POLICY BRIEF

ON INCLUSION OF OLDER PEOPLE
IN COMMUNITY-BASED DISASTER RISK MANAGEMENT

NO ONE IS LEFT BEHIND!

DECEMBER 2021
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I. INTRODUCTION

Vietnam is one of the ten countries most severely hit by extreme natural disasters over the last two decades\(^1\). As a result of climate change, natural disasters are becoming progressively more frequent, intense, and unpredictable. Over the past 30 years, on average, natural disasters resulted in 400 people dead or missing, and 1.0 – 1.5% GDP\(^2\) of economic loss. Natural disasters have been and will continue to be a serious threat to people’s safety, and have major multidimensional impacts on the socioeconomic life, environment, security and defense, and sustainable development of the country.

Vietnam is also one of the world’s fastest – ageing nations\(^3\). The proportion of people aged 60 and over in the total population has significantly increased in the last decade, from 8.68% (7.45 million) in 2009 to 12.8% (12.6 million) in 2021\(^4\), and is anticipated to reach nearly 17% (17.9 million) by 2030\(^5\). By 2036, Vietnam is projected to shift from “ageing” to “aged” society and older people\(^6\) will account for 20% of the population (22.29 million). Because many of them are frail, older people tend to be more severely affected when natural disasters occur. On the other hand, the majority of older people can play a key role in natural disaster prevention and control in their communities.

Vietnam has laws and procedures in place to manage issues related to older people during natural disasters. However, in the context of rapid population ageing, disease outbreaks, and intensifying natural disasters, it is critical to consider not only older people distinctive needs and vulnerabilities but also promote their experience, capacity, and engagement, especially in their community, for successful natural disaster prevention and control and to guarantee that no one is left behind.

This Policy Brief document emphasizes the importance of including older people in community-based disaster risk management and proposes that policymakers, legislators, researchers, government agencies, and organizations should include older people in natural disaster prevention and control plans, thereby minimize damage and loss caused by natural disasters, especially to older people, and build a safe community for everyone.

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1 Report on long term climate risk indicators by Germanwatch, 2019
2 Standing Office of the National Steering Committee for Natural Disaster Prevention and Control
II. DEFINITIONS, CONCEPTS AND PROVISIONS

**Disaster risk:** The damage that natural disasters may cause to people, property, construction, the living environment, and economic and social activities\(^7\).

**Vulnerability:** The characteristics and situations that render a person, a society, a system, or an asset susceptible to the damaging effects of hazards\(^8\).

**Vulnerable group:** A group of people who are likely to suffer more adverse impacts of natural disasters than other groups in the community due to their characteristics and circumstances. Vulnerable groups include children, older people, pregnant women, women nursing under-12-month children, people with disabilities, people suffering from severe diseases and poor people\(^9\).

**Capacity:** The combination of all the strengths, resources, attributes, and conditions available within a community, a society or an organization that can be used to achieve the set goals\(^10\).

**Community-based Disaster Risk Management (CBDRM):** A process in which people in a community proactively participate in identifying and analyzing disaster risks, planning, implementing, monitoring, and evaluating activities to mitigate vulnerabilities and strengthen capacity for local communities to respond and adapt to natural disaster impacts, particularly in the context of climate change\(^11\).

**Older people (OP):** Vietnamese citizens aged 60 or over\(^12\).

**Ageism:** Discrimination against individuals or groups based on their age. Ageism can take many forms, including prejudicial attitudes, discriminatory practices, or institutional policies and practices that perpetuate stereotypical beliefs about older people\(^13\).

**Older people’s inclusion:** Older people inclusion means that every older person is counted, recognized, and negative power relations and barriers to their participation are addressed. It creates an environment where everyone matters, all voices are heard, and everyone’s rights are upheld so that their needs, abilities, aspirations, and desires are considered and accommodated, and they can participate fully and benefit equitably\(^14\).

\(^7\) Document on Community-Based Disaster Risk Management, Minister of Agriculture and Rural Development, Hanoi, 2014
\(^8\) Ibid
\(^9\) Article 3, Natural Disaster Prevention and Control Law (33/2013/QH 13)
\(^10\) Document on Community-Based Disaster Risk Management, Minister of Agriculture and Rural Development, Hanoi, 2014
\(^11\) Ibid
\(^12\) According to UN and Law on Older People (39/2009/QH12)
\(^13\) World report on ageing and health, 2015
\(^14\) HelpAge International (HAI)
**Inclusion of older people in CBDRM:** A process of selective integration of experiences, indigenous knowledge and other strengths of OP which aims to promote their roles and contribution, meanwhile considering their vulnerabilities and prioritized needs in CBDRM\(^\text{15}\).

