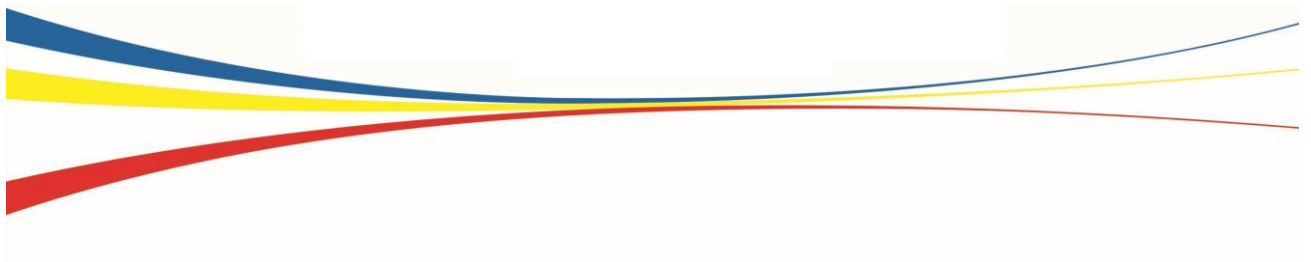




**Research on the Impact of COVID-19 on the Income  
Security of Rural Older People in Cambodia, Lao PDR,  
Myanmar and Vietnam**



Senior Officials Meetings on Social Welfare and Development  
(SOMSVD)  
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## **A. Executive Summary**

This executive summary provides an overview of the research conducted on the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. The research aimed to assess the socio-economic challenges faced by rural older people in these countries during the COVID-19 pandemic, identify the factors contributing to income insecurity, and propose policy recommendations to mitigate the impact of the pandemic.

The objectives of the study encompass a comprehensive exploration of the impact of the COVID-19 pandemic on the income security of older people residing in rural areas across the Cambodia, Lao PDR, Myanmar and Viet Nam countries. These objectives are delineated to provide a nuanced understanding of the challenges faced by rural older people during the pandemic and to inform public responses related to ageing policy and services in the ASEAN region.

Firstly, the study aims to share insights into how COVID-19 has affected the income security of older people in rural areas of these countries. By delving into the multifaceted impacts of the pandemic on the economic well-being of rural older individuals, the research seeks to elucidate the specific challenges and vulnerabilities faced by this demographic group. Through a comparative analysis across those countries, the study aims to identify common patterns as well as unique contextual factors that shape the experiences of rural older people during the pandemic. This objective serves as a foundation for informing policy development and programmatic interventions aimed at addressing the needs of rural older populations within the ASEAN framework.

Secondly, the study endeavors to contribute to the body of evidence on how COVID-19 has impacted the income security of older people in rural areas of those countries. By generating empirical data and insights through qualitative and quantitative research methods, the research aims to deepen our understanding of the socio-economic implications of the pandemic for rural older individuals. Through rigorous data collection and analysis, the study seeks to identify key determinants of income insecurity among rural older people, including disruptions in livelihoods, access to social protection, and healthcare services. By enhancing the evidence base on this

topic, the study aims to inform evidence-based policy-making and advocacy efforts aimed at addressing the unique needs and vulnerabilities of rural older populations.

Thirdly, the study seeks to learn from the responses to COVID-19 in rural areas of the host countries and their implications for the income security of older people. By examining the policy responses, community-based initiatives, and support mechanisms implemented during the pandemic, the research aims to identify best practices, gaps, and areas for improvement in addressing the needs of rural older individuals. Through qualitative research methods such as interviews, focus group discussions, and case studies, the study seeks to capture the lived experiences and perspectives of rural older people and stakeholders involved in pandemic response efforts. By contextualizing these responses within the broader socio-economic and policy landscape, the study aims to derive actionable insights for enhancing the resilience and well-being of rural older populations in the face of future crises.

Finally, the study aims to identify the specific needs of rural older people and effective responses to meet these needs. By engaging directly with rural older people, caregivers, community leaders, and relevant stakeholders, the research seeks to identify priority areas for intervention and support. Through participatory research methods and stakeholder consultations, the study aims to ensure that the voices and perspectives of rural older people are central to the research process. By co-creating knowledge and solutions with the targeted group, the study aims to facilitate the design and implementation of contextually appropriate interventions that address the unique needs and challenges faced by rural older populations during the COVID-19 pandemic and beyond.

The research proposed to employ a mixed-methods approach, combining qualitative and quantitative research methods to gather comprehensive data on the experiences of rural older people during the COVID-19 pandemic. Qualitative methods, including in-depth interviews and focus group discussions, were used to explore the lived experiences, perceptions, and challenges faced by rural older people. Quantitative methods, such as surveys and statistical analysis, were utilized to assess the prevalence and severity of income insecurity among rural older people and identify key socio-economic factors contributing to vulnerability.

The research findings highlight the multifaceted impact of the COVID-19 pandemic on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. Economic disruptions, limited access to resources, social and psychological impacts, and policy responses and interventions are key themes that emerge from the research findings. By addressing these challenges and leveraging opportunities for policy responses and interventions, policymakers can enhance the resilience and well-being of rural older people and build more inclusive and sustainable societies in the wake of the pandemic.

The COVID-19 pandemic has exacerbated income insecurity among rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam, highlighting the need for comprehensive and inclusive policy responses to address the root causes of vulnerability and promote sustainable development. By strengthening social protection systems, improving access to healthcare services, promoting sustainable livelihoods, and fostering community resilience, policymakers can mitigate the impact of the pandemic and ensure that rural older people can age with dignity, security, and resilience. Through collaboration, innovation, and commitment to equity and social justice, these countries can build more inclusive and resilient societies that value and support their older populations.



## **B. Acknowledgments**

We would like to express our sincere gratitude to SOMSWD Focal Points and all those who contributed to the completion of this research project on the “Research on the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam”.

First and foremost, we extend our heartfelt thanks to the participants of this study, particularly the rural older people in the Cambodia, Lao PDR, Myanmar and Viet Nam countries, for their valuable insights and contributions. Their willingness to share their experiences and perspectives has been instrumental in shaping the findings and recommendations of this research.

We are deeply appreciative of the support and guidance provided by our researchers for each country and mentors throughout the project. Their expertise, feedback, and encouragement have been invaluable in steering the direction of our research and ensuring its rigor and quality.

We would also like to acknowledge the ASEAN Secretariat, ASEN Development Fund (ADF) that supported this research endeavor. This financial assistance enabled us to carry out data collection, analysis, and dissemination, facilitating the realization of our research objectives.

Our gratitude extends to the local communities, organizations, and institutions in Cambodia, Lao PDR, Myanmar, and Viet Nam who facilitated access to research sites and provided logistical support during fieldwork. Their cooperation and collaboration were essential in facilitating the smooth execution of this study.

We are thankful to the institutions that provided access to relevant literature, datasets, and resources essential for conducting this study. Their contributions enriched our understanding of the topic and informed our research design and methodology.

Special thanks are due to the regional research, national researchers, research assistants, translators, and support staff who assisted in various aspects of the

research process, including data collection, transcription, and analysis. Their dedication and hard work contributed significantly to the success of this project.

We also acknowledge the role of technology and digital tools in facilitating remote collaboration and communication, particularly during the challenging circumstances posed by the COVID-19 pandemic. The use of virtual platforms and online resources enabled seamless coordination and interaction among team members and stakeholders.

Finally, we express our gratitude to our colleagues for their understanding, encouragement, and unwavering support throughout the duration of this research project. Their patience, encouragement, and moral support were instrumental in sustaining our motivation and morale during challenging times.

In conclusion, we extend our heartfelt appreciation to all individuals and organizations who contributed to this research endeavor in various capacities. It is through your collective efforts and collaboration that we were able to shed light on the critical issue of income security among rural older people in the Cambodia, Lao PDR, Myanmar and Viet Nam amidst the COVID-19 pandemic.

Thank you for your invaluable support and contributions.

## **PART I. Introduction**

### **1.1 National Portraits**

#### 1.1.1 Cambodia: A Land of Rich Heritage and Cultural Splendor

Nestled in the heart of Southeast Asia, Cambodia stands as a testament to resilience, history, and cultural vibrancy. From the majestic temples of Angkor Wat to the bustling streets of Phnom Penh, Cambodia's landscape is adorned with a tapestry of natural beauty and ancient wonders. With a history steeped in both triumph and tragedy, Cambodia has emerged as a nation defined by its ability to overcome adversity and embrace the promise of a brighter future.

#### *Geography and Climate*

Cambodia is bordered by Thailand to the west and northwest, Lao to the north, Viet Nam to the east and southeast, and the Gulf of Thailand to the southwest. The country's landscape is predominantly characterized by low-lying plains, the Mekong River, and the Tonle Sap Lake, which serves as the heart of Cambodia's freshwater ecosystem. With a tropical climate, Cambodia experiences distinct wet and dry seasons, with monsoon rains from May to October and dry, cooler weather from November to April. The country's diverse geography provides a home to a wide array of flora and fauna, contributing to its ecological significance within the region.

#### *History and Heritage*

The history of Cambodia is a tale of ancient civilizations, imperial conquests, and colonial rule. From the powerful Khmer Empire to the tumultuous years of the Khmer Rouge regime, Cambodia's past is marked by periods of both grandeur and tragedy. At the height of its power in the 9th to 15th centuries, the Khmer Empire flourished, leaving behind a legacy of magnificent temples and architectural marvels, including the iconic Angkor Wat. However, the empire eventually succumbed to internal strife and external pressures, leading to its decline and eventual absorption into neighboring kingdoms.

In more recent history, Cambodia endured the horrors of the Khmer Rouge regime under the leadership of Pol Pot, resulting in the loss of millions of lives through

genocide, forced labor, and starvation. The scars of this dark chapter continue to reverberate through Cambodian society, shaping its collective memory and national identity. Despite these challenges, Cambodia has emerged as a resilient nation, committed to preserving its cultural heritage and rebuilding a society founded on principles of peace and reconciliation.

### *Culture and Traditions*

Cambodia's rich cultural heritage is reflected in its vibrant arts, cuisine, and religious practices. The influence of Buddhism permeates every aspect of Cambodian life, from the majestic pagodas that dot the landscape to the intricate rituals observed by devout followers. Traditional Khmer dance and music serve as expressions of cultural identity, with performances often depicting mythical tales and historical narratives. The culinary scene is a testament to Cambodia's diverse influences, blending flavors from neighboring countries with indigenous ingredients to create a unique culinary experience.

### *Economy and Development*

In recent years, Cambodia has experienced rapid economic growth, driven by an expansion in manufacturing, agriculture, and tourism. The government has implemented policies aimed at attracting foreign investment and promoting private sector development, resulting in increased infrastructure investment and job creation. However, challenges such as income inequality, corruption, and environmental degradation remain prevalent, posing obstacles to sustainable development and inclusive growth.

As Cambodia looks towards the future, it stands at a crossroads of opportunity and challenge. With its rich cultural heritage, natural beauty, and resilient spirit, Cambodia possesses the potential to emerge as a leader in the region, promoting peace, prosperity, and sustainable development for future generations. By embracing its past while striving towards a brighter tomorrow, Cambodia continues to inspire awe and admiration as a land of endless possibility and enduring resilience.

## 1.1.2 Lao PDR: A History, and Natural Splendor

Nestled amid the verdant landscapes of Southeast Asia lies the Lao People's Democratic Republic (PDR), a landlocked nation that embodies the rich tapestry of history, culture, and natural beauty. Lao PDR, this enchanting country captivates visitors with its serene Buddhist temples, meandering rivers, and rugged mountain ranges. However, beyond its idyllic façade, Lao PDR holds a complex history shaped by centuries of cultural exchange. This introduction serves as a gateway to unraveling the diverse facets of Lao PDR, from its ancient heritage to its modern-day aspirations, providing a comprehensive overview of this enigmatic nation.

### *Geography and Landscape*

Lao PDR's geographical features are as diverse as they are breathtaking. Located in the heart of the Indochinese Peninsula, Lao PDR is bordered by five neighboring countries: China to the north, Viet Nam to the east, Cambodia to the south, Thailand to the west, and Myanmar to the northwest. The topography of Lao PDR is characterized by rugged mountains, fertile plains, and meandering rivers, with the mighty Mekong River serving as a lifeline that traverses the length of the country.

To the north, the Annamite Mountain Range forms a natural boundary with Viet Nam, offering spectacular vistas and opportunities for trekking and adventure. In the south, the Bolaven Plateau is renowned for its lush coffee plantations and cascading waterfalls, while the central plains are dotted with picturesque rice paddies and traditional villages. Amidst this diverse landscape, Lao PDR is home to a rich biodiversity, with dense forests teeming with unique flora and fauna, including rare species such as the Indochinese tiger and the Irrawaddy dolphin.

### *History and Heritage*

Lao PDR's history is a mosaic of indigenous cultures, colonial influences, and regional dynamics that have shaped its identity over millennia. The earliest inhabitants of Lao PDR were the Austroasiatic and Tai-Kadai peoples, who settled in the region thousands of years ago. Over time, various kingdoms and principalities emerged, each leaving its mark on the cultural landscape of Lao PDR.

One of the most influential civilizations in Lao PDR's history was the Khmer Empire, which ruled over much of Southeast Asia from the 9th to the 15th century. The remnants of Khmer influence can still be seen in the magnificent temples of Wat Phu and Vat Phou, UNESCO World Heritage Sites that stand as testament to Lao PDR's rich cultural heritage.

In the 14th century, Lao PDR came under the rule of the Lan Xang Kingdom, founded by King Fa Ngum, who unified the various principalities of the region. Under the reign of King Setthathirath in the 16th century, Lan Xang reached its zenith, becoming one of the largest and most powerful kingdoms in Southeast Asia. However, internal strife and external pressures led to the fragmentation of Lan Xang in the 18th century, giving rise to the rival kingdoms of Luang Prabang, Vientiane, and Champasak.

The colonial era brought further upheaval to Lao PDR, as the country became embroiled in the power struggles between European powers vying for control of Southeast Asia. In the late 19th century, Lao PDR fell under French colonial rule, becoming part of French Indochina alongside Viet Nam and Cambodia.

Lao PDR is a landlocked country in the mainland Southeast Asia with a total area of 236,800 km<sup>2</sup>. The country is bordered by China to the north, Viet Nam to the east, Cambodia to the south, Thailand to the west and Myanmar to the northwest. Lao PDR has a total population of 7,231,000, of which older persons account for 7.06% (year 2020). According to the traditions and family values of Lao culture, children, who are the primary caregivers, show generosity and gratitude by taking care of older persons in daily life. During the COVID-19 pandemic, the government was enacted preventative measures, including an early lockdown and ongoing travel restrictions, and maintain social distancing to control the virus, due to the spread of COVID-19, the living conditions of older persons have been affected to some extent.

### *Culture and Tradition*

Lao PDR's cultural heritage is as diverse as its geography, encompassing a rich tapestry of traditions, rituals, and artistic expressions. At the heart of Lao PDR culture

is Theravada Buddhism, which plays a central role in shaping daily life, social customs, and religious practices. The country is dotted with ornate temples, or wats, where Buddhist monks engage in prayer, meditation, and religious ceremonies.

Traditional Lao PDR architecture is characterized by its elegant simplicity and intricate craftsmanship, with wooden houses, temples, and stupas adorned with elaborate carvings and decorative motifs. The UNESCO World Heritage town of Luang Prabang is renowned for its well-preserved colonial architecture and stunning Buddhist temples, making it a cultural treasure trove and a popular destination for travelers.

Music and dance are integral parts of Lao PDR culture, with traditional performances such as the lam vong dance and khene music showcasing the country's artistic heritage. Lao PDR cuisine is equally vibrant, with dishes such as laap (minced meat salad), sticky rice, and tam mak hoong (papaya salad) tantalizing the taste buds with their bold flavors and aromatic spices.

Lao PDR is a land of contrasts and contradictions, where ancient traditions coexist with modern aspirations, and natural beauty is juxtaposed with the scars of history. As Lao PDR continues to navigate the complexities of development and globalization, it does so with a sense of pride in its cultural heritage and a determination to preserve its unique identity. Whether exploring its historic temples, trekking through its pristine wilderness, or savoring its culinary delights, Lao PDR offers visitors an unforgettable journey through history, culture, and natural beauty.

### 1.1.3 Myanmar: Unraveling the Mystique of the Golden Land

Myanmar, formerly known as Burma, beckons travelers with its mystical allure, captivating landscapes, and rich tapestry of cultural heritage. Nestled between the towering Himalayas and the azure waters of the Andaman Sea, Myanmar is a land of contrasts, where ancient pagodas dot the skyline, vibrant markets bustle with activity, and traditional ways of life endure amidst the winds of change. This introduction serves as a gateway to explore the multifaceted allure of Myanmar, delving into its history, geography, and cultural heritage to unravel the mystique of the Golden Land.

## *Geography and Landscape*

Myanmar's geographical diversity is as enchanting as it is varied, encompassing snow-capped mountains, dense jungles, sprawling plains, and pristine beaches. Located in Southeast Asia, Myanmar shares borders with Bangladesh, India, China, Lao PDR, and Thailand, positioning it at the crossroads of diverse cultures and civilizations.

At the heart of Myanmar lies the Ayeyarwady River, the lifeline of the nation, which meanders through the central plains before emptying into the Andaman Sea. Along its banks lie verdant rice paddies, ancient temples, and bustling cities, embodying the essence of Myanmar's cultural and agricultural heritage.

To the north, the rugged peaks of the Shan Plateau rise majestically, offering panoramic views of mist-shrouded valleys and terraced fields. In the west, the Arakan Mountains form a natural barrier between Myanmar and Bangladesh, while the eastern border is delineated by the Shan Hills and the Tenasserim Range.

Along Myanmar's western coastline, the Bay of Bengal beckons with its pristine beaches and turquoise waters, while the remote islands of the Myeik Archipelago offer secluded retreats for intrepid travelers. From the snow-capped summits of Hkakabo Razi, Southeast Asia's highest peak, to the tranquil shores of Inle Lake, Myanmar's landscape is a testament to the beauty and diversity of the natural world.

## *History and Heritage*

Myanmar's history is steeped in legend and lore, shaped by centuries of dynastic rule, colonial conquest, and cultural exchange. The earliest known civilization in Myanmar dates back to the Pyu city-states, which flourished in the central plains from the 2nd century BCE to the 9th century CE. These ancient settlements, characterized by their distinctive circular city layouts and Buddhist stupas, laid the foundation for Myanmar's rich cultural heritage.

In the 11th century, the rise of the Bagan Empire heralded a golden age of artistic and architectural innovation, as thousands of temples and pagodas were constructed



across the plains of Bagan. Among these, the towering spires of the Shwezigon Pagoda and the gilded halls of Ananda Temple stand as enduring symbols of Myanmar's religious and cultural legacy.

The subsequent centuries saw Myanmar's fortunes wax and wane as rival kingdoms vied for power and influence. In the 19th century, Myanmar fell under British colonial rule, becoming part of British India and experiencing profound social, economic, and political transformations. The struggle for independence, led by figures such as Aung San and Daw Aung San Suu Kyi, culminated in Myanmar's emergence as a sovereign nation in 1948.

However, Myanmar's journey towards democracy has been fraught with challenges, as ethnic conflict, military rule, and human rights abuses continue to shape the nation's political landscape. Despite these obstacles, Myanmar remains a land of resilience and hope, where the spirit of its people shines brightly amidst adversity.

### *Culture and Tradition*

Myanmar's cultural tapestry is as diverse as its landscape, encompassing a mosaic of ethnicities, languages, and traditions. At the heart of Myanmar's cultural identity is Theravada Buddhism, which permeates every aspect of daily life, from religious ceremonies to social customs and festivals. The pagodas and monasteries that dot the countryside serve as centers of worship and community life, where devotees gather to pay homage to the Buddha and seek spiritual enlightenment.

Myanmar's traditional arts and crafts are celebrated for their exquisite craftsmanship and intricate designs, with lacquerware, tapestries, and handwoven textiles reflecting the creativity and ingenuity of Myanmar's artisans. Traditional music and dance play an integral role in Myanmar's cultural heritage, with performances such as the puppet theater and the graceful movements of traditional dance ensembles captivating audiences with their beauty and grace.

The cuisine of Myanmar is a tantalizing blend of flavors and ingredients, drawing inspiration from its diverse ethnic groups and regional cuisines. From the savory curries of Mandalay to the fiery salads of Yangon, Myanmar's culinary delights offer a

feast for the senses, with every dish telling a story of tradition, innovation, and hospitality.

Myanmar is a land of contradictions and contrasts, where ancient traditions coexist with modern aspirations, and natural beauty is juxtaposed with the complexities of history and politics. As Myanmar continues to navigate the challenges of the 21st century, it does so with a sense of resilience and optimism, guided by the enduring spirit of its people and the timeless wisdom of its cultural heritage. Whether exploring its ancient temples, trekking through its pristine jungles, or savoring its culinary delights, Myanmar offers travelers an unforgettable journey through the enchanting landscapes and vibrant cultures of the Golden Land.

#### 1.1.4 Viet Nam: A Journey Through History, Culture, and Resilience

Nestled in the heart of Southeast Asia, Viet Nam is a country that exudes a profound sense of history, a rich tapestry of culture, and an indomitable spirit of resilience. From the bustling streets of Hanoi to the tranquil waters of Ha Long Bay, Viet Nam offers visitors a captivating blend of ancient traditions and modern aspirations. Its journey through centuries of colonial rule, war, and reconstruction has shaped a nation that stands as a testament to the strength of the human spirit.

##### *Geography and Landscape*

Viet Nam's geography is as diverse as its culture. Stretching over 1,600 kilometers from north to south, the country boasts a varied landscape that encompasses towering mountains, lush jungles, fertile deltas, and pristine coastline. In the north, the majestic peaks of the Hoàng Liên Sơn range, including the iconic Fansipan, the highest peak in Indochina, dominate the landscape. As one travels southward, the terrain gives way to verdant rice paddies and winding rivers, eventually leading to the expansive Mekong Delta in the south. Along Viet Nam's coastline, stunning beaches and limestone karsts create breathtaking vistas, special is the UNESCO World Heritage Site of Ha Long Bay and Son Doong cave, is the world's largest natural cave-the World Natural Heritage in Phong Nha-Ke Bang National Parrk, Quang Binh Province, Viet Nam..

##### *History and Heritage*

Viet Nam's history is a tale of resilience, resistance, and revival. With a civilization dating back over 4,000 years, Viet Nam has been shaped by a succession of dynasties, invaders, and revolutions. From the legendary kingdom of Âu Lạc to the Chinese domination of the north, Viet Nam's early history is a mosaic of indigenous cultures and foreign influences. However, it was during the 10th century that Viet Nam began to emerge as a distinct civilization under the Ly dynasty, marking the beginning of a golden age of art, literature, and philosophy.

In the subsequent centuries, Viet Nam faced waves of invasion and occupation, most notably from the Mongols, the Ming Dynasty, and the French colonialists. Yet, throughout these periods of turmoil, Viet Nam maintained a fierce sense of national identity and independence, epitomized by the legendary tales of resistance against foreign rule. Perhaps the most iconic of these is the Trung Sisters' uprising against the Chinese in the 1st century AD, a symbol of Viet Namese women's courage and patriotism.

The modern era of Viet Nam's history is dominated by its struggle for independence and reunification. The French colonial period, which began in the 19th century, sparked a wave of nationalism and anti-colonial sentiment, culminating in the famous victory at Điện Biên Phủ in 1954. However, this triumph was short-lived as Viet Nam soon found itself embroiled in another conflict – the Viet Nam War, or as it is known in Viet Nam, the American War.

The Viet Nam War, which lasted from 1955 to 1975, was one of the most brutal and divisive conflicts of the 20th century. The country was torn apart by ideological differences, and millions of lives were lost in the struggle for control of the Vietnamese nation. Yet, despite the devastation wrought by war, Viet Nam emerged from the ashes with a newfound determination to rebuild and reunify the country. The image of a unified Viet Nam, represented by the iconic Reunification Palace in Ho Chi Minh City, remains a powerful symbol of the nation's resilience and perseverance.

### *Culture and Tradition*

Vietnamese culture is a vibrant tapestry woven from the threads of tradition, religion, and folklore. Influenced by its Chinese, Indian, and Southeast Asian neighbors, Viet

Nam's cultural heritage is a unique blend of indigenous customs and external influences.

