UNITED NATIONS
VIET NAM

APPLYING FORESIGHT TO CURATE A CARE ECONOMY

for Older Persons in Viet Nam

Hanoi, Viet Nam
November 2025

ACKNOWLEDGEMENTS

This report is the result of an initiative applying strategic foresight to curate a care economy for older persons in Viet Nam. The initiative was led by the United Nations Resident Coordinator, with UNFPA, the United Nations Population Fund, serving as co-convenor and technical lead.

Developed through close financial and technical collaboration between UNFPA and the United Nations Resident Coordinator's Office (UNRCO), the report was prepared by a technical team comprising Ms Lan Pham (UNFPA Programme Specialist), Mr Minh Huu Doan (UNFPA Programme Analyst) and Mr Kongchheng Poch (UNRCO Economist), under the guidance of Mr Matthew Jackson (UNFPA Country Representative) and Ms Pauline Tamesis (United Nations Resident Coordinator). The report also benefited greatly from the substantive contributions of Mr Giang Thanh Long (Professor, National Economics University, Viet Nam) and Ms Aarathi Krishnan (Executive Director and Founder, RAKSHA Intelligence Futures).

The team extends its sincere gratitude to current and future older persons and caregivers for their participation in the focus group discussions. Appreciation also goes to participants of the round-table dialogue, representing the Party and State entities, line ministries, United Nations agencies, development partners, older persons, caregivers, care service providers and academia. Their insights, inputs and feedback were invaluable in shaping the content and analysis of this report. The team also wishes to thank the International Labour Organization (ILO), the United Nations Entity for Gender Equality and the Empowerment of Women (UN Women), the United Nations Development Programme (UNDP), the United Nations Children's Fund (UNICEF) and the World Health Organization (WHO) for their active participation and valuable contributions to this initiative.

The findings, interpretations and conclusions presented in this report are those collected from the many participants and do not necessarily reflect the views and positions of UNFPA or United Nations Viet Nam.

UNITED NATIONS
VIET NAM

UNFPA

CONTENTS

EXECUTIVE SUMMARY 4
I. INTRODUCTION 8
1.1 An overview of demographic shifts 8
1.2 Purposes of this paper 11
1.3 Study approach and process 11
II. CURRENT CARE PROVISION IN VIET NAM 12
2.1 Demand 12
2.2 Supply 15
2.3 Impacts of an ageing population 20
III. FORESIGHT AND ITS APPLICATIONS FOR POLICY ANALYSIS AND PLANNING 21
3.1 Foresight 21
3.2 International experience in foresight applications 25
3.3 Recommended lessons for Viet Nam 27
IV. RESULTS OF THE DIALOGUES ON THE CARE ECONOMY USING STRATEGIC FORESIGHT 28
4.1 Application of the Three Horizons Framework for the dialogues on the care economy 28
4.2 Key findings from dialogue labs applying the foresight tool 29
4.3 Proposed possible future scenarios 32
V. FIT FOR THE FUTURE: FORWARD-LOOKING POLICY RECOMMENDATIONS 37
5.1. Raising awareness of early preparedness for healthy and happy ageing 38
5.2. Promoting investments in care facilities and infrastructure 38
5.3. Developing innovative financing products and models 39
5.4. Enhancing education and training in the aged care and social work 39
5.5. Strengthening social protection system and pensions for older persons 40
5.6. Using foresight in curating a care economy for older persons 40
REFERENCES 41
ANNEXES 43
Annex 1: Set of foresight tools 43
Annex 2: Methodologies for organizing the dialogue labs and the round table 50

EXECUTIVE SUMMARY

This study applies a strategic foresight approach to gain an understanding of the care economy for older persons in Viet Nam. Motivated by rapid demographic shifts, specifically a rapidly ageing population, the study highlights an urgent need for attention to appropriate policies to manage the demographic transition smoothly and develop an inclusive, robust care system to meet the rising demand for care. The study's insights are also used to inform the formulation of the priorities of the United Nations Sustainable Development Cooperation Framework for the period 2027–2031.

Viet Nam is currently enjoying a period of a "demographic dividend" in which the proportion of children aged 0–14 years is less than 30 per cent of the total population and the proportion of people aged 65 and above is less than 15 per cent.

This demographic window of opportunity is, however, projected to end in 2039. The proportion of people aged 60 years and above in Viet Nam is projected to double from 10.1 per cent in 2011 to 20 per cent in 2036, meaning that Viet Nam is transitioning from an "ageing" to an "aged" society. By 2039, the proportion of people aged 65 and above is projected to reach more than 15 per cent and the proportion of children aged 0–14 years is projected to be 19.2 per cent, ending the demographic dividend period. This demographic shift is being driven largely by increased life expectancy, a large youth population and shifts in fertility rates. Increased life expectancy is credited to socioeconomic progress, particularly advances in health, medicine, education and technology, whereas shifting fertility rates point to the high cost of housing and childcare, and job insecurity among those intending to start a family.

This demographic shift presents both challenges and opportunities for Viet Nam's socioeconomic development as the country aspires to become a high-income country by 2045 and achieve net-zero emissions by 2050. An ageing population will increase the demand for care, putting pressures on healthcare, social protection and fiscal space, among other things. However, these challenges can be turned into opportunities for developing a care economy, creating decent jobs and increasing incomes, especially for women, who represent the majority of workers in the currently underdeveloped care sector.

A rising number of older persons will increase the demand for care, including healthcare and long-term care, and the capacity to meet this demand needs to be developed early to ensure sustainability and inclusion . In Viet Nam, the number of people aged 65 and above is projected to reach 12.03 million (11.51 per cent of the total population) in 2029, 15.46 million (14.17 per cent) in 2036, 21.09 million (18.34 per cent) in 2049 and 25.16 million (21.52 per cent) in 2069. Based on the Viet Nam National Aging Survey 2022 and population projections for 2019–2069, the number of older persons needing support to perform activities of daily living will increase from 4.7 million in 2025 to about 6.5 million in 2035 – a 38 per cent increase in just 10 years.

The current system of care for older persons has three main components: (i) institutional care, which is largely provided by institutional facilities, such as social protection centres operated by the state and nursing centres operated by the private sector; (ii) community-based care, with a number of models such as intergenerational self-help clubs and charity centres, established and operated in communities by volunteers to foster social connections; and (iii) home-based care, which is predominantly provided by family members.

The current care system will not be able to meet the increasing demand for aged care. At present, there are 6 government-managed social assistance facilities and 40 privately owned facilities, serving a total of 5,788 older persons. There are about 400 nursing homes for older persons, mainly established and run by charity centres. The emerging community-based care model that has seen the greatest growth in Viet Nam comprises intergenerational self-help clubs, which aim to promote healthy ageing, social inclusion, volunteerism and mutual support among older persons and other community members. Despite progress, the number of older persons benefiting from community-based care accounts for about 15 per cent of the total number of older persons, equivalent to around 2.4 million people.

Home-based care is the most practised care model for older persons, with approximately 90% receiving this type of care, reflecting the country's strong cultural tradition of family support and intergenerational living. This care model is supported by family members as the caregivers, who are predominantly women, accounting for approximately 74 per cent of caregivers. Despite the cultural preference for this model, it is not sustainable due to rapid urbanisation, migration and social change. For example, changing family structures and the increased migration of women from rural to urban areas mean that fewer young family members are available to provide full-time care and long-term care for older persons. In summary, the current care system is under increasing pressure, as many older persons lack adequate care, including support for carrying out activities of daily living and suitable long-term care, to maintain their health and dignity.

By applying a strategic foresight approach, this study reveals challenges related to accessibility, quality, inclusivity and gendered roles of the care system. Access to institution-based care such as social assistance centres and nursing centres is limited due to the small number of centres, high costs and cultural stigma. This challenge is compounded by the shortage of qualified or well-trained caregivers, underscoring the high demand for enhanced education and training for care professionals and occupational recognition. Indeed, the professionalisation of care workers is lacking in Viet Nam. Traditional home-based care models are declining due to a smaller family structure, urbanization and an increase in formal job market participation , necessitating more diverse, professional and holistic care approaches.

Burdens of care are persistently gendered, with women disproportionately shouldering unpaid care work. The current care system focuses mainly on the provision of basic care to support physical needs and daily routines of older persons, with their emotional, social and psychological well-being often being overlooked. In addition, there are significant policy gaps in the care systems. This study highlights a lack of infrastructure and specialized care services in rural areas, leaving older persons in those areas underserved. While there are laws and policies related to care for older persons, such as the Law on the Elderly and the amended Law on Social Insurance, the challenges lie in weak implementation and coordination across government agencies. Furthermore, there are challenges related to financial support, such as limited pensions and social assistance programmes, and access to credit for older persons. Hence, the dialogue participants in this study call for better implementation of care-related policies, expansion of formal care services, financial support for older persons and caregivers, and recognition of older persons' rights and contributions.

This study also explores future scenarios of aged care in Viet Nam, outlining an ideal future scenario that can ensure a sustainable, inclusive and gender-responsive aged care system and support Viet Nam in realising high-income country status by 2045. This ideal future aged care system encompasses three main pillars: (i) holistic, diverse and technology-enabled care, (ii) qualified systems and professional expertise, and (iii)

financially innovative care. The first pillar focuses on providing integrated care services that address the physical, mental and social well-being of older persons through a holistic framework with a diverse range of care models and options. The second pillar highlights the need to develop a professional care workforce, supported by certified training programmes, occupational recognition, fair compensation and government investment. The third pillar underlines the importance of innovative financing mechanisms in developing a robust, gender-responsive aged care system. Public–private partnerships are one of the viable methods of making greater investments in the aged care system, while the expansion of pension coverage, social assistance programmes and community-based support are essential for supporting older persons to be financially independent and enabling them to access high-quality care services. Overall, early preparation, lifelong learning and gender-responsive care policies will enable older persons to age with dignity, health and happiness while remaining active contributors to society.

In the context of a rapidly ageing population, Viet Nam needs to transform its aged care system to be more anticipatory, adaptive and agile for meeting the evolving needs of an aged society while advancing sustainable socioeconomic progress. This study suggests six forward-looking policy recommendations, as follows.

(i) Raising awareness of early preparedness for healthy and happy ageing;

(ii) Promoting investments in care facilities and infrastructure;

(iii) Developing innovative financing products and models;

(iv) Enhancing education and training in aged care and social work;

(v) Strengthening social protection systems and pensions for older persons;

(vi) Using foresight in curating a care economy for older persons.

In conclusion, with the application of strategic foresight, this study sheds light on the need to develop a sustainable, inclusive and resilient care economy that can meet the rising demands of an ageing population while enabling sustainable development and achieving high-income country status. Viet Nam should respond proactively to strengthen an integrated care policy framework, improve institutional coordination, develop professional caregivers, promote investment and enhance financing.

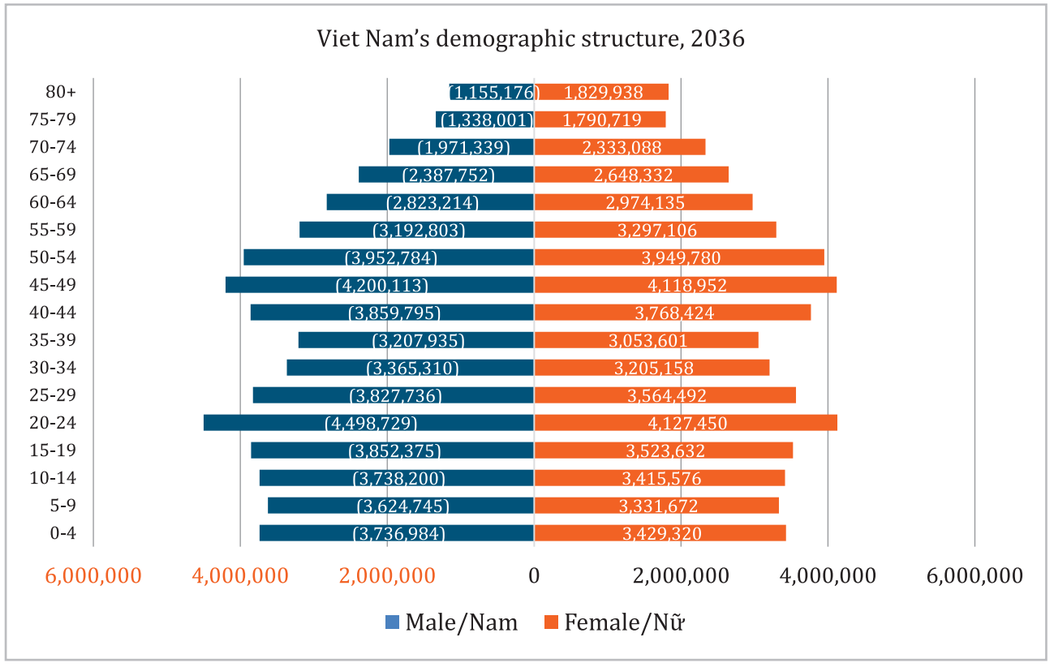
I. INTRODUCTION

1.1 AN OVERVIEW OF DEMOGRAPHIC SHIFTS

A country is considered to enjoy a *"demographic window of opportunity"* or "*demographic dividend"* when the proportion of children aged 0–14 years is lower than 30 per cent of the total population and the rate of older persons aged 65 and over is lower than 15 per cent (United Nations, 2004). Viet Nam is currently in this "demographic window of opportunity" (UNFPA, 2023). However, this window is projected to close soon, when each dependent is supported by two individuals in the working-age group (Xiujian Peng, 2005).

