

The Role of Local Government in Protecting the Rights of Older People: The Case of Intergenerational Self-help Clubs in Vietnam

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Abstract

This article, using data and information from different sources such as those from Help Age Vietnam (HAV), Vietnam Association of the Elderly (VAE) and Vietnam Women's Union (VWU), provides an overview on the function and activities of the Intergenerational Self-Help Clubs (ISHC) for older people in Vietnam, through which the role of local government is discussed in order to show how they have contributed to protecting rights for older people in various aspects such as income security, health care, and social care. As community-based organizations with three main characteristics (multiple activities, community ownership, and strong connection with local government), ISHC showed their importance in protecting rights for older people at the local level, in which active involvement and actions of local government have facilitated these functions significantly. Given the increasing number of older people due to the rapidly-aging population, expansion of ISHC would facilitate more protection of rights for older people and, as such, the role of local government should be more important than ever.

Keywords

Aging, intergenerational self-help clubs, local government, older people, rights, Vietnam

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Introduction

Aging is an emerging issue in the 21st century as a significant milestone in human history and a big challenge at the same time (UNFPA and HAI, 2013). An aging population results from continuous decreases in mortality and fertility rates and increases in life expectancy for both men and women. The older population (aged 60 years or older) has been increasing rapidly in both absolute and relative terms. In 2019, the number of older persons was about 4.2 times higher than the total in 1950, while the older population accounted for 8 percent and about 13 percent of the world's population in 1950 and 2019, respectively. By 2050, the older population is expected to be about 2.3 billion, representing one in five (22 percent) living humans (United Nations, 2017). If we define older people as those age 65 years or older, UN-DESA (2019) showed that, by 2050, one in every six people in the world will be an older person, which is up from one in every 11 people in 2019. Along with an aging population, protecting the rights for older people has become an emerging issue.

For several decades, specific protections for older people have received only tangential recognition with no comprehensive commitments to the rights of older people (Gardiner, 2018). Only since 1982 have there been a number of initiatives, global commitments, and national laws to protect older people, such as the Vienna International Plan of Action on Ageing (VIPAA) in 1982; the UN Principles for Older Persons in 1991; the General Comment No.6 on the Economic, Social and Cultural Rights of Older Persons in 1995; and the Political Declaration and Madrid International Plan of Action on Ageing (MIPAA) in 2002. For Asia in particular, there have been the Macao Plan of Action on Ageing for Asia and the Pacific in 1999; the Shanghai Regional Implementation Strategy on Ageing in 2002; the Brunei Darussalam Declaration on Strengthening Family Institution - Caring for the Elderly in 2010; the Kuala Lumpur Declaration on Ageing - Empowering Older Persons in ASEAN in 2015; and the ASEAN Plus Three Statement on Active Ageing in 2016 (Gardiner, 2018).

Vietnam is also experiencing this seismic demographic trend, as the population projections by the General Statistics Office (GSO, 2016) show that older people -- as a percent of the total population -- will rapidly increase from 8.7 to 16.7, and then 26.1 in 2009, 2029, and 2049, respectively. It will take less than 20 years for the proportion of people age 65 years or older in the total Vietnamese population to double, i.e., from 7 to 14 percent, compared to 115 years for France, 26 years for China, and 21 years for Japan and Thailand (UNFPA, 2011; World Bank, 2016). Also, feminization of aging is clear in Vietnam, as the data from Population and Housing Census in 2019 show that the sex ratio between women and men for groups age 60-69, 70-79, and 80 years or older were 124, 146 and 191, respectively (GSO, 2020).

For decades, Vietnam has improved its policies and regulations to protect rights and confer more benefits to older people. Vietnam has approved or supported many international and national policies and programs directly or indirectly related to older people, such as the Convention on the Elimination of All Forms of Discrimination Against Women (CEDAW) in 1979; the United Nations' Principles for older people in 1991; the Madrid International Plan of Action on Ageing (MIPAA) in 2002; the UN Convention on the Rights of Persons with Disabilities in 2007; the UN Sustainable Development Goals (SDGs) for 2030 in 2015; the World Health Organization's Global Strategy and Action Plan on Ageing and Health in 2016; and the ASEAN Kuala Lumpur Declaration on Ageing - Empowering Older Persons in ASEAN in 2016.

