

2. Issues on Disability

2-1. Definition of Disability in Vietnam

In Vietnam there are several levels and definitions of disability: the traditional assumption, a legal definition, and professionally defined concepts that are internationally standardized by WHO.

1. Traditional assumption

In Vietnam, disabled people were traditionally referred to as those who became disabled due to war or accidents. For a long time, during and shortly after the war, the Ministry of Labor, War Invalids and Social Affairs (MOLISA), which is concerned with the issue of war invalids, had used the term "invalidity percentage of work capability" to classify disabled people for its scheme of providing social allowances. Therefore, only visible physical disabilities were examined and evaluated according to the invalidity percentage of working capability. Children with disabilities, intellectually disabled persons, and those under or above the working age were not examined or evaluated, as they were often excluded from the list for social allowances.

2. Legal definition

The Government of Vietnam, in the Ordinance on Disabled Persons, states:

"Disabled people by definition of this Ordinance, irrespective of the cause of disability, are defective of one or many parts of the body or functions which are shown in different forms of disability, and which reduce the capability of activity and cause many difficulties to work, live, and study".

3. WHO definition

MOLISA, the Ministry of Health (MOH), the Ministry of Education and Training (MOET) and other relevant ministries, agencies, and non-governmental organization (NGOs) are inclined to follow the definition stated under the International Classification of Impairments, Disabilities and Handicaps (ICIDH) issued by the World Health Organization (WHO) in 1980. (See "Technical Notes" at the end of this report.)

2-2. Current Situation

Although no thorough and comprehensive national survey has been conducted to date, it is estimated that persons with disabilities in Vietnam account for about 5-7 percent of the population. As the country continues down its socio-economic development path, improved welfare services are being provided to those in difficult circumstances, including persons with disabilities. April 18 was chosen as the National Day of Protection and Care for Disabled People. Also, the International Day for Disabled People of December 3 is well commemorated in the country. As an active member of the Economic and Social Commission for Asia and the Pacific (ESCAP), Vietnam decided to host the ninth meeting of the Regional NGO Network for the Promotion of the Asian and Pacific Decade of Disabled Persons (1993-2002) in mid-December 2001.

Disability has become an increasing challenge for socio-economic development. Some improvements have been made in the care of persons with disabilities, prevention and rehabilitation, as well as the integration of persons with disabilities into society. However, there remains a lot to be done to undertake this challenge. Currently, 1.3 million people with severe disabilities are receiving allowances and assistance, while a large number of people with moderate and light disabilities are relatively neglected. In some places, in particular rural and mountainous regions, persons with disabilities are often marginalized from the State's welfare programs or receive very little benefit.

Within the scope of this survey, the researchers have made the following findings:

1. Legislation on persons with disabilities is progressive but still inadequate and not effectively implemented
2. National coordination is insufficient
3. Data and information on persons with disabilities is insufficient, widely varied, poorly disseminated, and not updated
4. Public awareness is promoted
5. Accessibility and communication for persons with disabilities is not adequately fulfilled
6. Education for persons with disabilities: inclusive education is progressing while special education remains important in Vietnam
7. Vocational training and employment for persons with disabilities requires more initiatives

8. CBR is effective and efficient not only in prevention, rehabilitation and assistive devices, but also for social and educational aspects
9. Self-help organizations of persons with disabilities and service-delivery organizations for persons with disabilities are great supporters for persons with disabilities in Vietnam
10. Regional and international cooperation plays an important role in helping persons with disabilities in Vietnam

2-3. Documentation and Survey on Disability

National Census

【Title】	GSO Yearbook
【Published】	Last published in 1999
【Items regarding disabilities】 No GSO (General Statistics Office) data on persons with disabilities available	

White Paper and Other Surveys

【Title】	National Survey by MOLISA
【Published】	1994-95
【Items regarding disabilities】 <ul style="list-style-type: none"> ▪ A nationwide study of persons with disabilities in 53 provinces and cities ▪ MOLISA uses WHO definition of disability <p>In MOLISA's most recent survey conducted in 1994-1995, households of seven provinces in the Red River Delta were thoroughly surveyed, but the remaining 46 provinces only underwent the sampling procedure⁵.</p>	

【Title】	Reports and surveys conducted by NGOs jointly with MOLISA and the MOH (Ministry of Health)
【Published】	
【Items regarding disabilities】	

【Title】	Survey on Vietnam Child Disability (MOLISA, UNICEF)
【Published】	1998
【Items regarding disabilities】 <ul style="list-style-type: none"> ▪ Percentage distribution of children with disabilities by various categories ▪ Characteristics of children with disabilities ▪ Attitude of local people towards persons with disabilities ▪ Awareness of rehabilitation services 	

⁵ Vietnam had 53 provinces up until 1995, but currently has 61.

- Use of rehabilitation devices
- Types of support for persons with disabilities
- Aspirations for specific jobs

Data may be missing, overlapping, or miscalculated due to the complexity of classifying disabilities and scale of the survey. MOET, UNICEF, WHO, other agencies, and NGOs also have produced varied estimations on disability-related statistics.

