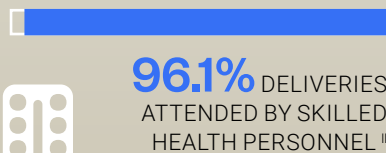
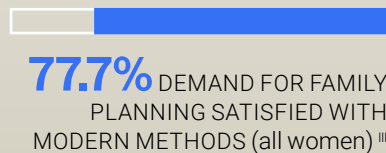
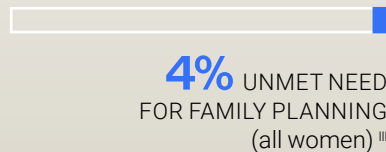
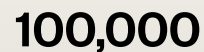
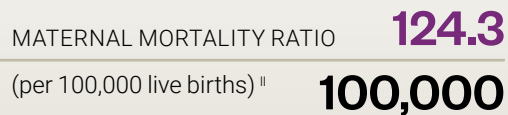
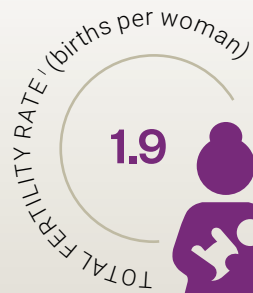


At the Nairobi Summit, the Socialist Republic of Viet Nam committed to completing the unfinished business of the ICPD agenda and achieving the ambitious SDGs by 2030. The country has also committed to evidence- and human rights-based policies and guidelines towards achieving zero preventable maternal deaths. The country has pledged to intensify efforts for the effective implementation and sufficient funding for family planning information and services, to integrate a comprehensive essential sexual and reproductive health package including measures for **preventing and avoiding unsafe abortions and postabortion care into national universal health coverage strategies, policies and programmes**, and to protect and ensure all individuals' rights.



THE SOCIALIST REPUBLIC OF

VIET
NAM



TOTAL POPULATION^I

99,186,470

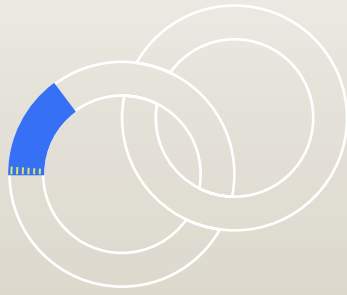
WOMEN (20-24 years) WHO WERE
FIRST MARRIED OR IN UNION^{II}