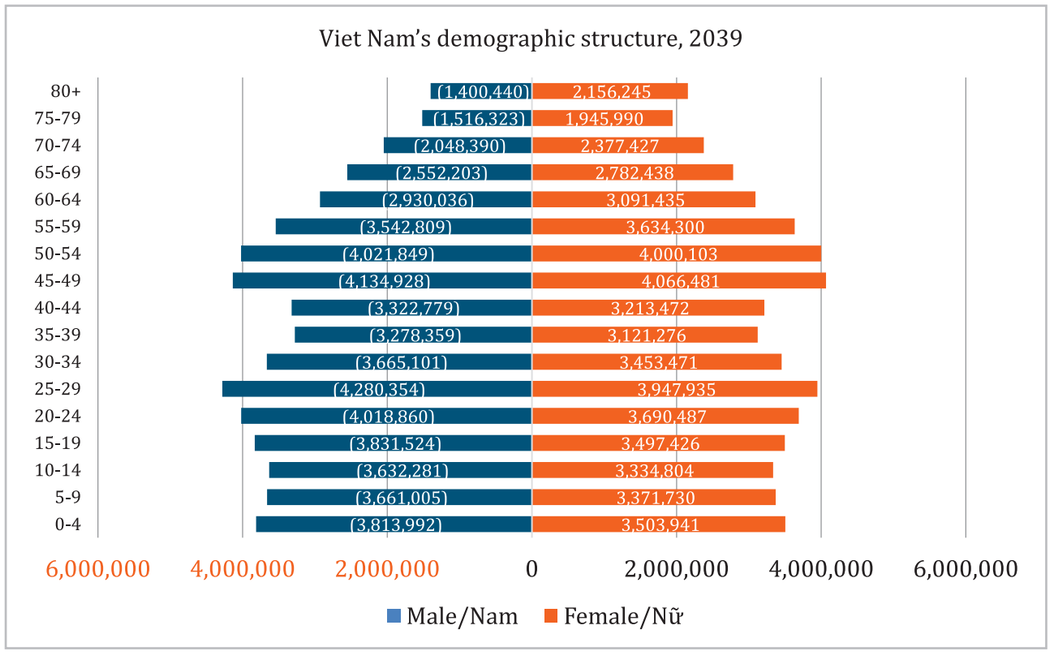
Since 2011, Viet Nam has been in the *"ageing period",* with 10.1 per cent of its total population aged 60 years and above. This number is projected to increase to 20 per cent by 2036 (UN-DESA, 2024), making Viet Nam transitioning from an *"ageing"* to an "aged" society. By 2039, the proportion of children aged 0–14 years is projected to be 19.23 per cent, while the proportion of the people aged 60 years and above will comprise 21 per cent, and the proportion of the people aged 65 and above is more than 15 per cent (GSO, 2020), as such, Viet Nam will end its *'demographic window of opportunity'.* The transition from ageing to aged population is much faster than many other countries, such as Thailand, Laos and China (see details of Viet Nam's demographic structure 2036 in Figure 1 and 2039 in Figure 2). This aging population represents one of Viet Nam's great achievements in improving socio-economic development and health care system in the past decades.

Figure 1: Viet Nam's demographic structure, 2036



Sources: UNFPA calculation (2025), using data from GSO (2020).

Figure 2: Viet Nam's demographic structure, 2039



Sources: UNFPA calculation (2025), using data from GSO (2020).

These demographic trends are linked to increased life expectancies and declining fertility rates over the past four decades. Life expectancy from birth for men and women increased from 63 and 67.5 years in 1989 to 72.3 and 77.3 years in 2024, respectively. The total fertility rate has decreased steadily in recent years, from 2.11 children per woman in 2021 to 1.91 in 2024, according to the Intercensal Population and Housing Census 2024 (GSO, 2025).

Such demographic transitions, along with other megatrends such as urbanization, migration, digitalization and changing family dynamics, will have profound implications for economic growth, labour market, social sector and environmental sustainability. As such, optimizing the benefits of the demographic transition and enhancing preparedness for a healthy and happy ageing society are fundamental for Viet Nam in avoiding the middle-income country trap and realising the high-income status.

This rapidly ageing population will increase the demand for care services, particularly health and long-term care (LTC), among the growing older population in the coming decades. Poor health and disability are among the most common issues facing older persons in Viet Nam, as nearly 45 per cent had at least one difficulty in performing activities of daily living according to the 2022 Viet Nam Ageing Survey (ADB and ISMS, 2023). A policy mapping report also shows that over 60 per cent of older persons have chronic diseases and need LTC services and lifelong medical treatment. Most of the older persons (90 per cent) want to receive care services at home (GSO, 2021).

The need for comprehensive care and support for older persons entails an expansion in care infrastructure, services and human resources, including social workers, medical workers and caregivers that requires greater investments. This rising demand poses a concern because Viet Nam's care system for all people in general, and for older persons in particular, currently remains underdeveloped and needs integrated, cross-sectoral investments to meet the diverse needs of the population, particularly those of older persons. This indicates that the care systems including healthcare, social care, LTC, employment, transport and entertainment need to be fit for purpose and ready to meet changing demands.

1.2 PURPOSES OF THIS PAPER

Based on a carefully devised process aimed at providing an understanding the care economy for older persons in Viet Nam through using strategic foresight approach, this paper has the following purposes:

- Assess the current care system to inform strategic planning: The paper assesses the current care system in Viet Nam by analysing both the demand and supply sides, highlighting a sharp increase in the number of older persons needing care in the context of care infrastructure, formal care services, and the availability and quality of caregivers. This assessment identifies critical gaps and inefficiencies, forming a baseline to guide strategic and forward-looking interventions to create a more equitable and sustainable care economy for older persons.

- **Anticipate demographic-driven care needs:** The paper applies foresight tools to anticipate and address the impacts of Viet Nam's demographic shift towards an aged population. Through scenario-building and stakeholder dialogues, it documents assumptions, expectations and desires of the current and future generations of older persons and their likely caregivers with regard to at-home and institutional care settings, and explores future care demands, emphasizing the urgency of developing a sustainable care economy that aligns with the evolving health, social and financial needs of older persons.

- **Drive inclusive, future-ready policy design:** Foresight is applied as a strategic, participatory tool for devising evidence-based, forward-looking policy recommendations. It helps identify barriers for developing the most accessible, affordable and adequate aged care system in Viet Nam, along with enabling factors, opportunities, incentives and investments needed. The foresight guides the design of anticipatory, adaptive, agile and inclusive systems aligned with Viet Nam's aspiration of achieving the Sustainable Development Goals (SDGs) by 2030 and becoming a high-income country by 2045.

- **Foster cross-sectoral cooperation and innovation:** With the application of foresight, the paper proposes a curated method for engaging diverse actors – government, civil society, caregivers and older persons – in co-creating future care models. This participatory governance approach facilitates innovation in care delivery, gender equity and public–private partnerships (PPPs).

1.3 STUDY APPROACH AND PROCESS

This study is conducted using a strategic foresight approach and aimed at informing policy development for the aged care system to ensure that it fits the diverse needs of Viet Nam's ageing population, not just today but in the future.

The study process had three main components, as follows:

- **Desk research** that aims to take stock of key issues, insights, trends and policy gaps with respect to Viet Nam's demographic structure and care economy.

- **Two focus group discussions (FGDs) with current and future generations of older persons and their likely caregivers** (see Annex 2) to obtain insights regarding the future situation of care in Viet Nam, including (i) current and future bottlenecks in relation to the scale of care needs; (ii) the level of public interest or concern regarding this issue; and (iii) the pace of maturation of the aged care sector, including its legal framework, human resources, investment and partnership.

- **A round-table discussion** (Annex 2) with different levels of policymakers from pertinent line ministries, state agencies and related development partners, to understand the kinds of investment, incentives and opportunities needed to best develop a care economy for an older population, along with key barriers and enabling factors, with a particular focus on marginalized groups.

II. CURRENT CARE PROVISION IN VIET NAM

2.1 DEMAND

The population projections under the assumption of medium fertility rates for the period 2019–2069 (GSO, 2020) show that the older population (60+) will reach 17.28 million (16.53 per cent of the total population) in 2029; 22.29 million (20.22 per cent of the total population[1]) in 2036; 28.61 million (24.88 per cent of the total population) in 2049; and 31.69 million (27.11 per cent of the total population) in 2069. This indicates that by 2049, one fourth (25 per cent) of Vietnamese population will comprise of older persons.

In the context of the international classification, an "aged population" is defined as the proportion of the population aged 65 and over accounts for 14 per cent of the total population. In Viet Nam, it is projected that the number of people aged 65 and above will reach 12.03 million (11.51 per cent of the total population) in 2029; 15.46 million (14.17 per cent) in 2036; 21.09 million (18.34 per cent) in 2049; and 25.16 million (21.52 per cent) in 2069. As such, Viet Nam is projected to have an aged population in 2036 (Table 1).

1. *UN-DESA (2024) predicts a similar number (21,050,000 people).*

Table 1: Projected number and percentage of older persons in Viet Nam

Year	Total population	Older persons aged 60+ (millions)	% of older persons aged 60+	Status	Older persons aged 65+ (millions)	% of older persons aged 65+	Status
2029	104,524,454	17.28	16.53		12.03	11.51	
2036	109,094,336	22.29	20.43	Aged	15.46	14.17	Aged
2049	114,987,322	28.61	24.88		21.09	18.34	
2069	116,893,529	31.69	27.11		25.16	21.52	

Source: GSO, 2020.

The updated projected figures from the United Nations Population Division Department of Economic and Social Affairs (UN-DESA) in 2024 are similar. They show that the older population (aged 60+) in Viet Nam will reach 14.699 million (14.5 per cent of the total population) in 2025; 21.05 million (20 per cent) in 2036; 27.8 million (25 per cent) in 2046; and 32.48 million (30 per cent) in 2061. This means Viet Nam will become an aged society by 2036 and a super-aged society by 2061 (Table 2).

Table 2: Projected number and percentage of older persons in Viet Nam

Year	Total population	Older persons aged 60+ (millions)	% of older persons aged 60+	Status	Older persons aged 65+ (millions)	% of older persons aged 65+	Status
2025	101,598,527	14.69	14.50		9.65	09.50	
2036	106,945,842	21.05	20.00	Aged	15.30	14.30	Aged
2046	109,827,659	27.19	25.00		31.78	18.00	
2061	108,138,073	32.48	30.00	Super aged	26.78	24.76	Super aged
2069	105,622,000	33.04	31.28		26.56	25.14	

Source: UN-DESA, 2024.

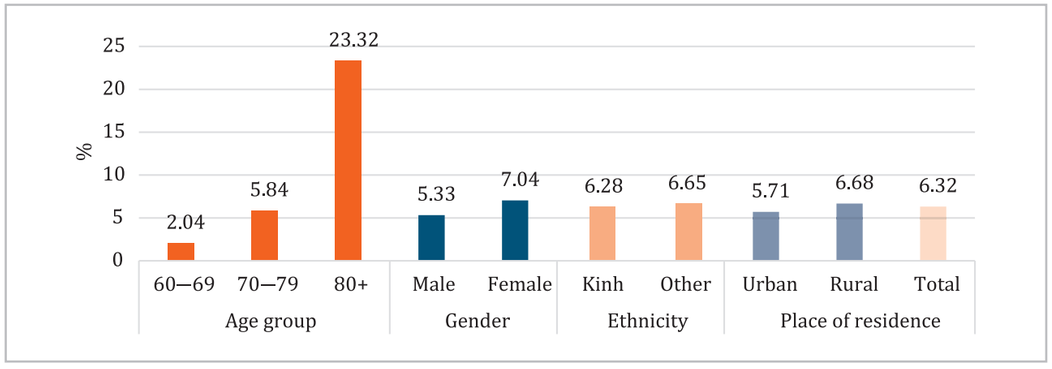
In terms of the age groups, the proportion of the young old population (aged 60–69) will increase and then decrease. In contrast, middle old (aged 70 – 79) and oldest old populations (aged 80 and above) will increase continuously. In particular, the oldest-old group (80 and above) will have the highest growth rate and overall increase, nearly doubling from 2.556 million in 2025 to 4.158 million in 2036 and quadrupling to 10.407 million in 2054 (UN-DESA, 2024). Such a fact implies a swift increase in the demand for care of older persons in the coming decades.

The urgent need for LTC and support for activities of daily living (ADL)[2] is emerging. LTC includes the medical and non-medical care of people with chronic diseases or disabilities that make them unable to take care of themselves for a long period of time (MOH and HPG, 2018). As such, it is important to know how older persons self-assess their capacity for self-care in order to design and provide care support and services.

One important factor affecting the care needs of older persons is how well they can perform ADL, which include (i) eating, (ii) putting on and taking off clothes, (iii) bathing and washing, (iv) getting up from bed, and (v) getting to and using the toilet. An older person is generally considered to need care if they find it very difficult to perform or cannot perform at least one of the ADL listed above. Data from the Population Change and Family Planning Survey (PCS) 2021 show the rates of older persons in different groups needing support for each ADL. In general, for all types of ADL, the oldest persons had much higher needs, with 23.32 per cent (or around 459,000 persons) needing support for ADL, than older persons in younger age groups. There were differences in terms of gender (older women had higher needs than older men), ethnicity (persons from 53 of Viet Nam's 54 official ethnic groups had higher needs than Kinh persons) and place of residence (rural residents had higher needs than their urban counterparts).

Data from PCS 2021 show the percentage of older persons who found it very difficult or impossible to perform at least one of the ADL, that is, the percentage of older persons who needed support to perform ADL by age, sex, ethnicity and place of residence. Overall, in 2021, a total of 6.32 per cent (or around 796,000 persons) of the older population needed support to perform ADL (Figure 3).

Figure 3: Percentage of older persons in need of support for ADL by age group, gender, ethnicity and place of residence

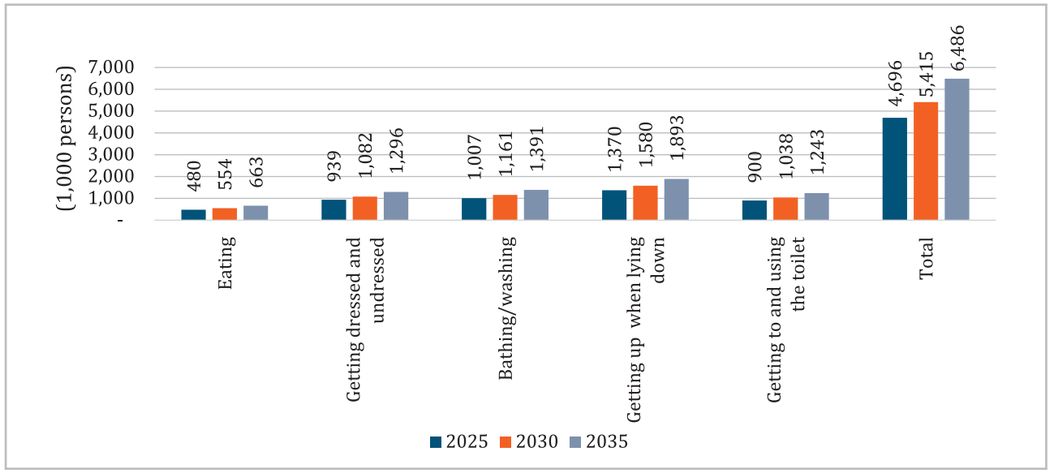


Sources: UNFPA et al. (2021), using data from PCS 2021.

