



Ministry of Health
General Office for Population and Family Planning



OVERVIEW
ON POPULATION AGEING AND
HEALTH CARE FOR THE ELDERLY
IN VIETNAM

Presenter: Doctor Nguyen Xuan Truong
Director of the Department of Population Structure and Quality
General Office for Population–Family Planning, MOH



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Characteristics of aging and HCE

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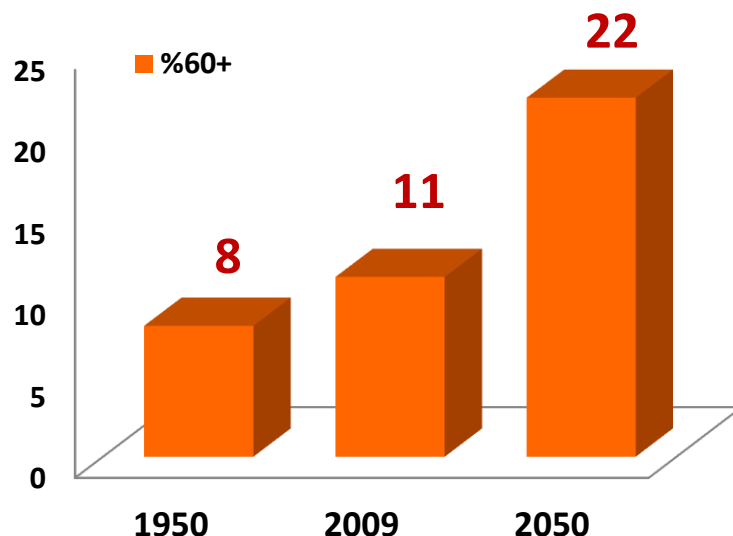
HCE Program 2030



The United Nations predicts 21st century to be the aging century

- ❑ "Population ageing" is a global problem and affects all countries
- ❑ "Population aging" emerged in the 20th century and the rate will continue to increase in the 21st century
- ❑ 2009-2050: the increase rate doubles: 11% => 22% (60+)

Rate of population aged 60+
worldwide
1950-2050

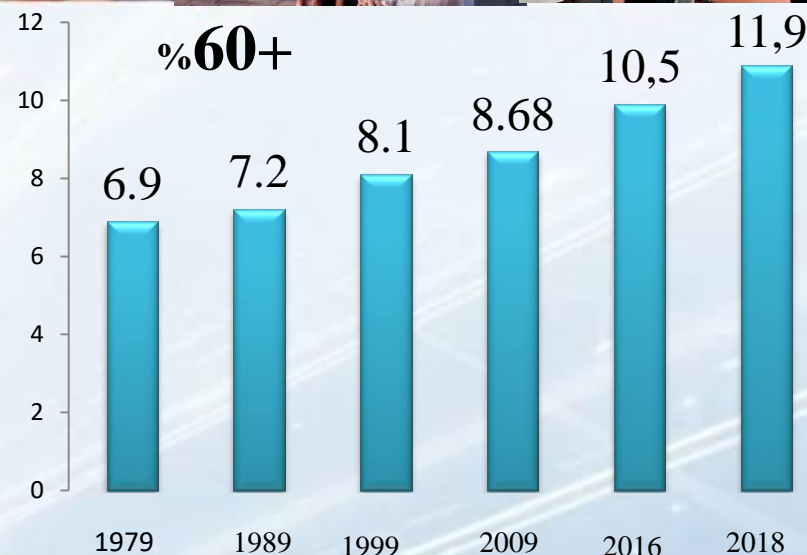
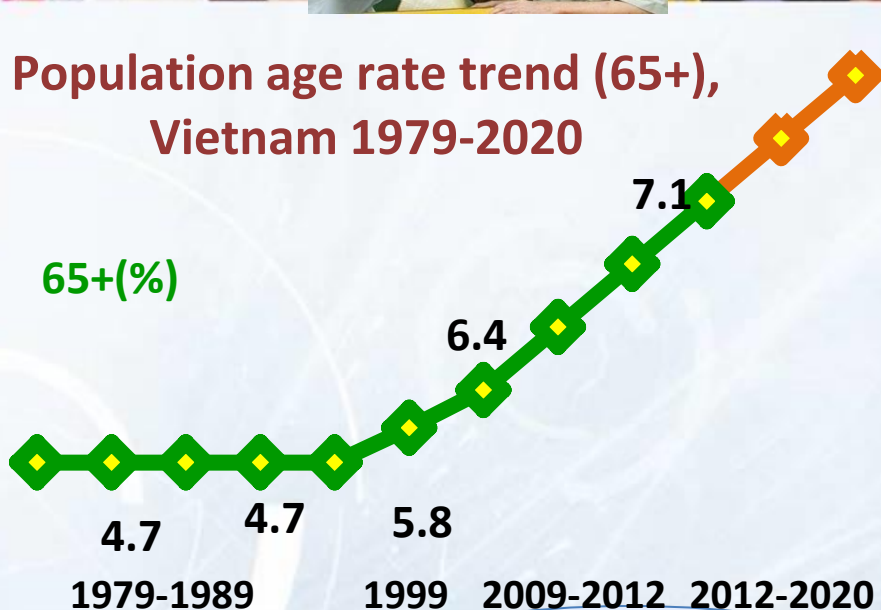




