firstly, the process of proposing and developing policies and programs in support of specific groups affected by COVID-19; due to the urgency, there has been no **gender analysis, gender impact assessment of the draft policy and proposal of specific solutions to address emerging gender issues due to the impact of COVID-19 which has been fully and effectively implemented**. Therefore, there is no basis for identifying the gender impact of the above mentioned policies and programs on ethnic minority groups in Viet Nam; while the extent of access, participation and specific benefiting of ethnic minority men and women from these policies has also not been assessed.

Secondly, most of policies in support of subjects affected by the COVID-19 pandemic are unprecedented and have never been developed or implemented before. Therefore, some procedural regulations are cumbersome and complicated, which might **cause difficulties and delays in the implementation and**

⁴⁶ By the end of 2020, provinces have approved lists of more than 16 million beneficiaries with a total budget of VND 17,500 billion which VND 12,438 billion was disbursed.

affect the benefits flowing to policy beneficiaries, including ethnic minority people. For example, the policy in support of employees without a labour contract who lose their jobs (Resolution No. 42/NQ-CP, Decision 15/2020/QĐ-TTg) was implemented with delay due to problems in defining the criteria on employment⁴⁷ and income (income must be lower than the current threshold of poverty line).⁴⁸ **Notably, the occupations subject to support⁴⁹ are those which employ mostly female workers** such as street vendors, small business without a fixed location; collecting trash and scraps; mobile lottery retailer; the self-employed or work at business households dealing with food, accommodation, tourism and health care.

Some processes and procedures may hinder policy implementation, such as: (i) Procedures on registration for receiving the allowance for workers who have lost their jobs are assigned to the employing enterprises;⁵⁰ (ii) procedures on registration for receiving the allowance for migrant workers require verification from the authorities at both origin and destination.⁵¹ In fact, due to concerns about the complex and time consuming process and procedures, has meant that some workers, including EM female workers, female workers in EM and mountainous areas, simply lose heart and do not register for this allowance.⁵²

Thirdly, regulations on the funding sources for the implementation of policies in support of people in difficulties, due to COVID-19, come out of the provincial budget. The national budget only allocates funding for these policies to provinces in mountainous areas and the Central Highlands (where EM people predominate) and to an amount of 70% of the actual expenditure as regulated in this policy.⁵³ **This regulation might affect a prompt and equitable distribution of policy benefits to people in other provinces, especially those in areas with difficult socio-economic conditions, and EM and mountainous areas.**⁵⁴ The reason is that a province with difficult socio-economic conditions, EM and mountainous areas will find it very difficult to promptly allocate 30% of fund, in full, from the provincial budget for supporting the affected population.

Fourthly, there remains a proportion of employees who are the most vulnerable group affected by COVID-19 but have not accessed or received any benefit from the supporting policies, including: (i) Self-employed EM workers in agriculture and workers in EM agricultural production households (unpaid family workers) who are unable to consume their agricultural products due to the impact of COVID-19; (ii) Self-employed EM workers and EM household workers (unpaid family workers) working in the field of community tourism and related fields (such as production of *tho cam* fabric and handicrafts; retail and

47 Regulations on criteria for defining freelance workers are very strict, requiring verification both at the place of residence and working place. Those who do not work at the place registered for permanent residence have difficulties in verifying their employment and income status for getting the allowance.

48 Poverty line regulated in the Decision No. 59/2015/QĐ-TTg date 19 November 2015 of the Prime Minister from 01 April 2020 to 30 June 2020: VND 700,000/person/month and VND 900,000/person/month in rural and urban areas respectively.

49 The groups of occupations subject to support include: (1) street vendors, small businesses without fixed locations; (2) collection of garbages and scraps; (3) porters, transporters of goods; (4) motorcycles and pedicabs service providers (5) mobile lottery retailers; and (6) self-employed or work at business household dealing with food & beverage, accommodation, tourism, health care).