The LTC needs of older persons in institutional and community care settings are increasing, due to the rise in the number of older population, social changes and limited provision of home-based LTC. This is because working-age family members have to work and/or have other caring responsibilities, for example caring for children or other family members, and therefore cannot stay at home to care for all older family members (ILO, 2022).

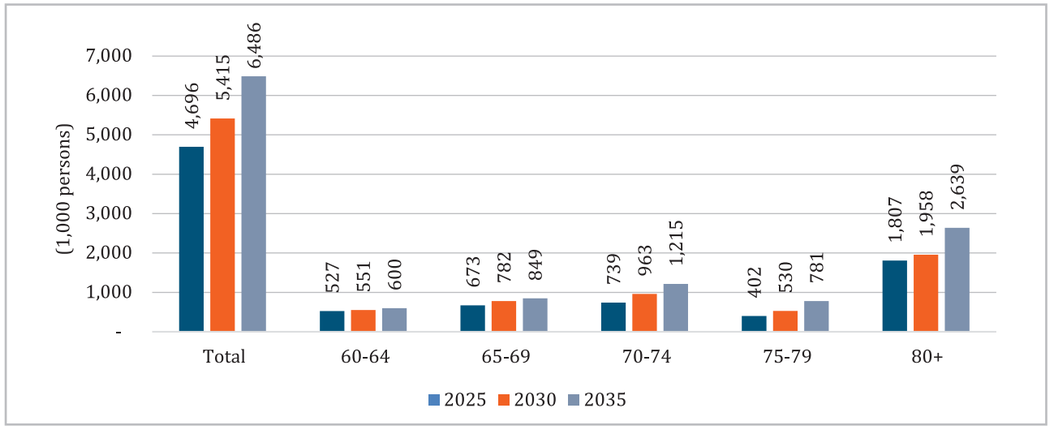
The combined data on ADL care needs derived from the Viet Nam National Aging Survey 2022, conducted by ADB and ISMS (2023), and the population projection statistics for 2019–2069 from the GSO (2020) –given that prevalence by age group and type of ADL difficulty is not likely to change – suggest that the number of older persons needing support to perform ADL will increase from 4.7 million in 2025 to about 6.5 million in 2035 – a 38 per cent increase in just 10 years (Figure 4). The data also indicate that those at more advanced ages, particularly the oldest old (Figure 5), as well as those facing difficulties in performing ADL (see Figure 4), would need to be prioritized in daily care provision.

Figure 4: Projections of number of older persons in need of support for ADL by year



Sources: G.T. Long's calculations, using data from ADB and ISMS (2023) and GSO (2020).

Figure 5: Projections of number of older persons in need of support to perform ADL by year



Sources: G.T. Long's calculations, using data from ADB and ISMS (2023) and GSO (2020).

2.2 SUPPLY

There are three common types of care provision for older persons in Viet Nam, including institutional care, community-based care and home-based care. While the demand for both short-term care and LTC for older persons is increasing, the outlook with regard to the availability of aged care providers is quite bleak. Below are some key findings of recent reports.

2. *There are some specific distinctions between ADL and LTC. Specifically, ADL are basic self-care tasks like bathing, eating and dressing, used to assess a person's functional capacity. In contrast, LTC encompasses a range of ongoing services – including help with ADL – designed to support individuals when they are no longer able to perform those activities because of a chronic illness or disability or aging-related limitations over time.*

2.2.1 Institutional care

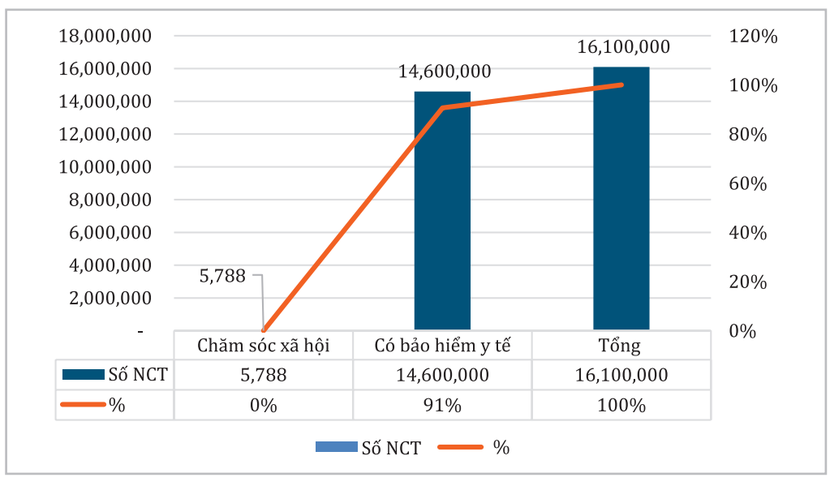
Institutional care includes both government-owned and privately owned facilities. Currently, Viet Nam has 46 social assistance facilities and institutional social work centres for a total of 5,788 older persons (Figure 6), of which 6 are government-owned facilities, providing care services for 835 older persons, and 40 are privately owned facilities caring for 4,953 older persons (MOLISA, 2022a). This report also pointed out that there are no centres caring for older persons in the northern midland and mountainous regions, while the Central Highlands region has two facilities and the south-east region has the largest number of 16 facilities. Currently, 32 out of 63 provinces have a total of about 400 nursing homes for older persons, mainly established and run by charity centres, while the number of older persons living alone and in need of care is increasing (Dai Doan Ket, 2024).

Although the number of older persons is increasing rapidly, the number of facilities caring for older persons is still insufficient and cannot meet the actual needs because these facilities and their equipment are in poor conditions. The caregivers at the facilities are both insufficient in quantity and weak in quality. The current facilities can only support 0.05 per cent of the number of older persons who are eligible for social assistance policy, meaning that they are lonely, poor, and having no relatives or anyone to rely on (MOLISA, 2022b).

In addition, by 2024, there were 65 registered facilities for war invalids and merit people nationwide, providing care for 1,325 individuals. However, as of July 2024, around 14.6 million out of 16.1 million older persons are enrolled in health insurance schemes, leaving nearly 2.4 million older persons without health insurance coverage. This gap highlights the need for continued efforts to achieve universal health coverage among older persons (MOLISA, 2024).

The FGDs and high-level round table on curating a care economy for older persons in Viet Nam, organized by the United Nations in 2024, revealed that private nursing homes cater to middle- and upper-income older persons who can afford higher-quality care services. They provide a comprehensive range of services, including medical care, rehabilitation and recreational activities. The advantages include better facilities, professional caregivers and personalized services. However, these nursing homes are costly, making them inaccessible to most older persons. Cultural norms in Viet Nam prioritize family-based care, leading to widespread societal reluctance to place older relatives in private institutions.

Figure 6: Number of older persons benefiting from social care and covered by healthcare insurance



Source: UNFPA's calculations, 2025.

2.2.2 Community-based care for older persons

The emerging community-based care model that has seen the greatest growth in Viet Nam is the intergenerational self-help club (ISHC).[3] The ISHC model aims to promote healthy ageing, social inclusion, volunteerism and mutual support among older persons and other community members. These clubs promote integration between older persons and younger generations through shared activities, peer support and access to healthcare, income generation and legal services. Supported by local authorities and non-governmental organizations, the clubs empower members through capacity-building and leadership opportunities, fostering resilience and sustainable development at the grass-roots level. This model is widely recognized and replicated nationwide.

The United Nations Population Fund, in cooperation with HelpAge International in Viet Nam, promoted this care model as an approach to providing integrated care for older persons in Thanh Hoa province from 2022 to 2024. It has been scaled up for three other provinces of Ha Noi, Hung Yen and Thua Thien Hue in 2025. Through a combined approach of community- and home-based care, the model eases pressure on public health system and families by encouraging local participation and shared responsibility for aged care. This approach brings together three key values of social capital, namely trust, connectedness and reciprocity, which are vital traditional values for social solidarity and sustainable development. Strengthening policies, increasing financial support and developing a trained workforce are essential for expanding home-based care, ensuring quality services and addressing the growing needs of Viet Nam's ageing population.

Residential care settings are home to a growing proportion of aged care services in Viet Nam. They provide long-term residential care, including personal and medical care, and "hotel services" such as cooking, laundry and cleaning. There are both public and private residential care centres under different names such as social protection centres, charity-run homes, nursing homes and centres, lodges and houses for older persons. The residential LTC model for older persons is also promoted, but with a view to mobilizing social investment capital.

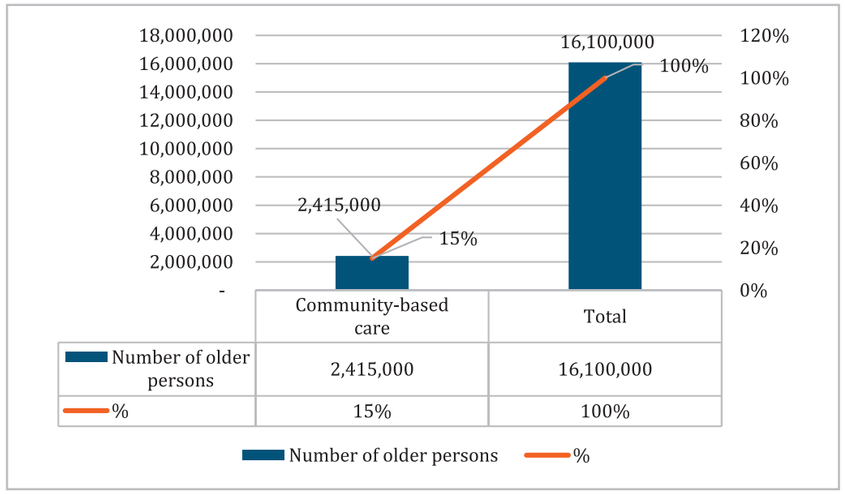
Community-based care for older persons provides healthcare, social support and home assistance within the community. It aligns with the Vietnamese traditions of family-centred aged care and fosters social engagement. Community-based initiatives often involve volunteer caregivers, local organizations and ISHCs. Established in 2006, the ISHCs have expanded to approximately 6,521 nationwide, with a collective membership of 456,470 (VAE, 2024). However, challenges include inconsistent funding and a shortage of trained caregivers. Stronger policy support is required for scaling up this ISHC model.

Despite progress, the number of older persons benefiting from community-based care accounts for a small fraction of the total aged population. The recent data estimate that only about 15 per cent, equivalent to around 2.4 million older persons, are benefiting from organized community-based care programmes nationwide (Figure 7). Recognizing the gap, Viet Nam aims to expand coverage by establishing such care models in 80 per cent of its communes by 2030 (VAE, 2024). This expansion is important for ensuring

3. *This model was approved by the Prime Minister for replication nationwide, through Decision 1336/QD-TTg, dated 31 August 2020, approving the Master-plan on replication of the ISHC model until 2035 and requiring integration into relevant national programmes (Decision 1579/QD-TTg, dated 13 October 2020, approving the Healthcare Program for older persons by 2030).*

that older persons can age with dignity, support and access to essential community-based services tailored to their individual needs.

Figure 7: Number of older persons benefiting from community-based care



Source: UNFPA's calculations, 2025.

2.2.3 Home-based care for older persons

Home-based care is currently the most popular and widely practised model of aged care in Viet Nam, reflecting the country's strong cultural tradition of family support and intergenerational living. In the Vietnamese society, it is customary for older persons to live with and/or be cared for by their children or close relatives. Around 90 per cent of older persons wish to be cared for at home as this model provides emotional comfort, reduces institutional care costs and maintains social connections.

Home-based care for older persons is predominantly provided by family members, with women being the main caregivers. About 74 per cent of home-based caregivers are women. Traditionally, older parents reside with their eldest son, and his wife assumes the primary caregiving duties, including assistance with ADL, health monitoring and emotional support. However, rapid urbanisation, migration and social changes pose challenges to this traditional model. For example, changing family structures and increased female migration from rural to urban areas mean that fewer young family members are available to provide full-time care and LTC. Many older persons, particularly in rural areas, are left behind while younger relatives migrate to cities for work, leading to an increase in "empty nest" households.

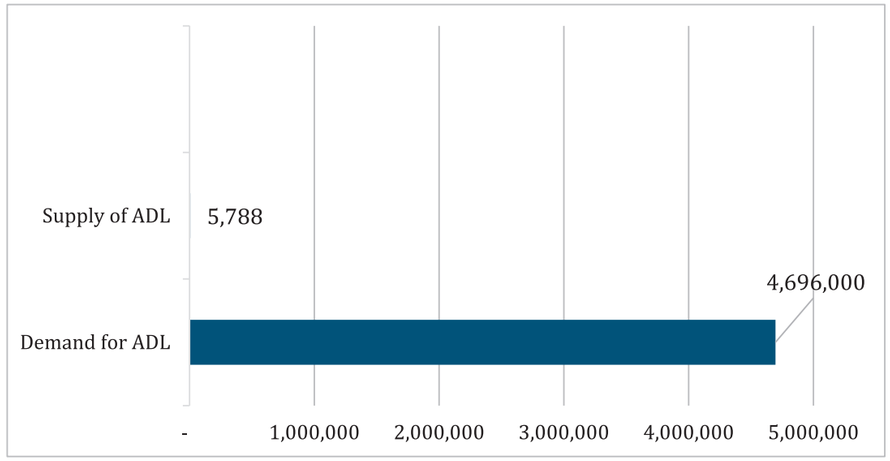
Moreover, the scope of home-based healthcare services is extremely limited. Service providers are only allowed to implement a physician's recommendations and cannot prescribe medication themselves. If older persons need a medical examination or treatment, blood sample collection, change of wound dressings or medication, they must consult a family doctor clinic. Many localities currently have no such clinics.

Despite efforts, access to home-based care remains unequal, with rural and remote areas often underserved. Formal home-based care[4] only benefits an estimated 3–5 per cent of older persons – equivalent to between 360,000 and 600,000 individuals. While about 70–80 per cent of older persons in Viet Nam currently benefit from some forms of home-based care. Strengthening both informal and formal aged care systems is crucial to ensure inclusive, equitable care for the rapidly ageing population.