BEFORE
AGE 18

14.6%

BEFORE
AGE 15

1.1%



LIFE EXPECTANCY AT BIRTH^I **79.4**

75

70.1 LIFE EXPECTANCY AT BIRTH^I

50

25,678,030

WOMEN OF REPRODUCTIVE AGE
(15-49 years)^I

13,759,970

POPULATION 15-24 YEARS
(male + female)^I

25

POPULATION 24 YEARS OR YOUNGER^I **35.97%**

AGE

800,000

400,000

0

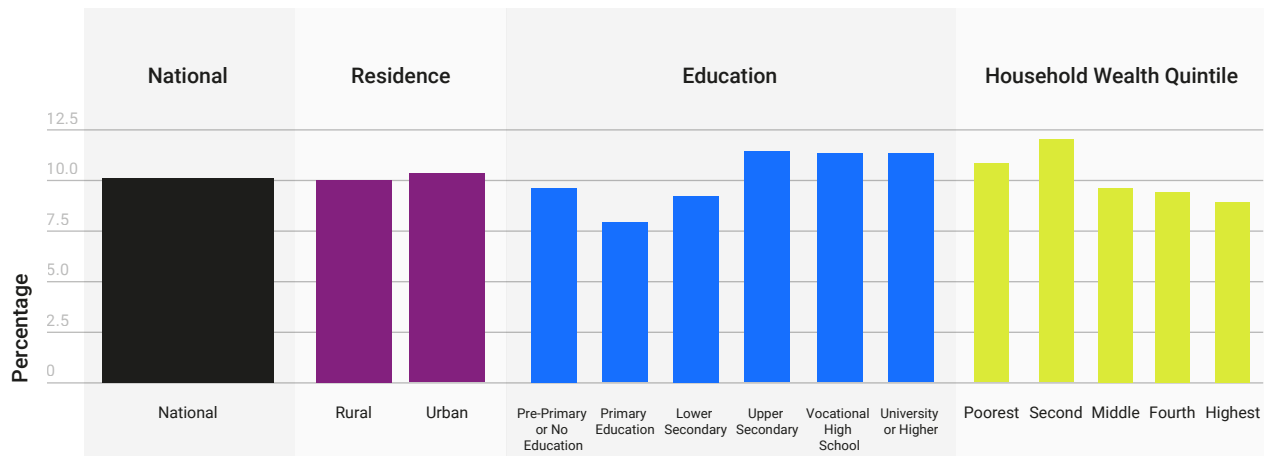
400,000

800,000

MALE < POPULATION > FEMALE

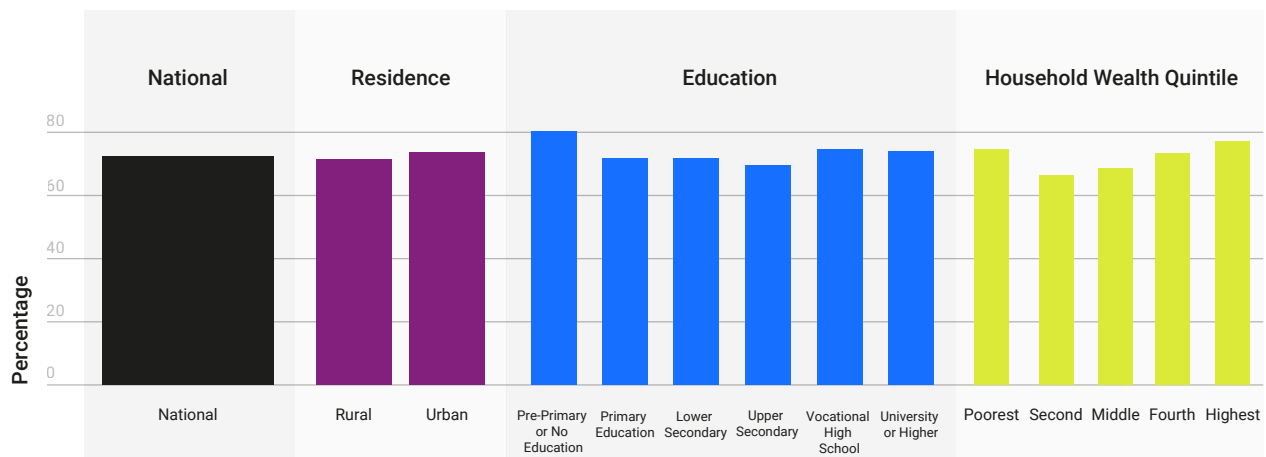
In Viet Nam, unmet need for family planning (approximately 10% in urban and rural areas) and demand for family planning satisfied by modern methods (74% in urban areas and 71% in rural areas) are relatively the same by residence. Unmet need for family planning decreases and demand for family planning satisfied with modern methods increases with higher levels of household wealth. Unmet need for family planning does not vary much by education (9.6% among those with pre-primary or no education compared to 11% among those with vocation or university education), while demand for family planning satisfied by modern methods is higher among those with pre-primary or no education (80%) compared with those with vocation or university education.