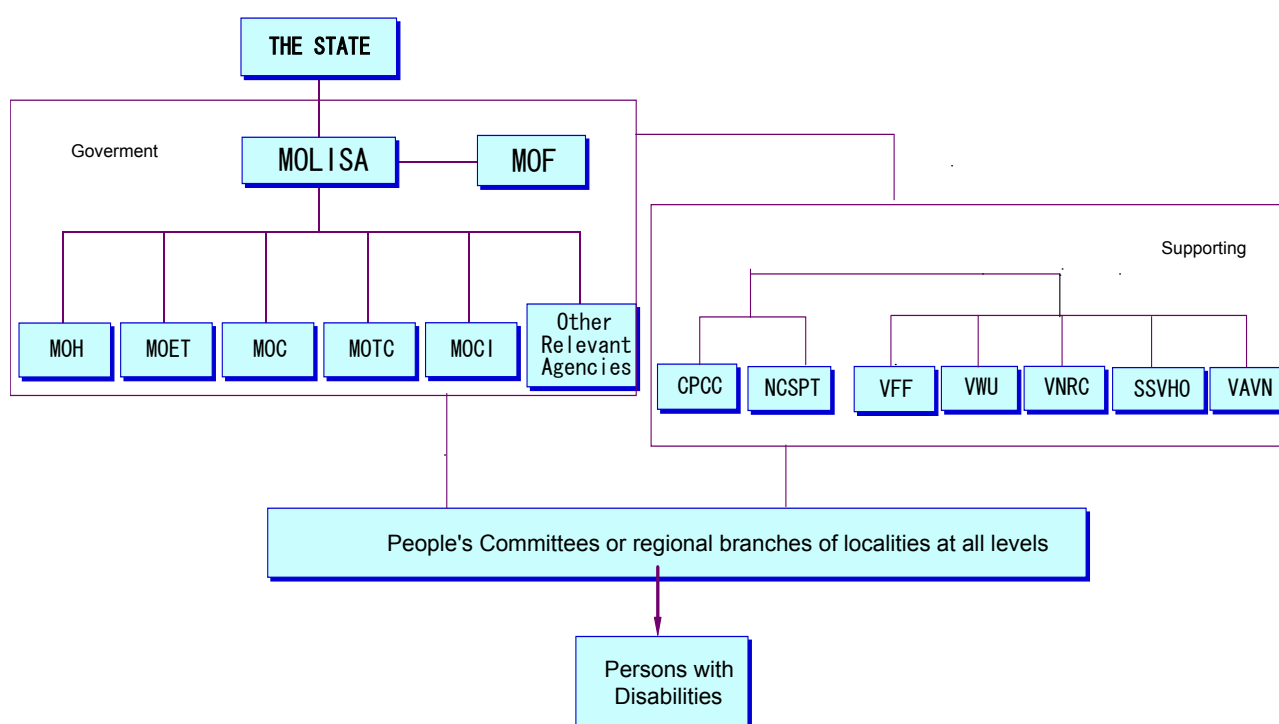
3. Administration and Policy on Disability

3-1. Administration on Disability

Central Government

【Organizational chart】

Figure 8: Government Support for Persons with Disabilities



MOLISA:	Ministry of Labor, Invalids and Social Affairs	CPCC:	Committee for Protection and Care of Children
MOF:	Ministry of Finance	NCSPT:	National Committee for Sport and Physical Training
MOH:	Ministry of Health	VFF:	Vietnam Fatherland Front
MOET:	Ministry of Education and Training	VWU:	Vietnam Women's Union
MOC:	Ministry of Construction	VNRC:	Vietnam Red Cross
MOTC:	Ministry of Transportation and Communication	SSVHO:	The Society for the Support of Vietnamese Handicapped and Orphans
MOCI:	Ministry of Culture and Information	VAVN:	The Veterans of Association of Vietnam

【Disability-related Governmental Organizations】

【Name】	Ministry of Labor, War Invalids and Social Affairs (MOLISA) *Some relevant line ministries (especially MOLISA, MOH and MOET) are engaged in the system, with MOLISA acting as a coordinating agency on behalf of the State.
【Description】	<ol style="list-style-type: none"> 1. Manages the protection and care of persons with disabilities on behalf of the State throughout the country. 2. Studies, promulgates or submits to the government for promulgation, policies applicable to persons with disabilities on vocational training, job creation, and social support. 3. Coordinates with MOF in elaborating the annual State budget for supporting persons with disabilities. 4. Coordinates with other related ministries to support persons with disabilities and guides them on implementation of applicable promulgation policies. 5. Organizes and manages sanatoriums and functional rehabilitation establishments for persons with disabilities.

【Availability of national coordination committee】 Available	
【Committee name】	The National Coordinating Council on Disability (NCCD)
【Committee members】	MOLISA, MOC, Sports and Physical Training Committee, MOH, MOTC, MOCI, MOET and Vietnam Blind Association
【Activities and plans implemented】	
<p>Through recommendations of the Vietnam Assistance for the Handicapped (VNAH) which was established in 1991 and the participants of the Leadership Training Seminar held in August 2000, the NCCD comprising of representatives of each ministry was established in March 2001 to coordinate national support for person with disabilities.</p> <p>The role of NCCD is as follows:</p> <ul style="list-style-type: none"> ▪ To work with relevant agencies to evaluate the effectiveness of disabilities policies, programs and projects of the government, NGOs and mass organizations. ▪ To work with relevant agencies to review and evaluate the implementation of the Ordinance on Disabled Persons. ▪ To coordinate with relevant agencies and give comments regarding development and amendment of legal regulations, laws, codes and standards on disabilities. ▪ To assess the situation and needs of persons with disabilities in coordination with provincial authorities and agencies to develop programs and projects to support persons with disabilities. ▪ To call for financial and technical assistance from individuals, government organizations and NGOs, domestic and international, to support persons with disabilities. ▪ To participate in activities relating to disabilities in the region and in the world. 	