4. Formal home-based care is delivered by trained, paid and contracted caregivers.

The number of older persons in need of care (see the demand for care in Figure 8) far exceeds the care services and facilities that can be provided by both public and private service providers. Specifically, excluding the number of older persons cared for in the community and at home, the percentage of older persons cared for in public and private facilities accounts for only 0.05 per cent of older persons needing ADL support – an extremely small proportion.

Figure 8. Demand and supply of ADL support for older persons, 2025



Source: UNFPA's calculations, 2025.

Some gaps between demand for and supply of aged care in Viet Nam are summarised below.

- **Significant rise in demand:** Viet Nam's older population is projected to grow substantially, with the number of those aged 80 and above increasing from 2.556 million in 2025 to 4.158 million in 2036 and 10.407 million in 2054. This demographic shift corresponds to a rising need for LTC services, with an estimated increase in the number of individuals needing assistance with ADL from 4.7 million in 2025 to 6.5 million by 2035 – a 38 per cent increase in just 10 years.

- **Insufficient care infrastructure:** The aged care services are alarmingly in shortage, with only 46 institutional facilities in the country catering to only 5,788 older persons. This represents only 0.05 per cent of those eligible for LTC services in social assistance facilities, indicating a vast shortfall in available care options. Furthermore, community-based care reaches only about 15 per cent of the older population, and formal home-based care services reach merely 3–5 per cent, leaving many older persons without care support.

- **Lack of trained caregivers:** Viet Nam is facing a critical shortage of trained and professional caregivers in the aged care sector. The number of qualified caregivers are unlikely to meet the growing demand from an estimated 6.5 million older persons needing LTC services by 2035, highlighting an urgent need for workforce development.

- **Quality and accessibility issues:** Existing care facilities often suffer from poor infrastructure, insufficient training for caregivers and cultural biases favouring family care and limiting the use of institutional services. In addition, about 2.4 million older persons do not have health insurance, hindering their access to necessary medical and care services. This exacerbates the gap between the demand for and supply of aged care services in Viet Nam.

2.3 IMPACTS OF AN AGEING POPULATION

The impacts of a rapidly ageing population are reflected in the following ways:

A rapidly ageing population presents a myriad of interconnected challenges, profoundly reshaping the socioeconomic landscape. One of the most significant transformations is observed within the family structure, which has traditionally been the primary source of care for older persons. However, evolving social demographics are putting strain on this informal safety net. Family members of working age, who would typically assume caregiving responsibilities, are increasingly constrained by the necessity of generating income, geographical distance from their ageing relatives or personal choices that lead them to opt out of these traditional roles.

The economic ramifications of this demographic shift are substantial, placing considerable pressure on public resources. The escalating demands for healthcare, LTC, social pensions and other forms of social assistance necessitate significant government investment to expand and fortify social care and social assistance systems. To adequately address the diverse and growing needs of older persons, substantial funding is required to develop a professional caregiving workforce, build appropriate infrastructure and establish robust community- and home-based services.

Currently, the financial burden of LTC for older persons falls overwhelmingly on household budgets and the personal savings of older persons themselves. State or charitable financial support is limited and typically reserved for the most vulnerable groups, such as those who are poor, unable to take care of themselves, have no close family members to care for them or have very severe disabilities.[5]

Compounding these issues is the nature of care provision itself. In Viet Nam, family members remain the principal caregivers for older persons, yet they are predominantly untrained to handle the complexities of aged care services, particularly in providing support for ADL. The formal care sector, still in its nascent stages, has not yet prioritized ADL support. Furthermore, as aged care has not yet been formally recognized as a profession, it remains unregulated, leading to inconsistencies in the quality and standards of care provided.

Beyond the family, the caregiving landscape is fragmented, comprising a mix of untrained, informal caregivers, untrained volunteers, trained volunteers and paid caregivers. While the training of volunteers represents a step towards the delivery of structured care, the provision of paid care services by trained staff remains largely ad hoc. This lack of a formalized and regulated system for all forms of caregiving presents a significant obstacle to ensuring consistent and competent care for the nation's growing ageing

5. *Based on the current regulations under Decree 76/2024/ND-CP on social assistance.*

III. FORESIGHT AND ITS APPLICATIONS FOR POLICY ANALYSIS AND PLANNING

3.1 FORESIGHT

3.1.1 Definition

Foresight (usually called strategic foresight) is *"a systematic, participatory, future-intelligence-gathering and medium-to-long-term vision-building process aimed at enabling present-day decisions and mobilizing joint action"*(Miles et al., 2016).

It is also defined by the Organisation for Economic Co-operation and Development as the *"structured and explicit exploration of multiple futures in order to inform decision-making"* (OECD, 2019). Strategic foresight typically involves scanning the horizon for signs of emerging change, developing and exploring a diversity of possible future scenarios, and identifying potential implications for the strategies and policies being developed in the present. Strategic foresight can provide a powerful foundation for the development of forward-looking public policies and help to ensure the future readiness of existing policies, particularly in the context of environments that are both complex and uncertain.

Foresight is a method to look beyond expected trends to better assess uncertainty and complexity, which empowers decision makers and policy planners to use new ways of adaptive thinking about and implementing strategic plans that are anticipatory, adaptive and agile (triple A) with the future.

It is one of several approaches that can help decision makers to develop more resilient approaches to policymaking. Strategic foresight typically involves **scanning the horizon for signs of emerging change, developing and exploring a diversity of possible future scenarios, and identifying potential implications for the strategies and policies** being developed in the present.

3.1.2 Foresight tools

There is a range of potential tools that can support a foresight process. Given the vast number of useful foresight toolkits and methods exist, prioritizing what is most useful in a particular context is profoundly important.

Those foresight tools (UNDP, 2022) can be organized into five categories based on the overarching functions they support, including (i) exploring the future, (ii) creating alternate futures, (iii) reimagining the future, (iv) transforming the future, and (v) future-testing strategies. Depending on the context, decision makers and practitioners are advised to choose the tools that are best fit for specific cases and purposes. (Please see details in Annex 1: Set of foresight tools.)

3.1.3 Why should foresight be used in a VUCA context?

In a world plagued with volatility, uncertainty, complexity and ambiguity (VUCA), hindsight and insight are no longer sufficient to accelerate sustainable growth and gain competitive advantage. Foresight takes uncertainty and turns it into manageable risk; it considers what things are most and least likely to happen in a VUCA world and reveals their associated probabilities and indicators.

Embedding foresight to improve anticipatory, adaptive and agile decision-making is fundamentally an approach involving risk and opportunity management, with the aim that policymakers and managers can effectively see, manage and respond to short- and long-term risk signals. By doing so effectively, decision makers will be able to:

- Navigate uncertainty and mitigate current and future strategic risks to ensure the resilience, sustainability and long-term success of strategic goals.
- Use these data and this understanding to inform current and future evidence-based decision-making, shape strategic planning, and improve the effectiveness and relevance of current and future policies or actions.
- Clearly define organizational roles, priorities and strategic relevance to remain adaptable and resilient in response to evolving trends, emerging signals or sudden shocks that may escalate or evolve unpredictably.

The purpose of foresight is not to predict events, but to offer strategic early warning of events (either positive opportunities or negative shocks) that may be hidden or around the corner and to test planning assumptions. As governments do not have infinite resources and must hedge their bets when deciding on major policies and investments, it is essential to capture, understand and better prepare for emerging global, regional and local fragilities and opportunities by using systematic analysis and accurate indicators and measurements.

Governments have historically found it difficult to embrace long-term, anticipatory policies due to the following (Krishnan, 2024):

- The structures and operating models that have historically allowed governments to operate at a national scale are not adapted to respond to the current global context in which problems are framed (e.g. global warming).

- It can be difficult for governments to invest resources in proactive management of a problem area before it is widely understood by the public, exacerbated by the fact that scientific and technological progress is becoming increasingly niche and specialized.
- Traditional governmental planning and policymaking is future-oriented in nature, but it involves significant investment in upfront analysis based on past information to deliver a comprehensive and effective response to the issue at hand, with little room for experimentation or iteration.
- The Government's reliance on specialization has morphed into rigid "siloization" of public policies, hindering its ability to gain a complete picture of a complex challenge that cuts across multiple subject domains, further dulling its capacity to respond successfully (Tõnurist and Hanson, 2020).

Systematizing the effective use of long-term thinking through applying foresight in planning and policy generally requires some revision of governance structures themselves. The use of foresight – and the shifts necessitated at the level of institutional processes, infrastructure, operational agility, culture, relationships and mindsets to make space for the meaningful application of knowledge about future risks and opportunities in decision-making – is the work of anticipatory governance aided by foresight tools.

It is imperative to recognize the profound and irreversible implications of Viet Nam's accelerated demographic transition. A proactive policy stance is crucial, not only to mitigate potential risks but also to ensure that this demographic shift does not derail the nation's long-term socioeconomic ambitions. Accordingly, this paper is underpinned by a methodological approach that integrates strategic foresight to develop a nuanced understanding of the requirements of the country's future care economy for older persons.

3.1.4 Differences between foresight and forecasting

Forecasting and foresight are both tools used in anticipating the future, but they differ in purpose, methodology and time frame.

Forecasting is the process of predicting future events based on current and historical data. It relies heavily on quantitative methods such as statistical models, trend analysis and econometrics. Forecasts are typically short- to medium-term, specific and data-driven, aiming to estimate likely future outcomes with a degree of probability. For example, weather forecasts or economic growth projections are based on observed patterns and trends. A forecast is a linear approach in determining a specific point in the future.

Foresight is an exploratory, systematic and strategic approach for thinking about futures. While using a range of quantitative and qualitative data, it emphasizes action-oriented process, scenario-building, participatory consultations and stakeholder engagement. Foresight is less about predicting what will happen, but more about exploring what could happen. The approach is about understanding a range of signals, trends and disruptions, especially in the long term. It is used to create a range of scenarios for different time spans, especially for a long term from 5–10 years into the future. Then, **possible**,

probable and **preferred** future scenarios are identified, and the implications of those future scenarios are analysed and synthesised to inform decision making.

In essence, a forecast focuses on predicting a probable future based on existing data, while foresight explores multiple possible futures. Both are valuable for informing decision making. A forecast helps prepare for expected developments, whereas foresight prepares for uncertainty and complexity. **Foresight is especially useful in times of rapid change or when facing unpredictable challenges.** Differences between forecasting and foresight are presented in Table 3 below.

Table 3: Differences between forecasting and foresight

Forecasting	Foresight
Scope: Forecasting is narrow and focused, often concentrating on specific variables or trends, based on existing data or information.	**Scope:** Foresight is broad and holistic, incorporating sociopolitical, economic, technological and environmental factors. It focuses on exploring a range of possible futures based on a mixture of quantitative and qualitative research. This work is carried out using scenario analysis.
Approach: Predictive and specific, aiming to estimate future outcomes based on current trends and data.	**Approach:** Explorative and open-ended, considering multiple possible future scenarios.
Methodology: Relies on quantitative methods such as statistical models, historical data analysis and econometric models.	**Methodology:** Uses qualitative methods like scenario planning, the Delphi method and trend analysis.
Time horizon: Often focuses on the short to medium term (1–5 years).	**Time horizon:** Typically considers the long-term future (10–20 years or more).
Purpose: Aims to predict the most likely future scenario, supporting precise planning and decision-making.	**Purpose:** Aims to aid preparation for a range of possible future scenarios, by enhancing adaptability and resilience.
Uncertainty: Attempts to reduce uncertainty by making probabilistic predictions based on available data.	**Uncertainty:** Embraces uncertainty and complexity, recognizing that the future is inherently unpredictable.
Flexibility: Often results in fixed plans based on predicted outcomes.	**Flexibility:** Encourages the use of flexible and adaptable strategies to cope with various future scenarios.

Source: Bendig, 2024.

3.2 INTERNATIONAL EXPERIENCE IN FORESIGHT APPLICATIONS

The practice of strategic foresight has been in use by many governments globally for decades, albeit in mostly developed economies. Governments have, to date, utilized the practice of strategic foresight at either the country level or the federal level, or for specific policy initiatives.

The following examples, which are based on lessons in effective foresight institutionalisation (Prítyi et al., 2021), are not exhaustive but provide an overview of strategic foresight initiatives utilized by governments globally at the national level. They describe how governments may utilize this practice at a macro level but do not give details of specific policy initiatives.

3.2.1 Singapore

Singapore has a long history of providing high-level support for strategic foresight, linked to the country's security and geopolitical context. Singapore's extremely successful foresight system is characterized by a high degree of centralization, which ensures that foresight work in Singapore has impact through proximity to the most important decision makers. The Centre for Strategic Futures within the Prime Minister's Office has a central role among the government's foresight units. The centre also does capacity-building work for public servants through its "Future Craft" workshops. Sectoral foresight units exist across the Government of Singapore. One notable example is the Strategic Foresight Unit at the Ministry of Finance, which has "a mandate to ensure that government futures work is built into the ministry's budgeting process." Public sector foresight experts are part of the Strategic Foresight Network Sandbox, which has been hosting regular meetings since 2011.

3.2.2 United Arab Emirates

The Government of the United Arab Emirates (UAE) launched the Future Foresight Strategy, which involves building future models for the health, educational, developmental and environmental sectors, harmonizing current governmental policies, building national capacities in the field of foresight, establishing international partnerships and launching research reports on the future of the various sectors in the country. Foresight helps the UAE Government to establish the systems that underpin its strategic planning, and also to launch studies and scenarios to forecast the future of all priority sectors in addition to setting plans and policies based on the outcomes of foresight exercises.

3.2.3 Australia

Australia's foresight capacities exist within specialized teams in various government ministries, including the Department of Foreign Affairs and Trade; the Department of Education, Skills and Employment; and the Department of Industry, Science, Energy and Resources. A Futures Hub is funded by a joint venture between the Australian Government and the Australian National University and is a whole-of-government and whole-of-nation resource to support thinking, planning and policy work through examining strategic futures relevant to national security futures. The Futures Hub leads the Australian Strategic Futures Network, a collaborative network with members from State and Federal Government foresight teams. The Commonwealth Scientific and Industrial Research Organisation (CSIRO) is Australia's national science agency and has a dedicated foresight team (CSIRO Futures) and an Insight Team that analyse emerging trends, drivers and scenarios, and apply modelling approaches to generate insights and inform future strategy and policy decisions, with a particular focus on digital technology and data-driven science. Australian and New Zealand government agencies collaborate in a shared horizon scanning service and database known as the Australasian Joint Agencies Scanning Network (AJASN). The AJASN has been running since 2004.