At the national level, Vietnam passed the Law of the Elderly in 2009 and, since then has enacted about 50 related legal documents for older people in all socio-economic and health aspects. In 1995, the Vietnam Association of the Elderly (VAE) was established to represent the voice of older people and protect their rights. There have been many campaigns to promote welfare for Vietnamese older people, such as "Bright eyes for the elderly", "Warm clothes for the elderly", "Older people's participation in environment protection and new rural program", and "Older people excel in livelihood". Vietnam's policies for older people are quite comprehensive, and the protection of rights for older people has expanded substantially.

At the same time, there are significant gaps which may pose obstacles to Vietnam's ability to continue to protect the rights of older people. These gaps include the following: (i) Lack of detailed guidelines and resource allocation for implementation. The policies are still general, and not applicable to the actual situation. Plus, there is no clear monitoring and evaluation mechanism. These gaps have occurred because ageing and older people's issues are cross-cutting, relate to different departments, and vary with the local situation. One older person can be subject to different policies at same time. (ii) Policies have been not equally implemented. The quality of implementation varies across policies, areas and subjects, and largely depend on local authority and related sectors' resources, ability and coordination. (iii) There are negative stereotypes of older people and ageism, leading to policies which focus more on care of older people rather than promotion of their productive role in society. There are programs that recognize the role of older people but lack support mechanisms to promote older people's participation and contribution. (iv) Lack of personnel, e.g., there is no Vietnam National Committee on Ageing (VNCA) secretariat, no separate staff to be in charge of older people-related issues, and there is subordination of older persons' issues with the Fatherland Front. (v) Lack of quality data and evidence-based policy analyses and studies. Such policies that do exist are quite *ad hoc*, focusing on narrow aspects of the rights of older people.

A number of reports (e.g., Dam *et al.*, 2010; VWU, 2012; Giang *et al.*, 2020) have showed that community-based activities are important to protect the rights of older people in their homes, communities, and society at large. Among various rights, protecting health, income, and social participation is extremely important. To do so, initiatives from local government authorities are crucial to convert plans into reality.

The objectives of this article are as follows: (i) To provide an overview of the community-based organizations which support older people in Vietnam, namely Intergenerational Self-Help Clubs (ISHC), with their activities for promoting rights of older people in Vietnam; (ii) To analyze how local/provincial governments have played an important role in guaranteeing older people's rights via supporting ISHC; and (iii) To suggest policies to local government in order to further promote rights for older people via ISHC.

To pursue these objectives, we utilized secondary data and information to-date which were collected and compiled by Help Age Vietnam (HAV) and other relevant organizations such as Vietnam Women's Union (VWU) and Vietnam Association of the Elderly (VAE). In the next section, we provide an overview about ISHC in Vietnam, including their history and development. In the third section, we discuss how local government has contributed to promoting rights of older people via ISHC. The last section offers conclusions of the study.

Intergenerational Self-Help Clubs (ISHC) in Vietnam

The aforementioned gaps expose the need for a greater role of community-based organizations to mobilize support personnel and resources, and act as a monitoring body in communities so that older people do not only passively receive but are active agents of change. In late 2005, the ISHC model was initiated by VAE and VWU with technical support from Help Age International (HAI). ISHC are a community-based development model led by older people with the aim of improving the well-being of older people (particularly the disadvantaged groups) and their communities. ISHC are self-managed, sustainable, and comprehensive. Starting with only 60 piloted clubs in Thai Nguyen province in early 2006, there are now approximately 1,900 ISHC nationwide in 60/63 provinces/cities (VAE, 2019).

ISHC have three outstanding characteristics that help promote older people's rights effectively: multiple activity areas, community ownership, and strong collaboration with local government.

Multiple activity areas

A standard Intergenerational Self-Help Club has at least eight activity areas, namely: (i) life-long learning, (ii) rights and entitlements, (iii) livelihood, (iv) social care, (v) health care, (vi) volunteer-based home care, (vii) self-help and community support, and (viii) resource

mobilization (Help Age Vietnam – HAV, 2019). These activity areas encompass the rights of older people for income security, health care, and social care. It is more convenient for older people to claim their lawful benefits through one single channel. Moreover, all activity areas are linked with each other and contribute in different ways to create a comprehensive impact.

