

JICA Ogata Research Institute Discussion Paper

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**No. 13**  
July 2023

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Suggested Citation: Vu, Le Thao Chi. 2023. Urban Poverty During COVID-19 in Vietnam: A Case Study of the Ma Lang-Dong Tien Neighborhood, Ho Chi Minh City, Vietnam. JICA Ogata Research Institute Discussion Paper No.13. Tokyo: JICA Ogata Research Institute for Peace and Development.

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## **Urban Poverty During COVID-19 in Vietnam: A Case Study of the Ma Lang-Dong Tien Neighborhood, Ho Chi Minh City, Vietnam**

Vu, Le Thao Chi\*

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### **Abstract**

Urban Poverty is a thorny issue for developing societies. But, while poverty can be a consequence of the pressure for economic growth, the urban poor are also the engine of that growth. This paper uses the case of Ma Lang-Dong Tien (Ho Chi Minh City, Vietnam) to investigate the various manifestations of poverty in the everyday life of the urban poor and to analyze the underlying causes of this situation. The paper suggests that there is a need to empower local volunteer networks and calls for these volunteers to provide minimal protection (before a problem occurs) and minimum subsistence (when a problem has occurred) for the urban poor.

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**Keywords:** Urban Poverty, Vietnam, Choices, Empowerment, Reduced Burden (of Decision making)

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I would like to thank JICA for the opportunity and the necessary funding and support to begin this research project in the middle of the COVID-19 pandemic. I would also like to express my deepest gratitude to Tran Chi Thien, research assistant for this project. Thien is an empathetic and excellent fieldworker who, on my behalf, conducted all the questionnaire surveys and in-depth interviews at Ma Lang-Dong Tien as I closely observed his progress. Thien also provided crucial insights into the community and history as a local of this community. I learned of another Vietnam that I never knew about.

## 1. Introduction

As a socialist country, Vietnam has been consistent in its ambition to achieve universal healthcare and primary education—both important preconditions for empowering people to “make informed choices” and “act on their own behalf” (Commission on Human Security 2003).<sup>1</sup> The Vietnamese people have recently enjoyed an increase in freedom to make their own choices. While freedom of choice is generally considered a positive aspect of life, it can also be a burden for many people especially in situations where they need to make crucial decisions about basic healthcare and education. As a result, people can find themselves engaged in cumbersome decision-making in almost every sphere of daily life. Moreover, this freedom to make choices only protects people’s autonomy to make their own choices, while the choices themselves do not necessarily reflect their welfare status (Sunstein 2015, 95), especially in situations where lack of income is a major constraint.

This paper examines the Vietnamese urban poor’s struggles against the backdrop of the government’s poverty alleviation efforts before and during COVID-19. The greatest challenge for the government’s empowerment policies is the heterogeneity of the urban population and the diversity of their problems. These problems are deepened by the multiplicity of various underlying socio-economic and historical issues. This reality has hindered the aim of freedom becoming an essential instrument for people to live the life they value—the noble goal of human security.

There are high hopes for the ongoing efforts of the Vietnamese government, with its piecemeal reform approach, to better embrace diversity. The author suggests that the need for increased attention on reducing the burden of decision-making would necessitate provisions of minimum protection (e.g., for healthcare) and a local network of volunteers who can help to provide a timely response when faced with contingencies. Hence, people can concentrate their limited resources on the other important aspects of life. This author believes that minimum protection for those who fall out of the government’s safety net will, in the long run, reinforce empowerment, through which realization of autonomy can generate better welfare outcomes for individuals and communities.

A few words about using the narrative form of analysis may be in order here as this inquiry relies on people’s narratives for the reasons discussed. A secure and stable economic life, along with improved social services, may await on the far shore of the transition that economic development promises. However, poverty and income distribution problems are obstacles in that transition. Thus, a series of puzzles may follow. Do people live with some idea of what awaits them on the

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<sup>1</sup> The idea of Human Security as the freedom to “make informed choices” and “act on their own behalf” was first introduced in *Human Security Now* (Commission on Human Security 2003). This is built on the concepts of “freedom from fear” and “freedom from want,” which were included in the Human Development Report 1994 (UNDP 1994).

other shore out of poverty? How do people live during the transition when the other shore is not in sight? Or more to the point, how do other people live with them without waiting for their disappearance?

Detailed statistics depicting the landscape of community life are abundant. However, they do not help us understand how people face, ignore, evade, or adapt to the problems in the poverty-prosperity transition. Consumed by the daily routines of surviving, people's narratives are tools when negotiating this transition. Attention to their narratives, by the same token, is our tool to capture and understand how they cope with the transition given their limited resources. Finally, people's lives, where their narratives help us capture their struggles, are not limited to low-income households. They are also found in families with members who have been struck by terminal ailments, in societies with no signs of economic development, and in communities devastated by natural disasters of unprecedented magnitude (such as the COVID-19 pandemic), among others.

## **2. Research Background**

### **2.1 Ho Chi Minh- the city without poor households**

Vietnam has recorded remarkable economic development since the 1980s, with an annual growth rate of 6 to 9 percent (World Bank n.d.), thus facilitating poverty reduction across the country. The poverty rate dropped from 58% in 1993 to 37% in 1998 (Glewwe and Dang 2011). According to Glewwe and Dang (2011, 583), “such a sharp drop in poverty in only five years is an achievement that is rarely seen in any developing country.” Vietnam continued to score impressive achievements in poverty reduction in the following years, with the poverty rate declining to 15.5% by 2006 (General Statistics Office (GSO) 2007). From 2016 to 2020,<sup>2</sup> the percentage of poor households also dropped sharply, falling from 9.9 to 4.8 percent (GSO 2020). In 2021, despite the impact of COVID-19, the poverty rate decreased to 2.23 percent (609,049 households) (MOLISA 2022). However, this number was still based on the national poverty line for 2016–2020.

Vietnam applied a new poverty line starting from 2022, at 24,000,000 Vietnamese dong (VND) per person/year (USD 1,200)<sup>3</sup> for urban areas and VND 18,000,000 per person/year (USD 900) for rural areas (OLLD 2021a), which is more than double the previous poverty line. Changes in poverty rates can also be seen in Ho Chi Minh City (hereafter, the City or HCM), which has been described as the economic hub of the country (contributing 22% of the national GDP and 27% of the national budget in 2020) (Nguyen 2021). The City boasts a similar success story in poverty reduction. In 1992, when the City started its “hunger eradication and poverty alleviation”

<sup>2</sup> In 2016, Vietnam started applying the multiple poverty index (MPI) to measure poverty based upon Decision 59/2015/QĐ-TTg on promulgating the MPI from 2016 to 2020. The national income poverty line applied during this period was 10,800,000 VND /person/year for urban areas and 8,400,000 VND/person/year (OLLD 2015b).

<sup>3</sup> USD 1 is roughly equal to VND 20,000.

program, the internal poverty rate was 17%, with 121,722 poor households (Nguyen 2015). Twenty years later, the City and neighboring Binh Duong province are the only two areas in Vietnam that recorded no poor households or near-poor households in both of the national surveys in 2015 (OLLD 2019) (see Footnote 2).

In addition to its efforts to alleviate poverty, HCM has consistently revised and increased its poverty line, independent of the national poverty line, every three to four years (Table 2.1). This is designed to capture the poverty situation more precisely, given its fast-growing economy. The City's poverty line for 2016–2020 was VND 21 million per person/year for poor households and VND 28 million per person/year for near-poor households<sup>4</sup> (OLLD 2015a). This is twice as high as the national poverty line for urban areas and the highest among the metropolitan areas in Vietnam. Below this poverty line, there were 3,767 poor households (0.19 percent) and 22,882 near-poor households (1.15 percent) in 2019 (Quang 2019). In 2019, the City revised its poverty line (2016–2020) to VND 28 million per person/year for poor households and VND 36 million per person/year for near-poor households (OLLD 2019). With this revised poverty line, as of June 2020, the number of poor households grew almost threefold to 9,672 households (0.39 percent), while the number of near-poor households shrank slightly to 22,864 (0.93 percent) (Thanh Vu et al. 2020).

In 2020, HCM again increased its poverty line for the period of 2021–2025 to VND 36 million per person/year for poor households and VND 45 million per person/year for near-poor households (OLLD 2020). In January 2021, HCM had 53,901 poor and near-poor households (2.13) (Pham 2021). Ten months later, as of October 2021, the City had an additional 4,118 poor and near-poor households, with a total of 58,019 poor and near-poor households (accounting for 2.29 percent of the total population of HCM) (Pham 2021).

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<sup>4</sup> Since 2014, Vietnam began to separate near-poor households from poor households depending on the level of difficulty. For example, members of poor households are eligible for *free* health insurance cards, while members of near-poor households are subsidized at a rate of 70%.