**Principles of older people’s inclusion in CBDRM\(^\text{16}\):**

- Always promote OP’s roles and contribution: Ensure equal, effective participation of OP regardless of their professions, religions, education levels, and ages in all CBDRM activities;
- Always consider their vulnerabilities and distinctive needs: Natural disaster prevention and control (NDPC) solutions are to meet OP’s needs in disaster preparedness, response, and recovery (i.e. suitable foods, clothing, transportation, healthcare, livelihoods, etc.);
- Practice non-discriminatory attitudes towards OP, and applying suitable methods and skills in working with OP;
- Facilitate the participation of OP, including the Association of the Elderly (AE) at all levels and other grass-root organizations and societies (groups, teams, OP clubs, including the Intergenerational Self-Help Clubs) in every step of CBDRM.

\(^\text{15}\) Guideline on Older people inclusion in Community-Based Disaster Risk Management, Document for communes in the framework of “Building Resilience to Natural Hazards in Central Vietnam - Phrase III” Project, HAI & VAE, Hanoi, 2021

\(^\text{16}\) Ibid
III. OLDER PEOPLE'S ROLE AND CAPACITY BEFORE, DURING, AND AFTER NATURAL DISASTERS

ROLES

OP play an important role in the household

58.64% of OP are the head of the household\(^7\). Moreover, OP have influence in the family. Therefore, if given necessary information, knowledge, and skills, OP can play a crucial role in mobilizing family members and effectively participate in NDPC at the household level. In addition, in many families, young people migrate to cities or abroad, so then the OP have to take the responsibility of caretakers for other family members (other OP, small children, or people with disabilities). This situation is clearly seen in skipped-generation families - those of grandparents with grand children. Approximately 28.4% of OP are still caring for their grandchildren under the age of 10\(^8\). As a result, OP are aware of distinctive needs of vulnerable groups because they themselves are among them.

OP play an important role in the community

Firstly, OP have credibility, influence in, and a high sense of responsibility to the community. This is OP's one-of-a-kind feature. They are willing to spend time participating in community activities, i.e. doing propagation and information communication, providing information, sharing knowledge and experience, and mobilizing resources effectively. Older people can make important contributions to disaster preparedness, response, relief, and recovery activities if they are supported with capacity building, engagement, and recognition. Secondly, many OP are also the leaders of community or residential groups, or heads of civil society, or clubs, etc., therefore, they can play a significant role in implementing NDPC activities in the community if they get involved.

CONTRIBUTION CAPACITIES

Vietnamese OP have a tendency to live longer and healthier than before

The average life expectancy of Vietnamese people has grown considerably, from 62.5 years in 1989 to 73.6 in 2019\(^9\). In 2021, the number of OP who assess their health as “fair,” “good,” or “very good” increased to 84%\(^10\), up from around 30%\(^11\) in 2011. Thanks to their improved lifespan and well-being, OP may make significant contribution to NDPC activities in the community.

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\(^7\) General Statistics Office, Monograph “Older persons in Vietnam: Analysis from the Population Change and Family Planning Survey in 2021”
\(^8\) “Survey on the responsiveness of health insurance policies to ageing” by the Institute of Medical and Sociological Research in cooperation with the Department of Health Insurance and Ministry of Health with technical and financial support from the Asian Development Bank
\(^11\) VNAS 2011 and Survey on the responsiveness of health insurance policies to ageing” by the Institute of Medical and Sociological Research in cooperation with the Department of Health Insurance and Ministry of Health with technical and financial support from the Asian Development Bank
OP have knowledge and experience that could be useful for NDPCs, including indigenous knowledge

Firstly, OP have a profound understanding of the community. They spend longer time in the community; hence, they have a better grasp of it. Besides, since holding important positions in the community, OP know very well about community relations as well as most families’ circumstances and needs. This is very useful for community-based disaster risk assessment, relief activities, and disaster recovery, among other things. Secondly, many OP have knowledge on NDPC, which they accumulated from their previous working experience; hence they can become a valuable resource in NDPC. Thirdly, many OP have traditional disaster response experience which accumulated throughout their lives. This is very useful for NDPC, particularly when complemented with new scientific and technological developments. Moreover, OP can also convey their knowledge of historical weather patterns and signals to the younger generation.