3.2.4 Canada

Canada has one of the most well-established government foresight ecosystems in the world. At its heart is Policy Horizons Canada (Policy Horizons), the Federal Government's central foresight organization providing cutting-edge futures research, strategic foresight services and foresight capacity-building since 2009. The institutional structure supporting Policy Horizons ensures a high level of buy-in from public service leadership. Policy Horizons reports to a steering committee of deputy ministers, the highest-ranking non-partisan civil servants in Canada. This steering committee provides guidance and direction to Policy Horizons and has strategic conversations about the foresight thought leadership developed by the organization. With over 40 full-time employees, Policy Horizons is currently one of the largest dedicated public sector foresight organizations in the world. This capacity enables the development of sustained expertise and in-depth foresight analysis on futures issues related to a wide range of public policy topics, as well as a significant outreach function aimed at leading collaborative foresight work and building foresight capacity in departments and agencies across the Federal Government. Policy Horizons hosts a network of foresight practitioners from across the Government of Canada, with over 200 representatives from over 50 Federal departments and agencies. The network is an important part of mainstreaming foresight capacity throughout the Canadian public service. In 2021, Policy Horizons launched its inaugural Futures Week conference to showcase foresight to an even wider audience of public servants.

3.2.5 Finland

Finland has one of the most elaborate systems of foresight in the world. The emphasis on foresight in Finland evolved after an economic crisis in the early 1990s and in response to security concerns related to the country's geography. Finland is home to foresight networks within national and regional government, academia, civil society and the private sector, which together form a complex anticipatory ecosystem. By involving so many parts of society, the Finnish foresight ecosystem combines bottom-up and top-down approaches with a high degree of inclusiveness. Finland's National Foresight Network functions under the authority of the Prime Minister's Office in cooperation with Sitra, the Finnish Innovation Fund. Sitra, though technically within the jurisdiction of the Parliament, is largely independent, including in how it manages its funds. Sitra has a mandate to "ensure the future wellbeing of Finland" and to "support and challenge" government, often by raising issues that are not always a priority for those in power. In-house foresight capacities exist within various government ministries. These include regular future reviews, which have been taking place since 2003, and efforts to establish a dedicated foresight capacity in all ministries. While there are occasional tensions between ministries, due to different sectoral priorities shaping their views of the future, collaborative futures thinking allows participants to articulate and build a shared understanding of these tensions.

The flagship foresight product within Finland is the government futures report, which is conducted every four years at the beginning of a new administration's term. This is a tradition dating back to the 1990s, with the study's theme set by the Prime Minister in collaboration with an interministerial group. A highly participatory process takes place over two years, involving all relevant stakeholders, with a dedicated budget and personnel. Parliament is involved in the drafting of the report focusing on long-term strategic priorities, and the report is intended to serve as a resource for all political parties in the design of their election campaign platforms.

3.2.6 Estonia

The Estonian foresight system was inspired by that of Finland. The Foresight Act is the legal basis for foresight institutionalization in Estonia. This Act established the Foresight Council, consisting of research, technology and business experts, and the Foresight Centre, a think tank within the Estonian Parliament. The Council approves the Foresight Centre's activities. The Centre envisages possible future scenarios

for policymakers so that they can "future-proof" policies. The Estonian Foresight Act also makes the inclusion and participation of the wider public mandatory. Perhaps most notably, the Centre does post-assessment of old foresight work after a certain period, essentially incorporating an evaluation component into their work that compares actual progress to scenarios and outlooks after a certain period of time. This function makes it possible for foresight practitioners to "demonstrate their value to senior decision makers."

3.3 RECOMMENDED LESSONS FOR VIET NAM

Based on the experiences of the six countries above, below are some recommended lessons learned for Viet Nam to apply to its foresight considerations:

- **Integrate foresight into governance:** Establish centralized foresight units, similar to Singapore's Centre for Strategic Futures, directly linked to top decision makers to enhance impact on policymaking.
- **Capacity-building:** Invest in training programmes for public servants, similar to Australia's Futures Hub, to enhance strategic foresight skills and create a culture of foresight across government sectors.
- **Collaborative networks:** Foster networks of foresight practitioners, akin to Canada's Policy Horizons, to share insights and develop collaborative foresight work across various government departments.
- **Cross-sector engagement:** Create inclusive foresight ecosystems by involving government, academia and civil society, as seen in Finland, to address diverse perspectives and build shared futures.
- **Regular future reviews:** Implement periodic comprehensive foresight reports, like Finland's Government futures report, to reassess long-term strategic priorities at the beginning of each administration.
- **Public participation:** Involve the wider public in foresight exercises, as mandated by Estonia's Foresight Act, to ensure transparency and gain diverse insights into future scenarios.
- **Evaluate foresight outcomes:** Establish mechanisms for post-assessment of foresight activities to measure their effectiveness and adapt strategies accordingly, ensuring continuous improvement in policy development.

These lessons offer a comprehensive approach to embedding strategic foresight into Viet Nam's governance, enhancing its capacity to anticipate and effectively respond to future challenges in the context of a rapidly ageing population.

IV. RESULTS OF THE DIALOGUES ON THE CARE ECONOMY USING STRATEGIC FORESIGHT

4.1 APPLICATION OF THE THREE HORIZONS FRAMEWORK FOR THE DIALOGUES ON THE CARE ECONOMY

Viet Nam's rapid population ageing increases the demand for care services for older persons, indicating potential growth of the care economy. Currently, Viet Nam's care services for all people in general and for older persons in particular remain underdeveloped. It requires investment from the Government and the private sector to meet the individual care needs of those in need and to better adapt to rapid population ageing.

To understand and develop the care economy for older persons in Viet Nam, application of innovative tools and solutions such as strategic foresight has proven useful, especially in the context of demographic shift. Strategic foresight is highly relevant for uncovering the current state and envisaging the desired state of the care economy for older persons.

In this regard, two exploratory focused group discussions were carried out using strategic foresight tools to understand the current situation, expectations and desires of various groups of stakeholders, including the current and future generations of older persons and the current and future caregivers

from both home- and institution-based care settings. Building on the results of the two dialogues, a round-table discussion was also conducted with older persons, caregivers, care service providers, and policymakers at various levels (see details in Annex 2).

The Three Horizons Framework– one of the strategic foresight tools – was applied for the above dialogues. It is a tool that helps unpack the current assumptions about the future – or the alternative futures scenarios that have been conceived – to explore emerging changes and the transition processes (as a way of reframing those assumptions), and to design or come up with strategies, policies and programmes that can connect the present to the future.

This framework is proven useful to support dialogue participants thinking explicitly about not only the current state of an existing system, but also the prospects for both incremental and large-scale change to achieve the desired outcomes for the future. The first horizon involves examining the current paradigms, assumptions and data to understand the current situation and discover the pockets of futures. The second horizon begins to give a sense of how some of the imagined futures may happen by identifying potential shifts and changes. The framework is useful for increasing visibility and clarity on **what** needs to happen to create pathways towards the desired future (i.e., the third horizon).

The Three Horizons Framework helps stakeholders visualize and manage short-, medium- and long-term priorities in developing an aged care economy. It supports balancing urgent needs, scaling innovative models and planning transformative, sustainable systems – essential in a rapidly ageing society to ensure responsive, future-ready care that adapts to demographic, social and economic shifts.

The results of the three dialogues conducted using the Three Horizons Framework tool is presented in the following section.

4.2 KEY FINDINGS FROM DIALOGUE LABS APPLYING THE FORESIGHT TOOL

4.2.1 Changing needs and roles in aged care

The future of aged care demands a multidimensional approach that integrates mental and social well-being with physical health. This holistic model is essential for addressing the diverse needs driven by evolving lifestyles, expectations, and complex ageing patterns, moving beyond a purely clinical focus (medical care) to encompass the overall quality of life for older persons.

Compounding this shift, traditional family-based care structures are weakening due to urbanization, smaller household sizes and increased workforce participation. Consequently, a greater reliance on professional caregivers and formal institutional services is anticipated, as informal support networks within the family become less available for a growing number of older persons.

This transition also involves a re-evaluation of gender roles in caregiving. While women continue to shoulder the majority of unpaid care, there is a growing recognition of the need for men to participate more actively in both formal and informal care. This cultural shift is critical for developing a more equitable and sustainable care ecosystem and care economy for older persons.

4.2.2 The current aged care system can only sustain older persons, rather than take care of them

The prevailing philosophy of the current aged care system in Viet Nam prioritizes the management of basic physical needs and daily routines, often overlooking emotional, social and psychological

dimensions of the older persons' well-being. This approach can inadvertently neglect the dignity and individual preferences of the older persons.

This finding highlights the gap between a system that simply sustains older persons and one that enables them to lead enriching and joyful lives. While providing for basic needs is fundamental, a truly effective care model must evolve towards a holistic approach that actively supports mental health and social engagement, ensuring a more meaningful and dignified old-aged life.

4.2.3 Shortage of trained caregivers and high cost of care

Viet Nam's aged care system is critically undermined by a dual challenge: a severe shortage of skilled caregivers and prohibitive costs for services. There is a significant deficit of caregivers equipped with specialized training in geriatric health and psychosocial support. Along with the lack of qualified care professional, the fees for institutional care services are so high. The high price of care services – often exceeding VND 7 million per month per person (approximately USD 280) – create an insurmountable financial barrier for most older persons, particularly those lacking pensions, social assistance or robust family support.

> *All provinces and cities do not have geriatric hospitals. Currently, only big cities have geriatric hospitals. In the provinces, there are none, or if there are, there are no geriatric specialists (FGD participant, 2024).*

The current government policies supporting older persons remain limited, particularly in promoting financial independence through pensions and/or social assistance schemes, ensuring affordable and accessible healthcare and investing in specialized aged care institutions. This policy gap leaves a majority (over 60 per cent) of older persons vulnerable, relying heavily on family support or facing unmet needs in their later years. Simultaneously, financial remuneration for both home-based caregivers and institutional providers is insufficient. This lack of investment hinders the development of a sustainable and affordable care system as families struggle to afford services and care service providers cannot maintain high standards.

4.2.4 Inadequate training models

A fundamental obstacle to quality aged care is the absence of a formalized system for care training and professional development. There is a critical shortage of trained caregivers due to the absence of structured, government-supported training programmes. Without training codes, career codes, standardized curricula and certification systems, caregiving training remains informal and the status of care profession remains undervalued. This results in inadequate care quality and limited professional development opportunities in the growing aged care economy.

Furthermore, the existing care training programmes are less relevant in practice including limited specialization for geriatric care. The mismatch between the current training programmes and actual needs results in an underqualified workforce that are unable to meet the growing care demands of the ageing population.

Compounding these workforce development issues are significant gaps in the regulatory and legal frameworks that are needed to support development of the aged care economy. Current regulations are often too broad to be enforced for the required standards of care, while a lack of preferential government policies – such as incentives for infrastructure and predictability for long-term land leases – deters much-needed private investment. The absence of a supportive and enabling environment makes the investment in a high-quality aged care service a high-risk endeavour for potential investors.

4.2.5 Cultural stigmas

Cultural norms and traditional views of family obligation present a significant barrier to the uptake of professional aged care services. A prevailing social stigma, which often views reliance on nursing homes or formal caregivers as "unfilial", creates deep reluctance among families to seek outside support. This fear of social judgment not only limits the potential demand for and growth of the formal care sector for older persons, but also reinforces the caregiving burden on family members, disproportionately hindering the economic participation of women.

This cultural mindset is further reflected in broader societal attitudes and legal structures, which often fail to adequately recognize the contributions and potential of older persons. By not recognising their value, experiences and knowledge as assets, policy innovation is stifled. This perpetuates a view of older persons as passive recipients of care rather than active participants in society, thereby limiting the development of a more progressive, empowering and rights-based approach to ageing.

> *Referring to legal aid for older persons, many older persons suffer from violences in many forms without realizing it, i.e., dividing (their) property without their knowledge (FGD participant, 2024).*

4.2.6 Quality and gendered burden of care

There is a strong consensus that the quality of aged care services in Viet Nam is severely constrained by a deficit of adequately skilled caregivers. Most caregivers, whether in home-based or community settings, lack formal care training and essential soft skills required for performing their roles effectively. Consequently, even though the preferred care models such as home-based and community care are available, the lack of qualified professionals limits their service quality, expansion and effectiveness.

The dialogues also reveal a deeply entrenched gendered burden of care. A strong consensus emerges that women are overwhelmingly positioned as primary caregivers, a role often assigned irrespective of their personal desires, skills or even the preference of the care recipient. However, it is also clear that this traditional expectation is being challenged, with a growing acknowledgment that these roles must evolve to become more equitable.

Looking ahead, these realities are shaping a notable evolution in preferred aged care models. While home-based care is traditionally favoured, a divergent and forward-looking perspective has emerged. Many future older persons anticipate that their children will live elsewhere and express a strong desire for self-dependence within a supportive peer network. Therefore, for a growing number, the independence and professional support found in high-quality institutional settings are becoming a more desirable LTC solution.

> *The quality of care in facilities is only basic and is often better than home care. In the long term, care facilities need to improve the quality of services to meet the needs of the older person. In addition, care staff in facilities need to pay more attention to the mental health of the older person, not just focusing on physical health (FGD participant, 2024).*

4.2.7 Policy gaps

A significant policy gap exists in the provision of aged care services, most notably manifesting as a regional disparity in access. The participants consistently highlight the lack of infrastructure and specialized care services in rural areas, which leaves older persons in these regions critically underserved. This challenge is particularly acute for those without a stable income, facing immense difficulty in accessing even basic care support due to a lack of targeted policies.

A more fundamental problem lies in weak policy enforcement and coordination. While Viet Nam has numerous laws and policies relevant to the care of older persons – including the recently amended Law on Social Insurance – their implementation is often inconsistent and lacks transparency. Many policies are criticized for being too generic and impractical, especially in sensitive areas like delivery of mental healthcare services, social work services and protecting older persons from violences. Furthermore, weak coordination among government ministries, agencies and local authorities leads to duplication of efforts and overlapping responsibilities, hindering effective provision of care for older persons.