**Table 2.1:** Number of Poor and non-poor households in Ho Chi Minh under the revised city poverty lines<sup>5</sup> (1992-2021)

Ho Chi Minh Poverty Lines	Year	No. of Poor households (%)	No. of Near-Poor households (%)
Poverty Line 1992-2003 <sup>6</sup> - Under 3 million VND	1992 <sup>7</sup> 2002	121,722 (17%)	
Poverty Line 2004-2008 <sup>8</sup> - 6,000,000 VND/person/year	2004 <sup>9</sup> 2008 <sup>10</sup>	88,365 (7.76%) 14,143 (1.08%)	
Poverty Line 2009-2015 <sup>11</sup> - Under 12,000,000 VND/person/year (2 USD/day)	2009 <sup>12</sup> 2013 <sup>13</sup>	152,328 (8.4%) 14,000 (0.71%)	
Poverty Line 2014-2015 <sup>14</sup> - Poor household: under 16 million VND - Near-poor household: under 21 million VND	NA	NA	
Poverty line 2016-2020 <sup>15</sup> - Poor household: under 21 million VND/person/year - Near-Poor household: under 28 million VND/person/year	2016 <sup>16</sup>	67,090 (3.36%)	48,154 (2.41%)
	2019 <sup>17</sup>	3,767 (0.19%)	22,882 (1.15%)
Poverty line 2019-2020 <sup>18</sup> - Poor household: under 28 million vnd/person/year - Near-Poor household: under 36 million VND/person/year	2019 <sup>19</sup>	9,672 (0.39%)	22.864 (0.93%)
	1/2021 <sup>20</sup>	34.953 (1.3%) <sup>21</sup>	18.948 (0.7%) <sup>22</sup>
Poverty line 2021-2025 - Poor household: under 36 million vnd/person/year - Near-Poor household: under 45 million VND/person/year	10/2021 <sup>23</sup>	37,772 (1.4%) <sup>24</sup>	20,247 (0.8%)

<sup>5</sup> The table is created from sources that include news outlets and legal documents.

<sup>6</sup> Source: Yen and Thuan (2003).

<sup>7</sup> Source: Nguyen (2021).

<sup>8</sup> Source: Hung (2004).

<sup>9</sup> Source: Hung (2004).

<sup>10</sup> Source: MOLISA (2008).

<sup>11</sup> Source: OLLD (2010).

<sup>12</sup> Source: OLLD (2014a).

<sup>13</sup> Source: Yen and Thuan (2003).

<sup>14</sup> Source: OLLD (2014b). This is the year when the city began to separate near-poor households from poor households.

<sup>15</sup> OLLD (2015a).

<sup>16</sup> Source: Dang (2020).

<sup>17</sup> Source: OLLD (2015d).

<sup>18</sup> OLLD (2019).

<sup>19</sup> Source: OLLD (2015a).

<sup>20</sup> Source: OLLD (2020).

<sup>21</sup> The number is adjusted based on the total number of poor and near-poor households provided by Quang (2019).

<sup>22</sup> Source: OLLD (2020).

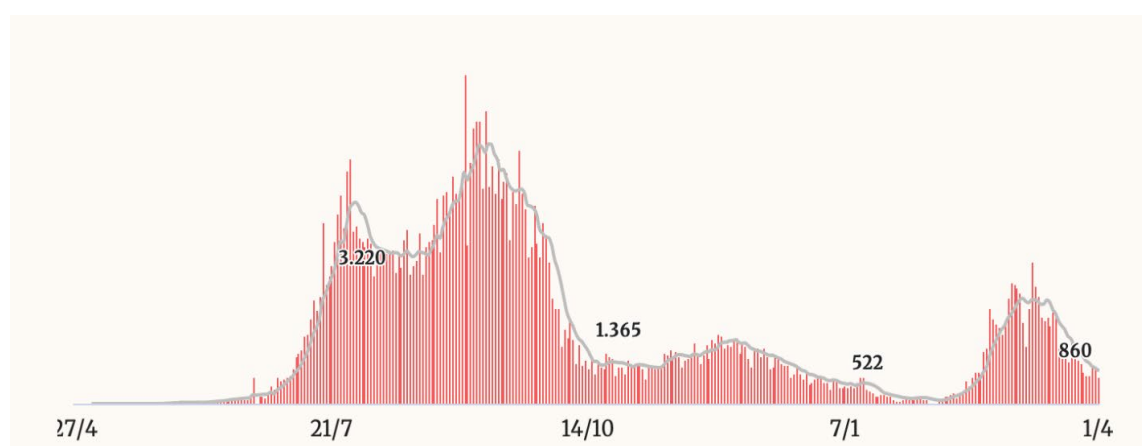
<sup>23</sup> Source: Pham (2021).

<sup>24</sup> The number is adjusted based on the total number of poor and near-poor households provided by Quang (2019).

## 2.2 A Public Health Crisis since April 2021

With its zero-COVID strategy, Vietnam went through the first three “mild” waves<sup>25</sup> of the pandemic with a small number of infections (2,852) and an especially small number of deaths (35) (Lam Ngoc 2021). However, the fourth wave, which started in HCM on April 27, 2021, engulfed the country in its worst medical crisis since the pandemic began. Close to 800,000 new infections and more than 19,000 deaths were added within six months (from the end of April until the end of September 2021) (Vietnamplus 2021). HCM suffered the most, accounting for half of the total infections (388,659) and three-quarters of total deaths (14,946) as of September 30, 2021 (Huu Cong, 2021), giving the city a death rate from COVID-19 of 4.95 percent of identified cases.

This was well above the national average as well as being above the average of its peer cities in Southeast Asia (Onishi and Li 2021). Despite a range of strict restrictions imposed on the City starting from the end of May 2021, the pandemic did not show any sign of slowing down until mid-September of the same year (Figure 2.1). Starting from October 1, 2021, the City lifted all restrictions. Vietnam shifted from a zero-COVID strategy to a “safe adaption to the pandemic, with vaccination being the key to helping the country gradually resume social and economic activities” (Quang Minh 2021).



**Figure 2.1:** Daily Infections in Ho Chi Minh City 2021, April 27–2022 (VnExpress.net (n.d.).

During the fourth wave, the central government implemented draconian measures in HCM but allowed other localities to exercise a large margin of autonomy in responding to COVID-19,

<sup>25</sup> The first wave started Jan 23–July 24, 2000, resulting in 415 infections (106 domestic cases, 309 at entry points, no deaths); second wave: July 25, 2020–Jan 27, 2020, with 1,136 infections (554 domestic infections + 582 at entry points); third wave: Jan 28–April 26, 2021, with 1,301 infections (910 domestic infections and 391 at entry points) and 35 deaths.



depending on the seriousness of the situation. The following shows the timeline of restrictions implemented in HCM since May 2021:

- May 31, 2021: the City applied Government Directive 15<sup>26</sup> for 15 days and extended the application until June 29;
- June 19, 2021: the City issued Directive 10 to supplement Directive 15;
- July 9, 2021: the City applied Directive 16 (Social Quarantine of the entire City) and extended its enforcement four times until Sept. 31;
- August 23, 2021: the government sent soldiers and militia forces into the City;
- September 31, 2021: Directive 16 was lifted.

Vietnam claimed that Directive 16—the strictest restriction—was not a lockdown and that they applied the Directive only in specific locations where they detected new infections. However, the City came under a lockdown-like state with close to 4,000 locations placed under the Directive as of July 27, 2021 (Tuoi Tre Online 2021). The drastic measures taken by the governments and City impacted on the lives of many.

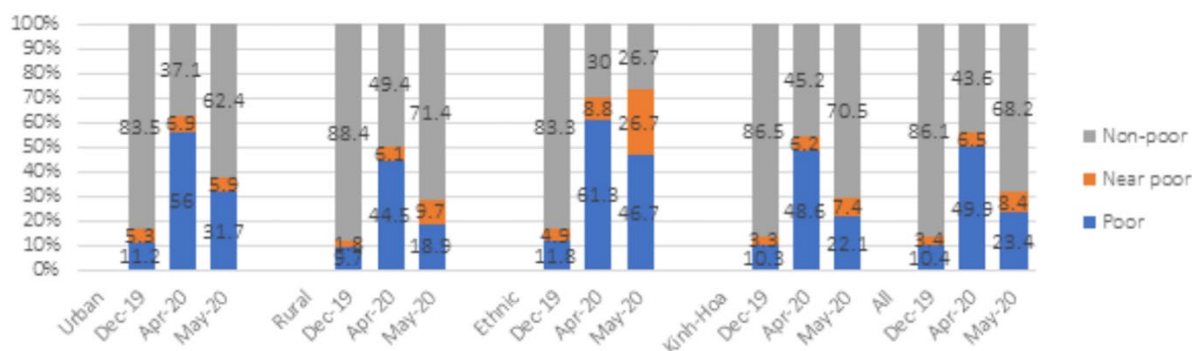
### 2.3 Poverty during COVID-19

That was not the first time Vietnam had implemented strict restrictions on its population. In 2020, despite the small number of infections (4 infections/day on 31/3/2013 (HCDC 2020), the Vietnamese Government, in an effort to pre-empt the spread of the infection, implemented a 3-week “Social Quarantine” (*Cách ly toàn xã hội*) on the entire country with the principle: “*family isolated from family, hamlet isolated from hamlet, village isolated from village, district isolated from district, province isolated from province*” (MOH 2020). Urban areas, like Ho Chi Minh and Hanoi, were hit hardest. According to the UN report,<sup>27</sup> the proportion of income poor in urban areas in December 2019 was 11.2% but jumped to 56% in April 2020 (Figure 2.2), while it was 9.7 percent and 44.5% in rural areas. The situation had recovered somewhat by May 2020, with the proportion down to 31.7% in urban areas, though still much higher than the 18.9% in rural areas. According to one informant living in the Ma Lang neighborhood, “*I have never seen anything like this. In the 2008 crisis, it was difficult, but people still could move around to make*