Older people are growing local force with a majority of them in early and middle old-age

OP accounted 12.8% of the total population in 2021, and this figure is predicted to rise to 17% by 2030. Notably, the majority of OP are under 80 years old, with 59.4% in the early-old group (ages 60 to 69 years) and 24.9% in the middle-old (ages 70 – 79 years). Due to the youth migration to the cities or abroad, the number of OP in communities, particularly in rural areas, is assumed to be much higher than official figures. If OP can access information, participate in capacity-building training, and be recognized for their efforts, they will become an even more valuable local task force in NDPC.

The Association for the Elderly is expanding and may make significant contributions to NDPC

Vietnam Association of the Elderly is a special social organization, established in 1995 under the Prime Minister’s Decision. The Association is responsible for representing and protecting OP’s rights. The Association now has over 9.7 million members and anticipates further growth. The Association structure cascades from central to grass-root levels. With this strength, the Association has been and will be able to motivate OP to engage in and make more contributions to community NDPC activities. If their capacity is improved and they are facilitated with necessary resources, the Association can participate more effectively in NDPC in general and CBDRM in particular.

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In my local chapter of the Association of the Elderly, members are not very old. Most of them are under 75 years old, so they are very energetic and willing to do a lot of things.

Ms. Nguyen Thi Loi, aged 60 years, Binh Tu commune, Thang Binh district, Quang Nam province

IV. RISKS AND VULNERABILITY OF OLDER PEOPLE IN NATURAL DISASTERS

When natural disasters strike, OP are categorized among the most vulnerable groups and face numerous risks, particularly those who are women, live alone or in skipped-generation families, live in impoverished homes, have disabilities or diseases, and so on.

**Decline in physical health**

16% of OP self-assess that they are in “poor” or “very poor” health. This proportion is higher among the very elderly, women, ethnic minorities, and in rural areas. 11.7% of OP have disabilities with at least one function (seeing, hearing, walking or climbing stairs, remembering or concentrating, communicating in common language), compared to 2.24% and 4.39% for children aged 6 – 15 years old and adults aged 16 - 59 years old, respectively. In the oldest-old age group (those aged 80 and more), this rate rises to nearly 37%. The majority of OP (95%) have one or more diseases, which are mainly chronic diseases, such as hypertension, osteoarthritis, cardiovascular disease, etc., that require lifelong treatment. On average, an OP suffers from nearly 3 diseases. Therefore, social care, medical care services and treatment, medication and pharmaceuticals, devices/equipment for functional support, and adequate foods must be available before, during, and after natural catastrophes.

**OP face many financial difficulties**

Many OP have limited income. 24% of OP say that their income is insufficient to cover basic needs, only 15% of OP have savings, and nearly 13% of OP live in poor or near-poor households. In 2020, only 27% of OP have pensions or social insurance and 16% of OP get social subsidies. Although the minimum standard of social subsidies has been raised lately, it

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24 Ibid
25 Ibid
28 “Survey on the responsiveness of health insurance policies to ageing” by the Institute of Medical and Sociological Research in cooperation with the Department of Health Insurance and Ministry of Health with technical and financial support from the Asian Development Bank
29 Ibid
30 Calculation from the data of the report of the Office of the National Committee of the Elderly in 2020
is still very low compared to the rural poverty line in 2021 (about 51%). Low income drives OP into a worse situation in a natural disaster.

**High percentage of OP (63.3%)**[^31] **live in rural areas**

Which lack medical and social assistance for OP. Furthermore, the majority of OP are women (57.8%)[^32], who on average have poorer health, lower income, and a higher rate of widowhood than male OP, making female OP typically more at risk in natural disasters than male OP.

**Over 35%**[^33] **of OP live alone, with other OP, or with children under 15 years old**

These are the ones who may be more susceptible to economic or health shocks as well as to natural disasters.

**Many OP have limited access to information and training on NDPC**

Most of OP get general information through TV and loudspeakers. The number of OP who obtain information via the internet is still low, with total of 16%, in which 30.4% in urban and 9.9% in rural regions, 22.2% in males and 12.2% in females, and only 3.8 percent in the age group of 80 years or older, compared to 22.3%[^34] in the 60–69 age cohort.

