

THE EVOLUTION OF POPULATION POLICY IN VIET NAM

Bang Nguyen PHAM, Peter S. HILL, Wayne HALL, Chalapati RAO

Corresponding author: Bang Nguyen PHAM, PhD

School of Population Health, the University of Queensland,

Public Health Building, Herston Road, Herston, Queensland, 4006, Australia

Ph: +61 (0)7 33655554

Fax: +61 (0)7 33655599

Email: pnbang2001@yahoo.com

Peter S Hill, Associate Professor Global Health Systems

School of Population Health

The University of Queensland

Herston, Queensland, 4006

Ph: +61 07 33655432

Fax: +61 07 33655599

Email: peter.hill@sph.uq.edu.au

Wayne Hall, NHMRC Australia Fellow

University of Queensland Centre for Clinical Research

Herston, Queensland, 4029

Phone: +61 07 3346-5471

Fax: +61 07 3346-5598

Email: w.hall@uq.edu.au

Chalapati RAO, Senior Lecturer

School of Population Health, the University of Queensland

Herston, Queensland, 4006

Phone: +61 07 3346462

Fax: +61 07 3346-5598

Email: c.rao@sph.uq.edu.au

Abstract

This paper documents three periods in the evolution of the population policy in Viet Nam: initiation in the 1960s-1970s, maturity in the 1980s-1990s and legalization in the 2000s-2010s. The paper uses a framework for stakeholder analysis in the socio-political context of Viet Nam to analyse interactions between leading state agencies in the development of the population policy and their influences on the organizational structure of the population programme.

It highlights the current tensions in the implementation of the population programme and calls for a new population policy that is more conducive to addressing broader population and reproductive health issues, in order to respond more effectively to new challenges arising from the socio-economic and demographic transition of the country.

Key words: population policy, socio-economic development, population and development, reproductive health, Viet Nam

1. Background

Population policy is highly complex, intensely political and directly linked to socio-economic development, security and protection of a nation. Population growth rates in the developing world had declined from an average annual rate of 2.4 per cent in the 1970s to 1.4 per cent in the 2000s (United Nations, 2008a). Population policy of many developing countries emphasises the control of population size by reducing fertility to assure food security, provide sufficient employment and basic social, educational and health services, reduce pressure on natural resources, and combat climate change.

Viet Nam has maintained a population policy over the last 50 years. The core element of the policy is the promotion of the social norm of small family size by a vigorous population programme, supported by birth control measures (Jones, 1982). This policy shares the China's one-child policy (Goodkind, 1995) and the socio-cultural values of Confucianism, with son preference as a central feature (Johansson et al., 1998).

This paper uses a framework for stakeholder analysis in the socio-political context of Viet Nam to analyse the evolution of the population policy and demonstrate the complex interactions between leading state agencies in development of population policy, seeking to understand their influences on structuring of the population programme and the implications for programming of policy interventions. The paper then highlights new challenges arising from the demographic trends in the context of socio-economic transition of the country. Finally the paper recommends a new policy that is more conducive to addressing broader population and development issues.

2. Analytical framework for stakeholder analysis

Figure 1 is the framework for stakeholder analysis, based on the three ‘pillars’ of the Viet Nam political systems: the National Assembly, the Communist Party and the Government. These bodies lead all political agendas of the country.

The National Assembly is the highest representative body of the people and the only organisation that has legislative powers. It approves Constitutions, laws and ordinances. In the hierarchy of legislation, the Constitution is the highest legal document. The current Constitution was adopted in April 15, 1992 by the National Assembly, affirming the central role of the Communist Party in politics and the socio-economic development of the country¹ (Tuần Việt Nam, 2010).

With about 3.1 million members, the Party has a nationwide network. According to the Former Chairman of the National Assembly, Nguyễn Văn An, about 90% of the Parliamentary representatives are Party members and most key positions in the Government, from the central level down to the grass roots level, are held by the Party members (Thu Hà, 2010). The Party issues directives and resolutions that provide the platforms for all policies of the country.