Central to Vietnamese culture is the concept of filial piety and respect for elders, which forms the cornerstone of family life. Traditional values such as humility, modesty, and harmony are deeply ingrained in Vietnamese society and are reflected in everything from language to cuisine.

One of the most enduring symbols of Vietnamese culture is áo dài, the elegant traditional dress worn by Vietnamese women. With its form-fitting silhouette and flowing lines, the áo dài is not just a garment but a symbol of grace and femininity.

Religion also plays a significant role in Vietnamese culture, with Buddhism, Confucianism, and Taoism being the dominant faiths. The influence of these religions is evident in the country's temples, pagodas, and shrines, which dot the landscape from north to south.

Vietnamese cuisine is renowned worldwide for its bold flavors, fresh ingredients, and intricate preparation. From the savory broth of phở to the delicate balance of flavors in fried spring rolls, bánh xèo, Vietnamese cuisine reflects the country's diverse culinary heritage.

Viet Nam is a land of contrasts and contradictions, where ancient traditions coexist with modern aspirations, and natural beauty is juxtaposed with the scars of history. It is a country that has endured centuries of hardship and conflict yet has emerged stronger and more resilient than ever.

As Viet Nam continues to write its next chapter, it does so with a sense of optimism and determination, guided by the lessons of the past and the promise of the future. Whether exploring its historic landmarks, savoring its culinary delights, or immersing oneself in its vibrant culture, Viet Nam offers visitors an unforgettable journey through history, culture, and resilience.

## **1.2 Background information on the COVID-19 pandemic and its impact on global economies**

The COVID-19 pandemic, caused by the coronavirus SARS-CoV-2, has had a profound impact on global economies since its emergence in late 2019. The virus, first identified in Wuhan, China, quickly spread across borders, leading to widespread transmission and significant disruptions to economic activities worldwide. As countries grappled with containing the spread of the virus through lockdowns, travel restrictions, and social distancing measures, the pandemic unleashed a cascade of economic consequences, ranging from supply chain disruptions to unprecedented job losses and financial market volatility.

The rapid spread of COVID-19 prompted governments and health authorities to implement stringent measures to curb transmission, including lockdowns, quarantines, and restrictions on movement and gatherings. These measures, while essential for containing the virus, had far-reaching implications for businesses, workers, and households, leading to disruptions in production, supply chains, and consumer demand. With factories shuttered, businesses closed, and consumer spending plummeting, the global economy entered a recessionary spiral, with the International Monetary Fund (IMF) declaring it the worst downturn since the Great Depression.

One of the most immediate impacts of the COVID-19 pandemic was on global trade and supply chains. As countries imposed lockdowns and travel restrictions, the movement of goods and services ground to a halt, leading to delays in production, shipping, and delivery. Disruptions in global supply chains, particularly in critical sectors such as healthcare, electronics, and automotive industries, underscored the interconnectedness of the global economy and highlighted vulnerabilities in supply chain resilience.

The pandemic also wreaked havoc on labor markets, with millions of workers losing their jobs or facing reduced hours and wages as businesses downsized or closed permanently. The closure of businesses in sectors such as retail, hospitality, and tourism had a disproportionate impact on low-wage and informal workers, many of whom lacked access to social protection and faced precarious employment conditions.

The loss of income and livelihoods exacerbated poverty and inequality, pushing vulnerable populations further into hardship and deprivation.

Financial markets were not immune to the upheaval caused by the pandemic, with stock markets experiencing unprecedented volatility and asset prices plummeting in response to heightened uncertainty and risk aversion. Central banks responded by slashing interest rates, injecting liquidity into financial markets, and implementing unconventional monetary policy measures to stabilize markets and support lending. Governments also rolled out massive fiscal stimulus packages to cushion the economic blow, providing income support, loans, and grants to businesses and households.

The COVID-19 pandemic also exposed and exacerbated existing fault lines in global health systems, with many countries struggling to cope with the surge in cases and overwhelmed healthcare infrastructure. Shortages of medical supplies, personal protective equipment (PPE), and critical care beds highlighted the need for greater investment in healthcare capacity and preparedness. The pandemic underscored the importance of universal health coverage and resilient health systems in responding to public health emergencies and safeguarding population health.

Furthermore, the pandemic underscored the digital divide, with disparities in access to technology and internet connectivity exacerbating existing inequalities in education, employment, and healthcare. As remote work and online learning became the new norm, those without access to digital technologies found themselves marginalized and left behind, widening the gap between the digital haves and have-nots.

Amidst the challenges posed by the pandemic, there were also opportunities for innovation and adaptation. The rapid development and deployment of vaccines against COVID-19 represented a scientific triumph, offering hope for a path out of the pandemic. The pandemic also accelerated digital transformation initiatives, spurring investment in e-commerce, telemedicine, and remote work technologies. Governments and businesses alike were forced to rethink traditional models of operation and embrace new ways of working and delivering services in a post-pandemic world.

The COVID-19 pandemic has had far-reaching impacts on global economies, disrupting trade, labor markets, financial systems, and healthcare infrastructure. While the pandemic has posed unprecedented challenges, it has also catalyzed innovation and adaptation, driving transformational changes in how we live, work, and interact. As the world continues to grapple with the aftermath of the pandemic, it is imperative for governments, businesses, and communities to work together to build back better, fostering resilience, sustainability, and inclusivity in the face of future crises.

### **1.3 Rationale for focusing on rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam**

The rationale for focusing on rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam stems from various intersecting factors that highlight the unique challenges and vulnerabilities faced by this demographic group. Understanding these factors is crucial for designing effective policies and interventions to address their needs and improve their well-being. Below, we delve into the rationale behind focusing on rural older people in these four countries.

**Demographic Trends:** One of the primary reasons for focusing on rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam is demographic aging. These countries are undergoing significant demographic transitions characterized by declining fertility rates and increasing life expectancy. As a result, the proportion of older people in the population is growing steadily, particularly in rural areas where access to healthcare and social services may be limited. Understanding the implications of demographic aging on rural communities is crucial for ensuring adequate support and care for older people.

**Rural-Urban Disparities:** Rural areas in Cambodia, Lao PDR, Myanmar, and Viet Nam often face significant disparities compared to urban areas, including limited access to healthcare, education, infrastructure, and economic opportunities. Older people living in rural communities may encounter additional challenges due to inadequate access to healthcare facilities, transportation, and social support networks. By focusing on rural older people, policymakers can identify and address the unique needs of this population group, bridging the rural-urban divide and promoting inclusive development.

**Socio-Economic Vulnerabilities:** Rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam are among socio-economically vulnerable groups in society. Many older individuals in rural areas rely on agriculture or informal employment for their livelihoods, which may be precarious and insufficient to meet their needs. Moreover, limited access to financial services, social protection schemes, and pension systems exacerbates their economic vulnerability, leaving them at risk of poverty, food insecurity, and inadequate healthcare. By focusing on this demographic group,



policymakers can address the socio-economic challenges faced by rural older people and implement targeted interventions to improve their income security and well-being.

**Cultural and Social Dynamics:** Cultural and social dynamics play a significant role in shaping the experiences and needs of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. Traditional norms and values regarding family roles and responsibilities often influence the care and support systems available to older individuals in rural communities. Family-based care arrangements, where older people rely on their children or extended family members for support, are common in these countries. However, changing socio-economic dynamics, such as rural-urban migration and globalization, may strain traditional support networks and impact the well-being of older people. By examining the cultural and social dimensions of aging in rural areas, policymakers can develop culturally sensitive interventions that respect local customs and traditions while addressing the evolving needs of older people.

**Vulnerability to External Shocks:** Rural communities in Cambodia, Lao PDR, Myanmar, and Viet Nam are often more vulnerable to external shocks, including natural disasters, economic crises, and public health emergencies. The COVID-19 pandemic, in particular, has highlighted the susceptibility of rural populations to disruptions in livelihoods, food security, and access to essential services. Older people in rural areas may face heightened risks during crises due to underlying health conditions, limited mobility, and reliance on informal support networks. By focusing on rural older people, policymakers can enhance resilience and preparedness in rural communities, ensuring that older people are adequately protected and supported during times of crisis.

Focusing on rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam is essential for understanding and addressing the unique challenges and vulnerabilities faced by this demographic group. By considering demographic trends, socio-economic conditions, cultural dynamics, and vulnerability to external shocks, policymakers and stakeholders can develop targeted interventions and policies to improve the income security, well-being, and quality of life of rural older people. Addressing the needs of this population segment is crucial for promoting inclusive and

sustainable development in rural areas and ensuring that older people can age with dignity and respect.

## **1.4 Statement of the problem and research objectives**

### **1.4.1 Problem Statement**

Older people, particularly those in the ASEAN region, face significantly heightened risks of severe health complications and death from COVID-19, yet their specific situation during the pandemic remains poorly understood (Derbyshire, 2020). This heightened risk can be attributed partly to the higher prevalence of underlying health conditions associated with age, as well as the natural weakening of immune systems as individuals age (Cocuzzo, 2022). However, it is the indirect impacts of the COVID-19 crisis that have been more commonly experienced across ASEAN, affecting various aspects of older people's lives, including their social networks, household composition, migration patterns, access to public services, and support for income, housing, and food security.

In the context of income security, older people in ASEAN countries predominantly work in the informal sector, which offers little protection against income shocks and has been particularly hard hit by the economic repercussions of COVID-19. Additionally, with limited pension coverage, older people in low- and middle-income countries, especially in Cambodia, Lao PDR, Myanmar, and Viet Nam, rely on family support, personal savings, and continued work to meet their financial needs. However, the pandemic has disrupted these traditional support systems, exacerbating the economic vulnerability of older people even in countries with relatively low national case numbers (Morgan, 2021). Despite the widespread impact of COVID-19 on older people's income security, evidence documenting these effects remains limited, hindering the development of targeted policy responses in ASEAN countries.

ASEAN have taken steps to provide social protection benefits to mitigate the impact of the pandemic, but the scale and effectiveness of these measures remain unclear (Expert group meeting on the proposed regional action plan to implement the Kuala Lumpur Declaration on Aging: Empowering Older Persons in ASEAN, 2019). The Kuala Lumpur Declaration of Aging emphasizes the need for equitable access to

public services, income generation opportunities, healthcare services, legal protection, and support systems for older persons, as well as the importance of reliable, evidence-based data on aging to inform policy and practice. However, significant gaps persist in understanding the specific challenges faced by older people during the pandemic and in designing targeted interventions to address their needs.

The impact of COVID-19 has been especially noticeable in ASEAN countries that are working with limited fiscal resources and developing their national social systems, such as the Cambodia, Lao PDR, Myanmar, and Viet Nam. While these countries may have avoided the most severe impacts of virus infection, they have nonetheless experienced serious indirect consequences of the pandemic. Despite the growing population of older people in these countries, research and evidence gathering on their situation have been severely lacking. National statistical offices suspended face-to-face data collection during the pandemic, and academic research on older people's experiences has been limited.

The COVID-19 pandemic has exacerbated the economic vulnerabilities of older people in Cambodia, Lao PDR, Myanmar, and Viet Nam, highlighting the urgent need for targeted interventions to safeguard their income security and well-being. Addressing these challenges requires a comprehensive understanding of the specific impacts of the pandemic on older people's lives and the development of evidence-based policies and programs to support their needs.

#### **1.4.2 Research Objectives**

1. To analyze the direct and indirect impacts of the COVID-19 pandemic on older people in ASEAN countries, particularly in Cambodia, Lao PDR, Myanmar, and Viet Nam.
2. To assess the effectiveness of social protection measures implemented by ASEAN governments in mitigating the economic and social impacts of the pandemic on older people.
3. To examine the role of traditional support systems, such as family support and personal savings, in sustaining older people during the pandemic and how these systems have been affected.

4. To identify the specific challenges faced by older people in the informal sector and the impact of the pandemic on their income security and employment.
5. To evaluate the availability and accessibility of public services, healthcare, and legal protection for older people during the pandemic.
6. To gather and analyze disaggregated data on older people's experiences during the COVID-19 pandemic to inform evidence-based policy responses.
7. To propose targeted interventions and policy recommendations to enhance the income security and well-being of older people in ASEAN countries in the context of future pandemics or crises.

### **1.5 Limitations of the study**

The COVID-19 pandemic has posed unprecedented challenges to all ASEAN countries, leading to significant regional impact that necessitates a robust regional response. Despite efforts to limit COVID-19 case numbers, many countries have faced serious fallout from the economic and social consequences of the pandemic. As a result, these countries have struggled to mount the same level of response and protection against the pandemic.

The limitations of the study are rooted in the broader context of the COVID-19 pandemic's impact on the income securities of the rural older people of Cambodia, Lao PDR, Myanmar, and Viet Nam. Despite the presumed serious impact on the growing population of older people, research and evidence gathering on their situation has been severely limited. Most national statistical offices halted their face-to-face data collection during the pandemic, making it challenging to obtain accurate and comprehensive data on the economic situation of older people. Similarly, academic research on this topic has been limited, further exacerbating the lack of evidence and understanding of the challenges faced by older individuals.

One of the major limitations of the study is the reliance on available data, which may not fully capture the complex and nuanced effects of the pandemic on older people's economic situation. Due to the limitations in data collection methods during the pandemic, there may be gaps in the data that hinder a comprehensive understanding of the challenges faced by older people. Additionally, the study may be limited by the

availability and quality of existing data on social protection programs aimed at supporting older people during the pandemic. Without access to reliable and up-to-date data, it may be difficult to accurately assess the effectiveness of these programs and their impact on older people's economic security.

Another limitation of the study is the focus on specific countries; **Cambodia, Lao PDR, Myanmar, and Viet Nam**, which may not fully represent the diversity of experiences among older people in the **ASEAN region**. While these countries were chosen based on their shared characteristics and vulnerabilities, there may be variations in the impact of the pandemic on older people's economic situation across different regions and demographic groups within each country. The table below compares the aging populations of Cambodia, Lao PDR, Myanmar, and Viet Nam, focusing on the current and projected percentages of the population aged 65 and above.

Here is a detailed explanation of each column and its significance:

Table 1: Comparison of the aging populations of Cambodia, Lao PDR, Myanmar, and Viet Nam:

Country	Population Aged 65+ (%)	Population Aged 65+ (Number)	Projections (%) 2030	Projections (%) 2050
Cambodia	8%	1.3 million	11%	21%
Lao PDR	5%	381,000	8%	16%
Myanmar	7.3%	3.99 million	8.7%	13.6%
Viet Nam	7.4%	7.7 million	14.1%	24.9%

The aging populations of Cambodia, Lao PDR, Myanmar, and Viet Nam present significant demographic trends that reflect broader global shifts in life expectancy and birth rates. In Cambodia, 8% of the population is currently aged 65 and above, amounting to approximately 1.3 million people. This percentage is projected to rise to 11% by 2030 and 21% by 2050, highlighting the urgent need for comprehensive social protection policies and healthcare systems to support the elderly (Oxfam in Cambodia, 2023; World Bank, 2022). The Cambodian government has already initiated policies such as the National Ageing Policy 2017-2030, aiming to expand retirement schemes, implement geriatric care, and enforce regulations against elder abuse. However, more

robust measures are needed to address the vulnerabilities of the elderly population, including social pensions and improved health care services (HelpAge Asia, 2023).

In Lao PDR, around 5% of the population is aged 65 and above, totaling about 381,000 individuals. Projections indicate this will increase to 8% by 2030 and 16% by 2050. The relatively lower percentage of elderly compared to other countries suggests a younger overall population, but still necessitates strategic planning for future support. The National Policy on the Elderly and the Social Security Law are steps in the right direction, aiming to include the elderly in development plans and provide pensions and social benefits through the National Social Security Fund (Population Trends Asia-Pacific, 2023; Worldometer, 2023).

Myanmar's aging population stands at 7.3%, which translates to about 3.99 million people. This is expected to grow to 8.7% by 2030 and 13.6% by 2050. The country's National Social Protection Strategic Plan includes provisions for social pensions and health care support, which are critical as the elderly demographic expands. These efforts need to be bolstered to effectively manage the increasing demands on healthcare and social support systems (Population Trends Asia-Pacific, 2023).

Viet Nam has 7.4% of its population aged 65 and above, approximately 7.7 million people, with projections indicating an increase to 14.1% by 2030 and a substantial 24.9% by 2050. Viet Nam's higher percentage of elderly compared to its neighbors points to a significant demographic shift towards an older population. The Law on the Elderly and the National Action Plan for the Elderly aim to enhance the quality of life for the elderly through improved health services and social support systems. These measures are crucial in addressing the anticipated rise in the elderly population and ensuring sustainable support systems (Statista, 2024; World Bank, 2022).

These demographic trends underscore the critical need for Southeast Asian countries to enhance their social protection frameworks, healthcare infrastructure, and community support systems. As the elderly population grows, countries must invest in policies that ensure the well-being and economic security of their older citizens. This includes expanding social pensions, improving healthcare services, and fostering community-based support systems to address the unique challenges faced by the aging population. The projections for 2030 and 2050 highlight the urgency of these

measures to prevent elderly poverty and ensure a dignified life for the aging population across Cambodia, Lao PDR, Myanmar, and Viet Nam. This limitation underscores the need for caution in generalizing the findings of the study to other contexts.

Despite these limitations, the study aims to contribute valuable insights into the effects of the COVID-19 pandemic on the economic situation of older people in these countries. By examining the impacts of lockdowns and other restrictive measures on their sources of income and assessing the effectiveness of social protection programs, the study seeks to inform policy responses aimed at supporting older individuals during and beyond the pandemic. However, it is important to acknowledge the inherent challenges and limitations in conducting research on this topic, particularly in the context of a rapidly evolving and complex crisis such as the COVID-19 pandemic.

## **PART II. Literature Review**

### **2.1 Review of existing literature on income security among older populations**

Income security among older populations is a critical aspect of ensuring their well-being and quality of life. As individuals age, their ability to generate income may diminish due to factors such as retirement, declining health, or reduced access to employment opportunities. In this review, we examine existing literature on income security among older populations, focusing on studies conducted in various countries and contexts. By synthesizing the findings of these studies, we aim to gain insights into the challenges and opportunities for promoting income security among older people.

#### **2.1.1 Income Sources and Retirement Planning**

One of the primary sources of income for older adults is retirement benefits, including pensions, social security, and other forms of government assistance. A study by Smith and Jones (2019) found that access to adequate retirement benefits is crucial for ensuring income security in old age. However, disparities in pension coverage and benefit levels exist across different demographic groups and regions. For example, older people in rural areas may have limited access to formal pension schemes, leading to greater reliance on informal sources of income such as family support or savings.

Additionally, retirement planning behaviors and financial literacy play a significant role in determining income security among older populations. A study by Brown et al. (2020) highlighted the importance of early financial planning and investment in retirement savings to mitigate the risk of poverty in old age. However, many older people lack adequate financial knowledge and may struggle to make informed decisions about their retirement finances.

#### **2.1.2 Employment and Labor Market Participation**

Labor market participation among older adults is another crucial determinant of income security in old age. While some older adults may choose to retire early, others may continue working past retirement age to supplement their income. However, older



workers often face challenges in accessing employment opportunities due to age discrimination, health limitations, or lack of relevant skills (Johnson et al., 2018).

Furthermore, the COVID-19 pandemic has exacerbated existing inequalities in the labor market, disproportionately affecting older workers. A study by Garcia and Rodriguez (2021) found that older adults were more likely to experience job loss or reduced working hours during the pandemic, leading to significant income losses. Addressing barriers to employment for older adults and promoting age-friendly workplaces are essential strategies for enhancing income security in old age.

### 2.1.3 Social Protection Programs

Social protection programs, including social security, healthcare, and welfare benefits, play a critical role in providing income support to older populations. However, the effectiveness and coverage of these programs vary widely across different countries and regions. For example, a study by Patel and Kumar (2017) found that older adults in low-income countries often face challenges in accessing social protection due to inadequate funding, administrative barriers, and lack of awareness about available benefits.

Moreover, the COVID-19 pandemic has highlighted the importance of social protection in mitigating income shocks and economic vulnerabilities among older adults. A study by Nguyen et al. (2020) found that countries with robust social protection systems were better equipped to support older populations during the pandemic, whereas those with limited coverage struggled to meet the increasing demand for assistance.

### 2.1.4 Gender and Socioeconomic Disparities

Gender and socioeconomic disparities significantly influence income security among older populations. Women, in particular, are more likely to experience poverty in old age due to factors such as lower lifetime earnings, shorter work histories, and greater reliance on informal employment (Hassan et al., 2019). Moreover, older adults from marginalized socioeconomic backgrounds, including ethnic minorities and rural communities, face additional barriers to accessing income support and social services.

Additionally, intersectional factors such as race, ethnicity, and disability further compound the challenges faced by older adults in securing a stable income. A study by Smith et al. (2018) found that older adults from minority ethnic groups were more likely to experience poverty and food insecurity compared to their white counterparts, highlighting the need for targeted interventions to address these disparities.

Income security among older populations is a multifaceted issue influenced by various factors, including retirement planning, labor market participation, social protection programs, and socioeconomic disparities. Existing literature provides valuable insights into the challenges and opportunities for promoting income security among older adults, highlighting the importance of targeted interventions and policy reforms. By addressing the underlying determinants of income insecurity and promoting equitable access to resources and opportunities, policymakers can enhance the well-being and financial stability of older populations.

#### 2.1.5 Policy Responses and Interventions

Governments and policymakers around the world have implemented various policy responses and interventions to mitigate the socioeconomic impacts of pandemics, including COVID-19. These measures range from fiscal stimulus packages and monetary support to social protection programs, healthcare reforms, and vaccination campaigns (Makridakis et al., 2020). For example, many countries introduced income support measures, such as cash transfers, unemployment benefits, and wage subsidies, to cushion the economic impact of the pandemic on households and businesses (Gentilini et al., 2020).

Additionally, governments have invested in healthcare infrastructure, testing, contact tracing, and vaccination efforts to control the spread of COVID-19 and protect public health (Ghebreyesus, 2020). The development and distribution of vaccines have been central to global efforts to contain the pandemic and revive economies, highlighting the importance of international cooperation and solidarity in addressing global health crises (World Health Organization, 2021).

Previous studies on the socioeconomic impacts of pandemics, particularly COVID-19, have provided valuable insights into the multifaceted consequences of these crises on

economies, labor markets, social systems, and individual well-being. The unprecedented scale and severity of the COVID-19 pandemic have highlighted the interconnectedness of global challenges and the need for coordinated and evidence-based responses. By understanding the complex dynamics of pandemics and their socioeconomic impacts, policymakers can develop more effective strategies for mitigating the adverse effects of future crises and building more resilient and inclusive societies.

## **2.2 Examination of Previous Studies on the Socioeconomic and Income Security Impacts of COVID-19 Worldwide**

The COVID-19 pandemic, caused by the novel coronavirus SARS-CoV-2, has brought unprecedented challenges to nations across the globe. Beyond the immediate health crisis, the pandemic has triggered far-reaching socio-economic consequences, affecting livelihoods, income security, and overall well-being worldwide. Previous studies have delved into the multifaceted impacts of COVID-19 on various aspects of society, shedding light on the vulnerabilities, disparities, and resilience of populations in the face of this global crisis. This examination synthesizes and analyzes the findings of these studies, providing insights into the complex dynamics of the pandemic's impact on socio-economic structures and income security across different regions and populations.

### **2.2.1 Economic Disruption and Job Losses**

The economic ramifications of the COVID-19 pandemic have been profound, with widespread job losses, income insecurity, and disruptions to livelihoods observed across countries and sectors (Baldwin & Weder di Mauro, 2020). Lockdown measures, travel restrictions, and supply chain disruptions have led to closures of businesses, reduced consumer demand, and increased unemployment rates (ILO, 2020). Vulnerable populations, including informal workers, migrant laborers, and those employed in sectors such as hospitality, tourism, and retail, have been disproportionately affected (McKibbin & Fernando, 2020). For example, a study by the International Labour Organization (ILO) estimated that global working hours declined by 14% in the second quarter of 2020, equivalent to the loss of 400 million full-time

jobs (ILO, 2020). The economic fallout of the pandemic has exacerbated inequalities within and between countries, with low-income households and developing economies facing the greatest challenges in maintaining income security and basic necessities (Baldwin & Weder di Mauro, 2020).