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**Local authorities, particularly those at the grassroots level, often assume that OP are unable to effectively participate in training because of their old age, walking difficulty or poor health. Hence, OP are rarely invited to the training.**

**Ms. Nguyen Thi Loi, aged 60 years, Binh Tu commune, Thang Binh district, Quang Nam province**

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**Prejudice and age discrimination**[^35] **are still prevalent**

Ageism is making it more difficult for OP to acquire information and engage in capacity-building programs and supportive services.

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**Lack of appropriate services for the OP's distinctive needs in natural disasters**

Many things are lacking, such as health care services for those with accumulated and chronic diseases that need medical staff, drugs/medicines, assistive devices, appropriate foods, psy-

[^32]: Ibid
[^33]: Ibid
[^34]: “Survey on the responsiveness of health insurance policies to ageing” by the Institute of Medical and Sociological Research in cooperation with the Department of Health Insurance and Ministry of Health with technical and financial support from the Asian Development Bank
[^35]: Ageism is stereotypes, prejudices, and discrimination against individuals or groups of people based on their age (World Health Organization Global Report on Ageing and Health, 2015)
chological and mental treatment, rehabilitation support service during and after a disaster, etc. Furthermore, much infrastructure (roads, modes of transportation, evacuation sites, etc.) is not actually adequate or safe for OP, making them more vulnerable, especially women and those who have disabilities or live alone. Also, OP on average find it more difficult to recover from disasters, both in terms of physical, psychological, mental health, and livelihoods due to insufficient recovery assistance for them.

For older people, especially the ones living in difficult circumstances, before a disaster occurs, they need to be warned early to be prepared. In addition, the elderly have special needs for medicines and foods. If they are not prepared, their lives and their health will be affected in the days sheltering from storms and floods.

Mr. Nguyen Dinh Thang, aged 66 years, Quang Nam province

V. NATIONAL AND INTERNATIONAL POLICIES ON OLDER PEOPLE’S INCLUSION IN DISASTER RISK REDUCTION

1. INTERNATIONAL POLICIES FOR OLDER PEOPLE IN DISASTER RISK REDUCTION (DRR)


The Plan of Action emphasizes the need to “build a society for all ages” and addresses the issue of ageing in the 21st century. “A society for all ages encompasses the goal of providing older people with the opportunity to continue contributing to society. To work towards this goal, it is necessary to remove whatever excludes or discriminates against them.”


The Framework emphasizes: “Older persons have years of knowledge, skills and wisdom, which are invaluable assets to reduce disaster risk, and they should be included in the design of policies, plans and mechanisms, including for early warning”. The Framework calls for embracing people with life-threatening illnesses and underlying medical conditions in designs and plans for risk management before, during and after disasters.

c) Humanitarian Inclusion Standards for Older People and People with Disabilities, Age and Disability Consortium, 2018

These standards aim to promote inclusion by addressing gaps in understanding distinctive needs, vulnerabilities, capacities, and rights of older people and people with disabilities. The
standards can be used as guidance for developing policies and programs that take into account the needs of OP and people with disabilities and ensure their participation.

d) Sustainable Development Goals – Agenda 2030

Target 11.5 reads: “By 2030, significantly reduce the number of deaths and the number of people affected, and substantially decrease direct economic losses relative to global gross domestic product caused by disasters, including water-related disasters, with a focus on protecting the poor and people in vulnerable situations.”

e) Charter 14 for Older People in Disaster Risk Reduction

Charter 14, outlined by the United Nations Office for DRR and HelpAge International (HAI), calls for an inclusive approach to DRR response to older people, supporting United Nations’ efforts and governments across the world to also accept the pledge. Charter 14 lists 14 minimum standards for OP’s inclusion and calls for stronger commitment from key stakeholders to bring a comprehensive approach to DRR policies and strategies.

2. LAWS AND POLICIES OF VIETNAM RELATED TO OLDER PEOPLE IN DISASTER RISK REDUCTION

a) Law on Older People (39/2009/QH12)

- Section g, Clause 1, Article 3. “Rights and obligations of the elderly”: “Older people have right to priority in receiving relief donation, in cash or in kind, healthcare and lodgings to overcome initial difficulties due to consequences of natural disasters or other force majeure circumstances.”
- Section a, Clause 1, Article 24. “Responsibilities to promote the elderly’s role”: “The State shall create conditions for the elderly to express their views, aspirations and petitions to government agencies or organizations on matters of their concern.”

b) Law on Natural Disaster Prevention and Control (33/2013/QH13)