Unmet Need for Family Planning



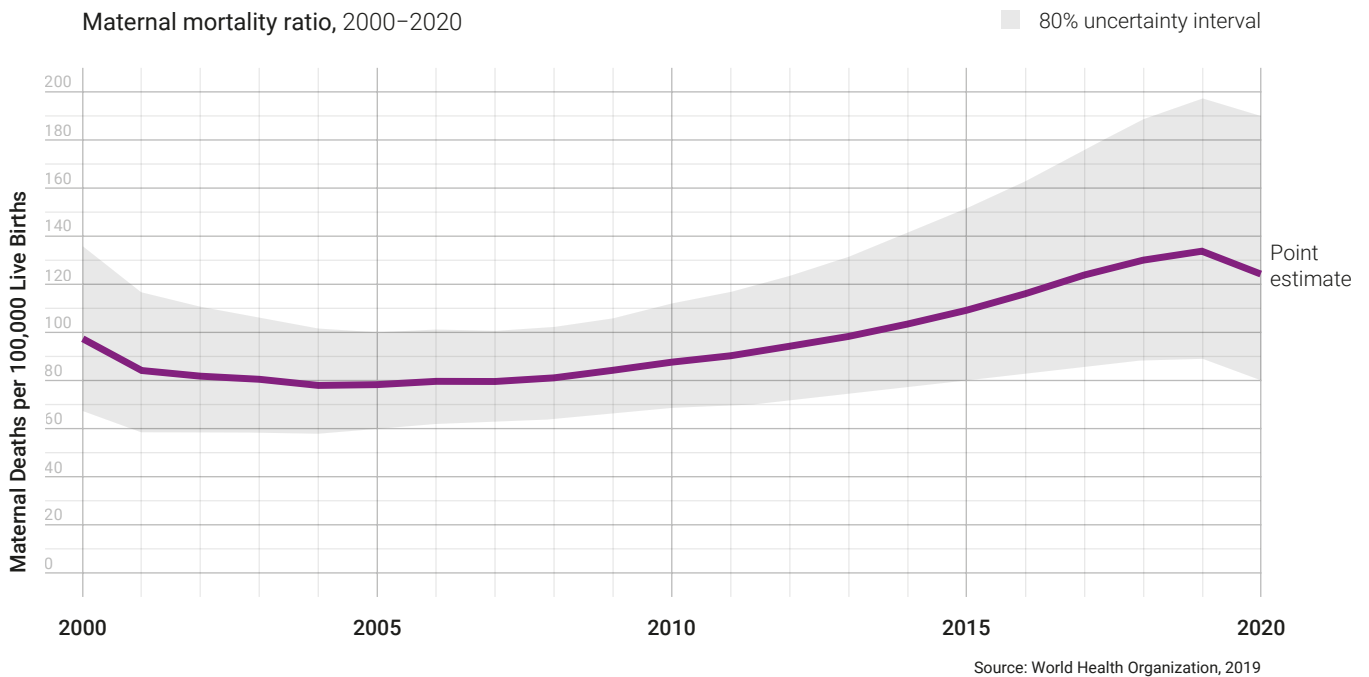
Source: Multiple Indicator Cluster Survey, 2020–2021

Demand for Family Planning Satisfied with Modern Methods



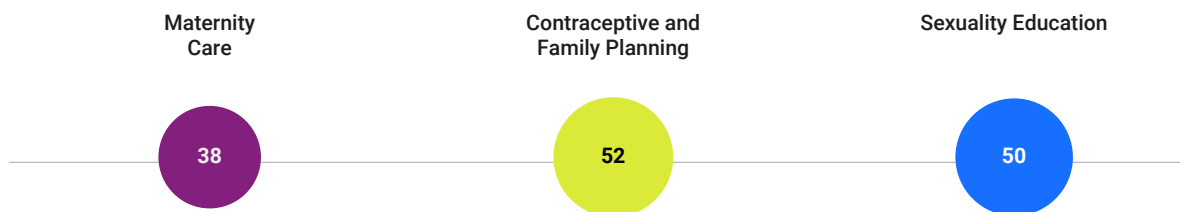
Source: Multiple Indicator Cluster Survey, 2020–2021

Viet Nam’s maternal mortality ratio has increased from 97.4 deaths per 100,000 live births in 2000 to 124.3 deaths per 100,000 live births in 2020, the most recent year for which data is available. The maternal mortality ratio is 1.8 times higher than the SDG target of 70 deaths per 100,000 live births. Recognizing the impact of unsafe abortion on maternal deaths, Nairobi Summit Commitment 3 highlights the integration of “a comprehensive package of sexual and reproductive health interventions, including access to safe abortion to the full extent of the law, measures for preventing and avoiding unsafe abortions, and the provision of post-abortion care into national UHC strategies, policies and programmes, and the need to protect and ensure all individuals’ right to bodily integrity, autonomy and reproductive rights, and to provide access to essential services in support of these rights”. In Viet Nam abortion is guaranteed under Article 44 of the 1989 Public Health Protection Law, with no legal restrictions until the 22nd week of pregnancy.



SDG 5.6.2 reflects the extent to which prevailing laws enable or disable women and men’s full and equal access to health and rights. Viet Nam has achieved 38% of enabling laws and regulations that guarantee full and equal access to maternity care, 52% to contraceptive and family planning services, and 50% to sexuality education.