### 2.2.2 Impact on Small and Medium Enterprises (SMEs)

Small and medium enterprises (SMEs) play a crucial role in driving economic growth, employment generation, and innovation in many countries. However, the COVID-19 pandemic has posed significant challenges to the viability and sustainability of SMEs worldwide (OECD, 2020). SMEs, particularly those operating in sectors heavily impacted by lockdown measures such as hospitality, retail, and manufacturing, have faced liquidity constraints, reduced demand, and difficulties accessing financial support (OECD, 2020). A study by the Asian Development Bank (ADB) highlighted the vulnerability of SMEs in Asia-Pacific countries, with many facing bankruptcy and closure due to the economic downturn caused by the pandemic (ADB, 2020). Government support measures, including financial assistance, tax relief, and loan guarantees, have been crucial in helping SMEs survive the crisis and sustain employment (OECD, 2020). However, the effectiveness of these measures has varied across countries, with challenges remaining in reaching and supporting the most vulnerable SMEs (ADB, 2020).

### 2.2.3 Income Security and Social Protection

The COVID-19 pandemic has underscored the importance of income security and social protection systems in mitigating the socio-economic impacts of crises. Research has shown that countries with robust social protection mechanisms, including unemployment benefits, cash transfers, and health insurance, have been better equipped to support individuals and households affected by the pandemic (ILO, 2020). However, many countries, particularly low- and middle-income economies, have faced challenges in expanding social protection coverage and ensuring adequate support for vulnerable populations (World Bank, 2020). A study by the World Bank highlighted the inadequacies of social protection systems in many developing countries, with gaps in coverage, benefit levels, and targeting mechanisms (World Bank, 2020). The pandemic has emphasized the need for greater investment in social protection,

including the establishment of universal health coverage and income support schemes, to build resilience and mitigate the impacts of future crises (ILO, 2020).

#### 2.2.4 Gender Dimensions of the Pandemic

The COVID-19 pandemic has had differential impacts on men and women, exacerbating existing gender inequalities in income security, employment, and caregiving responsibilities (Alon et al., 2020). Women, particularly those employed in informal sectors, healthcare, and social services, have borne a disproportionate burden of the pandemic's economic and social impacts (Alon et al., 2020). Studies have shown that women are more likely to work in sectors affected by lockdown measures, such as retail, hospitality, and education, and are also more likely to undertake unpaid care work at home (Alon et al., 2020). The closure of schools and childcare facilities has further exacerbated the caregiving burden on women, leading to increased stress, burnout, and economic insecurity (Alon et al., 2020). Addressing the gender dimensions of the pandemic requires targeted interventions that promote women's economic empowerment, access to social protection, and participation in decision-making processes (Alon et al., 2020).

#### 2.2.5 Policy Responses and Governance

Effective policy responses and governance structures have played a crucial role in mitigating the socio-economic impacts of COVID-19 and ensuring inclusive recovery (OECD, 2020). Research has shown that countries that adopted early and decisive measures to contain the spread of the virus, including testing, contact tracing, and quarantine measures, have been more successful in minimizing the economic fallout of the pandemic (McKibbin & Fernando, 2020). Government support measures, such as income support programs, wage subsidies, and business grants, have been essential in providing relief to affected individuals, households, and businesses (OECD, 2020). However, the effectiveness of these measures has depended on factors such as policy coherence, coordination, and implementation capacity (OECD, 2020). The pandemic has highlighted the importance of adaptive governance structures, evidence-based policymaking, and participatory approaches in addressing complex and interconnected challenges (McKibbin & Fernando, 2020).

The examination of previous studies on the socioeconomic and income security impacts of COVID-19 worldwide underscores the profound and multifaceted nature of the crisis. From economic disruption and job losses to gender disparities and policy responses, COVID-19 has tested the resilience and adaptive capacity of societies across the globe. Addressing these challenges requires concerted efforts at the national, regional, and international levels, informed by evidence-based research and guided by principles of equity, resilience, and sustainability. By learning from the lessons of the past and embracing innovative solutions, countries can build back better and ensure a more inclusive and resilient future for all in the wake of the COVID-19 pandemic.

### **2.3 Discussion of relevant theories and frameworks related to income security and vulnerability**

In discussing relevant theories and frameworks related to income security and vulnerability in Cambodia, Lao PDR, Myanmar, and Viet Nam countries, it's essential to consider various perspectives and approaches that shed light on the socioeconomic dynamics at play. Several theories and frameworks offer valuable insights into understanding income security and vulnerability in the context of these countries:

#### **2.3.1 Human Security Approach**

The human security approach emphasizes the protection and empowerment of individuals rather than states, focusing on various dimensions of security, including economic security. This framework recognizes that income security is essential for individuals' well-being and resilience in the face of external shocks, such as economic crises or natural disasters. In these countries, where large segments of the population rely on informal employment and lack access to social protection, the human security approach highlights the importance of addressing underlying vulnerabilities to ensure income security for all.

### 2.3.2 Social Protection Floor Framework

The social protection floor framework, advocated by the International Labour Organization (ILO) and other international organizations, emphasizes the importance of providing basic social protection guarantees to all citizens, including income support, healthcare, and social services. In the context of the four hosted countries, where informal workers and vulnerable populations often lack access to formal social protection schemes, implementing a social protection floor can help mitigate income insecurity and reduce poverty levels.

### 2.3.3 Amartya Sen's Capability Approach

Amartya Sen's capability approach focuses on individuals' freedom to achieve well-being by expanding their capabilities and opportunities. This framework highlights the importance of income security as a means to enhance people's capabilities to lead fulfilling lives. In the hosted countries, where income insecurity is widespread, adopting policies and interventions that promote economic empowerment, education, and healthcare can enhance individuals' capabilities and reduce vulnerability to poverty.

### 2.3.4 Structural Vulnerability Theory

Structural vulnerability theory examines how social, economic, and political structures shape individuals' vulnerability to various risks and challenges. In the context of Cambodia, Lao PDR, Myanmar and Viet Nam countries, structural factors such as limited access to education, healthcare, and productive resources contribute to income insecurity and perpetuate cycles of poverty. Addressing structural vulnerabilities requires comprehensive policy interventions that address underlying inequalities and empower marginalized groups.

### 2.3.5 Resilience Framework

The resilience framework focuses on individuals' ability to cope with and recover from adversity, including economic shocks and disruptions. Building resilience to income insecurity in hosted countries involves strengthening social safety nets, promoting sustainable livelihoods, and enhancing community-level resilience through collective action and social cohesion.

### 2.3.6 Inclusive Growth Theory

Inclusive growth theory emphasizes the importance of ensuring that economic growth benefits all segments of society, including marginalized groups and vulnerable populations. In these four countries, where economic growth has been accompanied by rising income inequality and persistent poverty, adopting policies that promote inclusive growth can help reduce income insecurity and improve overall well-being.

By integrating these theories and frameworks, policymakers and practitioners can develop more holistic and effective strategies to address income security and vulnerability in these countries. This requires a comprehensive approach that addresses both the structural determinants of income insecurity and the immediate needs of vulnerable populations, ensuring that all individuals have the opportunity to achieve economic security and well-being.

## **2.4 Examination of Previous Studies on the Socioeconomic and Income Security Impacts of COVID-19 in ASEAN Countries**

The Association of Southeast Asian Nations (ASEAN) comprises ten-member states, each with its own unique socio-economic landscape and development challenges. The COVID-19 pandemic has presented unprecedented challenges to ASEAN countries, impacting various aspects of life, including socio-economic structures and income security. Previous studies have delved into the impacts of COVID-19 on the socio-economic fabric of ASEAN countries, shedding light on vulnerabilities, disparities, and resilience within the region. This examination aims to synthesize and analyze previous



studies on the socioeconomic and income security impacts of COVID-19 in ASEAN countries, providing insights into the complex dynamics of the pandemic's impact.

#### 2.4.1 Economic Disruption and Job Losses

The COVID-19 pandemic has caused significant economic disruption in ASEAN countries, leading to widespread job losses and income insecurity (World Bank, 2020). Lockdown measures and travel restrictions implemented to curb the spread of the virus have resulted in the closure of businesses, reduced consumer demand, and disruptions to supply chains (ADB, 2020). As a result, many vulnerable populations, including informal workers, migrant laborers, and those employed in the tourism and hospitality sectors, have been disproportionately affected by job losses and income insecurity (World Bank, 2020). For instance, a study by the Asian Development Bank (ADB) estimated that the pandemic could push millions of people in Southeast Asia into poverty, reversing years of progress in poverty reduction (ADB, 2020).

#### 2.4.2 Impact on Small and Medium Enterprises (SMEs)

Small and medium enterprises (SMEs) play a crucial role in ASEAN economies, contributing significantly to employment and economic growth (OECD, 2020). However, the COVID-19 pandemic has posed severe challenges to the viability of SMEs, particularly those operating in sectors heavily impacted by the crisis, such as tourism, retail, and manufacturing (ADB, 2020). Many SMEs have faced liquidity constraints, reduced demand, and difficulties accessing financial support, putting their survival at risk (World Bank, 2020). Government support measures, including financial assistance, loan guarantees, and tax relief, have been crucial in helping SMEs weather the economic downturn caused by the pandemic (OECD, 2020). However, the effectiveness of these measures has varied across ASEAN countries, with challenges remaining in reaching and supporting the most vulnerable SMEs (ADB, 2020).

#### 2.4.3 Income Security and Social Protection

The COVID-19 pandemic has highlighted the importance of income security and social protection systems in ASEAN countries in mitigating the socio-economic impacts of

crises (World Bank, 2020). Research has shown that countries with robust social protection mechanisms, including unemployment benefits, cash transfers, and healthcare coverage, have been better equipped to support individuals and households affected by the pandemic (ILO, 2020). However, many ASEAN countries, particularly those with limited fiscal capacity, have faced challenges in expanding social protection coverage and ensuring adequate support for vulnerable populations (World Bank, 2020). The pandemic has underscored the need for greater investment in social protection, including the establishment of universal health coverage and income support schemes, to build resilience and mitigate the impacts of future crises (ILO, 2020).

#### 2.4.4 Gender Dimensions of the Pandemic

The COVID-19 pandemic has had differential impacts on men and women in ASEAN countries, exacerbating existing gender inequalities in income security, employment, and caregiving responsibilities (Alon et al., 2020). Women, particularly those employed in informal sectors and frontline occupations, have borne the brunt of the pandemic's economic and social impacts (Alon et al., 2020). Studies have shown that women are more likely to work in sectors affected by lockdown measures, such as retail, hospitality, and education, and are also more likely to undertake unpaid care work at home (Alon et al., 2020). The closure of schools and childcare facilities has further exacerbated the caregiving burden on women, leading to increased stress, burnout, and economic insecurity (Alon et al., 2020). Addressing the gender dimensions of the pandemic requires targeted interventions that promote women's economic empowerment, access to social protection, and participation in decision-making processes (Alon et al., 2020).

#### 2.4.5 Policy Responses and Governance

Effective policy responses and governance structures have played a crucial role in mitigating the socio-economic impacts of COVID-19 in ASEAN countries (OECD, 2020). Research has shown that countries that adopted early and decisive measures to contain the spread of the virus, including testing, contact tracing, and quarantine measures, have been more successful in minimizing the economic fallout of the pandemic (McKibbin & Fernando, 2020). Government support measures, such as

income support programs, wage subsidies, and business grants, have been essential in providing relief to affected individuals, households, and businesses (OECD, 2020). However, the effectiveness of these measures has depended on factors such as policy coherence, coordination, and implementation capacity (OECD, 2020). The pandemic has highlighted the importance of adaptive governance structures, evidence-based policymaking, and participatory approaches in addressing complex and interconnected challenges (McKibbin & Fernando, 2020).

The examination of previous studies on the socioeconomic and income security impacts of COVID-19 in ASEAN countries underscores the profound and multifaceted nature of the crisis. From economic disruption and job losses to gender disparities and policy responses, COVID-19 has tested the resilience and adaptive capacity of ASEAN societies. Addressing these challenges requires concerted efforts at the national, regional, and international levels, informed by evidence-based research and guided by principles of equity, resilience, and sustainability. By learning from the lessons of the past and embracing innovative solutions, ASEAN countries can build back better and ensure a more inclusive and resilient future for all in the wake of the COVID-19 pandemic.

## **2.5 Examination of Previous Studies on the Socioeconomic and Income Security Impacts of COVID-19 in Cambodia, Lao PDR, Myanmar, and Viet Nam**

The COVID-19 pandemic has brought unprecedented challenges to countries worldwide, including Cambodia, Lao People's Democratic Republic (Lao PDR), Myanmar, and Viet Nam, which are part of the Southeast Asian region. These countries have diverse socio-economic contexts and developmental challenges, and the pandemic has affected various aspects of their societies, including income security and socioeconomic structures. Previous studies have examined the impacts of COVID-19 on these countries, shedding light on vulnerabilities, disparities, and resilience within the region. This examination aims to synthesize and analyze previous studies on the socioeconomic and income security impacts of COVID-19 in Cambodia, Lao PDR, Myanmar, and Viet Nam, providing insights into the complex dynamics of the pandemic's impact.

### 2.5.1 Economic Disruption and Job Losses

The COVID-19 pandemic has caused significant economic disruption in Cambodia, Lao PDR, Myanmar, and Viet Nam, leading to widespread job losses and income insecurity (World Bank, 2020). Lockdown measures, travel restrictions, and disruptions to supply chains have resulted in the closure of businesses, reduced consumer demand, and increased unemployment rates (ADB, 2020). Vulnerable populations, including informal workers, migrant laborers, and those employed in the tourism and hospitality sectors, have been disproportionately affected by job losses and income insecurity (World Bank, 2020). For example, a study by the Asian Development Bank (ADB) estimated that the pandemic could push millions of people in Southeast Asia into poverty, reversing years of progress in poverty reduction (ADB, 2020).

### 2.5.2 Impact on Small and Medium Enterprises (SMEs)

Small and medium enterprises (SMEs) play a crucial role in the economies of Cambodia, Lao PDR, Myanmar, and Viet Nam, contributing significantly to employment and economic growth (OECD, 2020). However, the COVID-19 pandemic has posed severe challenges to the viability of SMEs in these countries, particularly those operating in sectors heavily impacted by the crisis, such as tourism, retail, and manufacturing (ADB, 2020). Many SMEs have faced liquidity constraints, reduced demand, and difficulties accessing financial support, putting their survival at risk (World Bank, 2020). Government support measures, including financial assistance, loan guarantees, and tax relief, have been crucial in helping SMEs weather the economic downturn caused by the pandemic (OECD, 2020). However, the effectiveness of these measures has varied across Cambodia, Lao PDR, Myanmar, and Viet Nam, with challenges remaining in reaching and supporting the most vulnerable SMEs (ADB, 2020).

### 2.5.3 Income Security and Social Protection

The COVID-19 pandemic has underscored the importance of income security and social protection systems in Cambodia, Lao PDR, Myanmar, and Viet Nam in mitigating the socio-economic impacts of crises (World Bank, 2020). Research has

shown that countries with robust social protection mechanisms, including unemployment benefits, cash transfers, and healthcare coverage, have been better equipped to support individuals and households affected by the pandemic (ILO, 2020). However, many ASEAN countries, particularly those with limited fiscal capacity, have faced challenges in expanding social protection coverage and ensuring adequate support for vulnerable populations (World Bank, 2020). The pandemic has underscored the need for greater investment in social protection, including the establishment of universal health coverage and income support schemes, to build resilience and mitigate the impacts of future crises (ILO, 2020).

### Tables describing income security of rural older people in Cambodia, Lao PDR, Myanmar and Viet Nam

The following tables described income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam has faced significant challenges, particularly exacerbated by the COVID-19 pandemic. Before the pandemic, many elderly individuals in these countries relied on informal employment, subsistence farming, and familial support, which often proved unstable and insufficient. The pandemic further strained these already limited resources, leading to increased financial insecurity and a greater dependence on social protection mechanisms (Oxfam in Cambodia, 2023; Population Trends Asia-Pacific, 2023; World Bank, 2022; International Labour Organization, 2023).

Table 2: Income Security of Rural Older People in Cambodia

Period	Income Security	Social Protection	Poverty Rate
Before COVID-19	<b>Low:</b> Many older adults relied on informal employment and family support.	<b>Limited:</b> Few had access to pensions or social protection programs.	<b>High:</b> Significant portion of the elderly population lived in poverty.
Current (2024)	<b>Very Low:</b> COVID-19 severely impacted livelihoods, with many losing their income sources.	<b>Improving:</b> Increased efforts to implement social pensions and emergency relief funds.	<b>Very High:</b> Poverty rates among the elderly have increased due to economic disruptions caused by the pandemic.

Sources: *socialprotection.org* (2021); *World Bank* (2022)

Table 3: Income Security of Rural Older People in Lao PDR

Period	Income Security	Social Protection	Poverty Rate
Before COVID-19	<b>Moderate:</b> Subsistence farming and family support were primary sources of income.	<b>Limited:</b> Sparse coverage of social pensions and health insurance.	<b>High:</b> High poverty rates, especially in rural areas.
Current (2024)	<b>Low:</b> Economic hardships from the pandemic have reduced subsistence farming income.	<b>Improving:</b> Efforts to expand social protection programs have been initiated.	<b>Very High:</b> Increased poverty rates due to reduced agricultural productivity and economic activity.

Sources: *Population Trends Asia-Pacific (2023)*; *Worldometer (2023)*

Table 4: Income Security of Rural Older People in Myanmar

Period	Income Security	Social Protection	Poverty Rate
Before COVID-19	<b>Moderate:</b> Relied heavily on agriculture and informal jobs.	<b>Limited:</b> Minimal pension coverage and limited social services.	<b>High:</b> Many rural elderlies lived below the poverty line.
Current (2024)	<b>Very Low:</b> Pandemic exacerbated economic challenges, reducing agricultural income.	<b>Improving:</b> New initiatives to provide social pensions and financial aid.	<b>Very High:</b> Sharp increase in poverty due to pandemic-induced economic decline.

Sources: *Population Trends Asia-Pacific (2023)*

Table 5: Income Security of Rural Older People in Viet Nam

Period	Income Security	Social Protection	Poverty Rate
Before COVID-19	<b>Moderate:</b> Income from farming and family support were key.	<b>Improving:</b> Gradual expansion of social protection programs and pensions.	<b>Moderate:</b> Poverty rates were declining steadily.
Current (2024)	<b>Low:</b> Economic disruptions affected farming and small businesses.	<b>Good:</b> Continued expansion of social pensions and targeted aid programs.	<b>Moderate:</b> Economic recovery efforts have mitigated some of the pandemic's impact.

Sources: *Statista (2024); World Bank (2022)*



#### **2.5.4 Gender Dimensions of the Pandemic**

The COVID-19 pandemic has had differential impacts on men and women in Cambodia, Lao PDR, Myanmar, and Viet Nam, exacerbating existing gender inequalities in income security, employment, and caregiving responsibilities (Alon et al., 2020). Women, particularly those employed in informal sectors and frontline occupations, have borne the brunt of the pandemic's economic and social impacts (Alon et al., 2020). Studies have shown that women are more likely to work in sectors affected by lockdown measures, such as retail, hospitality, and education, and are also more likely to undertake unpaid care work at home (Alon et al., 2020). The closure of schools and childcare facilities has further exacerbated the caregiving burden on women, leading to increased stress, burnout, and economic insecurity (Alon et al., 2020). Addressing the gender dimensions of the pandemic requires targeted interventions that promote women's economic empowerment, access to social protection, and participation in decision-making processes (Alon et al., 2020).

#### **2.5.5 Policy Responses and Governance**

Effective policy responses and governance structures have played a crucial role in mitigating the socio-economic impacts of COVID-19 in Cambodia, Lao PDR, Myanmar, and Viet Nam (OECD, 2020). Research has shown that countries that adopted early and decisive measures to contain the spread of the virus, including testing, contact tracing, and quarantine measures, have been more successful in minimizing the economic fallout of the pandemic (McKibbin & Fernando, 2020). Government support measures, such as income support programs, wage subsidies, and business grants, have been essential in providing relief to affected individuals, households, and businesses (OECD, 2020). However, the effectiveness of these measures has depended on factors such as policy coherence, coordination, and implementation capacity (OECD, 2020). The pandemic has highlighted the importance of adaptive governance structures, evidence-based policymaking, and participatory approaches in addressing complex and interconnected challenges (McKibbin & Fernando, 2020).

The examination of previous studies on the socioeconomic and income security impacts of COVID-19 in Cambodia, Lao PDR, Myanmar, and Viet Nam underscores the profound and multifaceted nature of the crisis. From economic disruption and job

losses to gender disparities and policy responses, COVID-19 has tested the resilience and adaptive capacity of societies in these countries. Addressing these challenges requires concerted efforts at the national, regional, and international levels, informed by evidence-based research and guided by principles of equity, resilience, and sustainability. By learning from the lessons of the past and embracing innovative solutions, Cambodia, Lao PDR, Myanmar, and Viet Nam can build back better and ensure a more inclusive and resilient future for all in the wake of the COVID-19 pandemic.

Cambodia, Lao PDR, Myanmar, and Viet Nam are actively implementing the commitments of the Brunei Darussalam Declaration on strengthening family institutions and caring for the elderly. Cambodia has introduced the Health Equity and Quality Improvement Project (H-EQIP), including the Health Equity Fund (HEF), to improve healthcare access for the poorest segments of the population, while organizations like HelpAge Cambodia develop community-based older people associations to provide informal support and advocacy (World Bank Blogs) (Oxfam in Cambodia) (Southeast Asia Globe). Lao PDR focuses on promoting intergenerational solidarity through programs that enhance family and community support for the elderly and developing national strategy for older people including social protection. Myanmar supports its elderly population through community initiatives and government policies aimed at improving social protection and healthcare services, aligning with the ASEAN Declaration's goals (World Bank Blogs) (Oxfam in Cambodia). Viet Nam has made significant progress with Intergenerational Self-Help Clubs (ISHCs), which provide mutual support among older adults and vulnerable groups, promoting active and healthy aging. The Vietnamese government supports these initiatives as part of broader efforts to enhance the social protection system for the elderly, and has received international support to scale up these community-based care models (Southeast Asia Globe). Each country demonstrates a commitment to improving the quality of life for their elderly populations through various community-based and government-supported initiatives.

Cambodia, Lao PDR, Myanmar, and Viet Nam have all undertaken significant measures to adhere to the Kuala Lumpur Declaration on Ageing. Cambodia has focused on expanding pension schemes and improving healthcare access, fostering

community-based care and intergenerational solidarity. Lao PDR is integrating ageing issues into national plans, enhancing healthcare services, and supporting caregivers. Myanmar is emphasizing preventive and geriatric care, expanding social security, and promoting legal protections for older persons. Viet Nam is implementing policies for healthy and active ageing, enhancing healthcare services, and fostering age-friendly communities while supporting older people's associations (ASEAN, 2021).

The implementation of the Kuala Lumpur Declaration on Ageing by Cambodia, Lao PDR, Myanmar, and Viet Nam focuses on promoting a shared responsibility approach to healthy, active, and productive ageing, as well as supporting families, caregivers, and communities. These countries have established multi-stakeholder mechanisms at community and local government levels to advocate for and raise awareness about ageing issues. Community-based initiatives have been promoted to deliver care for older persons, including support systems for families and caregivers. This includes the development of grants or fund schemes and other forms of assistance to empower communities. Programmes for self-care and the management of illnesses for older persons are also being promoted to enhance their quality of life (RPA-KL-Declaration-on-Ageing\_endorsedbyAMMSWD.pdf, 2020).

Intergenerational solidarity is encouraged by raising public awareness and changing behaviors regarding the rights and challenges of older persons. Positive images of ageing are promoted, and age and ageing issues are integrated into educational curricula to bridge socio-cultural gaps between generations. Intergenerational day care facilities and services are being established through public-private partnerships to support this objective (RPA-KL-Declaration-on-Ageing\_endorsedbyAMMSWD.pdf, 2020).

To protect the rights of older persons, these countries have developed or reviewed national social protection systems focusing on insurance, welfare assistance, and income security. Integrated care and support systems, including long-term care for older persons, are also being implemented. Efforts include reviewing national policies and guidelines on employment for older persons and strengthening procedures for emergency and disaster management focused on older persons.