The Government, which is currently made-up of the twenty-two ministries, national committees, provincial People’s Committees of sixty three provinces and Government Office under the leadership of the Prime Minister issues decrees, decisions, and strategies for implementation of the socio-economic development programmes.

¹ There have been three constitutions of Viet Nam adopted previously in 1946, 1959 and 1980

3. The evolution of population policy

Based on the scope and the level in the hierarchy of policy development, the evolution of the population policy has undergone three periods: Initiation in the 1960s-1970s; Maturity in the 1980s-1990s; and Legalisation in the 2000s-2010s. Table 1 highlights key policy documents issued by political systems over these periods.

During this evolution, the organizational structure of the population programme has also experienced four different forms: (i) *Population and Birth Control Unit* 1961-1983; (ii) *National Committee for Population and Family Planning* (NCPFP) 1984-2002; (iii) *Viet Nam Commission for Population, Family and Children* (VCPFC) 2003-2006; and (iv) *General Office for Population and Family Planning* (GOPFP) from 2007 to the present.

The initiation of the population policy in 1960s-1970s

The population policy was first initiated in the Northern region of the country in early 1960s, and launched nationwide after the country's reunification in 1975. The Government established the first administrative *Population and Birth Control Unit* within the Ministry of Health (MOH) on 26 December 1961 (The Government of Viet Nam, 1961). This date has been Population Day of Viet Nam since 1997 (The Government of Viet Nam, 1997).

A two-to-three child policy had been promoted in the Northern region of Viet Nam since 1964 (Vu, 1994). The fertility of Viet Nam was about 6.1 when the Viet Nam War ended in 1975 (Nguyen, 2010). There are no data available about the differential in fertility between the Northern and Southern regions before this time.

Maturity of the population policy in the 1980s-1990s

The Party launched *Đổi Mới (renovation)* policy in 1986. In the period 1980s-1990s, the population policy developed and matured with an emphasis on birth control. The Government established NCPFP in 1984 (The Government of Viet Nam, 1984). General Võ Nguyên Giáp was appointed as its first Chairman (Tucker, 1998). The NCPFC was a ministerial body, designated to assist the Council of Ministers. This structure was maintained throughout the period 1980s-1990s.

The Government's first Decree on birth control was officially issued in 1988 with an aim to reduce the country's fertility (4.2 in mid-1980s). Couples were encouraged to limit family size to two children through late marriage, delaying childbearing until after the age of 22, and ensuring a spacing of three to five years between the first and the second birth (The Government of Viet Nam, 1988).

The Party's *Resolution 4 on Population and Family Planning* issued in 1993 was the first formalisation of the one-to-two child policy, establishing an important principle that the population programme was an integral part of national socio-economic development plans (The Central Party Committee of Viet Nam, 1993). Following this resolution, the Government launched the first *National Strategy on Population and Family Planning 1993-2000*, with the primary objective of reducing the TFR to 2.9 by 2000 (NCPFP, 1993).

The 1990s were the high point for the population programme, contributing to the rapid decline in the fertility from 3.8 in 1989 to 2.3 in 1999 (GSO, 1999). The country also had experienced considerable socio-economic growth in this decade, which the State attributed to its population policy (Behrman and Knowles, 1998). No legislative document on population was issued over the period 1980s-1990s.

Legalisation of the population policy in 2000s-2010s

The most significant change in legislation of Viet Nam in the early 2000s was the amendment of the 1992 Constitution in 2001. This amendment resulted in increased engagement of citizens in policy development (Conway, 2004).

The current *Population Ordinance* is the highest legislative document on population, issued by The Standing Parliamentary Committee of the National Assembly in 2003. This ordinance officially recognised reproductive rights for the first time, stating that “*couples have a right to decide number of children, birth timing and spacing*” (The National Assembly of Viet Nam, 2003).

However, soon after the Ordinance, the Government’s *National Strategy on Population 2001-2010* was launched in 2003, and set the primary objective as decreasing fertility to the replacement level of 2.1 for the entire country by 2005 (VCPFC, 2003). Controversy was prompted by the inconsistency between the ordinance and the strategy. It was argued by some that the State National Assembly had relaxed birth control through the Ordinance which promoted reproductive rights, while those with more conservative views inferred from the Strategy that the Government continued its birth control policy.