SOME CHARACTERISTICS OF POPULATION AGEING AND THE ELDERLY IN VIETNAM



Population age rate trend (65+),
Vietnam 1979-2020



In 2011, the proportion of the population aged 60+ reached 9.9%, Vietnam officially entered the period of population aging

- In 2019, the proportion reached 11.95%

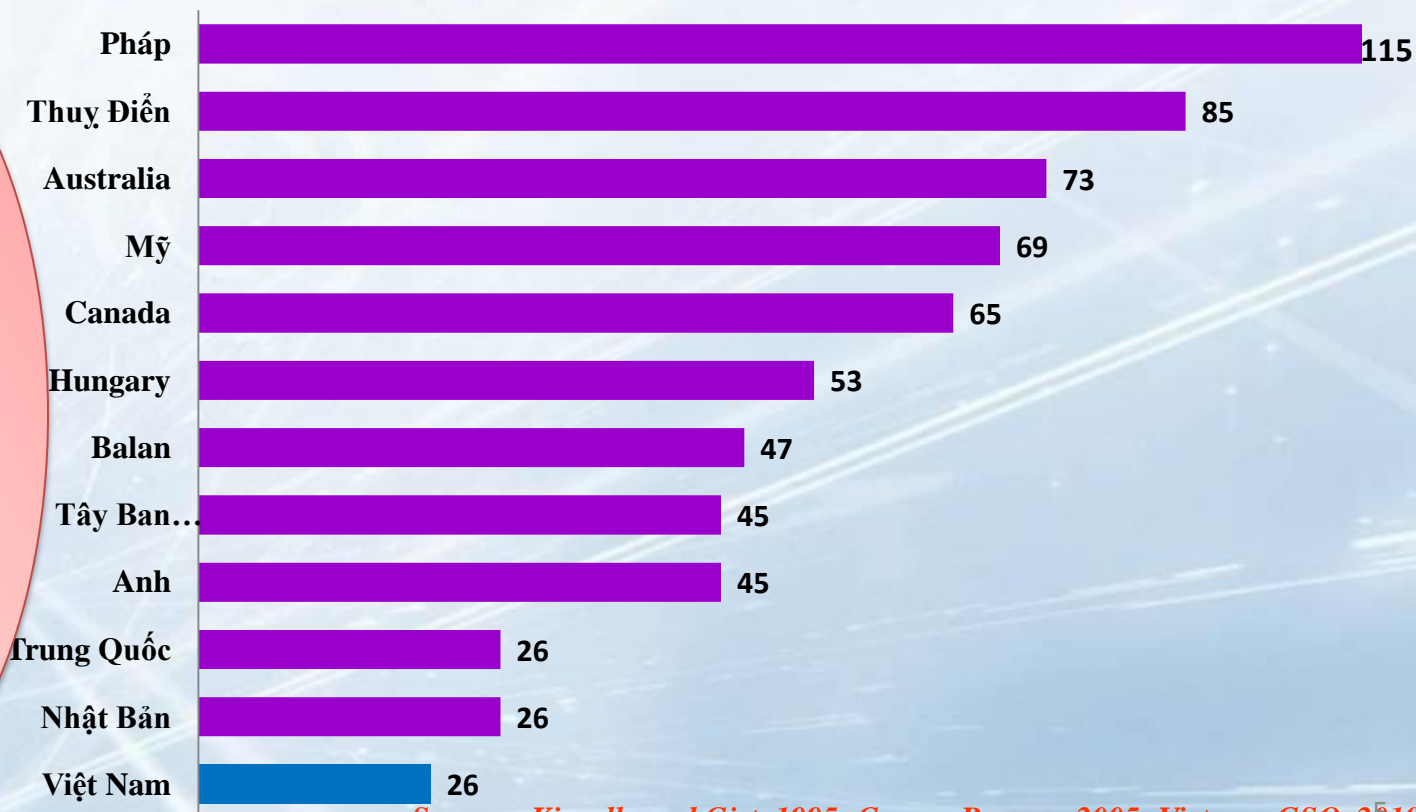


SOME CHARACTERISTICS OF POPULATION AGEING AND THE ELDERLY IN VIETNAM



FROM “AGEING POPULATION” TO “OLD POPULATION” DURATION

It is
forecasted
that
Vietnam
is one of
the fastest
aging
countries
in the
world

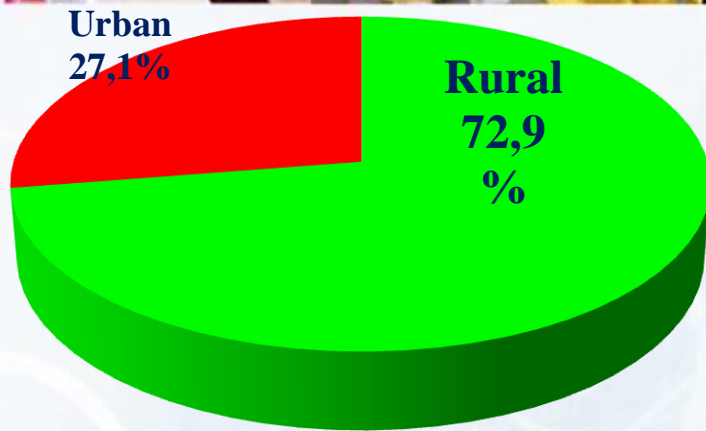


Source : Kinsella and Gist, 1995; Census Bureau, 2005; Vietnam GSO, 2010



SOME CHARACTERISTICS OF POPULATION AGEING AND THE ELDERLY IN VIETNAM

The elderly mainly live in rural areas, most are farmers and do agriculture