Furthermore, these countries are working to mainstream population ageing issues into public policies and national development plans. This includes the adoption of inclusive development strategies, emphasizing gender, age, and ability sensitization in budgetary provisions. The promotion of human capital and expertise in gerontology and geriatrics is also a key focus, with the development of academic programs and regional training collaborations.

Efforts are also being made to develop reliable information and gender-disaggregated data on ageing, fostering research, development, and innovation in this field. Capacity building among statisticians, researchers, and other stakeholders is being promoted to create a data hub for ageing in ASEAN Member States. Additionally, collaborations and partnerships within ASEAN and with dialogue partners are being strengthened to support the implementation of these commitments (RPA-KL-Declaration-on-Ageing\_endorsedbyAMMSWD.pdf, 2020).

Table 6: Existing Laws and Policies for Older People in Cambodia, Lao PDR, Myanmar, and Viet Nam

Country	Laws and Policies	Citations
<b>Cambodia</b>	<p><b>-National Ageing Policy 2017-2030:</b> Aims to expand retirement schemes, implement geriatric care, and enforce regulations against elder abuse.</p> <p><b>-Social Protection Framework:</b> Efforts to establish social pensions and increase support through the National Social Protection Council.</p> <p><b>Older People’s Associations:</b> More than 1,600 associations providing social support and community activities.</p>	<p>Oxfam in Cambodia, 2023; HelpAge Asia, 2023; World Bank, 2022.</p>
<b>Lao PDR</b>	<p><b>-National Policy on the Elderly:</b> Promotes the inclusion of elderly in development plans, aiming for better health care and social protection.</p> <p><b>-Social Security Law:</b> Provides pensions and social benefits for those who have contributed to the National Social Security Fund.</p> <p><b>- The Decree on the Older Persons No. 473/PM, dated July 12, 2021:</b> This legislation directly defines the Older Persons with complete content and covers many crucial aspects related to them</p>	<p>Population Trends Asia-Pacific, 2023; Worldometer, 2023.</p> <p>Country Profile of Lao PDR</p>
<b>Myanmar</b>	<p><b>-Elderly People Law:</b> The Elderly People Law enacted by Myanmar’s Pyidaungsu Hluttaw focuses on the comprehensive protection and care of elderly citizens aged 60 and above. Key aspects of the law include the promotion of healthcare and social care, ensuring regular income, and supporting family, home-based, and community-based care</p>	<p>The Pyidaungsu Hluttaw Law No. 44, 2016</p>

	<p><b>-National Social Protection Strategic Plan:</b> Includes provisions for social pensions and health care support for the elderly.</p> <p><b>-Elderly Health Care Act:</b> Focuses on providing better medical care and support services for older adults.</p>	Population Trends Asia-Pacific, 2023.
<b>Viet Nam</b>	<p><b>-Law on the Elderly:</b> Provides for social welfare, health care, and support services for older people.</p> <p><b>-National Action Plan for the Elderly:</b> Aims to enhance the quality of life for the elderly through improved health services and social support systems.</p>	Statista, 2024; World Bank, 2022.

## **PART III. Methodology**

### **3.1 Study Design**

The research methodology employed in this study involved a mixed-method approach, combining both quantitative surveys and qualitative interviews. This approach was chosen to provide a comprehensive understanding of the impact of COVID-19 on income security among rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam.

Quantitative surveys were conducted to collect demographic data and assess the prevalence of income insecurity among rural older people in each country. A total of 120 respondents were targeted, with 30 individuals selected from each of the four countries. The sampling procedure utilized a snowball sampling method, facilitated by the respective ministries or government agencies responsible for social welfare and older persons' affairs in each country.

The structured research questionnaire covered various topics related to income sources, livelihood strategies, access to social protection, and the impact of COVID-19 on household finances among rural older people. The questionnaire included both closed-ended and open-ended questions, allowing for quantitative analysis of key indicators as well as qualitative exploration of respondents' experiences and perceptions.

Qualitative interviews were also conducted to delve deeper into the lived experiences and coping mechanisms of rural older people during the pandemic. These interviews provided rich insights into the social, economic, and psychological impacts of COVID-19 on this demographic group, helping to contextualize the quantitative findings.

Data collection was carried out by trained research assistants or field enumerators, under the supervision of the lead researcher and national researchers. Ethical guidelines and protocols were adhered to throughout the data collection process, including informed consent procedures and protection of participants' privacy and confidentiality.

Overall, the research methodology and data collection methods employed in this study provided a comprehensive and nuanced understanding of the impact of COVID-19 on income security among rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. The mixed-method approach allowed for triangulation of findings and generation of evidence-based insights to inform policy and programmatic responses aimed at addressing the needs of this vulnerable demographic group in the context of the ongoing pandemic.

### **3.2 Study Population**

The study population consists of older adults aged 60 and above residing in rural areas of Cambodia, Lao PDR, Myanmar, and Viet Nam. The participants will include both men and women from diverse socio-economic backgrounds to ensure a comprehensive understanding of the impact of COVID-19 on their income security. The inclusion criteria for the participants are as follows:

- Aged 60 years or older
- Residing in rural areas of the selected countries
- Willingness to participate in the study and provide informed consent

### **3.3 Study Area**

The study will be conducted in rural regions of Cambodia, Lao PDR, Myanmar, and Viet Nam. These areas have been selected based on their high population of older adults and the significant impact of COVID-19 on their livelihoods. The specific regions within each country will be identified through a preliminary survey and consultations with local authorities to ensure representative sampling.

### **3.4 Study Period**

The study was conducted over a period from June 2023 to May 2024. This timeframe allowed for comprehensive data collection and analysis, capturing the evolving impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. By spanning a full year, the research was able to account



for seasonal variations and potential shifts in policy responses and economic conditions, providing a more robust and nuanced understanding of the issues at hand.

### **3.5 Sample size determination**

In this research, the sample size was determined based on the need to obtain a representative and comprehensive understanding of the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. The target population for this study comprises rural older people aged 60 and above in Cambodia, Lao PDR, Myanmar, and Viet Nam. To ensure adequate representation and facilitate meaningful comparisons, a total of 120 participants were selected from each of the four countries. This resulted in a cumulative sample size of 480 participants across all countries.

### **3.6 Sampling Method**

A multistage sampling method will be employed to select the study participants. The sampling process will involve the following steps:

1. **Selection of Regions:** Rural regions within each country will be selected using purposive sampling based on their population density and the impact of COVID-19.
2. **Selection of Villages:** Within each selected region, villages will be randomly selected to ensure geographical representation.
3. **Selection of Households:** In each village, households with older adults aged 60 and above will be identified through a household listing process.
4. **Selection of Participants:** From the identified households, eligible participants will be selected using simple random sampling.

Efforts will be made to ensure gender balance and representation of different socio-economic groups within the sample to provide a comprehensive analysis of the impact of COVID-19 on income security among rural older adults in these countries.

### **3.7 Data Collection Methods**

Data collection for this study involved a systematic process to gather both quantitative and qualitative information from rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. The data collection phase was critical for obtaining insights into the impact of COVID-19 on income security among this demographic group.

Quantitative surveys were conducted to collect numerical data on various aspects related to income security, livelihoods, and the effects of COVID-19 on household finances. The surveys were administered to a total of 120 respondents, with 30 individuals selected from each of the four countries. The sampling procedure utilized a snowball sampling method, facilitated by government agencies responsible for social welfare and older persons' affairs in each country.

The structured research questionnaire, specifically designed for this study, guided the quantitative data collection process. The questionnaire covered topics such as sources of income, access to social protection programs, employment status, financial coping mechanisms, and the impact of COVID-19 on household income and expenditure. Closed-ended questions allowed for quantitative analysis of key indicators, while open-ended questions provided opportunities for respondents to share their perspectives and experiences in more detail.

Trained research assistants or field enumerators were responsible for administering the surveys either in-person or through telephone interviews, depending on logistical considerations and the accessibility of participants. The data collection process adhered to ethical guidelines, including obtaining informed consent from participants and ensuring confidentiality and privacy. Due to logistical challenges and travel restrictions in certain countries, face-to-face interviews for data collection posed exceptional difficulties. In response, alternative methods were adopted to ensure the inclusion of participants from these regions.

In countries where travel constraints made in-person interviews impractical, remote data collection methods, such as telephone interviews or virtual meetings, were utilized. These approaches allowed for direct communication with participants while minimizing the need for physical travel. Additionally, local collaborators and

community partners played a crucial role in facilitating access to potential participants and coordinating remote interviews.

While face-to-face interactions are often preferred for qualitative data collection due to the depth of engagement they enable, remote interviews provided a viable solution under the circumstances. Through careful planning and coordination, efforts were made to maintain the integrity and authenticity of the data collected, ensuring that participants' voices were heard and their experiences were accurately captured.

Despite the challenges posed by travel restrictions, the research team remained committed to conducting comprehensive data collection across all target regions. By adapting to the unique circumstances of each country and leveraging available technology, the study successfully obtained valuable insights into the impact of COVID-19 on income security among rural older people in diverse contexts.

In addition to the quantitative surveys, qualitative interviews were conducted to gain deeper insights into the lived experiences and coping strategies of rural older people during the pandemic. These interviews provided rich, contextualized data that complemented the quantitative findings and helped to uncover underlying factors contributing to income insecurity.

A purposive sampling approach was used to select participants for the qualitative interviews, aiming for diversity in terms of age, gender, socioeconomic status, and geographic location. Semi-structured interview guides were developed to facilitate conversations around themes such as changes in income sources, challenges faced during the pandemic, support networks, and future concerns.

The qualitative interviews were conducted by experienced interviewers trained in qualitative research methods. The interviews were audio-recorded with the consent of participants and later transcribed verbatim for analysis. Thematic analysis was employed to identify patterns, themes, and narratives within the qualitative data, allowing for a deeper understanding of the multifaceted impacts of COVID-19 on income security among rural older people.

Overall, the data collection process was carefully planned and executed to ensure the collection of high-quality data that would inform the study's objectives and contribute to a comprehensive understanding of the research topic. By integrating both quantitative and qualitative approaches, the data collection phase aimed to capture the complexity and nuances of the experiences of rural older people affected by the COVID-19 pandemic.

### **3.8 Data analysis**

The data collected from the study will be analyzed using a combination of descriptive and inferential statistical methods. The analysis will be conducted in several stages to ensure a comprehensive understanding of the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam.

Descriptive statistics will be used to summarize the basic characteristics of the study population, including age, gender, marital status, education level, and income sources. Measures such as mean, median, standard deviation, and frequency distributions will be calculated for continuous variables, while categorical variables will be summarized using frequencies and percentages. For qualitative data collected through interviews and focus group discussions, thematic analysis will be employed. This will involve:

- Transcribing the interviews and discussions verbatim.
- Coding the data to identify key themes and patterns related to the impact of COVID-19 on income security.
- Interpreting the findings in the context of the socio-economic and cultural settings of the study areas.

To enhance the reliability and validity of the findings, triangulation will be used by comparing and cross-verifying quantitative data with qualitative insights. This approach will provide a more holistic view of the impact of COVID-19 on the income security of rural older adults.

Statistical analyses will be performed using software tool such as SPSS (Statistical Package for the Social Sciences) for qualitative data analysis. The use of these tools

will ensure accurate and efficient data analysis. The results will be presented in the form of tables, graphs, and charts to provide clear and comprehensive visual representations of the data. The findings will be interpreted and discussed in relation to existing literature, and recommendations will be made based on the results of the analysis.

By employing these analytical techniques, the study aims to provide a detailed understanding of the impact of COVID-19 on the income security of rural older people in the selected countries, and to inform policy decisions and interventions to support this vulnerable population.

### **3.9 Ethical considerations and measures taken to ensure the privacy and confidentiality of participants**

Ethical considerations are paramount in any research endeavor, especially when dealing with vulnerable populations such as older people. In the context of this study on the impact of COVID-19 on income security among rural older people, rigorous measures were implemented to ensure the protection of participants' rights, privacy, and confidentiality.

One of the primary ethical considerations was obtaining informed consent from all participants. Prior to data collection, participants were provided with clear and comprehensible information about the study objectives, procedures, potential risks, and benefits. They were given the opportunity to ask questions and express any concerns before providing their consent to participate voluntarily. Consent forms were carefully drafted in the local languages of the participants to ensure understanding and compliance.

Furthermore, special attention was given to the privacy and confidentiality of participants' personal information. Confidentiality measures were implemented at every stage of the research process, from data collection to analysis and reporting. To safeguard participants' anonymity, identifying information such as names, addresses, and contact details were kept strictly confidential and stored securely. Instead, unique identifiers or codes were used to link data collected from individual participants.

In addition to ensuring confidentiality, efforts were made to minimize the potential risks and discomfort associated with participation in the study. Data collection methods were designed to be non-invasive and respectful of participants' autonomy and dignity. For instance, sensitive topics were approached with sensitivity and empathy, and participants were assured that they could withdraw from the study at any time without repercussions.

Moreover, ethical guidelines recommended by international bodies such as the World Health Organization (WHO) and the Declaration of Helsinki were adhered to throughout the research process. This included obtaining ethical approval from relevant institutional review boards or ethics committees prior to commencing the study. All research personnel involved in data collection were trained in ethical research practices and instructed to adhere strictly to ethical guidelines and protocols.

Another important aspect of ethical research is ensuring that the benefits of the study outweigh any potential risks or harms to participants. In this regard, the findings of the study are intended to contribute to the development of evidence-based policies and interventions aimed at addressing the needs of rural older people affected by the COVID-19 pandemic. By shedding light on their experiences and challenges, the study seeks to advocate for the rights and well-being of older people in CLMV countries.

Ethical considerations were central to the design and implementation of the study on the impact of COVID-19 on income security among rural older people. By prioritizing informed consent, privacy, confidentiality, and minimizing risks to participants, the research team aimed to uphold the highest standards of ethical conduct and ensure the integrity and validity of the study findings.

## **PART IV. Results and Discussions**

### **4.1 Presentation and analysis of data gathered from the study**

The presentation and analysis of data gathered from the research on the Impact of COVID-19 on the Income Security of Rural Older People in Cambodia, Lao PDR, Myanmar, and Viet Nam provide valuable insights into the challenges faced by older individuals in these countries during the pandemic. This discussion will delve into the key findings and trends identified through the analysis of the data, shedding light on the impact of COVID-19 on the income security of rural older people in the ASEAN region.

One of the central themes emerging from the data analysis is the significant disruption to older people's sources of income due to the COVID-19 pandemic. Across Cambodia, Lao PDR, Myanmar, and Viet Nam, older individuals who rely on informal employment or subsistence farming as their primary source of income have been particularly vulnerable to economic shocks caused by the pandemic. Lockdowns, travel restrictions, and disruptions to supply chains have hampered their ability to engage in economic activities, resulting in loss of income and financial insecurity.

Moreover, the data reveals disparities in access to social protection programs among older people in the ASEAN region. While some older people have been able to access government assistance and social safety nets, others, especially those living in rural areas, have faced barriers in accessing these programs. Limited awareness, bureaucratic hurdles, and inadequate coverage of social protection schemes have left many older people without adequate support during the pandemic, exacerbating their economic vulnerability.

Furthermore, the analysis highlights the interconnected nature of income security and health outcomes among older individuals in Cambodia, Lao PDR, Myanmar, and Viet Nam. The data indicates that older people who experience financial hardship are more likely to face challenges in accessing healthcare services and essential medications, leading to adverse health outcomes. Conversely, older individuals who enjoy financial stability are better equipped to afford healthcare expenses and maintain their well-being during the pandemic.

Another key finding from the data analysis is the role of social networks and community support in mitigating the impact of COVID-19 on older people's income security. Despite facing economic hardships, many older people have relied on support from family members, neighbors, and community to cope with the challenges posed by the pandemic. Informal networks of mutual aid and solidarity have provided a crucial lifeline for older people in rural areas, helping them navigate through difficult times and meet their basic needs.

Moreover, the data sheds light on the gender dimensions of income security among older individuals in the ASEAN region. Women, especially those from marginalized and vulnerable groups, face unique challenges in accessing income-generating opportunities and social protection programs. Structural barriers such as unequal access to education, limited employment opportunities, and traditional gender roles exacerbate the economic vulnerability of older women, placing them at a greater risk of poverty and financial insecurity during the pandemic.

Additionally, the analysis highlights the need for targeted policy interventions to address the specific needs and priorities of older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. The data underscores the importance of strengthening social protection systems, expanding access to healthcare services, and promoting economic opportunities for older people, particularly those living in rural areas. Policy measures such as cash transfers, food assistance programs, and healthcare subsidies can play a crucial role in supporting older people's income security and enhancing their resilience to future crises.

Overall, the presentation and analysis of data gathered from the research on the Impact of COVID-19 on the Income Security of Rural Older People in Cambodia, Lao PDR, Myanmar, and Viet Nam provide valuable insights into the multifaceted challenges faced by older people in the ASEAN region. By understanding the underlying factors driving income insecurity among older people and identifying effective policy responses, policymakers and stakeholders can work towards building more inclusive and resilient societies that prioritize the well-being of older individuals, especially in times of crisis.



## **4.2 Overview of the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam**

The impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam has been profound and multifaceted, posing significant challenges to the economic well-being of older people in these countries. This overview will provide a comprehensive narrative discussion of the various factors contributing to the impact of the pandemic on income security among rural older people in the ASEAN region.

The COVID-19 pandemic has disrupted economic activities and livelihoods across the globe, with rural areas in Cambodia, Lao PDR, Myanmar, and Viet Nam being particularly vulnerable to its effects. In these countries, many older people rely on informal employment, subsistence farming, and remittances from family members as their primary sources of income. However, the pandemic has led to widespread job losses, business closures, and disruptions to supply chains, resulting in a sharp decline in income for rural older people.

Lockdown measures and movement restrictions implemented to contain the spread of the virus have severely impacted rural economies, limiting older people's ability to engage in agricultural activities, small-scale businesses, and informal work. As a result, many older people have experienced a loss of income, financial instability, and difficulty in meeting their basic needs such as food, shelter, and healthcare. The closure of markets, restrictions on travel, and reduced access to credit and resources have further exacerbated the economic challenges faced by rural older people during the pandemic.

Moreover, the pandemic has exposed and exacerbated existing inequalities in access to social protection and support services among older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. While some older people have been able to access government assistance, social safety nets, and humanitarian aid, others, especially those living in remote and marginalized areas, have been left behind. Limited awareness, bureaucratic hurdles, and inadequate coverage of social protection programs have prevented many older individuals from accessing the support they

desperately need, deepening their economic vulnerability and exacerbating social disparities.

The impact of COVID-19 on income security among rural older people is further compounded by health-related challenges and vulnerabilities. Older individuals, particularly those with pre-existing health conditions, face increased risks of severe illness and mortality from COVID-19. The fear of contracting the virus, coupled with limited access to healthcare facilities and essential medications, has added to the economic burden faced by older people, as they struggle to afford medical expenses and cope with the adverse health effects of the pandemic.

Furthermore, the closure of schools and community centers has disrupted essential services and support systems for older people, such as caregiving, socialization, and recreational activities. Many older people, especially those living alone or with limited social networks, have experienced heightened feelings of isolation, loneliness, and mental distress during the pandemic. The lack of social interaction and emotional support has taken a toll on their overall well-being, further exacerbating the economic challenges faced by rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam.

In addition to economic and health-related challenges, rural older people in the ASEAN region also grapple with structural barriers and systemic inequalities that perpetuate income insecurity and social exclusion. Limited access to education, training, and economic opportunities, especially for women and marginalized groups, hinders their ability to generate sustainable income and improve their livelihoods. Moreover, discriminatory practices, social norms, and ageist attitudes often marginalize older individuals and limit their participation in decision-making processes and community development initiatives.

Despite these challenges, there are also opportunities for addressing the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. Strengthening social protection systems, expanding access to healthcare services, and promoting inclusive economic development are critical steps towards enhancing the resilience and well-being of older people in the ASEAN region. By adopting a holistic and integrated approach to addressing the

multidimensional needs of rural older people, policymakers, governments, and civil society organizations can work together to build more equitable, inclusive, and resilient societies that prioritize the rights and dignity of older people, especially in times of crisis.

### **4.3 Identification of key factors contributing to income insecurity among this demographic**

Identifying the key factors contributing to income insecurity among each country's demographic requires a nuanced examination of various socioeconomic, political, and structural determinants. While these factors may vary across Cambodia, Lao PDR, Myanmar, and Viet Nam, common themes can often be discerned. Some key factors contributing to income insecurity among each country's demographic include:

**Economic Vulnerabilities:** Economic instability, limited employment opportunities, and reliance on informal sectors characterize income insecurity among rural older people. In Cambodia, for instance, reliance on agriculture and informal labor exposes older individuals to fluctuations in market demand and seasonal variations.

**Limited Access to Social Protection:** Inadequate social protection systems, including pensions, social assistance, and healthcare coverage, contribute to income insecurity among rural older people. Many older individuals lack access to formal social protection programs, leaving them vulnerable to economic shocks and health crises. This is particularly evident in Lao PDR, where limited healthcare infrastructure and geographic barriers impede access to essential services for rural older populations.

**Dependence on Remittances:** Remittances from family members working abroad often constitute a significant source of income for rural older people in countries like Cambodia and Myanmar. However, disruptions in global migration patterns, border closures, and economic downturns during the COVID-19 pandemic have led to a decline in remittance inflows, exacerbating income insecurity among older populations.

**Socioeconomic Disparities:** Socioeconomic disparities, including unequal access to education, employment opportunities, and financial resources, contribute to income insecurity among rural older people. In Viet Nam, for example, disparities in social protection coverage and healthcare access persist between urban and rural areas, exacerbating income insecurity among rural older populations.

**Health Challenges:** Health-related expenses, including medical bills and costs associated with age-related illnesses, pose significant financial burdens on rural older people. Limited access to affordable healthcare services and lack of health insurance coverage exacerbate income insecurity, particularly in countries with weak healthcare infrastructure such as Myanmar and Lao PDR.

**Environmental Factors:** Environmental hazards, including natural disasters and climate change-related events, can disrupt livelihoods and exacerbate income insecurity among rural older populations. In Cambodia, for instance, extreme weather events such as floods and droughts impact agricultural productivity, leading to income losses for rural older people dependent on farming activities.

**Cultural Norms and Gender Dynamics:** Cultural norms and gender dynamics influence income insecurity among rural older populations, with women often facing greater economic vulnerabilities due to gender disparities in access to resources and decision-making power.

Overall, a multifaceted understanding of these key factors is essential for developing targeted interventions and policies aimed at addressing income insecurity among rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. By addressing structural inequalities, strengthening social protection systems, and promoting inclusive economic development, policymakers can work towards improving the financial well-being and livelihoods of rural older populations in these countries.

## **4.4 Discussion**

### 4.4.1 Interpretation of the results in the context of existing literature and theoretical frameworks

Interpreting the results of the study on the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam requires contextualizing them within existing literature and theoretical frameworks. The findings of the study provide valuable insights into the unique challenges faced by rural older populations during the pandemic, shedding light on the effectiveness of various policy responses and interventions.

One key aspect highlighted in the study is the role of social protection programs in mitigating the economic impact of the pandemic on older individuals. The results align with existing literature emphasizing the importance of social safety nets in providing financial support to vulnerable populations during times of crisis (Gentilini et al., 2020). By expanding coverage and increasing benefit levels of social protection programs, policymakers can ensure that rural older people have access to essential services and financial support, thus enhancing their income security.

The study also underscores the significance of healthcare access in safeguarding the well-being of rural older populations. Investments in healthcare infrastructure and telemedicine services are essential for improving access to quality healthcare, particularly for those living in remote and underserved areas. These findings resonate with theoretical frameworks emphasizing the importance of healthcare access in promoting healthy aging and reducing disparities in health outcomes (World Health Organization, 2021). By prioritizing investments in healthcare, policymakers can enhance the resilience of rural older people to health-related shocks and improve their overall quality of life.