<sup>26</sup> Directive 15 asked localities across the country to stop social events in which over 20 people congregated in a single place and cease gatherings of 10 people or more outside workplaces, schools and hospitals. Directive 10 suspended the following: public transportation including taxis, buses, street markets, and non-essential services; prohibited gatherings of more than three people in public places and suspended all unnecessary meetings; allowed people to go out only to buy food, medicines, and in cases of emergency; encouraged organizations/offices to request their staff to work from home and only go to the office in cases of necessity. Directive 16 did not allow gatherings of more than two people and asked people to stay at home, to only step outside for emergencies, to only buy food and medicine, and to only work in factories, production facilities, and businesses that involved the trade of “essential” goods and services.

<sup>27</sup> In April and May 2020, UNDP and UN Women commissioned a rapid impact assessment and monitoring exercise (RIM 2020) to collect and analyze information on the socio-economic impact of COVID-19 on 930 households and 935 enterprises (in 58/63 provinces) who were vulnerable to a sudden loss or reduction of income. (UNV 2020).

*their ends meet. This time, everything was just standing still or even frozen. People couldn't move. They could not do anything to earn money."*



**Figure 2.2:** The proportion of income poor, near poor, and non-poor households by location and ethnicity (UNV 2020, 34)

The impact of the social restrictions in 2021 was far worse for the urban poor. According to the report “Impacts of COVID-19 on the Employment Situation in the third quarter of 2021” (GSO 2021), the total number of unemployed people in Vietnam was 1.7 million people (3.98 percent), an increase of 450,000 compared to the same quarter of 2020. It was the highest unemployment rate in Vietnam within the past ten years. The unemployment rate in Ho Chi Minh City was exceptionally high at 9.93 percent (four times higher than Hanoi with 2.49 percent). Being without jobs during the four months under restrictions put the lives of millions of people in big cities in an unprecedentedly precarious position. Soon after Ho Chi Minh lifted all the restrictions, thousands of migrant workers with family members and belongings on their bikes rushed to leave the city, jamming all the exits. Before this, there were already an estimated 1.3 million people leaving urban areas (especially from Ho Chi Minh and Hanoi) from July to September 2021 (Hong Chieu 2021).

There was no survey on the exact number of people affected by COVID-19 in 2021 in Ho Chi Minh but looking at the efforts of the City to “catch” those affected into its safety net reveals part of the picture. On June 25, 2021, the Ho Chi Minh People’s Committee issued Resolution 9/2020 NQ-HDND to include informal workers who fell into six specified groups as the legitimate beneficiaries of the city support package.<sup>28</sup> In July 2021, the Ho Chi Minh Department of Labor, Invalids and Social Welfare pointed out that 27,000 informal workers in the City were not included in the six categories in Resolution 9 (Chi 2021). In early August 2021, the same department made an official request to the City’s People’s committee to add five more categories of informal jobs,<sup>29</sup> and the expected number of people that need to be supported was 465,150

<sup>28</sup> The six groups of informal workers include: street vendors, waste collectors, goods transporters, lottery ticket sellers, service related business, and others (OLLD 2021-b).

<sup>29</sup> The five categories include: 1) Babysitters, cleaners, helpers; 2) security guards, bike/car washers; 3) bike fixers; 4) newspaper sellers, shoe polishers; 5) others of similar characteristics.

(Minh Quan 2021). In mid-September 2021, the same department submitted another proposal to the Committee to officially request support for 7.5 million who were experiencing an “extremely difficult situation” (hoàn cảnh thật sự khó khăn) in the City at that time (Thu Chan 2021). Note here that Ho Chi Minh City’s population was then around 9 million.

One more telling piece of evidence of the severe impact of COVID-19 on the lives of the people in Ho Chi Minh City is the increase in the number of people exiting social insurance schemes to collect the accumulated premiums. According to Mr. Nguyen Van Lam, Deputy Director of the City’s Department of Labor, Invalids and Social Welfare, more and more people want to exit social insurance, and within 2021 alone, almost 100,000 people (out of 2.2 million policyholders) (VnExpress.net 2021) in Ho Chi Minh decided to do so at the risk of having no pension when they retire. The conditions for people to withdraw is that they have been unemployed for a year and had paid social insurance premiums for less than 20 years (Dinh 2022). The main reason for this massive withdrawal, according to Mr. Nguyen, is the loss of jobs and, therefore, loss of income, driving people to withdraw the premiums to cover their living expenses. Their alternative is to find employment in the informal sectors (where social insurance is not compulsory).

### 3. The Research

#### 3.1 Research Site and research methodology

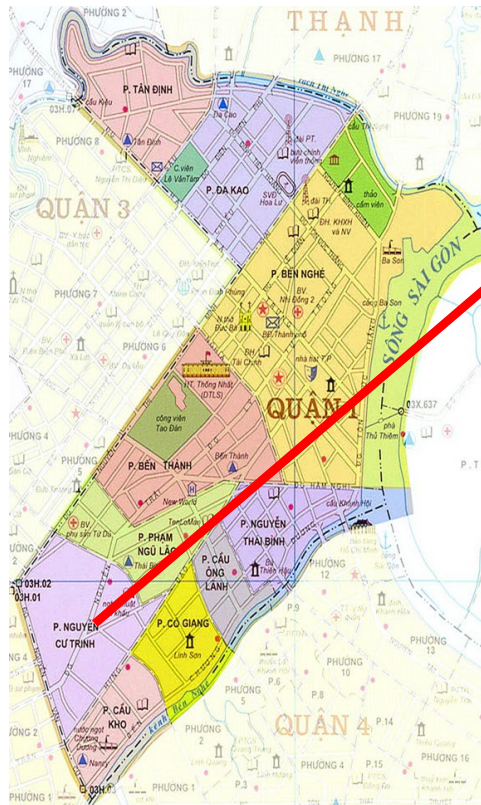
Questionnaire survey and in-depth interviews were employed for the research in the Ma Lang and Dong Tien neighborhoods. We started one round of preliminary research in October 2020 with four in-depth interviews. Due to the unexpected developments of COVID-19 in Vietnam, the research did not resume until November 2021 and lasted until the end of the same month. Altogether, 23 respondents participated in in-depth interviews and 60 in the questionnaire survey (59 from Ma Lang and 24 from Dong Tien). Most of the respondents are females (65/83). The specific age groups are 50-59 (27) and 60~69 (21) and 27 under the 40s and eight over 70s.

Ma Lang and Dong Tien are the two poor neighborhoods located in Nguyen Cu Trinh Ward (Size: 76.23 ha, population 34,357 as of 2016) (SQHKT n.d.), part of District 1, the busiest and wealthiest district of Ho Chi Minh, accounting for half of the population of the entire ward: Population of Dong Tien: ~ 10,000, Ma Lang<sup>30</sup>: ~7100 (2016). Ma Lang once was a graveyard of a Catholic church (check Map 3.3). After the French left, it became an abandoned area where the homeless gathered. In 1979, the city moved the graves to different places and turned Ma Lang and also Dong Tien - the area on the opposite side (see Map 3.2) - into a “temporary settlement” (khu tạm cư) for the homeless and vagabonds, many of whom were returnees from new economic

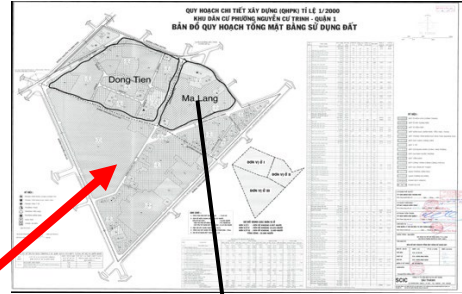
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<sup>30</sup> Ma Lang is not the official administrative name but is so called by its residents. There are many explanations for the name Ma Lang, most of which point to the origin of the word “Ma” - meaning “a grave”.