- Article 3. “Interpretation of term”: “Vulnerable group means a group of people who are likely to suffer more adverse impacts of natural disasters than other groups in the community due to their characteristics and circumstances. Vulnerable groups refer to children, older people, pregnant women, women nursing children under-12-month, people with disabilities, people suffering from severe diseases and poor people.”
- Clause 6, Article 4. “Basic principle of NDPC”: “NDPC activities must be based on scientific grounds and in combination with traditional experiences, scientific, and technological advances, with structural and non-structural solutions; protecting the environment and eco-systems and adapting to climate change.”
- Section b, Clause 2, Article 15. “NDPC plans”: “Identifying NDPC subjects and measures suitable to each type of natural disaster and level of risk frequently occurring in the locality, paying attention to vulnerable groups. These subjects and measures comprise: organizing information and communication activities to improve community awareness about NDPC, elaborating response plans for different levels of natural disaster risks and specific types of natural disaster; organizing a standing unit to update information on disaster development; identifying dangerous areas; preparing evacuation sites; and organizing training and drills on NDPC skills.”
c) The Decision No. 553/QD-TTg approving the “Project for community awareness raising and community-based natural disaster risk management, with a vision toward 2030” issued on 06 April 2021 by the Prime Minister

Goals:

- 100% influential individuals in the community will be educated about community awareness raising and CBDRM.
- 100% of the people in communes prone to frequent typhoon, landslide, flood, drought, seawater intrusion and at least 50% of those in other areas shall be disseminated natural disaster-related knowledge
- 100% of disaster prevention plans are developed with community participation
- 100% of households to receive sufficient information on natural disasters and disaster prevention and control directions, etc.

In Section III, Article 1 (Component II):

- Activity 4: Training to improve knowledge of natural disasters and skills of NDPC, strengthening capacity in the work of propagation for reporters, editors, radio and television staff at district and commune levels, pioneering forces at grassroots levels, and those whose work is to disseminate information to the community; conducting tailored training for people in the vulnerable group in the community.

d) Circular No. 16/2020/TT-BNNPTNT dated 28th December 2020 of the Ministry of Agriculture and Rural Development on the system of statistical indicators of agriculture and rural development

- In Appendix No. IX: Percentage of population who are provided knowledge about NDPC: Popular types; age group, gender; vulnerable subjects; urban/rural; provincial administrative units.
VI. GAPS IN OLDER PEOPLE’S INCLUSION IN COMMUNITY-BASED DISASTER RISK MANAGEMENT

1. REGARDING THE NEED OF OP’S INCLUSION AND THE WAYS TO INCORPORATE OP IN CBDRM

• Government authorities and society have not had a comprehensive view of OP in NDPC in general and in CBDRM in particular. There is also prejudice about OP, mainly depicting them as a homogenous group, with frail and vulnerable characteristics, rather than seeing their roles, capacities, diverse characteristics in segmented groups by gender and age. That is partly because information communication on natural disasters usually mentions the OP as weak and vulnerable people who mainly need help rather than the ones who can deploy their capabilities and make contribution.

• OP’s inclusion in CBDRM was not mentioned in training activities to raise awareness and capacity for institutional agencies, organizations, technical support groups, the AE, and the local OP.

• The AE has not had full access to information on governmental and local policies and orientations in NDPC. OP have insufficient information and knowledge about CBDRM. As a result, the AE and OP have not been able to play effective roles and involvement in NDPC and CBDRM.

2. POLICIES AND GUIDELINES FOR POLICY IMPLEMENTATION

• Policies and programs for NDPC mainly refer to OP as the vulnerable people rather than promote the constructive role of OP and the AE.

• The guidelines for implementing CBDRM and training materials in CBDRM contain almost no specific reference to OP.

• The AE has not been involved in the process of developing the local NDPC plan. As a result, the capacities, susceptibility, and specific needs of OP by gender and age groups have not been mentioned fully in the plan.

• Though the NDPC program has a plan to assist OP, this plan does not show specific actions and activities to meet specific and inseparable needs of medical care and social care for the elderly in natural disasters.

There was a common assumption that OP are the vulnerable ones and all they need is caring. However, this perception must be changed, from awareness to policies, that older people, especially those in the early-old age group, play an important role in NDPC due to their lifetime experience and credibility in the community.