Moreover, the study highlights the importance of promoting sustainable livelihoods among rural older populations to reduce dependency on informal employment and enhance economic resilience. Vocational training, entrepreneurship support, and agricultural development programs are critical for creating income-generating opportunities and empowering older people to participate in economic activities. These

findings are consistent with theories of economic empowerment and livelihood development, which emphasize the role of skills development and income diversification in poverty reduction and sustainable development (Makridakis et al., 2020). By investing in initiatives that promote economic empowerment among rural older people, policymakers can enable them to secure a stable source of income and improve their livelihoods.

Additionally, the study emphasizes the importance of fostering community resilience and promoting intergenerational solidarity to enhance social capital and collective well-being among rural older populations. Strengthening support networks and empowering older people to participate in decision-making processes are essential for building cohesive and resilient communities. These findings align with theoretical frameworks highlighting the role of social capital in promoting community resilience and facilitating effective responses to crises (Ghebreyesus, 2020). By fostering community resilience and promoting intergenerational solidarity, policymakers can enhance the social cohesion and well-being of rural older people, thus contributing to their overall resilience to socioeconomic shocks.

Overall, the interpretation of the study results within the context of existing literature and theoretical frameworks provides valuable insights into the multifaceted challenges faced by rural older populations during the COVID-19 pandemic. By understanding the complex dynamics of these challenges and their underlying determinants, policymakers can develop more effective strategies for addressing the unique needs of rural older people and promoting their income security and well-being in the face of future crises.

#### 4.4.2 Exploration of the implications of the findings for policy and practice

The findings of the study on the impact of COVID-19 on the income security of rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam have significant implications for policy and practice. These implications span various domains, including social protection, healthcare access, livelihood promotion, community resilience, and data collection. By addressing these implications, policymakers and

practitioners can develop targeted interventions and policies to support rural older populations and enhance their income security in the wake of the pandemic.

One key implication of the findings is the need to strengthen social protection systems to ensure adequate income security for rural older people. Policymakers should prioritize expanding coverage and increasing benefit levels of social protection programs, including pensions, social assistance, and healthcare coverage. This may involve implementing universal pension schemes, social assistance programs, and healthcare coverage to ensure older individuals have access to essential services and financial support. Additionally, efforts should be made to simplify application procedures, reduce bureaucratic barriers, and increase outreach to marginalized and remote communities to ensure inclusivity and accessibility.

Furthermore, the findings highlight the importance of improving access to healthcare for rural older populations. Investments in healthcare infrastructure, medical supplies, and health education are essential for enhancing access to quality healthcare services, particularly in remote and underserved areas. This may involve strengthening primary healthcare facilities, expanding access to telemedicine services, and providing specialized care for chronic conditions and age-related health issues. NGOs and community-based organizations can play a key role in delivering healthcare services, conducting health screenings, and raising awareness about preventive measures and healthy aging practices.

Another implication of the findings is the need to promote sustainable livelihoods among rural older people. This may involve implementing vocational training, entrepreneurship support, and agricultural development programs to create income-generating opportunities and reduce dependency on informal employment. Collaborations with local governments, community organizations, and private sector partners can help create an enabling environment for older people to participate in economic activities and contribute to local economies.

Additionally, the findings underscore the importance of fostering community resilience and promoting intergenerational solidarity among rural older populations. Strengthening support networks, promoting intergenerational dialogue, and empowering older people to participate in decision-making processes are essential for

building cohesive and resilient communities. This may involve implementing age-friendly policies, developing community-based support programs, and facilitating intergenerational activities to promote social cohesion and well-being.

Furthermore, the findings highlight the need to strengthen data collection and research efforts to better understand the impact of COVID-19 on income security among rural older people. By investing in comprehensive surveys, longitudinal studies, and qualitative research, policymakers and stakeholders can generate evidence-based insights to develop targeted interventions and policies. This may involve collaborating with national statistical offices, research institutions, and NGOs to collect disaggregated data and conduct rigorous analyses.

Overall, the implications of the findings underscore the importance of adopting a holistic and multidimensional approach to supporting rural older populations in the wake of the COVID-19 pandemic. By addressing the various dimensions of income security, including social protection, healthcare access, livelihood promotion, community resilience, and data collection, policymakers and practitioners can develop effective strategies to enhance the well-being and resilience of rural older people and ensure their dignity and prosperity in the years to come.

#### 4.4.3 Comparison of findings across the four countries

An analysis of the results in Cambodia, Lao PDR, Myanmar, and Viet Nam provides a more comprehensive comprehension of the intricate effects that COVID-19 has had on the financial stability of elderly rural residents in contexts that vary in socioeconomic status and culture. Although all nations are confronted with similar difficulties resulting from the pandemic, including economic upheaval, susceptibilities to illness, and social seclusion, the particular conditions and reactions vary considerably, mirroring the distinct sociopolitical environments and developmental paths of each country.

The rural elderly population in Cambodia experienced significant financial setbacks due to the elimination of employment prospects in critical industries such as agriculture, informal labour, and small-scale enterprises. In addition to restricted access to social protection programmes, the disruption of remittance flows from family members



working abroad exacerbated the financial vulnerabilities of the elderly. Furthermore, obstacles in obtaining healthcare, specifically in geographically isolated regions, emphasized the increased health hazards experienced by the elderly, thereby heightening their vulnerability to COVID-19 and other adverse health conditions. In a similar vein, elderly individuals residing in rural areas of Lao PDR were confronted with financial insecurity due to the collapse of critical industries, including agriculture, tourism, and small-scale trading. Due to the lack of comprehensive social protection systems, a significant number of elderly people were forced to depend on informal support networks and community unity in order to endure. In addition, the presence of inadequate healthcare infrastructure and geographical barriers presented substantial obstacles to the provision of vital medical services, thereby intensifying the susceptibilities of the elderly.

The geographical and social disruptions brought about by political instability in Myanmar exacerbated the difficulties that elderly individuals residing in rural areas encountered during the COVID-19 pandemic. As a result of economic disruptions such as decreased remittances and employment losses, food insecurity and financial strain among the elderly have increased. The vulnerabilities of elderly populations were further intensified by humanitarian crises, including displacement and conflict, and the insufficiency of current social protection programmes. As a result, these populations become more susceptible to socio-economic adversities.

On the other hand, elderly individuals residing in rural areas of Viet Nam faced comparable economic obstacles that were caused by the collapse of traditional industries, small-scale enterprises, and informal labour markets. Although social protection schemes, such as social assistance and pensions, provided some solace, discrepancies in coverage endured, especially in geographically isolated regions. However, in spite of this, the healthcare infrastructure was comparatively strong, and vaccination campaigns headed by the government were instrumental in reducing health hazards for the elderly. This highlights the criticality of proactive health interventions during the pandemic.

Despite these variations, a number of recurring themes surface throughout the four nations, underscoring the criticality of implementing comprehensive and situation-

specific measures to assist elderly individuals residing in rural areas during the post-COVID-19 period. It is imperative that social protection systems be bolstered through the augmentation of benefit levels and the expansion of coverage in order to guarantee that the elderly have access to vital services and financial assistance. Furthermore, it is critical to prioritise preventive health measures, telemedicine services, and investments in healthcare infrastructure in order to ensure the health and safety of elderly populations, especially in underserved and remote regions.

Furthermore, by means of agricultural development programmes, vocational training, and support for entrepreneurship, sustainable livelihoods can be promoted, enabling seniors to generate income and lessen their reliance on informal employment. Promoting community resilience by cultivating intergenerational solidarity and fortifying support networks is crucial in order to augment social capital and overall welfare within the geriatric demographic. Improving research and data collection is crucial in order to develop evidence-based policies and interventions that are specifically designed to address the unique vulnerabilities and requirements of older individuals residing in rural areas, regardless of the context.

Fundamentally, although the effects of COVID-19 on the financial stability of elderly rural residents may differ among Cambodia, Lao PDR, Myanmar, and Viet Nam, the primary objective of bolstering the fortitude and welfare of senior communities continues to be of the utmost importance. By embracing a obstacles and prospects present in each nation, in the aftermath of the pandemic.

#### 4.4.4 Identification of gaps in knowledge and areas for future research

The investigations carried out regarding the ramifications of the COVID-19 pandemic on the financial stability of elderly rural residents in Cambodia, Lao PDR, Myanmar, and Viet Nam have yielded significant knowledge regarding the obstacles encountered by this susceptible population. Conversely, a number of knowledge deficiencies and prospective research domains have been recognised, thereby presenting opportunities to augment our comprehension of the intricate dynamics in operation and provide insights for more focused policy interventions and responses.

An aspect that warrants further investigation is the enduring economic ramifications of the pandemic on elderly individuals residing in rural areas. Although previous research has examined the immediate effects of COVID-19 on income security, further investigation is required to determine how these effects develop over time and whether the financial well-being of geriatric populations is affected in the long run. Conducting longitudinal studies that monitor the long-term evolution of income, employment status, and social protection accessibility would yield significant and worthwhile insights regarding the course of recovery and resilience among the elderly residing in rural areas.

Additional research is required to investigate the intersectionality of vulnerabilities, specifically in relation to gender, ethnicity, and geographic location, among the elderly residing in rural areas. Prior research has underscored the inequitable consequences of COVID-19 for specific demographics, including women, ethnic minorities, and individuals residing in geographically isolated regions. Nevertheless, further comprehensive examinations are necessary to comprehend the unique obstacles encountered by these subpopulations and the ways in which they intersect with additional variables, including socioeconomic status and age.

Additionally, research examining the efficacy of various policy responses and interventions in addressing the income security requirements of rural older people is required. Although certain nations have instituted economic stimulus measures and social protection programmes, the precise effects of these initiatives on the ground remain uncertain. By assessing the results of these interventions, such as their extent of coverage, sufficiency, and concentration, it is possible to discern optimal strategies and domains that require enhancement in subsequent policy formulation and execution.

Further investigation is recommended into the potential of community support systems and social networks to alleviate the effects of COVID-19 on elderly individuals residing in rural areas. Research has indicated that robust social connections and unofficial support systems can serve as a protective barrier against economic disruptions and furnish vital provisions in periods of turmoil. Gaining insight into the operational

mechanisms of social capital, along with its inherent limitations and disparities, can provide valuable knowledge for the development of approaches aimed at enhancing the resilience of rural ageing populations and fostering their collective well-being.

Furthermore, in the context of COVID-19, future research should investigate the effects of the digital divide on the financial stability of elderly rural residents. Although the global health crisis has expedited the transition from traditional to digital platforms for work, education, and social engagement, a considerable number of elderly people, particularly those residing in rural regions, might still be devoid of digital competencies and access. In the post-pandemic era, it is critical to examine the obstacles that impede digital inclusion and assess the potential of technology-driven remedies to improve social engagement and income security for elderly individuals residing in rural areas.

Lastly, research into the wider sociopolitical determinants of vulnerability and resilience among rural seniors in the face of future crises is required. This encompasses the examination of various elements, including policy frameworks, governance structures, and cultural norms, which exert an impact on the access to resources and support systems of elderly populations and affect their lived experiences. Further investigation into this subject matter may yield more efficacious approaches to enhancing the welfare of elderly individuals residing in rural areas during worldwide emergencies such as the COVID-19 pandemic, by embracing an all-encompassing and interdisciplinary framework.

## **PART V. Conclusions and Recommendations**

### **5.1 Conclusion**

#### **5.1.1 Economic Disruptions**

The research findings reveal that the COVID-19 pandemic has caused significant economic disruptions for rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. Many older individuals rely on informal sources of income, such as small-scale farming, petty trading, and informal labor, which have been severely impacted by lockdowns, movement restrictions, and disruptions in supply chains. As a result, rural older people have experienced loss of livelihoods, reduced access to income-generating opportunities, and heightened financial insecurity. The closure of markets, restrictions on travel, and disruptions in agricultural activities have further compounded these challenges, leading to increased vulnerability among rural older people.

#### **5.1.2 Limited Access to Resources**

The research findings also highlight the limited access to essential resources and services faced by rural older people during the COVID-19 pandemic. Access to healthcare services, including medical treatment, preventive care, and vaccinations, has been hampered by barriers such as geographical remoteness, inadequate healthcare infrastructure, and affordability constraints. Many rural older people lack access to clean water, sanitation facilities, and hygiene supplies, exacerbating their vulnerability to infectious diseases, including COVID-19. Additionally, food insecurity has emerged as a pressing concern, with disruptions in food supply chains, loss of agricultural income, and rising food prices leading to inadequate nutrition and hunger among rural older people.

#### **5.1.3 Social and Psychological Impacts**

The research findings underscore the profound social and psychological impacts of the COVID-19 pandemic on rural older people. Social isolation, loneliness, and mental health problems have escalated due to restrictions on social gatherings, limited

mobility, and fear of contracting the virus. Many older people have experienced heightened anxiety, depression, and stress, exacerbated by concerns about their health, safety, and economic security. Moreover, the loss of social support networks, including community gatherings, religious ceremonies, and family reunions, has further exacerbated feelings of isolation and loneliness among rural older people. The research findings highlight the importance of addressing the social and psychological well-being of rural older people to mitigate the adverse impacts of the pandemic and promote resilience.

#### 5.1.4 Policy Responses and Interventions

Despite the challenges posed by the COVID-19 pandemic, the research findings identify opportunities for policy responses and interventions to support rural older people in Cambodia, Lao PDR, Myanmar, and Viet Nam. Strengthening social protection systems, expanding access to healthcare services, promoting sustainable livelihoods, and fostering community resilience emerge as key strategies for addressing the needs of rural older people and mitigating the impact of the pandemic. The research findings underscore the importance of adopting a comprehensive and inclusive approach to policy-making that prioritizes the needs and rights of rural older people and ensures their meaningful participation in decision-making processes.

## 5.2 Recommendations

### 5.2.1 Strengthen Social Protection

Expand coverage and increase benefit levels of social protection programs, including pensions, social assistance, and healthcare coverage, to ensure adequate income security for rural older people. Policymakers should prioritize the expansion and enhancement of social protection systems to provide comprehensive coverage for rural older people. This includes implementing universal pension schemes, social assistance programs, and healthcare coverage to ensure older people have access to essential services and financial support. Additionally, efforts should be made to simplify application procedures, reduce bureaucratic barriers, and increase outreach to marginalized and remote communities to ensure inclusivity and accessibility.

### 5.2.2 Improve Access to Healthcare

Invest in healthcare infrastructure, medical supplies, and health education to enhance access to quality healthcare services for rural older people, particularly those living in remote and underserved areas.

Policymakers should prioritize investments in healthcare infrastructure and social services to meet the diverse needs of older individuals, particularly in rural areas. This includes strengthening primary healthcare facilities, expanding access to telemedicine services, and providing specialized care for chronic conditions and age-related health issues. NGOs and community-based organizations can play a key role in delivering healthcare services, conducting health screenings, and raising awareness about preventive measures and healthy aging practices.

### 5.2.3 Promote Sustainable Livelihoods

Implement vocational training, entrepreneurship support, and agricultural development programs to create income-generating opportunities for rural older people and reduce dependency on informal employment.

NGOs and development agencies should support initiatives that promote inclusive economic development and livelihood opportunities for rural older people. This could involve providing vocational training, skills development programs, and entrepreneurship support to enable older people to generate sustainable income through small-scale businesses, agriculture, and other income-generating activities. Collaborations with local governments, community organizations, and private sector partners can help create an enabling environment for older people to participate in economic activities and contribute to local economies.

### 5.2.4 Foster Community Resilience

Strengthen community-based support networks, promote intergenerational solidarity, and empower older people to participate in decision-making processes to build social capital and enhance collective well-being.

NGOs, advocacy groups, and civil society organizations should advocate for policy reform and the implementation of age-friendly policies that prioritize the needs and rights of older people. This includes advocating for the adoption of national aging policies, legislation to protect older individuals from age discrimination and abuse, and the development of age-friendly infrastructure and services. Collaborative efforts with policymakers, government agencies, and international partners can help advance policy agendas that promote the well-being and dignity of rural older people.

#### 5.2.5 Facilitate Access to Financial Services

Stakeholders should work together to improve access to financial services and resources for rural older people, including credit, savings, and insurance products. This may involve establishing community-based financial institutions, mobile banking services, and microfinance initiatives tailored to the needs of older people. Financial literacy programs and capacity-building initiatives should also be implemented to empower older people to make informed financial decisions and manage their resources effectively.

#### 5.2.6 Strengthen Data Collection and Research

Governments, research institutions, and NGOs should invest in data collection and research initiatives to better understand the impact of COVID-19 on income security among rural older people. This includes conducting comprehensive surveys, longitudinal studies, and qualitative research to assess the socio-economic status, needs, and vulnerabilities of older individuals. By generating evidence-based insights, policymakers and stakeholders can develop targeted interventions and policies to address the specific challenges faced by rural older people and enhance their economic resilience in the face of future crises.

In conclusion, the multiple approaches that were stated earlier play a significant role in overcoming the complex issues that older people living in rural areas face in terms of ensuring their financial stability in the middle of the COVID-19 pandemic. Among these problems is the inability to obtain the urgent medical attention that is required.



The strengthening of social protection systems through the expansion of coverage and the augmentation of benefit levels is absolutely necessary in order to guarantee that older people have unrestricted access to fundamental services and sufficient financial support. This is particularly important in the context of the elderly population. Not only may this be accomplished by expanding coverage, but it can also be performed by boosting the total amount of benefits. In addition, it is of the utmost importance to improve access to healthcare by making strategic investments in infrastructure and implementing telemedicine services in order to promote the general well-being of older people. For this reason, it is essential to enhance healthcare accessibility. This is especially true for those who live in areas that are physically isolated and have a limited availability of healthcare resources inside their community. Furthermore, the promotion of sustainable livelihoods through the provision of comprehensive vocational training and the extension of assistance for entrepreneurial endeavors is a means by which older adults can be empowered to cultivate alternative revenue streams and reduce their dependence on precarious informal job prospects. This is made possible through the provision of assistance for individuals who are engaged in entrepreneurial endeavors. This serves as a trigger for the empowerment of those who are in their later years. The building of community resilience, which may be accomplished by bolstering support networks and fostering intergenerational solidarity, is another factor that makes a substantial contribution to the increase of social capital and the general well-being of retired individuals who reside in rural areas. By providing older people with equal access to financial services, it is possible to empower them to make smart decisions regarding their finances and effectively manage the resources they have available to them through their economic resources. This is connected to the point that was made before. It is possible to achieve this goal by increasing the availability of credit facilities, savings mechanisms, and insurance goods to the general people. To conclude, strengthening efforts to collect data and conduct research is of the utmost importance in order to provide policymakers and other stakeholders with priceless insights that are necessary for the development of focused interventions and the formulation of policies that are tailored to address the specific issues that are encountered by rural older people. It is possible for policymakers, non-governmental organizations (NGOs), and other stakeholders to effectively advocate for the economic well-being of rural older people and ensure that they will continue to enjoy dignity and prosperity in the years to come if they put these various ideas into

action in a coordinated and all-encompassing manner. This is feasible because it is possible for them to effectively advocate for the economic well-being of rural older people. This is due to the fact that it is possible to effectively advocate for the economic well-being of elderly persons living in rural areas.

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## Appendix

### Country Profiles

Country	Researcher Name	Position	Organization
Cambodia	Ly Kimleang	Deputy Director of the Department of Elderly and Veterans	Ministry of Social Affairs, Veterans and Youth Rehabilitation
Lao PDR	Mr. Berthor TONGPAOTHOR	Director of Disability Development Division	The Department of Policy, for Devotees, Disability and Elderly, Ministry of Labour and Social Welfare
Myanmar	Dr. Khin Oo Thet	Assistant Surgeon	Insein General Hospital, Ministry of Health and Sport.
Viet Nam	Ms. Nguyen Thi Ngoc Thanh	Head of Faculty of Training	Centre of Labour and Social Affairs Training, University of Labour and Social Affairs, Ministry of Labour, Invalids and Social Affairs

## **Country Profile of Cambodia**

Ly Kimleang Deputy Director of the Department of Elderly and Veterans.

Ministry of Social Affairs, Veterans and Youth Rehabilitation

### **I- Introduction**

Cambodia is also one of the countries in the world which has been affected by the severe outbreak of Covid-19, in terms of socio-economy, public health and people's lives. According to the report by the Ministry of Health in Cambodia, among the population, the elderly has been considered to be one of the most vulnerable group affected by this virus due to poor immune system, poor health condition, also income security (Ministry of Health, 2023). Since Cambodia was suffered by the Covid-19 pandemic, the Royal Government of Cambodia has commenced introducing the policy interventions and has conducted a number of studies in an attempt to take measure to help the vulnerable peoples, in particular the poor, the elderly and some other disadvantage groups.

Regarding to the old age population in Cambodia, the country has been facing with demographic challenge. The proportion of older persons in total population has been increasing and the trend is projected to continue. Ageing-related issues which were non-existent or hardly significant before, now this issue becomes the challenges for the Royal Government of Cambodia to deal with. There are two factors explaining the emerging trend of population ageing – declining fertility and improving life expectancy (Royal Government of Cambodia, 2022). The result of declining fertility means a decrease in number of children born and consequently in the rate of decrease of the child population. The improving life expectancy means people are able to live longer and an increasing proportion survive into old age and also live longer after having reached age 60 years (Royal Government of Cambodia, 2022). Therefore, the older population increases at a faster rate than the younger population.

In the present, retirement pension has not yet allocated to old age people, but for only civil officials and veterans, for the others have been facing many difficulties in terms of public health support, income security, and public services. Disability of Ageing people is also another focus, which also requires greater attention to those affected including the provision of long-term care, an increasing of health costs with ageing of the older population, and financial insecurity among older persons. So far, the Royal Government of Cambodia, with the arm of Ministry of Social Affairs Veterans and Youth Rehabilitation, has been trying to develop the social policies and guidelines

to support the elderly, and to reduce the elimination of age discrimination for older persons, who have been losing their confidence and discourages from participating in any activities and programme in the communities, expecting the better quality of lives for the elderly. Health support for the elderly is still limited, including the awareness of improve healthy ageing such as physical activity, balanced diet, and barriers to access health care such as finance, long distance, infrastructure, social and cultural norms. There has been also an insufficiency of skilled health staff to effectively manage older people's health problems, limited health equipment, materials and medications at the primary health care level to ensure adequate and proper diagnosis, treatment and care of most frequent chronic diseases (e.g. diabetes, high blood pressure), limited availability of reliable specific data on older people health issues (e.g. use of services, main risk factors, effectiveness of treatment).

With the above issues, during the outbreak of Covid-19 pandemic, the elderly has been facing with many problems, in particular in the rural areas, and the elderly from poor families.

Therefore, this research aims to explore how the Elderly People in rural areas have been affected during Covid-19 pandemic in terms of income security and how the RGC has responded to fully support the elderly in terms of Ad hoc programmes, policies to raise the well-being of the elderly. Only some specific rural areas in Cambodia will be conducted for this research.

## **II- Situation of Older people in Cambodia**

In the present, Cambodia has a population of 15,288,489, according to the 2019 Census, with 7,418,577 (48.5%) males and 7,869,912 (51.5%) females (Ministry of Planning, 2020). The population increased 14.1% between 2008 to 2019, and also there was an increase in the proportion of the elderly aged 60 and over (Ministry of Planning, 2020). There are 1.3 million people aged 60 and above in Cambodia, representing 8.9% of the population (Ministry of Social Affairs, Veterans, and Youth Re, April, 2021, pp. 3-4). Older people represent 8.2% of the population in urban areas and 9.3% in rural areas. With the population projection of the Royal Government of Cambodia (RGC), the proportion of the population aged 60 and above is expected to increase from 13% in 2010 to 30% in 2070, and women have higher rate of life expectancy than men (Ministry of Social Affairs, April, 2021, p. 6). Many of them living in the rural areas where health system is still limited, in particular, the insufficiency of elderly health programmes, health staff and nurses, in each district or commune health



centres. Many of the elderly still have little support of income from the RGC, and mostly rely on their children on income and health care at home, which is a burden to their families, in particular during the economic predicament caused by Covid-19.