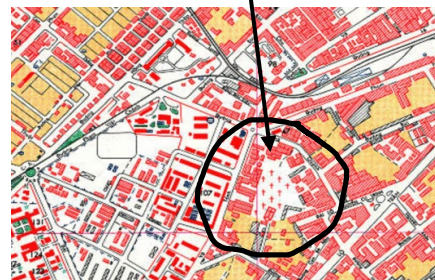
zones (they are called new economy people - *dan kinh te moi*). After nearly 50 years, Ma Lang-Dong Tien is still called a “temporary settlement.”



**Map 3.1<sup>31</sup>**: District 1 of Ho Chi Minh city. Nguyen Cu Trinh Ward is shaded in light purple color.



**Map 3.2<sup>32</sup>**: Map of Nguyen Cu Trinh War, with Ma Lang and Dong Tien circled in black.



**Map 3.3<sup>33</sup>**: Ma Lang area in 1959 with red crosses in the middle. It was then a graveyard for a Catholic church.

## 3.2 Research Findings

### Education Level

The report, Multidimensional Poverty 2016-2020 by GSO and UNDP (GSO n.da), points out that “Health insurance, adult education, and living square are indicators [which] contribute significantly to multidimensional poverty in the urban area.” Except for the indicator Health Insurance, discussed later, adult education and living square of these respondents confirm this statement. Their educational attainment is low (Table 3.1). Only five went/are going to college,

<sup>31</sup> Source: Ban do Viet Nam 2021.

<sup>32</sup> Source: SQHKT n.d.

<sup>33</sup> Source: AGSL 1959.

seven went to high school, and the rest have not completed junior high school (21) or Elementary school (31). Ten of them had never gone to school.

**Table 3.1: Educational Attainment**

No schooling	10
Elementary	31
Junior High	21
High School	7
College/University	5
NA	9
Total	83

*Source:* Author.

Based on the answers of the 21 respondents who provided the size of their house in square meters ( $m^2$ ) (mainly their own homes),<sup>34</sup> the average size per house is  $15m^2$ . Five places are under  $7m^2$  for 3-4 members co-living. Considering the family size of these 21 households, the average size per capita is  $2.7 m^2$ , much smaller than the average housing size to be considered poor,  $8m^2/person$  (GSO n.da).

### **Informal Sector Employment**

Most respondents are informally employed, which is characterized by low wage income, job instability, and no social insurance (Table 3.2). Only 7 of them used to have formal jobs from which they received a salary, but they all lost these during COVID-19. One more characteristic of their informal employment is that one person may hold many informal jobs simultaneously. Finally, even when they say that they are mainly housewives, this does not mean they do not

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<sup>34</sup> Others, especially those who rent houses, report size in terms of the number of rooms or the number of floors.

generate income. They are also engaged in “small businesses” (e.g., buying waste materials and selling them) whenever opportunities present themselves.

**Table 3.2:** Study Participants by Employment Type

Housewife	15
Small businesses	29
Labor work (for females)	14
Labor work (for males)	11
Salary-based work	7
Freelancer*	1
Retired/stopped working*	5
NA	1
Total	83

Source: Author.

*Notes about the jobs they do:*

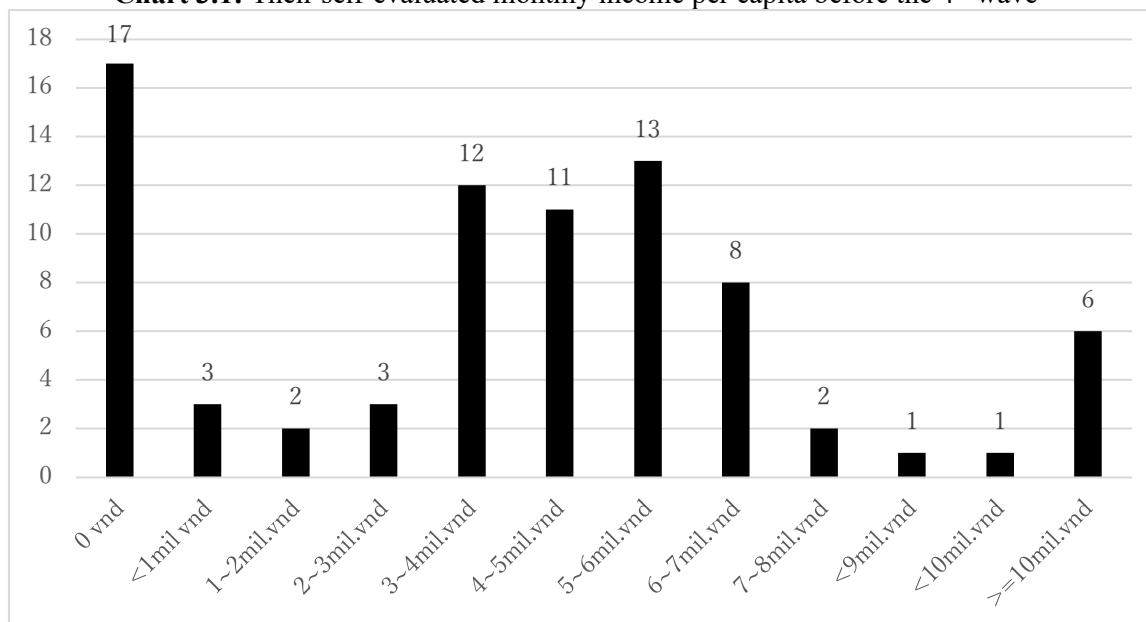
- *Small business (buy-and-sell): selling food, selling lottery tickets, buying and selling scab metals/waste materials*
- *Labor work for females: house helper, babysitter, restaurant waitress*
- *Labor work for males: motorbike taxi driver, transporter, construction worker*
- *Salary-based (receiving monthly salary instead of daily wages) work: security guard, kindergarten teacher, factory worker, the local militia*
- *Those who used the word "retired" either stopped working or lost a job even before the COVID-19*

### Income

The typical income brackets (chart 3.1) are the two in the middle of the chart with the income range of 3-6 mil vnd (150 USD ~ 350 USD) (44 people). 17 people claim to have no income. They are mainly housewives and the elderly (over 60s). Their income level falls between the city poverty lines (less than 3 million. vnd/ month) and the calculated minimum income to support living in the city (at least 7.5 million VND/person) (VnExpress.net 2022). Three of the 6 whose income is 10 million VND are males (all lost their job during COVID-19), most likely the primary bread earners, while the other 3 - females - do small business. Because of the nature of informal

employment, one important consideration is the wide fluctuation range of their income. Also, for this reason, there is a likely margin of error in their claimed income.

**Chart 3.1:** Their self-evaluated monthly income per capita before the 4<sup>th</sup> wave



Source: Author.

Six people said that they are certified as poor and near-poor households. Only 3 receive monthly financial support of 300,000 ~ 350,000 VND (15~17 US dollars). Others receive occasional presents/cash and other benefits such as subsidized health insurance and subsidized education for their children/grandchildren. Three currently do not have any steady source of income, one selling lottery tickets for a wage of 3-4 dollars/day and two (a sewer and food hawker) occasionally earning 3 ~ 4 million Dong (150~200 US dollars/month) - which is the standard range of income for other residents.

### Houses

22/83 rent houses and renting fees occupy the biggest of their living expenses. Fifty people are freed from the house renting cost, and 36 people say they “have a house.” 24 out of the 50 people say that the house was provided by or rented from the State (*nhà nước*). In the 1980s, the city turned Ma Lang and Dong Tien into a temporary place for the homeless and provided shelters. Most of them have lived in these shelters (later improved into houses) until now. They have a home and do not need to pay the rent, but it remains unclear whether they have ownership over this place.

### Debts and Saving

As shown in Table 3.3, the number of people who have savings is almost negligible among the respondents compared to those who have debts (32). Only 4 people say that they have savings,

and these are exceptional cases: an 18-year college student, a college graduate whose income was higher than the average before COVID of 6 ~ 9 million VND, a 52-year-old single lady who seems to enjoy “saving” everything, including spending on food and electricity, and a 54-year-old female (with an income of 3 million VND) who did not go into the details of her savings.

**Table 3.3:** Debts and Saving

Response	Saving	Debts
Yes	4	32
No	57	30
N/A	22	21
Total	83	83

Source: Author.

Regarding debt, five of them specifically mentioned that they had borrowed money because of COVID. Other than that, having debts is normal (they borrow money when they run into difficulty, or they can only pay back the interest, but not the debt itself) among these people:

Mrs. T.T.V (F, 66) is a food seller. Before her husband passed away, she always had a 5 million debt for many years to keep her small business (selling ballpoint pens) going. *“When I sell out the pens, I bring the “capital” [the earning] to go to Cho Lon and buy more pens to resell, and get the money earned to buy rice and food. Sometimes, the capital money falls short and I have to borrow money [...] I have no idea why I can live like this for many years.”* Ironically, the death of her husband helped her pay back the 5 million debt: *“When he was ill, people gave him money and he saved that money- around 5 million. He saved that money and told me to use that money to pay the debt when he died. That is how I freed myself of the debt.”*

This means not having a debt is considered a success. N.T.C (F, 52) emphasized it five times in her talk. “I don’t owe money to anyone,” and she added that “my life is better than others because of the two things: I have a house (therefore no renting fee) and I don’t have debts.”