Ms. Nguyen Thi Thu Ha, aged 61 years, Hanoi
3. INFORMATION, DATA AND EVIDENCE ON THE RISKS AND CONTRIBUTIONS OF OLDER PEOPLE IN DISASTERS

- Statistical tools to collect data on natural disaster loss and damage (except for the one about the causes of death and missing) do not disaggregate by age; therefore, the data on OP loss of life and livelihoods is absent.
- The AE was not involved in the process of developing local natural disaster reports, in which OP were primarily mentioned as a homogeneous group, without regard to their gender issues or age group differences. As a result, OP's vulnerabilities, special needs, strengths, roles, and contribution capacities in NDPC were not fully addressed.

4. COORDINATION AND COOPERATION IN NDPC

- Only a few local AEs serve on the Steering Committee for the NDPC and technical support groups at all levels, and there are very few OP in community groups. There are no specific guidelines regarding the inclusion of OP in CBDRM. There is no coordination program in place between the AE at all levels and the government agencies in charge of the NDPC. This leads to the fact that the AE and OP did not have the opportunity to speak up and play their roles in CBDRM.

VII. RECOMMENDATIONS ON OLDER PEOPLE’S INCLUSION IN COMMUNITY BASED DISASTER RISK MANAGEMENT

1. FOR GOVERNMENT AGENCIES

Increase public awareness on ageing and the reasons and approaches for including OP in NDPC in general and in CBDRM in particular

- According to the assigned tasks in Project 553, the Ministry of Information and Communications (MIC), Ministry of Agriculture and Rural Development (MARD), and Ministry of Labor, Invalids and Social Affairs (MOLISA), should regularly conduct and diversify education communication and awareness-raising activities about OP to educate about the elderly, including their roles, capacity to contribute to NDPC, and the need of appropriate support and care for their vulnerability; Enhance propagation about the OP and AE role models in NDPC; Eliminate prejudices against the elderly; Improve understanding of OP’s rights and the necessity of OP's inclusion in CBDRM.
- MARD, MOLISA and People's Committees at all levels should incorporate OP's inclusion in CBDRM training activities to raise awareness for institutional agencies, organizations, technical supporting groups, the AE, and OP in the locality, including appropriate communication and collaboration with OP; Modify and supplement the training materials with OP's inclusion.
- Trainers on CBDRM need to be trained on OP’s inclusion in CBDRM, and communication and collaboration with OP, as part of a standard training program on CBDRM.
Review, adjust, and supplement legal documents and policies and organize implementation of policies on CBDRM to ensure the promotion of OP’s role and contribution in parallel with focusing on appropriate support and care for OP’s vulnerability

To be effective and successful in the context of rapid population aging as well as complicated epidemics and natural disasters, disaster prevention work has to take into account the distinctive needs and vulnerabilities of the elderly, while promoting their experience, capacity and participation. This has been proven in practice and through a number of recent projects, including the project “Strengthening disaster resilience in Central Vietnam – phase 3” implemented in cooperation between Vietnam Association of the Elderly and HelpAge International (HAI).

Mr. Phan Van Hung – Vice Chairman, Vietnam Association of the Elderly

- According to the assigned tasks in Project 553, MIC, MARD and MOLISA should review, adjust, and add OP’s inclusion in legal documents, programs, initiatives, and guiding documents for planning, organizing, and implementing CBDRM program.
- MARD, MOLISA and People’s Committees at all levels should ensure that budget is allocated for implementing OP’s inclusion in CBDRM.
- MARD should add the indicator of OP’s inclusion in the Index of Monitoring and Evaluation of the “Project for community awareness-raising and community-based natural disaster risk management, with a vision toward 2030” (Project 553) and other related programs and projects.
- MARD, MOLISA, MIC and authorities at all levels should strengthen the role and active participation of OP and the AE in developing, implementing, monitoring policies, programs, initiatives, plans on CBDRM, including training activities, listening to OP’s opinions in forums, policy dialogues and promoting communication activities related to OP in natural disaster, etc. Facilitate and support activities by OP and AE in CBDRM.
- NDPC awareness raising and capacity building training programs should include criteria that ensure appropriate participation of the AE and OP. Communication materials, training materials, and methods of communication and training must be developed and edited to be suitable for working with OP (e.g. large font, clear writing, lots of pictures, etc.), with reference to OP’s inclusion.

Older people expect local governments and organizations to include them in NDPC activities. For example, I see that young people are involved in NDPC training, but older people are not.

Ms. Nguyen Thi Loi, aged 60 years, Binh Tu commune, Thang Binh District, Quang Nam province
• CBDRM models should comprise OP's inclusion before proliferation, for example the model “Resilient Community to Natural Hazards and Adapting to Climate Change” piloting by MARD.