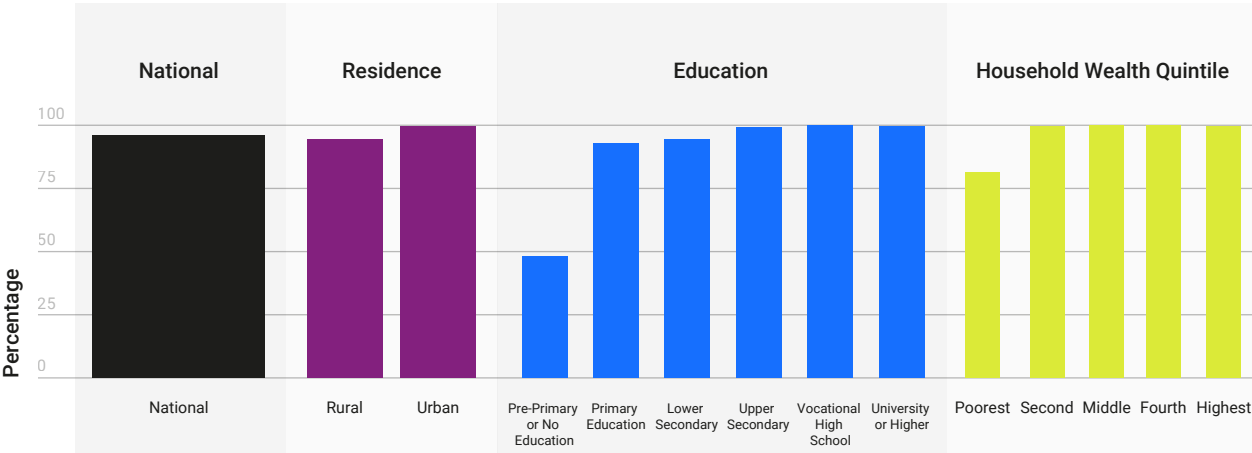
Extent to which Viet Nam has laws and regulations that guarantee full and equal access to women and men aged 15 years and older to sexual and reproductive health care, information and education



Source: United Nations Population Fund, 2023

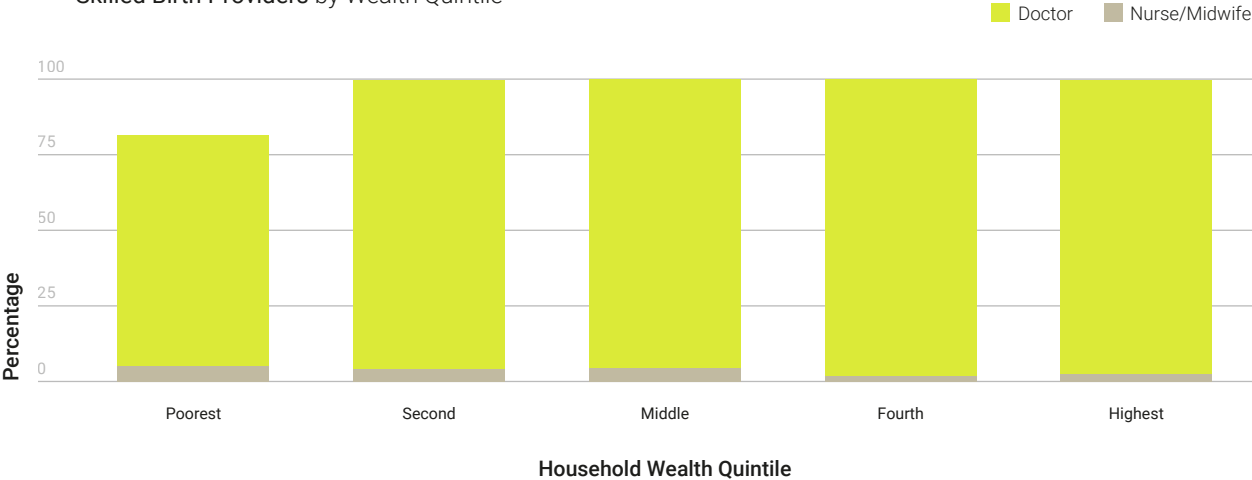
Among married women 15-49 years who had a live birth in the last two years, approximately 96.1% of deliveries were assisted by a skilled attendant; this is one of the highest in the region. The proportion of births attended by a skilled attendant was higher in urban areas (99.6% versus 94.5% in rural areas) and increased considerably with higher levels of education (48.3% among women with pre-primary or no education compared with 99.6% among those with university education) and household wealth (81.4% among women living in the poorest households compared to 99.6% among those living in the wealthiest households). Among women living in the poorest households, approximately 94% of these births were attended by a doctor, and 6% by a nurse/midwife. As household wealth increases, the proportion of births attended by doctors increased to 98%, with 2% of births being attended by a nurse/midwife.