To clarify this contradictory situation, the Central Party Committee issued *Resolution 47* in 2005. It reaffirmed birth control measures which it justified by its concern that: ‘*to sustain high economic growth, Viet Nam needs to pursue a population control policy until it has become an industrialised country*’ (The Central Party Committee of Viet Nam, 2005). This reaffirmation of birth control came at a time when fertility had already reached the replacement level of 2.1 (Pham et al., 2008).

In a seeming reversal of procedures, the National Assembly on the 25th December 2008 replaced Article 10 of the *Population Ordinance*, which recognised the reproductive rights of couples, with a specific regulation as follows:

“Each couple and individual has the right and responsibility to participate in the campaigns on population and family planning, reproductive health care: (i) decide time and birth spacing; (ii) have one or two children, exceptional cases to be determined by the Government” (The National Assembly of Viet Nam, 2009).

To further reinforce the emphasis on population control, in the meeting of the Central Party Committee on 6th March 2009, the Chief Executive Trương Tấn San² instructed that the population size of Viet Nam needed to be controlled at 100 million by 2020. He also instructed the Assembly to develop a new *Law on Population* by 2015 (The Central Party Committee of Viet Nam, 2009).

Implications of recent revisions to population policy

Arguably, the tensions in the population policy are reflected in the recent changes in the leadership and organisational structure of leading agency of the population programme. The Government merged the population programme and the child protection programme in 2003 and the NCPFP was broadened to form the VCPFC, with a new mandate that shifted the focus from family planning to reproductive health. However, VCPFC was downsized again in 2007 to a department, renamed GOPFP, and placed once more under the administration of the MOH, with its functions refocused on birth control (GOPFP, 2009).

² He was voted to be President of Viet Nam at the National Assembly Meeting in 2011

The Reproductive Health Department of the MOH also reverted to its previous name of Maternal and Child Health (MCH) at the same time. This restructuring suggested a return to a technical conceptualisation of population control, shifting away from reproductive health.

The revision of the *Population Ordinance* could have been instrumental to advocate for more political interest in population issues and subsequently, to increase the budget allocated to the population programme. Indeed, the national budget for the population programme had declined from 559 thousand billion VND (0.51% of the national budget) in 2000 to 498 thousand billion VND (0.16% of the national budget) in 2006 (GSO, 2007). Additionally, the *Law on State Budget* issued in 2001 partially decentralised budgeting to local government (The National Assembly of Viet Nam, 2002). This meant the national budget for the population programme could have been reallocated to other activities, contributing to further shortage of funding for the implementation of the programme at the local level.

External funds for the population programme also declined. For example, supply of contraceptives from donors such as the World Bank and United Nations Population Fund had declined, producing a shortfall of 14 million Euros in the period 2006-2010 (VCPFC, 2007). Shortage of fund has been a particular concern in the transition of Viet Nam from a low income country to a middle-income country.

The new *National Strategy on Population and Reproductive Health 2011-2020* was recently approved to be implemented by the GOPFP and the MCH. In the light of organizational changes, and the reduced budget, there is a concern about the competition for funding between the two departments and with the financial implications of sharing the budget between the population and the maternal and child health programmes. These imply important implications that policy makers and programme managers should consider when programming interventions in these areas.

4. Challenges to the future population policy

The *1992 National Constitution* was revised for the second time in 2012. The new *Law on Population* has been put in the National Assembly's political agenda of 2013. Lawmakers should consider new challenges emerging from demographic and socio-economic transition of the country for inclusion in development of such fundamental legislatives.

Demographic trends and emerging issues

A question has been raised as to why the population policy has reverted to birth control when fertility has declined. Data in Table 2 shows the estimated trend of declining population growth rate and the fertility in Viet Nam over the last fifty years (GSO, 2009).³ With 79% of women of reproductive age of 15-49 currently use contraceptives, the decline of fertility in Viet Nam is predicted to continue.