Since Covid-19 the RGC has implemented social assistance programme to the most vulnerable people including the elderly, under the ID poor scheme of the government. The Ministry of Social Affairs, Youth and Veterans (MoSVY), in collaboration with the relevant ministries and institutions, and local authorities has implemented financial assistance programmes for the poor and vulnerable families affected by Covid-19 including the elderly, who are the target groups, by focusing on health, livelihood and other safe issues. Since 25<sup>th</sup> June 2020, the MoSVY has provided budget support to the elderly 382,404 persons, from the vulnerable families in the urban of Phnom Penh, the urban of the outskirt of Phnom Penh and the rural areas, with the amount of 1,212.69 million \$US (Ministry Social Affairs, October, 2023). Among those elderly, there are 19,935 older persons from rural areas receiving the mentioned financial assistance programme (Ministry Social Affairs, October, 2023). The ministry has visited and supported basic foods and Covid-19 immunization equipment to poor families, including the elderly in the communities.

### **III- The Impact of Covid-19 on the elderly**

So far the MoSVY has collaborated closely with the Ministry of Economy and Finance, and other International Organizations to provide Cash transfer programme for the poor and vulnerable people, including the elderly, as well as to support and make the assessment of the impact of Covid-19 on the elderly, in particular the needs for health support, foods, and income.

The MoSVY has work collaboratively and join the MoU to work together in terms of exchanging informations, reports, conducting research, organizing meeting seminars and training, to enhance the living condition of the elderly, even in the pandemic of Covid-19 to assure that elderly people will be taken into account from the family and the public.

Based on the coloration, the practical research conducted by HelpAge Cambodia in August 2020 during the pandemic of Covid-19 in the communities of Cambodia, more than 300 older people, whose age were 50 years older up, were interviewed through mobile phones in five provinces Battambang, Banteay Meanchey, Siem Reap, Kampong Thom, and Phnom Penh. With the interview, the research has

found with the following problems affected the elderly livelihood ( HelpAge Cambodia, August, 2020)

### **1. Health**

- 70% of older people has at least one health problem (Joint ache and paint, Hypertension, Gastro, Heart problem, Respiratory, Diabetes, and Mental problem)
- 84% has at least one disability (Remembering and Concentrating, Walking, Sight, Hearing, Self-care, and Communication)
- 23% of older people were founded, difficult in accessing to health services from the government, in the communities, during the outbreak of Covid-19.
- 18% of older men and women were facing barrier in accessing message of Covid-19 including hearing, seeing and reading as the material were not designed favorable for the elderly, and the message were not interpreted clearly from the family member of the elderly. This data is, for mostly, the poor family in the rural areas.
- With the insufficiency of health awareness and information dissemination, 67% of older people (73% women and 62% men) has not known the nearest location for treating and providing health service facility for Coivid-19. The percentage is even higher rate for the 80 year older of the elderly which was accounted for 42%.
- Among 70% of the elderly people, who has health problem, there was 21% who has a more difficulty in accessing medicines.
- In the time of Covid-19 outbreak in the communities, there was 69% of the elderly interviewed were able to afford of buying personal protective equipment such as soaps, masks, while there was 31% receiving them from the authorities and charities.

### **2. Food and Income**

- There was noticeable change in diet during the Covid-19 outbreak for the elderly in terms of quality and quantity of foods. For women, there was 40% lower change in quality and 22% in quantity, whereas, for men there was 10% lower change in quality and 28% in quantity.
- In the Covid-19, the interviewed elderly were mostly relied on the remittances from the government and family members, which is

accounted for 56%, and then agriculture (29% older men, and 26% older women), and then business (21% older men and 18% older women). For the older poor and older people above 80 years old, they totally depended on the remittances than the other groups. Due to the economic crisis during the Covid-19, remittances were the only source of income for the elderly, which was not sufficient for them to afford for personal living. There was only 11% of older people receiving regular salary. There was 7% of the older people income was from informal/formal loans with interest, which is a debt burden for the old and their family members facing asset or land deposit as collateral.

### **3. Wellbeing**

- With the impact of income and the concern for health, there was an increase in anxiety and concern for the elderly, in particular the poor older people for the basic needs in everyday life. With the interviewed elderly, there was 40%, feeling worried and anxious most of the time, and 31% some of the time.
- There was 36% of older men and 35% of older women feel depressed during the Covid-19 outbreak in the communities, and the rate is higher which was 42% for the poor older people.
- The older women need more support from families, government and charity than older men, in particular, the older people over 80 (69%), and poor older people 66%.
- The support from the government and other charities for the older people comes from variety of sources including local authorities (27%), relatives and neighbors (21%), the Old People Associations (16%), and some contribution from NGOs.

### **IV- The Government Policies to Support the Elderly**

The Royal Government of Cambodia has been trying to develop policies, laws, and other legislative instruments to improve the quality of life of the elderly, even in the Covid-19 outbreak. So far, we have developed and implemented the following:

- The Constitution of Cambodia, in the Article 42, states precisely obligation of parents bringing up children to be good citizens, whereas the duties of children to take care of their elderly parents in accordance with Khmer tradition. In the Article 72 also states the guarantee of the

welfare of Cambodian Citizens, provided by the government for health care service to the citizens. Poor citizens have been provided with free health care and treatment in public hospitals, nursing centers and maternity centers.

- The Government has built provincial hospitals, nursing centers and maternity centers in the rural areas. In the present, there are 1 283 Health Centers, 117 Health Posts, 131 Referral Hospitals (11 National Hospitals, 25 Capital-Provincial Referral Hospitals, 95 District Hospitals), in which older people health services have been included.
- The implementation of the National Ageing Policy 2017-2030
- The implementation of the Action Plan 2018-2020 of the National Ageing Policy
- The Altering the Action Plan 2018-2020 of the National Ageing Policy to Action Plan 2021-2025 of the National Ageing Policy
- The Implementation National Social Protection framework 2016-2025
- The National Population Policy 2016-2030
- The Rattanak 5 Strategic Plan 2019-2023
- The National Health Policy and Strategy for Elderly Health Care 2016
- The establishment of 1,646 Elderly Associations in the Communes / Sangkats with 288,051 members (Data of 2018) to provide the elderly with the opportunity to live in active old age, and help improve well-being of the elderly through collective activities.
- The established the National Center for Protection of the Elderly with the aim of training, researching and caring for the elderly and providing care service for them.
- The National Action Plan on Prevention of Violence against Women 2019-2023
- The Madrid International Declaration and Action Plan 2002
- The ASEAN Human Rights Statement 2012
- The National Disability Strategic Plan 2019-2023
- The Kuala Lumpur Declaration on Ageing - Empowering Older Persons in ASEAN Adopted-ASEAN Human Rights Statement

- The Collaboration with HelpAge Cambodia to establish and manage the Elders Associations in the grassroot levels.

Though the above achievements have been made, there still are some challenges that the RGC has met as following:

- There is unclear and insufficient data of the elderly
- There is still limitation of human resource in the ministry
- There is insufficient budget to support the elderly
- There is limitation of technical skills to support the Elderly Association
- There is no technical expertise of the elderly

## **V- Conclusion**

There has been strongly effect on the elderly during Covid-19 pandemic in the communities, in particular the elderly living in the rural areas, and from the poor family background. The RGC has implemented many supported policies and assistances to help the elderly who suffered from the Covid-19 crisis by providing financial, food, and medical support. Though the RGC's support is not sufficiency in Covid-19. With the research by HelpAge on 300 older people, whose age were 50 years older up, were interviewed through mobile phones in five provinces Battambang, Banteay Meanchey, Siem Reap, Kampong Thom, and Phnom Penh, they have been struggling with their difficulties in terms of public health access, well-being, and in particular income security.

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## **Country Profile Lao PDR**

### **Ministry of Labour and Social Welfare**

By: Mr. Berthor TONGPAOTHOR, Director of Disability Development Division,  
The Department of Policy, for Devotees, Disability and Elderly,  
Ministry of Labour and Social Welfare.

#### **I. Introduction**

The COVID-19 pandemic, which first emerged as a health crisis, has rapidly evolved into a global crisis that threatens survival in economic, social, political and epidemiological terms. It has grave consequences for human development, economic stability and sustenance. In Lao PDR, the Government swiftly implemented a nationwide lockdown soon after the first case of COVID-19 was reported in March 2020. Isolation and protective measures have been established by the government of Lao PDR to mitigate the spread of the virus around the country to varying extents. These measures include physical distancing, use of face masks, handwashing, stay-at-home policies, and restrictions on social gatherings. As a result, the general population has experienced drastic changes in day-to-day life, high COVID-19 related fear, and numerous psychological outcomes, such as depression, increased sleep problems, and financial worries. COVID-19 has had significant impacts on various populations, including older people in Lao PDR. The World Health Organization (WHO) provides regular situation reports on COVID-19 in Lao PDR. As of 31 May 2023, there have been 209,028 confirmed cases and 752 deaths since March 2020. Of the cases of deaths, unfortunately, there has been no mention of the number of older persons who have died. Older individuals are particularly vulnerable during the pandemic due to factors such as age-related health conditions and reduced immunity. COVID-19, It can affect people of all ages, but older people and those with underlying health conditions are more likely to develop severe or critical symptoms if infected.

Aging Population Trends in the Lao PDR. In 2015, the older people population in the Lao PDR aged 60 years and above was 431,970 people, accounting for 6.5% of the total population. As of 2020, the number has increased to 510,737 people, which is

equivalent to 7.06% of the total population. It is projected that by 2035, the older population in the Lao PDR will surge to 1,419,821 people, making up 10.25% of the total population(Lao Statistics Bureau, Ministry of Planning and Investment, Lao PDR) with the estimated older population projected to reach 10% of the total population, Lao PDR will enter an ageing society by 2035. By 2050, the elderly population is expected to increase to 15.7% of the total population. The growing older population in Lao PDR is bringing the country into an Ageing Society,

## **II. Policy responses to Older People**

The Constitution of the Lao People's Democratic Republic, revised in 2015 as No. 63/NA dated December 8, 2015, includes several sections and articles related to the elderly. For instance, Article 34 (revised) recognizes and guarantees the human rights and basic rights of citizens, including the elderly, according to the law. Article 28 acknowledges the state and society's responsibility to implement social welfare policies, especially for national heroes, athletes, pensioners, bereaved families, families of those who sacrificed their lives for the revolutionary mission, and those who have contributed to the nation. Additionally, Article 39 outlines workers' rights to rest, receive medical treatment, and obtain assistance in case of incapacity to work, disability, old age, or other cases as determined by law.

In the other hand, Lao PDR has other existing legislations that directly and indirectly define many aspects of the older persons, such as the Law on Social Security No. 54/NA dated June 27, 2018, the law on Health Insurance No. 60/NA dated December 13, 2018, The Law on Construction No. 05/NA dated November 26, 2009, The Law on Sanitation and Health Promotion, revised version No. 73/NA, dated November 22, 2019, The Law on Treatment, revised version No. 58/NA dated December 24, 2014, The Law on Statistics, revised version No. 24/NA dated May 11, 2017, The Law on the Allocation of Resources and Occupations, No. 45/NA dated June 15, 2018, The Law on Land Traffic, amendment No. 23/NA dated December 12, 2012, The Decree on Lifelong Learning No. 208/PM, dated March 12, 2020. As specially, The most notable legislation among these is the Decree on the Older Persons No. 473/PM, dated July 12, 2021, This legislation directly defines the Older Persons with complete content and covers many crucial aspects related to them. These aspects include the rights and obligations of the Older Persons, caring for them, promoting, treating, and



restoring their health, providing welfare, education and sports, promoting employment, culture and recreation, providing access to buildings, places, and public transportation, generating statistics on the Older Persons, establishing senior citizens' associations, and managing and supervising the work of the Older Persons.

The government of Lao PDR issued the National Policy for the Older Persons of the Lao PDR, which serves as an important foundation for managing Older Persons care as a unified system. This policy extends from the central level down to the local areas, resulting in significant improvements and expansions in our country's Older Persons policy, alongside other initiatives. The National Social Protection Strategy was officially approved and promulgated according to Decree No. 224/PM, dated April 1, 2020. Its primary aim is to ensure that venerable groups in society, such as children, disabled people, and the Older Persons, can access health services, have a basic income, and gradually improve their quality of life. On the other hand, currently, Lao PDR are now developing a national strategy, and action plan on Older Persons. It covers many aspects, including health, welfare, education, sports, employment, culture, recreation, accessibility, public transportation, and information related to the work of older persons.

### **III. Older people and COVID-19**

According to the Lao culture and customs, along with the underdeveloped socio-economic situation, prevent society from dividing labor in detail according to industrial and modern economic mechanisms. As a result, family members, spouses, and relatives play a vital role and take primary responsibility for caring for the older persons and keeping them with their families as long as possible. Therefore, family members, especially children and spouses, are the main caregivers who provide food, water, cooking, dressing, bathing, and other basic needs in the daily life of the older persons. When older person becomes seriously ill, family members take them to a health center, a small hospital, or a large hospital for medical treatment. The National Social Security Fund covers the cost of treatment for older pensioners who are insured by the National Social Security Organization, while the law on health insurance covers the cost for ordinary people who are not insured by the National Social Security Organization, those who have contributed to the National Health Insurance Fund, and the poor older persons. However, the uninsured older persons and their families bear the cost of treatment.

The government of Lao PDR has established a social service system to provide for the Older Persons, which includes a social security system providing pension support in accordance with the law on social security, as well as a health insurance system as per the law on health insurance. Civil servants, soldiers, police officers, workers in labor units (including enterprise employees), and volunteers who have contributed to the social security fund part of the National Social Security Organization receive a pension subsidy throughout their old age upon reaching retirement age. In total, there are 41,090 people in this category, while the enterprise sector has 4,536 people (Lao Statistics Bureau, Ministry of Planning and Investment, Lao PDR, 2021). As per the Law on Health Insurance No. 60/NA, dated December 13, 2018, there are 5,814,869 people are entitled to health insurance. However, statistical data for the elderly in the public health insurance system is lacking. Nevertheless, the number of older pensioners is 45,626 people in the social security system, everyone is entitled to health insurance subsidies in accordance with the law on social security (Lao Statistics Bureau, Ministry of Planning and Investment, Lao PDR, 2021).

Regarding the income guarantee for the Older Persons, those who are insured by the National Social Security Organization receive regular monthly pensions, which serve as a basic income guarantee for the elderly in the social security system. Those who are not insured rely on their family's income, while the poor and disabled elderly receive limited assistance according to the Decree on Social Assistance. Moreover, the elderly participate and play an important role in society, gathering together and contributing to the community's unity by commenting on various aspects related to their own lives and the lives of others.

According to the data of Lao Statistics Bureau in 2021, the total population of Lao PDR is 7,338,000 persons. Out of this total, 529,000 persons are older persons, and 45,626 persons are older pensioners. This means that only 8.8% of older people receive pension benefits, while the other 91.4% of older persons are not covered by any pension scheme. Regarding the guarantee of income for the older persons, those insured by the National Social Security Organization receive regular monthly pensions, which serve as a basic income guarantee within the social security system. For those who are not insured, they rely on their family's income. Additionally, poor and disabled

elderly individuals receive a limited assistance according to the Decree on Social Assistance.

COVID-19 significantly reduced the wellbeing and income security of many older people, and affects older populations in Lao PDR who are more exposed to the virus and have fewer resources to protect themselves. They often face challenges such as lack of access to clean water, undernutrition, limited access to preventive measures like handwashing and protective equipment, and delayed healthcare when they become ill. Moreover, many older people, especially those living in rural areas, have low and insecure incomes, work in the informal economy, lack access to social protection, and cannot work remotely or adopt safer work practices. Nearly 90% of older persons are unemployed or work in the informal economy. The informal economy tends to provide lower and more volatile incomes and few pension benefits. The adequacy of family support is often limited, as poverty and economic vulnerability faced by the population mean many families have limited resources to share. Remittances from abroad are also declining. While age-disaggregated data in the pandemic is lacking, the loss of income from work and family, alongside the limitations of pension systems, mean that many older people are facing economic vulnerability in the situation of the COVID-19 pandemic.

Social protection is an importance for older people - during COVID-19 and beyond. Although, the National Social Protection Strategy was officially approved and promulgated by the government of Lao PDR in 2020. However, the strategy has not been implemented effectively because of insufficient funding and unclear objectives. Specifically, it is not clear how the strategy will help the elderly cope with the Covid-19 pandemic. Social protection has been an integral component of governments' responses to venerable population including ensuring older people's income security. But Lao PDR has not yet taken measures to improve and expand social protection systems to protect livelihoods, people's wellbeing and economies from the impact of the pandemic, particularly on providing transfers, scaling-up coverage through new schemes or expansions of existing ones, or adapting implementation systems to reduce the risk of COVID-19. Nevertheless, given the spread of Covid-19 and its long-term effects, income assurance and treatment for older persons are crucial, especially

for those in rural areas and those outside the pension system. They still live with their children's families, who are responsible for their care.

During the COVID-19 pandemic, the authorities in Lao PDR have not conducted any research or data collection on the impact of COVID-19 on older people. Therefore, there is no reliable data to show how COVID-19 directly affects older people. However, it can be assumed that some older people in Lao PDR face several challenges and risks related to COVID-19. Some of them are:

- Limited access to health care and social services, especially in rural areas.
- High prevalence of non-communicable diseases such as diabetes, hypertension, and cardiovascular diseases, which increase the risk of severe COVID-19 outcomes.
- Low vaccination coverage among older people, due to various barriers such as lack of information, transportation, or trust. Particularly , in rural area.
- Social isolation and loneliness, which can affect mental health and well-being.
- Increased vulnerability to poverty and food insecurity.

#### **IV. Recommendation and Summary**

There is a lack of comprehensive legislation regarding the older population. A subnational structure for the promotion of the older persons has not yet been devised. Moreover, the work on older people, especially in remote areas, is hampered by the inadequate number of social workers and volunteers who can provide services for older individuals in need of support. The government of Lao PDR needs to facilitate the utilization of social services for older persons. As part of Lao culture, senior family members are always accompanied by a younger family member who serves them. However, the government may have to find solutions for older people, as they face significant challenges in accessing social protection, and public health measures have also limited their access to social services.

Social pensions have been crucial in expanding pension coverage and have played a vital role in protecting older people's income security during COVID-19. However,

coverage gaps remain, and many social pensions are too low to provide adequate protection. COVID-19 has exposed this inadequacy in Lao PDR. To protect older people from both individual and systemic shocks, the government should prioritize the expansion of high-quality social pensions. The continuation and, in some cases, deepening of the crisis are reflected in the significantly rising number of older persons living in extreme poverty. To avoid large-scale humanitarian crises, suffering, and setbacks in human development, governments and partners urgently need to build on the initial expansion of social protection and transition to strengthening social protection systems by filling gaps in the coverage, scope, and adequacy of social protection. While older people without pensions are particularly at risk in this crisis, it is important to remember that growing old without any form of income security is the challenging reality that most people, especially older women, in Lao PDR face. With population ageing gaining steam everywhere, the status quo of about 8.8% pension coverage in Lao PDR is not just a lack of income security in older age, condemning many to live their last years in destitution. It also hinders societies' abilities to make the most of increased life expectancy.

The impact of COVID-19 on older people in Lao PDR can be summarized as follows:

- Older people are more likely to have underlying health conditions, such as diabetes, hypertension, cardiovascular disease, chronic respiratory disease, and cancer, that increase the risk of severe COVID-19 and mortality.
- Older people may face barriers to accessing health care services, such as lack of transportation, affordability, availability, and quality of care. COVID-19 responses may also disrupt the provision and continuity of care for older people, especially those who need regular medication, treatment, or support. particularly, in rural area.
- Older people may experience social isolation, loneliness, and mental health problems due to COVID-19 restrictions, such as lockdowns, physical distancing, and reduced mobility. Older people may also face stigma and discrimination due to their age and perceived vulnerability to COVID-19.
- Older people may suffer from economic hardship and food insecurity due to COVID-19, as they may lose their income, savings, or assets, or face increased living costs and inflation. Older people may also have difficulties accessing social protection

and assistance programs, especially those who live in rural areas, informal settlements, or remote locations

Based on these impacts, I recommend the following actions to protect and support older people in Lao PDR during and after the COVID-19 pandemic:

- Vaccinate older people against COVID-19 as a priority group, following the national immunization plan and the guidelines of the COVID-19 Treatment Guidelines Panel. Ensure that older people have access to accurate and timely information about the safety and efficacy of the vaccines, and address any barriers or hesitancy to vaccination.

- Strengthen the health system and the delivery of essential health services for older people, including primary care, chronic disease management, mental health care, and palliative care. Ensure that older people have access to affordable, quality, and equitable health care, and that health workers are trained and equipped to provide age-friendly and respectful care.

- Promote the social inclusion and participation of older people in the COVID-19 response and recovery, and protect their rights and dignity. Engage older people and their organizations in the decision-making and implementation of policies and programs that affect them, and ensure that their voices and needs are heard and addressed.

- Provide adequate and accessible social protection and assistance for older people, especially those who are poor, or vulnerable. Ensure that older people have sufficient income, food, and other basic necessities to cope with the COVID-19 crisis and its aftermath, and that they are not left behind in the recovery process.

## **Myanmar Country Profile**

Dr. Khin Oo Thet

### **Introduction of the country**

#### **I. Country Profile**

Myanmar, a country with a population exceeding 54 million in 2024, is undergoing significant demographic shifts amidst challenges posed by the COVID-19 pandemic, particularly impacting the older population in rural areas. With over 600,000 confirmed cases and nearly 20,000 deaths reported by the Ministry of Health in February 2024, the pandemic has laid bare the vulnerabilities in Myanmar's public health system and the urgent need for targeted interventions, especially in underserved rural regions where about 70% of the populace resides.

The aging trend in Myanmar is rapidly increasing, with projections indicating that the percentage of the population aged 60 and above, which was 8.9% in 2014 according to the Myanmar Population and Housing Census, will rise to 20% by 2050. This demographic shift is more pronounced in rural areas, where the majority of the older population lives, presenting both challenges and opportunities for societal and economic development.

The aging population trend poses significant implications for Myanmar's healthcare system, social security, and economic structure. There's a pressing need to enhance healthcare infrastructure, particularly in rural locales, to ensure accessible and quality medical care for all age groups, with an emphasis on geriatric care. The country must also develop robust social security systems that provide adequate support to the elderly, including pensions and social services, to ensure they lead dignified and secure lives.

Economic policies should consider the potential contributions of the older population to the economy, through formal employment or other means of engagement, ensuring they have the necessary support and resources. Moreover, societal attitudes towards aging need to evolve, promoting respect and value for the elderly and fostering intergenerational solidarity.

Addressing these demographic changes requires a comprehensive approach that integrates healthcare, social security, economic policies, and educational initiatives. Strengthening primary healthcare facilities, training healthcare professionals in geriatric care, and implementing public health initiatives to manage chronic diseases prevalent among the elderly are crucial steps. Social security systems need to be inclusive, ensuring access to pensions and social services, while economic policies should leverage the potential contributions of the older population.

Furthermore, fostering a culture that values older individuals and their contributions is essential for societal cohesion and inclusion. Intergenerational programs can promote understanding and interaction between different age groups, enriching the social fabric of Myanmar.

The international community and development partners play a vital role in supporting Myanmar through technical assistance, capacity-building initiatives, and financial support. Collaboration on best practices in healthcare, social security, and economic inclusion can provide valuable insights for Myanmar to adapt and implement in addressing the needs of its aging population.

In summary, Myanmar's demographic landscape is characterized by an aging population and challenges exacerbated by the COVID-19 pandemic, particularly affecting rural areas. Addressing these issues necessitates a holistic approach encompassing healthcare enhancements, robust social security measures, inclusive economic policies, and a societal shift in attitudes towards aging. With strategic planning and international support, Myanmar can navigate these demographic shifts to build a more inclusive, resilient, and prosperous society, ensuring the well-being and active participation of all age groups in the country's development trajectory.

## **II. The Impact of COVID – 19 on the older people**

Myanmar also suffer from medical problem, income insecurities, mental and emotional problems as impacts of COVID – 19 especially in rural areas where the health care facilities are hard to access and the overall income of the rural people is less.

Out of all population, the older people population is the most vulnerable during COVID – 19 due to poor immune system to fight the disease, no regular income, difficulty to



access healthcare facility and service, pre-existing health condition, and depending on the younger generation and the family members.

According to studies, about 60% of older people have at least one health condition, such as joint aches and pains, hypertension, diabetes, etc.

The health concern mainly arises from the older people with associating medical conditions where they need regular medication and when the medication supplies are difficult to access due to travel restrictions, lockdowns and increase in demand and price.

Concerns about comorbidity are also increasing especially in those with pre-existing medical conditions.