Births with Skilled Attendant



Source: Multiple Indicator Cluster Survey, 2020–2021

Skilled Birth Providers by Wealth Quintile

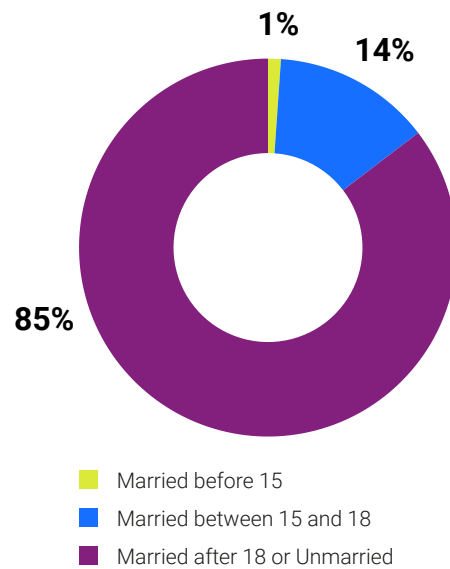


Source: Multiple Indicator Cluster Survey, 2020–2021

Viet Nam has committed towards zero sexual- and gender-based violence and harmful practices (including zero child, early and forced marriage) against women and girls by 2030 in order to realize all individuals' potential as agents of change in their society – both socially and economically. Viet Nam has committed to harnessing the demographic dividend by investing in adolescent and youth education, employment opportunities and health, including family planning and sexual and reproductive health information and services.

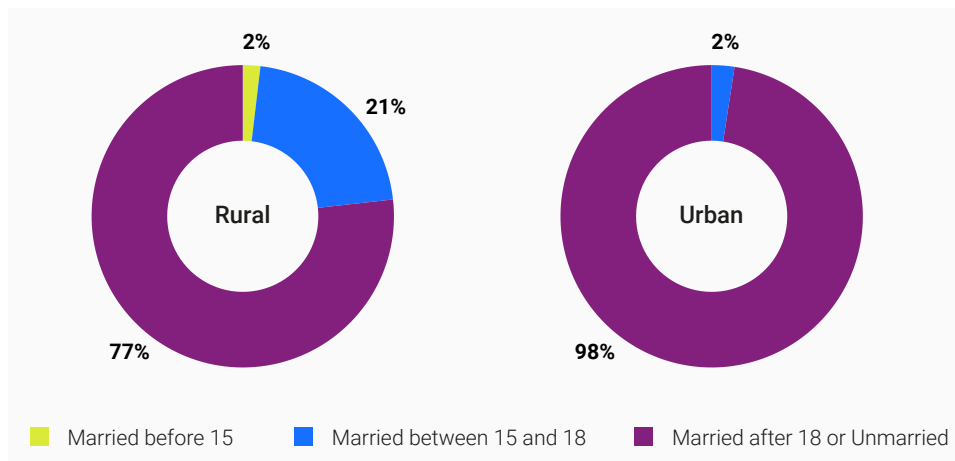
In Viet Nam 14.6% of women aged 20-24 years were married before age 18, with 0.2% married before age 15. Marriage before age 18 is higher in rural areas than urban areas (23.2% versus 2.4% respectively), and it decreases with higher levels of education and household wealth.