Viet Nam has the largest ever cohort of the population of reproductive age in its demographic history, with approximately 25 million women of reproductive age of 15-49 (GSO, 2009). This peak level is projected to last for the period 2010-2040, creating great demands for reproductive health commodities and services, particularly contraceptives. A response requires sufficient investment of human and financial resources from the national budget for the population programme.

Viet Nam is now at a crucial point of socio-economic development as it is entering the 'golden age' population structure⁴, with an optimal proportion of the population of working age of 15-59. Table 3 shows that the total dependency ratios has declined over the last three decades to as low as 51% in 2009, of which child dependency comprised 38% and elderly

³ It is noted that this data series is slightly higher than that reported by the GSO i.e. the Census 2009 provides TFR of 2.03.

⁴ A population structure, in which the proportion of dependent persons, including children and elderly, are at a minimum compared to the working population.

dependency 13% (GSO, 2009). The projection of dependency ratios of Viet Nam over the period 1960-2050 (Figure 2) shows that total dependency ratio will remain below 50% from 2008 to 2033⁵ (United Nations, 2008b). The critical question for the future population policy is how to ensure that the ‘demographic bonuses’ delivers opportunities for socio-economic development of the country.

The population of Viet Nam has commenced ageing. As shown in Table 4, the aging index⁶ of Viet Nam reached 35.9%⁷ in 2009 (GSO, 2009), higher than that of the average level of the world population, 24.0%, and of the Asian population, 20.0% in the same year (United Nations, 2007). The population aging process will accelerate if population policy continues to focus on birth control, resulting in fewer births while the life expectancy at birth continues to increase.

Challenges to the current organisational structure of the population programme

Concerns have been raised about the current structure of the population programme could possibly neglect broader population and development issues. The population programme under the MOH could be efficient in delivering family planning services, contributing to the improvement of maternal and child health, but it is hard to address effectively issues emerging from the new demographic trends.

There is still a gap between international commitments endorsed by the Vietnamese Government and local constraints on the full enjoyment of reproductive health by Vietnamese people. The population policy has been mainly focused on promotion of the small size family

⁵ This is the United Nations’ projection of medium variant dependency ratios. Unlike calculation of dependency ratios of Viet Nam, in the projection, child dependency is defined as population aged 0-14 years, but working-age population is 15-64 years, and old-age dependency is defined as population aged 65 years and above.

⁶ Aging index of a population is measured by the ratio between the old population (aged 65 years and above) and the young population (aged 0-14 years)

⁷ In 2009, this ratio was calculated using the population aged ≥ 60 , instead of ≥ 65 as it was calculated in previous years

norm. The fertility choices of couples have been constrained in the social context of low fertility, clashed with the traditional culture of son preference (Pham et al., 2008).

Given the issues emerging from the demographic, socio-economic transition, a relaxation of birth control would be challenging, but desirable for the systems, in order to avoid very low fertility in urban centres like Hanoi and Ho Chi Minh city (GSO, 2009); to reduce the pressure for prenatal sex selection among couples, particularly those living in the Red River Delta (Pham et al., 2010a); to stabilise the high levels of sex ratios at birth (Pham et al., 2010b); and to slow down the trend of one son families and the population aging process (Pham et al., 2012).

Finally, the recent decline in the budget for population programme could be disadvantageous for an effective implementation of the population policy. The shortage of supply of contraceptives would limit individual reproductive choices, particularly among the poor. This could also increase the rate of unmet need of contraception, reflected in higher rates of unintended pregnancies and abortions. Both are undesirable population health outcomes.

5. Conclusions

Viet Nam has maintained a population policy that has rigorously pursued the goal of controlling the population size by reducing the birth rate over the past 50 years. The policy has been built on a basis of strong political support from the Communist Party, the Government and the National Assembly.

The policy has undergone three main periods of evolution: Initiation in the 1960-1970s, Maturity in the 1980s-1990s and Legalisation in the 2000s-2010s. The population policy

contributed to a decline in the fertility of Viet Nam from an average of six children per woman of reproductive age in the 1960s to only two in the 2000s.

The new challenges emerging from the demographic and socio-economic transition of the country are driving both conservative and liberal responses within the political landscape. We advocate for revitalising the population policy to respond more effectively to the new demands for socio-economic development of the country. These issues will play out in coming years as socio-economic changes continue to redefine Viet Nam's population structure and political identity.