50 Enterprises are assigned to make the lists of employees whose labour contracts are temporarily suspended or taking leave without pay.

51 UN Women & UNDP, 2020. COVID-19 Socio-economic Impacts on Vulnerable Households and Enterprises in Viet Nam: A gender sensitive assessment.

52 ILSSA & GIZ, 2020. "Assessment of COVID-19 impact on informal labour in Viet Nam".

53 UN Women & UNDP, 2020. COVID-19 Socio-economic Impacts on Vulnerable Households and Enterprises in Viet Nam: A gender sensitive assessment.

54 Decision No. 33/2020/QĐ-TTg dated 12/11/2020 of the Prime minister on the criteria for determination of ethnic minority areas and mountainous regions by development quality for the period of 2021 – 2025. Article 1 "Communes, wards and townships have 15% or more percentage of ethnic minority households in the total number of households living in a community"

services like haircuts, food and drinks for tourists) in EMs and mountainous areas who lost livelihoods and experienced a loss/reduction of income due to the absence/sharp decrease in the number of tourists; (iii) EM migrants who freely (illegally) work over the border, have to return home and cannot find new jobs in the province.⁵⁵ Notably, in all the above-mentioned groups, the percentage of EM female employees is higher than that of the male. This shows gaps in terms of ethnic minority and gender equality in the process of policy development and implementation in support of the people affected by COVID-19.

Fifthly, there remains a lack of efficient policies and solutions to assist people in EM and mountainous areas in access to education and primary health care in the context of the COVID-19 pandemic. This may increase inequality in access to education and primary health care for EM women and children.

From the outset of COVID-19 pandemic, the Ministry of Education and Training issued a policy in promotion of "**Digital Education**" to ensure that students' learning would not be interrupted in the context of school closures due to social distancing and medical quarantine.⁵⁶ However, policies and solutions on new learning methods (online, via television, radio and documents) have failed to support EM and mountainous areas in meeting the requirements of this new learning method. Specifically, (i) there has been no policy or solutions supporting EM students to access online learning devices such as personal computers and smart phones with internet connection; (ii) there is no policy to support capacity building for teachers in EM and mountainous areas to meet the requirements of online teaching; (iii) there has been no policy solutions to support the compilation of online teaching materials in ethnic minority languages.

Moreover, there have been no policies or solutions to ensure maternal and child health care services in EM and mountainous areas during the COVID-19 pandemic, especially antenatal care and vaccination for children under 1 year old; policy in support of nutrition for children in households affected by COVID-19, especially children in poor, relatively poor and disadvantaged EM households, and in lockdown areas.

Finally there are no regulations to ensure the rights and needs of children in evacuation zones and concentrated quarantine/isolation areas during the state of emergency in general and the COVID-19 pandemic in particular.

⁵⁵ UN Women & UNDP, 2020. *COVID-19 Socio-economic Impacts on Vulnerable Households and Enterprises in Viet Nam: A gender sensitive assessment*.

⁵⁶ Directive No 16/CT-TTg of the Prime Minister dated 31/3/2020

PART 3

RECOMMENDATIONS



Recommendation 1:

To ensure that ethnic minority people, including EM women and children, benefit equity from policies in support of people affected by the COVID-19 pandemic in general and direct cash transfer policy in particular. Research is necessary to inform and revise these policies in terms of: comprehensiveness, expansion, consistency and to ensure the mainstreaming of gender equality.