### **Working Elderly (People over 60s~80s)**

They do not have a retirement age and obviously no pension in the informal sector. They are part of the 64.4% of the elderly (over 60s) in Vietnam who do not have any pension or social protection (the number of people over 60 is 13.4 million) (Nhat Linh 2021). Their living is still contingent heavily on how much they can do to generate income or how they can contribute to the household economy. Only 6 of them stopped working because of old age or lost their job even before the COVID, and 23 people over 60s are still engaged in wage jobs to support themselves and their families (adult children and even grandchildren). Out of the 23, 5 of them are housewives. They are also fully engaged in house chores, preparing three meals for all the members, laundry, and others for their extended families:

Mrs. V, at the age of 66, is still fully engaged in wage-earning jobs like transporting water, being a housemaid, or buying and selling waste materials, since her husband cannot do



much because of his health condition. Besides, she is a full-time housewife who has to do all the house chores, including feeding the grandchildren, among others. *“I have been doing all these things since my children were little. Now that they have grown up, having their own family, I finally have a break. That said, I still help them with laundry and meals. Before, I just needed to take care of my children. Now both children and grandchildren.”*

#### 4. Discussion

From the findings and the collected narratives (through in-depth interviews), there are several important points we would like to bring up for discussion to shed more light on the intricacies of urban poverty in the context of Ho Chi Minh City.

##### 4.1 Political Economy of the Urban Poor

Money goes around on the merry go around. Such is true in this urban community. Money, though mainly petty cash, is not allowed to sit idle. Savings are rare. Having debts is a way to keep the flow of money moving. Savings to the local people is a verb, not a noun. They frequently use it to describe an act of spending less on one thing to have enough for others, as said by T.T.N (F, 55): *“I save by spending less for grocery to buy bath soap, I cut down on coffee money to buy medicine.”*

In the form of cash, money must be available and ready for use, no matter how small it may be. It is called “the capital” (*tiền vốn*). This cash is for consumption and other benefit-generating activities, including lending money for interest or spontaneous investments when an opportunity arises.

*“I don’t have any savings, but I have a little extra up my sleeve- around 50~100 thousand VND (2~3 US dollars) as my capital (tien von) to buy stuff (usually waste materials) if somebody calls. If I don’t have money available, people will sell the stuff to others” (T.T.N, F, 52).*

The dire need for cash creates a common phenomenon; debts (Table 3.3). 32 people out of 62 answered the question on having debts. Borrowing money from acquaintances (24 people) is a more popular choice. Although this was not specified exactly among the acquaintances, it is an implicit understanding that they usually borrow money from local lenders. Among the borrowers is Mrs. N.T.U (F, 60), one of the respondents participating in the in-depth interview. The characteristics of these debts are: that each is small, but is one of many, which can amount to a sizeable total sum. *“I borrow 1-2 million VND at a time, no more than that.”* (N. T. L, F, 62); *“I have debts of around ten million VND from 2-3 lenders”* (N. T. N, F, 60); or P. T. T. N (F, 48)

answered in the questionnaire that she “constantly” resorted to high-interest-rate loans and her total debts are around 50 million VND (2,500 USD).

Having debts, without a doubt, is not desirable because they put people’s lives in a precarious state. For these people living in this community, decisions related to money-borrowing are among the many choices they make every day. When they need money, it takes them little time to resort to borrowing from people they know. Loans (especially local lenders) are easy to access. They can have many debts from the same lenders or different lenders. They can extend their debts for years if they pay the interest due at the right time. Those who fail to pay the interest and/or the loans are subject to the treatment, and temperament, of the lenders (verbal abuse and violent measures included). Having debt is part of their way of living. It is an important instrument for them to keep in their everyday life. Paying back the debts is a concern routinized in their everyday life. Earlier, said Mrs. T.T.V, “I have no idea why I can live like this (having debts) for many years.” This reality makes not having debt a "success" for people like NTC (F, 52), who thinks her life is better than others because she does not have debts.

The relationship between money borrowers and money lenders, for that reason, is one of the backbones of this local and informal economy. The money lending business saw its heyday in the 1980s and 1990s. Around that time, it was impossible for the residents, most of whom did not have or had lost their documents like ID or household registrations, to access financial institutions (banks). The local money lenders offered an alternative: borrow money easily but at high-interest rates. Mrs. U and her whole family (her mother, siblings, and later husband and children) have been in this business. How they started the business was not because they had abundant “extra” money. They were also among the first generation in Dong Tien - Ma Lang, returning from the New Economic Zones (NEZs) (*see* Section 3), sharing the low starting point like the other residents.

Mrs. U started by selling (pork) blood porridge (*chao huyết*). She invested the small extra money earned from the business in “*hụi*”- the merry-go-round group.<sup>35</sup> When it was her turn for the “jackpot money” (*giật hụi*),<sup>36</sup> she used that money for lending to others. For example, if she had

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<sup>35</sup> “Hụi” in Vietnam is similar to that of “merry-go-round” microfinance among the poor women in Kibera- a slum area in Nairobi, Kenya. Hụi began around the 1980s, peaked in the 1990s, and dwindled in recent years. Depending on the size of the groups, they decide on a fixed, and usually small, amount of contributing money to the pool- *contributing money* (*Góp hụi*). Then the group members decide who and when to get the pool money- *jackpot money* (*Giật hụi*).

<sup>36</sup> The group members decide who and when to get the jackpot money (the pool money).

two million VND, she would lend it to 2 to 3 people for a small daily interest of a 20~30 thousand VND (Standing loans).<sup>37</sup>

The residents call such money Rotating Money (*Tiền xoay*) - the money that is being circulated (e.g., being borrowed). She accumulated this small interest money to do other business. She did not want to risk lending big in case people did not return the money. When people increase their debts - her rotating money - she has to resort to her "capital" money.

The prime condition for giving loans to borrowers is being an “acquaintance”- somebody they know. Mrs. U’s clients are mostly from the Dong Tien area- where she resides, and her son’s clients are from Ma Lang- where he and his family reside. Other than that, the lenders rely on their casual judgements of the borrowers’ ability to work and generate income, say, age, strength, and purpose of the loans. Stability of the work or family is too evident a condition in money transactions in this community where most people are informal sector laborers who have to have more than one job to survive.

In the 2000s, the market for money lending business had shrunk because banking institutions had become more available and accessible. Besides, more and more lenders had emerged in the community, leading to harsh competition among the lenders themselves. The nature of the relationship between lenders and borrowers also changed subtly. Moneylenders rely more on money borrowers to sustain their business, and money borrowers have more choices of lenders to choose from. Mrs. N is one of Mrs. U’s borrowers and Mrs. U is one of Mrs. N’s lenders. Ngoc has a total debt of about 50 million VND from many lenders. She has a small snack food shop. Mrs. U asked Thien to “advertise” Ngoc’s shop on his social network, which helped her sales increase 3-4 times.

One day, he saw Mrs. N come to his house to return some money (not sure whether it was standing loans or installment loans) to his mother, Mrs. U. What Thien did not know was that Mrs. N borrowed more than 20 million VND from his mother for several years and did not pay back even the interest. She chose Mrs. U as the first lender to return some of the money. Mrs. N told Thien: *“It is up to how you live as a money lender that makes borrowers want to return the money. Because borrowers usually don't want to return the money.”* *“It was like the reward for our being good,”* Thien said *“we helped her (increase the sale), and she returned the debt to my mother [...], but it was not the original intention of my mother. She just wanted to help people through*

<sup>37</sup> Standing loans (*tiền vay đứng*): It is a kind of debt that borrowers need to pay only interest on an agreed schedule (usually on a daily basis for the poor) and pay the loan in full by the end of the term. Although the interest rate is higher than for an “installment loan,” the poor prefer “standing” loans for the affordability of daily payments and the possibility of renewing the loan at the end of the schedule (they just need to continue paying the daily interest fee on a new schedule). People can also opt for *Installment Loans* (*tiền vay trả góp*): It is a kind of debt in which borrowers divide their payment (interest included) into several installments during a scheduled period. However, in this community, people prefer “standing loans” over “installment loans” because it is easier to manage the payback on an everyday basis.

*difficult times.”*

The question is: is Mrs. U exceptional? Is she simply morally motivated and protective of her clients? Is her “moral” stance politically motivated, which results in her borrowers choosing to pay back the debts to her first? Or is it just a practical way of living in this poor community? After all, Mrs. U is not only a money lender. She is also one of those working elderly who need to earn a living to support her two grandchildren (literally everything from clothing, feeding, to schooling). She has been one of them, a member of this community from the very beginning. She is not only living in the community. She has been living it. She, according to her son, is an excellent storyteller. She knows many old-timers in this community, and she knows their stories from the inside out. Being one of them and witnessing many stories grow a profound empathy for her fellows. As a money lender, she may be exceptional. As a local member, she is not. The community represents one rough facet of a Vietnam still wobbly walking out of poverty. At the same time, it is a buffer zone embracing lives that remain distant from the formal economy and institutions. A degree of fluidity and flexibility is required to live in this community, live it, and survive it.