In 1992, the Vietnamese government signed the Proclamation on the Full Participation and Equality of People with Disabilities in the Asia and Pacific Region.

In December 2001, MOLISA, the Organizing Committee of Campaign 2001, the Regional NGO Network for the Promotion of the Asian and Pacific Decade of Disabled Persons (RNN) held the Campaign 2001 Hanoi Conference where 1759 participants from 36 countries converged. Discussions on the promotion of social integration of persons with disabilities led to an agreement by participants on the adoption of the “Hanoi Declaration of Campaign 2001 on the Facilitation of Community Integration of People with Disabilities”. This declaration included items on extending the Asian and Pacific Decade of Disabled Persons for another 10 years, enacting a person with disabilities treaty and support for organizational building.

Local Government

【Local Government Organization】

Local governments are composed of the provincial level. In case of MOLISA, it is composed of DOLISA, DioLISA, and People’s Committees.

【Disability-related Organizations in Local Government】

【Name】	【Description】
Local offices of person with disabilities related ministries (People’s Committees at the commune level are directly responsible for disability issues)	<p>The promulgation of legislation and policies for persons with disabilities is carried out by the central level (the State) but policy implementation by the local governments.</p> <p>Each locality executes management of the protection and care for persons with disabilities depending on its funding capabilities, human resources, as well as its objectives. For example, implementation of the social allowance policy for persons with disabilities depends largely on the determination and budget of provincial authorities.</p> <p>Local officials in the People's Committee often assume the responsibility of taking care of disadvantaged people, including persons with disabilities in the commune by monitoring the state of persons with disabilities, reporting to the district level and delivering monthly allowances and welfare packages to persons with disabilities.</p>

The central ministries are supported by other governmental and non-governmental organizations, and welfare administration in the field is largely taken care of by these local offices. However, it should be noted that there is not yet a full consensus among the different governmental organizations regarding the implementation of laws and regulations as well as on coordination among these agencies. At the same time, concerned organizations play an important role in policy making and enactment, but problems remain in implementation and

evaluation.

3-2. Laws and Regulations on Disability

【Title】	Ordinance on Disabled Persons
【Year Legislated】	1998
【Purpose】	To provide the basis for all disability activities in Vietnam. To set forth general responsibilities of the family, the State and society toward disabled persons, and the rights and obligations of persons with disabilities.
【Description】	Contents of the Ordinance are as follows: 1. General provisions 2. Health care for persons with disabilities 3. Education for persons with disabilities 4. Vocational training and employment for persons with disabilities 5. Cultural and sporting activities of persons with disabilities 6. Funds to assist persons with disabilities 7. States administration on disability-related issues

【Title】	Labor Code, Section III
【Year Legislated】	1994
【Purpose】	Regulations on employment for persons with disabilities in offices and enterprises
【Description】	Articles 125, 126, 127, and 128 lay out the responsibilities of society and the State toward workers with disabilities and provision of financial assistance, as well as the framework for tax exemption, low interest loans for job training institutions and businesses that employ war veterans with disabilities and others regulations relating to laborers with disabilities.

3-3. Policies on Disability

National Development Plan

【Title】	The Ten-year Socioeconomic Strategy The Five Year Plan for 2001-2005
【Year Legislated】	April 2001
【Items regarding disabilities】	Both strategies document social and economic goals emphasizing economic growth, poverty reduction, and social equity.

3-4. Measures on Disability

Prevention, Identification, and Early Intervention

【Current situation】

According to MOLISA's disability survey conducted over 1994-1995, more than one-third of all disabilities were caused by congenital defects, with other diseases accounting for nearly even proportions. War and war-related injuries accounted for about one-fifth of all relatively severe disabilities in Vietnam. Agent Orange has been a cause for over 1 million children with disabilities. As the victims of Agent Orange are the second and third generation of war soldiers and Agent Orange remains in many former battlefields, the number of persons with disabilities affected continues to increase.

Most of the above causes are preventable, particularly diseases and accidents. That is why the Government has undertaken measures to promote public awareness of disabilities. Several programs and campaign activities on the prevention of causes of disabilities have been launched such as the National Week on Work Safety, and National Month on Traffic Safety. Other programs include: dissemination of information on food nutrition and sanitation, drug use and vaccination; management of weapon and explosive materials including unexploded bombs and landmines; provision of iodized salt; detection and management of congenital deformities. Vietnam also claimed a poliomyelitis immunization rate of 100% in mid-December 2000.