Specific solutions:

- Cash transfers and measures ensuring universal social protection play a significant role in supporting vulnerable groups to cope with impacts caused by COVID-19 pandemic. During the process of development and implementation of the above-mentioned policies, there is a need to ensure the resolution of gender inequality and equity issues among ethnic groups in access to and enjoyment of policy benefits.
- Ensuring that the design and implementation of ad-hoc social assistance policies in general, and policies in support of people affected by COVID-19 in particular, must be based on the following factors: (i) the extent of actual damage; (ii) the level of vulnerability of specific groups, especially ethnic minorities and women and children; (iii) specific circumstances and the ability to overcome individual and household risks, especially those of ethnic minorities, women, children and other groups with special circumstances.
- Gender disaggregated data should be collected promptly and analysed so that a gender analysis can be used for critical examination of policy and, as such, be incorporated in the development and implementation of social assistance policies as a prerequisite. In addition, it is necessary to ensure the participation of women and women's representative organizations (such as state management agencies on gender equality and/or Women's Unions at all levels) in developing, implementing and monitoring – evaluating policies.
- It is necessary to ensure legal compliance in the integration of gender equality issues and gender impact assessment in the process of the development, implementation, monitoring and evaluation of these policies.
- Funding for the implementation of ad-hoc social assistance policies in general and those policies in support of people affected by COVID-19, in particular, in provinces with difficult socio-economic conditions in EM and mountainous areas needs to receive 100% funding from the national budget to ensure the prompt and equitable support. In future, there needs to be a pilot to evaluate the inclusion of a minimum budget target for gender equality in urgent social assistance interventions in order that existing gender inequality issues, as well as those recently emerging, such as those analysed in the COVID-19 case, are not exacerbated.
- Ensuring the integration of urgent social assistance policies within relevant schemes, programmes and policies such as those targeting social protection, children and gender equality which have been implemented in provinces in EM and mountainous areas to maximize the benefits available to recipients.

Recommendation 2:

Ensuring the execution of urgent social assistance and direct cash transfer policy, for the people affected by the COVID-19 pandemic in particular, in accordance with actual needs and situation of ethnic minority groups (women, men) and EM and mountainous areas.

Specific solutions:

- Reviewing and evaluating the impact of COVID-19 on EM people, households, and different EM areas to identify the specific affected groups, the extent of impact and a proposal for the revision and amendment of supporting policies accordingly.
- During social distancing, due to the pandemic, it is necessary to ensure the effective delivery of the most essential health care services to people in EM and mountainous areas, such as the regular deployment of field medical teams to residential clusters (weekly, monthly), to provide reproductive health care services for EM pregnant women, postpartum child care and periodical vaccination services. In case of necessity, military medical forces at local level can be mobilized to participate in field medical teams.
- Additionally issuing a policy in direct support of EM children living in poor households; households with income, livelihood loss/reduction due to the pandemic; especially providing nutritious food or an allowance to purchase food for children during and after the pandemic.
- Furthermore, introducing a policy in support of education for EM children returning to school after the pandemic. Besides advocacy, it is necessary to have a policy in support of children from poor EM households, households with income, livelihood loss/reduction due to the pandemic, who are able to return to school such as tuition fee exemption and/or reduction; providing an allowance to buy books, notebooks, school supplies; travel, food and accommodation.
- Additionally introducing policies and solutions to protect and support EM women and children against the risk of physical and sexual violence both during and after the pandemic. It is necessary to develop technical guidelines and organise capacity building training for the officials who are directly involved in policy implementation as well as to provide services in support of women and children experiencing violence or mental health issues during lockdown and social distancing.

Recommendation 3:

To promote advocacy and awareness among all people, especially state management agencies in EM and mountainous areas to gradually change the mindset that regards women in general and ethnic minority women as a “vulnerable group” in natural disasters, epidemics.

Specific solutions:

- During the policy development and implementation process on the prevention and control of natural disasters and epidemics in EM and mountainous areas, it is necessary to focus on the substantive and meaningful participation of women in the process of decision making and planning for adaptation and reduction of natural disaster, epidemic risks. It is necessary to regulate the proportion of EM women in decision-making; or must consult with women's representative organizations such as state management agencies on gender equality or women's unions at all levels.
- Promoting capacity building for women and officials from agencies and organizations working on gender equality and for the advancement of women at all levels to enable them to participate in both the prevention and control activities in a national disaster or epidemic. Furthermore, to offer advice on integrating gender equality into policy and related activity in this field.

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