Nonetheless, money is an obsession and profit motivation in such a community. But insistence on profit maximization might not be a wise, if feasible, strategy here. Given the high-stake risks of the business and the accompanied insufficient information environment, “satisficing” - finding satisfactory [good enough] solutions for a more realistic world (not an optimal solution) - is Mrs. U's way of doing business. She may not demand the payment in due time but does not write off the debt entirely either. How she lives and the money-lending business reveals her as a community member. In the long run that helps keep her business going (not necessarily growing).

#### **4.2 Poverty as an enduring legacy of war**

Mrs. U<sup>38</sup> is among the 13 respondents (ten females and three males) in their 40s (1, precisely 49 years old), 50s (5), 60s (4), 70s (2), 80s (1) who reported to having experienced the “new economic zones” (NEZs-*kinh te moi*). They were the first residents who moved to Ma Lang/Dong

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<sup>38</sup> She was born in 1961 in Saigon (now Ho Chi Minh city). Two months after Saigon’s liberation (4/1975), her mother took no time signing up for the whole family to go to an NEZ, fearing for the consequences of her two sons having been conscripted by the Southern Army before 1975. Within 7-8 years, the family moved to 3 different NEZs before returning to Saigon in 1982, and they felt “lucky” to find this Dong Tien temporary resettlement community around 1982 (or 1983). According to her, the temporary shelters were only available on this side of Dong Tien but not yet in Ma Lang. Later, a dozen shelters in Dong Tien collapsed, which led to an exodus of people, including her mother and other siblings moving to the other side - Ma Lang. She was the only one in the family to stay on in Dong Tien.

Tien in the 1970s and early 1980s “after their return” from NEZs. The timing also overlaps with many other senior residents (Table 4.1).

**Table 4.1:** Timing of their move to Dong Tien and Ma Lang, respectively (only among the 44 respondents who specified this in their answers)

	1970s	1980-5	1986-9	1990s	2000s	2010s	Total
Ma Lang	4	16	1	3	0	2	26
Dong Tien	0	9	1	4	2	2	18
Total	1	25	2	7	2	4	44

*Source:* Author.

The predominant timing (the late 1970s and early 1980s) of moving into this community of the respondents (29) reveals an important historical background regarding the creation of this community. Saigon (now Ho Chi Minh City) until 1975 was an “artificial economy” receiving an annual US\$ 700 million in foreign aid, with a significant fraction of the active urban population being supported directly and indirectly by the war economy (Desbarats 1987, 48). The end of the Vietnam war in 1975 brought an end to that “artificial economy,” pushing around 1.5 million people, including those who earned a living by providing various services to the military, into a state of unemployment (Desbarats 1987, 48).

After 1975, the Provisional Revolutionary Government (PRG) took no time in starting its population redistribution program: “to facilitate the return of war refugees to their original villages; and to create New Economic Zones on virgin and fallow land and in the green belts planned for development around the major cities” (Desbarats 1987, 51). The three critical periods in this program are the period of the Provisional Revolutionary Government (PRG), marked predominantly by the repatriation of war refugees (1975-76), the Second Five-Year Plan, dominated by the implementation of the New Economic Zones policy (1976-80), and the Third Five-Year Plan, characterized by the liberalization of rural development policies (1981-85).

The southern cities' de-urbanization, especially Saigon, also addressed the internal security issues of the population redistribution efforts. The PRG aimed at reducing Ho Chi Minh City to 2 million from 4 million. Nevertheless, the official figure of 1,472,000 settlers given for the Second Plan period could be an overestimate. However, it is unclear whether it includes the settlers “repatriated” under the PRG (Desbarats 1987, 59). However, due to the harsh conditions in the New Economic Zones, many of these new settlers, including those who returned to their home villages, went back to the cities. One data source revealed that of the 1 million people from Ho Chi Minh, almost half secretly moved back into the city. Returnees from the NEZs had to live illegally with relatives and friends or camp out in streets, parks, and even cemeteries. They engaged in open-air street markets, smuggling, or any other underground activity that allowed them to survive. The most visible effects of return migration was a swelling vagrant population

of NEZ returnee's ineligible for food rations and a marked increase in robbery and petty crime (Desbarats 1987, 61-2). This episode is still vivid in Mrs. U's memory:

*Many of these NEZ returnees didn't have ID documents. Therefore, it was hard to find any job. The most decent jobs they could do were cyclo taxis and garbage collections. Other than that, people had no choice but to resort to robbery, stealing, prostituting, [...] selling their blood in exchange for money for goods [...] Some people have had to hide a brick in their pocket to meet the standard weight to sell blood, and some people sold their blood several times a month [...] There were also many single men who volunteered to be sterilized to get the cash of 300,000VND (equivalent to 300 dollars at the current exchange rate)<sup>39</sup> [...] The scarcity of adults pushed many children in this neighborhood to provide significant labor for the household by becoming beggars (what they called *đi cóc*, literally translated as "go frogging"). Mrs. N [one of the respondents] was one of those children. She went around asking for leftover food and begging for money while the only thing her mother could do was sell blood [...] Whenever some political visitor was coming to town, they [the authority] again gathered the homeless and beggars and relocated them into here.*

To tackle the situation of the homeless and vagabonds filling the streets of Ho Chi Minh city, the former prime minister Vo Van Kien (1991-1997) decided to move the graves elsewhere and turn Ma Lang into a temporary settlement for the homeless (Dai & Nguyen 2017). Since then, the area has been known as a "temporary resettlement for new economic people" (*khu tạm cư cho dân kinh tế mới*) instead of a graveyard. For these people, the impact of the war did not reach them until 1975.

### 4.3 The Vicious Circle of Poverty and the loss of the second generation

Mrs. U. made one observation about the children growing up in this neighborhood - the second generation - that they did not receive a proper education like the first generation. There are many reasons behind this: many of them lost their personal documents - the means of access to public services; some (especially among those who used to work for the Southern government) suspected the education system under the new government; and last but not least, making both ends meet was the work of the whole family including children, leaving no time for children to be a child. The second generation, as a result, replicated almost exactly the life of their parents: that is, they were also deeply caught in the whirlwind of everyday life affairs - money, food, and clothes. They did not go to school, or they dropped out in the middle. They did anything for money, as seen in the narrative of Mrs. U. "I never thought that my daughter would follow my step like this (working as a house helper)," said Mrs. H, a 65-year-old lady.

There was a dangerous trap for the second generation who grew up in this community: drugs, the invasive issue for many years in this neighborhood. It was considered the hot spot for drugs in Ho Chi Minh City in the 1990s. According to Thien - the research assistant who is also a local resident, drugs deprived the area, especially Ma Lang, of many young working-age people.

<sup>39</sup> This was part of the family campaign for every family to have only one or two children in the late 1980s.

Among the respondents, three females in their 60s lost their sons due to drugs, and two became clean 20 years ago. This was not exceptional. The lack of education and the early exposure to such a complicated living environment deprived the second generation of a childhood that a child deserves. Now the hope of the whole (extended) family is vested in the third generation, one of whom is now in her 3<sup>rd</sup> year of becoming a nurse. The father of this daughter - who sells sticky rice for breakfast, has to earn enough (2000 US dollars) to pay for his daughter’s tuition/year for four years.

Poverty manifests itself in every possible way in this community. It also represents a diversity of underlying problems, many of which are the legacies of the prolonged war on its own ground. It poses a real challenge to the government to develop one good-for-all policy given the situation, especially given the limited resources of a county that had just walked out of such a war.

#### 4.4 Poverty as suffering during COVID-19

As the fourth wave of the COVID-19 pandemic took Ho Chi Minh City over by storm, Ma Lang was among the first areas to be placed under lockdown when one infection was found at the end of May. Together with Dong Tien, the whole neighborhood was “frozen” for almost four months with restricted mobility until the end of September - 47 (together with their family members) out of the 83 respondents were infected during this wave. The four months under restriction put people's lives in this neighborhood under extreme conditions in particular. They could not move around. Money did not move around. They all relied heavily on external support to survive.

**Table 4.2:** Sources of support from different channels (Government, Donors, Relatives) in 2020 & 2021

Channels of Support	Government 2020	Government 2021	Donors 2020	Donors 2021	Relatives 2020	Relatives 2021
Yes	37	44	37	46	26	22
No	13	6	11	3	21	18
N/A	0	0	1	1	3	20

Source: Author.