Age of Marriage Distribution, Women 20–24



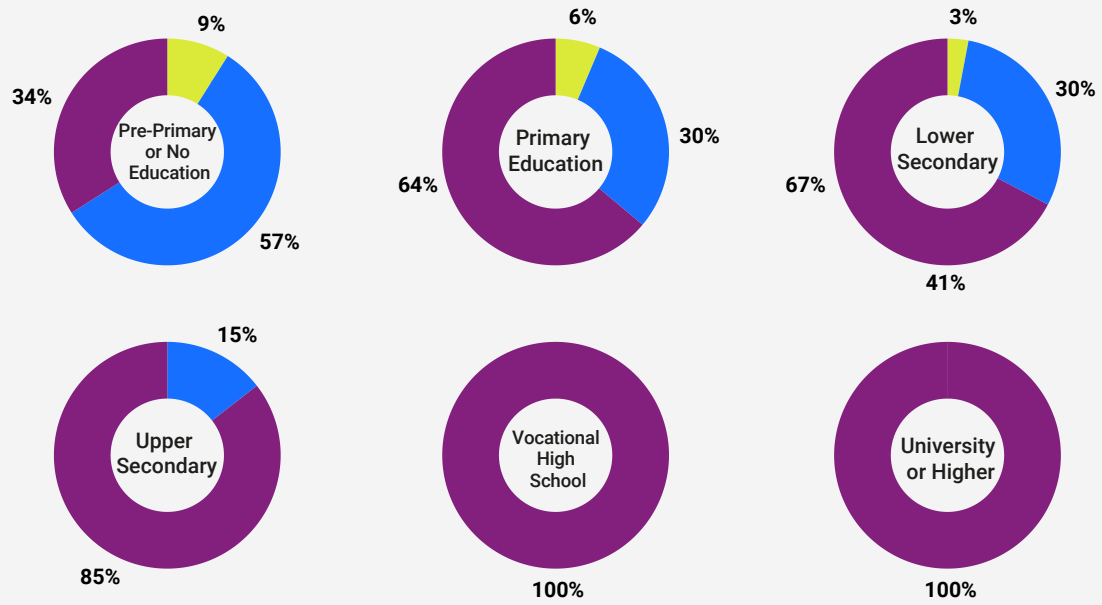
Source: Multiple Indicator Cluster Survey, 2020–2021