The distribution of the causes of disabilities will continue to change over time. The decline in the number of war invalids, the rise in traffic accidents and diseases such as HIV/AIDS, the accelerating pace of aging due to declining fertility rates, and advances in life expectancy are all factors that may cause this change. The MOH is responsible for the prevention and early detection of disabilities and medical rehabilitation. These activities are included in three approaches; which are institution-based rehabilitation services, outreach rehabilitation services, and community-based rehabilitation (CBR) services.

Medical Services and Rehabilitation

【Current situation】

In Vietnam, the MOH takes responsibility for three types of rehabilitation: institution-based rehabilitation services, outreach rehabilitation services, and community-based rehabilitation

(CBR) services. Institution-based rehabilitation is often costly, inconvenient, and accessible by only a minority of disabled people. There are 34 provincial hospitals that have physiotherapy-rehabilitation departments and 80 sanatoriums centers throughout the country. Outreach rehabilitation services are deployed to remote areas and implemented often with assistance from foreign operators (such as Operation Smile).

Government clinics nationwide provide medical care and rehabilitation for persons with disabilities. Those with serious mental conditions are treated and cared for at other specialist clinics⁶.

A survey released by MOLISA (1994-95) found that 56% of persons with disabilities were in need of assistive devices but cannot afford to pay for them, even though the Government of Vietnam has demanded in a number of legal documents that they be provided free or the price be reduced by 30-50% for persons with disabilities. Constraints to these limitations as indicated by relevant ministries are a limited budget and insufficient manpower.

As of 1999, Vietnam had 20 rehabilitation centers (14 centers run by MOLISA, 3 by DOLISA and 3 by MOH) and 54 provincial hospitals with rehabilitation-physiotherapy departments. At the same time, Vietnam had 34 hospitals which conducted rehabilitation services as a part of the army medical service system⁷. In addition, there are also seven Peace Villages and one Friendship Village in Vietnam, which provide accommodation, food, medical treatment, and education to children with disabilities. According to the GSO's 1999 Yearbook, there are 112 sanatoriums managed by the health authorities (MOH, DOH)⁸.

Assistive devices are produced in 8 centers within the country and annually approximately 20,000 devices are distributed through the orthopedic rehabilitation centers and workshops in each province⁹. The Research Institute of Orthopedics and Rehabilitation has been established within MOLISA, provides orthopedic and rehabilitation service to persons with disabilities.

⁶ UN-ESCAP. *Asia and Pacific Decade of Disabled Persons: mid-point country perspectives* 1999.

⁷ Kane, Thomas. *Disability in Vietnam in 1999: A meta-analysis of the data*. October 1999. (originally from MOLISA)

⁸ GSO's Yearbook, 1999

⁹ Nakanishi, Yukiko *Asia no ASEAN shokoku no CBR (CBR in the ASEAN countries)* Retrieved from <http://www.din.or.jp/~yukin/WHOREHA.html>

The government offers low-interest loans to enterprises that produce auxiliary aids for persons with disabilities. There are also no import taxes on professional materials, assistive devices for persons with disabilities, tools and equipment for scientific research on persons with disabilities¹⁰.

【Policy title】	Rehabilitation Development Project
【Year Legislated】	2000-2010
【Description】	Unknown.

Education

【Current situation】

Several laws reiterate the rights of persons with disabilities for education and pledge a strong commitment to providing education for persons with disabilities. Actual implementation, however, has only met half of the target. According to MOLISA's report entitled "Strategy for social protection of helpless elderly, orphan and disabled people in Vietnam", November 1999, only 40-50% of children with disabilities have been empowered with educational knowledge from both inclusive and special education forms¹¹.

In addition, literacy levels of persons with disabilities are lower than the national average. This is a big challenge for those who are working for the integration of persons with disabilities into society and for equalization of opportunities for persons with disabilities. Table 1-3 shows the literacy level of persons with disabilities in Vietnam.

Table 3: Literacy Level of Persons with Disabilities in Vietnam

No.	Level	Urban Area (%)	Rural Area (%)
1	Illiterate	26.6	36.9
2	Literate	73.4	63.1
	(1) Primary school	23.2	26.5
	(2) Secondary school	26.0	21.5
	(3) High school	15.9	4.3
	(4) Other	8.3	10.8

Source: MOLISA's survey 1994-1995

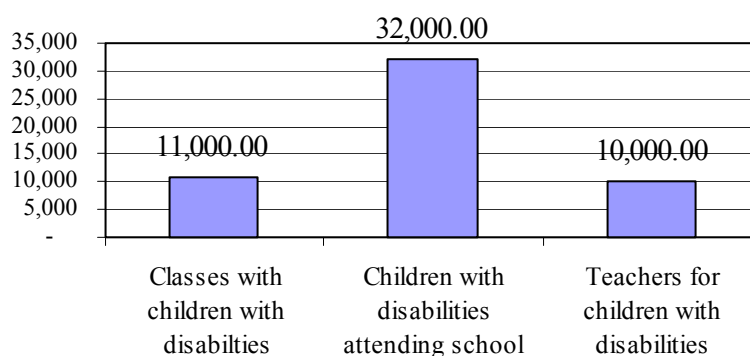
¹⁰ UN-ESCAP Asia and Pacific Decade of Disabled Persons: mid-point country perspectives 1999

¹¹ Strategy for social protection of helpless elderly, orphan and disabled people in Vietnam. MOLISA's report

The situation in urban areas is much more positive than the rural and mountainous areas where most children with disabilities remain at home and receive limited educational tuition. This is due to the lack of specially-trained teachers and teaching facilities for inclusive classes, as well as inconsistent management of special education schools by various entities.