Another policy gap exists regarding the financial inclusion for older persons. The difficulty in accessing capital or credit, particularly for those in rural areas, prevents many older persons from investing in income-generating activities, especially for older persons at younger ages, and affording necessary care services. The dialogues reveal that most older persons at younger ages still have the ability and willingness to continue working for the purposes of income generation and social inclusion. If there is a policy on credit support for them, they will be able to leverage their commitment, experience and knowledge to continue earning, contribute to society and afford aged care services with financial independence.

The current Law on the Elderly, designed to protect and care for older persons, contains a number of vague provisions and lacks meaningful penalties for abuse or neglect. In addition, it lacks provisions for promoting the roles of older persons in the economy and society. This critical legal gap undermines accountability across the system, leaving many older persons vulnerable to potential mistreatment in institutional, community- and home-based care settings and failing to guarantee their fundamental rights to safety and dignity.

Finally, the dialogues also highlight the lack of government policy on mitigating the gender disparities in aged care, with a disproportionate burden on women. It is recommended that the Government undertake policy interventions to empower women with the skills and knowledge needed to transition from informal to formal care roles and to facilitate their access to financial assistance, economic opportunities and social protection, especially for those providing unpaid care. Crucially, these policies should also actively encourage male participation in the aged care economy in order to effectively narrow the significant gender gap and promote equality.

4.3 PROPOSED POSSIBLE FUTURE SCENARIOS

4.3.1 Ideal futures of aged care

A reimagined, future-fit care system fulfils both the ambitions of building an economy that is ready for graduation to upper-middle income and high-income status, as well as fulfilling the ideological principles of President Ho Chi Minh of **independence**, **freedom** and **happiness**, with the following possible future scenarios:

- Development of the aged care system offers significant potential for job creation across diverse roles from professional caregivers to support staff. This expansion can drive inclusive economic growth, reduce unemployment, especially among women and youth, and enhance social protection system; thus, generating widespread socioeconomic benefits for individuals, families and communities.

- Creating employment opportunities for older persons, who are still capable and willing to work, supports active ageing, reduces dependency and promotes financial independence. It also leverages their valuable experience and skills, fosters intergenerational exchanges and contributes to social inclusion, thereby challenging ageist stereotypes and enhancing overall productivity of the economy.

- There is growing potential to engage the private sector, particularly by promoting PPPs, in developing the aged care system including services, infrastructure and innovation. Ensuring market transparency, supporting workforce development and promoting demand through awareness-raising campaigns can attract investment and foster innovation in aged care services and infrastructure while encouraging supportive policies and risk-sharing mechanisms to unlock private sector participation. To this end, the government can offer tax incentives, streamline regulatory frameworks and enhance bureaucratic processes.

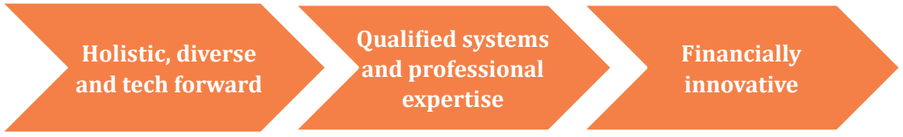
- A future-fit care system prioritizes caregiver wellbeing and safety through safe working conditions, fair wages and stable employment. It also ensures access to social protection policies such as health insurance, pensions and paid leave; thus, promoting dignity, security and long-term sustainability for the caregiving workforce.

- Establishing a robust system for professional development of care workers with appropriate financial remuneration and support will strengthen domestic care workforce, reduce reliance on informal or overseas labour, enhance care quality and prevent outflow of skilled care professionals from the sector (i.e., human resource drain).

- A holistic care system that can offer a variety of options to the older populations based on their wants and needs, such as an option for home-based care and options for more independent, peer-networked care for those who want to have more freedom, social networks and the ability to care for themselves.

The plans and desires for a future aged care system in Viet Nam can be summarized in three key pillars, as illustrated in Figure 9 below.

Figure 9: Characteristics of a future aged care system in Viet Nam



Pillar 1: Holistic, diverse and tech-forward

An ideal aged care system should provide integrated services that address the physical, mental and social well-being of older persons through a holistic framework. It should also offer a diverse range of care models and service types – including home-based, community-based, and institutional and faith-based care in temples or churches – to meet varying needs across age, gender and cultural contexts. Importantly, older persons should be empowered with flexible options to choose the types and levels of care that best suit their personal preferences, individual needs and financial capacities.

Providing more holistic social options for older persons, including intergenerational and peer-network communities, is important to ensure that they can maintain their friendships and independence. As the next generations of older persons have fewer children compared to their parents and may not necessarily want to fulfil the same filial duties, a diversity of care options is important for fulfilling their needs.

> *In the future, the current generation tends to have fewer children, so taking care of the older persons will not follow the old tradition (FGD participant, 2024).*

The dialogues also emphasized that young people today are technologically skilled. As they become older, they should have a care system that is technologically enabled and can allow them to be more independent by integrating technology into their care.

Pillar 2: Qualified systems and professional expertise

There was an overwhelming consensus among dialogue participants that the ideal future aged care system would have professionally trained staff and caregivers. It is crucial to have qualified caregivers or professionals with good communication skills and understandings of ethics to meet a range of needs and health conditions, covering mental and physical health and abilities.

> *Conditions to ensure the effectiveness of future care workers is to get them properly trained in expertise: medicine, care, ethics and professional skills, listening skills and understanding, so that in 30 years these workers can make a living from their profession. In the future, the government needs to have a training plan from within schools. Those who have a kind heart and want to work in the field should be trained early (FGD participant, 2024).*

The dialogue participants also envisaged ensuring that future caregivers are properly trained and receive appropriate financial compensation for their services. Establishing professional training standards and government financial support for professional care training and development are essential for attracting the right candidates. In addition, fostering awareness and acceptance of caregiving as a profession would reduce the strength of cultural stigmas and encourage people to consider aged care work as a viable career option.

> *The State needs to create a bridge between private nursing homes and training institutions to ensure effective coordination in providing professional practice for students. This bridging could include establishing formal internship programmes, working closely between nursing homes and training facilities to provide students with learning opportunities and real-world experiences in practice. This combination will help students have a clear view of the actual requirements of the profession, while meeting the needs of older persons in care facilities for high-quality human resources. Taking these steps will contribute to improving the quality of aged care services and creating a professional workforce ready to meet industry challenges (FGD participant, 2024).*

Pillar 3: Financially innovative

It is agreed among all stakeholder groups that the financial costs of accessing quality care services and of running professional care systems are important to consider when envisaging the ideal future care system.

The financial independence of older persons is paramount for ensuring their autonomy in choosing a care service suitable to their needs. Supportive policies such as expansion of pension coverage, social assistance programmes and community-based support were emphasized to enable older persons achieve financial independence and access to affordable care services. Subsidies for healthcare and other essential services such as LTC and medications, which are not covered by insurance, are important for reducing their out-of-pocket expenses.

Designing accessible care facilities and infrastructure was also highlighted by the dialogue participants. This includes an expansion of nursing homes, specialized geriatric facilities and community care centres, making them more financially accessible. Government policies that promote both public and private sector investment in these facilities would help promote greater capital diversity.

It is also important to recognize the burgeoning differences of the needs between the current and future generations of older persons, and differentiated gendered needs. Any current and future efforts to reimagine the aged care economy must take into account the differentiated needs and find balance between them. In short, it is not possible to have a one-size-fits-all approach. Flexible care models that can cater to different needs should be developed.

4.3.2 Ideal future of government policies on aged care

A comprehensive aged care economy requires diversified models, including home-based care, community-based services and institutional care centres such as nursing homes. A variety of options ensure that older persons receive appropriate, flexible and affordable services based on their health status, preferences, financial situation and living conditions; thus, promoting dignity and quality of life.

Home-based care that supports ageing in a familiar environment is a preferred option among current older persons. It is important to invest in standardized caregiver training, provide financial incentives and certification, and strengthen support systems to attract, retain and professionalize the skilled caregiving workforce nationwide.

Formalizing and standardizing the caregiving profession is essential to ensure quality and accountability. Implementing certification systems, standardized training and clear career pathways will enhance caregivers' skills, professional recognition and job security while improving the overall quality of aged care services.

There is a growing preference for nursing homes as they provide specialized, professional care tailored to older persons' needs. This shift reflects changing family dynamics and offers a practical solution to reduce the caregiving burden traditionally borne by adult children, especially women and working family members.

Meanwhile, there is an increasing demand for intergenerational aged care programmes and digital innovations that foster social inclusion, uphold human rights and expand access to integrated aged care services. These approaches bridge intergenerational gaps, reduce isolation and enable older persons to engage in comfortable, socially connected care environments.

Expanding the ISHC model as a foundation for integrated care for older persons can strengthen community- and home-based care by leveraging local networks, promoting mutual support, enhancing social inclusion and delivering accessible health, social and emotional support tailored to older persons' needs.

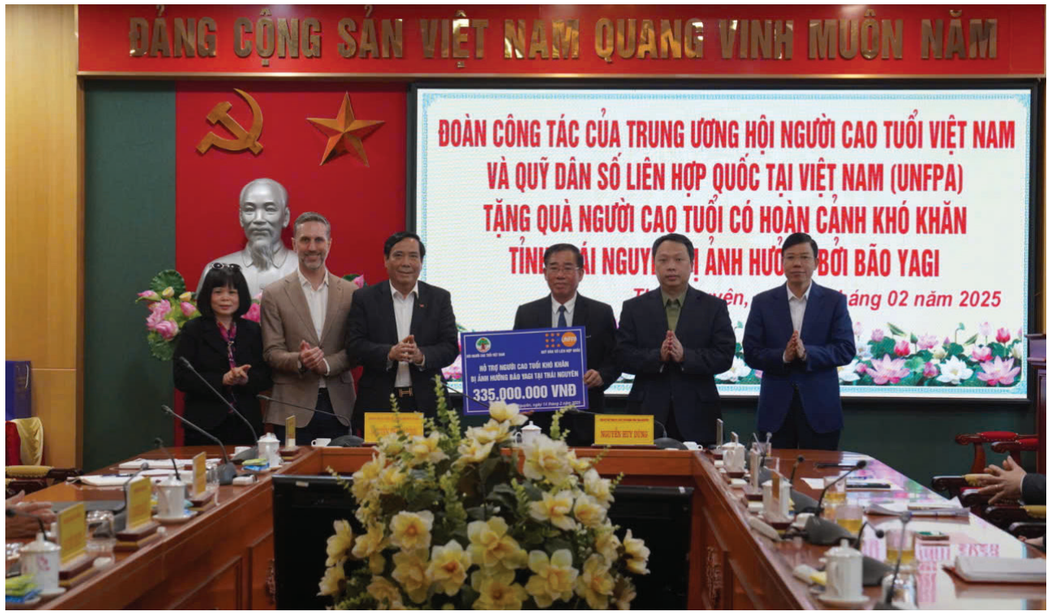
Financial mechanisms for aged care must be improved, with direct government support offered to caregivers and care service providers. PPPs should be encouraged to expand and facilitate the involvement of the private sector in aged care service provision.

Effective financial planning and sustained government support are essential to provide affordable and high-quality aged care. Strategic investment, subsidies and long-term financing policies help ensure equitable access, improve service standards and reduce the financial burdens on older persons and their families.

Integrating technology – such as digital health monitoring, telemedicine, and electronic health records – can significantly enhance aged care efficiency by enabling real-time health tracking, early intervention, personalized care planning and improved coordination among caregivers, healthcare providers and families, especially in home-based settings.

Older persons will remain resilient, healthy and happy through lifelong learning, digital inclusion, strong social networks, accessible healthcare and early preparation for the ageing process. Being empowered by community support, adaptive environments and early preparation, older persons can actively contribute to society economically while maintaining their independence, dignity and emotional well-being.

Addressing gender disparities in caregiving requires targeted policies that support women – who perform the majority of care work – through financial assistance, economic opportunities and social protection, access to training, and measures that encourage shared caregiving responsibilities between men and women.



V. FIT FOR THE FUTURE: FORWARD-LOOKING POLICY RECOMMENDATIONS

Viet Nam is projected to enter an "aged society" in around a decade by 2036. This underlines an important achievement insofar as it indicates that the Vietnamese people are healthier and live longer. It also entails rising demand for care services for older persons, which need to be developed early on to ensure sustainability and inclusiveness. This has substantial ramifications for Viet Nam's economic and social development.

Developing a care economy for older persons is one of the keys to catering to the needs of an aged society and supporting Viet Nam to achieve high-income country status by 2045. The ageing population will result in a smaller labour force, reducing labour's contribution to the economy while incurring greater spending on care services. Hence, it is essential to ensure the working-age population can participate fully in the labour market while still being able to meet the care needs of their parents or other older persons.

With the urgency of a rapidly ageing population, Viet Nam needs to redesign and transform its care system – building on its current status and achievements – to be more anticipatory, adaptive and agile in order to promote inclusive and sustainable care for the older persons while advancing sustained socio-economic progress. It is important to recognize that Viet Nam's care system transformation will unfold in a dynamic environment in which shifting national and global landscapes can induce shocks to the country's development journey.

Building on the key findings, key policy recommendations are suggested as follows.

5.1. RAISING AWARENESS OF EARLY PREPAREDNESS FOR HEALTHY AND HAPPY AGEING

As the population ages rapidly, there is a growing need for individuals and families to make arrangements for their own future care to ensure a high quality of life in their old age. Encouraging young people to prepare for healthy and happy ageing requires a proactive, life cycle approach that begins as early as possible. Encouraging healthy lifestyles, financial literacy and long-term planning, such as participation in social insurance schemes, investment and savings, help build resilience for later life. Integrating ageing-related education into school curricula and youth programmes fosters awareness of demographic trends and personal responsibility. Intergenerational activities can also nurture empathy and understanding across age groups. By equipping young people with the knowledge, skills and mindset to promote healthy and happy ageing, societies can ensure a healthier, more inclusive future where individuals age with dignity and maintain well-being.