List of Table and Figures

Table 1 The evolution of population policy in Viet Nam

<i>Evolution period</i>	<i>Key policy documents</i>		
	<i>The National Assembly</i>	<i>The Party</i>	<i>The Government</i>
1960s-1970s: Initiation of population policy			1961: Decision 216-HDBT issued to establish the Population and Birth Control Unit (1961-1983)
1980s-1990s: Maturity of population policy		1986: <i>Đổi Mới</i> policy launched at The Sixth National Party Congress 1993: Resolution 4-NQ/TW adopted Population and Family Planning at the Seventh National Party Congress 1995: Directive 50-CT/TW issued to strengthen the implementation of the population and family planning	1984: Decision 58-HDBT issued to establish the NCPFP (1984-2000) 1988: Decree 162-HDBT issued to regulate birth control 1993: National Strategy on Population and Family Planning 1993-2000 launched 1997: Decision 37-TTg of the Prime Minister issued to accelerate the implementation of the National Strategy on Population and Family Planning 1993-2000
2000s-2010s: Legalisation of population policy	2001: The 1992 National Constitution amended 2003: Population Ordinance issued 2008: Revised Population Ordinance approved 2012: Revise the 1992 Amended National Constitution 2015: to develop Law on Population	2005: Resolution 47 issued to reinforce the birth control policy, requesting for revision of the Population Ordinance	2001: Decision to establish VCPFC (2001-2006) 2001: National Strategy on Population 2001-2010 launched 2007: Decision to establish GOPFP (2007-currently) 2010: Decree ND-CP 20 issued to guide the implementation of the revised Population Ordinance 2011: National Strategy on Population and Reproductive Health 2011-2020 launched

Table 2 Key population indicators of Viet Nam, 1961-2010

<i>By the end of period</i>	<i>1961-</i>	<i>1976-</i>	<i>1981-</i>	<i>1986-</i>	<i>1991-</i>	<i>2001-</i>	<i>2006-</i>
	<i>1975</i>	<i>1980</i>	<i>1985</i>	<i>1990</i>	<i>2000</i>	<i>2005</i>	<i>2010</i>
Population (in millions)	47.9	53.0	59.7	66.2	78.6	84.0	89.0
Population growth rate (%)	2.24	2.11	2.29	2.05	1.51	1.33	1.15
Total fertility rate	6.7	5.89	4.5	4.02	2.5	2.25	2.08

Data sources: Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat, World Population Prospects: The 2008 Revision (United Nations, 2008b)

Table 3 Population dependency ratios, Viet Nam, 1979-2009

	1979	1989	1999	2006	2009
Child dependency ratio (0-14)	84.5	73	56.3	40.7	38
Elderly dependency ratio (60+)	14	13.3	13.6	14.3	13
Total dependency ratios (%)	98.5	86.3	69.9	55	51

Source: GSO's Censuses in 1979, 1989, 1999, 2009 and PCS in 2006

Table 4 Percentage of populations aged 65+, 0-14 years, and aging index, Viet Nam, 1989-2009

	Census 1989	Census 1999	PCS 2006	Census 2009
% of population aged 65+	4.7	5.8	7.0	9.0
% of population aged 0-14	39.2	33.1	26.3	25.0
Aging index	12.0	17.4	26.8	35.9

Data source: Census in 1989 (p. 16), 1999 (p. 20) and 2009 (12), PCS 2006 (p. 21)

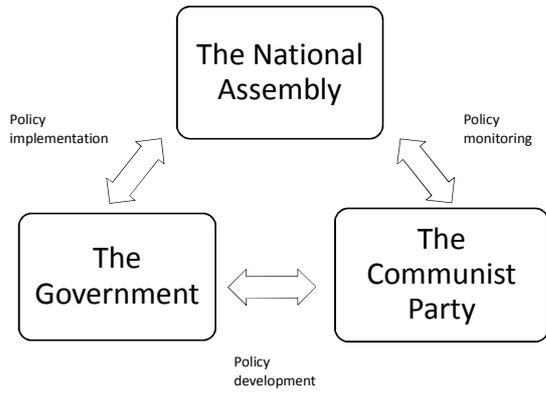


Figure 1 Framework for stakeholder analysis in population policy development cycle in Viet Nam