Children with movement/hearing and speech/visual disabilities are encouraged to join normal classes, while children with intellectual disabilities are advised to take special education. Pre-integration classes take place at kindergartens in order to help children with disabilities catch up with their peers in primary school. Up until 1998, 44 districts of 34 provinces in Vietnam had developed inclusive education activities. The number of classes and teachers with children with disabilities and the number of children with disabilities attending regular schools are shown in the chart below. Ministry in charge of education of children with disabilities was transferred from MOLISA to MOET in 1995.

Figure 9: Number of Classes, Teachers, and Children with Disabilities in Regular Schools (1998)



Source: Pierdomenico, Lorenzo. *Community-Based Rehabilitation Program*. December 2000.

As special schools require a relatively large budget, and as inclusive education has positively outweighed special schools in developing the potential of children with disabilities and integrating them into society, the participation of children and adults with disabilities in the mainstream system has become a progressing trend in the education of persons with disabilities. These education institutions remain important for children with disabilities, particularly those with severe or intellectual disabilities. Annually, more than 5,000 children with disabilities attend 79 special education schools and centers. Access to special schools for

children with disabilities is very limited although accessibility increased from 1% in 1991 to 3% in 1995.

Although MOET, the Hanoi National University (HNU) Training and Development Center for Special Education, and NGOs have worked hard to develop special education and inclusive education programs for years, the number of persons with disabilities and particularly children with disabilities participating in these programs remains small compared to those who are in need. The community-based approach to education was introduced in Vietnam in 1990 and has proven its advantage. Children with disabilities are integrated into mainstream schools and learn together with their non-disabled peers. This has become a preferable alternative to meet the educational needs of children with disabilities, in terms of both cost considerations and social integration achievements.

Regarding educational expenses of persons with disabilities, children with disabilities whose families are facing financial difficulties are exempted, totally or partially, from paying school expenses and other contributions. Such benefits and grants are also applicable to those at universities, colleges and vocational training schools¹².

Development of educational rehabilitation of children with disabilities is conducted at the Research and Education Center for Disabled Children of Ho-Chi-Min City. This facility manages the 20 special education schools within the City and some vocational activities in some provinces in the South and the North, trains teachers, implements early care programs for visually impairment holders, publishes Braille books and holds cultural festivals for classes with children with disabilities¹³.

【Policy title】	Law on Universalization of Primary Education of Vietnam
【Year Legislated】	1992
【Description】	<ul style="list-style-type: none"> ▪ Stipulating provisions for children in extremely difficult circumstances ▪ Regulating provision of social welfare and scholarships for students and children with disabilities of war invalids.

¹² UN-ESCAP. *Asia and Pacific Decade of Disabled Persons: mid-point country perspectives*. 1999.

¹³ Nakanishi, Yukiko. *Ajiataiheiyō no shougaiha no kyōiku (Education for Person with Disabilities in the Asia Pacific)* Retrieved from <http://www.din.or.jp/~yukin/ED.html>

【Policy title】	Decision stipulating the provision of scholarships and social welfare to pupils in the public education system
【Legislated year】	1997
【Description】	Regulating provision of social welfare and scholarship for pupils, students and children with disabilities of war invalids

【Policy title】	Decision ratifying the Vietnam National Program of Action for Children in the 2001-2010 period
【Legislated year】	2001
【Description】	The Article 1 and 2 stipulate <ul style="list-style-type: none"> ▪ Specific objectives on grassroots education for children (including children with disabilities), and ▪ Specific objectives on cultural and recreational activities for children (including children with disabilities) respectively

【Policy title】	Program for children in year 2010
【Year Legislated】	
【Description】	Targeting a literacy rate of 95% among children with disabilities

Social Services

【Current situation】

Income and expenditure levels of persons with disabilities are low, or more specifically below 100,000 VND/month/person¹⁴. Most income (70-75%) is spent on food and the rest on other necessities. MOLISA reports that 17.8% of persons with disabilities' income is from social allowances, while 69.37% is from the family, and the rest from other sources.

¹⁴ VND Vietnam dong 1 VND=0.00089 yen (as of March 2002)

Table 4: Number of Persons with Disabilities Receiving Social Assistance 1996 - 1999

No.	Indicator	1996	1997	1998	1999
1	Persons with disabilities who receive living allowances in the community	469,657	483,236	486,833	493,194
2	Persons with disabilities who are cared for at Social Assistance Centers	9,577	9,505	9,581	9,532
3	Total number of persons with severe disabilities	1,295,700	1,297,695	1,300,000	1,305,000

Source: Project VIE/98/039 (MOLISA)

One of the noted situations is that veterans with disabilities receive allowances, whereas only a part of person with disabilities in other groups receives an allowance. This reflects the government's appreciation of soldier contributions during the war. Persons with most severe disabilities are provided with a Health Insurance Certificate, which exempts them from fees for health checkups and treatment. However the provision of this service has its catch, as persons with severe disabilities often do not come to public medical centers for healthcare. At the same time, the reduction or exemption of medical fees is not valid in private medical institutions.