Age of Marriage Distribution by Residence, Women 20–24

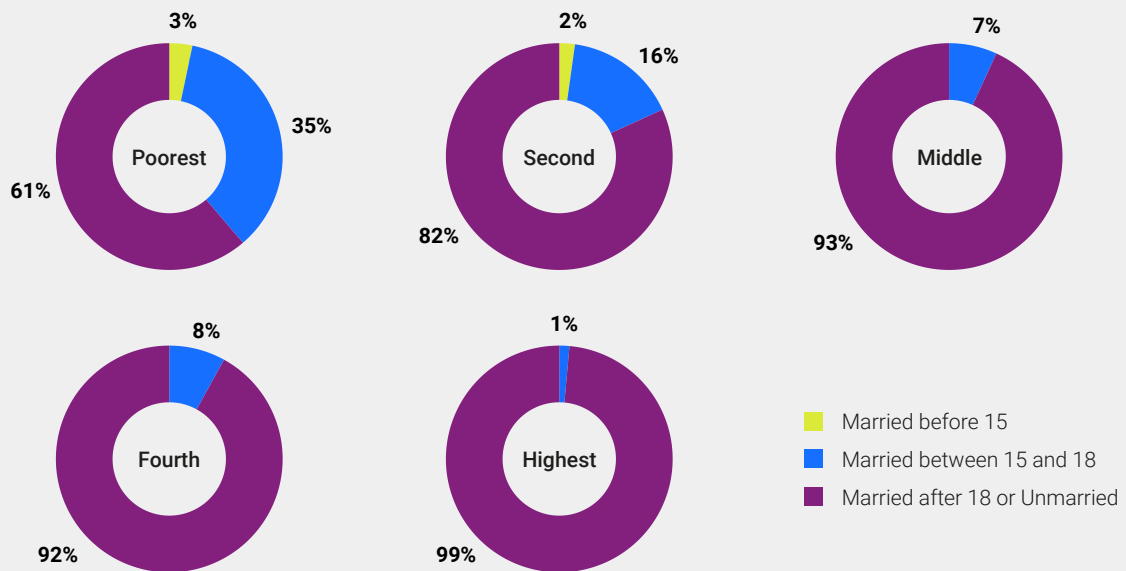


Source: Multiple Indicator Cluster Survey, 2020–2021

Age of Marriage Distribution by Level of Education, Women 20–24



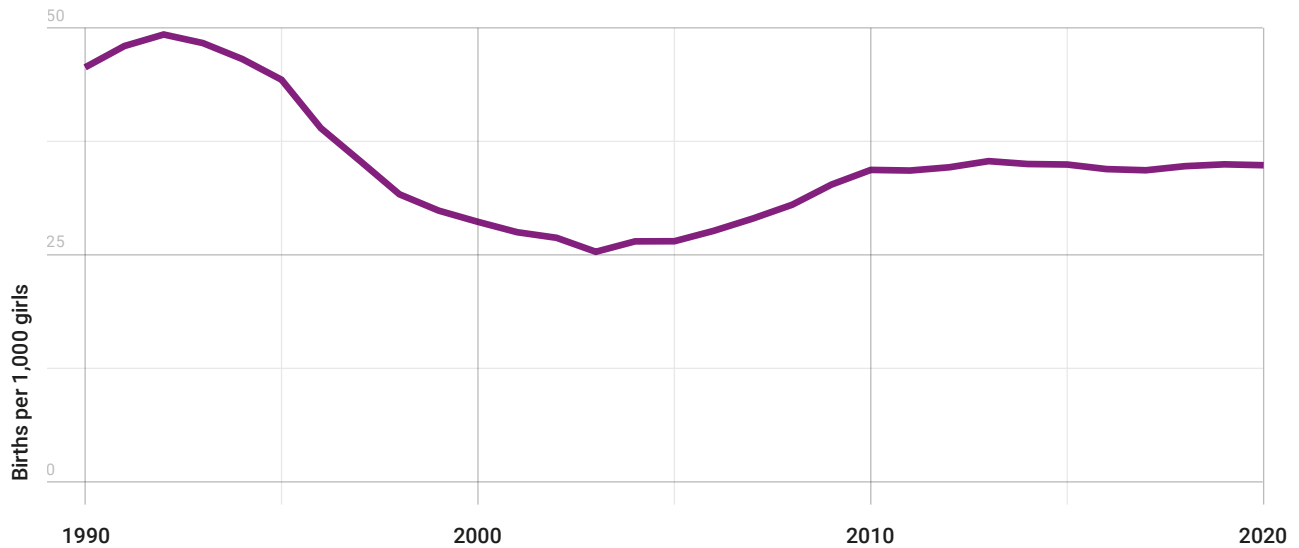
Age of Marriage Distribution by Household Wealth Quintile, Women 20–24



Source: Multiple Indicator Cluster Survey, 2020–2021

The adolescent birth rate in Viet Nam has decreased from approximately 45 births per 1,000 girls in 1990 to 34 births per 1,000 girls in 2020. Eight percent (8.2%) of women aged 20-24 years had a birth before age 18, including 0.1% before age 15; these rates are the lowest in the region. Births before age 15 and age 18 were higher among women living in rural areas, those with no and pre-primary education, and those living in the poorest households. The percentage of women who had a birth before age 18 decreased markedly with higher levels of education (from 25.6% among women with no and pre-primary education to 0% among women with vocation or university education) and household wealth (from 20.8% among women living in the poorest households to 0.3% among women living in the wealthiest households).