Through ISHC’s various activities, older people are supported to exercise their rights to health care, social care, and income security in accordance with national law and policies (Figure 1).

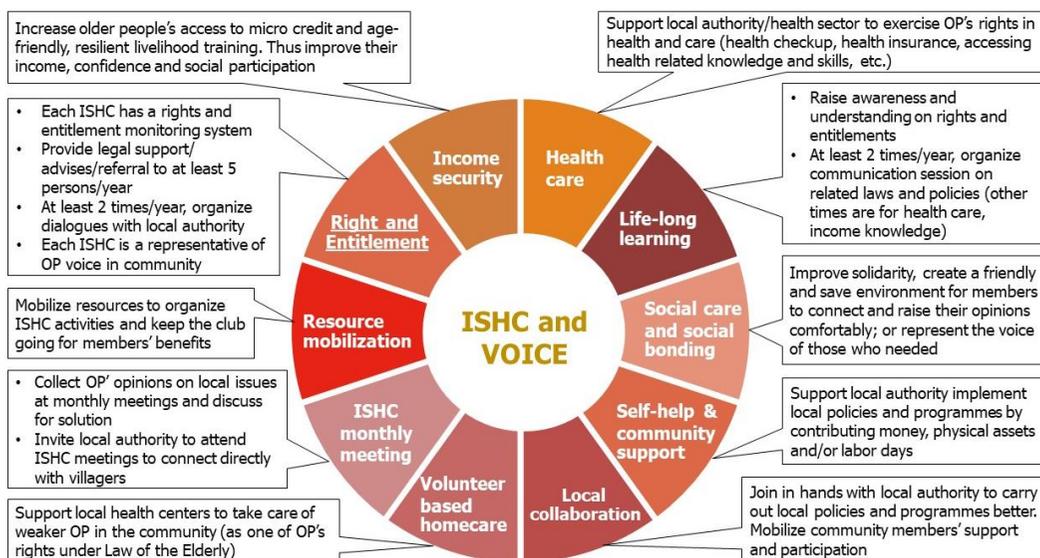


Figure 1: ISHC activities to ensure that older people (OP) have a voice and exercise their rights

Source: Authors’ schematic based on ISHC’s design and practical activities

For example, according to Circular No.96/2018/TT-BTC dated 18 October 2018 by the Ministry of Finance on primary health care, longevity celebration, credit incentives, commendations, and rewards, the local health commune centers must send doctors to houses of older people who are sick and living alone. Nevertheless, while the demand is very high, the number of available doctors is limited (at remote areas, the ratio is one doctor per 10,000 people), and there are limitations of local budget and resources. ISHC support community-based health monitoring and health care services. The clubs send home-care volunteers to help at least three times per week. The volunteer reminds the older person to take prescribed medicine and/or provides simple personal care. If the older person’s condition worsens, local health workers will be notified. In this way, ISHC help to reduce the workload of health workers. If volunteers receive training from authorized organizations and ISHC are connected closely with the local health sector, the quality of care will be improved.

From another perspective, to help implement the Ministry of Health's Health Care Plan for Older Persons (2017-25), ISHC host daily physical exercise sessions, monthly blood pressure and weight checks, and quarterly self-care communication. ISHC also coordinate with the health sector to organize at least two health check-ups for older persons per annum. Since all the above services are provided at the village level, they are highly accessible for older people and assist the health sector to manage community health more efficiently (VAE, 2019).

In terms of income security, older people face a number of challenges. Data from a 2019 national survey on older persons (forthcoming) showed that about 7 percent of older people lived in poor households, and only 13 percent had savings. About 27 percent of older people have a contributory pension (Vietnam Social Security – VSS, 2018) while 25 percent have a social pension (MOLISA, 2018). The minimum monthly cash transfer for disadvantaged older people is currently 270,000 VND (or 12 \$US) per beneficiary, which is quite low as it is equivalent to only 40% of the rural poverty line and 30% the urban poverty line. On the other hand, more than 60 percent of older people age 60-69 years are still working, apart from the fact that they do not receive adequate social assistance benefits. The Vietnamese Prime Minister's Decision 971/2015/QĐ-TTg, dated 1 July 2015, on livelihood training excludes all learners over age 60 years. Also, in the financial credit system, many older people find it hard to access loans because of age discrimination. Even though the Law of the Elderly states that older people should receive a favorable interest rate for their loans, detailed guidelines for implementation are not available yet.