The respondents received more help from government channels (37, 44)<sup>40</sup> and from donors (37, 46) than from their relatives (family members and close ones) (26, 22) in both 2020 and 2021 (Table 4.2). For the year 2021 (when Ho Chi Minh was hit hard by the COVID and the lockdown restriction remained in force for four months), nearly all of them claimed to have received more

<sup>40</sup> They did not mention specifically the amount of money they received from different support packages (mainly money) from the government, but many stated “rice, noodles and money” in their answers. There is a high chance that they lumped together all the support from different channels because they could not make a distinction between these channels of help from their memory. However, “Money” only appears in their answers to the “government channel” (29 times) but none in their responses to the channels of donors and relatives, which include only food items, “yes but not often,” or simple “yes.”

help from the government and donors (44, 46 respective), than from relatives (22, compared to 26 in the previous year).

**Table 4.3: Experiences of Difficult Situations**

<b>Difficult Situations</b>	<b>No food</b>	<b>No job</b>	<b>No money</b>
	30	36	34
Solution	Mainly during the COVID-19	32 lost jobs during COVID-19. 2 had been unemployed for “a long time.”	24 experienced this during COVID-19. 1 “always” experiences this.
Receiving help from Relatives	8	5	3
Receiving help from Neighbors/Acquaintances	0	0	1
Receiving help from Donors	18	11	0
No-one helped	11	5	8

*Source:* Author.

Contingencies can be either expected or unexpected disruptions that they may be faced with. The questionnaire lists four situations: health problems, no food, no job, and no money. For the situation in which they have some health problems, the majority provided similar answers, regardless of any age differences and health conditions. They go to a nearby drug store to get medicine for mild health problems. They rely mainly on self-medication or over-the-counter prescription by pharmacists where health insurance is not applicable. They resort to hospitals only for more serious cases. Four mentioned “reliance on relatives and family members” in addition to the answers above. Out of the 50 respondents, 27 people have underlying conditions (mostly high blood pressure and other heart-related problems), 3 are in their 10s, 20s, and 30s, and the rest over 50s.

Thirty of the respondents claimed to have experienced a “no food” situation, mainly during the COVID “season.” Thirty-six experienced “no job;” 32 lost their job during “COVID”, and two claimed to have been unemployed for a “long time.” Thirty-four experienced “no money,” out of whom 24 experienced the lack of money during COVID, and one said “always.” Sixteen experienced all the above situations during the COVID pandemic period (no specific date mentioned but most likely 2021).

When people do not have jobs, they rely more on donors than their relatives (18 people and 11 people, respectively). Note, however, that when they said they relied on donors when they lost jobs, they likely did not mean that these donors helped them find new employment, but instead



gave them food and other necessities. When it comes to money, the assistance is more difficult. They only borrow or ask for money from relatives (3) and borrow money from neighbors (1).

One can easily spot the discrepancy between the data on the support channel (Table 4.2) and that on contingencies (Table 4.3). In the former, they claimed a lot of help from government, donors, and relatives throughout 2020 and 2021. Still, the outside assistance does not stand out as prominently when responding to specific situations. Responding to the questions concerning outside assistance, they might leave the overall impression that they received much help from different sources. Still, the help was not enough, with 50 answers stating “yes, but not often.” When asked about specific situations, the five months under lockdown<sup>41</sup> was the specific anchor for them to recall harrowing experiences of what these difficulties actually meant to them. T.T.N (F, 55) described this period as “*the months when we were all locked up.*” Help from the outside was a lot but “not often” and therefore “not enough.” Many of them felt as if they were on their own in these situations, especially when they ran out of money, with 24 of them bitterly stating, “no one helps.”

#### 4.5 Poverty of an emerging country

Among the three indicators that usually contribute significantly to multidimensional poverty in the urban area (GSO n.d-a), the health insurance indicator does not stand out in Ma Lang- Dong Tien. 59 (71%) out of the 83 people said they have health insurance (Table 4.5).

**Table 4.5:** Health Insurance

	<b>Health Insurance</b>
Yes	59
No	22
N/a	2

Source: Author.

However, a closer look at their answers to the question “*When did you purchase health insurance?*” sheds new light on this situation. Having health insurance is not a consistent behavior among these people. Thirty-five respondents said they have had health insurance “*within the recent few years,*” and only six said they had that “*from more than ten years ago.*” Income is the

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<sup>41</sup> The restriction ended at the end of September 2021 - a month before the they participated in the questionnaire survey.

dominant factor influencing their decision to enroll (and not to enroll) in the national health insurance scheme:

We three members in the family all have had it for the consecutive three years. Before that, we didn't have money (T. T. N, F, 55, a housewife)

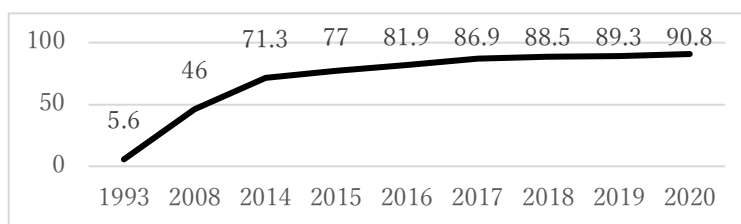
Our household was recognized as "near-poor" therefore we are qualified for a cheap plan, just about 205,000 vnd/person/year" (T.T.V, F, 64, food seller) (usually people pay 800,000 VND/person/year)

For the same reason, P.V.V (M, 49) quit because he didn't have enough money:

I had it for a while, but then I didn't have money, so I stopped. Sometimes I want to buy it again, but my income is too limited to afford it. You know, it [health insurance] is like a *lucky charm* (italicized by the author). You are right. What if something happens? I will not know what to do.

When asked the questions "*what do you do when you are sick,*" and "*when you are really sick?*" most of them answered that they go to an over-the-counter medicine in a nearby drug store (where health insurance is not applicable) for the former question, and only go to hospitals (and use health insurance, if any) when they get "really sick." H.T.B.T (F, 50) said, "*My husband has had it for ten years, mainly using it when really sick.*" Health Insurance, to these people and many Vietnamese, is thus not for their everyday life use but only for major health contingencies (such as severe health conditions or when they reach a high-risk stage- old age). Therefore, the decision (to enroll in a health insurance policy) is also subjective to individual perception of their health vulnerability. Many decided to quit health insurance, thinking that they don't easily get sick: "*I used to have one, but I didn't get sick, so I stopped*" (H.L, M, 67). For that reason, it is most likely that people like B.T.N.T (F, 49), who said, "*we (family members) all have had it since 2016, but never got to use it,*" will follow suit sooner or later. The 71% of respondents having health insurance is a high rate given that most of these people are informal laborers, which means purchasing health insurance is not compulsory under Vietnamese Law. Joining health insurance through a voluntary scheme is their own decision to make.

Thirty years after Vietnam introduced the national health insurance system in 1993, the country has made remarkable progress in terms of the enrolment rate. From 5.6 percent in 1993 to almost 90.85% (87,96 million people) (MOH 2021) by the end of 2020. "Vietnam basically has fulfilled the goal of universalization of health insurance coverage ahead of time [...] Compared to other countries, in order to reach a similar goal, it would take from 40-80 years, while it took Vietnam only 17 years," as assessed by Dr. Bui Sy Loi (2021) – Vice-Chairperson of National Assembly Committee on Social Affairs in his article published in Finance Magazine.

**Graph 4.1: Enrolment Rate in national health insurance from 1993-2020 (%)**<sup>42</sup>

It can be seen from Figure 4.1 that there is a steady increase in the number of enrollees, including those who enroll in the voluntary scheme. However, there is a misleading assumption here: people stay on with the plan once they decide to enroll. What happens in Ma Lang-Dong Tien reveals what the graph does not show: people move in and out of the health insurance plan constantly. For the poor, buying health insurance is not a one-time decision for long-term consumption but a decision highly contingent on their actual income. The “freedom” to move in and out of health insurance plans, resulting in their inconsistent behavior regarding the decision to purchase health insurance, is also the “freedom” that close to 20 million workers in Vietnam have.

Regarding the nature of the Vietnamese economy, in Quarter IV, 2021, informal workers accounted for 55.1% (19.4 million) of the laborers who had jobs, an increase of 1.3 million compared to Quarter III of the same year (GSO n.d-b). The rate in urban areas is 47.8% (GSO n.d-b). According to a study by Fulbright University in 2018, this informal sector contributed 25-30% of GDP (cited in TCTC 2019). The total number of informal workers in Ho Chi Minh is about 2 million, accounting for half the entire working force in the City and 11.6% of the country's total number of informal sector workers (GSO 2016).

The nature of informal sector employment, as defined by the ILO, is "all remunerative work (be it self-employment or wage employment) that is not registered [or] regulated." Therefore, none is "protected by existing legal or regulatory frameworks" and people "do not have secure employment contracts, workers' benefits, social protection, or representation" (ILO n.d.). Informal laborers (*lao động phi chính thức*) are more frequently rotated with “free” laborers (*lao động tự do*), even in official documents. *Free* here means being free from legal constraints like contracts in their employment. “Free” here has another implication: they do not fall under any “compulsory” national schemes like national health insurance or social insurance, although there are many programs in the local communities to encourage their participation, such as reduced costs for family health insurance or subsidized health insurance for the poor and near-poor groups. The “freedom” they appear to have regarding health insurance or social insurance program is not

<sup>42</sup> Reproduced from Bui 2021.

an exercise of their entitlement. The reality is that the Vietnamese government is not ready, institutionally, to embrace these residents in their safety net.