- ❑ Over 70% of the elderly have to work by themselves with the support of their children and families (only more than 25.5% of the elderly live on a pension or social allowance)
- ❑ The proportion of agricultural land decreasing, production is difficult due to natural disasters and epidemics, leading to low income of farmers in general, and the elderly in particular.

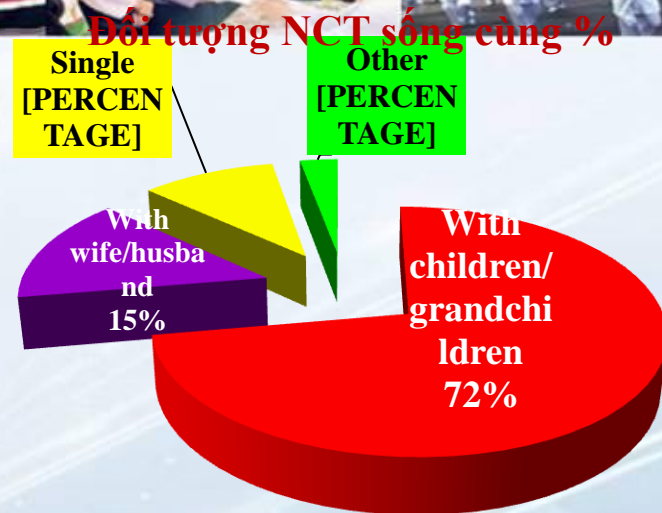


SOME CHARACTERISTICS OF POPULATION AGEING AND THE ELDERLY IN VIETNAM

Vietnamese elderly mainly live with their children and grandchildren, however the common family structure is changing

□ 72.3% of the elderly live with their descendants, while the trending Vietnamese family size is gradually shifting from traditional to nuclear families.