In order to address income insecurity, ISHC provide age-friendly livelihood training to older members four times per year. Based on the design, each club sets up a group of economic volunteers to help five persons in need every month, especially the poor and the near-poor. Rather than using age, gender, or any other criterion, any member who wants to borrow money from ISHC will be considered based on his/her business model and needs. The lending procedure is simple and quick. However, ISHC need the local authority's validation of a member's loan proposal. Additionally, through coordination with the local authority, ISHC can connect with other sources of micro-credit in the village and/or Agriculture Extension Department and, thus, better meet the needs of members. Local leaders assign staff to train ISHC on suitable livelihood models and market demand.

Community ownership

Resource mobilization is a notable contribution by the ISHC. While ISHC are established to take care of and promote the role of older people, a club must first have the ability to sustain itself. ISHC can generate their own income through collecting a membership fee, accruing revolving loan fund interest, mobilizing local donations (namely, “golden-

heart” book), and a running an income-generating collective. By funding its own activities, the ISHC can independently represent the interests of its members. With its mobilized resources, ISHC are also able to organize monthly activities and provide support to needy older persons. Members decide independently how to spend the funds, and a financial report is presented at the monthly club meeting. A club’s fund usually increases over time and, as such, it can maintain long-lasting services for older people and their communities. The ISHC concentrate on increasing older people’s knowledge so that they can manage their own finances and be as self-reliant as possible. At least twice a year, the club organizes educational sessions on practical topics such as the Law on the Elderly and related national and local policies.

In terms of ownership, the ISHC are operated by older people and disadvantaged groups, and this ensures that their voice is heard. Each club has about 50-70 members, which are divided into 5-6 sub-groups; 1-2 members are then assigned to be group leaders. Group leaders help club members organize ISHC activities and, more importantly, monitor and care for every member in their group, making sure no one is left behind. Moreover, about 70 percent of club members are age 55 years or older. As such, the ISHC do not target older people exclusively as a stand-alone group in society but, instead, as an integral demographic segment with other age groups. Since each life cycle is accompanied by different skill sets and needs, this integrated approach boosts understanding and support between the generations. For example, younger members joining the club have a chance to understand their rights and entitlements for the time when they are older; that helps them to prepare or simply support other senior members of their family. Also, valuing the life experiences of older people enriches the design and implementation of policies.

In terms of gender and background, the ISHC welcome all interested persons without discrimination. In fact, the ISHC create more opportunity for disadvantaged groups since 70 percent of club members are female and 70 percent are in a vulnerable situation (e.g., poor, near-poor, living alone, living only with other disadvantaged family members, being the main caregiver, having weak health, having a disability, being a victim of abuse, or living in a family affected by HIV/AIDS).

Strong collaboration with local government

There are many channels (such as newspapers, local news boards, television, and community public address systems) that local government can utilize to deliver information about rights of older people. However, the ISHC are one of the most accessible and age-friendly channels in which older people can propose specific subjects they want to learn more about, and the selection of topics is made based on learners’ knowledge gaps and needs.

The approach used by the ISHC is based on adult learners' preferences. Real-life connections, encouragement, and healthy competition are critical factors in the success of the ISHC. Furthermore, knowledge exchange is not only limited within the club; each member – by ISHC regulations – is encouraged to share what they have learned with at least two family members and/or neighbors. Along with providing knowledge, ISHC motivate older people and their host community members to monitor, identify, and notify the club about the local situation – both favorable and undesirable – so that positive examples can be replicated and problems can be resolved. Once every month, each club holds a meeting where members freely share opinions about matters within their neighborhood. All participants have an equal chance to speak, and members are encouraged to discuss within their group before reporting any issues. Such an arrangement ensures that information goes through at least one round of verification (to limit baseless complaints). Many members may also feel more comfortable discussing issues in a smaller group first before addressing all participants.