During the fourth wave, Ho Chi Minh City was very generous with its aid packages to include “free laborers.” But the good intention encountered a barrier: how to capture the actual number of “free” laborers in the City in the three rounds of aid packages (See Section 1.3). The estimated number of informal workers in need of support kept increasing, so the City finally decided to offer a payment of 1 million VND/person to just about everyone (7.5 million people in total) to make sure that they would not leave anyone behind. Despite the generous packages from the city, it is obvious that the distribution of the goods to the proper targets - the informal laborers - was not an easy task when most of them and their activities are not “registered, regulated or protected by existing legal or regulatory frameworks” in normal times.

#### **4.6 Implications**

For rich people, it is about choosing what is better and what is the best among the better. For the poor, backing out, quitting, and not doing anything is a choice, a very likely one, even when it comes to basic needs like health and, for that matter, health insurance. Health is important, many are aware of that, but they struggle with the question: Do I need health insurance? And health is not the only illustration of the predicament of “freedom” that these informal laborers experience. Education is another area where they also have to struggle with the question: “Do I need it?” “Should I quit?” All of the children of T.T.V (F, 64) dropped out when they were in the 4<sup>th</sup> or 5<sup>th</sup> grade. *“The hardship was insurmountable. We didn’t have enough to feed them, let alone pay for their education.”* H.T.E (F, 66) went through the same experience: *“I was head over heels trying to earn money. I couldn’t do much of anything else for them but feed them (children). The first son dropped out at 11<sup>th</sup> grade, the second at 9<sup>th</sup> grade, and the third at 7<sup>th</sup> grade.”* Thus, while engaging in healthcare plans and education may be an obvious course of action for many, the poor may consider these an investment only when they desire and can pay for something better than the basic policy. For these poor, any spending is an investment as the opportunity cost is high. If they were to choose one area for investment, they would have to let go of many other basic needs in their everyday lives.

The third generation is the only hope for this community to escape poverty. They place a “colossal” investment (compared with their meager income) on the third generation’s education, hoping, or maybe praying, for a worth-the-while expected return for the whole (extended) family. Mrs. T.T.V is more transparent in her expectation: “I helped support my granddaughter’s education fee. She is now studying in Taiwan. Maybe in 5 years, she can take care of us.” Since so much investment is made, so much hope vested, the question remains if these grandchildren

have “dropping-out” or “quitting” as a choice of their own as their parents - the second generation in the community - did.

## 5. CONCLUSION AND RECOMMENDATIONS

Receiving gifts from donors is just about the only fun. When somebody calls me out to give gifts, I would be always ready on my feet, even if I am sleeping [...]. I am not ashamed about that. I am just glad that people helped. It has been this way for so long that shame is unnecessary (N.T.M, F, 77).

We would all have been in trouble if it had not been for you (Thien) and Mr. H. (the head of the neighborhood) Really [...] No rice, no food. (Mrs. H, F, 64).

Our neighborhood has been a great help. We got help from one another. That really helps. Otherwise, we would have died of hunger. We got rice, eggs, fish sauce, everything. Literally everything (T.T.N, F, 55).

Relying on outside help (e.g., charity donors) has been routinized in the everyday life of many. Thien, and other local volunteers, have played a key role in supporting the poor in this community before and during COVID-19. Thien launches a small-scale call for donations now and then among his friends and people connected to him via Facebook. He and his family created a list of people who need help and distribute necessities, including cash to these families - the “minimum subsistence” in case of contingencies - the idea of the basic needs approach. Money lending business serves as an advantage for this work: his family has a good grasp of the conditions of just about everyone in both Ma Lang and Dong Tien. Thien says he wants his charity activity to be focused exclusively on this community, for one thing, because he knows the community well. For another, he does not wish his activity to be just a one-time thing.

Donation to charity is one new characteristic of emerging economies, as pointed out by Master card company “emerging Markets More Likely to Donate to Charity, While Developed Countries Give Bigger Amounts” (Tan 2015). In 2017, Vietnam was the most generous market in the Asia-Pacific region, with 78.5 percent of consumers giving to charities, followed by Thailand (66.3%) and Hong Kong (60.2%) ( ). Relying on charity donations from the “*new money*” groups to address some aspects of urban poverty at the grassroots level should be considered a possible option for two reasons: the ease with which to mobilize them and the ability to respond to the case-by-case needs. This option also helps reduce the burden on the Vietnamese government. In its response to the crisis and the challenges that came with it, Vietnam exhibits characteristics of many types: a developing economy (i.e., a heavy reliance on the informal sector), a socialist country (committed to expanding its social safety net to cover the disadvantaged as much as possible),<sup>43</sup> and a country that still burdens itself with post-war obligations such as the responsibility of taking

<sup>43</sup> The government covered and subsidized partly the cost of health insurance for more than half the total population (34.2 million people that belong to groups of “national devotees,” children under 6, the elderly over 80, and the 17.1 million people that belong to groups such as students and farmers.) (Pham 2019).

care of millions of "national devotees" (the contributors to the nation's unification).<sup>44</sup> Vietnam has been thorough in expanding its safety net and welfare policies, e.g., assisting the poor to access health insurance or social insurance (which includes health insurance). The problem is that such protection (against contingencies in life) like health insurance and social insurance face many obstacles to functioning its role. For one thing, a significant portion of the population working in informal sectors makes it difficult for the government to bring them under any formal protection. And for the other, the harsh competition from private sectors (private medical services, over-the-counter pharmacies, private insurance companies) makes "public" services less attractive.

To make the best use of the "generosity" of the "new money" groups, a local network of volunteers, like Thien who has a good grasp of the conditions of the local people, including those who fall out of the statistical grasp by the government, is needed. One consideration to be added to the charity-based activity is that the provision of *minimum protection* (for future contingencies, e.g., health insurance or old-age security) is just as necessary as that of *minimum subsistence* in case of contingency. While doing the survey, Thien himself was surprised to notice that so many people did not have health insurance. Thus, to call attention to "*minimum protection*" (for future contingencies) for the poor is to become aware of the need to reduce their burden of decision-making. Or else, the urgency and immediacy of their daily needs alone readily consume their resources. People's ability to survive any contingency is undeniable. Still, such a jump-only-when-the-water-reaches-threshold way of living will likely plunge them deeper into the vicious circle of poverty and debts.

*And the poorer you are, the more you have to be responsible for everything about your life [...]. For most poor, if THEY do nothing, THEY are on the wrong track.*<sup>45</sup>

However, when decisions, big and small, are all left to them, the limited income will likely jeopardize the poor's rationality in some areas. Being poor is not the consequence of their living and their choices in life, but that of many external factors described earlier. Being poor is the manifestation of who is supporting the fast-growing economy. Thus, lifting them out of poverty is a challenging task for themselves and the entire society. Minimum protection against contingencies is an urgent need on the must-do list. Otherwise, the cost, in the long run, will be on the government, as already evidenced. In 2014, for example the government spent 3,000 billion to cover the monthly subsidy for 1.5 million people over 80s who do not have a pension (Hong & Le 2021), and to date it still is burdened with the payment of health insurance for more than half its population.

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<sup>44</sup> Vietnam has identified and recognized nine million Vietnamese as national devotees - contributors to Vietnam's independence and unification since the summer of 1945; the dead and the surviving family members are included. Of these, 1.4 million are current recipients of Merit payments (Kidd et al. 2016).

<sup>45</sup> Esther Duflo (2011, cited in Sunstein 2015).

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## Abstract (in Japanese)

### 要約

都市の貧困は、発展途上地域の社会にとって深刻な政策課題である。都市貧困層は経済成長への圧力の結果であると同時に、この成長を下支えする原動力の一つでもあるからだ。注目すべきなのは貧困層が日常生活で経験する問題が多様を極め一様ではないことである。このため、政府によるエンパワーメントを意図した政策は望ましい効果を生み出していない。本論ではホーチミン市マ・ラン＝ドン・ティエン地区の調査を通して、医療や教育などの分野で最小限のサービスを保障することが、都市貧困層の限られた資源への負担を軽くすることを明らかにしている。この負担軽減によって、限られた手持ちの資源を都市貧困層は有効に活用し、有益かつ適切な選択の自由を行使できるのである。また、貧困層にとって特に過大な負担を生む不測の事態への対応として、迅速な対応ができる地元根ざしたボランティア・ネットワークの構築が不可欠であることも指摘している。

**キーワード：**都市の貧困、ベトナム、選択肢、エンパワーメント、負担軽減

**JELコード：**コード1、コード2、コード3