Most public infrastructure facilities do not provide access for persons with disabilities. Barrier-free access regulations and standards are not yet applied to offices, residential buildings, roads, etc. Through mass media programs and national campaigns initiated by the Government, positive attitudes towards persons with disabilities are being shaped and moving forward. However, negative attitudes towards persons with disabilities still exist, for instance the long-held perception that sees persons with disabilities as medical cases and objects of charity.

The Association of Sports for persons with disabilities in Vietnam was established in 1995 and has played an active role in motivating persons with disabilities to participate in a number of sporting activities. Several large events such as wheelchairs races, sporting competitions for persons with disabilities, music performances, and painting exhibitions by persons with disabilities have been organized annually. However, participation of person with disabilities in social activities is not equal, with the exception of visually-impaired persons, other person with disabilities do not have associations to represent themselves and to claim equal rights. In

addition to this, it is recognized that there is an inadequacy of general and particular policies related to transportation and communication.

【Policy title】	Decision No. 167/QD-TTg dated April 8, 1994 and Decree No. 55/1999/ND-CP of July 10, 1999 on the social allowance scheme							
【Year Legislated】	1994, 1999							
【Description】	<p style="text-align: center;">Monthly Allowance for Persons with Disabilities</p> <p>Decree No. 55/1999/ND-CP</p> <table style="width: 100%; border-collapse: collapse;"> <tr> <td style="width: 70%;">Persons with disabilities at communes and wards</td> <td style="text-align: right;">VND 45,000</td> </tr> <tr> <td>Persons with disabilities at the Social Assistance Center</td> <td style="text-align: right;">VND 100,000</td> </tr> <tr> <td>Patients with intellectual disabilities at the Social Assistance Center</td> <td style="text-align: right;">VND 115,000</td> </tr> </table>		Persons with disabilities at communes and wards	VND 45,000	Persons with disabilities at the Social Assistance Center	VND 100,000	Patients with intellectual disabilities at the Social Assistance Center	VND 115,000
Persons with disabilities at communes and wards	VND 45,000							
Persons with disabilities at the Social Assistance Center	VND 100,000							
Patients with intellectual disabilities at the Social Assistance Center	VND 115,000							

【Policy title】	Decree No. 95/CP dated August 27, 1994	
【Year Legislated】	1994	
【Description】	<ul style="list-style-type: none"> ▪ Reduction or exemption of medical fees for persons with disabilities ▪ Provision of a Health Insurance Certificate and exemptions from health checkup and treatment fees for persons with most severe disabilities 	

Vocational Training and Employment Promotion Services

【Current situation】

The majority of persons with disabilities are unable to have professional occupations.

Table 5: Profession Levels of Person with Disabilities in Vietnam 1994-1995

No.	Profession	Urban Area (%)	Rural Area (%)
1	No profession	93.04	98.35
2	Technical workers	3.41	0.88
3	High school professional	1.41	0.39
4	College and university professional	2.14	0.38

Source: MOLISA's survey 1994-1995

The Labor Code and other regulations stipulate in detail and guide the implementation of the Labor Code which states that the government supports persons with disabilities in allocating its annual budget through expenditure on:

- Vocational training;
- Tax reductions for enterprises that employ persons with disabilities;
- Low interest loans; and

- Support in terms of initial infrastructure, tax exemptions, and low interest loans for vocational centers.

Up to now there are about 400 manufacturing factories for persons with disabilities, attracting 100-250 persons with disabilities at each establishment. The National Fund for Job Creation has lent VND27.2 billion to create jobs for blind persons and VND8 billion to create jobs for other persons with disabilities. Moreover, the society also helps persons with disabilities earn a living themselves by working locally on wood processing and construction block manufacturing, rattan mat weaving, and toothpick making in Ninh Binh, Thanh Hoa and some provinces in the South.

Persons with disabilities can borrow low-interest loans to set up their own small size enterprises. They are exempted from paying taxes and given free management and business consultations¹⁵.

The State encourages companies to recruit persons with disabilities as workers, and has set an employment quota by each industry. Electricity and energy, metallurgy, chemistry, geology, cartography, coal and mining, construction, transportation have a 2% quota while other industry quotas are set at 3%¹⁶. employers in reality often continue to refuse that persons with disabilities join their labor forces. Only very prominent persons with disabilities are able to get good jobs, as a lot of employers are still prejudice about the abilities of persons with disabilities.

Regarding vocational training centers for children with disabilities, there are 116 social protection centers and 72 special vocational schools throughout the country. Persons with disabilities have access to work in special establishments after being trained in these centers. According to a preliminary survey jointly conducted by the Department of Vocational Training and the Institute of Labor Science and Social Affairs (under MOLISA) at 10 vocational training centers in 5 Northern provinces in early 2000, 90% of children with disabilities would like to receive training but the actual number is very limited due to a number of reasons. The majority of children with disabilities have been trained to work in

¹⁵ UN-ESCAP Asia and Pacific Decade of Disabled Persons: mid-point country perspectives 1999

¹⁶ Nakanishi, Yukiko *Asia deno Shougaisha no Koyou mondai (Employment problems of persons with disabilities in Asia)* Retrieved from <http://www.din.or.jp/~yukin/107.html>

special fields such as tailoring, embroidering, wood processing, textiles, engineering, and electronics. During 1998 and 1999, 761 children with disabilities enrolled and 617 graduated from these 10 centers.