ISHC also increase older people's confidence to claim their rights. This is done through ISHC social care and community support activities. The clubs offer a safe and friendly environment for older people to gather and share their experiences freely. At least one club meeting and one public duty event (such as cleaning village roads, planting flowers) are held every month. In addition, older persons in difficult circumstances are regularly identified and supported, either by cash, gifts, technical assistance, or labor. Those who are sick, bed-ridden, or home-bound are visited by club members and volunteers on a weekly basis or whenever needed, ensuring that essential needs are attended to and all voices are heard. These activities remove social barriers, strengthen local solidarity and highlight people's sense of public responsibility. When having more chance to join a social movement, older people's role and rights are recognized more and, thus, they are more fully encouraged and supported to exercise their rights (VAE, 2019).

The membership of the ISHC leadership boards is also highly diverse. Each club has five club management boards (CMB), in which 2-3 members are women and at least one has economic and/or social difficulty (Figure 2). This helps ensure there is a variety of perspectives. The CMB members are selected by votes of club members and the local Association of the Elderly (AE), and endorsed by local authorities. The CMB members have the trust of the local community and can help deal with most problems. The five CMB members share power and responsibilities among themselves, and this ensures that decision-making power is not controlled by one person and the workload is evenly shared. The CMB oversee ISHC on the basis of ISHC regulations which are agreed upon by all members at the time of the club's establishment. For this reason, the ISHC operations are transparent and democratic. Among the five CMB members, one is a spokesperson and must be familiar with

local regulations and have a willingness to help older persons. This member manages activities such as monitoring the implementation of local policies/programs; collecting members' feedback; facilitating a dialogue with local authorities/service providers; providing legal support or referring cases to authorized personnel; and raising members' knowledge of their own rights and entitlements. Usually, two or three CMB members are persons who hold other positions in the village (such as village head, chairwoman of the local Women's Union, or village health worker). This means that the CMB will be up-to-date on local policies/programs as they are enacted, and that helps them to communicate details to ISHC members. If members have any issues, they can efficiently relay those opinions to the village management board.

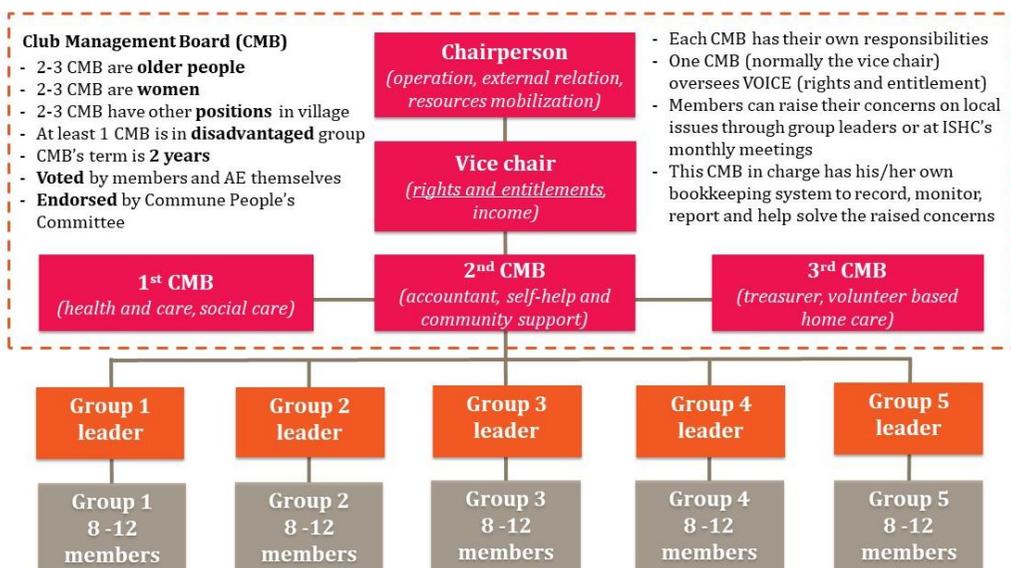


Figure 2: ISHC's organizational structure representing the voice of different groups

Source: Authors' schematic, based on ISHC design and practical activities

To ensure that older people's rights are respected, each club has a monitoring and support mechanism. Foremost, a focal point is appointed among the five CMB. S/he manages a log that records members' concerns – either raised by members themselves or through surveys. This tracking system is updated frequently to document what kind of support is needed, update the status of problem-solving, and identify which person(s) is(are) in charge. The monthly meetings are another opportunity to collect feedback on local issues. Local authority representatives also attend such events to listen directly to older people's opinions or present new government programs. At least twice per year, an informal forum is convened between ISHC and local leaders on shared concerns. For instance, in Ninh Ngoai village (in

Hoa Binh province), after hearing from ISHC about the degradation of the village cultural house and its sanitation facilities, the local authority took immediate action, and as a result, forty million VND (~1.700 \$US) was allocated from the New Rural Program budget to renovate the facilities and plant shade trees (with the host community also contributing cash and/or labor) (VAE, 2019).