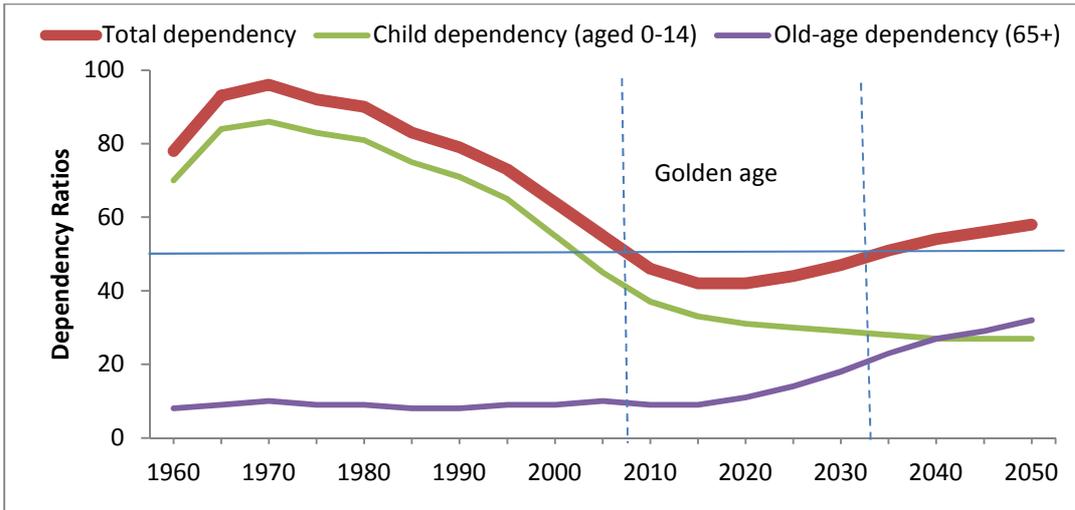


Figure 2 Dependency ratios, Viet Nam 1960-2050 (Data Source: United Nations Population Prospect: 2008 Revision)

Acknowledgements

The research was funded by the Australian Leadership Awards (ALA) Programme, the Australian Agency for International Development (AusAID). The cost for data collection was partially covered by the project 'Evidence for Health Policy Development in Viet Nam', funded by the Atlantic Philanthropies. There was no influence from these donors on the data analysis and report writing. The authors take full responsibility for the views expressed in this paper. The authors thank the University of Queensland of Australia for technical support in development of this paper.

References

- BEHRMAN, J. R. & KNOWLES, J. C. (1998) Population and Reproductive Health: An Economic Framework for Policy Evaluation. *Population and Development Review*, 24, 697-737.
- CONWAY, T. (2004) Politics and the Poverty Reduction Strategy Paper (PRSP) Approach: Vietnam case study. London, Overseas Development Institute.
- GOODKIND, D. M. (1995) Vietnam's one-or-two-child policy in action. *Population and Development Review*, 21, 85-111.
- GOPFP (2009) The downside of population work needs to be reviewed at the macro level. IN GENERAL OFFICE OF POPULATION AND FAMILY PLANNING (Ed.) Hanoi, Giadinh.net.
- GSO (1999) Population and Housing Census in 1999. IN DEPARTMENT, P. A. L. (Ed.) Hanoi, General Statistics Office.
- GSO (2007) Statistical Year Book 2006. Hanoi, Statistical Publishing House.
- GSO (2009) The 2009 Viet Nam Population and Housing Census: Extended Sample Results. Department of Population and Labour.
- JOHANSSON, A., LAP, N. T., DIWAN, V. K. & ERIKSSON, B. (1998) Population policy, son preference and the use of IUDs in North Viet Nam. *Reproductive Health Matters*, 6.
- JONES, G. W. (1982) Population Trends and Policies in Vietnam. *Population and Development Review*, 8, 783-810
- NCPFP (1993) Population and Family Planning Policies and Strategy to the Year 2000. National Committee for Population and Family Planning.
- NGUYEN, D. C. (2010) Review of the National Population Strategy for the period 2001-2010. Hanoi, National Economics University.
- PHAM, B. N., ADAIR, T., HILL, P. S. & RAO, C. (2012) The impact of the stopping rule on sex ratio of last birth in Viet Nam. *Journal of Biosocial Science*, 44, 181-196.
- PHAM, B. N., HALL, W., HILL, P. S. & RAO, C. (2008) Analysis of socio-political and health practices influencing sex ratio at birth in Vietnam. *Reproductive Health Matters* 16, 176-184.
- PHAM, B. N., RAO, C., ADAIR, T., HILL, P. S. & HALL, W. (2010a) Assessing the quality of data for analysing the sex ratio at birth in Viet Nam. *Asian Population Studies*, 6, 263-287