• Technical support groups on NDPC established by Commune/Ward People's Committees should ensure that natural disaster risk assessment tools consist of data collection on vulnerability and capacity of OP in community NDPC; Develop and regularly update natural disaster risk maps with OP’s participation and include information on OP.

• Local authorities should review and evaluate the early warning system to upgrade and adjust it so that older people, particularly those with impairment in hearing, vision, and motor functions or who live alone or with elderly spouses or with children under 15 years old can access and understand the information. Promote digital equity to increase OP's ability to access digital information.

• Accommodate OP's needs during natural disasters by improving the system of social security policies. The Ministry of Labor, Invalids, and Social Affairs and the Ministry of Agriculture and Rural Development should consider the coordination and integration of social service systems and emergency response and relief measures in the event of natural disaster. It is required to revise and clarify instructions on grab-and-go bags to prepare for evacuation in order to accommodate OP's needs (e.g. appropriate foods, medicines, health records and prescriptions, specific toiletries, blood pressure monitors, hearing, vision and walking aids, etc.) Ensure the reallocation site is accessible, safe and suitable for OP, especially the female elderly and those with disabilities. Priority should be given to impoverished families with OP in the housing assistance program.

• MARD should cooperate with MOLISA, and the Ministry of Health (MOH) to give instruction or disseminate information about suitable relief packages for OP in natural catastrophes, with appropriate foods, medications, and supplies, especially for the ones who are female, frail, oldest, or those with disabilities. Ensure that medical care, social services, psychological therapy, and other types of help are provided before, during, and after a catastrophe.

• When implementing policies for disaster recovery, local authorities should prioritize the elderly, whether through a financial package, seedlings, or making it easier for them to access loans for livelihood activities or reinforcement of dwellings.

• In the context of COVID-19, because of OP's vulnerability, particularly those with underlying medical conditions, local Steering Committees for COVID-19 Prevention and Control should give direction ensuring that OP are fully vaccinated against COVID-19 in areas frequently affected by natural disasters, and provide a safe evacuation location. The health sector should prepares a timely treatment plan for OP if infected.

Develop, update, collect, deliver data and use databases that are segmented/disaggregated by age, gender, and disability on a regular basis in NDPC

• When amending the Law on the Elderly, it is necessary to include provisions requiring all levels, sectors, agencies, and organizations to disaggregate data systems by age (OP should be segmented into cohorts of 60-69, 70-79, and 80+), gender, and disability as a groundwork for program design and implementation.

• MARD is to review, adjust, and supplement survey tools to ensure that data about OP are incorporated in collection tools, such as questionnaires to collect information for CBDRM; statistical forms, damage assessments, post-disaster needs, and disaster damage reports at national and local levels.

• Technical support groups on NDPC at Commune/Ward level should employ age-disaggregated
data for qualitative/quantitative analyses of OP’s vulnerability and capabilities in NDPC in the community to identify reasons and appropriate solutions for supporting OP in NDPC.

- Incorporate OP’s inclusion in the set of indicators to evaluate capacity and work performance of the Steering Committee for NDPC and Search and Rescue.

**Strengthen coordination and collaboration among relevant agencies and organizations in order to promote OP’s inclusion in CBDRM**

- Reinforce departments working on NDPC at all levels to ensure that OP are engaged with appropriate roles and responsibilities. Specifically, give seat(s) to AE representative(s) in Commanding Committees for NDPC and Search and Rescue at all levels, Technical Supporting Teams at all levels, and task forces for NDPC. OP are to be included in community groups for NDPC.

> At all levels, authorities and governments must direct local forces, civil organizations, and mass organizations to maintain tight connection and collaboration with the AE. Without this cooperation, it would be impossible to fully comprehend the needs of the elderly who require assistance during storms and floods. Every year, the local AE collect statistics and detailed information on each family, each individual, and understand very well their circumstances of what and when they need help. So, when natural incidents happen, they know who needs supporting first. This is very important.

> Mr. Nguyen Dinh Thang, aged 66 years, Quang Nam Province

- MOLISA and MARD should collaborate to develop a plan to ensure the integration of vulnerable groups, including OP, into NDPC, as named in Project 553, in consultation with the VAE and other relevant organizations.

- Develop programs that involve collaboration between AE and relevant agencies/organizations in this field and ensure that resources allocated (budget, human) for gradual OP’s inclusion in CBDRM.