Protecting rights of older persons: The role of local government via ISHC

To run all the activities described above, support from the relevant local authorities is indispensable. In terms of establishing the ISHC, a club cannot be recognized and integrated into the host community's development plan without the endorsement of local government. The Institute of Social and Medical Studies (ISMS) and Indochina Research and Consulting (IRC) (ISMS & IRC, 2011) conducted an evaluation, using qualitative data from different communes in Thai Nguyen province to assess the first 60 piloted clubs, and found that participation of the local authorities was crucial to the success of the clubs. In particular, once the Party committees and local authorities were interested in the ISHC, they would facilitate conditions to set up the clubs, and direct activities of relevant stakeholders to produce optimal results for the local older persons.

The green light to establish ISHC is given by the commune's People's Committee. After the Prime Minister issued Decision 1533/QĐ-TTg (dated 2 August 2016) on national replication of ISHC, the number of clubs increased significantly, from 980 in 2016 to 1,145, 1,518, and 1,900 in 2017; 2018; and 2019, respectively (Figure 3). In addition, more provinces and cities allocated their own budget to invest in ISHC to supplement the host community's contribution. As a result, more quality ISHC were founded, and this significantly expanded the benefits of the clubs for Vietnamese older people (VAE, 2019).

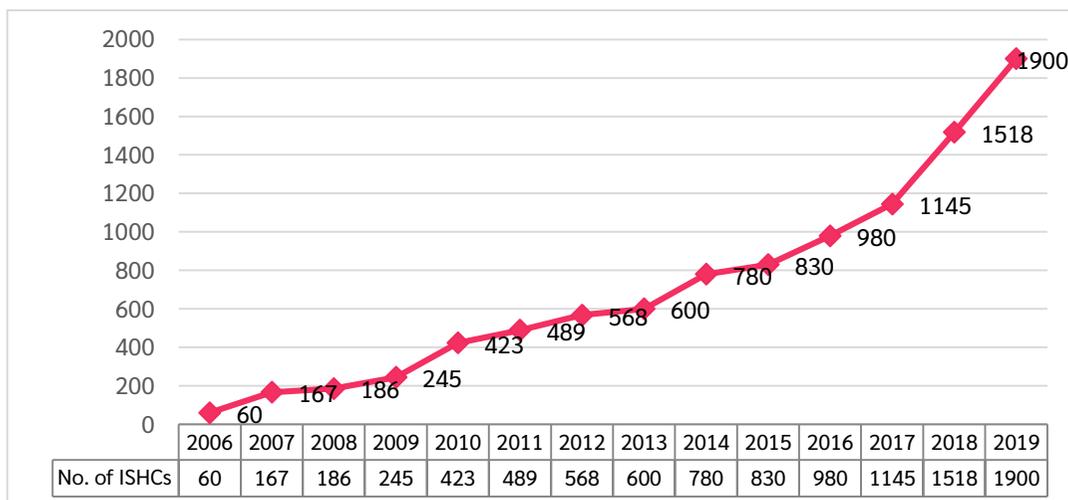


Figure 3: Number of ISHC, 2006-2019

Source: Authors' compilation, using VAE and HAV reports (various years)

ISHC have the target to provide legal support to at least five persons a year (whether they are club members or not). Activities include providing consultation, identifying needy cases, helping to complete paperwork, or reporting issues to a higher authority. Local government works closely with ISHC to ensure that eligible older persons receive social security and benefits (ISMS & IRC, 2011; World Bank, 2019).

Local authorities also support ISHC operations directly. When a consensus issue is identified at the monthly club meeting, the matter is then forwarded to the authorized level through dialogue or official letter. Consultations are held at least twice a year by inviting local government leaders to the ISHC meeting to listen directly to members' opinions, and these are organized through the Association of the Elderly (AE) or club leaders (Figure 4).