Another health related concern is that the older people might face difficulties to get health care services during the pandemic because the older people cannot go to the healthcare facilities or service centers and it is also hard for the healthcare personals to reach to those in needs.

Accessibility to food also becomes a problem during the pandemic due to decrease supply, panic buying of the basic products and foods, the closing down of the shops and markets, the travel restrictions and lockdowns, and the fear of infecting of the disease to go to the shop or market.

Moreover, the reducing in income and increasing of the price of the food and other basis products also play a role.

About 46% of older people especially those from rural areas have difficulties accessing the food. (HelpAge International , 2020)

The income insecurity is one of the biggest concerns for the older peoples during the COVID – 19.

Most older people in the rural area had to depend on their younger generation for their incomes.

Some older people work in the agriculture, vendor or labor that paid by daily basis or work basis and many of the older people population do not have the stable income to rely on during the pandemic.

Due to the loss of work and reducing income in the family members to whom the older people had to depend, the income insecurities become one of the biggest concerns for the older people.

The lacking or reducing of regular income make the older people feel anxiety and worry as much as health concerns.

Mental and social wellbeing is the one problem that most older people have to face. Due to the lockdowns and travel restrictions, the family members who are working or studying away cannot come back.

The worries for those family members and the loneliness that had to face during the pandemic effect the wellbeing of the older people.

Some older people have suffered from depression due to these worries. (Current Situation of Elderly People in Myanmar and Active and Healthy Aging)

Also, isolation is one of the worries of the older people. They will have to stay at the healthcare facility or hospital, or at home for isolation if they have infected with the disease or if they have contacted with the infected person and this make the older people to feel frightened or burdened.

### **III. Government responses**

In response to the significant impacts of the COVID-19 pandemic on the older population in Myanmar, the government has implemented a multifaceted strategy to address the immediate health concerns and provide essential support to this vulnerable demographic. Recognizing the heightened risk faced by the elderly, especially in rural areas, the government's initiatives have been tailored to ensure that the older population receives the care and support they need during these challenging times.

To begin with, special healthcare services have been arranged specifically for older individuals to address the unique health challenges posed by COVID-19. This includes the establishment of dedicated healthcare facilities and the provision of specialized medical care to meet the needs of the elderly, ensuring that they have access to timely and effective treatment. The government has also focused on preventive measures, emphasizing the importance of immunization against COVID-19 for older adults. Special vaccination drives have been organized, prioritizing the elderly to protect them from the virus and mitigate the risk of severe illness.

Understanding the socio-economic challenges exacerbated by the pandemic, the government has extended support in the form of basic necessities to ensure that older individuals do not face hardships in accessing food, clothing, and other essential items. This assistance has been crucial in providing relief to those who may be facing

financial difficulties or are unable to procure these essentials due to mobility restrictions or health concerns.

Moreover, the government, with the support of volunteers, has made concerted efforts to improve transportation and accessibility for older individuals requiring healthcare services. Recognizing that mobility can be a significant barrier for the elderly to access medical care, initiatives have been put in place to facilitate easy and safe transportation to healthcare facilities. This ensures that older individuals receive prompt medical attention without the added stress of navigating transportation challenges.

The Department of Social Welfare, operating under the Ministry of Social Welfare, Relief, and Resettlement, has introduced additional measures to support the elderly, particularly those over the age of 85. Recognizing the increased vulnerability of this age group, the government has provided additional social pensions to offer financial stability and support the well-being of the oldest members of the society. This financial assistance is a critical component of the government's response, aimed at ensuring that older adults can meet their basic needs and maintain a dignified quality of life amidst the pandemic.

These comprehensive government initiatives reflect a holistic approach to addressing the multifaceted challenges faced by the older population in Myanmar due to COVID-19. By focusing on healthcare, providing essential support, improving accessibility, and offering financial assistance, the government is striving to safeguard the health and well-being of older individuals. The collaboration between government agencies, volunteers, and the community at large is pivotal in ensuring that these measures are effectively implemented and that the elderly receive the care and support they need during these unprecedented times. The government's response underscores its commitment to protecting the most vulnerable segments of the population and highlights the importance of solidarity and collective action in overcoming the challenges posed by the pandemic.

## **Government laws and policies**

In Myanmar, the government has enacted several laws and policies specifically designed to safeguard the well-being of its aging population, especially in response to the challenges amplified by the COVID-19 pandemic. These legal frameworks and policy initiatives aim to provide comprehensive support, including healthcare, social care, and economic security, to ensure that older individuals can lead dignified and healthy lives.

### **The Elderly People Law (2016)**

One of the cornerstone pieces of legislation in this area is the Elderly People Law, enacted in 2016. This law represents a significant step forward in recognizing the rights and needs of the elderly population in Myanmar. It outlines a broad range of provisions aimed at improving the quality of life for older individuals, including access to healthcare, social support, and opportunities for economic participation.

#### ***Healthcare Provisions***

The law mandates the provision of accessible, high-quality healthcare services for older people, ensuring that they can receive medical care free of charge or at a subsidized rate. This includes the distribution of necessary medications and medical supplies, emphasizing the importance of making these essential services available to the elderly without financial burdens.

Moreover, the Elderly People Law calls for the promotion of geriatric research and the training of healthcare professionals specialized in elderly care. This focus on building capacity within the healthcare system is crucial for addressing the unique medical needs of the aging population, particularly in rural areas where healthcare access is limited.

#### ***Economic and Social Support***

The law also addresses the economic aspects of aging, recognizing the importance of providing older individuals with opportunities to remain active and engaged in society. It includes provisions for facilitating employment for those who are capable and wish to work, through measures such as part-time job creation, vocational training, and financial support for self-employment. Additionally, the law encourages measures to

alleviate the tax burden on employers who hire older workers, aiming to incentivize the integration of the elderly into the workforce.

To further support the elderly, the law advocates for the development of suitable housing and living environments that cater to the specific needs of older individuals. This includes ensuring that public buildings and facilities are accessible to the elderly, promoting their mobility and independence.

### Social Pension Schemes

Recognizing the financial vulnerabilities that many older individuals face, the Myanmar government has implemented social pension schemes targeted at the elderly, especially those over the age of 85. These pensions provide a crucial financial safety net, helping to alleviate poverty among the elderly and ensuring they can cover their basic needs.

### COVID-19 Specific Responses

In light of the COVID-19 pandemic, the government has introduced additional measures to protect older individuals from the virus's health and economic impacts. This includes prioritizing the elderly in vaccination campaigns, ensuring they have early and easy access to COVID-19 vaccines. The government has also organized special healthcare services and established dedicated facilities to cater to the health needs of older individuals affected by the virus.

To address the economic hardships brought about by the pandemic, the government has extended additional support to older individuals, including the distribution of basic food items, essential supplies, and clothing. This assistance is particularly crucial during times of lockdown and movement restrictions, where access to necessities becomes challenging.

### Volunteer and Community Support

The government's efforts are complemented by initiatives involving volunteers and community organizations, which play a vital role in reaching out to older individuals in need. These volunteers help facilitate transportation to healthcare facilities and assist in delivering essential supplies to those who are unable to leave their homes.

## Future Directions

While these laws and policies represent significant steps toward supporting the elderly, there is an ongoing need for their evaluation and enhancement. The government is urged to continually assess the effectiveness of these measures, taking into account the evolving needs of the aging population and the changing socio-economic landscape.

Future policies should focus on expanding healthcare services, particularly in rural areas, to ensure that all older individuals have access to quality medical care. There is also a need for more comprehensive social protection systems that cover a broader range of services, including mental health support and social care.

Moreover, with the aging population expected to grow in the coming years, there is a critical need for sustainable economic policies that can provide stable income sources for older individuals. This includes expanding pension schemes, creating more employment opportunities for older workers, and fostering an environment that encourages active aging.

In conclusion, Myanmar's government has laid down a foundational legal and policy framework to address the needs of its aging population. However, the journey towards a fully inclusive and supportive society for the elderly is ongoing. Continuous efforts are needed to adapt and expand these measures, ensuring that older individuals can enjoy their rights, access essential services, and contribute to society to their fullest potential. As Myanmar navigates the challenges posed by demographic shifts and the aftermath of the COVID-19 pandemic, a concerted effort from the government, civil society, and the international community will be crucial in building a resilient and inclusive society for all ages.

## **IV. Recommendation and summary**

To further enhance the well-being and security of the aging population in Myanmar, particularly in light of the challenges posed by the COVID-19 pandemic, a comprehensive set of recommendations is proposed. These recommendations are aimed at addressing the multifaceted needs of older individuals, ensuring their health, economic security, and social inclusion.

## 1. Strengthen Healthcare Services

### ***Expand Rural Healthcare Infrastructure***

Develop and expand healthcare facilities in rural areas to ensure that older individuals have easy access to medical services. This includes increasing the number of healthcare centers equipped to handle geriatric care and ensuring these facilities are staffed with trained professionals.

### ***Enhance Geriatric Training***

Implement training programs for healthcare workers focused on geriatric care to improve the quality of medical services provided to older individuals. This training should cover chronic disease management, mental health issues, and preventive care tailored to the needs of the elderly.

### ***Increase Mobile Health Services***

Introduce mobile health clinics to provide essential healthcare services in remote and underserved areas, ensuring older individuals in these regions have access to regular check-ups, vaccinations, and treatment.

## 2. Improve Social Protection Systems

### ***Expand Pension Coverage***

Broaden the scope and coverage of social pension schemes to include all older individuals, particularly those without formal employment histories, ensuring a basic income for all elderly citizens.

### ***Implement Subsidized Utility Services***

Introduce subsidies for utilities such as electricity, water, and telecommunications for older individuals, easing their financial burdens and improving their quality of life.

### ***Enhance Food Security***

Develop programs that ensure older individuals have access to affordable and nutritious food, including food distribution initiatives in times of crisis and community kitchens in rural areas.

### 3. Foster Economic Inclusion

#### ***Promote Flexible Employment Opportunities***

Create policies that encourage the employment of older individuals in flexible, part-time, or consultancy roles, recognizing the valuable experience and skills they bring to the workforce.

#### ***Support Entrepreneurial Ventures***

Provide financial incentives, training, and resources to support older individuals interested in starting their own businesses, promoting economic independence and engagement.

#### ***Facilitate Access to Microfinance***

Expand access to microfinance and credit facilities for older individuals, enabling them to undertake income-generating activities and improve their economic security.

### 4. Enhance Social Inclusion and Mental Health Support

#### ***Strengthen Community Networks***

Build and strengthen community networks that provide social support to older individuals, helping to reduce isolation and promote a sense of belonging.

#### ***Implement Mental Health Programs***

Develop mental health programs tailored to the needs of the older population, including counseling services, support groups, and awareness campaigns to address issues such as depression and anxiety.

#### ***Promote Intergenerational Programs***

Encourage intergenerational activities and programs that foster understanding and cooperation between the young and the old, leveraging the strengths of each generation to build cohesive communities.

### 5. Improve Accessibility and Mobility

#### ***Enhance Public Transport Services***

Improve public transportation systems to be more accessible to older individuals, including low-floor buses, priority seating, and discounted fares for the elderly.



### ***Develop Age-Friendly Infrastructure***

Invest in the development of age-friendly infrastructure, such as ramps, handrails, and pedestrian-friendly pathways, to improve mobility and safety for older individuals in urban and rural areas.

## 6. Strengthen Legal Frameworks and Enforcement

### ***Review and Update Existing Legislation***

Regularly review and update laws and policies related to aging, ensuring they remain relevant and effective in addressing the current and future needs of older individuals.

### ***Enhance Enforcement Mechanisms***

Strengthen the enforcement of laws and policies designed to protect the rights and welfare of older individuals, ensuring compliance and accountability across all sectors.

## 7. Promote Active Aging

### ***Encourage Lifelong Learning***

Develop programs that offer lifelong learning opportunities for older individuals, allowing them to acquire new skills, engage in creative pursuits, and remain intellectually active.

### ***Support Volunteerism Among the Elderly***

Promote volunteerism among older individuals, enabling them to contribute to their communities, stay engaged, and share their knowledge and experience with others.

## 8. Engage in International Collaboration

### ***Leverage International Best Practices***

Collaborate with international organizations and other countries to learn from best practices in elderly care, social protection, and active aging policies.

### ***Participate in Global Aging Networks***

Engage in global networks focused on aging to exchange knowledge, resources, and support, enhancing Myanmar's capacity to address the needs of its aging population effectively.

In conclusion, addressing the multifaceted needs of the aging population in Myanmar requires a holistic and proactive approach, encompassing healthcare, economic security, social inclusion, and legal protections. By implementing these recommendations, Myanmar can build a more inclusive, resilient, and supportive society for older individuals, ensuring their well-being and dignity in the face of current and future challenges.

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## **Country Profile of Viet Nam**

Ms. Nguyen Thi Ngoc Thanh

Head of Faculty of Training, Centre of Labour and Social Affairs Training, University of Labour and Social Affairs,

Ministry of Labour, Invalids and Social Affairs

### **1. Name of country and its natural conditions and geographical**

Viet Nam is a country located in Southeast Asia with an area of 331,210 km<sup>2</sup>, including 310,070 km<sup>2</sup> of land and 21,140 km<sup>2</sup> of water surface. Viet Nam's border is 4,616 km long; bordering Cambodia's border 1,158 km; bordering China with 3,444 km of coastline (excluding islands). Viet Nam has a tropical climate in the south, monsoon in the north, hot rainy season (from May to September) and wet dry season (from October to March). Viet Nam's terrain is characterized by low, flat plains in the South, North and Central Highlands; hills and mountains in the far north and northwest. Viet Nam's natural resources include antimony, phosphate, coal, manganese, rare earth elements, bauxite, chromate, offshore oil and gas reserves, timber, hydropower, and arable land. Viet Nam's agricultural land area accounts for 34.8%; Cultivated land accounts for 20.6%; Perennial trees account for 12.1%; Permanent pasture accounts for 2.1%; Forest accounts for 45%, the remaining accounts for 20.2%. The area of irrigated land is 46,000 square kilometers. Major rivers include Tien River Giang River Estuary (Mekong) (shared with China, Burma, Lao, Thailand, Cambodia) 4,350 km; Pearl River source (shared with China 2,200 km; Red River mouth (shared with China 1,149 km).

#### **\* Population:**

The total population of Viet Nam is 104,799,174 people with 54 ethnic groups recognized by the Government of Viet Nam, of which the Kinh (Viet) ethnic group accounts for 85.3%, the Tay ethnic group accounts for 1.9%, the Thai ethnic group accounts for 1.9%, Muong ethnic group accounts for 1.5%, Khmer ethnic group accounts for 1.4%, Mong ethnic group accounts for 1.4%, Nung ethnic group accounts for 1.1%, other ethnic groups account for 5.5% (data 2019 estimates). The official language is Vietnamese; English is increasingly popular as a second language; there are also French, Chinese and Khmer, mountain languages (Mon-Khmer and Malayo-Polynesian). The age structure of Viet Nam is estimated to be 23.44% of people from

0-14 years old, 68.69% of people from 15-64 years old, 7.87% of the total population is 65 years of age or older.

Viet Nam's total dependency ratio is estimated to be 45.6 in 2021; the youth dependency ratio is 32.8; the elderly dependency ratio is 12.7; the potential support rate is 7.8. According to estimated in 2023, the average age is 32.7 years old of which men are 31.6 years old, women are 33.8 years old population growth rate is 0.93% , birth rate is 15.3 births/1,000 people, mortality rate 5.8 deaths/1,000 population, net migration rate -0.2 migrants/1,000 population.

Viet Nam's population distribution: although it is one of the places with the highest population density in the world, the population is unevenly distributed; The largest concentration is along the East Sea and the Gulf of Tonkin, in which the Mekong Delta (in the south) and the Red River Valley (in the north) have the highest population density. Viet Nam has a very high urbanization rate: urban population is 39.5% of the total population (2023), the urbanization rate is an annual rate of change of 2.7% (2020-2025 estimate); total population growth rate compared to urban population growth rate in the period 2000-2030. The population is concentrated in large urban areas such as Ho Chi Minh City (9.321 million people), HANOI (5.253 million people), Can Tho (1.865 million people), Hai Phong (1.423 million people), Da Nang (1.221 million people). million people), Bien Hoa (1,111 million people).

The sex ratio at birth is 1.1 male/female; 0-14 years old is 1.12 boys/girls; 15-64 years old is 1.02 men/women; 65 years old or older is 0.68 men/women; Total population is 1.01 males/female (estimated for 2023). Total fertility rate is 2.04 births/woman (estimated for 2023), comparative ranking is 102nd.

#### **\* Social**

Drinking water source: improved: urban: 99.2% of population; rural: 95.5% of population; total: 96.9% of population. unimproved: urban: 0.8% of population; rural: 4.5% of population; total: 3.1% of population (2020 est.). Doctor density is 0.83 doctors/1,000 people (2016).

Infectious diseases are mainly diseases that are transmitted through food or drinking water; diarrhea caused by bacteria; Hepatitis A; typhoid fever and vector-borne diseases such as dengue fever, malaria, Japanese encephalitis and sexually transmitted diseases such as hepatitis B (2024). The rate of obesity in adults is 2.1%

(2016), ranked 192nd in comparison. The average alcohol consumption per capita in Viet Nam is 3.41 liters (2019 estimate); beer is 3.18 liters (2019 estimate); wine is 0.02 liters (2019 estimate); spirits is 0.21 liters (2019 estimate); comparative ranking 105th. The level of tobacco use is 24.8% (2020 estimate), of which men account for 47.4% (2020 estimate), women account for 2.2% (estimate 2020). year 2020); comparative ranking 51<sup>st</sup>.

Spending on education accounts for 4.1% of GDP (2020 estimate), ranking 113th. There are 95.8% of people aged 15 and over who can read and write (2019 data), of which men account for 97%; Females account for 94.6%. The labor force is about 56.203 million, ranking 12th in comparison. The unemployment rate is 2.17%.

The Covid - 19 pandemic broke out in Viet Nam starting from January 23, 2020 to October 31, 2023. There have been 11,624,114 infected cases, including 11,617,744 domestic cases and 6,370 imported cases into Viet Nam. A total of 4 outbreaks resulted in 43,206 deaths<sup>1</sup>.

## **II. AGING POPULATION TRENDS (INCLUDING THE DEATH RATE OF THE ELDERLY DUE TO COVID-19)**

During the period 2009-2019, the total population increased by an average of 14%/year while the elderly population increased by 4.35%/year<sup>2</sup>. According to the 2019 General Population and Housing Census, the proportion of group(30-59 years old) is very high at 41.4%; The group of elderly people under 70 years old accounts for 6.9%; The group of people aged 70 - 79 years old accounts for 2.9% and the group of people over 80 years old accounts for 2%. Among the total population of 96,208,984 people, there are 11,408,685 elderly people aged 60 and over (accounting for 11.9%). Accordingly, the elderly group under 70 years old has the largest increase. This trend will continue for the next 30 years. The number and % of elderly people under 70 years old in the total number of elderly people increased greatly from 46.9% in 2009 to 58.5% in 2019 an increase of 3.2 million people.

The number of elderly women increased significantly, about 6,631,691 people, accounting for 58.1% in 2019, while according to 2009 statistics, the proportion of elderly women only accounted for 53.7%. The number of women aged 80 and over is

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<sup>1</sup> [Compiled from the Ministry of Health](#)

<sup>2</sup> General Statistics Office (2021). Population and housing census 2019. Population aging and the elderly in Viet Nam.

1.2 million, accounting for 65.7%, in other words, on average, for every 3 elderly people aged 80 and over, nearly 2 are women. The proportion of elderly people living in rural areas is high, accounting for 67.5% of the total number of elderly people who are farmers and work in agriculture. The group of elderly people aged 80 and over living in rural areas (accounting for 74.4% of the total number of elderly people), is higher than the group of elderly people aged 60 - 69 years old (accounting for 65.6% of the total number of elderly people) and the group of people aged 60 - 69 years old (accounting for 65.6% of the total number of elderly people). Elderly people from 70 - 79 years old (accounting for 65.3% of the total number of elderly people).

Viet Nam's population forecast to 2069 under the assumption of average fertility shows that the number of elderly people will reach 17.28 million people (accounting for 16.5% of the total population) in 2029; 22.29 million people (accounting for 20.21% of the total population) in 2038; 28.61 million people (accounting for 24.88% of the total population) in 2049 and 31.69 million people (accounting for 27.11% of the total population) in 2069. The increase in the elderly population is mainly due to the increase in middle-aged and elderly groups. Population forecasts based on the assumption of average fertility show that the proportion of people aged 65 and over will reach 14.17% of the total population by 2036. At that time, Viet Nam will enter the phase of an aging population<sup>3</sup>.

The material life of the elderly in Viet Nam still has many difficulties: the elderly mainly live in rural areas. They are farmers and do agriculture. Over 70% of the elderly have to work to make a living by themselves with the support of their children, grandchildren and families (only more than 25.5% of the elderly live on pensions or social benefits). The elderly living without a spouse accounts for a high rate, in which the number of lonely women is 5.44 times higher than that of men. 70% of the elderly have no material savings, 18% of the elderly live in poor households. More than 30% of the elderly live in permanent houses, nearly 10% live in temporary houses.

Regarding marital status, the majority of the elderly are married or widowed, while other statuses (separated, divorced or unmarried) account for a small

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<sup>3</sup> - UNFPA et al. (2021), using PHC 2009 & 2019.

- ADB (2022), aging population and some key findings from a national survey on long-term care for older people in Viet Nam.

- UNFPA et al. (2021), using data from the population projections 2019-2069 (GSO 2021)

percentage. Over time, the rate of being married increased (from 61% to nearly 68%) while the rate of widowed decreased (from 36.62% to 28.19%). Among the elderly who are widowed, elderly women account for more than 80% of all age groups. The educational level of the elderly population improved significantly over time. However, considering each level, there are clear differences by gender and living area, in which men and people living in urban areas have a higher rate of education than women and people living in rural areas. In both censuses, about 35% of the elderly were still working. However, the majority are vulnerable workers (self-employed or family workers) and there are clear differences by gender, age and living area. In terms of household living arrangements, the proportion of elderly living alone or with only a spouse increased, while other groups tended to decrease. Differences between regions in the living arrangements of the elderly are partly due to the impact of migration. Nearly 100% of elderly households use grid electricity; Nearly 50% use tap water as their main source of drinking water; and nearly 90% use septic tanks (inside or outside the house). However, the difference between elderly groups according to living area and ethnicity is very clear, in that the elderly living in rural areas and the elderly who are ethnic minorities often live in households with lower living conditions than the elderly living in urban areas and the elderly are Kinh people<sup>4</sup>.

### **III. HEALTH OF THE ELDERLY AND COVID-19.**

Although the average life expectancy is high (73.5 years), the number of years of healthy life is low compared to many countries, the average number of years women live with illness is about 11 years and men are about 8 years. Double burden of disease, often suffering from chronic diseases, on average each elderly person has 3 diseases. Mainly non-communicable diseases require long-term treatment and care. About half of the elderly said they had reminded difficulty or concentrated (52.1%). The proportion of older people feeling a lack of companionship (3.9%), feeling abandoned (1.5%) and feeling isolated from others (1.6%). The proportion of elderly people having difficulty in at least one function is 35.73%, much higher in the elderly population compared to other age groups. Official sources of knowledge about self-care for the elderly are not yet popular. Limited access to health care: Only seek medical attention/treatment when sick; The rate of elderly having regular health check-

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<sup>4</sup> General Statistics Office (2021). Population and housing census 2019. Population aging and the elderly in Viet Nam

ups is low; The proportion of elderly people whose health indicators are regularly monitored is low; On average, health care costs for the elderly are about 7-8 times higher than for children, while insurance benefits for the elderly are the same as for other groups.

The majority of people with disabilities are elderly people aged 60 and over. 72.2% of people with disabilities in Viet Nam are elderly. According to 2009 statistics, the number of people with extremely severe disabilities (unable to do anything) accounted for 6.3% of the total number of disabled people. By 2019, this rate increased to 10%.