- PHAM, N. B., ADAIR, T. & HILL, P. S. (2010b) Maternal socioeconomic and demographic factors associated with the sex ratio at birth in Vietnam. *Journal of Biosocial Science*, 42, 757-772.
- THE CENTRAL PARTY COMMITTEE OF VIET NAM (1993) Resolution No.4-NQ/TW on Population and Family Planning. National Committee for Population and Family Planning.
- THE CENTRAL PARTY COMMITTEE OF VIET NAM (2005) Resolution 47-NQ/TW 'Further strengthening the implementation of population and family planning policy'. Viet Nam's Communist Party.
- THE CENTRAL PARTY COMMITTEE OF VIET NAM (2009) Conclusion of the Central Party Executive Committee on three year implementation of the Resolution No. 47-NQ/TW. Viet Nam's Communist Party.
- THE GOVERNMENT OF VIET NAM (1961) Decision No. 216-HDBT on Establishment of the Population and Birth Control Unit. Hanoi, Government Office.
- THE GOVERNMENT OF VIET NAM (1984) Decision No. 58-HDBT of the Council of Ministers on the Establishment of the National Committee for Population and Birth Control. Hanoi, Government Office.
- THE GOVERNMENT OF VIET NAM (1988) Council of Minister Decision 162 Concerning a Number of Population and Family Planning Policies. Hanoi, Government Office.
- THE GOVERNMENT OF VIET NAM (1997) Decision No. 326-TTg of May 19, 1997 on the Vietnam Population Day. Hanoi, Government Office.
- THE NATIONAL ASSEMBLY OF VIET NAM (2002) Law on State Budget. Standing Parliamentary Committee.
- THE NATIONAL ASSEMBLY OF VIET NAM (2003) Population Ordinance. Standing Parliamentary Committee.
- THE NATIONAL ASSEMBLY OF VIET NAM (2009) Revision of the Population Ordinance Article 10. Standing Parliamentary Committee.
- THU HÀ (2010) Cựu Chủ tịch Quốc hội bàn việc sửa Hiến pháp. Hanoi, VietNamNet.
- TUẦN VIỆT NAM (2010) Cựu Bộ trưởng Tư pháp bàn về Dân chủ và Pháp quyền. Hanoi, VietnamNet.
- TUCKER, S. C. (1998) *Encyclopedia of the Vietnam War: A Political, Social, and Military History*, California, ABC-CLIO
- UNITED NATIONS (2007) World population prospects. *The 2006 Revision Population Database*,. United Nations, Population division.

UNITED NATIONS (2008a) World Population Policies 2007. New York, Department of Economics and Social Affairs, Population Division.

UNITED NATIONS (2008b) World Population Prospects: The 2008 Revision Population Database. New York, Population Division of the Department of Economic and Social Affairs of the United Nations Secretariat, .

VCPFC (2003) Vietnam's National Population Strategy for the period 2001-2010. Viet Nam Comission for Population, Family and Children.

VCPFC (2007) National Strategy on Contraceptive Security 2008-2015 (Draft). Vietnam's Commission for Population, Family and Children.

VU, Q. N. (1994) Family Planning Programme in Viet Nam. *Vietnam Social Sciences*, 39, 3-20.