Local authorities also provide support by sending capable resource persons (e.g., legal staff or other specialists) to make clear and concise presentations to the ISHC or CMB. The goal of these presentations is not only to deliver the technical content on law and policies, but to explain how these impact on older people's lives and how to access local support mechanisms. As legal knowledge can be difficult to absorb, the method of presentation is very important. ISHC have developed an elder-friendly and participatory education method, which ensures that the audience is not simply lectured to. Instead, the participants are frequently engaged in short quizzes, role play, group discussion, etc. Bonus points are given each time someone shares an opinion or poses a question, without any need to be concerned about being right, wrong, judged, or criticized. At the end, the group with the highest point total receives a token gift of appreciation.

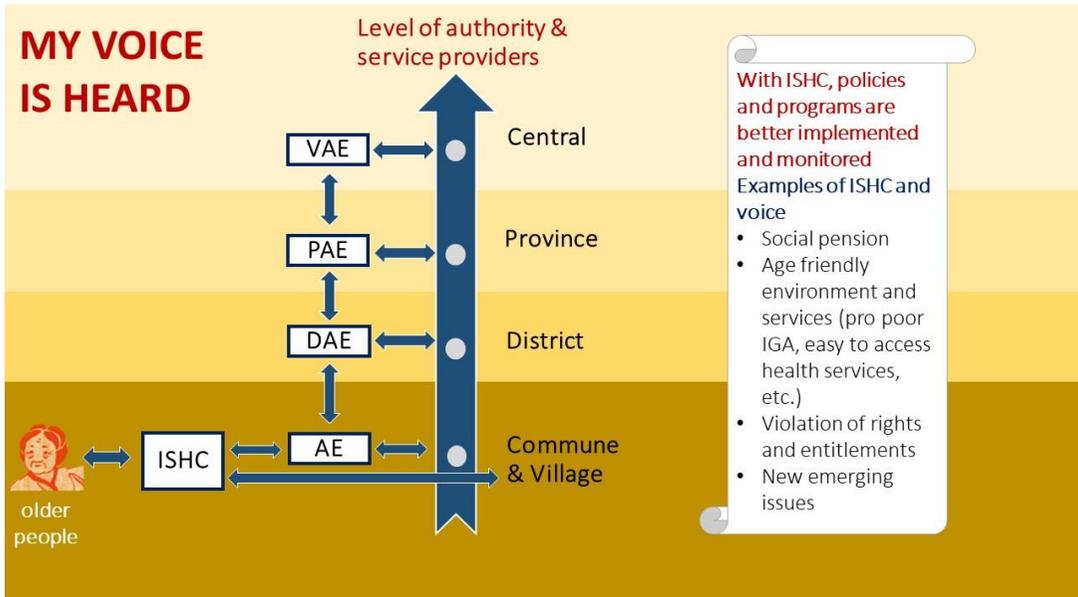


Figure 4: ISHC has amplified the voice of older people at the local and national levels

Source: Authors' illustration, based on ISHC design and practical activities

Notes: ISHC – Intergenerational Self-Help Club; AE – Association of Elderly; DAE – District Association of Elderly; PAE – Provincial Association of Elderly; VAE – Vietnam Association of Elderly; IGA – Income-Generating Activities

Concluding remarks

Like many other countries in Asia, the Vietnamese population is aging quickly, resulting in an increasing number and proportion of older persons. Thus, protecting rights for older people has become more important than ever. This article showed that the government of Vietnam is actively protecting the interests of older people, especially the disadvantaged groups, by investing in community-based organizations such as ISHC, which have emerged as a comprehensive and effective model. ISHC are helping build capacity of host communities by engaging older residents in decision-making, and ensuring that their opinions are considered. Once older people are informed and empowered, they are not only able to take care of themselves, but also contribute to the socio-economic development of their own communities. Local government is playing an important role in facilitating the legal and practical support of ISHC in protecting rights of older people. However, given the limited resources, there is a mounting unmet demand for more sustainable solutions, in both financial and managerial dimensions, so as to provide a comprehensive package of benefits for older persons. To achieve this vision, along with the leadership from the central government in developing ISHC, the active role of local government is paramount to

mobilizing and coordinating enough resources to meet the needs of all older persons in the community.

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