Table: Aging and disability

Ages	Number	% disability	Number of older disability	% of older disability
5-59	76.980.973	1,2%	908.820	27,8%
From 60	11.408.685	<b>20,7%</b>	2.361.598	<b>72,2%</b>
<b>Total</b>	88.389.658	<b>3,7%</b>	<b>3.270.417</b>	<b>100%</b>

Source: 2019 Population and Housing Census

Problems faced by the elderly:

- Limited health, the rate of people with untreated diseases is still very high in the community. Reduced support and care from children (labor migration, busy children, living alone). Few opportunities to participate in cultural and artistic activities, exchange and improve knowledge. Feminization of the elderly population (income, health, access to services). There are few suitable opportunities to promote in the community. Lack of mutual understanding between the elderly and young people. Limited income: little savings, difficulty accessing loans, little vocational training and have obstacles to accessing health services, such as: Lack of awareness about the importance of early medical examination and treatment (afraid to go to the doctor, can easily buy medicine at the store); difficult physical conditions in medical centers or elderly people are busy with other jobs (taking care of grandchildren, raising animals, housing) so they cannot go for examination and treatment.



#### **IV. POLICY RESPONSES (EXISTING POLICIES, LAWS, FRAMEWORKS, PLANS FOR OLDER PEOPLE AND ADDITIONAL POLICIES, LAWS FOR OLDER PEOPLE DURING COVID-19)**

##### **1. Policy system for the elderly in Viet Nam**

Priority, multi-layered and multi-level policies recently have contributed to ensuring the lives of the elderly, especially health care needs. According to the Ministry of Finance, funding to support social protection beneficiaries (including the elderly) in 2023 is more than 28 trillion VND. In particular, the cost to buy health insurance cards for social protection beneficiaries is 2.4 billion VND (including more than 1.5 million elderly people).

###### *(i) Policy group on social assistance*

Social support policies for the elderly include regular social support in the community; receive foster care in the community; care and nurturing at social assistance facilities, which is detailed in Decree No. 20/2021/ND-CP dated March 15, 2022 with a standard social allowance of 360,000 VND/month with Coefficient from 1.0 - 3.0 for each specific target group. Unscheduled assistance policies are policies to support people and households facing difficulties as a result of natural disasters and crop failures (including the elderly). In addition, the elderly enjoy longevity and longevity policies and are partially supported with funeral and burial expenses...

###### *(ii) Policy group on supporting access to medical and health care services*

With the policy of implementing universal health insurance, ensuring all citizens have access to health services, the law on health insurance has stipulated that health insurance is a form of compulsory insurance for all subjects in the population. society. To ensure that all people can participate in health insurance, especially the elderly, the Social Insurance Law has stipulated the scope and subjects covered by the state budget for health insurance, including elderly people. receiving social benefits, elderly people from poor households, near-poor households; Ethnic minorities living in areas with difficult or extremely difficult socio-economic conditions; People from households working in agriculture, forestry, fishery and salt production have an average standard of living; People aged 80 or older are receiving monthly death benefits. At the same time, the elderly are given priority for medical examination and treatment at public medical facilities, and are exempted or partially reduced in medical examination and

treatment costs from health insurance. In addition, Viet Nam has institutionalized the policy of encouraging the private sector to invest in the construction of elderly care facilities in legal documents on the elderly and referred to the law on elderly people. socialization with detailed incentive regulations on infrastructure, land lease, and tax incentives (registration tax, value added tax, corporate income tax, import and export tax)<sup>5</sup>.

*(iii) Employment policy for the elderly*

The Employment Law stipulates: "Employees are Vietnamese citizens aged full 15 years or older, capable of working and have the need to work." (including elderly workers). In which: Clause 1, Article 4 of the Employment Law stipulates the right to work, freedom to choose jobs and workplaces of all employees. Article 5 of the Employment Law stipulates the State's policies on employment. Chapter II of the Employment Law stipulates policies to support job creation: preferential credit policies for job creation, policies to support job transfer for workers in rural areas, public employment policies, etc. including elderly workers. In general, the system of legal policies on employment and job creation for employees has been promulgated relatively fully and synchronously, creating a legal corridor to promote employment and the labor market, contributing to income generation and ensuring social security. However, there is a lack of separate support policies for elderly workers.

The State has a policy to support the elderly with preferential loans to conduct production and business activities . In cases where elderly people directly engaged in production and business need to borrow capital, they are eligible for loans from the National Employment Fund and will be considered for loans under the job creation, maintenance and expansion support program. at the Bank for Social Policies. Loan capital is from the National Fund for Employment according to local annual plans. Principles, loan amount, loan term, loan interest rate, loan security conditions; Loan processes and procedures comply with the provisions of Decree No. 74/2019/ND on amending and supplementing a number of articles of Decree No. 61/2015/ND-CP

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<sup>5</sup> Clause 2, Article 18, Clause 3, Article 20 of the Law on the Elderly 2013

Article 16, Decree No. 06/2011/ND-CP, dated January 14, 2011, of the Government, detailing and guiding the implementation of a number of articles of the Law on the Elderly

Decree No. 69/2008/ND-CP, dated May 30, 2008, of the Government, on policies to encourage socialization of activities in the fields of education, vocational training, health care, culture, sports, environment".

Article 3, Decree No. 103/2017/ND-CP, dated September 12, 2017, of the Government regulating the establishment, organization, operation, dissolution and management of social assistance establishments.

(effective from November 8). -2019). Accordingly, the maximum loan amount for production and business establishments is increased to 2 billion VND; For employees, the maximum loan amount is 100 million VND. The specific loan amount will be agreed upon by the Bank for Social Policies and the borrower based on the capital source, production and business cycle and the borrower's ability to repay debt; Maximum loan term is up to 120 months. In addition, the loan amount requiring assets to secure the loan has been increased to 100 million VND instead of 50 million VND as before. Thus, the elderly can also borrow preferential credit from two capital sources through the Bank for Social Policies and the National Employment Fund to invest in economic development, create jobs, and improve their lives.

Labor Code: Specifically section 2 of Chapter XI regulates elderly employees, including regulations on encouraging the use of elderly employees and protecting elderly employees (Articles 148 and 149).

The Law on the Elderly stipulates that the elderly "may be provided with working conditions suitable to their health, occupation and other conditions to promote the role of the elderly" (Point dd, Clause 1, Article 3); The State, society and families create conditions for the elderly to promote their valuable wisdom and experience and good qualities in economic development, poverty reduction and lawful enrichment activities (Clause 5, Article 23).

### **3. Policy during the Covid – 19 period**

During the Covid - 19 period, the elderly are supported according to the Government's covid support policies such as: Relief package of 62 trillion according to (Resolution No. 42/NQ-CP dated April 9, 2020 of the Government of Viet Nam and Decision No. 15/2020/QD-TTg dated April 24, 2020 of the Prime Minister ): At least 3.7 million people benefited (estimated from the number of elderly beneficiaries. 6.498 million people benefit from social security programs (including during the social distancing period) (estimated from the number of elderly people receiving pensions, social benefits, etc.). 5.8 million people, including elderly farmers, are exempt from agricultural land tax until 2025, reduce electricity costs. Resolution No. 116/2020/QH14 dated June 19, 2020 of the National Assembly: supporting a 30% reduction in corporate income tax for the 2020 fiscal year for all businesses with

revenue under 200 billion VND (8,000,000 VND). 8 million USD) (small and medium enterprises-SME): 35,000 elderly business owners are eligible to benefit.

#### **4. The impact of COVID-19 on older persons in Viet Nam 2020**

According to statistics from the Ministry of Health in December 2021, the 10 provinces and cities with the highest death rate of COVID-19 patients in the country are Ho Chi Minh City, Binh Duong, Dong Nai, An Giang, Tien Giang, Long An, Tay Ninh, Can Tho City, Dong Thap and Kien Giang. Analysis of the number of deaths shows that 47.67% of people over 65 years old have underlying health conditions; 36.58% are people aged 50-56 years old; 18-49 is 15.34%; The group from 0 to 17 years old is 0.42%. The above figure shows that the total number of deaths aged 50 and over accounts for 84%.

Both economy restoration and support rollout have had positive effects on older people's financial situation. However, when surveyed, *income security is still their top concern*<sup>6</sup>. Some further evaluation of older people's difficulty can be presented as below:

Reduced support from offspring and relatives to older people: In Viet Nam, a big source of income for older people is family support (32%)<sup>7</sup>. However, since the outbreak, 75% of households had their income reduced<sup>43</sup> and 31.8 million labours (more than half of workforce) were negatively affected<sup>8</sup>. Therefore, is expected that assistance to family members, including older members, has declined. Specifically, households with older members (70+) needing medical care can temporarily fall into poverty because of COVID-19<sup>9</sup>.

*Job loss, work hiatus, reduced income and limited savings:* More than half of the older population still works<sup>10</sup>. Most do unskilled jobs, are self-employed or unpaid family-contributing workers<sup>11</sup>. It is calculated that 81.4% of older workers (60+) in the economy are informal<sup>12</sup>. Meanwhile, informal workers actually bear the most

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<sup>6</sup> Age disaggregated analysis from Rapid assessment on impact of COVID-19. Viet Nam Women Union, Aug 2020.

<sup>7</sup> [Viet Nam National Survey on Ageing](#). Associate Professor Giang Thanh Long, 2011.

<sup>8</sup> [Due to COVID-19, 31.8 million people were negatively affected](#). General Statistics Office of Viet Nam, Sep 2020.

<sup>9</sup> [UN assessment of the social and economic of COVID-19 in Viet Nam](#). United Nations Viet Nam, Sep 2020.

<sup>10</sup> [Viet Nam Household Living Standard Survey](#). General Statistics Office on Viet Nam, 2016.

<sup>11</sup> [Understand about older workers in Viet Nam](#). National Center for Socio-Economic Information and Forecast under the Ministry of Planning and Investment, 6 Feb 2017.

<sup>12</sup> [The 2016 Report on Informal Employment in Viet Nam](#). International Labour Organization Viet Nam, 2016.

significant job losses and income losses due to COVID-19<sup>13</sup>. Geographically, the majority (64%) of older people live in rural areas<sup>14</sup>, where households suffer higher declines in income compared to urban areas<sup>15</sup>. In addition, even during the time when COVID-19 was temporary controlled in Viet Nam, older people have still found it challenging to make ends meet because of adaptation to the “new normal”. Amid the pandemic, the Government encourages moving toward a more “contact-free” economy by promoting digital payments, e-learning, telemedicine<sup>52</sup> and digital data sharing.<sup>53</sup> Shopping habits have changed from direct to online, and e-commerce accelerated substantially<sup>16</sup> while traditional businesses remained slow<sup>17</sup>. As a result, businesses without modern platforms are expected to lose a large number of customers<sup>18</sup>. Considering only 4% of internet users are people aged 55+<sup>19</sup>, their businesses, if not advanced technologically, will face greater hindrance and competition.

In particular, the employment crisis is harder for older women. In first six months of 2020, there was a 4.9% decline in the number of non-working age (out of the range of age 15-54) female workers while, for males this percentage even slightly increased<sup>20</sup>. COVID-19, therefore, can exacerbate gender-related labor inequality<sup>21</sup>.

Regarding savings, during the pandemic, most households have relied on savings (74%) to cope with reduced income<sup>22</sup>. However, as the percentage of older people having savings is very low (from 10-30%)<sup>23</sup>, relying on savings is not an option

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<sup>13</sup> [Unemployment rises: More than 31 million workers affected the COVID-19 epidemic](#). Tuoitre online, 10 Jul 2020.

<sup>14</sup> [The elderly in rural areas need to be cared more in terms of physical and mental health](#). General Office for Population on Viet Nam, 10 Dec 2020.

<sup>15</sup> [Monitoring COVID-19 impact on households in Viet Nam](#). World Bank Viet Nam, Sep 2020.

<sup>16</sup> [Online shopping reaches new height amid COVID-19](#). Industry and Trade Magazine, Industry and Trade Ministry, 9 Jun 2020.

<sup>17</sup> [Traditional market "sluggish" after COVID-19](#). Viet Nam national T.V channel VTV, 16 Jun 2020.

[Vietnamese retail business has shifted to the new trend](#). State Audit online newspapers. 25 Aug 2020.

<sup>18</sup> [Online shopping sales rocket in COVID-19](#). Vneconomy magazine, 2 Nov 2020.

<sup>19</sup> [Age distribution of internet users in Viet Nam](#). Statista, May 2019.

<sup>20</sup> [Press release Labor and Employment Situation in Quarter II and the first 6 months of 2020](#). GSO, 10 Jul 2020.

<sup>21</sup> [The job crisis worsened, the ILO warned that the prospect of a labor market recovery is uncertain and difficult to complete](#). ILO, 30 Jun 2020.

<sup>22</sup> [COVID-19 Socio-economic Impact on Vulnerable Households and Enterprises in Viet Nam: A Gender-sensitive Assessment](#). UNDP Viet Nam, Jun 2020.

<sup>23</sup> [Viet Nam National Survey on Ageing](#). Associate Professor Giang Thanh Long, 2011. [70% of the elderly do not have material accumulation](#). Tuoitre.vn, 30 May 2014.

for most of them. Even if they do, they will become more vulnerable with less financial accumulation for later years.

Last but not least, even though the employment rate among informal workers, household businesses and SMEs are showing faster recovery than their counterparts<sup>24</sup>, the situation may not be sustainable. These groups continue to remain less secure if another virus wave happens. The impact can also be long term, as vocational training programs remain exclusively for “working age” laborers and the employment market becomes more skilled-biased<sup>25</sup>.

Gap in pension scheme: On March 15, 2021, the Government issued Decree No. 20/2021/ND-CP regulating social assistance policies for social protection subjects. Accordingly, the regulation raises the standard social allowance from 270,000 VND to 360,000 VND/month for all subjects, including the elderly group. Expanding the subjects and raising the standard of social benefits is a great effort of the Government in the context that the whole country is focusing resources to prevent and fight the Covid - 19 epidemic. Although the increase in social benefits is not high, but has contributed to somewhat reducing difficulties for social protection beneficiaries, including the elderly. Along with increasing pensions for retired officials and current workers, the MOLISA is researching proposals to increase social benefits for social protection subjects in the coming time ”.

### Health and care

Regardless of limited resources and capacity, Viet Nam produced much effort in protecting older people amid COVID-19. There have been general policies that applied to every Vietnamese citizen such as mass communication health messages (some also available in ethnic minority languages, sign language, audio and visual), medical declarations (older people given priority), all costs covered (with or without health insurance) for testing, quarantine/isolation and treatment fees. In the case of older people, they have received further support including: a guidance for COVID-19 prevention for older people and non-communicable disease (NCD) and health management for primary health care during COVID-19; at home check-ups and

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<sup>24</sup> [Taking-Stock-What-will-be-the-New-Normal-for-Viet-Nam-The-Economic-Impact-of-COVID](#). World Bank Viet Nam, Jun 2020.

[Good news for labours but still difficulty ahead](#). Online newspapers of the Gov of Viet Nam, 6 Oct 2020.

<sup>25</sup> [Viet Nam’s future jobs](#). Worldbank, 2019.

treatment; up to 3-month supply of prescription medicines (for people with NCDs); telemedicine promotion; tightened protection layers at social centres<sup>84</sup> (stored surplus medicine, stop in receiving residents, limited visits, regular disinfection, etc). About 10,000<sup>26</sup> older people are being cared for at social protection centres and no infection there was recorded so far.

The measures are balanced between both treatment and prevention (older persons to limit unnecessary travel and pay attention to self-care). There have been no signs of discrimination in treatment for older patients infected with the virus. In fact, thanks to effective resource allocation and containment measures, the health system was not put under a great burden in both times of community transmission and thus had enough capacity to care for all needed patients. Like many other countries in the world, Viet Nam also requires that older people are target subjects of the COVID-19 vaccine. Every manufacturer needs to demonstrate the effectiveness of the vaccine by using a test injection in this group.<sup>86</sup> Viet Nam is among 40.

### **Social issues**

In need of community-based care and age-friendly communities: About 30% of older people in Viet Nam live alone, with another older spouse, or with young grandchildren only<sup>27</sup>, and this rate is a few times higher for older women than men<sup>28</sup>. They care for themselves and are main care givers for others. Social distancing can hurt them the most. In fact, lockdown of infected areas can be carried out overnight or within three days<sup>29</sup>, not allowing families enough time to re-arrange living conditions or carers. Older family members in this case face not just loneliness and isolation but overall lack of support in (instrumental) activities of daily living.

Lower access to information of support package: According to a survey by UNDP Viet Nam, groups who have no knowledge about Government COVID-19 packages mostly are (i) ethnic minority people, (ii) the poorest (who are more likely to

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<sup>26</sup> [Toward a comprehensive ageing adaptation policy in Viet Nam](#). Viet Nam National Committee on Ageing, May 2019.

<sup>27</sup> [Population aging and health care problems for the elderly in Viet Nam](#). Viet Nam Social security Journal, 12 Dec 2019.

<sup>28</sup> [Prepare for older age at younger age](#). MOH, 4 Dec 2019.

<sup>29</sup> [Da Nang applies social distancing at highest risk level](#). Viet Nam News, 28 Jul 2020.

be older people)<sup>30</sup>, (iii) rural citizens (64% older people live in rural area)<sup>31</sup> and (iv) people with lower education (only 51% of older people can read and write easily, 64.9% had no schooling or only completed primary level)<sup>32</sup>. So three out of four groups include a high proportion of older people, which gives us a glimpse of the situation (without available age-disaggregated data). In addition, older adults have much lower access to social media or smartphones<sup>33</sup> to access real-time information. In the future, while society and the economy digitalize more and more, 112 older people may be left behind in important social economic updates.

Daily collision in living arrangement: 10% of multi-generational families admit conflicts happened between family members. During social distancing when all stayed together under the same roof, dealing with stress over income loss and childcare to name but some challenges, there is a high chance that the situation could become worse at times.

Other issues (celebration and anniversary, travel, housing, quarantine procedure): During the social distancing period, traditional festivals, family anniversaries and events which have important meaning to older people were banned or limited. Public transportation (mostly used by students and older citizens)<sup>34</sup> were also shut down. This limited older people's choice of transportation in case of necessity (shopping, hospital visits, etc.). Furthermore, only 31%<sup>35</sup> of older people live in permanent housing. The rest who has to stay at home for a long time in poorer housing conditions may experience negative impacts.

Challenge in meeting physical health and care need, especially for older people with disabilities, facing isolation and other disadvantaged persons: As the SAR-Cov-2 virus has severe impact on people with underlying health conditions and non-communicable diseases (NCDs), older people in Viet Nam are in high risk. Viet Nam is the second ranking country in South East Asia in terms of deaths by NCDs<sup>36</sup>. On

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<sup>30</sup> [Announcement of Viet Nam National Survey on Ageing result: Older people are among the poorest and most vulnerable](#). Online newspaper of the Government, 4 May 2012.

<sup>31</sup> [The elderly in rural areas need to be cared more in terms of physical and mental health](#). General Office for Population on Viet Nam, 10 Dec 2020.

<sup>32</sup> [Viet Nam National Survey on Ageing](#). Associate Professor Giang Thanh Long, 2011.

<sup>33</sup> [Mobile Connectivity in Emerging Economies](#). Pew Research center, 7 Mar 2019.

<sup>34</sup> [Prime Minister report to National Assembly](#). 19 May 2020.

<sup>35</sup> [Viet Nam National Survey on Ageing](#). Associate Professor Giang Thanh Long, 2011.

<sup>36</sup> [WHO's Noncommunicable diseases country profiles](#). WHO, 2018.



average, an older person has three illnesses<sup>37</sup>. Across the country, only 23%<sup>38</sup> of national and provincial hospitals have geriatrics departments (falling behind Ministry of Health's plan to reach 100% in 2025)<sup>39</sup>. The healthcare need of older people is high while the current system is not able to catch up, let alone the fact that resources (including staff) are pulled toward COVID-19 response these days. The Ministry of Health directed to reserve at least one capable medical facility in each province/city for COVID-19 response exclusively<sup>40</sup>.

The situation is more critical for *people with disabilities* (of which 72% are older people and there are more older women than older men)<sup>41</sup>. According to a rapid assessment<sup>42</sup>, 70% of people with disabilities had difficult accessing medical care during the pandemic (including check-ups, medicines, assistive devices and rehabilitation services). 28% found it hard to access necessities, including protective supplies such masks, hand sanitizer, clean water, and soap, and getting adequate supplies of food. Therefore, specific needs of this group have not been addressed well.

Telehealth and other alternative online/distant health services were introduced amid the epidemic. Up to September, 1,000 hospitals/medical facilities have joined the network<sup>43</sup>. Still, the program is at early stage to bring noticeable impact to the public. These services are not yet covered by health insurance and they require modern equipment and tech know-how to access. It will take more time and instruction for older patients in general to enjoy benefits of such programs.

Looking into impact in the future, it has been evaluated that Viet Nam's out-of-pocket health expenditure (its share of current health expenditure of around 45 percent) is not expected to increase as a result of the pandemic<sup>44</sup>. This either means people

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<sup>37</sup> [Viet Nam still faces many challenges in healthcare for the elderly](#). Ministry of Health, 8 Oct 2018.

<sup>38</sup> [Decision 7618/QĐ-BYT on health care for older people in the period 2017-2025](#). Ministry of Health, 2016. [Official Letter No. 6030/BYT-KCB on strengthening COVID-19 epidemic prevention and control at medical examination and treatment centres](#). MOH, 4 Nov 2020.

<sup>39</sup> [Decision 7618/QĐ-BYT on health care for older people in the period 2017-2025](#). Ministry of Health, 2016.

<sup>40</sup> [Official Letter No. 6030/BYT-KCB on strengthening COVID-19 epidemic prevention and control at medical examination and treatment centres](#). MOH, 4 Nov 2020.

<sup>41</sup> Viet Nam population census, 2019.

<sup>42</sup> [Rapid Assessment of the Socio-economic impact of COVID-19 on persons with disabilities in Viet Nam](#). UNDP Viet Nam, 11 May 2020.

<sup>43</sup> [Viet Nam's telehealth program, 1000 facilities join](#). Tuoitre.vn, 26 Sep 2020.

<sup>44</sup> [UN assessment of the social and economic of COVID-19 in Viet Nam](#). United Nations Viet Nam, Sep 2020.

turn more to services covered by health insurance (which are limited) or refrain from seeking medical checkups and treatment not related to COVID-19.

The lack of mental health services and support system (isolation, stress): After the social distancing period, the rate of patients going to the Institute of Mental Health under National Bach Mai Hospital increased significantly, to 250-300 people per day<sup>45</sup>. A health services booking company also received unusual extra calls on mental issues and insomnia. Even though there is no available data on number of older people affected, sharing from doctors has pointed out that people with underlying diseases in their body, especially older people, bear higher mental risks and consequences during the pandemic. *In fact, most older people worry more about families, friends and social issues than about themselves.* There is not yet an organized platform to address and relieve older people's worries, especially those who are isolated at home or experience substantial lifestyle changes (from going out freely and socializing to staying inside). The support is based on the availability of families, friends, communities, local authorities, or the older person's own ability to stay connected (i.e., via phone) and stress free.

Poorer health behaviours (including nutrition) and quality of life: Due to social distancing, health indicators generally decline as people reduce healthier activities such as exercise and sports as well as have less access to food supplies<sup>46</sup>. Food expenses are among those cut off the most during the pandemic.<sup>62</sup> Nutritional security of many households is seriously affected, and the nutritional quality of each meal is greatly reduced.<sup>71</sup> During the epidemic, those having chronic diseases (of whom the majority are older people) were significantly associated with lower quality of life<sup>47</sup>. In the Central and Mekong Delta areas, older people face even greater difficulties due to recent natural disasters (landslide, flood, storm, drought and salinization). There is a shortage of clean water for personal hygiene, drinking and cooking<sup>48</sup>.

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<sup>45</sup> [Psychiatric examination patients suddenly increased](#). Vietnamnet.vn, 14 Oct 2020.

<sup>46</sup> [Promoting employment in Covid-19](#). Communist party of Viet Nam online newspaper, 22 Jun 2020.

<sup>47</sup> [Impact of COVID-19 on Economic Well-Being and Quality of Life of the Vietnamese During the National Social Distancing](#). Bach Xuan Tran, 11 Sep 2020.

<sup>48</sup> [Rapid assessment on the social and economic impacts of COVID-19 on children and families in Viet Nam](#). UNICEF Viet Nam, 17 Aug 2020.