It is also crucial to promote public awareness of the changing social norms around the care of older persons. While the majority of Vietnamese older persons currently depend on family-based care, changing family and social structures and urbanization render such traditional caregiving models less sustainable and productive. While, culturally, older persons prefer their children to take care of them at home, this is increasingly unfeasible due to the high burden and costs of care impacting family caregivers, especially women and girls. This issue is also increasingly recognized by older persons.

Furthermore, family- or home-based care alone is unlikely to be optimal for supporting the economy. The care burdens will prevent some of the working-age population, especially women and girls, from participating fully in the paid work sectors and harnessing their full potentials. This would reduce labour's contribution to the economy. As such, the aged care economy is likely to thrive on a mix of care models, including home-, community- and institution-based care. While home-based care remains important, the significance of community- and institution-based care models is likely to increase proportionately.

5.2. PROMOTING INVESTMENTS IN CARE FACILITIES AND INFRASTRUCTURE

Expanding private investment in the aged care system, with a view to establishing quality care services, modern facilities and infrastructure such as nursing homes and care centres, is critical to cater to the rising demand for aged care services. Grasping this opportunity, private investors can leverage their capital, expertise and government support to provide high-quality, reliable aged care services, meeting the four As conditions: accessibility, affordability, adequacy and acceptability.

Attracting private investment and promoting PPPs in the aged care economy requires more preferential and predictable legal and regulatory frameworks and enforcement. Clear regulations and streamlined licensing processes can reduce bureaucratic barriers, making it easier for private investors to establish and operate aged care facilities. For example, the predictability of long-term land leasing or ownership is extremely important for investors in making investments in care facilities such as nursing homes or specialized old-age healthcare hospitals.

Fiscal incentives such as tax relief or subsidies are also instrumental in promoting private investments in the aged care sector. Corporate tax deductions and exemptions for the construction or renovation of aged care facilities can help reduce initial investment, making the aged care sector more financially viable. Reduced taxes on imported medical equipment can lower operational costs and encourage private investments in the sector. Tax deductions for private firms investing in aged care training programmes can promote development of a skilled workforce, improving service quality and investor confidence.

5.3. DEVELOPING INNOVATIVE FINANCING PRODUCTS AND MODELS

Banks and financial institutions should develop innovative financial products and services, such as personal financial planning services and savings products, that can meet the financial needs of the current and future generations of older persons. This would help reduce the financial risks and mitigate economic shocks that may affect older persons' ability to afford aged care services.

Financial institutions should also develop specialized credit, preferential loans or lending programmes to support investors or entrepreneurs in constructing and expanding aged care facilities and infrastructure. Low-cost lending programmes for investments in the aged care sector can be explored with the potential support of the Government. For example, with government-backed financial support, banks and financial institutions should be able to offer low-interest loans.

The PPP is another financing model that can reduce public budget constraints and high initial capital investments to drive investments in the aged care sector. This model may involve government contributions such as land or co-financing, while the private investors bring in care service expertise, financing and technology. Worth noting is that the PPP models may vary depending on the design, size and risk levels of the projects (The Economist and IFC, 2019). While civil society or community organizations' engagement with the PPP governance may add complexity, it is an important dimension for consideration in ensuring sustainability of PPPs in the aged care sector.

5.4. ENHANCING EDUCATION AND TRAINING IN THE AGED CARE AND SOCIAL WORK

Strengthening education and training programmes is of profound importance for developing a skilled care workforce, including trained social workers, care professionals and caregivers, of which it is currently in shortage. This involves enhancing the quality and availability of aged care degree programmes at university or higher education institutions, for example programmes on social work, social care and aged care nursing. Developing specialized training programmes and certifications in the aged care sector is also important in accelerating the development of qualified caregivers and professionals to meet the growing demand for aged care services.

Engaging aged care service providers is essential to improve aged care education and training quality by integrating practical, hands-on experience and expertise, and to provide trainees with opportunities for internships and apprenticeships in aged care facilities. This can also ensure that the education and training programmes are aligned with evolving needs and best practices in the aged care sector.

Promoting occupational recognition and career pathways for caregivers and professionals in the aged care sector by raising awareness of the social value of the profession is crucial to dispel negative perceptions and encourage people to join the workforce. This requires the development and dissemination of career guidance, laying out clear career pathways and professional development opportunities to attract a young workforce, especially secondary school graduates.

5.5. STRENGTHENING SOCIAL PROTECTION SYSTEM AND PENSIONS FOR OLDER PERSONS

Strengthening social protection system including pension and social assistance is extremely important to ensure financial security and affordability for older persons in accessing aged care services. For instance, pension coverage for women is currently lower than that for men. Thus, equalizing pension coverage and retirement age for men and women is critical to ensure equitable access to aged care services (United Nations Viet Nam, 2024). Similarly, extending social assistance programmes is beneficial for supporting population groups in vulnerable situations, such as older persons with disabilities and ethnic minorities. For example, government-funded home-based care and community-based support programmes can help older persons to maintain their independence while receiving necessary care services.

Expanding access to affordable healthcare services can reduce the burden of medical expenses and promote the overall well-being of older persons. As such, the Government's efforts to expand universal health coverage (UHC) play an important role. Worth noting is that, with commendable progress in expanding UHC through social health insurance, Viet Nam aims to reach 95 per cent coverage by 2025.

5.6. USING FORESIGHT IN CURATING A CARE ECONOMY FOR OLDER PERSONS

Foresight supports the development of long-term, adaptive policies for an ageing society, enabling Viet Nam to respond proactively to its rapid demographic transition. With projections showing that 20 per cent of the population will be aged 60 and above by 2036, traditional reactive policymaking is insufficient. Foresight provides a structured methodology, such as trend analysis, scenario-building and visioning, to anticipate diverse future possibilities. These tools help policymakers and stakeholders craft adaptive and forward-looking policies that consider not only the growing demand for care but also the transformation in family structures, labour dynamics and urbanization patterns. It encourages policies that evolve alongside societal changes, ensuring they remain relevant, equitable and financially sustainable.

Foresight enhances multi-stakeholder dialogues and coordinated actions across sectors. The care economy involves integrated policies and actions across multiple sectors, including health, social protection, labour and education. Foresight fosters a participatory environment in which diverse actors from policymakers and researchers to caregivers and older persons can co-create shared visions of future care systems. As care provision is often fragmented and heavily reliant on informal labour, especially women, foresight helps identify synergies, avoid policy silos and build consensus on investment priorities. It also opens up dialogues on cultural norms and gender roles, supporting the design of more inclusive, gender-responsive and culturally sensitive care models.

Foresight facilitates innovations in care models, workforce development and financing strategies. A future-ready care economy requires innovations in how care is delivered, funded and valued. Foresight can be useful for Viet Nam in envisaging new models such as community-based care, technology-assisted home-based care and PPPs that are tailored to its social contexts and resource constraints. It also emphasizes the importance of professionalizing and valuing care work, especially for women, who currently account for the majority of informal caregivers. By exploring various future financing scenarios, foresight supports more resilient economic planning and policymaking, enabling Viet Nam to allocate resources efficiently while ensuring affordability and access for all older persons.

REFERENCES

ADB and ISMS (Institute of Social and Medical Studies). 2023. "Aging population and some key findings from a national survey on long-term care for older people in Viet Nam", ISMS.

Bendig, L. 2024. "Foresight vs. forecasting: major differences", Typeshare, 14 July.

Dai Doan Ket. 2024. "Xu hướng đầu tư nhà dưỡng lão", 23 August. Available at https://daidoanket.vn/xu-huong-dau-tu-nha-duong-lao-10288627.html (accessed on 8 August 2025).

GSO (General Statistics Office of Viet Nam). 2020. Viet Nam Population Projection for the Period 2019–2069. Hanoi: United Nations Population Fund.

GSO. 2021. The Population and Housing Census 2019: Population Ageing and Older Persons in Viet Nam. Hanoi: United Nations Population Fund.

GSO. 2025. Intercensal Population and Housing Census. Hanoi: GSO.

ILO (International Labour Organization). 2022. Long-Term Care in the Context of Population Ageing: A Rights-Based Approach to Universal Coverage. ILO Working Paper 82. Geneva: ILO.

IPSOS. 2024. "Generation myths and realities 2024", 17 September. Available at https://www.ipsos.com/en-vn/generation-myths-realities-2024 (accessed on 8 August 2025).

Krishnan, A. 2024. "Foresight and anticipation in multilateral organisations", in Handbook of Future Studies, R. Poli, ed. Elgar Online, pp. 405–416.

Miles, I., Saritas, O. and Solokov, A. 2016. Foresight for Science, Technology and Innovation. Cham, Switzerland: Springer.

MOH and HPG (Health Partnership Group). 2018. Joint Annual Health Report (JAHR) 2016: Towards Healthy Aging in Viet Nam. Hanoi: Medical Publishing House.

MOLISA (Ministry of Labour, Invalids and Social Affairs). 2022a. Report on Planning for Social Assistance Facility Network in Period 2021–2030, Vision to 2050. Academy of Public Administration and Governance.

MOLISA. 2022b. Report on Proposal to Amend Decree 20/2021. Hanoi: MOLISA.

MOLISA. 2024. Report on Social Assistance 2022–2024. Hanoi: MOLISA.

OECD (Organisation for Economic Co-operation and Development). 2019. Strategic Foresight for Better Policies: Building Effective Governance in Uncertain Futures. Paris: OECD.

Prítyi, M., Docherty, D. and Lavery, T. 2021. Foresight and Anticipatory Governance: Lessons in Effective Foresight Institutionalisation. Paris: OECD. Available at https://www.oecd.org/content/dam/oecd/en/about/programmes/strategic-foresight/foresight-and-anticipatory-governance-2021.pdf (accessed on 8 August 2025).

The Economist and IFC (International Finance Corporation). 2019. Briefing Paper: Public-Private Partnerships for Emerging Market Health. IFC.

Tõnurist, P. and Hanson, A. 2020. Anticipatory Innovation Governance: Shaping the Future through Proactive Policy Making. OECD Working Papers on Public Governance, No. 44. Paris: OECD Publishing.

UN-DESA (United Nations Department of Economic and Social Affairs). 2024. World Population Prospects 2024. UN-DESA.

UNDP (United Nations Development Programme). 2022. Foresight Playbook. New York: UNDP.

UNFPA (United Nations Population Fund). 2023. Overview on Viet Nam National Transfer Accounts: Key Findings and Policy Implications. Hanoi: UNFPA Viet Nam.

UNFPA, JICA and VCCI (Vietnam Chamber of Commerce and Industry). 2021. Report on Market Outlook for Elderly Care Service in Vietnam. UNFPA Vietnam.

United Nations. 2004. World Population to 2300. New York: United Nations Department of Economic and Social Affairs.

United Nations Viet Nam. 2024. Unlocking Gender Equality for Inclusive Growth in Viet Nam: Viet Nam Common Country Analysis 2023 Update. Hanoi: United Nations Viet Nam.

VAE (Vietnam Association of the Elderly). 2024. Report on Implementation Result on Decision No. 1336/QD-TTg Dated August 31, 2020 Approving the Master-plan to Replicate the ISHC Model until 2025. Hanoi: VAE.

Xiujian Peng. 2005. Population ageing, human capital accumulation and economic growth in China: an applied general equilibrium analysis. Asian Population Studies Journal.

ANNEXES

ANNEX 1: SET OF FORESIGHT TOOLS

Table I: Exploring the future

Tool	Definition	How to use	Output
Horizon scanning 	Horizon scanning is a foresight process focused on identifying and collating early warning signs of change or emerging signals that may have significant impacts once developed.	▪ To carry out systemic analysis of potential risks, opportunities and developments that could affect the organization's strategic direction as an internal "early warning system". ▪ To equip colleagues with the skills and tools to implement horizon scans and to integrate their implications in strategy, design and planning processes.	▪ A set of weak or strong signals that point to emerging risks, opportunities or trends, forming the baseline for any landscape, trend or risk analysis. ▪ Horizon scanning insights can also be a baseline for multiple foresight approaches, in particular scenarios.
Driver mapping 	Drivers are influential forces of change that are shaping, or have the capacity to shape or transform, a system. Driver mapping is a tool used for identifying the most influential forces of change in a system.	▪ To identify the drivers shaping a system. ▪ To separate the most critical or most influential drivers from less influential ones. ▪ To produce a set of critical or important drivers that feed into further analyses/ exploration of futures and for creating alternative futures.	▪ A set of influential drivers relevant to the system or focal topic. Signals and trends can provide context for how their changes affect overarching drivers that shape a system. ▪ Inputs for subsequent exploration of futures with tools like the futures wheel, VERGE[6] and scenarios.

6. *VERGE is a general practice framework that focuses on six domains of human experience.*

Tool	Definition	How to use	Output
Trend analysis 	Trends are collections of signals and events – and their build-up into patterns – that indicate likely directions of change.	▪ To analyse information and data to identify patterns. ▪ To make relevant connections and identify important relationships between events and issues, uncovering correlations and causations. ▪ To spot trends early on and understand some likely directions of change. ▪ To uncover underlying drivers of new patterns and trends. ▪ To make decisions based on pattern recognition and likely implications.	▪ A trend analysis is the output of a robust horizon scanning process. ▪ Awareness of new trends shaping the system and the likely directions of change they are generating. ▪ Clearer insights into the most important drivers and issues on the horizon. ▪ A robust trend analysis is required for any landscape or situational analysis at the start of a programme or strategy design.
Futures/ implications analysis wheel 	A futures wheel, also known as an implications analysis wheel, is a tool that enables us to systematically explore the direct and indirect implications of important trends and issues.	▪ To analyse the direct and indirect impacts of an issue, event, trend or decision. ▪ To produce a visual map of all the potential implications of an event, issue or decision to better anticipate risks (for anticipatory mitigation) and opportunities (for better utilization) that may arise from direct and indirect implications. ▪ To determine the connections between different parts of a complex system.	▪ A set of direct and indirect implications and impacts of an event or issue, trend, decision, strategy or programme. ▪ Improved awareness of the potential future changes in and outcomes of current events, trends and decisions before designing solutions.