□ The number of elderly living without a husband / wife accounts for a high proportion, of which the number of single elderly women is 5.44 times higher than that of elderly men.



➤ Living alone is great disadvantage for the elderly, because family has always been an essential support for every person when they get old.



SOME CHARACTERISTICS OF POPULATION AGEING AND THE ELDERLY IN VIETNAM

Many Vietnamese elderly remains poor

❑ Due to being born and raised during war time, most of the current generation of the elderly can not afford the best health service and accumulate savings.

❑ 70% of the elderly do not have savings

❑ 62,3%: Poor, Struggling. Rural: 68%, Urban: 50%

❑ 27,6%: Assume their economic condition is getting worse.

✓ More than 30% live in permanent houses

✓ Nearly 10% live in temporary houses

18% are poor households

➤ Poor rate increases with age

➤ Women are poorer than men

➤ Rural area is poorer than urban area





SOME CHARACTERISTICS OF POPULATION AGEING AND THE ELDERLY IN VIETNAM

Vietnamese Elderly have poor health condition

- ❑ Despite life expectancy being high (73.5 years), the number of years of healthy life is low in comparison to many other countries, the average number of years living with illnesses is about 11 years for women and 8 for men.
- ❑ Double disease burden, often suffer from chronic diseases, each elderly has 3 diseases on average.
- ❑ Most of them have non-communicable diseases that require long-term treatment and care.





SOME CHARACTERISTICS OF POPULATION AGEING AND THE ELDERLY IN VIETNAM



- The health care system in general and primary health care in particular have not been able to adapt to rapidly aging population.
- The geriatric network has not yet follow the principle of combining prevention, health improvement, treatment, functional rehabilitation and palliative care.
- There has not been any elderly-friendly social environment with healthy ageing orientation.
- Some of the elderly still face difficulties accessing health care services.



POLICIES ON HEALTH CARE AND HEALTH CARE FOR THE ELDERLY



- **Beautiful Vietnamese tradition:** Paying respect to parents, taking care of grandparents, respect the elderly in general
- ***Constitution 2013:*** Elderly people are respected, cared for and promoted by the State, family and society for their role in national construction and defense.
- Law on the Elderly No. 39/2009/QH12 dated November 23, 2009 of the 12th National Assembly, 6th session.
- National action program on the elderly.
- Many other policies on health care and health care for the elderly have been issued and implemented.



HCE Program up to 2030 (QĐ 1579 / QĐ-TTg)



In particular, on October 13, 2020, the Prime Minister signed Decision No. 1579 / QĐ-TTg approving the Health Care Program for the elderly up to 2030.

Common
Goal

Care for and improve the health of the elderly (people aged 60 and above), ensuring adaptation to population aging, contributing to the successful implementation of the Vietnam Population Strategy up to 2030.



HCE Program up to 2030 (QĐ 1579 / QĐ-TTg)



- **Specific goals**
- **1. To raise the responsibilities of the Party committees, administrations, departments, branches, unions, agencies and units; of each citizen, family and the whole society in giving healthcare to the elderly.**
- **2. To strengthen primary health care, prevent non-communicable diseases, and deploy long-term health care services for the elderly.**
- **3. To meet the elderly's need for medical examination and treatment with increasingly high quality, appropriate cost and forms of treatment.**
- **4. To build a friendly environment and community in order to improve the quality of health care; promote the role and experience of the elderly.**



HCE Program up to 2030 (QĐ 1579 / QĐ-TTg)



- **Tasks and solutions**
- **1. Further enhance leadership and direction; promote advocacy for behavior change to create a society that supports and is willing to participate in health care for the elderly**
- **2. Consolidate and develop the system for providing primary health care services, preventing non-communicable diseases and providing medical examination and treatment for the elderly; develop a model for long-term HCE.**
- **3. Provide professional trainings for HCE workers.**
- **4. Complete legal policies related to HCE.**
- **5. Research, international cooperation**
- **6. Secure resources.**



Sincere thanks