> There are 3 important things for improving cooperation among functional departments and institutional agencies in incorporating OP in NDPC. Firstly, regulations must be institutionalized to identify each side’s commitments and responsibility in cooperation. Secondly, there must be resources allocated for implementation. Thirdly, there must be focal persons assigned to cooperate and coordinate the implementation.

> Ms. Nguyen Thi Thu Ha, aged 61 years, Hanoi
2. FOR THE ASSOCIATION OF THE ELDERLY, CIVIL SOCIETIES AND SOCIO-POLITICAL ORGANIZATIONS

- The AE strengthens its roles in supervision and critical feedback in order to bring OP-related problems that need addressing in NDPC activities to competent authorities for consideration, revision, and supplementation of documents, legal documents, strategies, policies, programs, schemes, and plans on NDPC to ensure that OP are included, the activities are feasible, and OP's special needs are met.

- The AE proactively identifies its tasks in NDPC, develops implementation and policy advocacy plans, proposes to the NDPC management agencies at the same level for the AE to be a member of the Steering Committee for NDPC and participates in NDPC activities.

- The AE incorporates NDPC into its annual work program and conducts activities to raise awareness and capacity on NDPC and OP's inclusion in CBDRM for the AE officials at all levels. Also, AE provides the elderly with guidelines, laws, policies, knowledge, and skills on NDPC and CBDRM, so that they can effectively participate in NDPC activities in the community.

- At the grass-roots level, the AE actively participates in the CBDRM process, such as participating in the natural disaster risk assessment groups, collecting and analyzing data on the elderly, and proposing help to OP affected by natural disasters, participating in relief activities, and encouraging and supporting people affected by natural disasters.

- The AE actively proposes, develops and coordinates the implementation of OP participating in NDPC models, integrating NDPC activities into Intergenerational Self-Help Clubs activities.

- NDPC authorities, such as the Fatherland Front Committee, Red Cross Organization, Women’s Union, Farmers’ Association, Youth Union, and others, should invite OP to participate in NDPC-related activities, such as training sessions, rehearsals, and propagation. Pay attention to OP and their specific needs when performing emergency response and relief activities.

- The AE, Association of People with Disabilities, Farmers’ Association, Women’s Union, and other organizations should have disaster recovery programs for older men and women, including livelihood restoration.

3. FOR INTERNATIONAL AND LOCAL NGOS

- Mobilize resources and ensure that OP’s inclusion is embedded in all technical documents, data collection tools, initiatives, and projects on NDPC in general and CBDRM in particular.

- Leverage existing networks (Group on Disaster Management, National and Local Forums on Climate Change Adaptation, and DRR) to advocate for policies on OP’s inclusion in CBDRM.

- Make OP’s voice heard at CBDRM meetings and multi-stakeholder advocacy activities, and provide grassroots with technical support.

- Provide technical support and capacity development on OP’s inclusion in CBDRM to the AE, Women’s Union, Red Cross Organization, Youth Union, Farmers’ Association, Association of People with Disabilities, etc.
4. FOR UNITED NATIONS AGENCIES AND DONORS

- Share international experiences, provide policy recommendations, and establish initiatives and projects to assist marginalized groups, including older people, in participating in CBDRM.
- Consider OP’s inclusion as a priority or as one of the criteria in grant approval requirements for NDPC projects. It is critical for the rapidly ageing society today and in the future.
- Collaborate with international NGOs and the AE on policy lobbying to ensure that OP are appropriately included in policies.
- Share international experience and provide technical support to Vietnamese governmental agencies to ensure that data on OP is included in data collection forms.

5. FOR PRIVATE SECTOR

- Take into account OP’s specific needs, vulnerabilities, role, and ability to contribute to NDPC activities with private sector participation, including prevention, relief, and recovery activities, and the production of necessary and appropriate products, goods, and supplies for the elderly.
- Support community NDPC initiatives to benefit people in general and the elderly in particular.

6. FOR OLDER PEOPLE THEMSELVES

- Actively seek out and update NDPC information and knowledge in the community.
- Actively and responsibly participate in local NDPC activities when invited or offered opportunity.
- Transfer accumulated NDPC knowledge, skills, and experiences to the next generation.
POLICY BRIEF

ON INCLUSION OF OLDER PEOPLE
IN COMMUNITY-BASED DISASTER RISK MANAGEMENT
NO ONE IS LEFT BEHIND!

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