In addition, there are 16 sheltered vocational training centers of which two are managed by the central government and 14 by local authorities.

Table 6: Training Result for Children with Disabilities in 1998 and 1999

Field	1998		1999		Total Enrollment s in 2 years	Total Graduates in 2 years
	Number Enrolled	Number of Graduates	Number Enrolled	Number of Graduates		
Tailoring	228	165	281	216	509	381
Embroidering	40	35	0	0	40	35
Wood processing	53	48	50	50	103	98
Textiles	18	14	18	18	36	32
Engineering	8	6	0	0	8	6
Electronics	30	30	35	35	65	65
Total					761	617

Source: Institute of Labor Science and Social Affairs (MOLISA)

【Policy title】	The Labor Code, Section III
【Year Legislated】	1994
【Description】	Articles 125, 126, 127, and 128 regulate the responsibilities of society, and the State toward laborers who are disabled and the provision of financial assistance, tax reduction or exemption, low interest loans for job training institutions and business reserved for invalids and others regulations relating to laborers with disabilities.

Community-based Rehabilitation (CBR)

【Current situation】

40 provinces have carried out CBR activities through the network of Primary Health Care reaching the needs of many persons with disabilities at the grass-roots level. CBR suits Vietnam as it involves not only medical rehabilitation but also social and educational aspects which make it efficient and cost-effective.

In response to the inappropriate and insufficient institutional services provided for persons with disabilities, the CBR approach was initiated in Vietnam in 1987 and has developed rapidly. Recognizing the achievements of the CBR activities, the Government has adopted

CBR as a national strategy to cope with disability-related matters. Up to March 2001, however, 40 provinces were covered by this approach, while the remaining 21 provinces are still "vacant". As estimated by MOH, 20-30 persons with disabilities in each community have received CBR. Physical rehabilitation is the central activity of CBR. Currently, there are about 10,000 CBR workers at the community level, excluding 800 CBR experts and trainers at the central and regional government levels.

Finding solutions to the following problems raised by MOH are of high priority.

- Lack of a committee to manage CBR programs
- Lack of linkages between regional development and CBR programs within the local government administration
- Low social recognition of CBR
- Little investment in training families of persons with disabilities
- Lack of an office to oversee research and management
- Many financial problems

Communication tools

【Current situation】

Communication tools for persons with disabilities such as Braille letter boards, cassette tapes, sign language, and hearing-aids are still limited and expensive. Furthermore, persons with disabilities have very few opportunities to gain exposure to mass media or formal occasions.

3-5. Experts and Workers in the Field of Disability

【Job title】	【Role and activity】	【Training and qualification system】
Communal workers	Responsible for the delivery of the State's allowance and other welfare services to persons with disabilities. It is estimated that there are about 10,000 communal workers throughout the country.	Most communal workers have no specific training for the care of persons with disabilities. Some of them may have attended short training courses on social affairs and policies, which MOLISA occasionally organizes. In some areas, the responsibilities of communal workers are assigned to health workers or members of the local Women's Union, Veteran Association, or Youth Union.
Healthcare staff at Communal Health Station (CBR workers)	Mainly responsible for healthcare but sometimes assume responsibilities of communal workers when full-time communal workers are unavailable.	Seminars and training courses.
Local Teachers (Inclusive education)	Mainly responsible for education, particularly inclusive education.	<p>Training of IE teachers for children with disabilities. Short training courses for a number of school principals/key teachers from districts that had been involved in CBR health activities has been provided. These source people expand training to other colleagues.</p> <p>The Hanoi Pedagogy University and HCMC Pedagogy University have set up departments for training children with disabilities. Some 179 teachers have obtained a Bachelor degree in teaching children with disabilities. Pedagogy Colleges in 5 provinces (Hoa Binh, Ninh Binh, Quang Ninh, Thua Thien Hue and Phu Tho) also have faculties for training teachers in IE (Diploma degrees). These teachers also become source people to train to other in the communities. All IE teachers belong to MOET and receive the same remuneration as the other teachers.</p>

Staff in nursing homes, special education centers, and sanatoriums	Care for persons with severe disabilities, which often includes treatment, rehabilitation, and education.	Short and irregular training courses by line management bodies (MOLISA, MOH).
Volunteers in service-delivery organizations	Work on a voluntary and nonofficial basis conducting activities including daily care and the occasional distribution of gifts. Some services-delivery organizations have an extensive network from the central to local level. The Red Cross network alone contains more than 2.3 million volunteers. Other volunteers include village nurses, the retired, veterans, members of the local women's union, etc.	These people work on a voluntary basis and have no special training

4. Disability-related Organizations and Activities

4-1. Activities by Disability-related Organizations

* See Annex 1. for a list of organizations

There are some active self-help groups of persons with disabilities and the government and local authorities encourage the founding of such organizations. However, these organizations require legal and financial support from the government to establish and manage national organizations. Initiative of persons with disabilities is required in submitting an application for establishment, which the People's Committee of each province or city reviews and decides upon. There are seven small-scale, informal social organizations of persons with disabilities in Vietnam¹⁷ which mostly operate on a voluntary base. 4 organizations are located in Hanoi, which means there are only limited opportunities for persons with disabilities to help each other in the Central, mountainous and rural areas where 95-97% are said to live. The Vietnam Blind Association (VBA) which is the only national organization of persons with disabilities, has produced results through its support for persons with disabilities. As there are increased requests for the establishment of such nationwide self-help organizations the VBA example can be seen as a model for other self-help organizations.