Table II: Creating alternate futures

Tool	Definition	How to use	Output
Futures triangle 	A futures triangle is a tool that helps us to map the future through the three dimensions that are shaping it – the pull of the future, the push of the present and the weight of history. It is a simple and quick method for understanding plausible (and alternative) futures based on interactions between and changes in, namely the strengthening and ebbing of, the three forces.	▪ To map the past, present and future and their interactions. ▪ To explore plausible futures based on the diverse interactions between and changes in past, present and future forces. ▪ Often used when time is limited during a workshop and where a more detailed horizon scanning or trend analysis cannot be performed.	▪ A set of drivers that have shaped, are shaping or are expected to shape a particular system. ▪ A set of likely scenarios or alternative futures based on the diverse interactions of past, present and future drivers. ▪ An understanding of the interactions of different forces, drivers and actors that are shaping a particular system.
Scenarios 	A scenario is a description of how the future may unfold based on an explicit, coherent and internally consistent set of plausible assumptions about key relationships between drivers of change and trends.	▪ To challenge assumptions and explore alternative ways a programme, policy or strategy might evolve in the future. ▪ To explore how key issues, partners and stakeholders might act in different contexts.	▪ Scenario narratives, that is, descriptions of plausible future states. ▪ Scenario narratives used to stress-test current programming, policy and strategies to ensure that they are resilient to whichever scenarios emerge, forming the baseline of wind-tunnelling processes (described in Table V).

Table III: Reimagining the future

Tool	Definition	How to use	Output
Causal layered analysis 	Causal layered analysis is a foresight method that is used to expose hidden assumptions and to help create a narrative that facilitates change.	▪ To unpack an issue or topic at a deeper level. ▪ To map competing views of the future or understand contending narratives. ▪ To deconstruct a preferred future – a vision, strategic goal or objective, or master plan. ▪ To develop robust strategies that are deep and broad.	▪ Synthesis of deep and broad insights on topics, covering multiple layers of analysis. ▪ Mapping of competing views of the future, with indications of different world views of stakeholders. ▪ New metaphors, images or stories about the future that can help inform new structures, policies and strategies.
Three Horizons Framework 	The Three Horizons Framework is a tool that helps us to unpack our current assumptions about the future – or the alternative future scenarios that have been conceived – to explore emerging changes and transition processes (as a way of reframing those assumptions), and to design or devise strategies, policies and programmes that can connect the present to the future.	▪ To unpack current assumptions about the future or alternative futures and how they are likely to emerge. ▪ To make sense of the potential impacts of emerging changes and the potential timing of those impacts. ▪ To generate and promote innovations by helping us to understand the anticipatory decisions or actions a country needs to take in the short or medium term. ▪ Often used when time is limited in a workshop setting to get participants to consider the present and the future and strategies with which to bridge the gap between the two.	▪ A list of current assumptions. ▪ A set of likely transition processes. ▪ An understanding of which strategies, policies, programmes or innovations are most promising in terms of impact.
Inclusive Imaginaries 	The Inclusive Imaginaries approach utilizes collective reflection and imagination to engage with people, with the aim of building more just, equitable and inclusive futures. It seeks to infuse imagination as a key process in developing forward-looking policies. The approach is designed to support facitilators to acquire more locally driven and culturally contextual visions for policy and programme development.	▪ To acquire visions of the future that are reflective of local culture and of people's lived experiences. ▪ To build capacity among diverse groups of people to explore and articulate visions of the futures they want, rather than those that they may inherit. ▪ To elevate community perspectives alongside perspectives of "technical experts" and of those who have historically remained in positions of power.	▪ A vision of the future. ▪ Reflections on sources of knowledge and inspiration that influence the development of visions. ▪ Diverse perspectives and findings that can inform culturally rooted policy design.

Table IV: Transforming the future

Tool	Definition	How to use	Output
Visioning 	Visioning is the process of developing a vision – a "north star" for the future.	▪ To envisage the future and develop a plan for the future. ▪ To get a group to co-create and focus on what a successful outcome looks like. ▪ To create shared futures through an inclusive visioning process.	▪ A shared vision of the future. ▪ Improved capacity for collaboration and willingness to work together to achieve a collective vision.
Back-casting 	Back-casting is a tool used to create preferred futures by imagining a future where our goals and strategic objectives have already been achieved and by working backwards to determine the steps that will bring us there.	▪ To make sense of the key steps and events that need to happen to achieve future goals and strategic plans. ▪ To visualize the strategic alliances needed and the stakeholders in systems that are best placed to handle the key elements needed to achieve a future goal. ▪ To overcome scepticism and fear around future goals. ▪ To overcome lethargy and resistance with regard to achieving long-term goals.	▪ A set of steps and actions required, or events that need to happen, to actualize a vision or desired future. ▪ A baseline for prioritizing and investing in actions.

Table V: Future-testing strategies

Tool	Definition	How to use	Output
Wind-tunnelling 	Wind-tunnelling is a method that allows us to stress-test our strategies against a range of possible future scenarios.	▪ To identify the most robust strategy, policy and programme options – those whose fundamental elements are likely to hold after stress-testing across a range of scenarios. ▪ To understand how different contexts can modify the needs of various stakeholders and their programmes, policy and strategic demands, and interventions. ▪ To improve our agility and capacity to adapt our strategies to changing contexts, that is, to improve our overall preparedness to deftly change course when key conditions change during programme, policy or strategy implementation.	▪ A set of strategies that are ranked based on their suitability for use in diverse scenarios. ▪ Improved inbuilt flexibility in the design and implementation of policies, programmes and projects by identifying where points of preparedness, pivot, innovation and reinvestments might be needed.
Road-mapping 	Road-mapping is a method used to chart the combination of steps – in terms of actions, strategies, regulations, policies, programmes, interventions and resources – that are needed to achieve a preferred future or a future development goal.	To identify the changes that must happen to achieve a development goal and the specific actions and initiatives – strategies, policies, programmes and interventions – required to catalyse those changes.	▪ A practical map of actions, strategies, policies and programmes required to achieve a development goal. ▪ A better understanding of the interconnections and interdependencies that exist or are needed between policies and programmes and their components, with a view to achieving a development goal. ▪ A better understanding of existing gaps in an approach to achieving a development goal, and of what is required to fill those gaps.

Source: UNDP, 2022.

ANNEX 2: METHODOLOGIES FOR ORGANIZING THE DIALOGUE LABS AND THE ROUND TABLE

These interconnected events were strategically designed using foresight and anticipatory governance approaches to generate deep insights for the formulation of the new United Nations Sustainable Development Cooperation Framework.

The foresight tool used

The Three Horizons Framework – a strategic foresight tool – were applied for the dialogue labs and round-table discussions. The tool helps us to unpack our current assumptions about the future – or the alternative futures scenarios that have been conceived – to explore emerging changes and the transition processes (as a way of reframing those assumptions), and to design or come up with strategies, policies and programmes that can connect the present to the future.

This framework serves as the core component of a qualitative activity that encourages individuals to think explicitly about not only the current state of an existing system, but also the prospects for both incremental and large-scale change to achieve the desired outcomes for the future.

The Three Horizons Framework is designed to elucidate views of the future and to make the different ways we can realise it more visible. The first horizon involves examining paradigms, assumptions and data to understand the current situation and discover aspects of possible futures. The second horizon begins to give a sense of **how** some of the imagined futures may happen, through identifying potential shifts and changes. The framework is useful for increasing visibility and clarity of **what** needs to happen to create pathways towards the desired future (or the third horizon).

The Three Horizons Framework helps stakeholders visualize and manage short-, medium- and long-term priorities in developing an aged care economy. It supports the balancing of urgent needs, scaling up of innovative models and planning of transformative, sustainable systems – essential in rapidly ageing societies to ensure responsive, future-ready care that adapts to demographic, social and economic shifts.

The purposes of using the Three Horizons Framework as a foresight tool are to (i) unpack current assumptions about the future and explore emerging changes and the processes associated with the transition to an aged population, and (ii) design or devise strategies, policies and programmes that can connect the present to the future.

Methodologies

Dialogue labs (focused group discussions)

The foundational exploratory work was conducted through two intensive dialogue labs, or focused group discussions (FGDs), planned to take place on 9 and 10 September 2024, at the Green One United Nations House in Hanoi. The methodological approach was distinct from standard workshops, as each session was treated as a tailored research process designed to understand diverse perspectives rather than to achieve consensus. The environment was intentionally designed to be safe and comfortable, with discussions held in the local dialect to encourage authentic and open expression. Facilitators were trained to listen carefully, use gentle probing questions and pay attention to both verbal and non-verbal cues, creating a space where all viewpoints were valid.

Objectives.

- Identify current and future bottlenecks in relation to the scale of care needed.
- Guage the level of public interest and concern regarding this issue.
- Understand the pace of maturation of the aged care sector (legal framework, human resources, financing, partnership and other related aspects)..

Participant selection criteria.

- Two groups of key stakeholders participated.
  - **Stakeholder group 1:** People that, in the future, would be part of the older population and would require either home-based or institution-based care.
  - **Stakeholder group 2**: Current caregivers (home based or institution based) and people that may be caregivers in the future (providing home-based or institution-based care).
- A total of 32 people who will be part of the older population were invited to participate in the FGD on 9 September 2024. The participants were invited based on the following criteria..
  - **Gender :**16 females and 16 males; the inclusion of other genders (LGBTQI+) was recommended.
  - **Age:** 16 persons aged 30–39 years and 16 persons aged 40–49 years.
  - **Capacity**: Being willing to engage with others and good at communicating, exchanging, and expressing their ideas and thoughts in Vietnamese.
- A total of 24 home-based and institution-based caregivers were invited to participate in the FGD on 10 September 2024. The participants were invited based on the following criteria.
  - **Gender**: 12 females and 12 males; the inclusion of other genders (LGBTQI+) was recommended.
  - **Age**: 12 persons aged 30–39 years and 12 persons aged 40–49 years.
  - **Capacity**: Being willing to engage with others and good at communicating, exchanging and expressing their ideas and thoughts in Vietnamese..
- Ideally, there would have been one main moderator, three table facilitators and three note takers per table.

Structure of the dialogue labs

- Dialogue labs are curated conversations that are treated as a research process. Their aim is to help us understand the perspectives of participants. Unlike normal workshops, where the objective is to gain consensus and agreement, dialogue labs are treated as group interviews where we seek to understand participants' viewpoints, ideas, feelings and perspectives.
- It is important that dialogue labs are hosted in spaces that are safe and comfortable and conducted in local dialect, and that language used is simple. Facilitators of dialogue labs should be versed in listening carefully, asking probing questions considerately and paying attention to what participants say or do not say. There is no right or wrong answer, and if there is no answer that is also fine.

Guiding questions and themes.

- The discussions were structured around specific themes to apply foresight principles, exploring both the current state of affairs and a desired future.
- Key questions for future care receivers included the following.

- **On changing needs:** Participants were asked to imagine their care needs in 20 years, compare them with the needs of their current older family members, and reflect on whether they believed gender roles around caregiving would change.

- **On the ideal future:** Questions probed their "ideal/dream vision" of care, what they would want to be different from the current system, and what financing, training or services would need to be in place to support their ideal vision.

- **On financial caps:** The dialogue explored the current affordability of care and the financial difficulties that families face, such as savings, subsidies and medication costs.

- Key questions for caregivers were as follows.

  - **On the ideal future state:** They were asked to describe their preferred state of aged care in the following 15 years and what resources would need to be provided (e.g. funding) to make home-based care more feasible for care workers.

  - **On government policies:** Questions focused on what new government policies are needed to support care workers and which existing policies require change.

  - **On current gaps:** The discussion addressed participants' concerns about the current system, whether existing support for care workers is sufficient and if they felt properly compensated for their services..

Round table

Building upon the rich insights from the FGDs, a high-level round table was organized in November 2024. This event transitioned from gathering citizens' perspectives to engaging policymakers directly, using the findings from implementing the foresight tool as a basis for strategic dialogue.

Objectives

To facilitate interactive discussions with policymakers at various levels and influential stakeholders (such as the Communist Party of Viet Nam, the National Assembly, the line ministries in charge of aged care, sociopolitical organizations and development partners) about enabling factors and barriers, expectations, opportunities, incentives and investments needed to develop the most accessible, affordable and adequate aged care system to serve Viet Nam's rapidly ageing population. As a result, participants would better understand the linkages and gaps between Viet Nam's near-future demographic shifts and related expectations from a sample of citizens. Furthermore, key decision makers and stakeholders would grasp the importance of ramping up work in this area and acknowledge the United Nations, including the United Nations Population Fund, as a partner of choice.

Participant diversity and structure

A key methodological feature is the strategic diversity of the invitees, who included 26 key stakeholders plus representatives from United Nations agencies. This composition ensured a holistic dialogue.

- **Lived experience:** One older person (aged 60+), one future older person (aged 40–59), one caregiver and one care service provider manager were included to ensure the discussion was based on real-world experience.

- **Policymakers:** Twelve department-level leaders and technical officers from the Party, the National Assembly, the Ministry of Labour and Social Affairs, the Ministry of Health, the Ministry of Planning and Investment, and other key agencies were invited.

- **Experts and partners:** Five academics and five representatives from international development partners (e.g. the World Bank, the Asian Development Bank, the Japan International Cooperation Agency, HelpAge International) provided technical and global perspectives.

Key questions

The approach was centred on a plenary round table where strategic questions were posed to specific groups to stimulate a dynamic and multifaceted conversation. Key questions included the following.

- **Posed to a caregiver and an older person:** How could a redesigned and improved aged care system provide benefits for Viet Nam's growth in terms of social care and social cohesion?

- **Posed to government partners:** What might be the benefits of a redesigned aged care system to the country's growth ambitions, economy and foreign direct investment?

- **Aimed at exploring practical steps:** From a government perspective, what might be needed to achieve this ambition in terms of investment, advocacy and policy? Please provide examples of big transformations and small investments.

- **Aimed at understanding challenges:** To invest in the changes needed, are there risks or trade-offs? And how could the country attract increased foreign direct investment for this? How could the United Nations support this?

This two-tiered methodology, beginning with deep-diving dialogues with citizens and culminating in a high-level policy round table, exemplifies the application of strategic foresight by systematically gathering future-oriented insights from citizens and using them to inform and influence present-day strategic decision-making.

UNFPA TẠI VIỆT NAM
Green One United Nations House
304 Kim Ma Str., Ngoc Ha Ward
Ha Noi, Viet Nam
+84 24 38500100
vietnam.office@unfpa.org
http://vietnam.unfpa.org