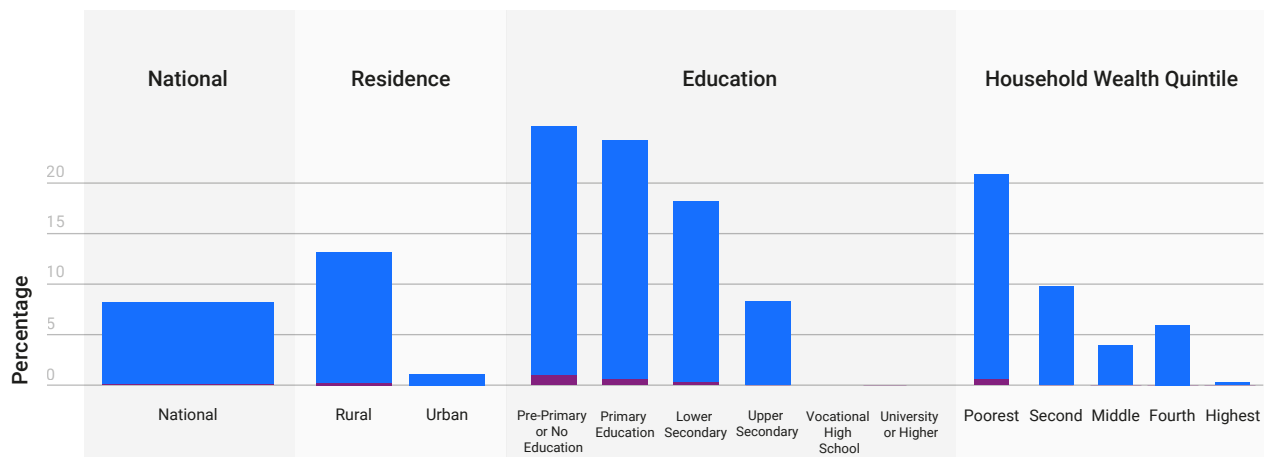
Adolescent birth rate, 1990–2020



Source: World Population Prospects, 2022

Birth Before Age 15 and 18, Women 20–24 Years

■ Birth between 15–18 ■ Birth before 15

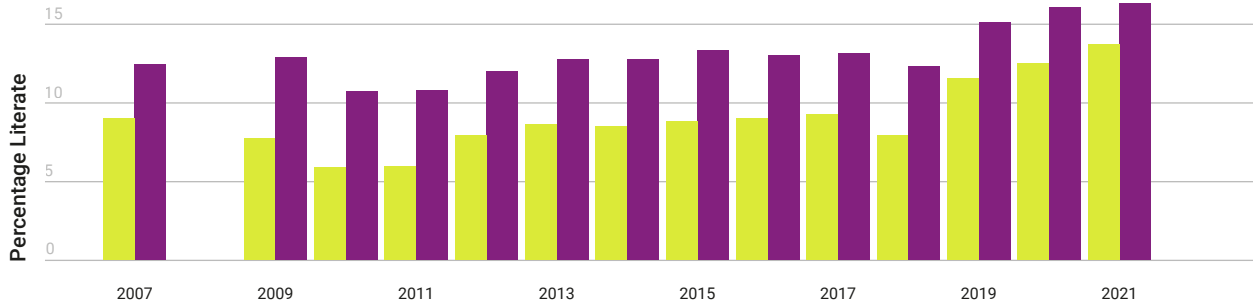


Source: Multiple Indicator Cluster Survey, 2020–2021

Young people who are not in education, employment or training (i.e., the NEET population) quantifies the proportion of young people who find themselves outside of the educational system and without work. In Viet Nam, the percentage of youth not in education, employment or training increased from 2007 to 2021 and was consistently higher for females than for males. The proportion increased from 12.43% among females and 8.99% among males in 2007 to 16.29% and 13.66% among females and males respectively in 2021.

Percentage of Youth (15–24) Not in Education, Employment, or Training, by Sex

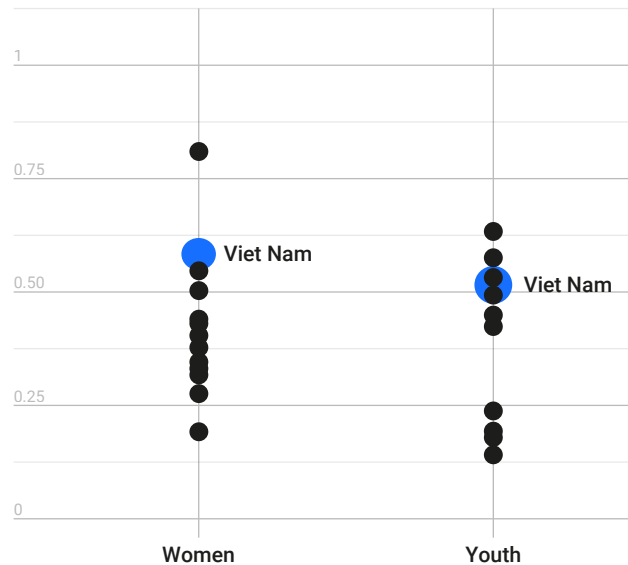
Men Women



Source: Labor Force Survey 2007–2021

SDG Goal 16 seeks to promote peaceful and inclusive societies for sustainable development, to provide access to justice for all and build effective, accountable and inclusive institutions at all levels. One component of this is ensuring responsive, inclusive, participatory and representative decision-making at all levels. In Viet Nam, the ratio of the proportion of female Members of Parliament and the ratio of the proportion of young Members of Parliament are among the highest in the region (SDG 16.17.1).

Ratio of proportion of population in parliament to proportion in national population, Lower Chamber or Unicameral, Eastern and South-eastern Asia



Source: Inter-Parliamentary Union, 2023

Since the Nairobi Summit, the Nairobi commitments have been integrated into various policy documents related to sexual and reproductive health and rights for the period of 2021-2025, including national action plans aimed at enhancing the quality of family planning services, promoting adolescent sexual and reproductive health, implementing a national human papillomavirus (HPV) vaccination roadmap, and addressing maternal and neonatal child health. Urgent needs of those who are left behind, such as ethnic minorities and migrant workers, are at the center of these policy documents.