Self-help Organizations

Self-help organizations in Vietnam are facing a number of issues in expanding their activities. Most of them indicate a need for long-term financial support to cover operations, including administrative costs such as office rent or equipment. They also need assistance to improve fund-raising skills so that they can apply for additional funds from the government as well as domestic and international donors. In some cases, self-help organizations compete with each other and with service-delivery organizations in order to receive funds from funding sources.

Service-delivery Organizations

Service-delivery organizations for persons with disabilities in Vietnam are recognized for their effectiveness. While the state administration system of welfare has not yet sufficiently covered all persons with disabilities, these organizations' activities and services, which were inspired from concepts of humanity and equality, have been delivered to all types of persons with disabilities in rural and urban areas. The Vietnam Red Cross Society (VNRC) which was

¹⁷ The Disability Forum of NGO Resource Center

established in 1946, has the longest history of humanitarian work. Other organizations have been set up in the past ten years. The Society for the Support of Vietnamese Handicapped and Orphans (SSVHO) is a national support organization for persons with disabilities.

4-2. Cooperation Projects on Disability Organized by International and Other Donors

* See Annex 2. for the list of projects

Aid by Multilateral/Bilateral Organizations and International NGOs

After the unification of the country in 1975, Vietnam begun expanding international cooperation, and many projects and programs for persons with disabilities have been implemented in cooperation with international bilateral and non-governmental organizations since 1987. In general, the international community involves itself in four aspects of disability: health, education, job creation/placement (including vocational training and promotion), and policy/advocacy. As a rule, foreign assistance is not extended in the form of monetary allowance to persons with disabilities, but in kind or by way of service.

Three UN organizations actively involved in disability cooperation with Vietnam are the World Health Organization (WHO), the United Nations Children's Fund (UNICEF), and the International Labor Organization (ILO). The UN Economic and Social Commission for Asia and the Pacific (ESCAP) also provides assistance for persons with disabilities and co-sponsored the first national workshop on the development of self-help movement in 1996.

Bilateral cooperation in the field of disabilities is also present in many forms. Countries such as Denmark, the United Kingdom, Germany, Finland, the US, the Netherlands, Canada and Sweden, either through their NGOs or directly with their local partners, have spent millions of US dollars to support persons with disabilities, especially children with disabilities. AUSAID, the Displaced Children and Orphans Fund and the Leahy War Victims Fund sponsored a comprehensive data review of disabilities in Vietnam to be used as a basis for future international cooperation projects. Denmark International Development Agency (DANIDA) is also working out a plan for surveying the disability situation in Vietnam.

There are over 20 NGOs actively involved in disability issues in Vietnam. These organizations are members of the Disability Forum, which belongs to the NGO Resource Center. Another NGOs engaged in activities related to persons with disabilities, conduct outreach missions, or

on-demand assistance for persons with disabilities. International private organizations such as the Red Cross Societies of the US, Sweden, Switzerland, and Japan have donated money to help Agent Orange victims through the Vietnam Red Cross. The Ford Foundation alone has donated US\$120,000, and Seven Peace Villages have been built in Hanoi, Hue, Da Nang, Da Lat, HCMC, Binh Duong, and Tay Ninh to care for children affected with Agent Orange. In addition, a Friendship Village was built in Ha Tay province by Veterans for Peace from five foreign countries, to care and nurse children with disabilities of veterans.

Aid from Japan

The Japanese NGO, The Japanese Association of Supporting Vietnam Street Children's Home (JASS) implemented a "General Assistance Project for Children's Welfare in Hue City" under the JICA Community Empowerment Program scheme from 1998-2002. This project provided support for children with disabilities in Hue City and its outskirts as well as in Nam Dong Province where there is a large population of minorities in the mountainous areas through 1) Home visits for disability identification, 2) comprehensive health checkups, 3) surgery, 4) rehabilitation, 5) donation of wheelchairs, and 6) establishing parent association of children with disabilities¹⁸.

JICA has also financed trips for rehabilitation personnel to Japan for training and 1 person attended the Independent Living for Disabled Persons course in 2000.

Japanese private organizations such as the Japanese Society for the Rehabilitation of Persons with Disabilities (JSRPD), the Asahi Shimbun Social Welfare Organization, Bridge Asia Japan and the Japan Foundation among other organizations have provided financial aid as well as goods and had conducted international exchange activities¹⁹.

¹⁸ JASS *JICA Kaihatsu Fukushishien Jigyuu 4 nennkan no kiseki (JICA Community Empowerment Program, the last 4 years)* 2001

¹⁹ Ito, Naoko *Kikaku chousa (shougaiisha shien) kikoku houkokukai shiryuu (Project research on person with disabilities support briefing notes)* 2000, JICA (unpublished)

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